

THE
MIND AT MISCHIEF

*Tricks and Deceptions of the Subconscious
and How to Cope with Them*

BY WILLIAM S. SADLER, M.D., F.A.C.S.

Formerly Professor at the Post-Graduate Medical School of Chicago; Senior Attending Surgeon to Columbus Hospital; Director of the Chicago Institute of Research and Diagnosis; Fellow of the American College of Surgeons; Fellow of the American Medical Association; Member of the Chicago Medical Society, the Illinois State Medical Society, the American Public Health Association, etc.

INTRODUCTIONS BY

ROBERT H. GAULT, Ph.D.,

Professor of Psychology, Northwestern University

AND

MEYER SOLOMON, M.D.,

Associate in Neurology, Northwestern University Medical School

FUNK & WAGNALS COMPANY

NEW YORK AND LONDON

1929

COPYRIGHT, 1929, BY
FUNK & WAGNALLS COMPANY

[Printed in the United States of America]
First published—September, 1929
Second Printing, October, 1929

Copyright Under the Articles of the Copyright Convention
of the Pan-American Republics and the
United States, August 11, 1910.

OTHER BOOKS BY DR. SADLER

THE ESSENTIALS OF HEALTHFUL LIVING
THE PHYSIOLOGY OF FAITH AND FEAR
WORRY AND NERVOUSNESS
THE TRUTH ABOUT MIND CURE
AMERICANITIS: BLOOD PRESSURE AND NERVES
CONSTIPATION—HOW TO CURE YOURSELF
HOW TO REDUCE AND HOW TO GAIN
THE MOTHER AND HER CHILD
HOW TO FEED THE BABY
THE CAUSE AND CURE OF COLDS
THE TRUTH ABOUT HEREDITY
THE ELEMENTS OF PEP
PERSONALITY AND HEALTH
HOW YOU CAN KEEP HAPPY

CONTENTS

CHAPTER

	AUTHOR'S PREFACE
	THE PSYCHOLOGIST'S INTRODUCTION
	THE NEUROLOGIST'S INTRODUCTION
I.	WHAT IS THE SUBCONSCIOUS?
II.	THE PSYCHOLOGY OF COMPLEX FORMULATION
III.	THE PSYCHOLOGY OF SELF-DECEPTION
IV.	CONTROL OF THE SUBCONSCIOUS
V.	HUMAN EMOTIONS, INSTINCTS, AND SENTIMENTS
VI.	EMOTIONAL REPRESSION AND RATIONALIZATION
VII.	EMOTIONAL CONFLICTS
VIII.	UNSATISFIED WISHES AND SUBLIMATION
IX.	THE FEAR COMPLEXES
X.	WORRIES, DREADS, OBSESSIONS, AND ANXIETIES
XI.	FASTIDIOUS SUFFERING—PSYCHIC PAIN
XII.	THE INFERIORITY COMPLEX
XIII.	THE CONSCIENCE COMPLEX
XIV.	THE FEELING OF INADEQUACY
XV.	NEURASTHENIA AND PSYCHASTHENIA
XVI.	THE REALITY FEELING—TRANSFERENCE AND PROJECTION
XVII.	DISSOCIATION AND MULTIPLE PERSONALITY
XVIII.	AUTOMATIC WRITING
XIX.	TELEPATHY—MIND READING
XX.	HYPNOTISM
XXI.	THE ORIGIN AND NATURE OF DREAMS
XXII.	HYSTERIA
XXIII.	JUGGLING WITH CONSCIOUSNESS
XXIV.	SIMPLE PARANOIA
XXV.	SPIRITUALISTIC MEDIUMS
XXVI.	THE SPIRIT OF THE SUBCONSCIOUS
XXVII.	COMPLEX HUNTING
	APPENDIX

PREFACE

VERY few of those individuals who suffer from “nerves,” “emotional conflicts,” and other “abnormal complexes,” understand to what extent they are subjects of deception and malicious intrigue on the part of their own minds. A number of excellent books have been written about fear, worry, and the more common phases of the functional nervous disorders, and these books have been helpful to the layman in his effort to understand himself psychologically. We have abundant literature also on the psychoses or the insanities, intended for the professional reader; but practically nothing has been written on those cases of abnormal psychology which occupy a middle ground between these two groups.

It is my intention, in this work, to discuss abnormal psychology of the more benign sorts, “the tricks of the subconscious mind.” I hope thus to assist the layman in understanding these matters more fully, and I trust that the book will prove to be helpful to many men and women who are struggling with intellectual vagaries, contending with one sort or another of “complex” which is causing them serious trouble.

I have long felt the need, in my own practise, of some book which I could place in the hands of a patient—or of his friends—to aid him in his effort to reconstruct his intellectual life and bring his mental workings into more normal channels. And so this volume will deal with the problems of more or less abnormal psychology, paying particular attention to such phenomena as they are exhibited in neurotics, complex victims, hysterics, paranoiacs, and even so-called spirit mediums.

I have been afforded an opportunity, in association with my colleagues in the Chicago Institute of Research and Diagnosis, to observe, over a period of twenty years, a large number of men and women who were sufferers from various personality disturbances—chronic fear, inferiority and other complexes, hysteria, dissociation—as well as a large number of clairvoyants, psychics, automatic writers, trance mediums, etc. It is my purpose to draw upon this experience and to relate the methods employed by modern psychotherapy in dealing with this group of psychic abnormalities.

In my own mind I have long divided psychic sufferers into three groups: victims of the neuroses, of the psychoses, and of personality disturbances. The neuroses embrace common, every-day worry, various forms of fear, phobias, and obsessions, together with brain-fag, so-called neurasthenia, psychasthenia, and hypochondria. The psychoses embrace the insanities—those mental disturbances of sufficient gravity to unbalance the mind. Under the head of personality disturbances I have thought it best to include those psychic disturbances which, tho more profound and more serious than the neuroses, are not of sufficient gravity to be classed as psychoses; and under this head I group mild forms of dissociation, hysteria, and the more persistent types of mental troubles due to what we may call “tricks of the subconscious.” Into this last group fall many of our so-called psychics and spirit mediums.

I am indebted to numerous American and foreign authors who have done so much in recent years to enrich the literature dealing with this borderland of abnormal psychology. I

must also acknowledge my obligation to Robert H. Gault, Ph.D., Professor of Psychology, Northwestern University, for his painstaking criticism of this manuscript, and express my appreciation of Dr. Gault's great kindness in writing his Introduction. I am greatly indebted to my colleague, Dr. Meyer Solomon, Associate in Neurology, Northwestern University Medical School, for his careful reading of the manuscript and for his many helpful suggestions, which have added to the repleteness of this volume; also for his kindness in preparing a valuable Introduction embodying the neurologist's view of this discussion.

WILLIAM S. SADLER

*533 Diversey Parkway, Chicago,
August, 1929*

THE PSYCHOLOGIST'S INTRODUCTION

WE ARE hearing of the "defense reaction" to-day in many connections. Our interest in sports and our following after the games, we are told, is a defense against the tedium of the routine that fills our lives. Our seeking after intoxication is a reaction of defense against the sordid conditions in which we live and work, or against the humdrum of a daily life that contains no element of romance. In intoxication and in sport are escapes from the real and hateful into a world of fascinating imagery and stimulating romantic struggle. In religion is our defense against the sense of insecurity and of transitoriness that we associate with worldly affairs. The bombast of the bully, his "feeling big," is his defense reaction opposed to a sense of inferiority which he cannot tolerate and which he therefore seeks to crush. As one runs through the literature of the psychiatrist and the psychoanalyst of the day, one gains the impression that much of our behavior and almost every emotional reaction that one experiences is a defense; not a defense, to be sure, that one makes deliberately and with foresight, but automatically, one might say, as an indoor plant by the window bends toward the light, away from the dark.

We need not be surprised, therefore, when we discover that the inner urge that drives tens of thousands in the spirit of curiosity, of earnest belief, or of longing, to the private séance where materializations are assumed to be seen and felt, to the auditorium and to the book markets where volumes on the occult are on sale; we need not be surprised, I say, if this inner urge is interpreted as a reaction of defense. But a defense against what in this instance? We are told that the conventional religion of the day is sterilized by dogma; that theology and formalism have brought it to a sorry pass; that it no longer stimulates faith in a life beyond the grave, and that it awakens no anticipatory imagery of continuing constructive activity on our part or of resting in Elysian fields—all this, now and again, from the mouth of the destructive critic. But human nature cries out for continuity beyond the veil. There is that in us that will not tolerate an abrupt closing of accounts, at the moment of death, with all that we have learned to cherish. Precisely, then, as the ditch-digger and the salesman at the ribbon-counter, as a measure of defense, must get away from their real but unromantic existence by intoxication or in sport, so each one of the masses who follows the occult is rebellious against the termination of existence for his friends and against his own impending *finale*. Many of them no longer find sufficient defense in the current religion and religious practises, and they turn their faces, therefore, toward materializations so-called, that seem to promise them immediate demonstration of the reality of a continuous existence.

We are never critical of our defenses—of defenses in the sense in which we use the term. We are not in the habit, for instance, of standing off to gaze narrowly upon our day-dreams and to inquire whether our castles in the air have a substantial foundation; how we can ride upon a charger in battle when we are a thousand miles from the army in the field. Whilst we are participating in sport, either as spectator or otherwise, we never stop for a cold weighing of the question whether we have really escaped from sordid affairs. We are satisfied with the

air-castle, with the charger, and with participation in the game, and that is the end of it. The follower of the occult likewise is satisfied. The “appearances” he accepts. To deny them is for the seeker to stand in the way of the great urge of his nature. It is, in fact, as much a denial of his nature as it would be for the plant by the window, by taking thought of itself, to attempt a perpendicular growth. We are dealing here, only in other terms, with the “will to believe,” the great urge of human nature to accept rather than to reject.

While we are thinking of this phenomenon—the running after mediums and materializations—and describing it as a defense reaction, let me suggest that it is determined in some measure by the times and circumstances. The girl wearied by hours of working button-holes would not find defense in a day-dream in which she entertains herself with imagery of touring the country roads in a high-powered car if the automobile were yet to be invented, or if touring were not a very highly favored form of recreation. Likewise there is a spirit of the age that helps on a reaction of defense that consists in a following after so-called spiritistic phenomena. A materialistic spirit abroad is making its contribution.

The author of this book has done a real service to science and to the general public by means of his searching investigations into the nature and operations of neurotics, hysterics, and psychics, and no less by publishing his results and interpretations in untechnical form. In the practise of his profession he has come into intimate personal contact with a large and interesting group of men and women who exhibit some phase or another of abnormal psychology. To these contacts he has brought a clear vision for details, and has recorded in this book his conclusions respecting the nature and technique of these numerous psychic phenomena.

The psychiatrists of our day are showing us that in the background of our personalities are wells of latent memories that may account, literally by the wholesale, for the phenomena of dreams, automatic writings, “spirit communications,” and many of the phenomena connected with hysteria, dissociation, and other abnormal psychic states.

The remarkable sensitivity of unusual individuals must bear a relation to many of the cases we have in mind. The report of Hansen and Lehmann upon a case of alleged thought-transference or telepathy has tremendous significance. The two subjects of their investigations had bewildered the English public with “demonstrations” of telepathic communication. In the experimental situation they were blindfolded and stationed one at each end of a long hallway. One of them was able to report correctly in a large proportion of instances what was in the other’s thought, and this was being accepted as proof of the transfer of thought-waves from one to the other by unnatural—or supernatural—means. But when the investigators had erected a sound-reflector at one end of the hall so constructed that its focus was at the opposite end, and when the transmitter was placed before it, the other man at the opposite extremity of the hall was much more successful than he had ever been before in interpreting his companion’s thought. Only one hypothesis can explain this experience. The transmitter’s thought was registered without his knowledge in delicate vibrations of his vocal apparatus. These vibrations were transmitted to the air and through it to the supersensitive ear of the receiver. Unusual, indeed! But such sensitivity is not unknown, in certain hysterical types,

at any rate. Indeed, we are now learning that the capacities of normal persons to learn to make sensory discriminations of fine differences are beyond our dreams of the extraordinary. In experiments initiated and directed by the writer, normal individuals are learning to interpret human speech by means of the vibrations of another's vocal organs when they are conducted instrumentally to the learner's fingers. The deaf in his laboratory are learning to interpret speech by its feel, to correct their own vocal expression thereby, and by the same means to acquire the pleasures of a language-sense. Not only so, but we have unquestionable evidence from the war-maimed and others of the capacity of men to make extraordinary adaptations to situations that give pause to those of us who are in possession of the normal capacities of human kind.

Truly we are but at the threshold of our knowledge of the latent psychic powers of men.

ROBERT H. GAULT, Ph.D.

Professor of Psychology,

Northwestern University

Evanston, Illinois

THE NEUROLOGIST'S INTRODUCTION

THE problems with which Dr. Sadler is grappling in this book, "The Mind at Mischief," are unfortunately too often neglected. All too frequently, also, they are approached from a single-track and narrow-minded standpoint.

The large number of so-called functional nervous disorders and allied phenomena of abnormal psychology are in need of more wide-spread and popular discussion, with the avoidance of faddism and extremism. It is only thus that the field of neuro-psychiatry will come into its own. It is here that one sees constantly the inter-relations of medicine, especially in the field of nervous and mental disorders, with such universally important psychological phenomena as dreams and spiritualistic séances, on the one hand, and of emotional conflicts of one sort or another with the stresses and strains of daily life, on the other hand.

Most persons have been struggling blindly to adjust themselves to life, to understand and to learn how to manage life and themselves. Adjustments have often been made uncritically. As a result of this uncritical thinking, many false theories or explanations of the human make-up and reactions have been put forward. There is a crying need for education in health matters, not only in respect to physical hygiene, but also in the domain of mental hygiene, at least from the adolescent period onward, and most surely in adult life. The sooner such self-understanding and self-guidance comes to a developing individual, the better for him. It is to be regretted that, in spite of much book-knowledge, so many of us have not gained this essential insight into ourselves, our fellow men, and life as it is and as it is being lived. It is by an unprejudiced and scientific exposition of the meaning and nature of functional nervous disorders and other forms of maladjustment that we may be helped to such desirable self-knowledge.

To live is to fight. It is a fight to understand and manage and live harmoniously with other persons, other things, and ourselves. We are being driven on by certain impulsive urges. Obstacles to the fulfillment of our desires are constantly arising in our path, both within and without ourselves. We must learn how to play the game of life with efficiency and poise. Alas, much too frequently and too easily, for one reason or another, we are in danger of losing, or actually are losing our poise and equilibrium. When we have temporarily lost our poise—due to the blocking of our needs or wishes—with resulting mental conflict, emotional struggle, stress, strain, and tension, we battle for recovery of poise and inner harmony. In our ignorance, weakness, blindness, helplessness, or misfortune, driven on by urgent wishes, anxieties, and fears, panic-stricken, like a drowning man grasping for a straw, we seize upon harmful, false, or foolish ways out of our difficulties—methods that cause us to flee from reality and that do not really help us to solve our life's problems and meet them intelligently, squarely, and manfully. It is at such times that we are especially suggestible. It is then that we look for, in fact crave, help, guidance, and direction. Not infrequently at such times the blind are led by the blind, or, still worse, by the charlatan and quack. And so arise our

psychological and health cults, fads, and fancies. Thus the susceptible flock about the banners of superstition and myth.

It is to such that the message of common sense, which Dr. Sadler here gives, should be most welcome. What is more, it is because of the need of preventing such harmful psychological reactions that his book is particularly helpful.

The struggle of life really reduces itself to efforts in gaining more and more efficiency and poise in making adjustments and satisfying our fundamental yearnings. Dr. Sadler is here showing us inefficient, unhealthy ways of adjustment. They represent undue lack of poise and equilibrium in meeting "the slings and arrows of outrageous fortune." He has, perforce, been compelled to deal with human wishes and hungers, unhappiness and happiness, emotional conflicts and forms of mental dissociation. He has made a useful classification of our wishes by grouping the various human impulses under the following five headings:

- I. The life urge—the self-preservation instincts.
- II. The sex urge—the reproductive instincts.
- III. The worship urge—the religious emotions.
- IV. The power urge—the ego group of instincts.
- V. The social urge—the herd group of instincts.

From my own experience and thought upon this subject I can wholeheartedly agree that such an all-inclusive classification more nearly represents the facts than that given by most writers dealing with this phase of normal and abnormal psychology.

It so happens that Dr. Sadler is eminently well fitted to present the subject matter of this book. He is well grounded in the theoretical and practical aspects of medicine and surgery. Day in and day out he is meeting with the practical problems of nervous disorders of a functional nature (that is, of emotional origin). Fortunately, years ago he began to take a deep and active interest in these problems. Being a thorough student of whatever he undertakes, while at the same time of a practical bent, he has combed the best literature and practises in this field and has put them to the acid test of every-day clinical experience. He is, I am happy to say, a free lance. He belongs to no set school or dogma. Like the bee flitting from flower to flower, he has taken whatever of value he could find from the best students in abnormal psychology (Janet, Prince, Freud and his followers, McDougall, and others) and combined them, with additions of his own, into a very valuable presentation of the phenomena of the subconscious. At the same time, with the avoidance of mysticism, he has explained the situation in such a simple, direct, clear-cut and interesting manner, that anyone of average education can follow him from beginning to end. The training Dr. Sadler has had in writing his numerous previous books on this and related questions, has been of decided help in laying a strong foundation for this one.

We have, then, in this book, a popular, scientifically correct, sensible and practical exposition of the subconscious. "The Mind at Mischief" richly deserves a wide circulation.

Chicago, Illinois

MEYER SOLOMON, M.D.

*Associate in Neurology,
Northwestern University Medical School*

THE MIND AT MISCHIEF

I

WHAT IS THE SUBCONSCIOUS?

AFTER hearing about all the ways in which the subconscious mind is able to afflict the human species, one might be tempted to regard it as a thing separate and apart from the ordinary consciousness; and so it may be helpful, at the outset, to endeavor to make clear just what is meant by the use of the increasingly familiar term, “the subconscious.”

When we speak of “the subconscious” we are merely using a term that refers to our “other self.” It is a fact that we are all in a limited sense double personalities, even multiple personalities. It is also a fact that at any given moment, very little of our mental life and accumulated experience is in the eye of our immediate consciousness. The vast bulk of our psychic life is, for the time being, latent—it is in the subconscious realms.

How many times we are all but exasperated by our inability to recall some name or other detail of our past experience! We know it is safely stored in our memory, altho we are powerless at the moment to recall it, and then some time—and we have all had this experience—it flashes up in the mind as if presenting itself from some outside source, and we aptly remark that it has just “come back.” This very expression implies that the memory has been elsewhere during the time we so vainly sought its recall. Sometimes the association of an idea will quickly recall to our minds something that we had otherwise vainly sought to remember.

And so, while we are not really conscious of what is going on down in the depths of our subconscious mental life, we may, nevertheless, be highly conscious of emotions and find ourselves being led into actions as the result of the activities of the subconscious. It is this fact that renders it highly important for us to understand the relation of the subconscious to health and disease.

OUR DIFFERENT SELVES

Even before the days of the vogue of the “subconscious” and psychoanalysis, William James, the great American psychologist, in a chapter on “The Self” in his *Principles of Psychology*, described the various selves that the same individual may possess in different situations. He referred to a man’s home-self, his club-self, his business-self, etc.

More recent exploration of the human mind has disclosed that there is a vast region of mental life which, while it is a part of one’s self, is unknown to the consciousness of its possessor; that this submerged mental region, nevertheless, may become known to those who observe us with the trained eyes of experienced psychologists; and that such sympathetic

observers are, in turn, able so to instruct us about ourselves as to make us more intelligent concerning the true nature and the sum total of our real personality.

I know a man who seems to possess every charm of personality when on social duty, but who is anything but agreeable about his home. He can be very pleasant in public, but at home he is a chronic grouch. He has two selves—a home personality and a social personality—and I doubt not but that he may have a third self which is variously manifested in his business life.

It is commonly recognized that we have different personality presentations for home life and for company. We dress up, put on our best manner, and act quite differently—at least the majority of us do—when we have company, as compared with what we do when only the home folks are around.

I know a man who is “hard-boiled,” domineering and anything but pleasant in his business life; he is not much loved by his business associates. He is feared and dreaded by most of the people who have dealings with him; but I have observed this man in his home life under many and varying circumstances, and he is kindness, patience, and forbearance personified. He unfailingly shows a great affection and consideration for his family; and the entire family, including the servants, almost worship him.

This diversity of selves is also manifested in the matter of work and play. Most of us present an entirely different personality, as compared with our workaday selves, when we relax, throw off the harness, and go out to play. We are more natural and less artificial. We disport ourselves with more spontaneity and greater ease, with less of civilization’s restraint and inhibition, with less so-called dignity.

The average individual is in possession of, and constantly exhibits, from two or three up to four or five selves. Personality is certainly composite—it has many behavioristic facets which we may variously and at will turn to the gaze of the public or our immediate associates.

The subconscious mind, like the atomic theory, is a splendid and practical working concept, whether it really exists or not. One thing we are sure of—the thing which it stands for is an actual part of our mental life. While sensations can produce ideas, it must also be borne in mind that ideas can produce sensations. Neural patterns can be laid down in the human brain not only by stimuli coming in from outside, but also by what originates in the mind itself from association and interassociation of ideas—by a reorganization of old impressions and memories, both conscious and subconscious.

It is a well-known psychologic fact that as soon as percepts are formed in the lower levels of thinking, the mind forms symbols to represent these percepts. These symbols or images may stand for thoughts or for objects, and they are true to life and facts only in so far as our sensations and perceptions have been truly formed and correctly interpreted. Mental images may be correct or incorrect, as the emotions may be genuine, proportionate, and in harmony with the perceptions; or through fear, superstition, and other perversions of the powers of psychic association, they may become so exaggerated, distorted, and highly deceptive in their effect upon the mind of otherwise well-meaning and sincere souls—as is undoubtedly the case in certain types of clairvoyants and spiritualistic mediums—that these individuals become utterly self-deceived by the faulty working of their own intricate mental machinery. They may

actually think they see the things which they describe, but they see them through, and with, the eyes of their own distorted and deceived minds. The human mind is capable of almost unlimited deception, and is subject to innumerable errors and inaccuracies in the thinking process.

In a careful study of the various powers of human memory, we are brought face to face with many possibilities for the birth of false impressions, the creation of false feelings, and the calling up of fictitious images, and, in conjunction with imagination, the actual construction of deceptive ideas and the formation of unreal apparitions.

It is impossible to conceive of the possibilities of mind deception, extending from the mental delusions of fictitious physical disease to the consummate deceptions of spiritualistic phantasms, that would be made possible by a working conspiracy between imagination, fantasy, and memory, when all three of these powers are unstable from heredity, or irritated and diseased by a poisonous blood stream. Untold mischief, and almost unlimited torture, as well as unbelievable deception, can be imposed upon a neurotic person already suffering from a highly imaginative intellect which has been overworked on the one hand, and self-poisoned by ill health and a diseased blood stream on the other.

DEFINITIONS

Lest the mind of the reader be confused about the use of the terms subconscious, unconscious, co-conscious, etc., I would like to present the following summary and definitions of these terms as suggested by Dr. Morton Prince:

For practical reasons, as already stated, it is desirable to have a term which shall embrace all classes of facts, and of the two terms in common use—subconscious and unconscious—the former is preferable as it is not subject to a double meaning. I therefore use the term subconscious in a generic sense to include (a) co-conscious ideas or processes, (b) unconscious neurograms, and (c) unconscious processes. Of course it is only a matter of terminology. The conceptual facts may then be classified.

	The co-conscious	synonym: subconscious ideas
The subconscious		<i>a</i> : Conserved dormant neurograms or neural dispositions
	The unconscious	<i>b</i> : Active functioning neurograms or neural processes (synonym: unconscious processes)

THE DUAL NATURE OF MIND

In the mind, when the consciousness becomes diffused to a certain point, when the concentration of the mental powers becomes scattered to a certain degree, when we get so far out from the center of thinking that we fail properly to hold the various elements and factors of thought in the eye of the attention, or when we are merely acting from force of habit, we find that our actions arise largely from impulses originating in the unconscious areas of the mind. At such a time, one may be said to be acting in obedience to the voice of memory or instinct speaking through the subconscious or unconscious mind—the marginal consciousness, in contradistinction to the central consciousness.

It is a fact recognized by all physiologists and psychologists that the human mind presents phenomena of consciousness which can be explained only by the assumption of a dual mentality, or other analogous conditions. These two minds, so-called, are generally known by the terms “conscious mind” and “subconscious mind.” I regard it as exceedingly unfortunate that these terms ever came into general use. They carry the idea of the existence of two separate and distinct minds. Their use erroneously suggests even two separate brains or two distinct parts of one brain.

The mental procedure of “making up our mind” is merely the process of groping around through the marginal consciousness for the purpose of finding the diverse ideas which are subsequently brought into focus and association in the realm of the central consciousness. After the mind is thus “made up” the will is able to order action.

I believe a careful study of the facts and phenomena connected with consciousness will prove to the satisfaction of all that the term marginal consciousness is to be preferred to subconscious mind. We are able to recognize a single mind only, but we recognize a dual consciousness in this single mind. This dual consciousness is never separated by hard and fast lines. The condition of the health of the nervous system, the degree of mental concentration, and the acuteness of the physical senses, are all concerned in constantly moving back and forth the lines of demarcation between the central and the marginal consciousness.

Under certain conditions a mental process may be taking place in the marginal consciousness; under other circumstances this same process may occur in the central consciousness and the thinker be entirely conscious of his mental operations.

There can be little question of the fact that thoughts and ideas born in the central consciousness may pass outward in the mind during both waking and sleeping hours, later to find themselves lodged in the marginal consciousness, where they will be able to influence the life and health of the individual for weal or for woe.

It is this element of the consciousness that is so largely appealed to in suggestive therapeutics. An idea is suggested to the patient with a view to its passing outward through the central consciousness to find permanent lodgment in the marginal consciousness, from which place it is supposed to influence (unconsciously) the mental state of the patient or operations of the body.

By strongly concentrating the attention upon a single thought, the mental powers can be so perfectly focused as to bring the entire process of thinking almost within the central

area of consciousness; that is, the area of consciousness is greatly decreased. On the other hand, when the attention is focused upon a given thought and then is manipulated or misdirected, it is entirely possible so to control the channels of thought as practically to throw the whole mental process into the realm of marginal consciousness (the subconscious); and this is exactly the feat which is performed in the practise of hypnotism.

TECHNIQUE OF SUBCONSCIOUS PROCESSES

In the study of the subconscious, while its operation seems to be based on memory, we observe that it manifests a creative ability that includes all the powers of thought, fabrication, reasoning, volition, etc. The unconscious seems to be able to function logically and intelligently in its subconscious sphere. The elements of the unconscious realms, therefore, include all the ideas and emotions of our every-day experience, such as fears, doubts, affections, wishes, resentments, etc., and therefore all the factors are present for the building up of fictitious fears and false images, with which the patient can deceive himself and lay the foundation for the various neuroses.

In a word, we must recognize that the subconscious is intelligent; it is adaptable; it is able to reason, to indulge in constructive thinking, and to utilize the powers of a creative imagination; and further, that it is keen, cunning, and crafty, and is able to formulate and perpetrate systematic deceptions and sustained delusions upon the minds of neurotic sufferers as well as upon the minds of "mediums" who accept these experiences as supernatural and thus come to deceive the credulous beings who so unquestioningly receive these mediumistic teachings as either messages from the dead or as the voice of God.

From the study of hypnotized subjects and trance mediums we conclude that the subconscious mind would be able to pass a very satisfactory Binet-Simon test, and in many cases successfully to take a difficult civil service examination.

If a subconscious mind—a marginal consciousness, or whatever we may call it—holds its memory material in such an organized form as to manifest this high degree of intelligence, it should not be difficult for us to conceive of such a realm of the mind as being wholly capable of the creation and perpetration of the psychic frauds which characterize the vagaries of our present-day neurotics and spirit mediums.

The Biblical writer must have referred to the subconscious when he spoke so understandingly of the human mind, saying, "The heart is deceitful above all things and desperately wicked; who can know it?"

AN ILLUSTRATIVE CASE

An interesting experiment was made by Dr. Prince with a rather unusual subject, a woman, who, in her ordinary state of consciousness, was able so to manipulate the drift of her thoughts as to distinguish two strata in her mind or consciousness, which she called the upper and lower strata. She seemed to be able, without the use of hypnotism, to experience consciousness of those psychic elements which were in the direct focus of her attention and

those which were on the fringe or in the adjacent area of the marginal consciousness—the so-called subconscious. Commenting on her case the doctor says:

She can, however, bring this fringe within the field of attention, and then she becomes aware of, or rather, remembers its content during the preceding moment. To be able to do this is nothing out of the ordinary, but what is unusual is this: By a trick of abstraction which she has long practised she can bring the memory of the fringe or stratum into the full light of awareness, and then it is discovered that it has been exceedingly rich in thoughts, far richer than ordinary attention would show and a fringe is supposed to be. It is indeed a veritable co-consciousness, in which there goes on a secondary stream of thoughts often of an entirely different character and with different effects from those of the upper stratum. It is common for thoughts which she has resolutely put out of her mind as intolerable or unacceptable, or problems which have not been solved, to continue functioning in the lower stratum without entering awareness. She can, however, at any time become aware of them by the trick of abstraction referred to, and sometimes they emerge apparently spontaneously and suddenly replace the “upper stratum.”

THE REPOSITORY OF EXPERIENCE

Thus we come to recognize the unconscious as the final and ultimate repository of human experience. Here are to be found stenciled on the nerve-cells of the brain, the real and final record of our thoughts, feelings, and emotions, out of which must be created those new ideas which shall constitute and characterize our constantly unfolding panorama of associative thoughts, feelings, wishes, purposes, and emotions.

Further, we must recognize, if the flow of the content of the subconscious up to the mind is uncontrolled, or in some way becomes abnormal, that we may have a series of psychic disturbances ranging from the mild vagaries of neurasthenia up to the serious manifestations of hysteria, on the one hand; and from the subtle hallucinations of the spiritualistic medium and the clairvoyant, up to the insane delusions of the raving maniac, on the other hand.

The subconscious may become responsible for our spells of periodic depression, our temperamental moods, hysterical catalepsy, trance states, somnambulistic wanderings, as well as for the unique phenomena of secondary personality. And for any power of mind so versatile as this, it requires not a great stretch of imagination to understand how the subconscious may be the birthplace of the deceptive vagaries of the paranoiacs and even of spirit mediumship, since this unconscious realm is richly endowed with all the memory and experience material of one's entire past life.

THE UNCONSCIOUS WISH

If dreams represent an effort on the part of the subconscious during sleep to experience wish-fulfillment, to project its wishes out into the conscious mind by means of the symbolisms of the dream world, it may also be true that the mediumistic phenomena, in the form of visual and auditory hallucinations, spirit messages, and spirit forms, may be but a representation of

the same effort of the unconscious to gain expression—to eliminate its complexes—to experience wish-fulfillment.

When certain unstable types of human beings have long desired and intensely wished to communicate with the dead; when they have studied, thought, and prayed over this problem; when they have faithfully attended séances and have allowed the longings of their souls to be focused and concentrated on the desire to draw the veil aside and communicate with the spirits beyond—I say, after all this preliminary psychic preparation, it is little wonder that ultimately their day-dreams should begin to flow in the channel of wish-fulfillment, and that the overflowing content of the subconscious should push itself up and out toward the attainment and realization of those visions and experiences which would in some measure gratify this intense longing of the soul.

In this way the unconscious wish, through the mechanism of projection elsewhere described, gratifies itself by materializing those very qualities which constitute the basis of these subconscious longings. Under such circumstances this sort of an externalized wish could be easily mistaken for an external reality.

Psychoanalysis has shown us that an idea may be securely buried in the subconscious mind for two-score years, and then, by means of the psychoanalytic sounding-line, be brought up to the light of day—resurrected to memory. Nothing put on deposit in the unconscious is ever lost; it is all effectively conserved, and is capable of being recalled and utilized in the subsequent life of the individual.

THE PSYCHOLOGY OF COMPLEX FORMATION

HUMAN consciousness is supposed to be a unit. It is commonly regarded as being an undivided, more or less evenly moving, uniform stream of awareness. But it is hardly probable that this theoretic concept of consciousness is actually true. There must be more or less division from time to time, in what might be termed the attention consciousness, in most individuals. In other words, dissociation of a mild order and to a limited degree, is normally present in most of us. To illustrate: A well-trained musician sits down at a piano and runs through a piece of music which he knows by heart; he can execute the performance necessary to the rendition of the music quite accurately, and at the same time he will be able to carry on a very intricate train of thought, involving highly complex problems pertaining to his profession or business. Under such circumstances, it must be evident that the stream of consciousness is somewhat divided, flowing in two more or less unrelated directions.

Now, if we conceive such a division of the stream of consciousness being carried to the point where subsidiary or contributory streams are able to flow in more or less independent channels—channels which are not under the immediate supervision and control of the main stream of consciousness—then we have a condition which more nearly conforms with what is technically known in modern psychology as “dissociation.” Those persons who are troubled with “poor concentration” are in reality suffering from a mild form of dissociation.

THE STREAM OF CONSCIOUSNESS

Perhaps it will be well, in this connection, to take a good look at those elements, or qualities, which constitute the stream of consciousness. One author (Lay) has compiled the following scheme as descriptive of the content of normal consciousness:

		1. Sight	
		2. Hearing	
		3. Smell	
		4. Taste	
		5. Skin (Passive)	} Cutaneous
		6. Pressure (Active)	
	Senses	7. Heat	
		8. Cold	
		9. Tendinous	
		10. Articular	
		11. Muscular	
	Qualities	12. Hunger	
		13. Thirst	
		14. Sex	
		15. Dizziness	
		16. Nausea	
		17. Pleasure	
	Feelings	18. Pain	
		19. Feeling of Sameness	
		20. Feeling of Reality	
		21. Feeling of Will	
		22. Emotions	

Now, it is believed that some individuals possess such a power of dissociation, in connection with a peculiar and uncanny concentration of the attention, that at any one moment the whole stream of consciousness may be so directed and so successfully diverted that the “feeling of reality”—the sense of reality—may be so focused upon a single idea or desire as to shut every other sensory feeling or emotional experience out of the mind’s eye, or the awareness of consciousness. Thus the whole psychic machinery would be concentrated upon this single idea of the mind. In this way, psychologists believe, mediums sometimes come to materialize disembodied spirits in the eyes of their own minds, to become—mind, soul, and body—possessed with the reality of the thing which they think they see outside of their minds, but which, actually, lives and functions on the threshold of their own psychic life, having had its inception and birth within their own subconscious minds.

And, as will appear more fully later on, the victims of major hysteria and even of certain types of paranoia suffer from the same sort of subconscious legerdemain.

THE THEORY OF COMPLEX FORMATION

It is one of the fundamental laws of psychology that our sensations, feelings, ideas, movements, and visceral functions, of all kinds, when frequently repeated or when accompanied by any unusual emotion, become bound together—associated or grouped in such a way that the excitation of any one member of the group sets in action all the others. This binding together of ideas and emotions, actions and memories, is known in psychology as “complex formation.” It is dependent upon the ability of the mind to associate ideas and memories, and is one of the links in the chain which explains habit formation. “Good complexes” result in the formation of good habits of thought and action, while “bad complexes” result in bad habits of thinking and acting—worry, obsessions, or even fixed delusions.

In the normal man, the majority of these complex formations are healthful and useful. They involve memory both of mental processes and of muscular activity, and illustrations of them are found in those exceedingly intricate complexes involved in writing, piano-playing, and other delicate muscular movements involving an intimate association of ideas and physical processes.

Complex formation further explains the peculiar and sometimes rapidly changing moods which some persons exhibit. When the mind falls under the domination of a set of abnormal complexes, the disposition and temperament are so largely and suddenly modified as to amount almost to a change in personality. Indeed, these changing moods might very properly be looked upon as a mild form of multiple personality. This explains why some unstable neurotics are subject to such violent and sudden “mood swings.”

The physiological memory becomes bound up in these numerous memory complexes, as shown in the case of Pawlow’s dogs. It was necessary only to show the dogs sand, bread, or meat, and they began immediately to secrete a saliva which corresponded to the food or other substances seen. That is, the sight, the memory, of an article of food resulted in producing the

same quality of saliva that would be secreted if that food were actually in the mouth. This same memory association is shown in the common tendency of the bladder to empty itself when a person hears the sound of running water. This may also explain why the mere sight of a rose (even a wax rose) is sufficient to give some highly suggestible persons an attack of hay-fever.

Regarding the influence of “complexes” upon one’s beliefs and conduct, Hart says: “A complex may exert a pronounced effect upon consciousness, altho the individual himself may be unaware of its action—that is to say, he may be altogether ignorant of the causes which are really determining his own mental processes.” An example will help to make this statement intelligible. When a party politician is called upon to consider a new measure, his verdict is largely determined by certain constant systems of ideas and trends of thought, constituting what is generally known as “party bias.” We should describe these systems in our newly acquired terminology as his “political complex.” The complex causes him to take an attitude towards any proposed measure which is quite independent of any absolute merit that such measure may possess. If we argue with our politician, we shall find that the complex will reinforce in his mind those arguments which support the view of his party, while it will infallibly prevent him from realizing the force of the arguments propounded by the opposite side. Now, it should be observed that the individual himself is probably quite unaware of this mechanism as it works in his mind. He fondly imagines that his opinion is formed solely by the logical pros and cons of the proposition before him. We see, in fact, that not only is his thinking determined by a complex of whose action he is unconscious, but that he believes his thoughts to be the result of other causes which are in reality insufficient and illusory. This latter process of self-deception, in which the individual conceals the real foundation of his thought by a series of adventitious props, is termed “rationalization.”

ASSOCIATION OF IDEAS

It is probably to errors in the working of the mental machinery in the realm of the association of ideas that we must ascribe the origin of much of the autosuggestion, self-hypnotism, and other self-deception which many mediums and clairvoyants learn to perpetrate and practise upon themselves. Association of ideas is usually wholly unconscious to the individual, but in some cases it may be highly conscious. Association of ideas may be regarded as the psychic clearing house, as the great majority of all our concepts and mental images pass that way en route to the realms of higher thought activity.

What we call intuition, which is so largely possessed by these various sorts of psychics—in the majority of cases women—is simply the process of spontaneous association of ideas—unconscious association.

What unlimited possibilities must exist, for weal or for woe, in the confines of this little-known realm of idea-association! How many of the delusions of the spirit-world must be concocted in this mysterious center of the mind! How many of our psychic fantasms must have had their origin by the shuffling of the cards in this region of the mind, in the case of

those hereditarily unstable and neurotically predisposed individuals who form so large a part of the world of spiritualism!

Let the reader stop for one moment and consider the tremendous possibilities of thus getting wires crossed, messages tangled, thoughts twisted, images substituted; in fact, it might not be out of the way to imagine thought-wrecks and other psychic catastrophes as the result of misthrowing switches and misreading signals in this important and more or less mysterious realm of the mind.

Imagine the possibilities for mischief when a creation of the fantasy, in the imaginary cogitations of the student of the occult, finds its way up into the association centers of a poorly regulated and badly controlled brain, and there gets lost, sidetracked, or mis-dispatched in some way, so that it becomes hooked up with an otherwise normal group of ideas and memory images, and is then shoved out into the mind in this mongrel, hybrid shape. No wonder that human beings find themselves easy victims of self-deception, when so many things philosophic, theologic, and psychologic seemingly conspire to make their deception sure.

DETACHED COMPLEXES

The human mind is conceived as a very intricate organization or grouping of cells, a grouping which holds the patterns of memory and thought, and which undoubtedly conforms to certain laws after the fashion of physical systems and constellations. It is known that certain groups of mind-cells or systems, commonly called *complexes*, may be cut off, as it were, from active connection with the major mental powers, and may behave in an insubordinate manner, playing the role of psychic insurgent, as regards the mental life as a whole. These detached complexes are undoubtedly present in some forms of insanity, and they are able to assert themselves in such a fashion as to cause the demented individual to hear voices and in many other ways to disturb the mental equilibrium.

It is highly probable that in some cases of clairvoyants and mediums we have a mental condition that actually borders on insanity. These persons may be suffering from "complex detachment" in a mild degree, so that they are able from time to time to recognize voices and other impressions that come up from this sort of dissociation, complex detachment, or double personality; and they are, therefore, sincere when they represent to others that they have heard these voices of the mind from an outside source.

It has been suggested also that the two sides of the brain, only one of which we are supposed to utilize in our ordinary conduct, may be thrown out of coordination, or balance, in some way, so that one side might be imagined to speak to the other. There is much to be learned about the methods and mechanics of the two sides of the human brain. Why we should have two complete brains, anatomically, and in many ways utilize only one side in its functional working, is still more or less of a mystery. Some day we may learn that, in the case of these mediums and clairvoyants, we have an undue development in the latent side, which is able to throw impressions into the working side in such a manner as to impress the consciousness as a whole with the idea that it has received a message from an external or

supra-psychic source. At least it is well to bear in mind all these possibilities, before we rush headlong into the supernatural realms in quest of explanations for commonplace psychic phenomena.

PSYCHIC INSURRECTION

When we come to consider the nature and significance of complex formation, we discover the vast possibilities for malevolent mischief and sinister deception that exist in the deep confines of the human mind, as touching the problems of many phases of human experience; the possibility of complex insurrection—dislocation and derangement—looms large.

Without stretching our imagination to the point of conceiving the existence of double personality, it is easy to see how certain groups of complexes can become so formed, educated, and trained in the sophistries of a cultivated belief as to constitute a sufficiently influential background for the perpetration of subconscious frauds upon one's own higher consciousness. In the case of a certain type of psychic researcher it is possible to form a spiritualistic mood of mind, a "spook" habit of thought, and thus in time one's own intellect would come to be a victim of one's own "spook complexes." In the case of hysteria and paranoia the patient becomes the all but helpless victim of his established fear and systematized delusions.

There can be little doubt that some of the milder forms of insanity are due to this sort of psychic insurrection on the part of certain associated groups of complexes, and that the individual's irrational conduct is the result of a slow but sure surrender to the dictates of these associated rebel complexes.

I am fully convinced that many mediums and other spiritistic enthusiasts have so persistently and successfully built up their "ghost complexes"; that they have so effectively come to transfer the "reality feeling" to these "spook" creations of their own subconscious minds; that they have so ardently welded their emotions to these spirit concepts, that in time this group of complexes becomes so powerfully entrenched in the psychic life of such individuals as to be able to institute some sort of psychic insurrection, and thus more or less fully to dominate the conscious life, opinions, and behavior of their victims. And all this only illustrates how the same sort of psychic slavery is thrust, in lesser degrees, upon all the victims of the various psycho-neuroses, and more completely upon the victims of the psychoses.

Psychic insurrection, or automatism, is thus the explanation of how a group of mental habits may become so strong and individualized as to be able to control the behavior of mind and body, and thus completely to dominate a man and influence the formation of his character. When our mental habits become thus organized and employed they may be fittingly compared to a provincial rebellion in an empire. They represent certain groups of ideas which seek not only to free themselves from the sovereignty of the will, not only to be free and independent of all other mental processes, but ultimately to eliminate them, and so of themselves to exercise more or less complete control. Thus it is that our neurotic habits first lead us astray, then assert their independence of our control, and subsequently establish

a tyrannical mastery over both mind and body.

And so in the establishment of fixed habits of thought, and in the formation of deep-rooted beliefs and vivid ideas, we are unconsciously forming those complexes which in time, if not carefully controlled, may secede from the commonwealth of consciousness and establish themselves in the rôle of psychic rebels—become capable of more or less independent thought and uncontrolled habits of action.

DISSOCIATION OF IDEAS

It is entirely possible for a group or a number of groups of ideas to become so associated, established, and isolated, as to set themselves up in some corner of the mental domain as a new personality; that is, when the mental functions are not harmoniously and uniformly bound up and held together in the state of consciousness, or when, as a result of disease, the continuity of contact or the power of intercommunication is in some way interfered with or destroyed. We may then have exhibitions of that remarkable phenomenon, multiple personality; at least, this is one of the well-known explanations of the more common form of multiple personality.

It often happens that a man is called upon not only to experience the common warfare between the so-called carnal and spiritual natures, but he may also have within himself, apparently, two distinct personalities or minds—personalities which may be diametrically opposite to each other, and which may alternate in the control of his life. These conditions explain the difficulty some people have in controlling certain ideas or groups of ideas, which have taken fast hold of their minds.

Complete or partial dissociation of ideas coupled with irritation and undue activity of the sympathetic nervous system constitutes the explanation of hysteria; while common, every-day forgetfulness and absent-mindedness are illustrations of a mild and temporary phase of dissociation.

Some form of dissociation of ideas is present in most cases of marked neurasthenia, while such a condition is usually to be found even in mild hysteria. Certain ideas, emotions, and conclusions may become detached from the main stream of consciousness in the dream state. These dissociated complexes, either as minds different from the old, or as distortions of the old mind, may obtain such control as to produce what in the dream state would be called nightmares, but in the waking state, hysterical seizures or delusions. Such a psychic state might be described as a case of “subconscious nightmare,” or as a condition in which the patient may be said to be suffering from “fixed dreams.” This is probably the state of mind which prevails when certain nervous persons are said to have “brain storms.”

Dissociation is the explanation of those interesting and remarkable cases where long periods of time are literally blotted out of the mind—at least out of the conscious memory. In those cases where the patient is unable to remember anything that occurred in his experience for a certain period, it is known that the memories of those experiences are really retained, for they can be recovered in hypnosis; but as they are dissociated from the memory images which are a part of his every-day conscious life, they are apparently lost.

That the deformities and paralyses of hysteria are purely functional and due to dissociation is shown by the fact that we can both produce and remove these symptoms by suggestion. And right here is the secret of the successful treatment of such cases: they can be cured by building up new associations of ideas, new complexes, which will be able to overpower and eject these abnormal associations of ideas.

It should be remembered that in dealing with dissociation we are considering a perfectly normal process. Dissociation becomes harmful only when perverted or misused. Normal sleep is probably due to dissociation, resultant from the loosening of the physical contact between the processes of the nerve cells of the brain.

We are discussing a condition which is normal to the healthy mind. Automatism is simply a scheme of economy in expression, an association of thoughts and actions into groups ready for immediate action. Certain explosive phrases and appropriate gestures always accompany the indulgence of emotional states of mind; and when these same groups of associated ideas become more or less dissociated from the main stream of consciousness, they become capable of independent and mischievous action. The reassociation, the subjugation of these belligerent complexes or groups of ideas, is the aim of all modern methods of psychotherapy.

REPRESSED IDEAS

When ideas are not in our consciousness, when they have been successfully repressed and cannot be recalled, they are said, by the psychologist, to be slumbering in the unconscious, or the subconscious. At any rate, when our ideas are not in consciousness they must be somewhere, and no matter what the actual explanation may or may not be, we are but recognizing a practical fact when we definitely assign these repressed ideas to some place in the scheme of the human mind. This place, whatever it is, wherever it is, and however it is, we call the "subconscious."

A neurotic or hysteric individual may bury certain unwelcome ideas or unpleasant emotions in his subconscious, whence, as time passes, they may come forth again to plague him. So may the mediums and clairvoyants, as the years pass, bury things in their subconscious minds, whence these long-forgotten ideas and emotions may spring forth during the spirit séance to impersonate, through the process of "projection" and the technique of "transference," the mannerisms and voices of dead and departed human beings.

To the old proverb, "Where there's a will there's a way," the modern psychologist would add: "If the unconscious wish is directed to a certain object, a multitude of ideas about means of acquiring that object, or accomplishing the desired purpose, will spontaneously present themselves to consciousness."

The phenomenon of dissociation is also shown in the case of automatic writing. Automatic writers are, in the majority of cases, the subjects of major hysteria. In the typical case of this sort, you can engage the patient in conversation, thus quite definitely focusing his attention on the topic under discussion, and at the same time if you insert a pencil between the fingers of his right hand and allow a third person to whisper some question into

his ear, it will be possible in many cases to induce him to write out full, legible, and intelligent answers to the whispered question. Meanwhile, he has been talking with you in a normal and thoroughly rational manner. In most cases it will be found that this hysterical subject is quite unconscious that he has been writing.

With the spontaneous automatic writer, it has been found that in most cases he is but elaborating certain ideas which have been long buried in his mind. In brief, his automatic writings consist in a bringing forth of buried materials from the unconscious, as will be shown in connection with the more complete study of automatic writing in a subsequent chapter.

III

THE PSYCHOLOGY OF SELF-DECEPTION

IT is a fact that good-hearted people can honestly deceive themselves. There exists a definite mechanism which can be used by one part of our mind (the subconscious) to deceive and mislead the other half of our intelligence (the conscious mind). Let us now take a square look at this mechanism which so readily lends itself to the queer business of self-deception. In order to make clear this tendency of the subconscious to practise deception upon its lord and master, let us go back to the nursery and locate some of the early origins of dishonest thinking and insincere psychic behavior.

FACTS AND FANTASY

Much of the trouble that neurotics have with themselves, in trying to face the realities of life, is due to their having carried over into adult experience the tendencies of childhood to confuse *facts* and *fantasy*. When we are young, our developing ego tends to regard itself as the center of the world. Our personality during childhood is very real, and we come to confuse the outside world of reality with the imaginative creations of our own world of fantasy.

Parents tell fairy-stories to their children with the idea of developing the imagination. In the case of the average child, however, the imagination does not need developing; it needs to be educated, trained, curbed, and disciplined:—The child's early life is largely one of fantasy. He lives in the realms of his own imagination. Instead of being told fairy-stories he should be told about interesting and thought-provoking facts and people. Early in the nursery days "directive thinking" should be encouraged. As the child grows up, he cannot attain the fulfillment of his fairy-tale imaginings; he is destined to find that life is real, that the world is a workshop as well as a playhouse. I think the old-fashioned fairy-story is merely something which parents find easy and ready-at-hand to tell the children. It is too much trouble to make the facts of real life and the experiences of real people sufficiently interesting and attractive to these young minds so largely given to fantasy and so completely preoccupied with imagination.

Early in life children should be taught to control their thoughts and be instructed in the technique of mental concentration; and it is failure to do this in the nursery that causes much of our psychic trouble. It is the children from such nurseries who, later, when grown up, file in as so many neurotic wrecks to consult our nerve specialists, to haunt the offices of other medical practitioners, and to throng our various sanatoriums. Too early we are encouraged in the thought that we may possibly dodge the realities of life. Too early we indulge the fantasy that we may rub Aladdin's lamp and have fulfilled our every wish. Altogether too late do parents seek to turn the minds of their children into "directive thinking," controlled thinking.

During nursery days, if one cannot have a real pony he can compromise on a hobby-horse or get astride a broom-handle and indulge the imagination while the pony of fantasy prances over the meadow or climbs to mountain tops. But there comes a time when he has to bid farewell to such fantasies. If, when grown up, he would travel, this boy must get a real horse, an automobile, or perchance an airplane. He can no longer tour the world by sailing his little boats in the bathtub—with the aid of his imagination and the alluring pictures supplied by the tourist agencies. It will require real money and a real steamship.

The mind of the neurotic individual always tends to look at things in a childlike fashion, to cringe before reality and dodge responsibility as would an inexperienced youth. Our nervous sufferers dislike to face the realities of actual living. Instead of indulging in “directive thought” and intelligently meeting the difficulties of each day, they shrink from the slightest responsibility and resort for a solution of their troubles to the fantasies and imaginations of childhood. Controlled thinking is painful to these neurotics; it really hurts them to concentrate. They are filled with dismay and seized with panic when they feel they must actually confront and settle a problem. They would like to solve the problems of adult life and the real world by the methods of the nursery, by the fairy-story technique; they long for a glorified Aladdin’s lamp or an up-to-date version of the magic carpet. The physician who deals with these cases comes to see the harm of overdoing this fairy-story business of the early nursery days.

Day-dreams are all right; we are benefited by indulging in them now and then; but when a grown-up man makes a business of trying to weed the garden by means of fairy assistants, there is trouble ahead, and nothing but trouble. When the neurotic woman tries to solve her problems by merely *wishing*, she can expect nothing but sorrow and defeat.

Nervous children especially should be taught to face facts, to play the game, early to learn how to be good losers; and to this end, I think it is far better that children should be given useful toys, toys that would lead to “directive thinking.” How much more good a nervous boy could get out of a toy wheelbarrow in which he could wheel stones about the yard and move his sand-pile, than out of a toy engine, and merely imagining that he is riding about as a passenger or driving a locomotive over the country. I am not advocating, of course, that children should be given no toys that stimulate the imagination, but rather that they also be given toys to stimulate directive and constructive thinking.

It is in this connection that I would call attention to the folly of too long prolonging those stories about Santa Claus and the stork. Fables of this sort may become so entwined in the growing child’s mind that he will be tremendously upset in his mental life when these sentimental associations are torn asunder by subsequent disillusionment. He often feels that he has been deceived by those whom he trusted most, and the result is upsetting to the neurotic temperament. It is better early to build on fact and learn how to make the real world more attractive to the imaginative little folks; there is plenty that a child will never have to unlearn, that is both fascinating and satisfying to the imagination.

The one great delusion of the nervous sufferer is that somehow, in some way, someone is going to solve his problems for him. He is disinclined to accept the fact that he alone can

effect the cure. He steadily refuses to face the fact that his problems must be solved by real thinking and real acting, and that they cannot be solved by the fantasy-fairy technique of merely wishing and hoping.

FANTASY AND IMAGINATION

The imagination is, in reality, the creative power of the mind, and it is ever at work forming new experiences out of our old ones. It is the province of imagination to take our ideas and fashion them into ideals; that is, this is the higher work of the creative imagination. Still another function of this mental power is reproductive imagination, which is closely allied to memory.

Closely allied to imagination, but entirely distinct from it, is the power of fantasy. Fantasy must not be confused with fancy, however, for the two terms are by no means interchangeable. Fantasy represents what might be called the safety-valve of the mind. It is the playhouse of the soul. Our powers of fantasy ordinarily find expression in our day-reveries. Fantasy represents consciousness adrift. It is the state of mind one finds himself in while resting in the hammock on a beautiful summer afternoon, oblivious to all surroundings, wide awake, and yet letting the thoughts drift down the stream of the mind, without guidance, help, or hindrance.

There can be little doubt that certain human beings possess a tremendously large "bump" of fantasy. That is, they have the day-dreaming faculty developed to the point where it has well-nigh acquired the proportions of a separate personality. This must be the case with many neurotics, hysterics, clairvoyants, mediums, and other occult practitioners. They might be said to possess an automatic power of fantasy—one that acts quite independently of their ordinary mental processes—and one which forms its conclusions and formulates its statements quite without the conscious knowledge of the higher powers of such individuals' minds.

As we ascend higher in the realms of thought, we reach more and greater possibilities of mental confusion and mind deception. It is often quite impossible for a child of three years to discriminate between imagination and memory of reality. He will vividly describe his meetings with lions and other wild beasts in the back yard, and may relate these things as real experiences which have just happened. He is really recalling the pictures of lions from his story books, or reviving the memory-images of the beasts observed at the zoo; and many of our mediums and clairvoyants are so constituted of mind that their own subconscious plays the same subtle trick upon them. They see, hear, feel, perceive, and portray as facts, the figments of their own imagination. These experiences are the fantasies of a short-circuited memory acting under the impulse and inspiration of a misguided imagination.

In the case of certain hysterics and mediums, the mind has grown up in some respects, but in this particular feature they have remained juvenile, and we all know that the younger we are the more active, vivid, and uncontrolled is the imagination. And herein is a fruitful field, in the case of nervously unstable individuals, for the birth of imaginary diseases, the creation of false difficulties, and the confounding of the mind by the sophistries of occultism.

When the fantasy unduly influences the mind, it is not difficult to conceive of mental perversions in which the psychic self drifts aimlessly over an imaginary sea beset with unreal dangers, harassed by fantastic spirits, threatened with false reefs, storm-tossed, battered and beaten by imaginary winds, living in momentary danger of shipwreck and eternal doom—all of which is either wholly or in part mere fantasy. What is to hinder an overdeveloped fantasy from setting in operation fictitious feelings and impressions, and, by its well-known powers of reconstruction, creating spiritistic forms, unreal apparitions, and the fantastic concepts of the spirit world? The creative power of human imagination is not always exercised in developing labor-saving machinery and improved conditions of living. It is often engaged in producing mischief in the realms of psychic deception.

FEELINGS AND EMOTIONS

Feelings and emotions are real—they are experiences which must be recognized and reckoned with in the stream of consciousness. On the other hand, demonstrated truths—scientific facts—are not necessarily a part of the stream of consciousness. Feelings and emotions are, rather, the statement or expression of the laws of relationship governing those qualities which exist and function in the stream of consciousness. And here is where our nervous patients fall down. They assume certain qualities of consciousness to be facts. They interpret feelings and emotions, projected from the subconscious mind, as realities, and having thus fallen into grievous error so early in their process of reasoning, they go on with their successive deductions in that wild and reckless manner which can lead only to the sorry plight of the psychoneuroses.

I recently attended a séance where one of the highly suggestible women present said that she saw a table rise several inches off the floor. I did not see the table rise. I am not, however, going to accuse this good woman of deliberate falsehood. It would be unfair thus to indict her, because, I am convinced, she had all the emotions and sensations of seeing the table rise. The event was in every way real to her; that is, real to her stream of consciousness. But it was not real to me. I do not believe that the table rose off the floor. Others present agreed with me in this belief. I am, therefore, willing to say, in the common acceptance of the term, that I *know* the table did not rise. Thus I think that while many spiritualists, like our neurotics, are victims of self-deception, they are not consciously fraudulent. I really believe that they are many times sincere in the statements they make; to them the incident happened, but not to the rest of the world. The sufferings of the neurotic, in like manner, are real—to him. It will then be clear to the reader that feelings and sensations—emotions—are in a sense *real*, and that we can easily become victims of our own feelings.

In the case of an ordinary neurotic individual, or at a spiritualistic séance, the stream of consciousness consists of two distinct elements—the subjective and the objective emotions, sensations, messages, etc. Now, sensations enter the mind through the body after having been aroused by something in the external world. Sensations also have an internal or psychic origin. They may be aroused by memories, association of ideas, and other influences operating

in the mind and nervous system itself. The only standards we have by which to judge sensations are those feelings and other conscious experiences which are aroused by external sensations coming into the mind from outside the body. So that it comes to be a fact that we tend to judge, recognize, and classify our sensations of internal origin largely by the reactions we experience to similar sensations which have a genuine external origin. Therefore, we come to build up in our minds what someone has called the “reality feeling” in connection with some inward image and its associated emotions, as that image navigates down the stream of consciousness, in just the same manner that we associate such feelings with the real images and emotions that have had their origin in sensory contact with the actual objects of the material world—with the result that we are led into monstrous self-deception.

SELF-DECEPTION

I attended a séance not long ago, in which, I am thoroughly satisfied, the medium really saw and heard what she claimed to see and hear. I have no doubt many of the believers in the spirit circle also saw and heard what they claimed to see and hear. But I was unable to see or hear what they saw and heard. Moreover, I saw things which none of them saw: I saw the medium deliberately trick us on three occasions. The last time I almost failed to see it, because she was indulging in such a flow of words that my attention had come very near to being diverted, and I all but missed catching the technique of her clever trick. I came very near to seeing what she saw and what her devotees saw; but by carefully navigating my bark of attention down the stream of consciousness I avoided the rock, I steered closer to the center of the stream, and I caught the medium in the act—I detected the method of her fraud. In the meantime others navigated with her over to one side of the stream of consciousness and saw exactly what she described to them—the beautiful things on the farther shore of their suggestive and collective streams of consciousness.

We can hear and see things without going to a séance. I am not much of a musician, but I can sit down and imagine tunes I have one time heard. I can imagine that I hear bands play, and I am not indulging in any insane prank; you, reader, can hear the same. I can even hear melodies in my mind that, as far as conscious memory goes, I have never heard; but I dare say they are built up of melodies and strains I have heard at some time in my life. I can see visions of landscapes that I have never seen. If this were not possible, how could the artist give us new paintings, and how could the musician give us new melodies? It will be observed that most spirit mediums are highly sensitive, nervous persons, who could, in and of their own imagination, and at will, lead themselves in fantasy to run almost the whole gamut of physical suffering and pain, of mental pleasure and psychic joy.

If I have the “feeling of reality” which leads me to believe that I have conversed with a spirit or seen apparitions that are spirit realities; then, reasoning from experience, I can cite such psychic phenomena as positive proof to my own consciousness of the reality of spiritualistic phenomena. If I can truthfully describe such emotions and feelings to others, I am offering scientific evidence of the existence of a creative imagination—of the psychic

power of memory, fantasy, reverie, etc.; but I cannot offer such an experience to scientists as scientific proof of the reality of disembodied spirits. And this is where our friends, the spiritualists, fall down in their logic. They offer us phenomena which furnish abundant proof of the existence of these spirits in their own consciousness, and they ask us, as scientists, to accept this valid evidence in the realm of consciousness, as scientific evidence in the material world. We cannot do it. Sensations and emotions are real things in consciousness; but they do not constitute material proof of the actual existence of the spirits which these psychic phenomena impersonate.

Just as an honest spirit medium may so deceive herself as to come actually to believe in the reality of her psychic experiences, which are wholly of subconscious origin, so may the vast army of neurotic sufferers come to that point where they thoroughly believe in the reality of their miseries, fictitious pains, and other forms of imaginary disease. It is just as difficult to talk these neurotics out of a belief in the reality of their complaints as it is to convince the honest and sincere, but none the less self-deceived, spiritistic medium that the thing which she sees and hears is not in reality a spirit apparition, but rather an outwardly projected creation of her own falsifying subconscious.

The technique by which the subconscious is able so thoroughly to deceive its possessor will be better understood as we go on to examine the many and diverse methods whereby an uncontrolled subconscious may come to dominate the consciousness of a neurotic individual and eventually to enslave his whole mind.

SHIFTING THE GEARS

We come, then, to recognize that the “feeling of reality” is a transferable, floating bit of consciousness, which may be attached now to one group of sensations and images, now to another. We learn that the “feeling of reality” may be attached to an image reflected through the retina of the eye from without inward—the image of a real, material thing, which has weight, dimensions, and substance; again, that this “feeling of reality” may be attached to an image projected outward, from the archives of memory, to a creature created by consciousness—by the association of ideas. It would appear that some “psychics” and “sensitives” are able conveniently to shift the gears of consciousness as regards the “feeling of reality” and thus cause this state of mind to be attached to things both real and unreal.

Our more profound types of chronic neurotics and confirmed hysterics are victims of this “shifting of gears” with reference to the “reality feeling.” They are able to “ring the changes” in almost endless profusion as concerns an astounding variety of alarming symptoms and elusive ailments.

The consciousness of the “feeling of reality” tends to follow the channels of our pleasure-longings and our wish-complexes. In other words, the unconscious wish always tends to attach this feeling of reality to something of its own choosing. Now, in the séance room, be it noted, we have a group of people who intently long—who ardently wish—for communication with the dead. This is true of both the medium and the believing spectators. Under such

extraordinary conditions it must be evident that this “feeling of reality,” as it floats about in consciousness, is in a highly unstable and unattached state, and that it is ready to seize upon the least bit of evidential phenomena and give it the sanctity of actual evidence.

The séance favors bringing forth from the unconscious those images and complexes which are subservient to the wish to prove that beings live after death and are able to return to this world and manifest themselves to the living. And in this way numerous unattached feelings of reality are brought forth and are able quickly to fasten themselves upon those images and emotions which are the offspring of the unconscious mind in the peculiarly favorable and suggestive environment of the average spiritualistic séance.

The unconscious wish, the unsatisfied longing for spirit communication, in the absence of any real external stimuli, finds itself readily attachable to the internal images and emotions aroused by the deep-rooted wish to prove life dominant over death, as well as by the peculiar psychical atmosphere of the séance itself.

TAPPING THE SUBCONSCIOUS

It is now an accepted psychological fact that our experiences are all more or less perfectly preserved as memories in the subconscious mind, and there can be no question but that many spirit mediums and victims of hysteria are in possession of routes to the subconscious not used by normal individuals. In brief, genuine psychic mediums are able, at will, more or less fully to tap their sub-conscious reservoirs. Major hysterics are able to do the same thing under certain favorable circumstances.

Another evidence of the residue of memory-experiences which remains in the subconscious mind is disclosed by our dreams. Much of the content of our dream-life is only camouflage, a symbolic parade of things suppressed but, nevertheless, literally existing in our subconscious psychic reservoir. But these dreams are presenting themselves all through the night, even in the case of those persons who do not recall them. This is shown in many ways, such as by what is said when one talks in his sleep; and, working on such a clue of words spoken in sleep, it has also been discovered that through crystal vision, automatic writing, and hypnosis, whole dreams can be reproduced in all their original vividness, tho the dreamer could not recall them when awake.

As we progress in our study of the psychology of the subconscious, we shall discover that a vast number of neurotic men and women are more or less sincere as regards their own inner experiences. As neurotics, they are wholly honest in their presentation of complaints to the physician. As mediums, they are frauds, it is true, and are deceiving the public; but they are not conscious frauds. These “psychics” really and truly believe in themselves—just as certainly as the neurotic believes in the reality of his ailments. This class of mediums is self-deceived; they are ignorant of the technique of the workings of their own peculiar minds, and while they do not see spirit forms and do not hear invisible beings of one world delivering messages to the sojourners of another world, they do, in their own minds, through the technique of the psychology I have here explained, seem actually to see the forms and hear

the voices which they describe to their superstitious followers. They are deluded by the tricks of their own minds—deceived by the intricate workings of their own intellects.

Neurotic sufferers really experience the sensations and suffer the miseries which they so eloquently and pathetically describe to their doctors. Their imaginations may trick them, but they are essentially honest—they are unfortunate victims of subconscious self-humbuggery. And so, in dealing with these slaves of the psychoneuroses, we must recognize the fact that their ever-present and sorry plight is excruciatingly real.

IV

CONTROL OF THE SUBCONSCIOUS

IT is not uncommon, when we are trying to explain to victims of the psychoneuroses how they may gain more control of the subconscious, to have them put this question to us: “Doctor, how does it come that my subconscious exerts such control over me? When did this happen? How did I lose control over it, or did I ever have control? What went wrong and when, that this part of my own mind should come to wield such a tyrannical influence over my health and happiness?”

In an effort honestly to answer this question we have to presuppose not only that knowledge of the subconscious which has been presented in outline in the preceding three chapters of this book, but we must also go back to nursery days—in fact, to the first day of life, if not to a time before the individual was born into this world—in order to find the explanation of this subconscious tyranny. The answer is that most individuals who suffer from nervous and emotional tyranny in reality have never been masters of the subconscious. This is the situation: We are all born into the world with very little or no conscious mind-activity; the subconscious is in complete control. The infantile life is largely a subconscious existence—of course, more accurately speaking, we would say an unconscious existence, but we are using the subconscious in the sense that it refers to this whole domain of the unconscious mental activities.

At birth we have no conscious awareness. The child is only vaguely aware—its reactions are instinctive, intuitive, automatic, and vegetative. We are all born with the subconscious as master. The normal individual later escapes, develops a technique of putting the conscious mind of reason and judgment in charge of his emotions and feelings. The neurotic individual fails to emerge from the world of fancy and grows up with the subconscious in charge. He is still a victim of the inertia of the prenatal and early infantile life. He refuses to recognize the world of fact and adjust himself to it.

The real fact is that the uncontrolled, unstable, highly irritable, nervous person who is a victim of subconscious domination is simply a baby grown up. Physically he has attained adult proportions, but mentally he is trying to carry on and face the world with a philosophy of living and a psychology of reaction that is wholly infantile, altogether puerile, and in every sense inadequate to meet the demands upon a grown-up individual trying to function in a real world.

NARCISSISM

Narcissus, it will be recalled, fell in love with, and was led to worship, the reflection of his own image, and this is exactly what is wrong with the majority of those who are afflicted with some form of the neuroses; and so, when we use the term “Narcissism” in the discussion of psychic and nervous disorders, we are using it with the understanding that it implies self-interest, self-centeredness, and self-worship. In a certain sense we are all guilty of this; but

when these tendencies become magnified to such a point that they begin to interfere with our health and happiness, then we recognize that the subconscious is really at serious mischief.

This begins on the first day of a child's life—if it has not already begun before birth. As we observe the infant in his crib the first few days of life, he seems to manifest little that could be described as conscious reaction to his environment; but no one would say that he does not react instinctively or intuitively to his environment. He very early learns to make his wants understood in no uncertain terms, and there is no doubt that this tendency to seek the gratification of his personal desires—to secure ministrations to his personal wants—is inherent in the human infant.

Let us more carefully examine this theory that the child is born with certain simple and primitive desires; that the rudimentary subconscious is to a certain extent already guilty of usurping control over the individual. In our study of this question, let us ask: Did the unborn infant experience any sensations before making his entry into the outside world? It is highly probable that he did. We know that the child, previous to birth, has undergone certain experiences in utero. The physician knows that the little fellow is very lively at times; he kicks about and indulges in muscular exercise much as he does during those days immediately following birth. The skin sensation is probably present, altho little exercised because of the fact that he is immersed in a warm water bath of constant temperature; but the moment he is born into the world and the chilly air strikes the sensitive skin, he seldom fails to manifest his recognition of the fact and record his displeasure by lusty crying.

It is also highly probable that the unborn child has developed, to a certain extent, the sense of hearing. Of course, the sounds from the outside world are greatly muffled, much diminished, but they undoubtedly reach his ear. It is also likely that the sounds of the blood moving through the larger vessels of the mother, as well as the other noises connected with the process of life in both mother and child, have reached his ears. These, of course, are all softened, and those pertaining to the circulation are regular and rhythmic, of a humming nature, much after the fashion of the crooning and rhythmic lullabies which mothers have learned are so quieting to the child during its early days of life.

And it is highly probable that it is because of this prenatal sensory memory-registry in the brain of the child that these nursery lullabies are so effective. This sort of thing continues to supply the child with the environment it was accustomed to. These lullabies sung to the child after birth make it feel at home and at ease in that it continues to hear soft, subdued, rhythmic tones which make an agreeable impression upon the mind-centers, since they supply a continuation or repetition of the most real feeling-memory on record in the child's mind. In other words, there is a familiar and agreeable emotion associated with this sort of thing. The child rests quietly under its influence and soon forms the habit of making a big fuss if its hearing is not occupied with the reception of these lullabies. You see, it is not simply a question of spoiling the child—it came into the world with the habit formed. In a sense, and as far as these things are concerned, the child was born spoiled. It is merely a question of whether the mother will continue to gratify and further develop this prenatal habit or whether she will elect to introduce the child into a new and real world, and thus very early

begin to teach it to adjust itself to the facts and realities of this new mode of existence.

It is highly probable that another memory impression has been made upon the mind of the unborn child by the bodily movements of the mother. As the child is suspended in its prenatal bath, these physical movements on the part of the mother would undoubtedly be experienced as a sort of swinging or swaying motion, and it is highly probable that in this way another set of memory registrations is made upon the young and developing brain cells. It is therefore little to be wondered at that the new-born infant likes to be rocked in his cradle, swayed in the mother's arms, gently moved to and fro by whatever method. It all feels agreeable in that it represents a continuation of those feeling-memories which were being constantly experienced prior to birth. Again it is very easy to spoil the baby because it was born already more or less spoiled as concerns this desire for being rocked. And again it is a question of policy on the part of the mother. Will she continue to perpetuate these feeling-memories of the prenatal times, and thus keep the infant quiet by supplying the same sensations it was accustomed to before birth; or will she elect to introduce the new-born babe into a new world, a world in which it must sooner or later learn that it is not the whole thing, that it cannot always have its way, that it cannot always have its every whim and feeling-memory gratified?

Another prenatal memory probably consists in the ability to draw up the limbs and to make other slight muscular movements. Immediately after birth the child tends to assume the same position it occupied in utero.

INFANTILE EGOISM

Before birth a child exists, as it were, alone and in a world by itself. After birth it only gradually awakens to the realization that it is not the whole world, and even when it begins to realize this fact it only does so dimly, at first believing that all the rest of the world is directly attached to it and run for the exclusive purpose of ministering to it and caring for it. It is indeed a rude awakening when the infant learns that it is not omnipotent, that it is not the whole show; increasingly this disillusionment proceeds until, with advancing years, the child becomes relatively orientated and learns to take its proper place in life. But all too sad to relate, some children do not thus come to a full realization of these facts, but continue on indefinitely expecting to have every whim gratified, and more or less living the life of childhood with its fantasy of being the center of all creation, of having all the world subject to its beck and call, of expecting everybody to minister to its wants and make easy its journey through life.

The first rude jolt handed this little creature is at the time of birth, when a change of atmospheric temperature causes the first inconvenience which the little animal has ever been called upon to suffer. And then it has to begin the struggle for breath, which is automatic and easy when once started, but which at least requires an effort from which the child was free before it was born. It is in connection with these two early experiences that the child utters its first sounds, and the quickness with which it learns to use the magical cry in order to satisfy its wants constitutes a thorough-going refutation of the theory that the infant has no

mind the first few days of its life; it certainly does have, at least, a subconscious mind.

Let us see what happens. As soon as the child is born we wrap it up carefully in warm blankets and do our best to supply it with the temperature it had in the little world of its own before it made its debut into our world. We dress it in loose garments, so that it can draw up its legs and otherwise use its muscles the same as before birth. When not sleeping, most of the time it hears a soft, crooning lullaby which pleases it, and it is gently rocked to and fro with that same swaying movement which it experienced before coming into the outer world. Little wonder that the feeling persists that this is all there is of existence, and that there is a universal conspiracy to minister to its wants and to see that it is in no wise disturbed. And the moment this delusion is not effectively maintained, the little animal lets out a lusty yowl, whereupon the prenatal environment is immediately restored.

All this is a great mistake, especially in the case of children predisposed by heredity to the neuroses. The better method would be to allow the child very quickly to become adjusted to its new environment, and thus early to train it to become used to the ever-changing environment of subsequent life. Sooner or later this baby must step out of its world of fantasy, the world in which it is the center, into that real world, that world of fact where it must gracefully accept disillusionment and gird itself to meet the demands of society, to live as a man among men.

EARLY TRAINING OF THE SUBSCONSCIOUS

The proper time to begin training the nervous child is the first day of birth; *teach the child that crying will get it nothing*. Let it come early to recognize that it will be fed, watered, warmed, and cared for at regular intervals regardless of crying. That it may indulge in crying at will as a form of pulmonary gymnastics; it can't talk or sing, and why shouldn't it cry? But it should early learn that crying does nothing to change its environment; it should early be taught to lose faith in crying as the magical wand which will bring it anything desired. To do otherwise is only to do the child an injury by helping to perpetuate the early fantastic notion that it is the only thing of importance in the world.

I firmly believe that this early impression of the child—that crying always brings gratification—tends to fix permanently in its mind the fact that making a noise through its mouth will in some way tend to change the world of reality, with all its practical demands, into a world of fantasy in which every whim and wish will be gratified. Sooner or later, of course, disillusionment must come, and it is the effort to recapture and restrain this spoiled and arrogant subconscious mind that causes so much trouble in our neurotic patients, and which leads to so many nervous miseries and eventual breakdowns.

We see grown-up men and women who indulge in orgies of weeping—for no other cause than that they are just such victims of the untamed subconscious. In childhood weeping brought them everything they wanted; crying never failed to change the rude and inhospitable world of reality into one of pleasant fantasy. I doubt not that the tendency to weep in the presence of displeasing circumstances is but a revival of this early subconscious memory. You know, there is a constant tendency on the part of evolutionary beings to

regress; there is always the danger of reversion to type, of regression to an earlier stage of existence; and so, when in the face of the unpleasant realities of life we break down and cry, we are, in plain language, simply doing the “baby act.” That is the way we got things changed when we were infants, and we forget ourselves sufficiently to indulge in the same tactics even after we have grown to adult life and are more or less convinced of the reality of the world in which we live.

In general, these are the same people who were not taught in the cradle that crying was of no avail. In their tender years crying was the magic wand which they waved at will and found that it always brought into existence the desirable and agreeable. Little wonder, having been raised in this way, that later on in life they should resort to weeping when forced to pass through experiences more or less unpleasant! How much better that the new-born child in the first two or three weeks of its life should come to realize that a change of dispensation has occurred, that it is now in a real world, and that it must begin to adapt itself to its new environment!

The use of mild expletives under excitement, anger, and other forms of emotional strain is undoubtedly a reversion to this same infantile tendency to try to change one’s environment by the mere use of words. No doubt swearing belongs in the same category. Since in infancy and early childhood we were able, by the mere utterance of sound, so quickly and effectively to change our environment from the unpleasant and undesirable to the pleasant and desirable, little wonder that the subconscious should overflow on us now and then, when confronted with disagreeable conditions and harassed by unpleasant surroundings! No wonder that we resort to a flow of words representing the outcropping of the subconscious in an effort to correct our present-day surroundings by the method employed in nursery times!

Possibly another memory which comes into the world with us is the tendency to hide the head in the presence of danger or to crawl under the bed. It seems to be an instinctive reaction to danger on the part of certain individuals, and it probably represents the desire to get into an enclosed space—at least some authorities have suggested that this is a prenatal hang-over.

And so, as time passes, the rude awakening continues. The child gradually comes to recognize that everything about it does not belong to it, and in time, if properly trained and disciplined, comes to get over that egocentric oversensitiveness which appears when it first finds out that the world is not being run as a private performance for its own personal and exclusive benefit.

IDENTIFICATION

As time passes the new-born child begins to identify itself as a distinct personality existing in a real world; gradually the world changes from the fantastic to the real. It is highly probable, however, that in the first weeks of life the infant regards its mother as a part of itself. It was so for nine months before birth, and while separated physically from its mother at birth, it only has to cry and it is fed from its mother’s breast, nestled close to her body—at

least that is true in the case of all except those babies who have a cow for a foster-mother. This delusion is further perpetuated in that between nursings, the moment it utters a cry, it has a rubber teat quickly put into its mouth. It is certainly given the impression that it is master of its environment and that all it needs to do is to cry and it can have what it wants, and so, aside from the hygienic aspects of a rubber teat, the psychology is altogether bad. It delays the time—and makes it altogether harder when it does come—of breaking the news that the child must begin personality adjustment to a new environment.

The fairy-tale makes a great appeal to the young mind in that it enables the child to identify itself with the hero. These little folks, in their world of fantasy, easily imagine themselves to possess all the power and qualities of the fairy-story characters. The fairies are always doing things by magic, and that is what the young child believes in. Magic is its watchword. Later on, as the child grows up, it progresses from the fairy-story to the fiction story-book. Here there are more heroes and more magic and we go on with this sort of training, which all the while is building up the subconscious in the belief that it lives in a world of fantasy and must have its own way.

Sooner or later the awakening must come—the struggle must be undergone. And it is a great strain on the nervous system actually to come, through some sudden crisis, to that place where the individual must admit that the world is real, make up his mind to face the facts, and abandon the belief in magic.

Instead of making real men and women out of our children, this whole process of child culture tends to develop Narcissism, which is fraught with grave consequences in the case of the naturally neurotic child.

Through the subtle power of the imagination it is possible for most of us to “identify” ourselves with another individual. This we do at the drama. We enjoy the play because we identify ourselves with the leading character; we are thinking all the while what we would do in the same situations, and when the hero triumphs we triumph with him. Emotionally speaking, it is a personal triumph for us, as indeed for every other individual in the audience.

Likewise, when we read a novel we identify ourselves with the hero and follow him all the way through. We fall in love with the heroine as does the hero. In fact, novels are simply a lazy way of having someone else construct for us our day-dreams; whereas, in the case of the melodrama, we are having the whole thing acted out in a physical way before our eyes, and thus it becomes still more realistic.

The psychically unstable individual with a highly organized nervous system can easily imagine himself to be the hero of the moving-picture play, identifying himself with all the experiences portrayed on the screen; as indeed he will do on viewing a public procession in which some prominent individual is on parade; in either case he will imagine himself to be the hero and will experience all the gratifying emotions supposed to be experienced by the hero. This sort of “identification,” or, as it has been termed, “wish evolvment” furnishes the psychological interpretation for a vast number of hysteric manifestations and mediumistic phenomena. The mediums desire to be what they profess to be, and so, through the mental processes of “projection,” on the one hand, and the fantasy of “identification” on the other,

they seek to bring about their “wish evolvment”; and thus, from the unlimited supply of material in the reservoir of the subconscious mind, they bring forth those things which complete the picture and enable them, through their clairvoyance and clairaudience, to depict to the devotees of spiritism the images of departed spirits—messages from another world.

Our daily experience, from childhood to old age, is dominated by the desire to realize the fulfillment of our wishes. Even the lies of childhood are but the expression of a wish. In this case it is clear that the little ones say what they do for no other reason than that they inordinately indulge the wish that what they say were true. In reading fairy-tales and novels their unfortunate infantile training is continued. It is all extremely pleasant and restful. It is regression to the infantile type of existence, even to the pre-birth status.

OTHER FORMS OF IDENTIFICATION

This process of “identification” is sometimes applied by children to their parents. They identify themselves with their fathers and mothers, with friends and enemies. They may even come to feel an exaggeration of the pleasures as well as the pains of their friends. Such individuals are commonly regarded as being kind-hearted and sympathetic. But all this, when overdeveloped, renders them a nuisance to themselves and to society. Oversympathetic people regard others as hard-hearted and unkind. They cannot realize that other people may have feelings different from their own; and of course such individuals always feel that their undue sympathy is to be regarded very highly, as a virtue.

I presume the reason why women have more of a tendency toward Narcissism than men is to be found in the way they are brought up. From infancy the little girls are taught that they are more refined, just a little nicer than boys; that little boys are made of “slugs and snails and puppy dogs’ tails,” but little girls are made of “sugar and spice and everything nice.” A great deal that is different between the boy and girl when grown-up is the result of environment and training.

And so, just as Narcissus fell in love with his own reflection, the infant of tender years, finding himself in a world of which he is the center, is quite in love with himself. His joys and pleasures are all important, and as he grows older he resents the process of disillusionment whereby he must come to realize that he is not the only intelligent being around which the world revolves.

This process of “identification,” as we grow up, may develop to the point where we attribute to other people all our own undesirable traits and disagreeable tendencies; and, on the other hand, we tend to recognize in others those things which we are in love with in ourselves. There is no question in my mind but that a slight degree of homosexuality may be developed in this way. Men and women are more or less in love with themselves, and when they see in others traits they love in themselves they develop admiration for the people who bear these traits. This should not be regarded as in any sense abnormal and should not be confused with hereditary homosexuality.

Another phase of identification which the child has to overcome early in life is that of identifying himself with his inanimate surroundings. You take away the baby's rattle and he sets up a lusty howl. You have deprived him of one of those things which he believes are inherently a part of him. And as we grow up this viewpoint persists. The world is full of men and women who are having stormy times all the while because some little thing has been broken, something has been misplaced, something has been taken away from them, their immediate environment has been invaded and the smooth running of their lives has been upset, all of which constitutes a great wrong in their eyes. They cannot learn how to live with the world as it is and themselves as they are. They grow up to adult life and even old age with this infantile tendency to regard themselves as the center of all things and their belongings as a part of them.

Parents and teachers are often to blame for the failure of children to outgrow this mental attitude of infancy. It is the duty of the adult to train the rising generation more bravely, more fearlessly, and more complacently to face the world of fact, and thus more early and more successfully to escape from the egoistic delusions of the world of infantile fancy.

TRYING TO DODGE THE REALITY OF LIVING

I was recently consulted by a woman who was in the throes of a nervous breakdown. She was afflicted with nausea, fatigue, insomnia, and a really serious form of mental depression, and what do you suppose was at the bottom of all this? Nothing more nor less than a little trouble with the kindergarten teacher, who had told her that her little girl was not being properly trained and disciplined at home. On hearing this, the nervous mother fell to thinking over the serious responsibility of raising a child, and decided that it was too much for her. She had a good cry, but that didn't seem to do any good. The kindergarten teacher's criticism still persisted in her mind, and so, since ordinary crying didn't seem to change matters, she threw a real fit. That evening when her husband came home she had another cry, and when that didn't seem to help much, she fell ill—and remained ill for four months. She went away from home; she succeeded in getting rid of the responsibility for the care of her child during that period, and it was no easy task, I can testify, to bring her around to the point where she was willing to go back home and take up again the responsibilities of life which she so longs to avoid.

Here is another story of almost as severe a nervous breakdown from another cause. This patient's husband came home one night and announced that he had been transferred to the Pacific coast and that they must move. The thought of moving was sufficient to set her brain in a whirl, and she didn't stop until she had worked herself up to the point where she experienced a complete nervous collapse. It took her six months to recover from this breakdown and be ready to move to the Pacific coast. Of course, she had to go, but she was one of those grown-up children who somehow think they can dodge responsibility by indulging in an emotional sprawl.

Some men, when confronted with difficulties, just go out and find a bootlegger and go on a spree. They get drunk, and for the time being they are rid of their problems. And so it is with many a neurotic woman. When she finds herself up against something that is disagreeable, she simply goes on an emotional spree; she has a nervous breakdown, gets sick, goes to a sanatorium, has a nurse for a few weeks, and for the time being she, too, is able to escape her troubles; but, sooner or later, both sprees have to be paid for, and both shirkers have to face the real facts of living, and, like men and women, gird themselves to meet the social and other demands of their day and generation.

We must abandon the old-fashioned belief that instincts are the Creator's gift to animals to atone for their lack of intelligence; that as man advances intellectually he loses his instincts—becomes more and more free from all instinctive tendencies. Animal instincts do not disappear with racial advancement; they are merely repressed, they remain with us and proceed to make mischief for us when they are not properly understood or adequately controlled.

Before we can accept an impulse as a primary or inherent instinct, we must find it uniformly present in the instinctive behavior of the higher animals. We should also observe its exaggeration in those human beings who are mentally unbalanced—abnormally controlled—and who would, therefore, be expected to exhibit more of a tendency to be under the control of their racial instincts as compared with intelligence and reason.

It will now be in order briefly to examine these primary emotions:

1. *Fear*—Fear is the emotion associated with the inherent *instinct of flight*. You are more or less familiar with the old argument as to whether people run because they are scared or are frightened because they are running. Both the biologist and psychologist seem inclined to believe that we are frightened because of our flight, but in any case the simple facts are that even tho we may instinctively flee from danger and then have fear aroused in our minds as we proceed with the flight, we do not run very far until our fear directly contributes to the acceleration of our speed.

The thing works both ways when it is once initiated. While the emotion may be initiated by the instinct, when it is once aroused it serves greatly to augment the instinctive tendency.

Fear, when thoroughly aroused, produces that terror which leads to concealment—an effort to avoid danger by hiding. Fear leads us first to flee, then to hide. It is the most lasting, most indelible of all human emotions, and is the one emotion that seems to seize control of both mind and body in no uncertain fashion.

The emotion of fear invariably accompanies the instinct of flight—the desire to flee from danger; but, when this fear is so profound as to result in terror, it sometimes paralyzes the power of flight. So we see that when fear is overdone—leading to terror—it defeats itself.

While fear is instinctive, not all our early fears are inherited. All young infants are frightened by but two things: The fear of falling and the hearing of sudden loud and shrill noises. Practically all other fears they acquire by suggestion and association. Young children are not at first afraid of snakes, hairy animals, etc. It is the thunder associated with the storm that frightens the child, not the lightning. When certain adults cover their heads with the bed-clothing during a storm, they are only exhibiting the inherent instinct for concealment subsequent to fleeing from danger.

Fear is not a result of any process of intelligent reasoning or judgment. A young child may be terrorized by the sight of its own father down on the floor “playing bear.” It well knows its father will do it no harm, but when the father is seen in this strange aspect it easily succumbs to its instinctive fear emotions.

Because of the lasting impression which the fear emotion makes upon the human mind and memory, it becomes not only the one great influence which admonishes us to control our

selfish behavior and curb our egoistic tendencies, but also the fundamental cause for much of our needless anxiety and the starting-point for many of our imaginative dreads and functional nervous disorders.

Fear is fatal to human happiness under conditions of modern civilization. Worry is chronic fear and is the arch-demon of all the hosts of joy-killers.

The only known cure for fear is *faith*. But before faith can operate, there must be courage—stamina—to control the inherent tendency to succumb to the fearful emotions.

2. *Disgust*—Disgust is the emotion associated with the *instinct of repulsion* and is aroused by bad tastes and smells. It seems to be especially stimulated by the sight of slimy creatures such as snakes and lizards. It no doubt lies at the bottom of the development of the esthetic taste in primitive man, and unquestionably constitutes the inherent urge which propels modern civilized peoples along those lines which lead them to look for the beautiful. There is little doubt but that repulsion and disgust lie at the very bottom of our effort to realize artistic thoughts and actions.

As our intellectual development progresses, we come to associate this emotion of disgust with people who for some reason offend our standards and ideals. We commonly hear it said, of some person who is repulsive in his appearance or personality, that “he makes me sick.”

Thus we see that disgust is an emotion which may become associated with food, surroundings, animals, and even human beings; and if allowed to gain a large place in one’s mental life it is certain to become responsible for much unhappiness. If we become over-sensitive to all the trifling things we happen to dislike in our associates, we are doomed to suffer.

3. *Wonder*—Wonder is the emotion associated with the *instinct of curiosity*. It is a sort of incipient fear. No doubt this is the emotion, together with its foundation instinct of curiosity, that leads to invention, adventure, and exploration.

The wonder emotion—the curiosity instinct—is strong in both animals and children. It is peculiarly active in monkeys. Who has not observed animals in the pasture approach cautiously some strange object lying on the ground, and then shy away in fear, only to return again further to satisfy their curiosity? If wonder is overexcited it is transformed frankly into fear.

Undoubtedly this emotion constitutes the foundation of our scientific researches and religious speculations. The hunting instinct is probably another manifestation of this same inherent curiosity, augmented by hunger and other associated emotions. Here is an emotion which can contribute to our happiness or lead us into endless trouble—all depending on how we control it.

4. *Elation*—Elation is the emotion aroused by indulging the *instinct of self-assertion*. It is the emotion behind all our efforts at self-display. It is the positive element of self-consciousness. It is particularly exemplified in the characteristic swagger of the male and the vanity of the female, and is an emotion undoubtedly responsible for much of the conduct that goes by the name of bravery.

In the animal world we see this emotion in action as a spirited horse lifts high his hoofs and tenses every muscle in his body while prancing around on parade. It is shown in the spreading tail of the peacock, and the strutting of the mother hen in the presence of her chicks.

We find this same primitive instinct coming to the front in certain cases of the human insane. Softening of the brain is sometimes accompanied by “delusions of grandeur,” the unfortunate individual becoming the victim of a boastful and insane elation.

Elation—self-assertion—is essential to human happiness. While overexaggeration of one’s ego invariably leads to trouble and more or less sorrow and unhappiness, a reasonable indulgence of self-display and the enjoyment of average self-expression are indispensable to good health and happiness.

Human beings must have an opportunity to “show off”—at least in moderation—in order to be happy. Even the young child is observed to emerge from his bashful hiding behind his mother’s apron, and, after turning a somersault, inquire of the stranger, “Can you do that?” We are all more or less like the children, who, as they “show off,” say, “Watch me do this.” There is joy in performance. We are happy when in action. We are unhappy when we are denied the opportunity to indulge in some sort of self-assertion with its accompanying emotion of elation.

5. *Subjection*—Subjection is in contrast with elation, and is associated with the *instinct of self-abasement*. It is the negative side of self-consciousness and represents that slinking, crestfallen behavior that is so often mistakenly called humility. In some abnormal and morbid individuals this is carried to the point where the soul conceives itself as being guilty of all sorts of crimes and misdemeanors. This is the emotion lying at the bottom of our “inferiority complexes.”

Among animals, the dog exhibits the most profound development of this depressing emotion as he crawls along on his belly with his tail tucked between his legs—in the presence of a larger dog or a chiding master.

This is the emotion which becomes the basis of shame in the human species. Shame and pride presuppose the existence of self-consciousness, and since this is a state of mind denied the animal world, these more complex emotions are purely human. But the animals do share with man the rudimentary emotions of elation and subjection.

6. *Tenderness*—Tenderness is the name which has been given to those feelings connected with the *parental instinct*. It is the foundation of the protective impulse—the impulse to protect the young, the weak, and the helpless. It becomes the source of most of our moral indignation, and when thoroughly aroused it is closely allied to anger. Nothing will more thoroughly arouse the indignation of the normal human being than to see an inhuman wretch torture and abuse a helpless child.

This emotion of tenderness is the biologic explanation of all true altruism. It is seen especially in the maternal instinct for the protection of the young, which is common to the females of all the higher animals. It is associated with the love and devotion of parents for their offspring, and is the first instinct we have discussed which lends itself to the preservation

of the species. Most of our inherent instincts are designed to protect the individual, but the emotion of tenderness aids in species survival.

The tender emotion is weaker in the male. That he has any of this sort of maternal solicitude for the young is probably due to the fact that many traits of one sex are in rudimentary form inherited by the other sex. The females of many animals have abortive horns, while the males of many species have rudimentary breasts. This sort of criss-cross inheritance between the sexes probably explains how man comes to have more or less of this motherly instinct and emotion for the young.

Under certain customs of the Roman courts it was observed that sons would appear against their fathers, but never did fathers appear against their sons. One of the Ten Commandments admonishes the child to honor its parents, but it was not necessary to have a commandment exhorting parents to love their children. Nature provided fully for that in the parental instinct and the accompanying tender emotion.

The urge of the human mother to kiss her child is probably a manifestation of the tendency of mothers among the higher animals to lick their offspring.

This tender emotion is the basis of all our Good Samaritan work, and the foundation of all efforts and laws designed to protect the weak against exploitation and abuse by the strong. It is a source of much joy and real self-satisfaction. Everything associated with the indulgence of this emotion makes for our highest happiness—provided we do not overexercise the instinct and cultivate it to such an extent that it becomes positively painful.

7. *Sex-hunger*—Sex-hunger is the emotion aroused by, and associated with, the inherent *instinct of reproduction*. It is a source of a great deal of jealousy. It is the emotion that underlies the mating instinct, and it impels and directs that interesting impulse to courtship. It accounts for both the aggressive social attitude of the male and the characteristic coyness and shyness of the female.

In the case of the better natures in the human species, the sex-urge is more or less intimately associated with the parental instinct and its emotion of tenderness, all of which directly contributes to the development of that higher devotion and attachment which we call *love*.

There can be little doubt that we have in our sex-emotions an instinct that can be so used as to contribute enormously to the sum of human happiness; on the other hand, no one would question the fact that these emotions are sometimes so abused as to be the source of the greatest sorrow and suffering. As concerns the average human being, the greatest joys and sorrows are locked up in the realms of this reproductive instinct and its associated sex-emotions and attractions. No other primary emotion is capable of such beneficent use or such monstrous abuse. No other primitive instinct can contribute so much to human happiness when properly exercised; and likewise no other innate emotion can cause such suffering and sorrow when overindulged or otherwise perverted.

8. *Hunger*—Hunger is the emotion connected with the *instinct of nutrition*. The desire for food is one of the strongest of all human instincts, and the associated emotion of hunger is what leads to our hunting and feeding impulses. This is the emotion that is responsible for

the development of the culinary and other arts having to do with the preparation and preservation of food.

The gratification of healthy hunger is one of the most profound of all human joys. A good appetite, if properly controlled, is the source of lifelong pleasure. Like the sex-emotions, hunger may be utilized for the production of joy or perverted to such an extent as to become responsible for the keenest suffering and sorrow.

9. *Security*—Security is the emotion we feel when we yield to our inherent *gregarious instinct*. Man is naturally a herd animal. He feels safer when he is one of a crowd of his own fellows. This emotion of security is the well-spring of the impulse of self-preservation, and when indulged, yields that feeling of safety which we experience as the result of companionship with those of our kind.

Many animals, altho they exhibit little or no affection for one another, insist on remaining together in herds. Most human beings dread to be alone. Solitary confinement is regarded as the acme of punishment. Some nervous patients simply will not remain alone. We dearly like to congregate in throngs on the slightest pretense—a parade, or a football game—no matter what the excuse, mankind likes to revert to the associations of the herd. Many an unsocial being, while shunning intimate personal contact with his fellows, nevertheless, sticks closely to the great city with its teeming thousands.

The sense of security is essential to human happiness. No matter how little personal affection we may have for our immediate associates, we do not want to be alone. No matter how irritating our fellows may sometimes prove to be, we prefer to remain with the tribe. We can, of course, by means of diminished self-control, indulge in such anti-social conduct as to cause ourselves to be segregated from our fellows; such isolation, however, soon becomes a source of unhappiness. In fact, we recognize that most of our primitive instincts can be so exercised as to contribute either to our happiness or unhappiness. Much depends upon our reaction to our emotions—our self-control.

10. *Hoarding*—Hoarding is the emotion accompanying the *instinct of acquisition*. It is the urge to labor and leads to the endurance of hardship in an effort to accumulate food and other possessions which we deem essential to the joy of living. When perverted, this impulse may lead to theft and other crimes, or may manifest itself after that peculiar fashion known as kleptomania. A typical example of the hoarding instinct is seen in the action of a squirrel burying nuts.

In a former generation we forewent the pleasures of living in order to prepare for the blessings of heaven. To-day heaven does not have such a hold on the popular imagination, and so we find any number of people who are relentlessly pursuing wealth, in order to leave a vast estate and thus minister to the pleasures of their children after they, the parents, have departed this life.

Those who deny themselves pleasures in this life in order to prepare for the joys of heaven, are akin to those who toil to amass a fortune for the next generation; both have the essential idea of foregoing the pleasures of to-day for the sake of future rewards.

11. *Pride of creation*—This is the emotion we experience as we view the results of our efforts to create, to construct things. It is creative self-satisfaction. It is the emotion associated with the *constructive instinct*. Every human being likes to work up raw material into some article of his own design, and it is this instinct which lies at the bottom of the manufacturing proclivities of the human species. Even children like to build things with their blocks, just as birds build their nests, beavers their dams, and ants their underground mansions.

I doubt if any normal-minded healthy human being can fully experience the joy of living unless he is engaged in some worthwhile pursuit—some sort of creative or constructive toil. Thousands of men and women are supremely unhappy for no other reason than that they are comparatively idle.

12. *Anger*—Anger is the emotion associated with the *instinct of pugnacity*. This is a primary instinct that is likely to be aroused when any obstacle is placed in the way of the exercise of any of our other instincts or their associated emotions. It is the basic instinct that makes man a fighting animal. It is the biologic explanation of war. Some females are deficient in it, but it is present in large degree in the average male. It is a type of general defense reaction. That is, when any of the inherent emotions are thwarted, the natural reaction is one of pugnacious resistance, and there is aroused in connection with this behavior a reaction of more or less anger.

What happens when you try to take a bone away from a dog? The best-natured infant displays resentment if you interrupt his meal. All men resent any interference with their pleasures. Even the strong emotion of fear will give way to pugnacity and anger; the most timid animal, when it is brought to bay, and finds its instinct of flight thwarted, is apt to turn viciously upon its pursuer.

While we are entitled to that self-confidence, that desire to look out for our rights and privileges, which is compatible with average self-respect and self-esteem, it is unfailingly true that when we become over-bellicose and pugnacious, our emotion of anger can be depended upon to neutralize the joys of living and eventually to all but kill the very happiness for the promotion of which our pugnacity has been overexercised and our anger overindulged. Man is not truly happy when he is angry.

II. SECONDARY OR COMPOSITE EMOTIONS

We have just seen that the human species is largely dominated by a group of twelve inherited emotions. We should next give attention to the manner in which these twelve emotions can be combined, built up, or associated into secondary, composite or *acquired emotions*.

It is not easy to find the proper words to define or express these highly complex feelings and emotions, and undoubtedly various authorities might suggest a somewhat different classification, but the following represents what to me seems to be a fairly comprehensive survey of this group:

<i>Secondary Emotion</i> (<i>Composite and acquired</i>)	<i>Primary Components</i> (<i>Instinctive factors</i>)
1. Sympathy	Tenderness + Sex + Security
2. Admiration	Wonder + Subjection + (Pride)
3. Imitation	Admiration + Security + (Vanity)
4. Rivalry	Elation + Anger + (Envy)
5. Vanity	Elation + Sex + (Pride)
6. Pride	Elation + Hoarding + (Egotism)
7. Gratitude	Tenderness + Subjection + (Awe)
8. Awe	Fear + Admiration + (Subjection)
9. Reverence	Awe + Gratitude + (Spiritual Nature)
10. Envy	Anger + Subjection + (Pride)
11. Remorse	Anger + Revenge + (Subjection)
12. Scorn	Anger + Disgust + (Elation)
13. Contempt	Disgust + Elation + (Vanity)
14. Aversion	Fear + Disgust + (Rivalry)
15. Courage	Elation + Some other emotions

Thus we see that we may employ our primary emotions much as we would words for the purpose of building up sentences, more full and comprehensive expressions of thought. As we progress in the scale of civilization our complexity of thought greatly increases—and likewise our power of originating more complex emotions—and thus is the capacity for enjoying happiness or experiencing sorrow also greatly augmented.

Let us then more fully consider the composite nature of our emotions.

1. *Sympathy*—Sympathy we observe to be based on the primary emotions of tenderness, sex, and security. This acquired emotion presupposes more or less love and devotion. It connotes an understanding, to some degree at least, of human nature. It is the biologic and psychologic foundation for that state of mind that makes possible the promulgation of the Golden Rule.

Sympathy has its root in parental devotion, in sex attachment, and in that fellow feeling toward the rest of the herd or tribe which makes us more secure in our personal existence.

Sympathy implies suggestibility. Suggestion has much to do with our education through the channel of imitation. It is because of suggestion—that strange urge to do what others do and think what others think—that the animal herds stampede, all the dogs in the neighborhood join in a dog fight, and human beings become panic-stricken and run amuck as a mob.

Not only are our tender emotions sympathetically aroused by the sight of suffering or sorrow, but fear, anger, joy, and laughter are also highly contagious. Even curiosity is catching: witness the crowds gathered on the street-corner, all gazing skyward, just because one or two persons first paused to behold something in the heavens. Practically all our primary emotions can be sympathetically excited by suggestion. Sometimes, in our efforts to indulge in self-

assertion (to overcome our subjective tendencies), we develop a contrary state of mind—contra-suggestion. I am sure the reader cannot help but recognize the vast possibilities for weal or for woe that lurk in the quality of emotional sympathy. Uncontrolled sympathy may plunge us into all sorts of oversolicitous anxiety and unnecessary worry. Normal sympathy invariably contributes to the sum of our happiness.

2. *Admiration*—Admiration is built out of the primary instincts of wonder and subjection, and is probably also associated with its fellow acquirement of pride. Unmistakably the feeling of admiration is also tinged with awe. No doubt it has a touch of both sympathy and love. When overindulged, carried too far, it may often terminate in envy.

Curiosity leads to that investigation and inspection which, with its associated emotion of wonder, constitutes the basis of admiration; and when, in the presence of our new discovery, we observe certain elements of superiority in it, we are led to experience the emotion of subjugation—the expression of the inherent tendency toward self-abasement in the presence of superiority of force or being.

I doubt if the highly self-satisfied and conceited person is capable of genuinely admiring anything or anybody. And we must not overlook the fact that when we enlarge our capacity for admiration we at the same time increase our capacity for happiness.

3. *Imitation*—Imitation is founded primarily on the inherent emotion of security, the outgrowth of the instinct of gregariousness. Tribal association is at the basis of suggestion, and suggestion leads to imitation. The secondary emotion of admiration, as already defined, must of course enter into it, for we want to imitate only that which has first challenged our admiration. Another secondary emotion which undoubtedly is a factor in imitation is that of vanity.

Imitation is the basis of our education, of our whole régime of industrial training, of our social acquirements and convictions. Imitation represents our conduct when we are engaged in accepting a suggestion. Imitation augments our feeling of social unity, and adds to our capacity for social cooperation.

We have a variety of imitative behavior. The most common form is that based on sympathy, as when we smile back in recognition of the smiles bestowed upon us. Even animals flee and stampede for no other reason than that their fellows are similarly exercised. This sort of imitative conduct seems to be an outgrowth of the gregarious instinct and its emotion of security.

Another phase of imitation is shown in the case of the child who imitates the gestures or other behavior of someone who has excited his curiosity or admiration. Adults painstakingly imitate the technique of their more experienced and skilful superiors.

We must recognize the necessity for so controlling the imitative tendency as to lead us in helpful directions. Suggestion is a powerful influence, and we cannot ignore its possibilities for good or evil.

4. *Rivalry*—Rivalry is founded on the two primary emotions of elation and anger. Elation, the emotion of the self-assertive instinct, and anger, the feeling accompanying the instinct of pugnacity, lead to emotions of rivalry when they are a bit further augmented by the

secondary emotion of envy.

Rivalry leads to emulation. There is undoubtedly a tinge of jealousy in it, and oftentimes of sex-consciousness. Rivalry is an important element in both pride and so-called patriotism.

True rivalry is differentiated from anger in that the former does not seek to destroy its opponent. Rivalry is best illustrated by the playful fighting of young animals and by the spirited contests between human beings in connection with games and out-door sports. This trait is strongly present in Americans and in most Europeans, but is only rarely manifested by the Hindus and other Oriental races.

If rivalry can be dominated largely by elation it will minister to our happiness; if anger is allowed to enter too largely into its composition, as a rule, it becomes a factor for unhappiness. It all depends on how we manage its flow and control its origin.

5. *Vanity*—Vanity grows out of the primary emotions of elation and sex, plus those secondary feelings we commonly include in the term pride. We are vain because we enjoy the emotions of elation associated with the instinct of self-assertion, and vanity is peculiarly associated with the sex-instinct in the female. In fact, in a way we might say that vanity is peculiar to the human female, tho men may share this emotion to a lesser degree.

Vanity also sometimes takes on the nature of self-directed pity, sympathy, and love; and when thus exercised it may become a source of much sorrow before we awaken to discover how much unhappiness can be generated by self-pity and overmuch introspection. The simple vanity of the average woman is certainly harmless and altogether wholesome as a promoter of happiness.

6. *Pride*—Pride is built upon the primary instinct foundation of elation and hoarding, plus the psychic state of egotism. We are proud of and enjoy the elation associated with self-assertion. We are proud of our ability to accumulate, to hoard, and are conscious of the poise and power that come with possession. This element of pride is more distinctly a male emotion as contrasted with the vanity of the female. It has more to do with the masculine egotism, self-confidence, courage, and chivalry that go with the male consciousness of superior physical power and endurance.

We must not confuse the impulse of pride with normal and legitimate self-confidence—a sort of self-regarding sentiment. Again, we must not overlook the fact that pride of a certain sort may add much to the satisfaction of living; while if our ego becomes too highly exalted, we may find ourselves entangled in an unfortunate maze of psychic difficulties and social rebuffs that will effectively destroy our peace of mind and undermine our happiness.

7. *Gratitude*—Gratitude is composed of the primary instincts of tenderness and subjection tinged with the secondary emotion of awe. We can be influenced by gratitude in the first place because we are tenderhearted, and next, because we feel, in the presence of certain things or situations, more or less self-abasement, with its emotion of subjection. Then if the exhibition of superiority is carried a bit farther, so that there is [lost word] within our mind a feeling of awe, we are ripe for experiencing the emotion of gratitude. We are ready to give thanks, and the whole state of mind represents one of intellectual appreciation, the dawn of the sense of values and relationships between things and beings.

We experience a feeling of gratitude when we receive something from some source which we regard as superior—from some being of exalted power. We are exercised by gratitude when we are recipients of something at the hands of someone we admire and respect—something which we could not bestow upon ourselves. On the whole, gratitude is highly helpful in its emotional influence on health and happiness.

8. *Awe*—Awe is produced by a combination of fear and subjection. When our instinct of fear is first aroused and we are faced with a superior exhibition of some sort, so that self-abasement functions, and we experience the emotion of subjection, then, if in connection with these primary instincts there is more or less of the secondary feeling of admiration, the foundation is laid whereby we may become more or less overwhelmed by influences and phenomena which we cannot fully understand.

At the bottom of our awe is always the trinity of curiosity, ignorance, and fear.

I fully recognize that awe may be a factor in reverence and worshipfulness, and in such a rôle it is certainly sometimes uplifting and joy-favoring; but, as more commonly experienced, it probably contributes much to our fear, anxiety, and unhappiness. At least, there always exists great danger, through ignorance, that awe may augment our superstitious tendencies and thus lead to all sorts of foolish worry and unwholesome anxiety.

9. *Reverence*—This is the first compound emotion we have considered in which we do not find as a component factor any primary or inherited emotion—unless we are disposed to include curiosity and wonder. As we progress in the scale of human feelings and higher emotions, we shall find more and more of these emotions which are built out of similar emotions; that is, feelings which are combinations of other composite and complex emotions. Reverence is the offspring of awe and gratitude, and this is the first point at which we come in contact with a probable spiritual nature in the human species.

Reverence is that emotion, that state of mind, that basic feeling which is utilized by our higher mental powers or spiritual nature for purposes of worship. Reverence is the first fruit of the progressive evolution of man from his physical nature, up through his instinctive sphere and psychologic development, to the higher realm of spiritual ideals.

Like many other acquired emotions, reverence may contribute to either happiness or sorrow, depending altogether on how we react to its impulse. In moderation reverence leads to a normal attitude of worshipfulness, and it is only when such emotions lead to over-conscientiousness and religious worry that they can be regarded as factors of unhappiness.

10. *Envy*—Envy is built out of the primary emotions of anger and subjection. When we are in the presence of something that causes us to experience the instinct of self-abasement, with its associated emotion of subjection; when this situation becomes a bit irksome, and we grow restive in its presence; when we feel that the joys of living are in some way being interfered with by our superior fellows—then anger is aroused, and we are more or less pugnacious; and if, in connection with this, the acquired emotion of pride is interfered with—if our elation is suppressed and our instinct for hoarding enjoined—then the foundations are laid for envy. Envy is, of course, the basis of jealousy, and has its deeper roots in the hoarding impulse.

We are usually envious of people because they have something we failed to get, or else because they have more of it than we have. Cruelty is no doubt many times merely the expression of subconscious envy and jealousy.

11. *Remorse*—Remorse is founded on the primary instinct of anger and on that more highly developed sentiment which we call revenge. (Sentiments as a class we will define more fully presently.) In order to show how anger is father to remorse, we should explain that remorse is anger directed against ourselves. It is sorrowful regret for one's own acts. You should be angry at yourself for something wrong you have done, but you can't "get mad" at yourself as you can at another person, and so you temper your anger, when self-directed, into the emotional terms of remorse; and now, on the other hand, toward those who have become responsible for your self-humiliation—because one always seeks an alibi—you have a feeling of revenge.

The primary instinct of subjection also is a part of remorse; it comes into play as a result of experiencing the debasement of our emotion of elation. Remorse implies that we have passed through an emotional conflict, and that our choice and its resultant behavior are not such as to warrant self-approbation. We suffer remorse when we are thus disappointed in our decisions and conduct.

Remorse is the mildew of the composite emotions. It withers every noble ambition if it is long indulged. We cannot hope to avoid experiencing it now and then, but we should studiously avoid its prolonged entertainment. We should learn early and skilfully to settle our emotional conflicts, so as to avoid having to live any considerable part of our lives in the debilitating atmosphere of remorse.

12. *Scorn*—Scorn is built out of the primary emotions of anger and disgust. In the presence of the instinct of repulsion we experience the emotion of disgust, and when that with which we are disgusted is interfering in some way with our joy of living, then our pugnacity and its associated anger are aroused, and these together cause us to scorn those who disgust us. Secondarily there comes into play the primary emotion of elation: having permitted ourselves to indulge in scorn, we are wont to enjoy self-assertion and elation. This whole experience connotes intellectual failure on our part to appreciate the worth and struggles of our fellow beings.

Scorn is seldom, if ever, a factor in human happiness. If you desire quickly to lose all your worth-while friends, just begin to indulge in scorn and practise cynicism.

13. *Contempt*—Here is the next step in composite emotions. Contempt is a combination of the primary emotions of disgust and elation. It presupposes that scorn has gone before, and on top of disgust we are elated, we positively assert ourselves; and then, if we add to this the feeling of vanity, as already defined, we have the stage set for profound contempt. It represents, psychologically speaking, a state of exaggeration of ego, on the one hand, and a cultivated oversensitiveness to repulsive things and unpleasant conditions, on the other.

14. *Aversion*—Coming down through the scale of scorn and contempt, we next have aversion, a composite emotion built out of fear and disgust. Not only is something repulsive to us, and therefore disgusting, but we recognize it more or less as a rival; it interferes with

our pleasure of living, and so we tend to give it a wide berth, particularly through fear as to what might be the outcome of too intimate a contact with the object of our aversion.

In the end, through it all, there is the feeling of rivalry, with its deep roots of envy. Aversion may be developed to that point where the fear element subsides, rivalry disappears, and disgust develops into intensified loathing, even horror; strange to say, it is sometimes in this connection that the emotion of wonder, the instinct of curiosity, comes into play, and we oftentimes see that wonder is able to turn loathing into *fascination*. We sometimes become inordinately fascinated by those things that were primarily exceedingly disgusting and for which we experienced the deepest aversion.

Look with misgiving upon the tendency toward overdevelopment of aversion. While we are justified in tolerating its reasonable presence in the face of ugliness and wrong-doers, we must carefully avoid becoming oversensitive and finicky in the presence of the common problems and circumstances of every-day life.

15. *Courage*—Courage is rather difficult to define. It is a composite emotion, having for its basis the primary emotion of elation, associated with the instinct of self-assertiveness. It is probable that courage is elation combined sometimes with one emotion and sometimes with one or more other emotions. Courage is the emotion that leads to acts of bravery, and while it may be associated with many emotions, impulses, and sentiments, it is characterized by the fact that it represents the *triumph of faith over fear*. When courage is in the saddle, the primary instinct of fear, for the time being, has been vanquished.

This, then, represents an effort briefly to define and summarize those fifteen secondary composite or acquired emotions which represent the psychologic evolutions of the twelve primary instincts and their accompanying emotions.

When our more highly organized or composite emotions become clearly defined in the consciousness, when they become *centered about somebody or something*, they acquire the dignity of *sentiments*; and we should know that when we get into the realm of human sentiment we are face to face with such full-grown impulses as love, hate, and respect, not to mention the more profound and higher convictions that sometimes come to possess and control the human mind.

III. HUMAN SENTIMENTS*

Having seen how the twelve primary instincts can be built up into fifteen secondary or acquired emotions, let us take the next step and study the ten human sentiments, which are likewise created out of our primary inherited and secondary acquired emotions. When our emotions are coordinated and focused on some person or thing, we call the feeling a sentiment. Sentiments may be classified as follows:

* In the matter of sentiments, we are beholden to Shand's concept of these human experiences as related to emotions and instincts, and indebted to him for many of the suggestions herewith presented.

Sentiments

Component Emotions

1. PityTenderness + Sympathetic Pain
2. Shame Self-respect wounded by self
3. Jealousy Love + Self-abasement + Anger + (Fear)
4. Revenge Anger + Rivalry + Envy + (Hate)
5. Reproach Anger + Tenderness + Remorse
6. Humility. Subjection + Awe + Reverence
7. Play A certain psychic and physical state
8. Humor Elation + Rivalry + Vanity + Pride
9. LoveTenderness + Sex + Respect + Sympathy
10. Hate Anger + Fear + Disgust + Rivalry

1. *Pity*—Pity has for its foundation the primary emotion of tenderness and a sympathy which is so profound as to become almost painful. We are always hurt when we indulge in pity. There is sometimes associated with pity the subconscious feeling of superiority and more or less condescension. It connotes that we are playing the rôle of a charitable benefactor, and deep down in the subconscious mind there is the emotion of elation, tho, of course, we would never for a moment admit this to our more superficial consciousness; nevertheless, the truth is that there is behind some forms of pity more or less elation.

When moderately indulged, pity may augment our capacity for happiness; but if over-developed it undoubtedly dampens joy and burdens the mind with anxiety.

2. *Shame*—Shame is a sentiment which represents the wounding of our self-respect by ourselves. Our elation or self-assertion has received a blow, and our eyes are open to the fact. It is sometimes a very prominent factor in our expression of surprise, and no doubt in early life it is the chief element of so-called bashfulness—that is, bashfulness in its more or less unrecognized state.

Shame lies at the bottom of much that passes for shyness and modesty. Shame results from the consciousness of a struggle going on between the primary emotions of self-assertion and self-abasement. We suffer from a sense of shame when anything occurs which will tend to lower us in the esteem of our fellows. If our conduct is such that we must frequently be ashamed of ourselves, we must reckon that such self-consciousness is bound to detract from the sum of our personal happiness.

3. *Jealousy*—Jealousy is a deep-rooted sentiment. It is a combination of self-abasement, with its feeling of subjection and inferiority, in association with the fear emotion. It embraces more or less of the love impulse, and on top of all this there is present an element of anger.

We feel that our happiness is being jeopardized. Pugnacity asserts itself. We propose to offer resistance, and anger comes in as the first speaker of this emotional trio. Of course, it is nearly always anger against a third person, and sometimes it involves a lessening of the feeling of tenderness for the second person; and further, as factors in the composition of this green-eyed monster, we must put down envy and wounded pride.

Probably only a mother's love is so unselfish as to demand no reciprocation and therefore be incapable of jealousy. While animals and very young children seem to be resentful of attentions paid to other individuals, such sensitiveness can hardly be regarded as full-grown jealousy, since the latter sentiment presupposes the presence of a highly developed consciousness in association with profound affection.

We are exercised by jealousy when the one we love gives to another that affection which we think belongs to us. We come to feel an emotion of ownership in our friends and loved ones, and the loss of their devotion wounds our pride and self-esteem. When one's self-regarding sentiment has been severely wounded, there is likelihood of arousing the vengeful emotion associated with resentment and anger.

The green-eyed monster is ever the foe of happiness. If we permit jealousy to dominate the soul, joy is certain to depart. There is a sordid selfishness associated with this sentiment that precludes a tranquil state of mind.

4. *Revenge*—Revenge is a complicated, deep-seated human sentiment. It starts out as rivalry, then grows into envy; disappointment breeds anger; in the end it is sometimes propelled by that demon of all human sentiments, hate. We may become angry at an insult which assails our elation and assaults our ego. We may seek retaliation because of some real or fancied wrong. It may be that a social struggle has challenged our pugnacity and thus aroused our anger and in the end embittered us to the indulgence of hate. Revenge is the full growth of tolerated bitterness and emotional disappointment.

Our whole system of law, penalties, and punishments is but an effort to substitute the machinery of public justice for the older order of private vengeance. The desire for revenge follows on the heels of conscious *resentment*. We more particularly resent public slights or insults, and our vengeful emotion is shown in our studied efforts to "get even" with the offender.

We also resent insult or injury to our family, tribe, or country, and thus may develop family feuds and national animosities with their bloodshed and wars. The savage, oftentimes, when brooding over his insult and his contemplated revenge, is found to "sulk in his tent." Vengeance is a deliberated sort of resentment in contrast with the sudden and unrestrained emotional reaction of anger, tho all revenge is rooted and grounded in anger—the pugnacious instinct.

The soul who seeks revenge is sad and self-centered. Joy attends the forgiving spirit, while sorrow and regret are the final rewards of all who allow their better natures to be ravaged by the barbarous desire for personal vengeance.

5. *Reproach*—Reproach represents human anger modified by the primary emotion of tenderness and restrained by the secondary feeling of remorse. It represents a state of mind which betokens the exercise of self-control and suggests the possibility of administering correction or criticism under the guidance of reason and judgment. When a person we love does something distasteful to us, we reproach him, saying, "Oh, how could you do it!" If another had offended us in similar fashion our anger would have been aroused.

This is a sentiment that can easily be made to serve the ends of either happiness or sorrow—depending on how much intelligence and corrective planning attend its indulgence. Wisely exercised reproach may lead to repentance and reform; overindulged, it can bring about undue depression and protracted sorrow.

6. *Humility*—The sentiment of humility is founded on the primary emotion of subjection, self-abasement, in connection with the secondary composite emotions of awe and reverence, and its real understanding is to be found in the individual natures of these components. Humility is often mistaken for piety, and sometimes what we call humility is merely the manifestation of some physical disease or the outward exhibition of an unfortunate inferiority complex.

Like reproach, humility can be made to minister to both joy and sorrow. Undoubtedly, a normal state of humility predisposes one to the reception of many blessings in disguise; while overmuch self-depreciation can only bring on depression and sorrow. We must maintain a reasonable self-respect if we are to retain the joys of wholesome elation.

7. *Play*—The biology and psychology of play are more or less obscure. The play emotions are hard to isolate and define. There is room here for almost endless discussion; there are at least half a dozen different theories respecting play, its nature and origin.

The play tendencies of individuals and peoples are largely influenced by the behavior of the ductless gland system—the temperament. Disposition is the sum total of our inherited instincts and their associated emotions. Character is the final product of our habit formations, our acquired characteristics based on both our dispositions and temperaments.

Play is altogether too complex to be a simple instinct. It is likewise too complicated to be classed as an emotion. It seems best to include it among the more highly organized sentiments.

Whatever we may say about play, we are compelled to recognize that it is almost wholly the servant of joy. Play is the real sentiment of good cheer, good will, and good times. Human beings are unquestionably most happy when they are in the midst of care-free and childlike play.

8. *Humor*—Humor is probably founded on the basic emotion of elation connected with the inherent instinct of self-assertion. We no doubt feel just a bit superior to everything that excites our humor, tho the element of surprise also may contribute to our laughter. There is also an element of rivalry in humor. We enjoy a joke just a little better when we have gotten the best of the other fellow. We laugh more heartily when the other fellow steps on a banana peel than we do when we pass through the same experience ourselves. There is an element of vanity in humor, and probably some pride, tho we must admit that of all human emotions, more particularly sentiments, this one of humor is the most difficult to define. I am not at all satisfied with any definition that has thus far been formulated. There is an undoubted temperamental bias to all our humor.

Like play, humor is consistently the hand-maiden of joy. Seldom, if ever, does good humor culminate in sorrow. Humor is a sentiment peculiarly and exclusively human, and a “good story” can always be depended upon to promote good fellowship and develop the

cheery side of human nature.

9. *Love*—We are now approaching the climax of human sentiment—the most complex combinations of feelings and emotions. Human love is founded on the emotion of tenderness, having its root in the parental instinct. It next branches out and takes root in the sex-hunger emotion, having its association with the reproductive instinct; and then the element of sympathy appears. There is not only the feeling of tenderness in sex-companionship, but also of increased security from association with our fellows. In a small way, the gregarious instinct is enacting its rôle; there is safety in numbers, and then there comes into play that human emotion which is so difficult to define, namely, *respect*. I have not included it among the emotions, nor among the sentiments, but I bring it in here as an attribute, an auxiliary of love.

Love is that peculiar feeling of adoration and affection for a person whom we have come to regard as the one among a thousand and altogether to be desired over and above all the rest of creation. Love is a full-grown sentiment. It is the sentiment of sentiments, the all-embracing emotion of emotions, the supreme passion. Of course, it varies in degree and nature according to its component parts and in accordance with the mind and character of the individual whom it exercises.

Around this master-sentiment may gravitate a host of other profound emotions and sentiments—even convictions. As one psychologist has pointed out, when a man has acquired the sentiment of love for a fellow being he is apt to experience the tender emotion when in the presence of this person, fear or anxiety when the loved one is in danger, anger when his friend is threatened, and sorrow if anything serious befalls this individual. Likewise, we rejoice when our loved ones prosper, and feel grateful toward those who befriend or assist them.

Love is the one divine element in human nature, the well-spring of our profoundest joys and most lasting happiness. The wounding of our love may indeed cause the keenest suffering, and the failure to find it reciprocated may cause the bitterest disappointment; nevertheless, the whole experience of loving and being loved is so transcendent, so human, and so everlastingly beautiful, that we can only reckon that the whole experience, from first to last—up hill and down, through sunshine and storm—serves to stimulate the mind and inspire the soul, while it enormously expands our capacity to experience joy and understand happiness.

10. *Hate*—Having reached, in love, the acme of sentimental development, it only remains to define hate. Hate is, after a fashion, nothing more nor less than perverted, misdirected love. It represents the prostitution of sentiment, so that the place of respect and love comes to be occupied by a terrible quartet of anger, fear, disgust, and rivalry. Hate is the full-grown sentimental counter-part of the magnificent impulse we call love, and, of course, it likewise varies in degree in accordance with its component emotions and is modified by the character of the one who indulges it.

Little need be said about hate and its relation to happiness. We all know that hate is incompatible with joy. There is simply no way to get comfort and delight out of the

indulgence of hate—it is truly the arch-demon of all the little devils who are subversive of joy and destructive of happiness.

Such, then, is the story of human sentiments. It should be remembered in this connection that *pleasure* and *pain* are not emotions. They are feeling-tones that serve either to prolong or to cut short other emotions. *Excitement* and *depression* play the same rôles.

Sorrow is a term used synonymously with grief. It represents the opposite of happiness. It is after all hardly a sentiment or an emotion. It is a feeling-tone; one might define sorrow as representing degrees of feeling-tone. Sorrow is aroused by extremes of emotion, by a mixture of sentiment and overruling passions. It implies the overthrow of our hopes, ambitions, and affections; in its most extreme manifestation it is the feeling we experience when we suffer the agony of despair.

Joy, like sorrow, is a term connoting degrees of feeling-tone. Both joy and sorrow may qualify all other emotions. We may have any degree of sorrow and likewise any degree of joy associated with any and all other human emotions and sentiments. Joy is perhaps most typically expressed in our play-functions, when we have an opportunity for self-display in association with extremes of pleasurable emotions, enjoyable master-sentiments, and impassioned happiness. It is the pleasurable feeling aroused by any and all intense emotions, master sentiments, strong passions, and profound convictions.

Happiness constitutes the goal of our emotional life. It stands for that psychic and physical state of being which represents the sum total of pleasure that can be experienced by a highly developed personality. Happiness is the ideal of human existence. It is the realization of joy raised to the *n*th power, and may qualify and intensify all other human emotions.

IV. HUMAN CONVICTIONS

We have now come to know how twelve basic inherent instincts and their accompanying emotions can be combined and organized into fifteen secondary or composite emotions; and how, still further, these twelve primary emotions and fifteen secondary emotions are capable of being concentrated upon some object or person and thus can be combined and built up into the ten master-sentiments of human experience.

Now we are ready for the next step. These primary instincts and secondary emotions, together with their more complex resultant sentiments, constitute the material out of which we build the seven controlling convictions of human experience, and they may be classified as follows:

<i>Controlling Convictions</i>	<i>Component Sentiments</i>
1. Friendship.	Sympathy + Love + Respect
2. Altruism.	Elation + Pity + Sympathy
3. Patriotism.	Security + Rivalry + Pride + Vanity
4. Religion.	Wonder + Fear + Gratitude + Subjection
5. Occupational Loyalty.	Security + Pride + Rivalry
6. Family Loyalty.	Tenderness + Sex + Pride + Jealousy
7. Social Conventions.	Fear + Security + Shame + Pride

In further explanation of convictions we may offer the following suggestions:

1. *Friendship*—Friendship is the first and basic human conviction. It is more than an emotion, it is greater than an impulse, it transcends a sentiment. There is something profound about friendship at its best. It is undoubtedly based on the sentiment of love, and has in association with it many other emotions, including, no doubt, both sympathy and respect. Friendship is the equivalent of love plus loyalty and more or less of the sex-element. It is so influential in human experience that there appear to be no lengths to which it will not go to assert itself and to justify its existence.

2. *Altruism*—Altruism is also a conviction, at least with many people. It is, no doubt, founded on the basic emotion of elation and the instinct of self-assertion. We have a peculiar pride and satisfaction in knowing that we are big enough and good enough and kind enough to be altruistic. Then the emotions of sympathy and pity come in for their part. We are sympathetic with those we help, and sometimes we go so far as to pity them. In fact, altruism is a sort of glorified pity, exalted sympathy, idealized elation, if you please—a species of social patriotism.

3. *Patriotism*—Patriotism is no doubt founded on the primary emotion of security, associated with the herd instinct. We defend our country and our institutions because we need their protection. The element of rivalry comes in, starting out sometimes quite innocently, and ending, when our own security is threatened, with the arousal of pugnacity and its accompanying anger; and that, many times, means war. Also into our patriotism come the emotions of pride and vanity, altho we would not care to push these to the foreground in our own consciousness. Patriotism simply means loyalty to the common herd. It is a species of social courage.

Many an individual coward is patriotic in crowds; he is brave when he is in an army, but he would not be so patriotic if he should be left alone in defense of his ideals. In certain aspects, patriotism is a sort of camouflaged pride, a species of disguised anger, rivalry, and revenge, which we persuade ourselves is justified by the circumstances of the hour.

4. *Religion*—Religion is a conviction having its roots in the emotions of fear and awe, as inspired by a belief in the superhuman. Closely associated with religion is the feeling of righteous indignation, which is so often aroused by the emotion of tenderness connected with the instinct of parental love and devotion. From a biologic and psychologic standpoint, religion grows out of wonder and curiosity. To speculate on what is beyond the skies—on the life that may exist beyond this one—is an inherent impulse of human nature. The element of fear also comes in. Ignorance always tends to beget the feeling of subjection and self-abasement, while the presence of material or other blessings tends, in sensitive natures, to inspire a sense of gratitude to the invisible power that runs the universe.

Religion is, after all, merely that behavior which is dictated by conscience and directed by one's spiritual mentor, assuming that mankind is indwelt by some sort of spiritual entity.

5. *Occupational loyalty*—We all enjoy being loyal to our business connections, our profession, our trade, etc., or to our social set. This conviction is likewise based on the feeling of security, the safety that comes from tribal association. It has also in it the emotions of pride

and rivalry, much after the fashion of patriotism. We like to be loyal to the satisfaction of our creative pride, the fact that we have constructed things. It is a form of clan or minor herd pride.

6. *Family loyalty*—Family loyalty is a deep conviction. It grows out of the primary instincts of tenderness and sex, in which the more unstable emotional elements of pride and jealousy play varying parts. It is the basis of human society and embraces a wide range of emotions and sentiments. The home, through its association of husband and wife and the rearing of children, and through this group's contact with the outer world, develops some of the highest emotions and sentiments of the human heart. It is the basis of the ideal of social life in this world.

7. *Social conventions*—The conviction that we should be more or less loyal to the conventions of society, has for its origin the two primary emotions of security and fear. We feel more secure in the tribe, and we feel safer if we live as the tribe lives. But the tribal tabus, the social requirements, are important to keep, not only because of this security, but because we want the respect and admiration of our fellows.

Then, too, the element of fear definitely prevails here. We fear the result of ignoring the time-honored customs and traditions of our race and kin. Still further, the element of pride comes in. If we obey we are exemplary citizens. If we disobey we bear the stigma of reproach. And still further there is an element of shame. We don't want to be numbered among the sinners and inferiors. Of course, this whole conviction is largely a matter of education, training, and social example, and here, for the first time, we arrive at the place where education becomes the dominant rôle, the chief factor in the creation of a human conviction.

EMOTIONAL REPRESSION AND RATIONALIZATION

As civilization progresses and primitive man comes more and more to occupy his mind with ethical ideals and to recognize moral standards, many of his primitive desires and natural emotions are found to be greatly at variance with these new standards of thinking and living.

This conflict between the biologic instincts and emotions and the later acquirements of civilization is sometimes very annoying to the individual. The average person seeks to avoid this unpleasantness by rigorously suppressing the objectionable thought, the offending complex. This emotional repression is nothing more nor less than resorting to the technique of pushing out of the mind some unacceptable feeling or objectionable experience. For instance, it is entirely possible for one to experience the emotions of love and hate for the same person, in varying degrees and under various circumstances. It is entirely possible for us to love a person because of one set of traits and to hate the same individual because of the possession of other traits which are objectionable. This is not compatible with peace of mind, however, and sooner or later we set about repressing either our love or our hate.

Right here I want to take issue with the exponents of the purely Freudian theory of emotional repression. The teachings of Freud tend to lead us to believe that it is always the objectionable, the undesirable, the unworthy thought or emotion that is suppressed; but in actual experience I do not find this to be the case. I find that individuals are given to suppressing either the good or the bad, the desirable or the undesirable, according to circumstances. For instance, one may not only suppress sex thoughts which interfere with the religious ideals, but one may also come to the place where he suppresses religious convictions so as to give more free expression to sex emotions. Any of our profound emotions may conflict and thus lead to more or less suppression.

DEFENSE REACTIONS

Now these suppressed wishes, feelings, emotions, and experiences are sooner or later organized in the subconscious into definite complexes; and it can easily be imagined that such complexes, existing as they do in the subconscious mind, are all the while directly at variance with, and opposed to, our every-day consciousness and behavior.

One of the results of this systematic suppression of unpleasant and undesired experiences is that we are subconsciously on our guard lest these experiences be discovered and be brought to light. This is one of the explanations of the so-called defense reaction. Professor Gault has called attention to this in his Introduction, and, as he has suggested, we are all the while on the defensive, trying to put up a front to society which will be directly opposite to that which we are more or less conscious of having suppressed and put away down into the

subconscious realms of the mind.

The defense reaction is nothing more than an exaggeration in our conscious behavior of the very opposite to those things which we may be conscious of having suppressed in our inner life.

Some one has suggested that the cynic is really sentimental at heart; the bully is really a coward; the hard-boiled and unromantic bachelor may be, after all, very affectionate and tender, as is sometimes shown when he falls in love in middle life. From adolescence his affections and sentiment have been repressed, and now they all but engulf him as the accumulated repression breaks loose. We fully understand how those who have an inferiority complex often develop a superficial expression of vanity and conceit, extending even to the borderland of braggadocio. There is no question that sometimes prudishness is only the result of the more or less conscious and long-continued suppression of normal sex desires. In fact, when we find ourselves experiencing any set of unusually strong and insistent emotions, either likes or dislikes, we would do well to suspect that we may be indulging in some sort of defense reaction in a subconscious effort to compensate for feelings and impulses of the opposite sort which we may be continuously and subconsciously suppressing. This is particularly true of prejudices and certain forms of intolerance. It is very difficult for the average person to tolerate in other people those things which he is consistently and persistently suppressing in his own experience.

THE TECHNIQUE OF REPRESSION

Emotional suppression really consists of two distinct factors: the effort to push unpleasant things out of the consciousness and the further effort to prevent their return to consciousness.

We are desirous of suppressing those things which are unpleasant to our sense of self-respect, which offend our ego. We are particularly intolerant of those which assault our personality-pride. Again, we are all the while desirous of getting rid of those ideas, feelings, and memories that offend our moral ideals and ethical standards. In fact, we practise the suppression of any sort of psychic experience that is unpleasant to our every-day consciousness.

Summarizing in another way, it may be said that we make an effort to suppress all unpleasant memories, and to repress those primitive instincts which are inconsistent with current civilized society; that is, our unconventional biologic urges.

We form a habit of doing these things. We cultivate a memory for the agreeable, and try to put out of our minds the undesirable and unpleasant. Of course, we do not wholly succeed; we all have unpleasant memories which bob up now and then, and which we would give almost anything to be finally rid of. Nevertheless, on the whole, we do succeed in the practise of this repression technique; we actually do get rid of the majority of those things which we dislike to entertain in our daily consciousness. This habit of holding on to the pleasant and suppressing the unpleasant is shown in many phases of our daily lives, as, for instance, in the fact that we may easily mislay a bill, but are hardly likely carelessly to throw about a large

check which has come in as a remittance.

When certain primitive urges or other unpleasant feelings and experiences have been consistently and persistently suppressed, they become organized at length as subconscious complexes; and when that takes place, it is possible for these complexes of repression to seek to gain for themselves action and expression in the life of the individual by indirect methods and through such round-about channels as the various neuroses—fatigue, anxiety, unreasonable fears, hysteria, and even semi-conscious experiences.

There can be little doubt, as will be shown in subsequent chapters, that much of our hysteria is, after all, an effort on the part of these imprisoned complexes to seize the domain of personality for the time being, and thus to find temporary relief in a roundabout mode of expression. We know that this is true, because, by properly disposing of these psychic skeletons hidden away in the closet of the subconscious, we are often able to relieve sufferers from various forms of the psychoneuroses.

In the case of persons of strong constitution and balanced nervous systems, it is, of course, possible to indulge in this sort of subconscious repression throughout a lifetime without precipitating serious nervous disturbances. It is in the case of those who are constitutionally neurotic that this sort of subconscious suppression results so disastrously.

RATIONALIZATION

Rationalization is another pitfall into which neurotic individuals early fall. We are not always able to suppress our undesirable memories and unpleasant emotions so as to keep them entirely out of the conscious memory, and so we gradually fall into another species of self-deception in an effort to get along more peacefully with this undesirable residue of psychic life which we are not able completely to suppress. We are tricked by our own inner consciousness into practising a form of deceptive insincerity upon ourselves. We develop as system of false logic designed to enable us either to reject or to compromise with certain unacceptable facts which are constantly coming to us from the outside world, and which we cannot bundle up as an unpleasant complex and sink into the oblivion of the subconscious.

The vast majority of people fear to make new discoveries. We are afraid we shall be upset by them; that the smooth running of our day-by-day consciousness will be disturbed by newly discovered facts. We dislike to be constantly rearranging our ideas and readjusting our standards of thinking and living. We like to go on somewhat after the care-free manner of nursery days. We don't like to have our mode of life interfered with, and so when anything disconcerting comes up we develop a system of logic which enables us, with some show of conscious fairness, to reject the new and hold on to the old, altho strict sincerity would compel us to admit that the old ways are wrong and the new ways better; and so truth has a rugged, uphill road to travel over the inertia of human prejudice, this inborn disinclination to remodel our ways.

Another feature of the practise of this foolish reasoning: we all object to having our pride injured. We dislike to view our naked selves. We really hate to be shown up, and so we are

always on the defensive, lest we be led into some sort of practical admission that will injure our pride, debase our ego.

We are particularly eloquent—and, on the surface, logical—when we argue against some idea which we dislike, which we have made up our minds we will not accept; this sort of foolish argument will be kept up in the mind until we develop an intense hatred for the thing which we have settled we will not accept. You know the old saying, “Convince a man against his will, and he’ll be of the same opinion still.” Now, this process of arguing inside ourselves against what we wish to keep out of the mind has been called *rationalization*. And rationalization is nothing more nor less than a technique of thinking designed to help us in repressing those things which are unusually difficult of suppression. If we find that forgetfulness and the ordinary pushing of undesirable ideas out of the consciousness will not serve to repress them, we resort to rationalization.

We employ rationalization in our efforts to smooth over and cover up the tender spots in our experience. It is marvelous with what ingenuity we will take some real weakness of character and argue ourselves into recognizing it as a virtue. If it were not so tragic it would really be amusing to see patients, in the consulting room, rationalize after this foolish and insincere fashion, even going so far as to try to convince the doctor that the obvious plague-spots of the mind should be treated with consideration and tenderness rather than be attacked with rude determination to effect their complete obliteration.

We are all conscious of more or less that is inconsistent in our living. We dislike to get right down to brass tacks and settle our conflicts, harmonize our complexes, compose our disagreements, and otherwise put our mental house in order. We much prefer this easier and lazier method of psychic rationalization. We want to do something which, our better nature or mental censor tells us, isn’t just right; and so, instead of resorting to true logic, calling conscience to the bar, hearing the testimony and settling the matter in accordance with the real facts, we resort to rationalization, which is nothing but a dishonest way of finding a reason for doing what we want to do or believing what we want to believe.

THE TECHNIQUE OF RATIONALIZATION

Rationalization is resorting to the magic methods of the nursery. In the days when we were children in our cribs, if we wanted something, or desired to be rid of unpleasant surroundings, we merely uttered a cry, and as a rule we succeeded in getting what we wanted; but as we grow up, we are forced to abandon our cry-baby stunt; and thus, to the adult, rationalization becomes a substitute for his infantile crying. Foolish reasoning becomes the new magic wand with which he can make his situation in life more pleasant and acceptable. He “kids” himself into believing that the thing he knows is not right, is, after all, not far from right, and perhaps is altogether just and righteous. This is a subject which we will discuss more fully in a later chapter.

Many neurotic individuals almost wear themselves out with this constant process of rationalization, this ever-present effort to find a reason that suits their purpose and

convenience. Presently this becomes a subtle habit of one's inner life; it becomes the accepted technique of the subconscious, and the subconscious censor accepts this as the normal mode of reasoning and so is able constantly to push up into the conscious mind entire groups of logical arguments, ready made, thus putting us only to the trouble of saying "yes, yes," and going on with this merry whirl of self-deception and dishonest living. In time the subconscious becomes so expert that it is able day by day to "kid" us into the enjoyable belief in whatever we wish to believe.

We are peculiarly prone to rationalize on such matters as politics, religion, sociology, and even prohibition. I am amused frequently in my office at the way people reason about such a commonplace thing as tobacco. This is a subject on which I seldom find any attitude that is fair, sincere, or scientific. Those who use tobacco rationalize in its behalf much as a mother would argue in defense of the virtues and beauties of her own offspring. The majority of those who do not use tobacco likewise rationalize against it in the same unscientific and unreasonable fashion.

But the great mischief of this habitual rationalization, this effort to sustain our self-pride, to bolster up our self-defense, is that it interferes with our progress in life. It is the great enemy of education, the great foe of truth, and we cannot hope to break ourselves of this tendency toward rationalization until we cultivate the habit of looking at things honestly, fairly, and squarely—until we learn to face facts willingly, to desire the truth, to accept all the evidence and to reserve judgment until the evidence is all in. We must wait until we are thoroughly convinced that we have been honest with ourselves and then render judgment, and, like real men and women, abide by that judgment and see that it is enforced in our consciousness.

If will is the chief executive of the human intellect, and our various mental powers may be regarded as the cabinet of the psychic administration, then we can only come to regard reason as a wholly servile attorney general, ever ready to supply its master and chief executive with apparently logical and superficially legal reasons for doing anything that its master really wants to do. The sophistries of the subconscious, together with the deceptions of selfish human nature, will furnish sufficient evidence to enable the court to hand down decisions which will in every sense justify us in pursuing the course we really want to pursue.

Human reason is far from being true to logic and loyal to truth. Man, after all, is ruled by his heart and not by his head; I repeat, whatever it is that you really and truly long to do, reason will sooner or later find justification for your doing. Of course, to some degree, all this is modified in the case of the enlightened and disciplined mind of the educated individual.

ILLUSTRATIONS OF EMOTIONAL SUPPRESSION

For the purposes of this narrative we will call a certain young woman of twenty-seven, Jane. Jane was a movie fan, and how the silent drama did thrill her! Hardly a day passed that she was not at the movies—indeed, she went twice a day, and sometimes three times. This constant arousal of her emotions without adequate opportunity for expressional relief

gradually wore on her nerves until she was compelled to seek medical advice. There is no question in my mind that this tendency to allow the mind to dwell upon exciting and emotional scenes in the motion-picture house, this repeated arousal of the strongest emotions that surge in the human breast, without providing any opportunity for the mind and body to respond to these emotional urges, represents a real and very deleterious strain upon the nervous system.

At the height of this movie debauch, our young lady began to entertain a secret love for a man in the neighborhood; he was unmarried, but was already engaged, and this affection she bottled up in her own soul, never telling anyone about it until she confessed it in the medical office.

Here, you see, is a vicious combination of circumstances: A highly unstable and semi-hysterical woman in almost constant attendance at the movies, having her emotions inordinately aroused, is all the while suppressing a secret love affair securely within the confines of her own soul; and, as this experience always does, sooner or later, it got her—she collapsed. After six months of training, in which she was taught how to indulge in legitimate self-expression—in her case more particularly in public singing—she was eventually able to go to the movies once a week without any deleterious effect, and in time succeeded in eliminating and sublimating her affection for the man, who was married soon after her collapse. She seems now well on the road to complete recovery, and there is no reason why she should not enjoy good health, as she has learned how more properly and naturally to live her emotional life.

Emotional troubles, of course, are not all due to suppression of sex-complexes. As I shall endeavor to explain in a subsequent chapter, there are other complexes which are capable of making quite as much mischief when they are unnaturally suppressed. To illustrate this, let me relate the story of a young married woman with an inordinate social ambition. She was what you would call, in modern terminology, a social climber. She had the entrée into society, but she didn't have the wherewithal properly to carry on. There was more or less trouble at home because of the money she spent on her social activities, but, notwithstanding all this, she aspired to gain the top round of the social ladder, and she had all but succeeded when her overexertions and her suppression of the mixed emotions connected with her social climbing resulted in her undoing. She had a nervous collapse—literally went to pieces.

This woman confessed to me that she used to “burn up” with envy at the thought of her social rivals; that she indulged in anxiety to the point of emotional white heat when she heard of the achievements of women in her social set who were gaining on her or forging ahead of her. She told me that since early girlhood she had indulged this inordinate longing for social leadership. In this particular case there was a great deal of suppression on her part of the urge to power. The emotion of pride was involved in her manifold activities, and she was very sensitive in this respect. When she met with any temporary defeat or social slight, she was intensely hurt, and she harbored the desire for revenge against those who chanced to incur her displeasure.

She was much interested in charitable work, civic enterprises, etc., and rationalized to herself that all her social ambitions were justified because of the good she would do when she once attained the unquestioned leadership of her set. Her foolish and deceptive subconscious made her believe that all her strivings were unselfish and that her ambitions were wholly altruistic. Nevertheless, the crash came, and it was in a sanatorium that she found herself when she began to realize what a fool she had been. She afterward said to me: "Doctor, it doesn't pay to harbor inordinate ambition. It doesn't pay to want too much, and most of all it doesn't pay to suppress in your mind and nurse in your heart, grievances, grudges, or any other emotional sore spot."

SPIRITUAL ANEMIA

Not long ago I came in contact with rather an unusual case of mental disturbance brought on by emotional repression; it further illustrates my contention that ill health from emotional suppression does not always indicate that the suppressed emotions are of a sex nature. This is a case of the suppression of religious feelings. The subject was a business woman about forty years of age, who had had average religious training in her youth, and who had given more or less attention to her religious emotions until she was about thirty years of age, when she came to Chicago and became connected with a large concern. Business and social activities and other "cares of this world" multiplied, and before long she found herself quite neglectful of all things religious. Notwithstanding her absence from church and her apparent indifference to everything of a spiritual nature, she had the constantly recurring conviction that she should pay more attention to these matters; but she kept putting this aside, suppressing it. She rationalized, telling herself that the religion that had been taught her at home was largely superstition, but she gained little comfort from this line of reasoning; so she began to indulge in the rationalization that she was too much occupied with her other duties now, and would attend to these matters in the future; that she perhaps had paid too much attention to religion in the past, and that it was due to herself now to take full advantage of her business and social opportunities. She became fairly happy with the life she led, all the while subconsciously—and sometimes consciously—suppressing, repressing, putting out of her mind, this urge to spiritual growth and development.

Years went by and her health began to fail. She grew nervous, began to suffer from fatigue and eventually from insomnia, and it was only then that she sought medical advice. You can be sure it was quite difficult to find out what was the matter with her. She didn't know. A thorough examination revealed that she was organically sound. She professed to be happy in every respect and assured us that there was no emotional conflict going on in her mind; but the sounding-line of emotional analysis revealed in the depths of her soul this suppressed conviction, this subtle struggle, this spiritual starvation, this suppression of religious emotion—and when these things were brought out and placed before her she was frank to confess that the root of her trouble had been found. Before a week had gone by she had established connection with a group of friends who were engaged in religious research, friends from whom she had been more or less separated for years. In two or three other ways she made

connections of a religious or spiritual nature, and within one month from that time she was a new woman, gaining in weight, to some extent relieved of her fatigue, and enjoying refreshing sleep almost every night.

I have never in all my professional experience seen a more remarkable or rapid transformation than this one which followed the discovery of repressed emotions and their normal elimination.

VII

EMOTIONAL CONFLICTS

As the human mind develops from infancy to the adult status it is destined to become the arena wherein many a severe psychic struggle will take place. In this developing mind many a real conflict is certain to occur, not to mention the thousands upon thousands of "sham battles" which will be fought.

Freud lays great emphasis on sex. Adler, on the other hand, emphasizes what he calls the ego instincts, the wish for power and the desire for security, as the primary motives involved in these manifold emotional struggles which are so productive of mischief in the case of certain human beings who are unfortunate in either their heredity or early training, or both. Freud holds that man's behavior and all his nervous troubles are largely the result of conflicts which go on in the mind between the sex urge and various other groups of emotions. The inordinately nervous are supposed to have oversuppressed their sex emotions.

Adler and other psychologists would have us believe that man is more largely controlled by the urge to dominate his fellow men, to master as much of the world as possible, and, in connection with all this, to attain the greatest measure of comfort and achieve the highest degree of security against the harshness of nature and the attacks of one's fellows.

To the behaviorists, mind is all but non-existent, so they can hardly accept the modern theory of the subconscious. They are forced to recognize the phenomena which we commonly associate with the subconscious, and endeavor to explain these things in their particular terminology by saying that the subconscious is merely a designative term which indicates the *unverbalized* domain of human thought. By this they mean the objective psychic world in contradistinction to the verbal consciousness. When one sees something or conjures up a psychic image of it and has a name for it, that is supposed to be the domain of verbalized thought and roughly compares with what psychologists call consciousness; but when one finds he is confronted with an object, either in the external world or in the mind, for which he has no name, this unverbalized or nameless domain of thought is what the behaviorists are wont to compare with our so-called subconscious.

I am willing to subscribe to the doctrine that both the sex urge and the ego instinct are universal and are highly important drives, and that they are undoubtedly connected with human happiness and various nervous disorders; but I am not willing to admit that these are the only instincts and emotions which are concerned with the cause and manifestation of nervous difficulties.

Emotional analysis has told us much about these mental complexes, and it should be borne in mind that mental conflict arises out of the fact that the human mind is not a psychic unity. The intellect of man is built up from thousands upon thousands of more or less individualized complexes. If a person were, mentally speaking, a single and coordinated unit, there could be no such thing as a mental conflict. His ideas, feelings, and emotions would always be consistent and harmonious. But the human organism is not a unit. Each organ and

each domain of psychic life has its own interest to look after. This entails conflicts and such other adjustments as displacement, substitution, repression, sublimation, etc. The child is multipotential as it starts out in life. Much of its future depends upon the nature of its early identifications, transferences, etc., just as later on we can prognosticate much of the child's future from the sort of hero it settles upon. Children suffer from both too much and too little mother love, so that a child sometimes grows up looking in later life for some of the love-satisfaction of which he was deprived in his early years.

Mental conflict manifests itself in many different ways. It often appears as a conflict with reality. The demands of real life are sometimes too painful for a neurotic individual gracefully to accept. The facts of life may be in direct and strong opposition to his wishes. Many people, especially children, refuse to face the painful facts of actual life, and try to go on living in a world of fantasy—a world in which their desires are supposedly easy of realization. Such nervously predisposed individuals refuse to adapt themselves to the real world in which the rest of us live and work.

The second form of conflict arises through objection to authority. Certain highly imaginative and fantastically neurotic persons disdain to subject themselves to the hardship of routine drudgery, and they eschew submission to any and all forms of authority. These sensitive souls dislike everything which in any way conflicts with the desire to assert one's individuality, or to dominate one's associates and surroundings.

Another form of conflict occurs between certain groups of instincts or emotions, as between fear and anger, or love and ambition. Mental conflict always produces a feeling of restlessness and anxiety, and when greatly prolonged, as it is in the frequently recurring conflict between love and duty, the feeling of anxiety becomes so pronounced and persistent that it may well be called an anxiety neurosis.

CLASSIFICATION OF INSTINCTS AND EMOTIONS

As regards the study of emotional suppression and emotional conflicts in relation to various psychic states and nervous disorders, I would offer the following classification or grouping of human instincts, emotions, and urges:

I. *The life urge*—the self-preservation group.

1. The hunger emotion associated with the instinct of nutrition—the food urge.
2. The fear emotion associated with the instinct of flight—the immediate personal safety urge.
3. The emotion of anger—aroused in association with the instinct of pugnacity. A state of mind and body aroused by the interference with any and all other forms of human emotions and associated instincts—the urge of self-defense.
4. The personal comfort urge—the pleasure group of human emotions, embracing those instincts which lead to personal comfort and the enjoyment of pleasurable feelings as a

part of the satisfaction of living. This group of feelings has to do with an effort to avoid the emotions of disgust associated with the repulsion instinct; to avoid those experiences for which we have an aversion and otherwise to make pleasant as far as possible our earthly sojourn.

II. *The sex urge*—the reproduction group.

1. The emotion of sex hunger as bound up and associated with the reproductive instinct. The human sex urge has many ramifications, extending out into the intellectual, social, and artistic domains of the mind.
2. The super-emotion of love as aroused in the human mind as the expression of numerous associated emotions, instincts and sentiments.
3. The emotion of tenderness and pity, as associated with the parental instinct.
4. The complex emotion of admiration and devotion as associated with that more highly complex super-instinct of the human species which might be denominated family loyalty.

III. *The worship urge*—the religious group.

1. The basic emotion of wonder as associated with the instinct of curiosity, which is shared with many of the animals.
2. Reverence and awe—composite human emotions built up from certain inherent animal instincts.
3. Gratitude and humility—two other composite emotions experienced in the evolving human intellect.
4. Remorse and self-reproach—also composite human emotions dependent on the recognition of standards of right and wrong.
5. Altruism—the super-emotion, sometimes amounting to an urge, which leads toward the practise of the Golden Rule.

IV. *The power urge*—the egotistic group.

1. The emotion of elation—that supreme sort of self-satisfaction which is associated with the primary animal instinct of self-assertion.
2. The hoarding emotion as an expression of the instinct of acquisition—the property urge of the human species.
3. The emotion which finds satisfaction in the pride of creation—the urge associated with the constructive instinct of the species; the urge to create, build, organize, and manufacture.

4. The composite emotion or urge of courage and its associated feeling of rivalry.
5. The pride of personality—that composite emotion of human beings which has associated with it at times, and in varying degree, such human emotions as envy and jealousy, and which accounts for no small amount of man's effort to advance and achieve.
6. Hate and revenge are twin demons which, together with their wicked offspring, scorn and contempt, do so much to wreck human happiness and produce the sorrow of the world.

V. *The social urge*—the herd group.

1. The emotion of security which is bound up with the gregarious or herd instinct of the human species.
2. The emotion of personal subjection which is associated under certain circumstances with the instinct of self-abasement, the willingness to subordinate the pride of personality to the needs of the case.
3. The composite and more complex emotions of imitation which insure our conformity to custom and explain our adherence to the social conventions.
4. Friendship—that complex human emotion which makes life worth living, and which is supremely manifested in loyalty to one's friends, occupation or profession, as well as in the super-urge of patriotism. And all these high human emotions are held together by sympathy.
5. Play and humor—emotions and instincts indeed hard to define, but characteristically human and highly social in their manifestation.

And so it will be seen that I am disposed to recognize five great groups of human instincts and emotions which are capable of warring upon each other, as well as of disagreeing and contending in a minor manner among themselves. It will now be in order to take up these groups one by one for more detailed consideration as to the manner in which they participate in those emotional conflicts which are supposed to be the cause of psychic restlessness and other forms of nervous irritability.

Long-drawn-out psychic conflict in the case of men and women with otherwise well-balanced nervous systems produces little or no immediate trouble; but such disturbances in the day-by-day psychologic life of the individual do tend to produce irritability, sometimes making him thoroughly grouchy and disagreeable. In the case of those having unstable and highly irritable nervous systems, the results are sooner or later disastrous. In the case of normal people we have a gradual onset of chronic worry, anxiety, or even so-called neurasthenia; in the other group of cases we have a more or less spectacular onset of an hysterical nature, a nervous breakdown, a profound depression, or a more or less complete

collapse—a real hysterical blow-up.

Let us now take up these five different groups of emotions and study the manner in which they cause conflicts and thus contribute to the production of various forms of nervous troubles.

I. THE LIFE URGE—THE SELF-PRESERVATION INSTINCTS

I am convinced that in the case of the average human being *hunger* is the dominant emotion. The nutrition instinct is the basic biologic urge of the animal world. There is a real reason why nations are willing to go to war in order to insure or increase their food supply. There is a real reason why neurasthenics become food faddists and why hypochondriacs are wont to select the stomach as the favorite organ upon which to bestow their affectionate solicitude.

The whole question of health, physical comfort, and personal efficiency belongs to the domain of these self-preservation complexes. Aside from ulcers, gall-stones, and chronic appendicitis, most of our digestive disorders are neurotic in origin. No first-class stomach will do good work if you spy on it. Just as soon as we begin to watch our digestion it immediately proceeds to get out of order, and thus is able to exhibit something to reward us for our trouble. No other vital organs are so subject to the influence of introspection as the stomach, and no other part of our vital machinery is so likely quickly to get out of order as the result of psychic conflict. The digestion is the most vulnerable of our internal mechanisms when it comes to reflexly suffering as the result of anxiety and psychic conflicts. Nausea is one of our most common neurotic symptoms.

The emotion of *fear* is one of the basic urges of the animal world, and one that has in past ages served a valuable purpose in the preservation and continuity of animal species, as well as one of the greatest of all emotions as regards its influence upon human health and happiness. An entire chapter will be devoted later to the study of this important subject.

A great deal of mental trouble and many nervous disorders are the result of frequent indulgence in fits of *anger*—that emotion which is experienced in connection with the arousal of the instinct of pugnacity. Every animal is born with an instinct of self-defense, and pugnacity is the name given to this inborn tendency to resent interference with normal enjoyment of the various emotions associated with the natural instincts of living.

But anger is very upsetting, not only to the immediate psychic state, but also to the ductless gland system of the body. Intense anger is known both to influence the thyroid output and to accelerate the function of the suprarenal gland. There is a direct physical as well as psychic effect, which inevitably follows the indulgence of anger.

We get into a great deal of psychic trouble because our personal comfort is interfered with, or because we desire certain comforts or luxuries which we find it difficult to obtain and at the same time keep peace with our emotional complexes, particularly those involving our conscientious convictions and social obligations. We also get into serious difficulty because of our effort to avoid things which are *distasteful* or *disgusting*. The more artistic type of human being is in frequent conflict with the realities of his environment in this effort to avoid

stimulating his instinct of repulsion. It is laudable to be artistic, to have delicacy of feeling; but it is unfortunate that these attainments are so often allowed to cause psychic conflict because we are unable to provide ourselves with all the necessities and luxuries which our ideals of living may include.

When all is said and done, however, these biologic urges connected with the preservation of life are very powerful in dominating the human mind and in determining the motives for our subconscious reactions. One thing we can be certain of—the subconscious will always be alert in prompting us to give the right of way to these basic biologic emotions and instincts. No matter what other emotional complexes may be involved, if they get in the way of these basic biologic instincts, we may be sure that the subconscious will lend itself to that side of the conflict which promises victory for the self-preservation drive.

When these biologic urges get mixed up with the conscience, as in the case of our health faddists and those who become over-attentive to the welfare of some particular part of their anatomy, they are harder still to manage.

I could fill this book with the recital of cases illustrating how the economic struggle—the fight for food, raiment, and shelter—often comes to constitute the chief conflict of the human mind, and in the end unfailingly serves to break down the nerves and destroy the health in the case of susceptible individuals. The results of financial worry are too well known to require the citing of cases by way of illustration.

In the lower strata of society, many people live but a few days ahead of hunger or come face to face with it day after day, yet the fact seems to make little impression upon their nervous systems; but among the more intelligent and better educated classes, this experience sets up serious anxiety. Many forms of our business worries come about through going into debt and from overambition, and have to do not only with an effort to provide food and shelter, but also with the fourth group of our instincts and emotions—the power urge.

HEALTH FADDISTS

Last winter I met a pale, anemic young woman, who got it into her head that she must take cold baths every morning. She didn't like them, but she thought they were good for her, both physically and as moral discipline. She had three or four friends who carried out this practise faithfully, and she decided that it would cure her tendency to have so many colds in the winter, and relieve her of her habitual chilliness. Her reaction was poor, and the cold bath left her with a headache that lasted half the day; and yet conscience drove her on. I find that she has always been overconscientious about something of this sort. She always has a health complex. She nearly killed herself once through overconscientiousness about diet; then she took up physical culture and tried to walk ten miles a day, until she lost thirty-five pounds in weight; next she adopted bathing as a conscientious health fad.

In helping her overcome this harmful practise we have tried to educate her on the subject of conscience, so that there is some hope she will be delivered from this habitual tendency to pick up fads and become hyperconscientious over them. No matter how good your health

fad may be, don't overdo it. Treat it as a health measure, not as a religion.

Too bad we can't take the people who are careless and indifferent—happy-go-lucky folks who are digging their graves, as it were, with their teeth—and teach them how to postpone their funerals, without having them go to the other extreme and fall into the doctor's hands, sick and depressed, all because of a health complex! Too bad we can't think enough about our stomachs to avoid serious indigestion without, at the same time, thinking so much about the digestion as ultimately to bring on nervous dyspepsia!

Some people have been so unfortunately brought up, or are naturally so hyperconscientious, that they begin to look around for trouble the moment they come to enjoy good health and experience real happiness. Now, it is not for me to become a conscience for any of my readers—you must determine for yourself what is right and wrong for you. I can do nothing better than to admonish you to follow your conscience for the time being; but I can't help feeling sorry for the earnest souls who go through life unable to enjoy what seem to me to be wholesome, healthful pursuits, just because their consciences tell them these pursuits are wrong.

II. THE SEX URGE—THE REPRODUCTIVE INSTINCTS

Next to the food urge—the self-preservation instincts—I believe that in the case of human beings the sex urge is the most important and dominating influence which has to do with our psychic and nervous life.

When I use the word sex, I have in mind the whole sweep of the sex life. I am thinking not merely of the physical manifestation of sex, but also of its intellectual and social, not to say artistic, ramifications. We even run here into the spiritual domain. We can't envision sex without the recognition of that master-emotion which, for the want of a better word, we call *love*. This is not the place to undertake the definition or analysis of love. Suffice it to say that it is a sex-origin emotion, as also are those emotions of *tenderness* and *pity* which are so intimately bound up in the parental instinct—an instinct which is also of sex origin. Much of our *admiration* and all of that superb devotion which we find in family life, have their roots in the sex urge. True, much of our sex emotion, particularly as manifested in the course of our coeducational activities and as indulged in family life, is altogether subconscious; but, none the less, it has its origin in sex. Many of our most beautiful and sentimental human relationships have a sex origin.

The disciples of Freud, through their propaganda, have already overtaught the public regarding the fact of the ever-present sex conflict in the case of the average civilized human being. Little need be said at this time to emphasize sex conflicts. They are too well known to need special mention. Not a human being who lives on earth to-day has failed to pass through, not one, but many a sex struggle. The sex urge, in the case of the average normal and healthy individual, is altogether too real to need comment, and the conflict between this primitive urge and the restrictions and inhibitions of modern social conventions and moral requirements is altogether too well known to call for much comment, albeit most of this struggle actually takes place deep down in the subconscious mind.

I am particularly anxious that young men and women, or those of middle age, should not worry on through their lives over some minor sex or social mistake of their early years. I am referring now to minor misconduct, not to anything that would lessen our self-respect or our conscientious devotion to the Seventh Commandment; but as a physician I am constantly meeting individuals whose pathetic stories are illustrative of how easy it is to commit some little indiscretion in youth and then worry the rest of a long life over the supposed harm done, or to magnify the moral consequences of such minor mistakes and youthful indiscretions.

I think the time has come when the medical profession ought to try to help people to be delivered from wrong notions and exaggerated ideas of both the physical consequences and the moral bearing of these trifling missteps. We can have high ideals and steer clear of real moral turpitude without going so far afield as to make false moral issues out of minor mistakes. While there is much more to be said along this line, perhaps this is not the proper place to discuss it; but I believe the time has come to set a multitude of people free from exaggerated sex worries which destroy their courage, ruin their lives, and many times, as they tell the physician, even prevent their marriage because they are fearful they are unworthy, when they are guilty of nothing more than that of which a vast majority of the whole population is guilty.

It is astounding how the least little thing connected with sex, even a passing thought or a dream, can become hooked up with conscience in the minds of certain types of people and just about ruin their lives if someone doesn't lead them out of this wilderness of misunderstanding and despair.

THE MODERN SEX PROBLEM

The physician is confronted with a real problem when it comes to trying to solve some of these sex conflicts. The better teaching of the past twenty-five years regarding the fact that sex dreams in both young men and young women are normal has done a great deal to help in the case of the average young man. The young men of to-day do not worry so much over these matters as did the youth of a former generation, neither are they such easy prey of the quack doctors. The average young man has learned, through parental instruction or from lectures, that these so-called "wet dreams" are perfectly normal phenomena, and they do not worry over them as their parents and grandparents did. I think we are beginning to meet with fewer and fewer young men and young women who have brought themselves into serious nervous conditions through worry over masturbation. In recent years physicians have become courageous enough to tell the truth about this. Parents are becoming better educated along these lines in that, while they endeavor to teach their children to refrain from such practises, they do not go to unwarranted extremes and threaten them with feeble-mindedness, insanity, and epilepsy in case they occasionally indulge in them.

I don't see how we are going to avoid the so-called social problem as long as old Mother Nature gets people ready for marriage when they are fifteen or sixteen years of age, while the demands of civilization and the standards of decent living, to say nothing about the time required to secure an education, prevent marriage for a period of almost a dozen years after sex maturity. Meanwhile our ethical requirements and religious inhibitions draw the line

against all forms of irregular sex relations. For my part, I see no solution of this problem except in teaching young men and women that they can be entirely healthy and efficient without sex relations, and in stopping our erroneous teaching that masturbation is all but fatal to the integrity of mind and health of body; and that we further seek to enlighten our youth respecting the naturalness and even desirability of so-called sex dreams.

During the week of this writing I had a call from a young man whose life had been all but ruined as the result of the well-meant teachings of his mother respecting the dire results of masturbation. When about seventeen years old he ran across a sex book which painted this picture in colors even more lurid than his mother had dared to employ. He decided to break himself of the habit, and there followed a long period in which he would first succeed in quitting his practise of self-relief, and then would again fall back into the habit, while all this time his religious experience was fiercely at war with his natural animal nature. The result was that the young fellow's health was wrecked; he was afraid to get married; he developed a first-class inferiority complex. It was pathetic to see what had happened to this otherwise splendid young man, all because he had been fighting himself—nobly but unintelligently—trying to maintain an ideal supposedly based on truth but in reality founded on error.

And so, no matter to what degree I might let myself in for criticism in some quarters, I would prefer to trust my destiny to truth. In this study of the tricks of the subconscious, we are trying to develop a passion for the truth, a willingness to face facts. While clinging tenaciously to our ideals, let us be wholly unafraid of truth. Let us teach sex-control on the basis of true manhood and enlightened self-discipline, and not of unwholesome fear based on the teaching of untruths.

In dealing with sex complexes in unmarried men and women, I have long since come to the place where I tell them to instruct their consciences to keep guard over the Seventh Commandment and to leave the minor phases of sex feeling to the care of old Mother Nature.

Under ordinary circumstances, I believe in instructing these young people that—in the matter of sex feelings, dreams, and practises which do not involve immoral relations of the sexes—the whole group should be taken out of both health and moral realms; that the harm to health comes purely through the channel of worry over the fear that they are unhealthful or over the conviction that they are morally wrong. And again, I could fill this book with the stories of young men and young women—more particularly young men—whose lives have been ruined by this worry, and who have been set free and come to enjoy health and happiness the moment they came to realize that they had been mistaught.

It is indeed a great relief to reach the place where we can make an end of this unfortunate conflict between the sex urge and the religious urge; but the problem is never solved until the individual himself reaches the place where he becomes master of the fine art of compromise—that art of psychic adjustment which enables him to live at peace with both his sex nature and his religious nature. It is entirely possible to bring about such a state of mind without injury to the health and without doing violence to our legitimate moral standards or true spiritual ideals.

COMMON SEX CONFLICTS

I remember the case of an unmarried woman, a college graduate, about thirty-five years of age, whose mother had spent almost her last dollar on doctors, nerve specialists, and sanatoriums for her. She was the victim of subconscious sex repression, but she had no idea that her trouble was due to a lifelong shunning of everything that seemed to pertain to sex. Her mother had so successfully taught her about the dangers of sex and of evil men, and had so sheltered her younger years through watchful care and a convent education, that this woman little realized the nature and cause of her trouble; and she was inexpressibly shocked when, after a prolonged study, her medical adviser finally dared to suggest that her trouble was prolonged emotional suppression, and that the suppressed complexes were largely of a sex nature. But she was intelligent—a college graduate—and altho it required two or three months for her to accept this diagnosis, finally she did face her problem from that viewpoint. It took a year or two to readjust her mental status and to harmonize her conflicting emotions, but in time she arrived at the place where she made a successful compromise between these contending complexes, and from that time on, physically and nervously, she began to improve. Within another year she had achieved complete victory over her troubles and was able to emerge from years of semi-invalidism into a life of usefulness as principal of a school.

I cite this case because it is not generally known that women suffer from these subconscious sex conflicts to the extent they do—a blind spot in popular science due to the fact that the sex nature in the female is not so well able to express itself in consciousness as in the case of the male. When the male is undergoing a sex conflict he is usually more or less aware of the nature of his difficulty, but in the case of women, serious disorder may rage in the subconscious and the individual be altogether innocent of the real nature of the psychic conflict.

One more case to illustrate how subtle may be our sex conflicts, and how little the real nature of this subconscious warfare may be suspected: A devoted mother had an only child, a son. This boy was rather an extraordinary chap in that he never gave his parents much trouble; he was a dutiful lad, of high ideals. While the mother found it very difficult to consent to his going off to college, she finally did. He was home at every opportunity to visit his parents, and two or three times during the year the mother would go East to visit her son in college. They spent their summers together, and all went well until he was about twenty-four years old, when he announced to his mother that he was going to get married. That was five years ago. This devoted mother was immediately seized with a feeling of nausea. She lost her appetite, began to lose in flesh, and in spite of all that medical science could do, was soon bed-fast, having lost forty pounds in weight. Repeated examination by many physicians failed to disclose anything organically wrong with her.

The son postponed his marriage for a year. The mother improved slightly, but as the wedding-day neared she relapsed. She was feeling so poorly when the day arrived that the church wedding had to be abandoned and the son was married in her bedroom. Apparently she wished him well. She was very fond of the new daughter-in-law, but she was just heart-broken at the loss of her boy. She was unable to face this fact, to reconcile herself to

the marriage of her only son; and so things went on for a couple of years after the marriage. The mother was no better. She was a nervous wreck, as physicians repeatedly told her husband. Finally the family physician concluded that this was all a psychic defense reaction to the marriage of her son. He came to see me, and said that he thought the woman was pouting; that she was in the same class with the spoiled child who, when his feelings had been hurt, wanted to run away from home, or go out and eat worms and die, so that his parents would be sorry they had treated him so rudely.

The doctor's diagnosis was right, as the sequel proved. No doubt this mother at first subconsciously realized that her son probably would not leave her and get married if she were sick; he was too good a boy—he thought too much of his mother to do that; and then, when this ruse failed, there was nothing to do but go on with the program in the hope that he might possibly come back. Not that she, of course; consciously wanted him to desert his wife. There was, in the subconscious mind of this woman, still an unreasoning hope that she might win her point and keep her boy; and by the time this method had been pursued three or four years, the habit of being sick had been formed; there was nothing else to do but go on.

It is hard to tell what would have happened had not the husband and the doctor intervened. Now that all this has been dragged into the light of day—tho I assure you she was reluctant to admit it at first—the foundation has been laid for a complete recovery. It is about six months now since this mother faced the facts, abandoned her bedridden life, and enlisted in the battle against subconscious domination. She is now well on the way to victory, and is liberating herself from the nefarious tricks which her own mind had been playing upon her these many years. She finds increased health and happiness in the idea that, instead of losing a son, she has gained a daughter; but it has been a battle royal, and has entailed the employment of every intellectual and moral power which this mother possessed to enable her to overcome her subconscious enslavement.

III. THE WORSHIP URGE—THE RELIGIOUS EMOTIONS

In common with many of the higher animal species, man shares the emotion of *wonder* which is associated with the instinct of curiosity. Curiosity leads man into adventure and exploration. It is at the bottom of our scientific instinct of inquiry. Out of this emotion of wonder, sooner or later, there comes into the human mind, partly through fear and the realization of one's helplessness in the presence of the ruthless forces of Nature, the deep emotions of awe and reverence; and, ere long, worship of something outside of man himself is sure to follow.

In connection with this group of religious emotions and the group associated with worship, are to be found our sentiments of *gratitude* and *humility*—humility in the presence of that which is superior and awe-inspiring, and gratitude for those things which we enjoy and which contribute to the comfort of living. Such emotions also imply that we suffer from *self-reproach* and *remorse* under certain circumstances, as when conscience tells us we have not attained our standards of right and wrong; and all these feelings and sentiments lead to the super-emotion or conviction of *altruism*. Our whole charitable, humanitarian, and

philanthropic structure is built upon the emotions belonging to this group.

And it is with the emotions of this group that the sex instincts are prone to quarrel. It is the warfare between these two sets of complexes that produces really serious nervous troubles, and yet the suppression of the worship urge alone is sometimes sufficient to bring about real nervous difficulty.

I have a man under my care at the present time who is in a precarious condition, fussing over his religious beliefs, and all but going insane as the result of religious worry. For three and one-half years he has worried about having left one church and joined another. Mind you, in the same denomination. One church expected too much of him—he shrank from participating personally in too many religious activities—and so he left it and joined the other church. Now he thinks he has committed a grave sin, and feels he should go back and join the former church; but, of course, in his present mental state, if I should allow him to do this, he would only worry more. He can't make a decision now that would be satisfactory forty-eight hours after it was made.

I have had to put him to bed under the care of a nurse and let him rest and see if he can get his thinking under control. I will allow no conversation of a religious nature for awhile. It will probably take six months or a year to get this man straightened out, and have him recognize that religion is only a part of life down here; that we have other duties. I will have to show him that a man has a duty to provide for his family; that he must get interested in his wife and four children. I quoted Scripture to him—that “a man who does not provide for his family is worse than an infidel.” He must think about his duty to his brothers, his partners in business, who now, the two of them, have the whole responsibility of the concern on their hands while he is taking the rest cure.

THE RELIGIOUS COMPLEX

Then here is the case of a minister, fifty-one years of age. How many times he has helped distracted souls to see that they had not committed the unpardonable sin! And now, as the result of over-anxiety for his flock, overconscientiousness in his parish duties, this man has experienced a collapse. He is in the throes of nervous prostration, and his one great worry is that he has committed the unpardonable sin.

I am having to use on him all the arguments and reasons that he probably used on those he labored with in years gone by, and I am having the same trouble to get him to see these things in his present state of nervous exhaustion; but he admitted a few days ago that it was probably true that one who had committed the unpardonable sin, whatever it was, would be the last to worry about having committed it. So, for the time being, he has accepted the idea that he has not committed such an offense, and thus some of the terrible anxiety is being lifted from his mind and he is giving old Mother Nature at least a partial chance to heal his distressed soul.

How many times we are confronted with these overconscientious individuals who have had a passing thought to commit some crime or to indulge in some moral dereliction, and who then commence worrying! It is not enough that they resisted temptation and came out

victors; they feel as if the thought must have been equivalent to the deed. They begin to pray for forgiveness and worry over having been morally, if not actually, guilty of the crime; it only takes a few weeks of this to bring them to a terrible state; they are sick in bed, in the doctor's hands.

I can cast about among my patients and friends and pick out a score of such individuals. Splendid, noble minds, and the highest type of Christian souls, but they are all the time harassed because of these suggestions of evil which pass through the mind. Perhaps the thoughts are engendered by something in the morning paper, by neighborhood gossip, or by some spontaneous association of ideas that comes up suddenly in their minds. Whatever the source of these so-called wicked thoughts, they accept full personal and moral responsibility for the presence of them in the mind and begin to blame themselves for a weakness of which they are wholly innocent.

Then I am constantly meeting people who are worrying over something in their religion, something that has to do with the interpretation of the Scriptures. It seems to me that we should all remember in reading the Bible that it was revealed and indited through, and written by, the Oriental mind. Our religious guide-book has come to us, as it were, through another race. Those of the Occidental mind do not think in the same manner as did the men and women of the races who gave expression to the ideas we find in the Bible, with their symbolic, allegorical, and other mystic illustrations. We sometimes have serious trouble when we place too literal a construction upon these sacred writings.

I could cite dozens of cases of ill health and unhappiness all brought about by worrying over some little point in the Scriptures which to me seemed to be highly symbolic and subject to numerous possible interpretations; yet these overconscientious souls seize upon some set and formal interpretation, and then all but ruin their lives trying to make everything conform to this arbitrary notion.

Conscience is quick to seize upon religious traditions and observances and demand implicit homage on the part of the mind. It is not strange that this domain of religion should prove to be the one in which conscience does its most strenuous work when it comes to producing worry and those overanxious states of mind which are so fatal to health and happiness.

IV. THE POWER URGE—THE EGO GROUP OF INSTINCTS

Inordinate ambition, the grasp for power, the desire to rule other people, the craving to enjoy the emotion of *elation*—that supreme sort of self-satisfaction which is associated with the primitive instinct of self-assertion—results in the building up of a group of complexes which are certain mischief-makers in the human mind. No doubt the urge of ambition is in many cases tied up with our food urge—with the basic biologic urges having to do with self-preservation; nevertheless, this group of emotions results in the building up of the power complex and is thus able to carry on trouble-making conflicts with other emotional groups which go to make up one's psychic life.

It is in this domain that we encounter the *hoarding* urge—the saving and accumulating emotions associated with the acquisition instinct. Here is where all our *avarice* or covetousness has its roots—the love of material things and the desire to accumulate property. The miser represents this group of emotions in the saddle; all others, aside from the hunger urge, have been put to flight.

As the bird builds its nest, the beaver its dam, and the bee its honeycomb, so human beings have inherited an *instinct of construction*, the urge to make things, and there is a certain peculiar and justifiable sort of pride which is attached to our ability to work up the raw material of nature into the finished creations and the exquisite productions of manufacture. But the purpose of all of this in modern civilization seems to be to amass wealth, to get power, to gain the advantage over our fellow men; and it is this power-urge which so frequently comes in conflict with our complex of idealism and our religious urges.

But there are many things to be desired about the controlled exercise of the power urge; it involves not merely pride of personality and the exaltation of ego, but the generation of *courage*, which is associated with the instinct of rivalry. Courage is productive of good in many ways. We look upon courage as an altogether desirable emotion, but it has its root in this feeling of rivalry, in this desire to win the game, to secure the advantage, and to come in possession of the power associated with material triumphs.

Perhaps from the viewpoint of health and happiness, the most remarkable features of this whole power urge are the emotions of *hate* and *revenge*, which are so often associated with our status of temporary defeat, or our failure to secure the desired advantage over our fellows. And this goes on to where it indulges itself in *scorn* or even *contempt*, all of which is thoroughly unwholesome from the viewpoint of one's psychic peace and health.

As an illustration of how this power urge can make us trouble, let me relate a recent experience with a patient, a middle-aged man, who for ten or twelve years had been carrying on a protracted psychic conflict:

This man was employed by a large corporation, and while not perfectly fitted, temperamentally, to fill the position which he so earnestly coveted, nevertheless, he felt he was in line for promotion. To his amazement, one morning, he found that the man he feared as his rival had really been advanced to the position he had hoped himself to fill. Instead of being a good sport, a good loser, and congratulating his colleague on his promotion, he became increasingly morose and sour. He nursed his grievance and carried on such a continuous conflict in his mind over this disappointment that he became very disagreeable in his home. He grew increasingly taciturn and uncommunicative. This sort of thing went on for almost two years, and then his wife and father unitedly took charge of affairs and decided that something must be done. He was led to seek medical advice, and the source of his trouble came out in the course of a thoroughgoing emotional analysis.

Without being conscious of the fact, this man was gradually wearing himself down so that he would not have to go to the office to work. He admitted he looked forward to the time when he wouldn't be able to go to work in that office any more. He really wanted to get sick. He thought of deliberately getting in the way of an automobile so that he might have an

accident and thus be able to get out of going down to the office where he had to see his hated rival.

This man had too much pride to resign—to quit and acknowledge defeat. He didn't know of any similar position that he might obtain, and so he resigned himself to the fate of grieving and worrying over the matter until he would be put out of commission, and then, by medical orders, he would be given a furlough, and thus would be afforded at least temporary deliverance from the situation which so galled him. And now that the whole story has been dragged out into the open, now that he has come, at least partly, to recognize the technique of his gradual loss of health and happiness, he has expressed a willingness to start in earnestly at the task of reconstructing his morale, changing his viewpoint, and reeducating his mind to accept the facts as they are. But this is going to be a long pull; it will take this man the best part of a year to finish the job he has so determinedly set out to accomplish. Determination, stamina, persistence, however, will win the fight.

WHAT PRICE WEALTH

Not long ago I was consulted by a business woman forty-five years old, who complained of indigestion and insomnia. She had struggled up from a position as stenographer in a manufacturing concern to that of secretary of the company, and through business connections had become very wealthy, largely because of fortunate real estate investments. Early in her career she became, as it were, money-mad. She worshiped power. To frequent proposals of marriage she turned a deaf ear. While it later developed that she had considerable of the maternal instinct and a great love of children, she was content to satisfy this affection upon a constantly increasing group of nieces and nephews.

As fortune continued to smile upon her and money accumulated rapidly, she became active in the speculative world. She determined to be a millionaire, and in this ambition she was successful. How she enjoyed doling out stipends to her poor relatives! I think there was only one fly in the ointment, and that was that her mother did not live to see her in possession of this money and power. She had a home in the city and another in the country—horses, automobiles, servants galore—but at about the time when one should be capable of the greatest enjoyment of life, she began to sicken and sorrow. She suffered from headaches—or, rather, distressful feelings in the head, hardly severe enough to be called pain—indigestion and restlessness; and then began the long story of consulting specialists and going to sanatoriums. This went on until she was on the threshold of melancholia. For more than a year she tried to carry on with her work, but her business associates advised her to take a leave of absence.

Emotional analysis revealed that the power urge—the group of ego emotions—had come to monopolize the psychic life of this woman. Everything aside from the food urge and the desire for a few of the comforts of life had been slowly but certainly subdued and driven out of her mind. Even those all-powerful emotional groups which we call sex and religion had been all but vanquished. Her social instincts were blunted and stunted. The mind of this

woman had become one great domain for the indulgence of the hunger and thirst for power. Wealth, because of its potential power, was her whole object and aim in life. The conflict between the power urge and the other urges had been waged to the defeat of every emotion and to the subjugation of every sentiment that did not have to do with the augmentation of her power to do as she pleased and power to wield over other people. It came out in the emotional analysis that she had even dreamed of securing control of the corporation of which she was an officer, but since it entailed disloyalty to her business associates she balked at that; and, as far as I can see, this is the only thing that ever stopped her; she would not betray her official trust.

I don't know that I have ever seen a human being undergo more excruciating suffering than this woman went through in an effort to regain health, in an effort to reinstate her religious, sex, and social emotions. Certainly no one trying to overcome the drug habit ever suffered more than she did in carrying out the régime we imposed upon her. At first, she was disinclined to believe that it was an emotional matter—that her power urge had enslaved her soul and vanquished all the higher sentiments and emotions of her psychic life; but finally she accepted the diagnosis and began the battle for her rehabilitation. The struggle was long and severe. Persistently for eighteen months the program of reeducation and reorientation proceeded, and this woman eventually gained the victory, tho to-day there is something missing; she has a home without children of her own; in a world full of people there is no one with whom she can enjoy that intimate comradeship which is found in the normal family life; but she did win the fight with her dominant and slave-driving urge to power.

A similar case in my experience is that of a woman who had risen to a position of trust and honor in the commercial world, and whose nervous system broke down under the stress and strain, because she was trying to subsist alone upon the enjoyment of things material. But when brought face to face with the program she must follow in order to get well, she frankly and flatly said, "No, I won't do it." And as far as I know she is going on, up and down, hysterical now and then, melancholic most of the time, trying to fight it out. Being blessed with a strong physical constitution, she is able to take the punishment and continue the losing struggle. What a pity that a splendid woman should sell herself into lifelong slavery to this master slave-driver, the power urge!

V. THE SOCIAL URGE—THE HERD GROUP OF INSTINCTS

Here we run into another domain where we have trouble between our sex urges and religious convictions. Sometimes we find patients suffering from a triangle of this sort—confusion between sex urge, religious conviction, and social inhibitions. You see, there is an emotion of *security* which is bound up with this gregarious or herd instinct of the human species. We feel just a little more secure when we are in company with those of our kind; and, of course, this entails the emotion of *subjugation*, the instinct of self-abasement which we feel in the presence of our superiors or in that of superior numbers of our own group.

Human beings are *imitative*; the child is the most imitative of all animals; this is why we get along when organized in social groups. We instinctively tend to conform more or less to

custom and to follow in the wake of the established social conventions.

This social instinct leads through that most exquisite of all human relations—*friendship*—to loyalty to our social, industrial, and professional groups, and on to that super-urge, patriotism. Through the social instinct is developed *sympathy*, and sympathy runs through all the emotions belonging to this so-called social urge. Both *play* and *humor* are bound up in this group of social instincts.

Some time ago a woman of more than average culture and breadth of mind, about sixty years of age, was led by members of her family to seek medical advice because of the fact that she had come more and more, over a period of twelve or fifteen years, to withdraw from all social contacts. She ceased to attend family dinners, no longer paid visits or received visitors, and eventually even stopped associating with her near relatives. Day after day she spent reading books—all sorts of books, but mostly novels. Gradually she came to the place where she did not want to leave her own room, and didn't even want to get out of bed—she had her meals served in bed, and just read, and read, and read.

We found, in studying this woman's emotions, that she had always had this conflict in the domain of the social urge. People bothered her, social engagements fatigued her. Maternal instinct was able to assert itself until the children were raised, and then she surrendered to the life-urge instincts for food, comfort, and personal pleasure. She had an income from an estate which took care of her physical wants and made her independent. The power urge was therefore dormant. The sex urge was latent—more or less of the past. The worship urge influenced her for a while, but eventually she gave up reading the Bible and other religious literature because it stimulated her conscience, and she rationalized that she had done enough of that in her earlier years. And so even the religious instinct finally succumbed. She sold herself into complete enslavement to ennui, to indifference, and settled back to do what she most wanted to do—entertain her mind by the continuous performance of those actors and characters who go to make up the world of fiction.

This woman is now in the midst of the painful and laborious process of coming back into the world. In every way possible we are trying to awaken her social consciousness. Step by step, day by day, she is coming back; but it is a long, up-hill road. The grade is steep, and the self-discipline is severe. Far better to maintain a harmonious psychic life, to avoid these conflicts which sooner or later must wear one out or lead to the surrender of a part of our mental life. Far better to live so as to enjoy the lasting pleasure of disciplined thinking and controlled emotions, which are a part of the broad-minded and fearless reaction to all the obligations of human society.

UNSATISFIED WISHES AND SUBLIMATION

THE essential forces entering into the development of human character are the primitive inherent instincts, and the early environment, education, and training, together with what might be called pride of personality. While these influences may be regarded as the major factor in character formation, we cannot overlook the fact that our *desires* and *wishes* enter very largely into the fabric of personality growth and development.

One of the great objects of all education and child culture is to assist the child in getting control of his instincts. As we regard our inherent instincts and emotions we recognize that, concerning any one of them, three possible things may happen—repression, substitution, and sublimation.

1. *Repression*—The instinct may remain natural or it may be more or less repressed. There is in all very young children a tendency to exhibit themselves. Our modern sense of modesty is not inherent; it is wholly an acquirement. If the instinct to “show off” is not modified in the child by education and training, we have a case of more or less reprehensible exhibitionism; yet in this necessary suppression of a primitive instinct we often engender serious conflicts in the human mind. The infantile urge to exhibit one’s person may later manifest itself in the proud exhibition of one’s elaborate mansion and its unique porcelain collection.

One of the most interesting cases of repression that I ever dealt with came to my notice about a dozen years ago. A young woman of thirty-two was suffering from recurrent spells of nausea and actual vomiting. This went on for a year, until the patient was reduced almost to skin and bones. Six weeks in the hospital made little change in her appearance. All efforts to stop the vomiting had been unsuccessful, and it was in this extremity that emotional analysis was resorted to. The patient insisted there was nothing on her mind, and no doubt she was sincere in this affirmation; but in less than a week of patient probing we succeeded in uncovering the fact that about four years previous to this trouble she had begun to entertain a secret affection for a certain unmarried man who resided in a town not far from the village in which she lived. She saw this man frequently in both a social and a business way. He had never paid any special attention to her, but she gradually grew to be very fond of him. After this secret love had been indulged for about a year, she decided it was only folly on her part to lose her heart to someone who didn’t care for her, and she resolved to conquer it. She began systematic repression, and believed she had succeeded. Her appetite was poor for a few months, but after another year had gone by she found herself in apparently good health and going along quite unmindful of her futile romance, and this status prevailed for a year or two—until one day when she received the announcement of his marriage. The moment her eyes fell upon the engraved card, a sickening feeling struck her in the pit of the stomach. She tried to pull herself together, and she insisted that it was some time after that—at least several days, if not several weeks—before the nausea began to creep upon her, to be later followed by persistent vomiting. By the time she called medical help, she had

become convinced that she was the victim of some malignant internal disorder. It did, indeed, look as if this woman was going to vomit herself to death. Between twenty-five and thirty physicians were consulted at one time or another, and all recommendations had been of no avail.

When her attention was called to the fact that her nausea came on simultaneously with the receipt of the news of the marriage of this man, she began to see the light, and her mental life was adjusted accordingly. Within three weeks the vomiting had ceased. The patient began to gain in weight, and she made, from that time on, an uneventful recovery. She said, when finally dismissed, "Doctor, even yet I can hardly realize how a buried idea could produce such grave physical symptoms." And that is exactly it. An ordinary normal individual may suppress emotions ad infinitum and not have the health seriously affected, but in the case of certain people with delicately balanced nervous systems, when their wishes are unfulfilled and are forcibly suppressed, this repression begins to manifest itself as a physical symptom of some kind—nausea, dizziness, trembling, weakness, and so on.

2. *Substitution*—Through training, the tendency of the child to exhibit oneself and take pride in one's body is gradually replaced with another emotion, *acquired modesty*, and when this is done gradually and at an early age, the resultant psychic conflicts are minimized and usually are of little consequence. And this psychic transformation is greatly helped if the youth possesses an older and confidential friend, or if he lives day by day on confidential terms with his parents or some other adult member of the family.

A few years ago I came across a so-called "social climber," but she was not climbing very successfully. She really lacked the back-ground and endowment for a social career, aside from the fact that her husband's income was wholly inadequate to sustain her in the realization of such an ambition. She had come to the place where she could see that her aspirations were doomed to failure, and she was all broken up over it. Life wasn't worth living unless she could cut a wide social swath of some kind. The wreck of her ambitions occasioned the wreck of her nerves. She had all the fifty-seven varieties of symptoms that go with so-called nervous exhaustion, everything from dizziness and tremors to nausea and palpitation of the heart, and even insomnia.

While everything within reason was done to help her physically and nervously, it didn't amount to much until I outlined a career of social service, starting as a club woman and working into avenues of activity that would gratify both her desire to serve and her ambition to show off and be somebody among her friends and neighbors. This was a career she was fitted for and was financially capable of pursuing; she entered into it with avidity, and she succeeded. In a year or so she was again perfectly normal—healthy, happy, and useful—far more useful than she could ever have been had she achieved her ambition to be a social leader.

This is what we mean by substitution. Instead of harmfully suppressing our wishes, let us sort out those which are incapable of fulfillment within a reasonable time, and put in their place the nearest equivalent we can discover which is in the realm of immediate possibility of achievement.

3. *So-called Sublimation*—This is the third way in which an inherent instinct may be disposed of or modified—by a glorified type of substitution or transformation into another form of activity. Take, for instance, the perverted urge known as observationism, typified in the case of a “peeping Tom” who figured largely in the newspapers a few years ago. Now, this desire to pry into the forbidden, if it were sublimated, could be converted into the pursuit of the scientist, who indulges his observation urge in useful work, in peering through a microscope to discover the unknown causes of disease and to unravel other mysteries of science.

It is the purpose of education to guide youth in its early efforts to carry its natural impulses, based on inherent instincts and emotions, up through substitution and sublimation into the ideals of our higher thinking. There is no question but that psychic energy can be diverted; it can be transferred or transmuted. Proper mental training does enable one to effect transference of desire from one object to another or from one channel to another. But more about sublimation in the final section of this chapter.

REPRESSED WISHES

Parents and teachers should direct their efforts to teaching sublimation as a corollary of repression. The disturbances resulting from a repressed emotion should be transmuted by means of sublimation attained through progressive displacement.

When this emotional problem is not properly handled there is very apt to occur—in connection with some period of stress and strain in later life—a reversion of emotional behavior to some older and unsublimated channel, and it is this back flow of repressed emotions that produces so much of our nervous trouble and emotional derangement.

The behaviorists deny the existence of all instincts. They explain everything in terms of reflex action. What the rest of us call an inherent instinct, they are wont to designate as a conditioned reflex. While there is some truth in their idea of reflex training, we cannot fail to observe that the different forms of protoplasm, as harbored by the different species of plants and animals, are possessed of unique, specific, and inherent endowments of reaction potential. I think McDougall’s definition of instinct is as good as any. He defines an instinct as “An innate disposition which determines the organism to perceive (to pay attention to) any object of a certain class, and to experience in its presence a certain emotional excitement and an impulse to action which finds expression in a specific mode of behavior in relation to that object.”

One of the difficulties we have in dealing with either the behaviorists or the Freudians is that they have different definitions for all our psychologic and biologic terms. They are wont to promulgate their theories by means of their own special terminology. For instance, Freud classes the tender emotion as an inhibited (Edipus complex and regards love as the sublimation of the sex instinct. Philosophically speaking, the whole Freudian doctrine is wrong, in my opinion, in that it contemplates life as evil, while the goal of death is all that is ideally good. It is, moreover, a wholly mechanistic view of life.

In my opinion there is no death instinct in the case of normal minds, as suggested by Freud. The first law of all living things is self-preservation; the urge to live is inherent in all normal organisms. The so-called death instinct is an error in the Freudian philosophy. The mistake of Freud and of some of his later rivals is that they recognize in the human mind only two contending groups of instincts, whereas we believe there are no less than five possible groupings of human impulses of such dignity as to enable them to precipitate psychic conflict. Freud regards his libido—the sex group of impulses—as the mischief-making complex, the instigator of all our psychic conflicts; but we could with equal propriety select any other one of the five groups of human emotions and build upon it a new school of psychoanalysis, in the end making five different schools.

It is a great mistake for a man or woman already tainted with discontent constantly to indulge in the day-dreaming type of wish. It is harmful continually to give expression to wishes which are wholly impossible of fulfillment. The constant indulgence of these impossible wishes, and even their verbal expression, only assists in the accumulation of unfulfilled wishes in the subconscious mind, and this is certain to be productive of mischief in subsequent years. A great many people are contributing to their future unhappiness by giving expression to such statements as “I wish I had a million dollars,” “I wish I had this, or that.” Of course, the degree of mischief depends upon the seriousness with which the wish is indulged. The half humorous expressions of this sort which some people are in the habit of making need not disturb the psychologist, but I think if we allow ourselves to wish for the impossible we are indirectly contributing to the sum total of our future psychic conflicts.

We must not lose sight of the theory that the mind is divided into three phases of consciousness:

1. The conscious—the realm of conscious awareness.
2. The preconscious (also called foreconscious)—the domain of recallable memories—the domain of the theoretic Freudian censor. In reality the psychic censor is nothing more nor less than the *fact of conflict*.
3. The unconscious—the real bulk of the mind commonly known as the subconscious. Practically speaking, the subconscious embraces both the preconscious and the unconscious.

In discussing the Freudian view of the subconscious it should be made clear that what the psychoanalyst calls the *censor*, the psychic critic, is supposed to reside in this borderline region of preconsciousness. This psychic term, censor, is in many ways like the term will. It designates a psychic function, but does not connote a discrete psychic power. The will, we know, is the sum total of all positive mental activity. It represents to the mind what the sum total does to a column of figures; and so, since the censor is the sum total of all the critical, censorious, or conscientious ideas and ideals of human intellect, it is convenient to have a term to express the functioning of this group of mental activities which are at the bottom of all psychic conflicts, just as it is convenient to have the term will to use in designating the summation of psychic choice and decision.

PSYCHOANALYSIS

The word psychoanalysis has come to be connected with Freud's concept of nervous disorders and emotional upheavals, and while the Freudian philosophy, at its foundation, is not sound, in my opinion, nevertheless, we are beholden to Freud for very much that has been helpful in our concept of the neuroses, and we are highly indebted to him for the technique of psychoanalysis, tho some of us prefer to use the term "emotional analysis," in view of the fact that we do not agree with Freud's exclusive sex idea as to the origin of all these nervous troubles.

The idea of repression, as generally accepted by modern psychotherapists, is that sooner or later, in the career of a developing mind, unacceptable wishes are destined to come up into consciousness. These are the wishes of a primitive biologic nature, and they are out of harmony with the ideals acquired by education; and so there must necessarily ensue conflicts between the primitive urge of old Mother Nature and the acquired standards of civilization. If these unacceptable wishes are unsatisfied, repressed without proper assimilation or elimination, not suitably sublimated, then, in the case of certain hereditarily predisposed individuals, nervous symptoms sooner or later make their appearance.

It cannot be doubted that many experiences of early childhood, gone entirely out of conscious memory, figure in these repression complexes. Again, we repress our complexes not so much because of any pain or disgust which accompanied the original experience, but because of the fact that such things, if not suppressed, would cause us pain or embarrassment at the present time.

Overmuch suppression seems to engender anxiety, an attitude of generalized apprehension, and it is not unlikely that many of our nervous symptoms are but a defense reaction against this indefinite and harassing anxiety. Our repression is a defense against the unbearable ideas or unwise wishes. In both cases, it would appear that our real self, the conscious ego, is trying to escape from something which it greatly fears.

It should be remembered that the psychoanalysts do not visualize the memories and complexes of the subconscious as peaceful and passive complexes slumbering in harmless rest—not at all. They rather look upon these latent and submerged memory-feelings as dynamic repressions—as rages, hungers, fears, passions, and drives; as the residue of the primitive pre-human animal mind.

As an illustration of the working of psychoanalysis let me cite the case of a young man eighteen years of age, who had a subtle form of eye trouble, which none of our experienced oculists had succeeded in curing. There was no question that there was some trouble, because his eyes would water whenever he tried to study. He said it felt as if there were some very fine particles of sand on the lids. Again and again the oculist said he did not have granulation of the lids. Time after time his glasses were changed, but his eye trouble was such that he had to give up school.

It is interesting to note that this lad, when he was eight years of age, had the measles, and that there was some real transient eye trouble which made it necessary for him to quit school. Here we have the starting point of this eye complex. He knew that if his eye trouble were

sufficiently serious he would not have to go to school. He hated school. He was a dreamer, highly imaginative and impractical. He liked to write poetry in the spring and tramp through the woods. He read along the lines in which he was interested, and it was this fact that gave me the clue to his case. He could read any number of his favorite books without difficulty.

I made up my mind that his eye trouble was largely a subconscious defense reaction against going to school—that his subconscious had determined to maintain it as an alibi. His parents, tho they could ill afford it, had provided private teachers, and, in a way, had kept up his education. He liked this private tutoring much better than being with the common herd in the school-room.

But now, at the age of eighteen, he fell violently in love; and, of course, things began to happen right away. The young lady was not enthusiastic about him. She frankly told him that, if his eyes were so bad, he could not get a college education and so could hardly hope to make a living for her and for the family they might have to raise. This put a powerful displacing idea into the subconscious mind of the boy; an effective idea, since it was a sex notion—one of the master emotions. It didn't take this new idea sixty days to begin to displace and rout out the old eye complex. The young man suddenly decided that he was eating too much starch, and that this wrong diet was responsible for all his eye trouble. He all but cut starches out of his diet, and immediately his eyes began to improve. They really improved—several physicians admitted it. They ceased to water. He was extraordinarily keen in carrying out the program of making up his studies and preparing to take his college entrance examinations in the fall. He is now in his junior year. He has had one or two attacks of indigestion and a few other nervous upsets during these two and one-half years of his college career, but he is never bothered with his eyes. In fact, in all correspondence with the young lady of his choice he is ever telling her how strong his eyes are.

My purpose in narrating this case is to show that old Mother Nature is somewhat of a psychoanalyst herself; that the ordinary contacts of society and the experiencing of certain emotions are, in and of themselves, effectively carrying on, betimes, this same program of emotional displacement and sublimation that the medical psychoanalyst is wont to carry out in his practise of mental medicine.

THE FREUDIAN LIBIDO

In discussing Freud's libido, let me begin by saying that I do not recognize the existence of such a thing in the Freudian sense. As already stated, I am disposed to recognize five great groups of human impulses or urges.

Freud would include in his libido the urge for race preservation in contradistinction to, and in conflict with, the ego, the urge for self-preservation; and, practically speaking, there is some truth in the contention. But it is a mistake to try to explain all nervous symptoms on this basis. The fact that the Freudian doctrine works out in practise now and then merely serves to indicate how often the sex complex is the one which has been unwisely over-suppressed. In the study of a thousand cases of emotional suppression, I found that in slightly over five hundred it was the sex complex that was the offending cause. Because sex is such

a prominent feature in human experience, the Freudians have succeeded more or less, even tho operating on a somewhat erroneous hypothesis.

There is no doubt that we should have a proper place for Freud's libido if we could limit it or confine it more directly to a purely sex meaning. There is undoubtedly some truth in his contention that in the development of the emotional nature the sex wish, or, if we may so express it, a limited libido, may become fixed upon some person or even some object, and that at a later time the emotional nature may regress to this point of fixation and thus set in operation an entirely new and apparently inexplicable group of symptoms.

It is easy to overemphasize the importance of the early emotions having to do with the physical contact of the child with its parents. Undoubtedly there is some sort of pleasure connected with the contact of the child with the mother's breast aside from the satisfaction of the nutrition instinct; but I fail to see why so much sexual significance should be attached to this, as the child certainly shows the same sort of avidity when it sucks its own thumb. The sucking instinct is strongly inborn as a part of the nutrition instinct, and it is probably connected with some sort of personality satisfaction; but I see no reason for such labored arguments to prove it has a sex significance.

Thus, while I recognize the existence of such a grouping of psychic powers in the human mind as Freud designates by the term libido, I do not assign to it anything like the all-dominant rôle that Freud does. I prefer to discuss each case in the light of the actual findings in it—findings which can be naturally and easily recognized, and which do not require that we assume so much of Freudian philosophy and terminology.

THE FREUDIAN EGO

In the study and treatment of a certain group of psychic conflicts, it is sometimes well to view the human mind after the manner of the later Freudian concept of a limited libido and the ego. This concept of psychic activity consists in dividing the mental life into the following two groups:

1. The libido—the sexual group of instincts and emotions—those thoughts and feelings which have to do with race preservation.
2. The ego—the non-sexual emotions and instincts—those feelings, reactions, and ambitions which are concerned in self-preservation.

Of all the emotions representative of the ego group of instincts, the earliest to be experienced is probably hunger.

Very early in life the child is forced to abandon its conception of the world as merely a pleasure resort. It is compelled increasingly to give up its life of fantasy and to accept an existence of reality; and concomitant with the development of this concept of the reality of the world there comes gradually to be built up this ego system of non-sexual complexes. It is the system of conscious urges which is coordinated with the enforced recognition of the reality of existence.

In its early days the child looks upon its parents as the ideal. It desires to be like them when it grows up. It is largely imitative of them, and further, through this process of identification of itself with its parents, it comes gradually to build up the domain of idealism within the ego system of complexes; and this domain of the ideal is the birthplace of the psychic censor, that mental power which early dares both to criticize the ego group of complexes and to censor the libido, the sexual system of complexes. Later on, this censorship of the mind becomes expanded into conscience in connection with recognition of the moral standards of right and wrong, and with the expanding appreciation of things spiritual and supreme. And so the ego urges continue to develop; and with the early overthrow of Narcissism, or self-worship, the censor complex comes into existence; and eventually, with progressive expansion of the realm of consciousness, conscience itself begins to materialize.

If, then, we are going to recognize man's mind as consisting of these two domains of psychic activity, we are forced to admit that conscience resides with the ego complex and not with the libido. This is clearly shown by the fact that in the dream-life the most conscientious and upright individual will permit himself to indulge the libido instincts to their fullest extent, without a dream-blush of shame. Clearly, conscience is not at home in the libido realms of the subconscious.

We often find cases in which this developing conscience, this psychic censorship of our feelings and emotions, is carried to the extent that an individual becomes possessed of some generalized feeling of guilt. He just simply feels guilty of something. This state of mind is often associated with the inferiority complex. In other cases, instead of an indefinite feeling of guilt, the individual becomes possessed of a strange feeling of illness.

When we undertake to reduce the actual warfare and the sham battles of the psychic nature to the lowest possible terms, we visualize the conflict as occurring between the libido—the sex emotions, the domain of race preservation—and the ego—the non-sexual emotions, or those which we have otherwise classified as the life urge, the power urge, the worship urge, and the social urge.

THE PSYCHONEUROSES

Janet would have us believe that the neuroses are largely due to a subtle form of dissociation. He believes that our nervous symptoms are largely the result of failure to maintain a certain subtle cohesiveness of consciousness. As he expresses it, there is lack of normal tension, and with this relaxation and letting down of the normal state of holding consciousness together, there is bound to occur a loss of control over certain of the more loosely held complexes, followed by those symptoms which we recognize as the neuroses. Freud wants to account for all our nervous disorders on the ground of repression and the subsequent conflict; and I suppose the behaviorists would account for our nervous manifestations by saying that we have so many experiences for which we have no corresponding verbal symbols that we are suffering from a wild riot in the domain of the un verbalized psychic life.

And who can say that there is not some truth in all three of these theories? I am inclined to believe there is. Janet seems to me to be most nearly right when it comes to the study of hysteria and a certain group of definite personality disturbances, going on down to multiple personality. I am inclined to think that Freud is right in the more common, every-day group of neuroses, the so-called fears, dreads, obsessions, and anxieties, along with the fatigue and brain-fag of so-called neurasthenia.

Janet teaches that diminution of psychic tension results from emotional exhaustion, but he is not very clear about what produces the emotional exhaustion. Perhaps, after all, we have to fall back on Freud's concept of repression and conflict to account for the exhaustion. Janet seeks to put all our nervous troubles into two great groups—first, hysteria, which he regards as a localized lowering of psychic tension; and second, psychasthenia, in which there is generalized lowering of tension.

In my own dealings with nervous people, I find that I am constantly utilizing both of these concepts of the neuroses. While I do not accept the basic Freudian philosophy, I find that I am all the while successfully utilizing the Freudian technique when it comes to exploring the mind, and in some respects when it comes to treatment, tho the methods of treatment which have proved most successful in my hands have been those of Dubois's scheme of reeducation—freely and frankly telling the whole truth to the patient.

While I am very favorably disposed toward Freud's theory of repression and conflicts, I am not able to go so far as to accept his hypothesis that everything undesirable in human nervous behavior is due to conflict between a hypothetical libido and the more generally accepted group of ego complexes. I find that when I postulate five groups of possibly dominant complexes in the psychic life, I am able to utilize much more of the Freudian philosophy in an effort to understand the symptoms and vagaries of neurotic patients. There is no doubt that when one psychic complex becomes dominant over its fellows, these subordinate urges begin to utter protest in the form of certain nervous symptoms; and it is highly probable that when they temporarily gain the upper hand of the tyrannically overlording urge, they seek gratification along hysterical lines; and that when they fail thus to assert their individuality to the point of gratification, they set up a continuous protest as manifested in various obsessions, fears, and even generalized anxiety.

We must not forget, in this connection, the rôle of buried or latent childhood fantasy. You can start up a neurosis by the subconscious indulgence of a childhood fantasy, just as much as by passing through some actual and distressing experience. I am of the opinion that many times a dream, tho it is unremembered on waking, is the starting point of certain obsessions and nervous manifestations.

Our repressed wishes survive secretly in some realm of the subconscious, perhaps at a point of fixation developed in the emotional experiences of childhood; and ultimately these forgotten impulses seek to escape or find expression in certain modified forms—in the language of the psychotherapist, by displacement, distortion, and disguise—as well as by the symbolism of dream-life and more definitely by means of the nervous symptoms and psychic obsessions associated with the so-called neuroses.

Generally speaking, I think we have three great groupings of the neuroses, and they are:

1. *The psychic group*—The neuroses that are definitely intellectual. They are based largely on suggested fears, and embrace the dreads, phobias, inferiority complex, etc.—the chronic worries as distinguished from the anxiety states. This group also includes our hypochondriacs and others who chronically spy upon themselves.

2. *The emotional group*—The group definitely exhibiting the anxiety state. This includes those patients in whom complex suppression is manifesting itself in physical nervous symptoms, such as tremors, weakness, nausea, vomiting, dizziness, and the like. This group finds its most striking expression in those symptoms which are on the borderline of hysteria—what we might call the physical group of the neurotic manifestations. Here are also to be found all cases of nervous tension, mental conflicts, or brain fag, together with the anxiety neuroses or what is sometimes called psychasthenia. There may be more or less emotional depression in this group, but it is usually of a periodic nature, and fatigue is often the prominent feature, causing these patients to be regarded as victims of nervous exhaustion or so-called neurasthenia.

3. *The behavior group*—We have a whole class of nervous manifestations which represent a defense reaction on the part of the patient—an effort to get away from an unpleasant environment or to dodge doing something he dislikes doing. These are the cases of maladjustment and more or less chronic indecision. They are procrastinators. They don't want to face the problem and solve it now. They want to dodge the issue. They are the people who have brain-storms and mood-swings. They have more or less dissociation, as Janet would say, and the typical representations of this group are hysteria, on the one hand, and double or multiple personality on the other. Paranoia may even belong in this category.

All of these groups taken together are more properly denominated the psychoneuroses, tho they are often spoken of as neurotic disorders, neurasthenia, etc.

It is entirely possible for one person to be simultaneously afflicted with more than one of these neurosis groups. In fact, we see individuals right along who are afflicted with all three. They not only have a mild psychic type of fear and dread, but they are also afflicted with the emotional phase, and in some cases even with the tortures of the behavior or dissociation group.

It is these composite neuroses that puzzle the doctor and so terrify and harass the patient, not to mention what they do to his friends and family. All are capable of analysis—of being worked out, run down, segregated—and then, if the patient will intelligently co-operate, they can be eliminated—cured. Practically speaking, all are curable, but not by any ordinary form of treatment, medicinal or physical. While therapeutic measures are sometimes of transient help in the management of these cases, the real cure consists in discovering the truth and facing it with manhood and womanhood, and staying on the job until new habits of nervous reaction are developed to displace the older and deleterious reactions.

DESIRE FOR THE EXTRAORDINARY

Spiritualism panders to the egotistic human desire for excitement and adventure. The average man likes to dabble in the extraordinary. We tend to overlook the remarkable nature of the common occurrences of every-day life, and long to make contact with big things and unusual events. We enjoy the exhilaration of talking through the air; wireless telephony and radio appeal to our imagination; and we long to project the experiment one step farther—to hoist our spiritual aerials and get the wireless waves from other worlds. The one seems little more impossible than the other—provided we lead ourselves to believe in the existence of a world of spirits.

But we must not overlook the fact that in the case of wireless telegraphy we have been able to master and understand, more or less fully, the laws which underlie and govern its successful operation. There is a universality about it. Any man, under given conditions, who will comply with the physical requirements pertaining to wireless telegraphy, can both send and receive messages. It is not a matter of personal endowment or peculiar gifts. And herein is the great weakness of the spiritualistic claims. No laws are discoverable, no rules are known, except those self-imposed dogmas of the mediums pertaining to darkness, etc., all of which lend themselves so favorably to the perpetration of fraud. No universal precepts are forthcoming which will enable the sincere spiritualistic inquirer to make reliable contact with the shores of another world. The “rules of the game” are wholly ephemeral; we have no reliable code, the following of which will insure successful communication with the spirit world.

Science does not assert that such laws will not be discovered. The scientist, while recognizing the universal presence of the law of gravitation, does not for a moment deny the fact that a magnet will cause a handful of iron filings to rise directly upward, and thus defy gravitation. Science admits that magnetism can overcome the general law in this case. What science asks, in reference to the spirit world, is merely that it be shown some dependable rule of action, which obtains and operates there. Science recognizes that magnetic attraction can levitate certain metals and suspend them above the earth, and it does not for a moment maintain that there are not in existence spiritual forces and powers which could levitate the human body. Science merely contends that such forces have not yet been discovered.

The skepticism of science only serves to make the occasional phenomena of spiritualism, which baffle us, the more fascinating to the average person. We are constantly meeting with people of a certain type, who are burning up with an unconscious craving for “an extension of ego,” and these become ready and willing victims of the propaganda of spiritualism. They are not satisfied with making contact with the material world about them; they want that extension of ego which reaches out to worlds beyond. They long to conquer regions that are invisible and unknowable. They are not content with the limitations of the finite; they want, as it were, to touch elbows with the infinite.

Other persons are favorably inclined toward the phenomena of spiritualism through pure curiosity and the commonplace desire for excitement. We all have to admit that it appeals to the spirit of adventure to hold hands around the mystic circle, in the dim light of the

séance room, and expectantly await messages from an unseen world. It is unusual, odd, freakish, even sensational, and that is what appeals to the average mind. The daily press, for the same reason, plays up in its headlines only those occurrences which are out of the ordinary. The newspapers have discovered that this is what the average person is interested in reading.

THE DEATH WISH

In connection with our discussion of pain-and-pleasure and life-and-death wishes and complexes, attention might be called to a more strictly psychologic phase of this question, namely, the fact that when we are young we so often wish that certain disagreeable persons were out of our way; we should be glad never to see them again, and commonly give expression to this wish by saying, "I wish you were dead." The child early discovers that the dead do not come back to bother us, and, in his frank sincerity, wishes that individuals who pester him were dead and buried. But as we grow older, especially around the time of adolescence, we begin to worry over all these people whom we wished dead. We learn from the Bible that "Whoso looketh upon a woman to lust after her hath committed adultery with her already in his heart," and if we are of a religious nature we come to the conclusion that we have already committed a host of murders in our hearts. We now come to regret these murderous wishes of our childhood days, especially against those who have really died in the meanwhile; and so we seek to find some way to help the situation, to mollify the conscience.

There comes, then, as a comfort to us, this doctrine of spiritualism—that our friends whom we wished dead are not in reality dead at all, but very much alive, having simply found a portal to a higher and better life. We therefore take a keen but more or less unconscious delight in proving, through spiritualism, that the victims of our death-wish are happy, alive and enjoying pleasure; and thus we hope to antidote the psychology of our regrets and to appease an accusing conscience.

That we mentally follow our friends and associates to the other world is shown by the funeral rites and customs of primitive peoples. The Chinese worship their ancestors and seek to live on good terms with them. The savage knows that his compatriots are composed of both good and evil traits of character, of things which give him now pleasure, now pain, and so after the departure of his friend to another world he seeks in devious ways to appease him, and otherwise to show himself friendly, so as to prevent the newly departed spirit from wreaking vengeance on those who still live. His mental conception of the spirit of the departed member of the tribe he projects outward, seeming to recognize it as a real thing in the mist, in a hazy cloud, in the shadowy forest; and in many other ways he imagines he is able to detect the spirits of the departed.

It cannot be said that modern spirit mediums have done much to refine this primitive concept. They tell us about the clothes that departed spirits wear, and other material things in their environment. The spirit land of to-day seems just about as grossly crass as the Paradise of either Mohammedan or Jew, and just about as material and puerile as the Happy Hunting Ground of the North American Indian. In fact, this spirit land can hardly approach,

in beauty of imagination, the mythological spirit abode of the Greeks. The ancients freely and frankly indulged their most fantastic dreams and then projected them out to constitute the stories of their mythical folk-lore. The ridiculousness of the modern spiritualistic concept is born of the fact that we feel constrained, in these days, to preserve a semblance of scientific thinking, and so we only become the more ridiculous when we seek to combine scientific reasoning with the fantastic imaginings of spirit beliefs.

THE PRACTISE OF SUBLIMATION

Sublimation is nothing more nor less than the coordinating of two diametrically opposed tendencies so that they will work together harmoniously for a common end; in other words, the union of contending influences in mind or body, so that their more or less perfect integration makes for progressive development. It is an effort to push our activities up from the lower levels to the higher levels of integration, and when harmony reigns where formerly conflict raged, we speak of the completed process as sublimation. And this is all consistent with the theory of progressive and directive evolution, which teaches us that higher organisms are evolved from the lower groups.

We must recognize, to begin with, that conflict lies at the very basis of life. Elementary life is never peaceful, and it is not strange, therefore, that conflicts should arise between the self-preservation urges and the higher urges of race preservation, as well as between other groups of psychic complexes. Just as certainly as conflict is the basis of physical life, it is early manifested as a part of the developmental phase of psychic life. If we postulate as primitive instincts such impulses as self-assertion and self-abasement, we can hardly refrain from recognizing that such emotions are destined ever to be in comparative conflict.

Repression is not the only possible result of mental struggle. The conflict may be solved in a way that both of the conflicting elements attain a degree of satisfaction; and this form of resolution of the conflict is called sublimation or integration. The war between poetic and scientific ideas may be resolved by a modification of both views, producing a more comprehensive system of ideas called philosophy. Conflict between actual inferiority and the wish for power or superiority may be resolved by accepting one's limitations and making the best of the abilities one possesses. The general conflict with reality may be resolved by accepting it temporarily as it is, and then trying to make it conform to one's ideals. Similarly, authority may be accepted and at the same time questioned.

Pugnacity may be sublimated into so-called scientific boxing, commercial competition, and social rivalry, all carried on according to definitely formulated rules. To do a thing according to rules is always to some extent a sublimation. Pugnacity may also be sublimated into competition in school examinations and athletic contests. It may be expressed in the combat of political campaigns. In these sublimations the subject lives out his pugnacity, and at the same time conforms to the social order in which he lives. Our anger is up-stepped to a higher form of resentment called righteous indignation; our bestial sex impulses are advanced to the more glorified phases of romantic courtship and marital devotion; our early

and barbaric instincts of torture and cruelty become transmuted into our comparatively harmless proclivities of teasing, bantering, and joking. Thus are our early and inhuman urges finally transmuted into our play-life and civilized humor.

Other primitive impulses may be sublimated in the same way, and this is the ideal resolution of mental conflict. In this way a person avoids both mental ill health and the formation of undesirable traits of character.

Common illustrations of the sublimation of the normal sex impulses are to be found in those religious orders which demand celibacy. The priest up-steps his sex emotions to the highest levels of love for humanity and devotion to his calling. At least, the vast majority of the individuals belonging to these religious orders are able to do this to some degree. How many times we hear of a woman disappointed in love taking the veil! Such women, no doubt, are many times successful in displacing their ordinary sex feelings with a higher and largely sublimated affection for the sick and the friendless.

Many an overambitious business man who has discovered the undue development of selfishness and greed in his drive to amass wealth, has sought relief from an oppressive conscience by engaging in a program of philanthropy and social benefaction. There may, indeed, be more or less pride and self-satisfaction entering into the charitable and humanitarian endeavors of many of our well-to-do citizens; nevertheless, there is also in them much sublimation of the baser emotions of greed and property acquisition.

I can remember meeting, in my student days, a young man who was an inordinate scrapper; he was all the time fighting, quarreling, contending. He was unpopular among the students and always in trouble with his teachers. I recall a heart-to-heart talk in which he told me that he longed to get over this fault, but that whenever he tried to put it away, it would come up in some embarrassing situation, and he would fly off the handle, hit somebody, or do something else that was foolish. He was always suffering from remorse and filled with regrets as a result of these emotional sprawls and temperamental outbreaks.

This young man had a difficult time deciding what to do in life. Eventually, in connection with the revival efforts of a well-known evangelist, he "got religion" and decided to become an evangelist. He jumped into his training for the ministry in dead earnest; he enlisted in a very active and somewhat spectacular campaign of fighting sin and the devil. As the years have gone by, I have watched him. He exhibits a changed disposition. True, underneath his religion he still has a highly irritable and unstable temperament; but it is usually controlled now, and he is not ill as a result of emotional suppression. He has made a profound transformation of his pugnacious temperament. He is still a fighter, but now he is fighting evil. He has sublimated his former high-tempered, fiery disposition into the righteous indignation of a man of God who is engaged in making continuous assaults upon the strongholds of sin. He has found the psychic equivalent to give balance to his former disagreeable and scrappy disposition.

I could fill this book with stories of the successful sublimation of undesirable traits of character. When one has a strong wish, a profound desire of some sort, it is dangerous to undertake to suppress it bodily into the subconscious. Far better to start out on some sort of

campaign for direct and frank displacement, or for this more round-about or glorified form of substitution which we call sublimation.

THE FEAR COMPLEXES

FEAR is one of the basic and self-protective emotions and is shared by all species of thinking animals. Fear is one of the most important of the survival instincts and is an impulse which is responsible for caution, forethought, prudence. In the case of our primitive ancestors it no doubt served a valuable purpose. On the other hand, in connection with our modern civilization, unwarranted fear many times is the cause of much sorrow and sickness.

Already we have devoted a chapter to the subject of complex formation. It will now be in order to explain just what we mean by the word complex when we use it in such designations as fear complex, inferiority complex, conscience complex, etc. When we refer to a fear complex we are using the word complex for the purpose of designating a system or group of related ideas and connected memories which have "strong emotional tone," and which unfailingly exhibit the power of so influencing our conscious thinking as to direct our reactions and behavior into certain uniform and definite channels.

A complex of this order, of course, can be either normal or abnormal, and we judge it in accordance with the nature of its functioning. Our psychological terms of sentiment and convictions are hardly strong enough or sufficiently all-inclusive to designate a complex. A complex is rather a working association of a group of sentiments and correlated convictions.

CAUSES OF FEAR

There are many physical causes of fear, not the least of which are the various poisons or intoxicants. We are all familiar with the fears of an intoxicated man under certain conditions. In delirium tremens the drunkard fully believes that his horrible fantasies are real, and in this state he may plunge out of the window of a high building to certain death. He so thoroughly believes in the reality of what he apparently sees that he will stop at nothing in his effort to escape.

Fatigue contributes greatly to the aggravation of fear. We are always more likely to succumb to our fears when we are tired out. Our sensations seem to affect us more unfavorably at such times. The ductless glands also exert an influence along these lines. We are more subject to acute fears when the thyroid is indulging in excessive secretion, while we are more subject to chronic worries when the adrenal function is deficient. Pain augments our fears, and disease sometimes aids in predisposing us to certain fears, dreads, and phobias. This is particularly true of severe infections.

While the general tendency to be afraid is inherited, specific fears—aside from the fear of falling and certain loud and shrill noises—are not inherited. The fears of after-life have all been suggested to us directly or indirectly. We might speak of them as being "conditioned."

We must remember that children are very prone to pick up the early fears suggested to them in stories, and they are quick to take on the fears of their elders. Fear is highly contagious, especially to the young mind.

Fond mothers thoughtlessly suggest fear to their children when they are so agitated about the children being left alone. These young minds get the idea that something might happen if they were left alone, and fear, to them, has none of that fascination which sometimes comes to the older and more sophisticated intellect. In adult life we sometimes become reckless in the presence of fear. We get a sort of thrill, a "kick," out of daring adventure. We deliberately court danger in order to get the thrill that is born of recklessness, to enjoy the fascination of daring to defy danger.

We should remember that fear is not necessarily abnormal. It is only when it becomes an obsession that it is able to harass us and interfere with health and happiness.

WHAT IS THE FEAR COMPLEX?

Aside from those fears of childhood which we pick up by direct suggestion from our elders, I think most of our fears come to take tyrannical possession of the mind at times when the nervous system is overworked or overwrought; and these fears become abnormal only when we allow them to take such possession of the mind that we refuse to permit our friends to reason with us and thus dispel our obsessions.

We know from laboratory experiments that fatigue prevents normal thinking, and when we are fatigued we are more likely to suffer from emotional depression. And so the vicious circle starts: fatigue leads to depression, depression leads to worry, worry fatigues us, and so on.

When we are tired out or overwrought, when we are a bit depressed and some worry starts in to swing around the circle, especially if we are very suggestible, the stage is all set for picking up new fears. Any newspaper or magazine, either in its news articles and stories, or in its advertising pages, can supply the material for new fears; for that matter, neighborhood gossip can in a few minutes supply enough seeds of dread to produce a year's harvest of worries.

Our feelings, when we are oversensitive, tend to breed fears. At such times we are always examining the body to find explanations for our feelings, and it behooves us to remember that we are not subject to reason when our fears are allowed to progress to the point where they produce emotional disturbances. We are subject to reason as long as our fear is purely psychic, but when it gets hooked up with emotions, it is more likely to develop into a blind and unreasonable affair. It has been repeatedly said that man is ruled by his heart and not by his head. You can reason with notions but not with emotions.

Emotional disturbance may be in the nature either of depression or of exhilaration, and it is all but impossible to reason with a person in either of these states. The same is true of a hypochondriac or a depressed type of neurotic ailer. It is equally difficult to reason with young lovers when in a state of emotional exhilaration. They are all but insusceptible to reason. The

mind is the victim of emotional sway. The head is under the rule of the heart. When the emotions are teamed up with our fears we become increasingly unreasonable and illogical.

Other severe emotional disturbances, such as hate and anger, are equally difficult to reason with; but we usually construct alibis for these outbreaks by means of rationalization. We gloss over such temper manifestations as righteous indignation, on the one hand, and as devotion, loyalty, patriotism, or friendship, on the other.

After worry has once started, after the habit is formed, it is easier for the victim to carry on than to explain exactly what he is worrying about; and when the habit becomes chronic, it is very difficult to induce him to sit down and reason with you in a sane and logical manner. You have the same difficulty in trying to talk him out of his notions as you would in getting an ardent lover to sit down and reason logically about his affections. Both are up on the clouds, and it is hard to reason with them until experience brings them down to earth again.

This matter of allowing emotions, even of exhilaration, to control the mind can be carried to injurious extremes, especially in connection with day-dreaming and a life of fantasy. It is capable of carrying one to the borderland of paranoia. An individual may get it into his head that he is the wealthiest man in the world, or some highly neurotic woman may imagine she is queen of Egypt. On the other hand, the reaction of depression, after such a state, may drop the unfortunate victim to depths where he labors under the delusion of having committed "the unpardonable sin."

One of the common goals of worry is hypochondria, that wretched state of mind in which the victim thinks of nothing but himself and seems to be conscious of nothing but his own external sensations and internal feelings. Some hypochondriacs complain of water running under the skin, prickly burs on the hips, fire burning under the feet, the stomach filled with lead or entirely missing from the body; others have sensations of angels knitting in the abdomen or of demons carrying on high jinks in other vital organs.

THE PHYSICAL ASPECTS OF FEAR

When we come to analyze the effect of emotions on health and happiness, we are forced to recognize that fear plays a far greater part in human affairs than any other emotion, not excepting love. The master fear, of course, is the dread of death. In common with our animal cousins we have inherited the fearful emotions as a part of the price of our ancestors' survival, and, as will be shown more fully in subsequent chapters, the purpose of our many and varied religions is to assist us in tempering this fear of death.

Our forest-dwelling ancestors were not only warlike in their tribal relations, but they lived in the midst of a hostile environment; at any moment, especially during the night, they might be attacked by their human or animal enemies. This primitive fear has come on down to modern times, and its physical aspects are what we are now discussing. In its milder manifestations fear is largely a psychic proposition, without physical symptoms. But when fear is more acute or more profound in the emotional sense, or when it comes to form what might be termed a "physical complex," producing "stage fright," then we do have definite and

profound physical symptoms.

The purpose of fear is to assist us in our *flight* from a dangerous situation, or, if flight is impossible, to contribute that state of mind and body which will render us more efficient for the *fight* which will be precipitated by our inability to retreat to safety. And this is where the physical aspects of fear come to the fore. Old Mother Nature has provided a mechanism which is the connecting link between the psychic experience of fear and the physical body, and this connecting mechanism is the sympathetic nervous system. When fear dominates the mind, the sympathetic nervous system pulls the adrenal trigger and a very small amount of the marvelous secretion of the suprarenal glands, called epinephrin, finds its way into the circulating blood stream; the effect of this ductless gland secretion, or so-called endocrine, is almost instantaneous. This substance is able to produce measurable effects in the animal body when it is present in amounts of less than one part to one million parts of water, as shown by laboratory experiments. Now, what happens when the adrenal trigger is pulled and this potent substance finds its way into the blood stream? Physical symptoms instantly appear, and they are just such symptoms as would be of value for either fight or flight. The muscles are rendered tense, or sometimes there is alternation between relaxation and tension, even trembling, if one is compelled to stand still. The respiration is quickened; the heart begins to gallop at a rapid pace; the sweat glands begin to work profusely. This is a sketch of the physical manifestation of fear when it is highly acute or bordering on terror. Of course, fear can become so overwhelming that it defeats itself: one can be so terror-stricken that he stands perfectly motionless.

When our fears are less acute, when they are more chronic, the individual is aware of these physical symptoms in a milder manner, so that he is led to go from one doctor to another to find a name to give this strange ailment. The doctors, naturally, fail to find anything wrong; but the fear-ridden patient only becomes more and more convinced that something really is wrong, and that all the doctors are in a conspiracy to keep him in ignorance as to the nature and seriousness of his ailment. About this time his case can be truthfully diagnosed as a full-fledged fear or anxiety neurosis.

And so, as time passes, even tho the fear is of a chronic nature, many of the symptoms of acute fright or terror begin to make their appearance, such as tremors, weakness in the knees, shortness of breath, palpitation of the heart, spots flickering before the eyes, dizziness, and uncalled-for perspiration.

THE BIOLOGY OF FEAR

The biologic provision to arouse the physical body in connection with the emotions of fear is wholly protective. When an animal starts out to run or to make a desperate last stand for its life, the blood lacks energy to meet this sudden demand. Fear, therefore, is the psychological signal to the sympathetic nervous system to step on the physiologic accelerator, the adrenal gland; and this physical contribution immediately produces tenseness of all the muscles, a tendency to assume that crouching attitude which is contributory to a lessening of the apparent size, and thus to assist in escaping, or, if escape is impossible, to place the

body in a better position to act in self-defense and deal telling blows to the enemy. Thus fear induces the assuming of exactly that bodily attitude which will best facilitate a quick take-off in flight or lend itself to most effective defense. Sustained flight calls for increased energy, and this energy is provided by the heightened blood-pressure, which throws the stored-up sugar of the liver into the circulation to serve as immediate fuel for the tense and active muscles. Rapid breathing is to supply oxygen to burn up this extra fuel and thus yield additional energy for these defensive operations. All this, of course, requires increased heart action; hence the palpitation and pounding of the heart muscles in connection with states of fear.

What is the purpose of the sudden perspiration that is pouring out upon the skin? This whole performance greatly increases the amount of heat generated within the body. When fuel is utilized for the purpose of bodily energy, there is an accompaniment of augmented heat production; the stimulation of the sweat glands is for the purpose of increasing the amount of water on the skin, and by this means facilitating heat elimination, thus preventing the temperature of the body from rising above the standard 98.6° Fahrenheit.

Such is the biologic mission of fear. It is the psychic flare that serves notice upon the sympathetic nervous system to pull the adrenal riot call, thus to facilitate the mobilization of all the powers of mind and body to cooperate in the work of self-preservation.

What happens in the case of the fear neuroses is simply this: Nervous persons entertain an undue amount of fear in the psychic domain, and thus they signal to the sympathetic nervous system, which, in turn, sends in a false alarm to the adrenal glands. When this is once done there is nothing to do but go through this particular attack of terror. When the secretion of the adrenal gland once gets into the blood there is no escape from the muscular tension, trembling, shortness of breath, palpitation of the heart, perspiration, and all the other physical accompaniments of a biologic riot call.

Some nervous people are able to work themselves up to such a state of constant anxiety that almost every waking moment the mind is registering the psychic fear alarm, the sympathetic nervous system is "whooping it up" with a continuous riot call, and the adrenals are more or less continuously oversecreting. Thus sometimes even long after the physiologic stimulus has ceased, the habit reaction continues and many of these symptoms, originally of physiologic origin, continue as the result of purely sympathetic irritability.

When a mischievous lad turns in a false fire-alarm, all the fire-departments of that district come tearing down the street just as if there were a real fire. They turn out just as enthusiastically for a false alarm as for the real thing; and in like manner, when the fear complex of our neurotic patient turns in an alarm, immediately the psychologic behavior and the physical reactions of a real life-and-death crisis are more or less in evidence. The adrenal gland and its associated sympathetic nervous mechanism are devoid of reason and judgment. It is their business to respond to the fear alarm, and they, too, mobilize their energies and exhibit all the phenomena of nervous and physical action just as enthusiastically for a false alarm as they would in the case of a real emergency.

I think it now begins to be clear why nervous people suffer from so many symptoms of an apparently physical nature. They are in a condition of chronic false alarm, and when fear

reaches this status we call it an *anxiety neurosis*.

Thus it is that when we foolishly and falsely allow the fear alarm to be sounded—when all these nervous and physical energies are mobilized, while there is no danger to flee from and no enemy to fight—all this defensive mobilization is turned inward instead of outward. And so we see that fear, when perverted, instead of serving as a factor in self-preservation, becomes a tyrannical and enslaving master. The physiology of fear is that of self-preservation; the pathology of fear is that of the neuroses.

This is the story of the psychology and physiology of the physical manifestations of the so-called neurotic disorders; and, of course, the muscular tension, mental anxiety, throbbing heart, and shortness of breath, together with trembling knees, inexplicable weakness, choking sensations, throbbing blood vessels, dizziness, and nausea, would make any ordinary human being think there is something radically wrong. And so these symptoms in turn engender more fear—the same kind of fear that called them forth—and this secondary fear produces more symptoms of physiologic reaction. Thus the vicious circle is formed. Our patient is a slave to fear, and the merry whirl goes on until someone takes him in hand and teaches him the truth about himself, reeducates him, and guides him in the reconditioning of the physical reactions to his psychic state, and finally enables him to change his state of mind from chronic fear to normal and health-promoting faith.

THE FEAR-ANGER MECHANISM

It would seem that the biologic purpose of fear is to accelerate flight, to contribute to self-preservation by facilitating escape from danger. Now, in connection with the pugnacious instinct, we have the arousal of anger. Anger is also the result of the ability of fear, through the sympathetic nervous system, to accelerate the output of the secretions of the adrenal gland, which, when they are poured into the circulating blood-stream, never fail to augment anger; and it is this arousal of anger that adds so much to the fighting ability of the animal in case it is unable to escape from threatened attack. What we call hatred is a sort of chronic and confirmed anger, and it sometimes comes to take the place of disappointed and suppressed love.

There was great survival value in this fear-anger mechanism. Those of our ancestors who did not possess this fear, with the corresponding ability to flee swiftly in the presence of danger, or who were not pugnacious or angry when cornered, did not survive. This hair-trigger fear-anger mechanism was very useful to the human race in its early struggles for survival. As civilization has progressed, this mechanism is not as essential as it was in days of old, but it must be borne in mind that we still have it. Thus every human being to-day is confronted with the necessity of training, subduing, and reconditioning this old-fashioned and primitive fear-anger protective mechanism. Some of us are still rather quick on the trigger when it comes to resentment. We have fiery tempers and fly off the handle on the least provocation.

As already mentioned, the throwing of the adrenal secretion into the blood stream adds tremendously to the momentary strength of the individual; in fact, it more than trebles the physical strength for the time being. Blood rushes from the head and more particularly from the internal organs into the large muscles, the very muscles that would be used in fleeing from danger or which would be utilized in combat with an enemy. Thus we come to recognize the fact that the adrenals are the *combat glands*—that while fear sets this defensive mechanism a-going, the adrenal furnishes the chemical stimulant which enables the animal organism to see the struggle through to a victorious finish.

The adrenal secretion is probably the most powerful stimulant known. Under its influence a man with his fear-anger mechanism thoroughly aroused can vanquish half a dozen of his ordinary fellows. History abounds in extraordinary feats performed under the influence of just the right amount of fear coupled with a thorough arousal of the pugnacious instinct and its associated anger.

We quickly recognize the lack of this adrenal secretion in cases of chronic fatigue and muscular weakness. It is also well known that when we are tired and worn out, we are more or less quarrel-some. This irritability is no doubt an effort on the part of Mother Nature to stir up a little pugnacity in order to revive our jaded spirits. You see, if we can get up a quarrel or start a heated argument when we are in this depressed condition, it enables us to draw on the adrenal combat-glands for a swig of our own internal fight-tonic. I have often wondered if a large number of our less intellectual citizens didn't get more or less of a kick out of their constant fighting and quarreling. They really feel better as the result of their frequent manifestation of mild anger, accompanied by more or less adrenal stimulation.

This master nerve and muscle stimulant, like any other stimulant—whisky, for instance—can do great harm when you take an overdose of it. A little fear in the presence of danger accelerates your pace of escape, but too much paralyzes you. You are frozen to the spot, terror-stricken. Just the right amount of anger strengthens you and nerves you for the fight, makes you more efficient in combat; but too much anger either paralyzes you with rage or causes you to run amuck after the fashion of a lunatic. It acts like strychnin, in that a small dose will increase muscular strength, and pick you right up, but too much will cause tremors, muscular convulsions, or even rigidity, a rigidity that resembles lockjaw.

THE SUBLIMATION OF ANGER AND HATRED

What are we going to do with this fear-anger mechanism, this combat proclivity of the human species? We can't get rid of it. It shows itself in varying degrees in all of us, and it is now a handicap. What are we going to do about it?

At first, we are going to recognize it and reason about it, and seek to put it under control; and, having done the best we can along educational and disciplinary lines, we are going to shift over to substitution and sublimation. We are going to recognize that we must provide something in our experience that we can periodically get angry at—select a number of things that will thoroughly arouse our righteous indignation. Righteous indignation is a sort of

semi-civilized, half-Christianized version of primitive animal anger, but it serves a wonderful purpose. It keeps us from engaging in a more direct, brutal, physical fight, and provides us now and then with a liberal dose of adrenal fight- tonic—a stimulant that is not at all bad for one's general health and psychic morale.

When our ancestors indulged this fear-anger-rage complex they were able to work off the resultant muscular energy in a long, fast, and dead-in-earnest foot race, or in a vigorous muscular combat. They got it out of their systems through physical channels; but to-day, when we permit ourselves to get into a rage, we don't usually have the same opportunity to work it off. Of course, mothers get angry and beat up their children now and then; occasionally certain types of married folk have a real knock-down and drag-out, and some of our less controlled citizens engage in old-fashioned fist-fights; but, generally speaking, we don't find many physical channels available for the elimination of our anger complex. Our muscles get tense; we are mad through and through; but we have to suppress our anger, and so the disturbance strikes inward to find lodgment in the subconscious mind, to come out later in disguised and modified form as the fears, phobias, obsessions, tremors, dizziness, anxiety, and fatigue of the various chronic nervous disorders, the so-called psychoneuroses.

One thing is certain: we must either control this fear-anger mechanism and prevent its too frequent and too vigorous arousal, or else we must find some civilized substitute upon which to vent our so-called righteous indignation. Perhaps that is one of the uses of so-called evil. It furnishes a target for surplus wrath. In like manner the conception of a personal devil and all the workings of the nether region provide something for the Christianized man to vent his wrath on; but in this connection let me warn you against becoming overinterested in some reform movement to the extent of making it a vital part of yourself. I have met many a professional reformer who was actually ill because he took all criticism of his pet movement as a personal insult.

“STAGE FRIGHT”

Most of us can remember our first recitation at school or the first time we appeared in public. The majority of us were all but terror-stricken. We had all the symptoms of fear, including that one so commonly associated with stage fright—dryness of the mouth; the tongue almost cleaved to the roof of the mouth. This stage-fright complaint is one that seems to be able to set in operation the whole psychic and physical defense mechanism of the body. When we are victims of it we make an exhibition of ourselves such as would be worthy of the last stand in a life-and-death struggle.

Many persons grow up and go through life with an unsubdued stage-fright complex. A feminine patient recently said to me:

“Doctor, you have helped me over all my fears. I can drive an automobile. I can do many things that I one time thought I could not do. In fact, there is not a single fear, dread, or phobia that beset me in years gone by that I have not conquered; and since I have been able to master all these things, why is it that I am still just as much affected by these disagreeable symptoms when I get up in public to say a few words, or when I try to read a paper at the

club, or even try to sign my name in public? What is the matter? Why can't I master this? I am going to do it if it takes my life."

But I had to explain to her that she was up against something different from the others. This was no simple fear—it was a fear complex. When she promised to go back to driving an automobile she was not seized by this group of physical fear reactions. It was a purely psychic experience. There was little of physical reaction connected with it, and that is exactly the difference between overcoming a fear and mastering a stage-fright complex. The stage-fright complex is still hooked up through the sympathetic with the adrenal gland; or it is hooked up with such an associated complex that, with or without the adrenal contribution, it is able to turn in a false alarm and cause the whole defensive mechanism to mobilize for action; and it is all done automatically and instantaneously.

THE STAGE-FRIGHT HABIT

I know a woman of fifty whose husband is fairly well-to-do, and who would like to devote her energies to some sort of social work. She has an extraordinarily keen mind; a very active imagination; takes great pleasure in reading and keeping up with the times; and would be a valuable member of any social organization. She has all the ability to be a chairman of a committee or president of a club. Her advice is always being sought, so that she has every opportunity and every qualification for serving in these capacities. But why is she disbarred? Because she is a victim of habitual stage fright.

I have had an interesting experience with this patient, having helped her over a great many psychic difficulties. She has been through a neurologic maze, until she has come very thoroughly to understand herself. She is unusually intelligent about her own psychic problems and is getting along famously with her nervous difficulties. She has made a successful disposition of her other dreads and phobias, and it is most embarrassing, if not humiliating, to have to appeal for help in overcoming this stage-fright complex. What distresses her is the physical reaction. She never had these physical manifestations in connection with any of her other fears, but at last she is coming to see that we cannot reason ourselves away from physical agitation as we can from the more purely psychic fears and phobias.

This patient has such a firmly fixed and well-organized stage-fright complex that I doubt if it is at all necessary for the adrenal gland to precipitate her attacks. Yet, in the end, she is likely to surmount the difficulty. The vast majority of stage-fright victims do get over it, and still more of them could if they would spend sufficient time in learning how to ignore it. But not all succeed. I talked with an actor the other day who says he still suffers as much from stage fright now as he did twenty-five years ago; on further questioning, however, he admitted that it was not quite so bad as that.

I have been working two years with a young woman, a violinist, trying to help her over her stage fright. In her case it is a life-and-death matter, for it involves her livelihood; yet it is only in the last few months that she has begun to show any improvement at all. Of course, I admit she has an artistic temperament; she really only carries out my instructions now and then.

But what do we do with this stage-fright complex? We have to deal with it in the same way as with any other fear complex, and that is:

1. Ferret out fully and completely the origin of the fear, and explain its nature to the patient. Go carefully into both the psychology and the physiology of these basic fears. Trace the fear complex out from first to last. Make the patient thoroughly conversant with the whole story, and then—

2. Train him to ridicule the whole thing, to laugh at it; steer him away from being so serious about it.

We are well on the road to success when we can make a joke out of the whole experience. The other day I had to appeal to a patient by saying: "What would you think of a fool fireman who responded to an alarm which he knew to be false, and insisted on hooking up all the fire apparatus and squirting water all over the place? That is exactly what you do."

CHRONIC "DYING SPELLS"

Fifteen years ago a man about thirty-five years of age came to consult me. He complained of nervousness, and believed he was suffering from a rather rare form of heart disease. At the time I examined him his heart was all right, but he told me how it would flutter and pound, how it would skip beats, and how he was often overcome by the fear of impending death. It was several years before he succeeded in getting around to the office when he was really having one of these heart spells; but eventually I did succeed in seeing him in one of these attacks. It was a typical case of neurotic palpitation, and he had all the symptoms that go with it—weakness, perspiration on the forehead, choking sensations, shortness of breath. You don't have to have one of these spells, you only need to see a neurotic patient passing through one, to know why they call them "dying spells." A woman once cancelled an appointment with me, and then, when she came in a week or ten days afterward, said: "Oh, doctor, I couldn't come that day. I had one of the worst dying spells I have had in twenty-five years."

It is indeed a sort of a living death that these neurotics lead; but modern science has discovered ways of educating them out of this slavery of fear.

To go back to the man I started to tell about. He has been coming in, off and on, for fifteen years to have his heart examined. It still is all right, but this patient keeps on playing with his stage-fright complex. He continues to have terrifying experiences. If he gets up before an audience, or tries to sign his name in public, or even gets a little overtired, he has one of these "dying spells." Or, since he has a sharp angulation of the colon, with a tendency to form a pocket for the collection of gas, a little gas under his heart making pressure up under the diaphragm is enough to pull the false alarm trigger, and he has all the fun of a first-class stage fright. Every symptom appears—dryness of the mouth, dizziness, faintness, and thumping of the heart. The muscles are tense, he even has nervous chills. And so it goes on, and it is all nerves, just nerves, nothing but nerves. Doctor after doctor has examined this man and found nothing wrong. It is simply the bondage of fear, the slavery of nerves.

The real fear behind all this, of course, is the fear of death. All these terrifying dreads are merely defense reactions—all camouflage—subconscious subterfuge. We are all the while afraid we are going to be killed. We are afraid to die, but are too proud to admit it, even to ourselves; and so the subconscious mind, after its accommodating custom, brings forth fake fears and substitute dreads to take the place of our real and basic fear, the fear of death. Sometimes we come to the point where we frankly admit this substitution, but the average neurotic dislikes very much to admit the three most common fears—the fear of death, the fear of insanity, and the fear of suicide.

And so we suffer on, as the result of certain fears which are pushed back into the subconscious, rather than admit the entertainment of certain other basic and common human harassments. Thus the neurotic, in an effort to avoid frankly recognizing and then displacing or sublimating the fear of death, allows himself to become the victim of this continuous performance of a terrifying phobia; in other words, in an effort to dodge the fear of death, he dies a thousand deaths.

WORRIES, DREADS, OBSESSIONS, AND ANXIETIES

IT is impossible, in a single chapter, to enter into a full discussion of fears and phobias. Elsewhere I have made a more thorough study of these subjects.*

One of the most common fears met with is the dread of the dark. There is, no doubt, a good biologic background for this fear. Our forest ancestors had reason to look upon the dark, with all its unseen dangers, as something to stand in terror of. The dark meant wolves and a hundred and one other dangers. In our own day, however, children are needlessly frightened and made afraid of the dark by means of ghost stories, tales about haunted houses, witches, etc. Experience goes to prove that children are absolutely unafraid of the dark if they never have suggestions of fear, with reference to night, made to them.

Fear of the water is another common phobia. I have a patient, a woman forty years of age, whose husband wants to go to Europe this summer, but she simply will not go. She has never even been in a row-boat on a small pond. She has lived in Chicago all her life, but has never been out on Lake Michigan. These fears of water are probably suggested by parents who so early warn the children to stay away from the water. Of course, boys sometimes overcome this fear, go into the water, and learn to swim. It is highly probable that our fear of water comes from an early bath, in which we were submerged and half strangled, and that the fright so produced has led to a fear complex associated with water, from which we never fully recover in later life. Someone has suggested that the fear of water in our day may be induced by the sputtering sound heard when water is turned on in the bathtub, a sound which may have a terrifying influence on young infants.

The fear of stifling is another common phobia—the fear of closed places. I know a woman who, when a child of six, was locked up in a closet by her nurse as punishment; she never forgot the experience. It required over a year of persistent training for her to reach the point where she could sit with comfort in a theater or ride in a closed car. She was all right when riding in an open car, but in a closed car she was seized with panic, fear, and a suffocating feeling. Victims of this phobia cannot go into a church, a restaurant, a shop, without suffering.

Some people are afraid of microbes, and wash the door-knobs every time a visitor comes; I have a patient now who will not eat food unless it comes in the original package, and she must open it herself; whether it is a box of soda-crackers, or a box of oranges, she must take the food out of its original package.

I have come to believe that many of our fears are suggested in dreams. We dream about some terrifying experience, wake up, forget the dream, and yet subconsciously retain the fear that it aroused; this dream-fear becomes attached to the mind, and we transfer it to some later idea which arises in the consciousness, and thus a new fear is born in the mind.

* *The Physiology of Faith and Fear, and Worry and Nervousness.* A. C. McClurg & Co., Chicago.

SOME COMMON WORRIES

Of late years we are coming to meet with eugenic fears. Young people read books on heredity and become obsessed with the fear that they are not worthy to marry and reproduce themselves. Of course, the fear of insanity is always present with us. What is more natural, when the mind is not working right and the feelings are vague and bizarre, than to think that we are going crazy? It should be remembered in this connection that it is only sane people who feel they are going insane. Those who are really "off" mentally never fear it. They may think the rest of us are crazy, but they always believe themselves all right.

And then we have patients who complain of difficulty in identifying themselves with themselves. They sometimes walk down the street and are seized with the strange feeling that they are not themselves. There is the very common fear of being alone—a fear largely due, I think, to the tendency of mothers to keep their children too close by their sides. When children are young and helpless, of course, they must be looked out for; but when they grow older the mothers must see that they are taught to stay alone without fear. Kidnaping stories also contribute to the nourishment of this fear.

We must remember that the sissified boy is largely a product of training. He was not born that way. He grew up that way because of being tied too close to his mother's apron strings. In this connection it is well to remember that awkwardness is largely the result of being kept out of society. Allow children to grow up with plenty of people around them, and they will not be awkward or easily embarrassed.

Let it be emphasized that fear is suggested to the growing child; he is not born with it. Even little chickens are not born with the fear of water. They learn that after they are hatched. Professor Pawlow clearly demonstrated this conditioning of fear by training his dogs by means of his famous sham feeding, so that he could obtain a certain sort of digestive juice merely by showing the dogs food, or even by associating food with the ringing of a gong. That fear is largely suggestive is shown by the fact that while people living in the West are afraid of cyclones, those in the New England States are not.

One of our common dreads is the fear of crowds, or of large open spaces. There are any number of persons who will not go across an open place at night—some even dread doing it in the daytime; others, when they get into a crowd, show severe terror, not only by their expressed fears, but by certain physical symptoms, such as pallor, chilliness, palpitation, muscular rigidity, pain in the back of the neck, dizziness, and even nausea.

We have many occupational fears or phobias: people become afraid of certain things connected with their occupations. I remember the case of a man who was compelled to sign his name to a very important document in the presence of a large assemblage of business men, at a time when he was very tired. He became very self-conscious just before attempting his signature, and his hand grew so stiff and cramped that he was barely able to complete signing his name. Immediately a fear complex was mobilized in his mind, and for fifteen years he was never able to sign his name in public. If he attempted it, he was always seized with cramps that made it impossible to carry through the undertaking.

Stammering belongs to this same group. Most people who are troubled with stuttering also blush easily: both are manifestations of the same disorder. Most stammerers are also hyperconscientious, and they are sometimes best helped, not by some of the many apparently successful stammering cures, but by concentrating the attention on improving oral mobility—on trying to get more completely relaxed and vigorous jaw action.

EVERY-DAY PHOBIAS

There is simply no end to the fears that can come to obsess the human mind. I have a middle-aged woman on my hands now who has developed a literal dirt mania. She is making life miserable for herself and her family, trying to keep things neat, clean, and in order. I suppose back of all this in her mind is the fear of microbes, the fear of disease. In this connection we might mention victims of all sorts of food phobias—intelligent men and women who have developed a fear complex regarding some class of foods.

Fear of altitude is a very common difficulty along this line. Many persons are afraid to climb ladders, to ascend high buildings, or even to stand upon high mountains if there is anything in the nature of a precipice near by. We know how some people develop a fear of cats, especially of black cats. I once had a patient who told me that many times she had to tear off her veil in order that she might be able to spit three times before a black cat got out of sight.

Other nervous people develop a dread of being stared at. If anyone looks at them they become inordinately self-conscious, and, of course, sooner or later they are driven out of society. They are unable to appear in public. They simply have to stay at home, because, the moment anyone glances at them, they feel they are being stared at.

We are all familiar with the various hoodoos—Friday the 13th, thirteen at a table, walking under a ladder, breaking a looking-glass; these are not just jokes with some people, they are real phobias, actual fears. We have a group of fears that are connected with air. Some persons are afraid of good fresh air. If it is cool and blows on the face, they are sure they are going to catch cold. They have a draft phobia. Others fear that they are not going to have sufficient air, and that if left alone they might faint or possibly die, and this runs on into the dying spells which we have elsewhere discussed.

Many hypochondriacs fear disease. They are constantly inventing new diseases, and it is only necessary that they find a new almanac, read the health column of the daily papers, or get hold of some of our modern health books, in order to be able to dig up half a dozen new ailments.

Others are afraid of storms; thunder and lightning strike terror to their souls. I know of a nervous mother who, the moment a storm breaks on the community, gathers her children about her and engages in solemn performances that are calculated to fill these young minds with fear of storms for the rest of their lives.

Some nervous individuals develop a phobia about sharp points, scissors, knives, razors, etc. I recall the case of a man, thirty years of age, who shudders almost with convulsions if

he sees one of those wavy-edged bread-knives. But, like many other fears, these phobias and dreads can be analyzed and in the vast majority of cases banished.

We also have those nervous people who fear changes. When young, they even were afraid of growing up. They dread responsibility; they will not travel unless absolutely forced to move from one place to another. There has come under my observation a woman, now seventy years of age, who hasn't left the town she lives in for forty-five years. She will not even drive out in the suburbs in an automobile. A case was recently reported of a man who lived so near Niagara Falls that when the wind was blowing just right he could hear the roar of the rushing water; yet he was forty years of age before anyone could induce him to go far enough from home to view the Falls.

And last, but not least, we have the fear of fear—phobophobia. Many times our nervous friends wake up to the realization that they are victims of fear, slaves to their various dreads, and even tho they break themselves of many of these phobias, they still live in constant fear of fear.

When it comes to the management of these fears and dreads, they are all dealt with according to certain general principles, which I will more fully outline at the end of this chapter.

RESIDUAL FEARS

There came to me a few years ago an ex-police officer, a big strapping fellow, who would go down a dark alley any night and shoot it out with half a dozen burglars, but who, as a result of a long emotional strain, experienced a partial nervous breakdown. He was several months recovering, but when he did get well there was one of his many fears that lingered on, behaving after the fashion of a residual fear. He simply would not go anywhere alone. He would find some excuse for getting out of any errand that required him to go anywhere by himself. He had to do considerable traveling for a year or two, and so he hired an old chum to go along with him. Finally he was cured, but it required more effort to conquer this one phobia than all his other fears, and he wasn't cured by reasoning, talking, explanation, or rationalization, as he was of his other fears. This one he had to go right out and defy; he had actually to go through all the misery, and suffer all the physical manifestations, of the fear which accompanied his going any place alone.

I have a case—an army officer, who had a breakdown after the World War. He made a slow recovery; he had little help of a psychic nature, but after two or three years he was fairly well except that he continued to have the fear of crossing bridges or going up in high buildings. For several years after he was really a well man he could not accept a position because he simply would not go up in a high building, and would rather take a licking than cross a bridge; and he happened to live on the North Side of Chicago, which necessitated his crossing the Chicago River to get down town. So years went by and he began drifting back into his old neurotic obsessions; but finally he decided to consult a physician and try to get to the bottom of his trouble. As a result he is all but over his phobia. But, tho he soon reasoned himself out of his other worries, it has taken him about a year and a half to conquer

this one. Even now he shudders sometimes when going over the bridge, even in an automobile or on the bus, and gets a panicky feeling at the thought that he is on the sixteenth floor of a skyscraper. The worst is over, however, and he is undoubtedly going through to the complete mastery of this residual fear.

DEFINITE DREADS

Definite dreads are aroused only when we are compelled to face something our experience has taught us greatly to fear, and we can do much to recondition our emotional reaction to these dreads by carefully analyzing them, and by teaching ourselves not to be afraid of the thing we fear; eventually we can hope to be delivered from such dreads.

Many of the things which we dread in adult life are those which made painful impressions upon our minds in childhood, but such fears can usually be banished by analyzing and explaining them. As someone has said, "A dreadful certainty is better than an uncertain dread."

In this connection let me emphasize the fact that unusual timidity is nearly always traceable to some disagreeable environmental influence, some situation which was so timed and framed as to take us by surprise or otherwise to upset our normal reactional behavior.

Unwise teaching in childhood often lays the foundation for a chronically guilty conscience. Victims of such teaching grow up with the idea they are guilty of something—first of this and then of that—and later on they may drift into melancholia and become so depressed as to think they have committed the unpardonable sin. Freud thinks this sort of melancholia is a grown-up form of Narcissism. We first worship ourselves, and later on, when we are cured of that, we get sick and indulge in a sort of glorified pity for ourselves.

Most people dread social disapproval. Any and all things which might lead to criticism on the part of their fellows they dread to do. It has been, said, "It is better to be dead than to be out of fashion."

Bashfulness is a form of fear, and in most instances it has its origin in unwise management of children during their first years in school in connection with class recitations. It is this embarrassment, this fear of reciting, that causes so many children to wish to leave school and go to work. An only child is always more subject to embarrassment and bashfulness of this sort. It is a great misfortune to be raised alone.

Most college breakdowns are due to fears and dreads, often aggravated by loss of sleep from overmuch social activity; but as a rule the victims of such breakdowns have brought an embarrassment complex with them to college, and the nervous symptoms which later appear are but an effort to get away from their embarrassment and to avoid emotional conflict from the feeling of having run away from school. Getting sick gives them a good reason for retiring with dignity. Some college students are also greatly bothered with the queer and sometimes sudden self-consciousness of ego—a stage which all developing minds go through more or less.

Some people make life miserable for themselves by indulging premonitions. They are always feeling that something is going to happen, and this can, of course, be developed to the point where it is a real anxiety neurosis. It helps a great many people to overcome their silly phobias and nonsensical dreads to learn how universal they are, how many persons are subject to one or more of these phobias. They simply represent fears we have carried over from nursery days. We grow up into a real world, but we have failed to slough off all our cradle dreads.

MOTOR OBSESSIONS

When our fears and phobias develop to the point where they lead us to do some act or engage in some motor reaction at the thought of the fear, we call such complexes "obsessions." The counting obsession is probably the most common of these complexes. A man goes down the street counting the money in his pocket. Others count the stripes in wall-paper; some people count the pipes in the organ at church. No matter where the victims of this obsession are, they must be counting something. Some people develop a fear of touching certain things, and others develop the contrary impulse to touch common objects. I saw a boy going down the street the other day stopping to honk the automobile horn in every open car he passed. I had a playmate in boyhood who always kicked every hitching-post he passed.

Then we have obsessions developed from the fear of committing a sacrilege; the victims must go through certain motions to make sure they have not committed a sin. I have a nurse at the present time who is all but driving herself crazy with this sort of obsession. It came over her one day during a church service and has been tormenting her for a number of years.

Probably the impulse to take things, the urge to steal, kleptomania, belongs to this same group. Individuals who have money in their pockets to buy a thing will steal it, and many times they steal things they don't need. The whole experience seems to be merely the yielding to an impulse, an obsession to steal.

A few years ago I had my attention called to the case of a young woman, a trained nurse, who had been raised in a splendid Christian home. She certainly had a saintly mother, a devoted father, and her brothers and sisters were thoroughly normal; but this girl was always given to impulsive acts. Her parents early noticed that if she was asked not to do a thing, that was the very thing she wanted to do. If she was walking through a public park and saw a sign "Do not pick the flowers," she never left the place until she had picked at least one. I presume the parents thought it was "cute" when she was very young.

When she was about seventeen this compulsion of thought or obsession took the form of stealing. She developed into a first-class kleptomaniac. There was no connection between her needs and her stealing. She seemed to delight particularly in stealing from the large department stores in Chicago where they have detectives. The greater the risk the bigger the kick she got out of it. There was some sort of supreme satisfaction which she derived from this life. There was adventure and risk, and she seemed thoroughly to enjoy it; but of course she was destined to be caught. The father paid the bills and she was let off, but within a year

she was caught again, and again she got off; but by the third time the word had been passed along—her record was card-indexed—and this time she was sentenced to go to jail, but friends secured her parole. The year's probation that followed was spent in intensive psychic training, and it is hoped that this will effect a cure and save her and her family from further humiliation.

I remember meeting a young woman who could well afford to pay for her meals, who liked to go into a certain department store and see if she could get out without paying for her lunch. She kept a record of 136 stolen meals. She got by with these, but on the 137th she was caught. When I asked her why she did this, she replied, "I don't know. There is something in me that just compels me to do it, but I can't explain what it is."

In later years I have come to look upon these cases as specific forms of what would otherwise be regarded as obsessions, and I have been more successful in dealing with them since I have come to accept this view.

We have the same condition in the case of certain types of pyromaniacs—unbalanced individuals who yield to the urge to start fires. They can often give no reason for it. It is simply an obsession. It belongs to the same group as do our various tics, twitchings, and other minor motor obsessions. There are many theories as to the origin of these motor obsessions. No doubt the majority of them originate early in life. When very young some experience makes a profound impression upon the memory and is associated with a high degree of emotional excitement; these fears become the center of a complex involving motor reaction; the whole association, as we grow up, develops into an obsession.

Janet thinks that our obsessions arise from a limited action of the will, a chronic lack of decisiveness. He regards them as most likely to develop in wishy-washy individuals who allow the mind to get into a helpless, passive attitude—what he calls lack of psychic tension; and he thinks that this, in turn, is the result of stress and strain, or of psychic fatigue.

Freud thinks obsessions come on as the result of imperfect repression of some wish, and when the obsession is marked or involves a group of muscles he is inclined to regard it as "conversion hysteria"—the displacement of the repressed wish or fear.

Another group of obsessions is illustrated by those individuals who become possessed of some idea which they pursue almost to the point of monomania. Take, as an example, the anti-vivisectionists. They become so obsessed with this idea, that they will believe any stories of cruelty to animals that gossip may pass along, especially if they involve a doctor or a medical student. Unquestionably some highly neurotic reformers in other fields allow their pet ideas to develop into obsessions; this statement, however, is in no wise intended to belittle the motives which underlie these otherwise queer reform complexes.

THE MANAGEMENT OF THE FEAR COMPLEX

No matter whether we are dealing with generalized fear, definite dreads, or the anxiety neuroses, the methods of management are fundamentally the same.

Fear, if long entertained and overindulged, engenders selfishness, and when it actuates crowds it may induce panic, as is so well known in case of fires and shipwrecks. An effort

should be made to explain to the victims of fear that the purpose of this animal emotion is to lead us to forethought and prudence, to make us realize the difference between fear-thought and forethought. It is impossible to overcome fear by direct opposition. Scolding by parent, teacher, or physician is of no avail. Affirmation on the part of the patient is equally useless. It does no good for the patient to say "I am not afraid" when his psychic censor tells him he is.

The best method of managing fear is to take the following course:

1. Explain the fear in detail. Analyze the complaint. Show that it is without foundation, and explain to the individual's mind exactly how he came to build it up; clearly point out to him the fear factors in his dreads or anxieties, and then quickly, suddenly—

2. Laugh heartily at his fears and get him to join in the laughter. Ridicule is the master cure for fear and anxiety. If possible without hurting his feelings, make a direct and pointed joke out of his specific fears or general anxieties.

3. Follow up surprise and ridicule with an effort to reassociate the victim of fear with society as a whole. Judiciously try to debase his ego a little. Make him less sensitive or susceptible to the opinions of the rest of the world. Suggest a bit of contempt for that which has made him so much trouble. Let him look down on it with disdain. The management of fear is all summed up in surprise, ridicule, and then contempt.

We must not, of course, overlook the possibilities of substitution on the one hand, and so-called sublimation on the other. Minor dreads can easily be swept out of the mind by greater and superior passions, as is so well illustrated in the case of stage fright which is overcome by the desire to perform before others and to receive applause. When the mind is saturated with the desire to do right and is dominated by a love for truth—both superior complexes—it is equipped to sweep out fear. There is that "perfect love which casteth out all fear."

All victims of fear must learn to travel on the sunny side of the street; to look on the bright side of things; but they must not forget that merely wishing is useless. The mind must engage in logical thinking. There must be produced an actual psychic reaction. There must be bona fide conceptual work done in the task of recognizing the psychic factors that compose the fears, and then the patient must indulge in the logical reaction of ridicule and contempt, must laugh at himself for having been so foolish as to be made sick and unhappy by such psychic fictions.

If it be suggested that this leads to introspection, let me explain that neurotic patients are already victims of introspection. They have been spying on themselves for years. They are experts at listening in on their own feelings, but there has been an introspection of illogical fear and self-pitying anxiety. What they need now is to sublimate it, exalt it into fearless self-analysis, accompanied by a passion for the truth, a willingness to face the facts, and a determination to be logical and sane in their reaction to these fears when once they are explained. And in this connection, it might be well in our social contacts with neurotics to find some other form of salutation to take the place of the common "How are you to-day?" Of course, we might train the neurotics to treat this as a moral gymnasium and react by

saying, "Fine, absolutely fine; couldn't be better."

THE ANXIETY STATES

When fear is translated to dread, and when it becomes chronic and severe, we may speak of it as an anxiety state. Because anxieties are usually the fruition of other and preceding chronic worries and dreads, and because there is often such a complexity of factors, together with the unwillingness of most anxiety patients honestly to seek to discover and face the facts, it is often very difficult to run down these anxieties to their original sources.

So few people are willing frankly to state to the physician and to admit in their own consciousness those experiences which they regard as discreditable, and they are also so largely enamored of their own feelings and fears, that it is hard to get them down to logical reasoning about the possible causes of their trouble; but when we do get to the bottom we nearly always find that they were suggestible to some sort of influence, that they were vulnerable to some trifle of their environment.

It is remarkable how many people who are sane, sensible, and logical in, say, their business life, are easy of deception in other domains of their mental existence. I know of an efficient engineer who is, nevertheless, utterly useless at a spiritistic séance. He hears and sees everything the medium hears and sees. I have a friend, an attorney, who is logical and altogether reliable and sensible when pleading before a jury or addressing the judge, but who, when he is home and has an ache in his stomach or toe, is subject to any sort of quackery that the most blatant charlatan might propose. He is always trying out some new fake remedy or shyster cure. It is hard to understand how human beings can be so sane at one time and so silly at others.

Since self-preservation is the first law of nature, it is only natural that human beings, when they have strange feelings in the stomach, or when the heart flutters, should be inclined to stop and inquire into the cause of these disturbances. It is natural, therefore, that the victim of a neurosis should feel anxiety when he is seized with such spectacular manifestations as palpitation, shivering, frequent urination, vomiting, exaggerated flushing of the face, a dry mouth, cold and clammy sweating, not to mention the more serious nervous manifestations, such as accelerated intestinal action, hysterical fainting, unconsciousness, and even catalepsy—muscular rigidity of the entire body. Little wonder that the mind becomes hypochondriac and more or less preoccupied with these nervous symptoms; and still more do we have trouble with anxiety if the religious nature becomes involved.

I believe that the roots of most of our anxiety states are to be found back in childhood. Many of them can be traced to the child's first separation from the mother, an event which should be so staged as to prevent the generation of inordinate anxiety. Still later anxieties are started in connection with unwise methods of punishment for trifling misbehavior.

Anxiety neuroses more often appear in the case of those individuals who are hereditarily and constitutionally inferior, and this state of anxiety, with them, can very soon become habitual. Along with this mental anxiety will usually be found more or less continuous muscular tension, which often persists during sleep.

These obsessions, tensions, and anxieties constitute an extravagant waste of nervous energy and vital strength. Anxious people are always in a hurry, always “rushed to death”; they have all but forgotten how to relax. In time, the body comes to reflect the psychic state. An anxious mind is reflected in a tense body—at least for a time; later on there may appear fatigue, brain fag, and exhaustion.

Then we have those highly sensitive souls, those easily irritated temperaments, that suffer such exquisite torture at the hands of the rest of the careless and indifferent world. They habitually overreact to all the unpleasant stimuli of human existence. Their suffering may be mental or physical, or both. They just can’t bear the idea of being hurt, they will not endure the thought of suffering pain—not even of the slightest degree. If conditions are at all unpleasant, these sensitive souls are wont immediately to withdraw to the seclusion of their grown-up nursery, where they can nurse their injured feelings and ponder over the inconsiderateness of the cruel world.

Such persons, when in the least irritated, are quick to utter expletives and indulge in oaths. They are also prone to resort to alcohol or drugs in an effort to soothe their wounded feelings.

THE ANXIETY NEUROSES

Unquestionably the anxiety states may become chronic. The state of continuous apprehension may be carried to the point where we are justified in making a diagnosis of real and established *anxiety neurosis*.

Not long ago I came in contact with the case of a trained nurse from Michigan who was a typical victim of an anxiety neurosis. For years she had been given to worry. She was hyperconscientious respecting her professional duties. She had worked hard, trying to support her aged parents and assist her brother through college, and while struggling along with these manifold burdens she experienced a severe emotional shock, a disappointment in love. She collapsed, and was almost a year in recovering from this nervous breakdown. When she returned to work, she seemed well, but her strength did not hold out. A few days’ work completely fatigued her, and she began to worry about her future. Instead of worrying about some specific problem, as she formerly did, she now began to be affected by a profound and generalized anxiety, a vague and indefinite apprehension that all was not going to be well with her. This anxiety gradually grew worse, and had been in progress almost three years when I saw her. She would clasp her hands, sometimes even wring them, and in the most pathetic manner give expression to her profound but vague anxieties. The most definite expressions that could be secured from her were: “I know I shall never get well. I know something is going to happen. I feel absolutely certain that I am going to get worse. I know you can’t do a thing for me. I appreciate your trying, but I know my case is hopeless.” It required over a year of patient explanation and careful guidance to help this nurse, and even when she returned to work it required another year before she was anything like normal. This, of course, was a rather exaggerated case of anxiety neurosis. The average case merely presents anxiety regarding some physical symptom or group of symptoms.

The anxiety neurosis is an entirely different picture from melancholia. There is not that profound depression, altho there may be an almost equally hopeless outlook. In the anxiety states the patient is afflicted with a more active form of apprehension as compared with the passive slump of melancholia; when allowed to run on for years, it is very difficult to help these cases.

In most cases of anxiety neurosis we have a very scrambled, tangled state of the emotions, sometimes impossible of complete analysis. They represent the more advanced chronic form of emotional mix-up. If the earlier emotional sprawls may be compared to isolated temperamental sprees, then this anxiety state is more in the borderland of emotional delirium tremens. It represents the cumulative miseries of long continued misadaptation and emotional conflict.

I recently saw one of these cases, a woman about forty years old, whose continuous wailing consisted merely in saying over and over, in one form or another: "I will never get well now after all I have done. It was all a great mistake. If you had taken hold of my case sooner, there might have been some hope, but now I am sure you will never be able to help me."

She was up and about the house, more or less active, but kept up a continuous stream of conversation, working her hands, and crying off and on; she constantly looked forward to getting help in spite of her pessimistic expressions. She was always appealing to be taken to a different doctor or some new sanatorium. While there was not much in common with the picture of melancholia, she was all but melancholic in her outlook, more especially in her day-by-day expressions. These anxiety cases are always appealing for help and are ever ready and willing to take treatment or follow out medical suggestions.

Here is another case, a woman fifty years of age, who presents this restless anxiety, but on examination is found to be suffering from arteriosclerosis. She has high blood-pressure, and while mental medicine has afforded her a little help, it does not cure her. In her case the nervous symptoms are in the main due to underlying physical and organic causes. The possibility of organic disease in the background of these anxiety states must be borne in mind.

I recall a middle-aged woman who developed an anxiety neurosis which was really of a religious order. She maintained that her soul was not right, that her relations with the Supreme Being were disturbed, but she was never able to explain this matter until we discovered that she was always made worse by going to church. Presently the fact was uncovered that about ten years previously she had experienced a profound emotional shock while attending service one Sunday morning, and thus a vague but very definite association of ideas grew up around religion, churches, and her whole spiritual life; it was not until this experience was uncovered and explained to her that her anxiety was in the least relieved. Up to this time no amount of reasoning, no effort to explain the foolishness of her anxiety, was of any avail. From this time forward, covering a period of about six months, she continued to improve and gradually overcame her anxiety.

I have many times seen the milder form of the anxiety state grow up out of adolescent bashfulness from the aggravation of the ordinary reticent, retiring type of personality.

A university teacher came to me not long ago, who, through overconscientiousness about her work and all-around emotional suppression, was headed straight for a real anxiety neurosis. After the true nature of her trouble was explained to her she immediately began to improve. In her case the matter was taken in hand sufficiently early to avoid years of psychic misery and physical suffering.

A few years ago a business executive, about fifty years of age, became restless and apprehensive. He had enjoyed the best of health all his life; had never been particularly nervous; was unmarried; had been a hard worker; had never enjoyed much self-expression. He had largely devoted himself to supporting his parents and making a home for his two spinster sisters after the death of his parents. Within six months he had developed a full-fledged anxiety neurosis, the strangest of its kind I have ever seen. He resigned his position, and after spending two or three years traveling around, trying this and that, at last settled down to a program of emotional analysis and readjustment. He determined to master the art of living with himself as he was, and with the world as it is, and he has been largely successful; but he made little headway until we induced him to go back to work. His was one of those rare cases in which an anxiety state grows out of the gradual accumulation of the residue of continuous generalized emotional suppression.

A business woman, thirty-three years old, was sent to me with the diagnosis of an anxiety neurosis. The history seemed to point in that direction, and she certainly was exhibiting a continuous over-anxiety about herself in particular and the world's affairs in general; but her examination had not progressed far until it was discovered that she was suffering from exophthalmic goiter. While the thyroid gland showed little or no enlargement, her metabolism test, pulse rate, tremors, etc., all pointed clearly to toxic goiter. No amount of mental medicine would cure this patient. A surgical operation restored her to normal health within a few months.

FASTIDIOUS SUFFERING—PSYCHIC PAIN

A CAREFUL study of the nervous system makes it plain that the sensations of sight, sound, and pain are not located or experienced in the special sense organs. Here, to be sure, the first step is taken toward their arousal, but they finally depend, without exception, upon certain activities in the cortex of the cerebrum—the outer portion of the upper brain.

These feelings, which we commonly call sensations or pain, result from the excitation of certain special nerves which end in the eye, the nose, the ear, the skin, and other organs, and which, when stimulated, cause waves of nervous energy to pass over the nerves up to the brain; it is only after these waves reach the brain, and are there received and responded to by the special centers, that the sensations of sight, sound, pain, etc., are experienced.

PSYCHIC SENSATION

We begin to see that an idea, an experience, a sensation, a pain, or even a disease, may be wholly unreal—that it does not follow that it is genuine just because the mind reports it as true. The mind is capable of almost unlimited deception, monstrous imposition, and is subject to innumerable errors and inaccuracies of internal working. But it must be remembered that imaginary or unreal disease is altogether able to give rise to a vast amount of *real* suffering.

And so it is possible for the body to originate—and for the mind to recognize—sensations which are not actually present; for instance, a foot afflicted with cancer may be amputated, and yet the patient may keep on recognizing pain as coming from the foot—recognizing it as in the foot—for weeks after the diseased member has been buried in some distant field. And so various sensations of feeling—itchings, pricking, burning—as well as sounds and voices, sights and objects, may be aroused in the brain, while in reality they have no existence; they are merely illusions, sense delusions, or mental hallucinations. Sensations can produce ideas, and it should also be borne in mind that ideas can reproduce sensations.

Under certain diseased or unnatural conditions, what is there to hinder the nerve centers from automatically setting in operation waves of energy that report impressions on their own responsibility, entirely independent of the impressions made upon the organs of special sensation with which they are connected? And even if this did not occur, what is there to prevent the special brain centers, under certain abnormal conditions, from reporting to the consciousness that they have received certain impressions of sight, sound, or pain, when in reality they have received no such impressions? This, in fact, is what happens in many cases. The special center of sensation for some particular sense organ automatically, independently, and spontaneously originates a false sensation—a sensation which in that particular instance

did not have a physical origin. In this way arise hallucinations, delusions, illusions, psychic or fictitious sensations of pain, and various paresthesias—for example, a bitter taste in the mouth.

The mental states of fear and anxiety, together with all their numerous psychic offspring, have a tendency to produce abnormal sensations or to increase their intensity; and they may even torture the sufferer with sensations which have no physical foundation. Fear and worry so demoralize the nervous mechanism and so greatly interfere with the natural interpretation of physical impressions that it becomes entirely possible for the mind to recognize an unreality as real.

HABIT PAINS

Reference has already been made to the suffering which patients not infrequently endure long after the disease causing the pain has been removed; they get well, but the pain persists. It is experiences such as these that have led physicians and psychologists to recognize the existence of the so-called “habit pain.”

Medical men are constantly meeting with a class of nervous patients who, on careful examination, are found to be the unconscious victims of this post-convalescent pain. In such cases, even when the actual cause is removed, either the nerves continue to forward pain impressions to the brain, or the brain centers, having become habituated to reacting to such impressions, continue to awaken the consciousness of pain.

The nervous system is the home of habit. All our habits, good or bad, have their origin and existence in the tendency of the nerve centers to duplicate or repeat their impulses; it is, therefore, little wonder that when certain sensations of pain have long been experienced—when painful impulses have many times passed over the nerve tracts and through the nerve centers up to the special receiving and recognizing centers of the brain—it is little wonder, I say, that the nervous mechanism thus involved acquires the “pain habit,” and so continues to transmit these painful sensations long after their original causes have been removed.

The consideration of “habit pain” is sufficient to demonstrate that the concentration of one’s attention on the site of pain is entirely sufficient, first, to intensify the suffering, and, later—even after the exciting causes are removed—to perpetuate the painful sensations. This sort of suffering is sometimes spoken of as “attention pains.”

It is a well established psychological fact that the threshold of one’s consciousness may be either raised or lowered by concentration of the attention. The term “threshold of consciousness” is in quite general use and is commonly understood as referring to that boundary-line which separates our mental operations into the conscious and subconscious. What we really mean is that we have a “threshold of awareness,” above which we are conscious of everything that takes place, while we are unaware or unconscious of those processes which occur below this so-called “threshold.” And this threshold of consciousness is indefinite and is constantly changing. A sudden shifting of it occurs when we fall asleep, and again when we wake up.

ACTION AND REACTION

And so we begin to discern that the state of the attention, the focus of the mind's eye, has much to do with determining the degree of our sufferings. The neurological optimist may be in real pain, but rises above it—as many Christian Scientists actually do—by sheer force of will and the moral determination not to be a victim of the whims of the flesh. Such patients actually *rise* above their common pains by elevating the threshold of consciousness. On the other hand, the nervous pessimist, the victim of acute fear and chronic worry, by lowering the threshold of consciousness, soon comes to that point where a large percentage of the ordinary sensations of life are recognized as actual pain. But it must not be supposed that “attention pain” is not real. The psychic sufferings are all very real to the patient. True, the cause of the pain may not be real, in the sense of being physical; nevertheless, when the threshold of the pain consciousness is lowered, the misery of such individuals is very real; in their minds they actually suffer the tortures they describe.

We never suffer from agonizing pains unless there exists some corresponding disturbance, either in the physical state, in the nervous mechanism, or in the level of the threshold of consciousness. When we come to take into account this new factor of psychic awareness, we are compelled to admit that all forms of pain are real; and so we see that there is no such thing—speaking in the light of both psychology and physiology—as an imaginary pain. Pain is imaginary only in the sense that actual physical impressions are in no way responsible for the painful sensations. The true imaginary pain must have its origin in the ideas and impulses which originate in the mind itself; and even in these cases we are forced to recognize the existence of an underlying morbid mental state; and many times, no doubt, this morbid mental state is indirectly the result of pre-existent physical disorder in some part of the body.

FORGETTING PAIN

While we may oftentimes say to a patient, “There is little the matter with you, forget your pain and get well,” and while such advice does actually cure many sufferers, we should remember that what our advice did for them was to take their minds off themselves and thus to raise their lowered “thresholds of consciousness” to such a point that their former painful sensations no longer reach their attention—and so they are immediately cured. Seneca gives fine expression to this thought in his eighteenth letter to Lucilius, in which he says: “Beware of aggravating your troubles yourself, and of making your position worse by your complaints. Pain is slight when it is not exaggerated by the idea; and if we encourage ourselves by saying, ‘It is nothing,’ or at least, ‘It is of little account, let us endure it, it will soon be over,’ we render the pain slight by thinking so.”

The Mohammedans have been able to fix this beneficent sentiment more firmly in their minds than have we Christians; they fear death less and accept with calm resignation the misfortunes they cannot avoid. Sincere Christians ought also to be able to submit joyfully to the minor frictions of living. The idea of necessity is enough for the philosopher. We are all

in the same situation regarding things that we cannot change. The advantage will always lie with him who is able, by whatever convictions, to attain a calm resignation.

FASTIDIOUS SUFFERING

Fastidious sufferers comprise those sensitive and neurotic patients who are more or less constant victims of a certain refined variety of human affliction—a nicety of illness, so to speak—wholly unlike the common every-day sort of pains which harass ordinary mortals. It is not my purpose to speak lightly of these neurotics, nor do I mean to belittle their suffering. Altho we call them the “fastidious class,” we freely recognize the reality of their pain, regardless of whether or not it has its origin wholly or partly in their minds.

The study of the psychology of pain compels us to admit the existence of these “refined” phases of human suffering. The failure of the medical profession to recognize and deal with these nervously and psychically disordered patients has been largely responsible for the enormous growth of the army of mental healers, psychic quacks, and other mind-cure frauds.

It is now a settled psychological fact that a patient’s sufferings—the degree of his pain and the quality of his distress—are all more or less determined by the sensitiveness of his nerves, by his habits and mode of thought, by the quality of his perception and feelings, as well as by the general state of his physical health; also that these must be taken in connection with past education and present environment as factors in the scheme which predisposes him to become a “fastidious sufferer.”

The pain of the neuroses is due in general, to just three groups of exciting causes: first, to tired-out nerves—nerve exhaustion, depletion of “energy granules”; second, to irritated nerves—nerves chronically poisoned by certain toxic substances habitually circulating in the blood-stream; and third, to habit reactions—the fictitious pains of the constitutionally irritable and sensitive neurotics.

The pains of these “constitutionally inferior” and neurasthenic individuals are usually manifested in the form of certain characteristic headaches. The backache and other pains along the spinal region which so frequently trouble neurasthenics are probably due to the condition of the muscles found in that locality. Such patients also suffer from a host of reflex and referred pains and other disagreeable sensations which have their origin in overworked stomachs, lazy livers, sluggish bowels, and poor circulation. I recently saw a case of this sort of headache which required eight months in bed to cure.

As a rule, the neurasthenic describes his pains in an orderly and rational manner. In the main, all his sufferings are increased by work and relieved by rest; however, this is not always true of certain forms of headache associated with nervous exhaustion. These peculiar head-pains are sometimes much worse in the morning and are greatly relieved by moderate exercise, disappearing in the late forenoon or early afternoon.

Before one has long had a neurosis, the threshold of the consciousness, as regards pain, generally becomes much lowered, and ere long the patient is suffering from “attention pains.” And so, while there may be more or less of a physical or pathological back-ground to so-called

neurasthenia, it is certainly a condition in which the psychical elements more largely predominate; at least, the great weakness and ever-present exhaustion must be looked upon as being largely mental or nervous. Soon there appears "habit fatigue" with all its accompanying sensations and symptoms.

NEUROTIC PAINS

The neurotic patient will enter the doctor's office and begin enthusiastically to describe his terrible sufferings, speaking of his agonizing pain with such intensity of feeling as to disclose his evident delight in the narration of his miseries. The physician immediately begins to suspect that such a patient is a confirmed neurasthene or psychasthene, for such patients usually take great pride in the glorification of their supposed rare or unique physical infirmities.

We recently saw such a patient who described a "frightful pain" which had tormented her left arm for three years, and as she told of her "unbearable suffering," of her "excruciating agony," her face wore a beautiful smile and her whole countenance beamed with joy. She seemed to take supreme satisfaction in being able graphically and exhaustively to describe a pain whose location and character she thought her physician was unable to comprehend. As a rule, eloquent patients of this sort may be classified as neurotics, and their pains may be regarded as largely belonging to the "attention" group.

The interesting point about fastidious pains is that they are usually described as being in some region of the body which does not correspond with the course of any nerve-tract or the location of any nerve-center. The majority of these pains, no doubt, had their early origin in some actual irritation or strain of the nerves. First started by fatigue and toxemia, they are perpetuated by the emphasis of the attention—by greatly lowering the threshold of the pain consciousness. They are often found in the joints, or may be described as overlying some internal organ—the stomach, liver, kidney, etc. Sometimes the patients tell of "steady pains" in arms, legs, or the back.

Not infrequently these obsessive patients are open to argument and will admit that their sufferings are more or less imaginary; but they find it next to impossible to act upon such conclusions, even tho they earnestly endeavor to rise above their pains and banish their miseries. Usually they belong to the self-centered, selfish, and egotistic class, and are seldom cured of their "psychic pains" until their attention is effectually diverted from themselves to things more healthy and elevating.

And so, while these pains may have had their origin in a bona fide neuritis or some other actual physical disorder, the case is regarded as one of fastidious suffering when the misery persists long after the nerve lesion has been healed—after the physical basis of the original disease has been removed. The continuance of such painful sensations after the cure of their original cause, must be due to a combined disorder of the powers of attention and a lowering of the threshold of pain consciousness.

PSYCHASTHENIC SUFFERING

I recently had a patient who complained of a small, circumscribed spot on her arm which felt as if bees were all the time stinging it. With an improvement in general health and a course of psychic therapeutics along the lines of the "reeducation" of her will, these annoying sensations gradually disappeared.

Several years ago I was called to an adjoining State to see a middle-aged woman who had long suffered with pains in her knees. For twelve years she had gone about on crutches. Repeated examinations and numerous X-ray pictures had failed to disclose any real trouble. But her peculiar knee pains were ever present if she attempted to walk, or even if she slightly jarred her knees. She could not comfortably ride in an automobile. This woman exhibited none of the ordinary symptoms of hysteria. The most elaborate methods of physical and clinical exploration failed to disclose anything wrong with her knees. She came to accept the explanation that her trouble was purely an acquired complex and tried to act on this theory, but it did not cure her pain. It required over three years of persistent and painful effort at walking before this troublesome knee distress really disappeared.

A woman, aged fifty, in good general health, came to me complaining of pain over the region of the liver, which she had had for more than five years. Her pain was much after the order of those which come to be associated with some disturbance of the gall-bladder. She had been examined by the best experts, including some who used the most recent X-ray technique, and absolutely nothing wrong could be found. By exclusion, the only diagnosis to be made was "nervousness." On the whole, she did not appear to be "nervous," and she seemed really to want to get well. After the nature of her distress had been fully explained, she followed a course of psychic treatment and gradually recovered. No doubt this woman's pain originally began as a real local disturbance of some kind and was kept up through her attentions to it.

THE HYPOCHONDRIACS PAINS

The hypochondriac is "set" in his ways. It is quite impossible to reason these unfortunates out of their troubles. Their sufferings have become a real part of themselves, and all effort to help them by an appeal to reason is soon lost—you can only cheer them up for the time being. In the most pathetic manner they will tell you of their burning or prickling hands while they tenderly exhibit the suffering members for your inspection and sympathy. They suffer all sorts of pains, such as "boiling in the stomach," "ice on the back," "bees stinging one side of the head," "water running under the skin," "the body stuffed with prickly burs," as well as all sorts of painful sensations in various internal organs; but, as a rule, the pains of hypochondria are not so definite as those of psychasthenia.

The self-centered hypochondriac describes his pains in an altogether different manner from that of the neurasthene and the psychasthene. As a rule, hypochondriacs suffer from a combination of morbid depression and abnormal anxiety—a sort of mild and chronic melancholia. These patients describe their sufferings with great seriousness and solemnity.

They gravely tell the doctor that they have not slept a wink for days or even weeks, or that their knees or shoulders have pained them constantly for ten years; they describe their sensations of bursting, boiling, burning, etc., the spinal region being a favorite site for many of these abnormal sensations.

No doubt, many of these morbid aches and pains really do have a physical basis in the poorly nourished and irritated nerves which are the result of chronic autointoxication; for it is a generally recognized fact that most hypochondriacs have been or are dyspeptics—victims of chronic constipation, etc. In addition, they also usually show a marked lowering of the threshold of the pain consciousness—an abnormal fixation of the attention on the physical sensations; and thus the conditions are present for the creation of an ever increasing and vicious “pain circle.” Such patients are seldom cured by exclusively psychic treatment. Like the neurasthene, they require proper physical treatment—regulation of the diet, fresh air, exercise, and the increased elimination and destruction of bodily poisons.

TREATMENT OF FASTIDIOUS PAIN

I have found the following procedures—which should, of course, be employed in connection with proper psychic treatment—exceedingly helpful in relieving the physical agonies of this class of patients:

1. *Hydrotherapy*—Many neurasthenic and psychasthenic pains can be cured by local applications of heat and cold; by applying hot fomentations over the site of the pain for a few moments, immediately followed by a brisk rubbing with ice-water or with a piece of ice, then more heat, and so on. Very often a few weeks of such local treatment, in connection with general tonic measures (electric-light baths, alternate shower baths, salt glows, etc.), will suffice practically to cure the milder types of neurasthenic pains.

2. *Massage*—General and special massage are of great value in this class of cases. Like the use of hot and cold water, scientific massage promotes the circulation of the blood and increases the nutrition of the nerves. Even the vigorous rubbing of the inexperienced layman is often able greatly to relieve the aches and pains of these neurasthenic and hysteric sufferers.

3. *Vibration*—I have seen several cases of psychasthenic and hypochondriac pain cured by the wise and persistent use of mechanical vibration. This sort of treatment seems, in addition to its influence on the currents of the blood and the nerve impulses, to be able to jog the ailing tissues out of their diseased ruts, to cause them to form new habits and methods of life.

4. *Electricity*—There can be little doubt that galvanic electricity can be scientifically employed in the treatment of these fastidious sufferers. High frequency and other forms of electricity, while they may possess some remedial power, are largely psychic in their effect upon the patient. The more faith the patient has in these forms of electricity the more good they will do him. But diathermy is of real value in relieving neurotic pains.

Of one thing we can be sure: if we depend on physical methods alone to cure these neurotic sufferers, we shall be doomed to disappointment. It is all right to utilize such remedies as a means of temporary encouragement, but the real cure will be effected only as a result of a thoroughgoing analysis of the psychic and emotional life of the patient and the correction of his habitual reactions to these sensations and pains by means of persistent psychotherapeutic instruction.

THE INFERIORITY COMPLEX

IN a subsequent chapter I shall treat of conscience as a health problem; at this time I wish to discuss more particularly certain minor personal tendencies that are also sometimes involved with conscientious scruples, but more particularly those that are associated with the *inferiority complex*.

We must remember that the child, as it thrives in the nursery, is, in its own eyes, all but omnipotent. It is the center of the universe; all the world revolves about it for its pleasure and entertainment. Now, as the child begins to emerge into the real world, it meets with many a setback; many a hard slap its self-confident ego is destined to receive, and if, at about this time, it has a great many fears suggested to it, the result is very likely to be the beginning of an inferiority complex.

Inferiority complexes are especially likely to arise in diffident, backward children, more particularly if they are permitted to undertake tasks beyond their age and ability. It is a calamity for any child to engage in school work which is utterly beyond its grasp. If failure is inevitable, the child is apt to accept this defeat as typical of what it may expect throughout life, and thus begin to reckon itself as more or less a complete failure.

Parents and teachers should be very careful to encourage children always to go through with what they undertake, and, of course, that entails the responsibility of seeing that they do not undertake the impossible. I find that a great many cases of inferiority complex come from the early memory-association of making a failure of something undertaken. Careful inquiry shows that many times the child was allowed to undertake something that was utterly beyond its powers at that age.

Another contributing factor to the inferiority complex is the impatience of parents and teachers, particularly of parents. A mother assigns some task to her daughter; the father sets some piece of work before his son; and then, as the hours pass, and the children make more or less of a failure of the undertaking, the parents become impatient and take the work away from them, expressing their disgust in such hasty remarks as: "Oh, let me finish it. It takes less time to do it than to show you. You are so dumb"; or, "I can't wait. It takes you so long to do it. What's the matter with you, anyway?" Most of us forget how it was when we were children and had to learn to do things. It behooves parents and teachers to have more patience with children, for an outburst of this sort under just the right circumstances may lay a firm foundation for a lifelong inferiority complex, or at least a complex that will live to torment the child until, as an adult, he gradually masters this tendency to self-depreciation or receives help from some psycho-therapist.

THE STIMULUS OF SUCCESS

I want to tell you about the case of a young man whom, for our purposes here, we will call Ralph. Ralph was next to the youngest of a family of nine children, a very gifted family.

Among Ralph's older brothers and sisters were the champion debater of the local high school, an athletic brother who had broken half a dozen track records, a sister who was a talented musician, and another sister who was no mean painter. But Ralph didn't seem to have any outstanding talents. He used to hear his father and mother remark on the fact that he wasn't as gifted as the other children, and wonder what he would ever amount to. Now, Ralph was already overserious, had a tendency to be hyperconscientious, and so, as he grew up, he became convinced that he was all but a "no-gooder" and that if he didn't watch his step he would be a ne'er-do-well. He didn't seem to be able to put his mind on anything he would like to be, or to grasp anything he really could do well.

He became so depressed that after he finished high school—and he finished with fairly good grades—he refused to go to college. He subsequently told me he was afraid he couldn't get through and didn't want to flunk and disgrace the family. He could have gone through college just as well as his other brothers and sisters. But he went to work in the business world and developed more and more into a melancholy lad, with repressed emotions; by the time he was twenty he had a first-class, A-No. 1 inferiority complex, and was also beginning to get his conscience mixed up with it.

This was about the time that Ralph's father brought him to me, remarking: "Doctor, there must be something wrong with the boy. He is so unlike his brothers and sisters. He doesn't seem to take an interest in anything. He has always been rather odd and peculiar. We don't understand him, and he is getting worse."

A thorough overhauling of Ralph revealed just one thing, and that was his deep-seated inferiority complex. He knew to an absolute certainty that he was a failure in life, that he never would amount to anything, never excel in anything, and that settled it. When he opened up to tell his story, he wept profusely about it. He felt that he was a disgrace to the family. He had often thought of running away to save them the humiliation of his presence, but he doubted his ability to make a living. His inferiority complex kept him from picking up and striking out for himself, which would have been a good thing.

After several months' efforts to talk him out of this state of mind, to show him that we could not all be talented specialists—that there was a place in the world for the ordinary plodders, and that persistence would achieve success sooner or later—I was compelled to recognize that we were not getting anywhere. The boy was no better, and I decided that something radical had to be done. I figured out that we would have to find something he could really do, and help him to achieve some degree of success in that under-taking, in order to counteract this deep-seated inferiority complex.

I had a conference with his mother and with one of the older sisters, and learned that, all the way through high school, about the only thing for which he had been commended was his essays. This gave me the idea that he must have latent ability as a writer. I thought I would take a chance and try to develop it; so I sent for Ralph and pitched right into him. I ordered him to produce a thesis of some sort within thirty days and submit it to me. He did it, and I saw I was on the right track. After criticizing his production and having it revised, I ordered a second one, and then a third, and the third struck me as being of sufficient merit

to warrant an effort to market it. No; he had no interest in such things—it wouldn't do any good—the manuscript would come back—he couldn't write—that was just a foolish notion I had. I even had to suggest a list of magazines to which he should send his article.

Five times the article went out and came back, and the sixth time a check for \$50.00 came. The young fellow called me up on the telephone the moment he got through pinching himself to find out if it were really a fact that he had received \$50.00 for an article he had written. As soon as he could get away from work that day, he came out to see me. I never saw such a change in a human being in all my life. There was fire in his eyes, and his face was lighted with enthusiasm, illuminated with joy. The tone of his voice had changed. The expression of his face was that of another man. Then, clinching his fist, he pounded the desk and said: "Gee, but it's great to find out you can do something! I have thought of half a dozen other things I can do now, and I am going to make a success of the job I have. I am sitting on the top of the world. I'll tell the world I can climb to the top of this concern I am working for."

That is about all there is to the story. One little trick had done the business. Ralph's promotions have been rapid. Only a few years have gone by, but he has a high position of executive responsibility with his firm. He has written two books since then, and scores of magazine articles. He has no desire to give up his connection with the business world to become an author. He knows that he will probably not be a world-beater as a writer, but writing is an emotional outlet, an avenue of self-expression. It gives him confidence in himself. It is the club with which he has beaten that inferiority complex into a shapeless pulp, and he cherishes it.

He has recently become an amateur champion in one of the outdoor sports, and last year he was elected president of a men's club. Not long ago he decided to take some music lessons and see if he couldn't make the musical sister a little envious. I remember so well his telling me years ago that he never could be married. No woman would ever care for him, and besides he didn't want to help bring any children into the world to suffer as he had suffered, and so on. Now I have the announcement of his marriage. He is simply a changed personality. Finding out that he could write an article that a magazine would pay for and publish was the turning-point in his life.

What a great mistake parents make to let their children overhear any expression of lack of confidence in a child's future! What a mistake to make comparisons within the hearing of the children! Parents and educators must learn to reckon with the possibility of the development of inferiority complexes, and see to it that they do not needlessly contribute to their creation. It may be a bit far-fetched to raise every boy with the idea that he can become President of the United States, but it is better to suggest the improbable and even the impossible to our children, sometimes, than to have them hear us speak disparagingly of their prospects. It is better to make the mistake of overencouraging, even at the risk of exaggeration of the ego, than to contribute to those depressing reactions of childhood which can so easily develop into an inferiority complex.

A STORY OF DEFEAT AND TRIUMPH

A few years ago I met a timid, more or less backward sort of young man, then about twenty-five years old, who told me the following story: He was always easily embarrassed, sensitive, had trouble when a boy in reciting at school; did not take part in the athletic sports and the rougher games, but was a good student and finished high school with honors. He went out into the business world, slowly made a position for himself in a large corporation, and seemed to be outgrowing his mild inferiority complex, tho he still thought that other boys could do things better than he. For years he had harbored the delusion that all the world was down on him.

Everything was going along fairly well until one Sunday morning, as he lay in bed reading the Bible, he ran across the verse which says, "Pride goeth before a fall." It was unfortunate that this had to happen just when it did, for the preceding Saturday afternoon he had been brow-beaten by a department head—unmercifully berated, told that he was a dumb-bell, a numskull, and would never succeed in life. In the evening he had gone out in the park for a long walk, had clenched his fists and talked out loud to himself, had literally pumped courage into his moral veins, and had determined that he would hold his head high and succeed in spite of his hereditary handicaps and all the unfavorable things that had been told him that afternoon. The shock, however, had shaken him, and when he read that text on Sunday morning, an ignorant conscience gave him an unfortunate twist; he was led to believe that the courageous fight he was putting up was merely pride, the assertion of an unregenerate human mind, and that a great smash-up awaited him.

That afternoon he sought consolation of the clergy, but he must have met a sky-pilot who had little or no training in human psychology, as he emerged from this conference all the more downcast and dejected; but since his mind was running in religious lines he sought consolation at an evening church service, and again fate seemed to be against him. The sermon that he heard was, no doubt, a wonderful one, judging by what he told me; but the text happened to be, "Blessed are the meek, for they shall inherit the earth." This was the last straw. The young man spent most of the night agonizing, praying, and crying. He never reported back to his position. He wandered about in the parks for a week or ten days, then drew his savings out of the bank, and as long as they lasted—almost two years—he drifted about the country, downcast and dejected.

He finally landed back in Chicago, and, still feebly seeking help, fell into the hands of an uneducated but zealous and understanding city missionary, who gave him an entirely new vision of the mission of religion. The new friend must have been an inspiring sort of person, for he certainly put courage and determination into the soul of this young man; it was this same untutored but nevertheless wise missionary, who suspected something might be wrong with the man physically, and advised him to seek medical assistance—a turn which explains my connection with this interesting case.

There were some really handicapping physical ailments, I found, but they were soon remedied, and the patient was started on the road to success. His missionary friend helped to inspire him with courage and religious enthusiasm. I was able to improve his physical

health and to reeducate his conscience and his sense of moral values and proportions. Within six months he was back on the job with the corporation for which he formerly worked. His progress was rapid. He had his inferiority complex well in hand, and as the result of his three years of unfortunate experience, his transient defeat, he had learned the lesson of his life.

He had learned that dignity of personality was compatible with the humility of Christianity. He had learned how to assert his personal rights and claim his social privileges without having a misinformed conscience accuse him of spiritual pride and sinful egotism. To-day this young man is at the head of his department—has the job of the fellow who so maltreated him several years ago. It is a praiseworthy trait to be willing to recognize and admit your short-comings and faults; but it is a blighting curse to fall into the habit of *picking on yourself*—finding fault with yourself over trifles.

ARE YOU UNFAIR TO YOURSELF?

There is the hyperconscientious type of person who, having done his best, always blames himself for not having done better. Just yesterday in the office I asked a middle-aged woman what her real trouble was, and after thinking for a moment, she said:

“Well, Doctor, I guess my difficulty is that I am always in trouble with myself. I am never satisfied with anything I do. I suppose I have an inferiority complex. When I do my best, all I can do is to see where I could have done better, and blame myself for the deficiency which I think I recognize.”

An inferiority complex is bad enough to have, but when it becomes associated with conscience—that is, when you attach moral responsibility to your supposed inferiority—then it is a calamity. Possessors of such a complex need to build up a broad, philosophic mode of thought. They must recognize that, as the days go by, they are doing the best they can in accordance with their endowment and with the light which they have for guidance, and that no one else can do better, not even an angel; they should accept their acts and efforts, as they view these in retrospect, as being the best that are humanly possible, and stop this practise of picking on themselves. I am not making any plea here for the cultivation of an exaggerated ego or a swelled head. But I am saying a word to comfort and encourage those who fall into the terrible habit of chronically chiding themselves when they have done their best. Be frank with yourself, but also be fearless and fair with yourself.

Here is another patient, who is overconscientious about his decisions. He is afraid he will decide things wrong. He thinks all day over trifles. If he undertakes to buy a suit or a new hat he has to go back two or three times. He has had three good chances to marry that I know of, and has lost them all because he couldn't make a decision, couldn't decide whether it was the wise thing to do. I am trying to help him by getting him to take a whole group of his minor affairs and decide them by tossing a coin. If he goes out for a walk and comes to a fork in the road, he will actually stand still, trying to decide which way to turn; now I have him take out a coin and toss it—“Heads to the right, tails to the left.” He is getting over the idea that every little thing in his life is important. I suppose this state of mind comes from thinking

we are so important ourselves.

I remember the case of a young man who couldn't keep his room in order, who would never put anything back in its place. The fault was so serious that his mother thought there must be something vitally wrong with his mind. I found the boy normal in every way, mentally and physically, but gave him a good talking to. Evidently I succeeded, for his mother came back later and asked me to undo what I had done; it seems that he had gone home, picked up his things, put his own room in order, and then gone after the whole house with a thoroughness that upset the entire family. I had told him that order was the first law of heaven, and that his character would never develop properly unless he was orderly. The medicine was a little too potent in his case. It is all right to teach a stoop-shouldered man to stand straight, but there is no sense in his standing so straight that he falls backward.

What we need is to get to the bottom of these matters from a philosophic standpoint, to recognize that conscience belongs in the domain of right and wrong, and that it is not intended to function in every trifling decision of every-day life. It should leave some work for common sense to do.

MISPLACEMENT OF THE CONSCIENCE

I have a dear friend whom I don't know how to help, but I am going to undertake it some day. He is making life miserable for himself by continually apologizing. He is perpetually afraid of offending someone. I never meet him without hearing him apologize for something. Now, I know his conscience is not overdeveloped along many lines; I can think of one or two matters about which it would be well for him to have a little more conscience; but this fear of hurting somebody's feelings—of slighting someone—is his conscientious fad, and it is getting to be a joke among his acquaintances.

How can I help this man? When the opportunity comes, I will undertake a program which has been successful in many other cases of this sort; I will try to deflate his ego a bit, to explain that every little thing he does is not so all-fired important that everybody is paying attention to it; and then follow up this line of treatment with the further suggestion that most people have common sense, that they do not wear all their nerves on the outside of the body, and that they have bigger business to attend to than to sit around waiting for him to hurt their feelings. This is the treatment that seems to work best in mild cases of that sort.

Recently I came across a very peculiar case of conscience and worry. It was that of a woman of twenty-five who worried about exaggeration. In her younger days, it seems, she had a very active imagination. It was almost impossible for her to tell a story straight; her imagination insisted on embellishing and fixing it up so that it was just a little better than the original. She was severely scolded for this, and by and by, as she grew up, she decided to make an honest effort to overcome the tendency. She became very accurate and matter-of-fact in her narratives. Then presently she swung to the other extreme and grew hyperconscientious about details. She would start out to tell a story, and would say, "There was a large crowd present." Then she would stop and correct herself: "Well, now, it wasn't really a large crowd. There were probably twenty-five or thirty people." Then she would hesitate again, and add:

“Well, to be exact, there were less than twenty.” This, of course, became a nuisance; it was a jest with all her friends, but she was training herself to tell the truth. She has succeeded in that, but can no longer tell an ordinary joke without spoiling it by stopping repeatedly to correct herself.

The Lord knows we need more accuracy, more careful observation, more truthfulness. One does not have to attend many trials in the courts to learn that people are very careless in their observation, and still more careless in the relation of what they have seen; but it is too bad that the craving for accuracy should be carried to the point where it interferes with one’s ability to tell a good story. There is such a thing as being too everlastingly truthful.

I appreciate that I am treading on delicate ground when I talk about conscience and amusements. Some people think anything is legitimate as an amusement. They can indulge in cabaret parties,sprees, and other excesses. I am not making a plea for anything outside the pale of common sense and every-day decency; but, on the other hand, I feel sorry for those overserious souls who miss so many of the harmless pleasures of life, who shut themselves off from almost all forms of entertainment, because their conscience tells them that such things are wrong. I simply can’t come to believe that everything enjoyable is wrong.

At the present time I have a patient who needs to have a little entertainment, a little diversion. She should have something to break the monotony of her life, but I am finding it exceedingly difficult to hit upon anything that her conscience will let her do, and I dislike to get into a controversy with her conscience at this stage of the undertaking. So far, practically everything I have suggested that she might do she has turned down because she doesn’t approve of it. We have to be careful how we break down conscience barriers, especially with young people, because if we break them down legitimately in a few cases, we establish a precedent that may encourage them to override conscience in its legitimate domain. It takes time to reeducate conscience.

Here is a singular case: a woman whose life has been almost spoiled, who seldom enjoys any recreation because she thinks so much about those who do not have such pleasures. When she goes to a picnic she almost gets indigestion thinking about the poor people who cannot have outings. She can hardly enjoy an automobile ride, thinking of the few people who do not have automobiles. She wonders if it is right to have luxuries when there are so many who hardly have necessities. In general, this is a commendable mental attitude; but the woman in question does not stop with being charitable. She has allowed herself to dwell on these ideas until they have ruined her health, as well as her happiness. She is kind-hearted and unselfish, but, because of an excess of conscientiousness, she is not only helping no one else, but is spoiling her own joy of living.

IN THE BUSINESS WORLD

I hesitate to tell a story of too much conscience in business, as there certainly should be more conscience in most of the business we see going on; but some time ago I met a man who had made himself sick by worrying over minor points in his dealings—as to whether they were

right or wrong, fair or unfair. For years he had been indulging in this overconscientious worry, and we finally helped him by asking him to apply the Golden Rule—to think whether he would be satisfied if he were treated in the same way, and if he would, to go ahead. He had reached the point where to make a profit in a business transaction was to do wrong, to take advantage of his fellow men; the Golden Rule finally straightened him out.

It is indeed remarkable how the commercial consciences of men can vary. I might say that this man had his mind first stirred up by a verse in the Bible condemning usury. He began worrying about just what usury was, and with his nerve-tone run down, suffering more or less from nervous exhaustion, he fell a victim to this worry over profiteering. It is only just to state that in the task of reeducating his mind on ethical values, we were aided by the fact that he had sufficient physical attention to build up his nerve-tone and thus to look at things from the viewpoint of common sense.

A lot of these troubles could be side-stepped if we would only use common sense. The average viewpoint is fairly sane and normal, and we should always take stock of ourselves when we move very far toward either extreme in our reactions to the problems of daily life. There are few cases, however, like that of the man whose story I have just told. For every one I meet like him, I meet a hundred who would do themselves no harm if they allowed a little more conscience to run through their commercial transactions.

HOW ONE CASE STARTED

Just this morning I received a letter from a woman, now almost fifty years of age, in which she tells of the gradual development of an inferiority complex. Her letter is helpful in that it serves to show how such things begin early in life. This woman says, in substance:

“When a child, if I complained of pain or of feeling tired, my mother would say, ‘You are just like your Aunt Emma. She always had pain somewhere, and she never amounted to anything.’ My parents were always too tired or irritable to hear of my troubles, so by and by I began to shut up like a clam, and said nothing to anyone. But I remember what a tremendous impression it made on my young mind when my parents would say, ‘It is strange she hasn’t any common sense.’ And sometimes they would startle me by exclaiming, ‘Haven’t you any sense at all?’ And I really believe that the fear thus implanted—the fear of not having average common sense—has been sticking in my mind, beneath the surface, ever since.

“But the climax came when I was fourteen and my father punished me severely for something I did not do. This punishment was very humiliating, and it caused me to distrust parental love. It was also a great blow to my personality.

“In this state of mind I did not get along well at school, and my parents decided I should go to work. They said they were determined to see if I was good for anything. This increased my humiliation and stirred rebellion in me. I was too cowed, too afraid to say anything; but I did a lot of thinking. I was put to work in a factory. Up before six o’clock in the morning, worn out at night, I was too tired to make any trouble, I guess, when I got home. About this

time I got hold of a book that gave me a little religious consolation, or I don't know what would have happened. The people that I worked with were all older than I, and I was so green that I afforded them a great deal of amusement; but it all contributed to the formation of a deep-seated inferiority complex.

"About this time something went wrong with my heart, and I couldn't work regularly. When my infirmity kept me at home, I heard them say: 'Well, she can work when she wants to. She works long enough to get something, and then she loafs. I don't see where she gets this lazy streak.' In a short time I found lighter work, but at very small wages, and this contributed greatly to lessening my self-respect. As things now stand, I find myself all but hopelessly handicapped with the following fears:

"1. I am afraid to trust my own judgment. I shun decision. I don't want to face any responsibility.

"2. I am afraid to trust my friends. I have reached the place where I doubt if I have any real friends, and I just can't bring myself to trust anyone fully. When people try to be nice to me, I have such a twisted view of things that I think it is because they pity me, because they look upon me as my parents did in earlier years, when my mother once said to me: 'Oh, they don't want you, they just asked you because you hung around and they had to get rid of you.' And another time she said: 'You think that other people think so much more of you than your own folks, but you will find some day that they don't.'

"3. I notice every little seeming slight. I don't expect people to be friendly just for the sake of friendship, and I am looking for slights. I am very sensitive, exceedingly self-conscious. I find I have a chronic habit of turning mole-hills into mountains.

"4. It is hard for me to receive a favor and feel that it is given in friendship, or that I in any way deserve it. I always feel that it is extended as a manifestation of pity. I think everybody is looking down on me.

"5. I shun intimate social contacts, because of the feeling that just as soon as people get acquainted with me they will look down on me—will discover my weaknesses and have nothing to do with me except out of pity. This probably accounts for the fact that few of my friendships ever progress beyond the acquaintance stage. There is a barrier. I know it is largely my own fault, but I seem powerless to prevent it. I am in the grip of this conviction of inferiority.

"6. I have repressed all original and fearless personal thinking for so many years that my brain will hardly work now. I was afraid to express myself when young because I would be charged with foolishness. I dared not indulge my imagination. For years and years I thought I really did not have good common sense, and, of course, all this has served to prevent my trying to seek higher positions. I feared I could not fill them. I have had to get along with small wages because I was afraid to take a better position, even when it was offered to me. I have alternated between the longing to climb higher and the feeling that I would make a failure if I attempted it. Thus I drifted on, year by year, feeling that I was a failure, that nobody wanted me; and to-day I am helpless unless there is a boss around all the time to tell me what to do.

“And now is there any help? What can I do? Which way shall I turn? Even after all this, can I make something of myself? Is there any deliverance from this terrible situation?”

You see, if we pick on our children too much when they are young, they will develop the habit, in later life, of picking on themselves; and while it is a commendable trait to be willing to recognize one’s weaknesses and put forth proper efforts for their correction, *it is a soul-destroying habit to be continually nagging or picking on one’s self.*

If such a situation develops in your home, it is better to get right away, to escape from such paralyzing influences and strike out in the world for yourself. If you find you are drifting into the formation of an inferiority complex, sign your own emancipation proclamation, and declare yourself free from this sort of slavery; go out and hold your head high, stand up straight, and be firm in defense of your own right to live among your fellow men on this planet, remembering that our national Declaration of Independence recognizes the right of every human being to “life, liberty, and the pursuit of happiness.”

CHRONIC INDECISION

Another form of inferiority feeling is manifested in the fear to make decisions. Thousands upon thousands of good people are suffering from chronic indecision. They just can’t make up their own minds when a problem confronts them, and the more trivial the affair, apparently, the greater their indecision.

Indecision, of course, is sometimes an accompaniment of brain fag or of nervous fatigue. The brain shares with the rest of the body in an all-around inability to do things when tired out. But I have in mind particularly a group of people who are fairly well, both nervously and otherwise, yet who are victims of chronic indecision. They are lacking in initiative and are afraid to decide things for themselves. They work very well as cogs in a machine, but the moment they find themselves alone, they are all but scared to death, afraid to make a positive decision.

I am thinking of a certain woman, who for a dozen years has refused to be responsible for the most trivial decisions. She has to consult a neighbor, see her minister, call on the doctor, ring up her husband, before she can decide on anything. Her sister-in-law tells me it is pathetic to go shopping with her. She actually spent ten minutes in a market trying to decide whether to buy leaf lettuce or head lettuce, and then the sister-in-law had to make the decision. Purely a habit, it is, in the case of this woman. She is in good health, and is not suffering from a nervous breakdown; but her parents failed to teach her, when young, how to bear responsibility. As near as I can find out, she never did anything by herself. Her mother was always beside her. She tells me that she was never even permitted to clear off the table or wash the dishes entirely alone. Parents make a great mistake in not very early teaching children to bear responsibility, to make decisions, to take the initiative and go through with things alone.

I am going to prescribe for this woman the same régime that I recommended successfully several years ago for another case of the same sort. We arranged an itinerary that took the

patient away from home alone for three months. The tour covered the whole western section of the United States from the Canadian to the Mexican border. Her itinerary, with a list of things she was to do, embraced over fifty typewritten pages, and she went through with it. At the end of ninety days, when she returned to Chicago, she was cured, as she said, "of all this infernal and life-long bondage that I have been subject to."

Thinking is of little value in these cases. You have to get into action. The only way to cure indecision is to make decisions. Deliberately place yourself where you will have to decide things, and shortly your cure is effected. No use talking about it and thinking about it; act, if you are going to cure yourself of indecision.

INFLUENCE OF PHYSICAL HANDICAPS

A few days ago I received a letter from a middle-aged man who has had more than his share of trouble. Tuberculosis of the spine has left him crippled and all but a hunchback, and he has had a number of other misfortunes which have led him to feel, until recently, that life was a failure. When I last saw him, he thought the best thing he could do would be to jump into the lake. As I have learned that it is a very rare thing for a sane person to commit suicide—that we have to be in an extraordinary position before we will part with either the pleasures or the miseries of living—I didn't take that threat seriously, but advised him how to go to work to solve his problems. He was still on the verge of despair, but he followed my advice, and one by one the great bugaboos before him disappeared. His economic situation cleared up, and he was overjoyed with the sudden improvement in his affairs—happy beyond expression—until he took a look at himself. Could he get married now? What about heredity? Would his children be affected? And so the clouds of despair began to gather again, and he made one more frantic appeal to me, saying: "Am I to be deprived of the joy of having a home? Can't I love and be loved? Can I never have children of my own to brighten my life, to train, to leave behind to share these things I am creating?"

Not infrequently we meet men of this nature, who are conscientious about reproducing their kind, and who, because of certain shortcomings, afflictions, or deformities, hesitate to assume the responsibility of parenthood. I am glad I could tell this young man that practically all the afflictions which served to deter him from marriage were of a sort not transmissible by heredity. It is indeed encouraging to be able to tell parents, or would-be parents, that so-called acquired characteristics are not inherited; that, in general, those afflictions which come upon us as a result of accident and disease are not transmissible to the next generation. It is only that which we were born with that we pass on to our progeny. As some one has said, "Wooden heads are inherited, but wooden legs are not."

On the other hand, when we are victims ourselves of hereditary defects, we should recognize that education, discipline, and training can do much to overcome them. If you will apply yourself resolutely to the mastery of an undesirable trait of this kind, you can wipe it out of your own list of handicaps. While you may not be able to take the tendency out of your germ plasm, so as to avoid passing it on to future generations, you can, practically speaking,

take it out of your own life. It means work, hard work, but you can do it.

It may be of interest to explain more fully how this unfortunate young man solved his problems. There were four or five big things that seemed to threaten his happiness, and these we wrote down on a piece of paper. Some of them were highly personal; the most important he chose for immediate solution, and was successful. The next difficulty happened to be one in which I could help; we soon smoked that little blue devil out of his hiding place and saw that he was duly executed. And so, one by one, tackling the more important problems first, these difficulties were solved. When we are confronted with half a dozen troubles, we are overawed and feel that we can never master them; but if we tackle them one by one, they soon take flight.

THE MATTER OF PHYSICAL APPEARANCE

I find a lot of folks are picking on themselves because of some trifling bodily handicap. I know of a young man whose life was almost ruined because the first time he ran away from home to go swimming (he unfortunately had a mother who was willing her son should learn to swim but didn't want him to go near the water) the boys laughed at him and made funny remarks about his physical development. Their gibes struck terror to the soul of this bashful lad. Even in college he feigned illness, trying to get a physician's certificate to keep out of gymnasium work. There constantly hung over him the dread of being observed, criticized regarding his physical development, and yet when I examined him I found him to be in every sense an average, normal man. His fears were groundless, but they pursued him until he was over thirty years of age, and in the meantime he developed a first-class inferiority complex. At last he confided his secret to a physician and his mind was set at rest, tho it required years to outgrow this depressing tendency.

We constantly meet with those who are worried to death over something peculiar about their physiognomy—their noses are too big, or there is something wrong with their eyes or their eyebrows, or their chins aren't just right; and how worried some people are over their hair, especially when it begins to fall out! We must remember that we are not to blame for the physiques we have, except as we fail to take good care of them and to make the best of what our ancestors have wished on us. The world is full of all kinds of people, and, generally speaking, we are no more defective or deficient than the average run of folks. None of us are angels temperamentally, or Apollos physically. We mustn't expect, in general, to be above the average, and we must recognize that we probably measure up to that average.

How self-conscious some of us are in a social sense! Not long ago I met a splendid woman, a beautiful character, who had side-stepped social contacts and had suffered lifelong misery because of a tendency to blush excessively. I had to tell her frankly that she probably would never get over it; that some folks were unusually pale or unusually red, and still they had a right to live; and that this tendency to blush, due largely to self-consciousness, was a great deal more noticeable to herself than to others. I told her I thought it was far more becoming than excessive pallor would be, but I don't think I succeeded in convincing her on that point. But she has started out with the determination, blush or no blush, to go about her

business, and is beginning to win her due share of satisfaction in living.

Instead of maintaining a state of constant and exaggerated self-consciousness about these little defects—and we all have them—we must learn to go right on about our business, ignore them, forget them, and if they insist on intruding into our consciousness, ridicule them. Don't forget the power of ridicule in dealing with these problems. Laugh, and laugh heartily.

FALSE PIETY

We have another group who are constantly picking on themselves spiritually or morally. They think they are not as good as other people. Of course, they probably would resent it if anyone else said it, like the man who was giving his testimony at the prayer-meeting. He told what an awful man he was, the worst man in the community, etc., and when a neighbor got up and agreed with him, saying he was glad to hear him confess it, he became righteously indignant and assured all present that he was no worse than the rest of them. We don't like to have others tell us how bad we are, but there are certain types of people who seem to get a great deal of consolation out of condemning themselves in their own minds. It is bad business.

Look yourself over and recognize that you belong to the same tribe of sinners that the rest of us do, and go out with the same right to seek salvation, and then rejoice in its benefits. Keep your eye on the great patterns and ideals, and quit picking on yourself. To say the least, there is not a great deal of inspiration in looking at ourselves, from a spiritual standpoint. We are of the earth earthy, so let us quit looking so much at ourselves. Let us develop a religious experience that is based on "looking unto Him Who is the author and finisher of our faith."

Then we are constantly meeting another group who go through life stepping softly and fearfully because of lack of education. Just because they are not high school or college graduates they are afraid to express an opinion. The time has come when you should realize that by reading and studying you can possess yourself of all the facts that any graduate has, and by mingling with the world and gaining *practical experience* you get something which none of them have, unless they get it after their school days. This going around with head bowed just because you don't have a sheepskin is all nonsense.

If your town has a public library you have an education right there on its shelves, as far as book knowledge is concerned; but remember, real education, real culture, consists in the development of the character as an outgrowth of mingling and associating with your fellow men. If you have lived well and successfully, if you know how to associate with your fellows, if you are living a life that is making this world a better place for your children and grand-children to live in, then you are educated; indeed, you are more—you are, to some extent, cultured. Real education consists in the ability, each day, to learn how one more human being looks at life.

Not long ago I had a patient who complained that he felt small and insignificant among his friends, who were constantly talking geology. There had moved into the neighborhood a geology fan, and my patient dreaded to meet him. I gave the patient a list of geology books

and told him to get busy. He devoured the books, and now is ready to talk to a college professor on geology. He can pick up a stone any time and tell you its origin, history, and destiny. What a change it has made in this man! Now he is delving into biology. He said he never knew how much could be learned, with the right books, about one subject in three months.

It should take a mature mind only six or eight months really to master all the essential knowledge in the whole four-year high-school course. We don't send our children to school for the knowledge they get, so much as for the training, the discipline, social contact, play, and other things that help to develop their social and gregarious characters. We send them to school for contact with their teachers. The encyclopedia has more in it than the teacher ever knew, but the encyclopedia can never take the place of personal influence—the inspiration that comes from contact with a devoted teacher.

Don't bemoan the knowledge you have lost by not going to school, because you can easily make up for that by reading and study. There is no excuse for having an inferiority complex regarding education and intellectual attainments. If you are lacking in anything, get busy and acquire it.

TEMPERAMENTAL PECULIARITIES

I have in mind a woman, forty years of age. She is a good wife and mother, but bashful and reticent, always lagging behind in a general conversation, always fearful to take the lead or to express an opinion, or in case she should express an opinion, if somebody differs with her, she shuts up like a clam, making no effort to show why she believes and will continue to believe what she does, never daring to accept the challenge of controversy. Naturally, she has grown up with a more or less stunted personality; she lacks development in individuality and all that pertains to a happy, joyful, free and expressive life. Now, when such victims of the inferiority complex take themselves in hand, seek counsel, get directive help, they can escape from this segregated life and come out into the open where they can lead a normal social existence.

We are trying to help this woman by having her read periodicals on current events, keep track of the daily papers, and thus get into a position to discuss intelligently the things that are going on in the world. And the most valuable help we have given her has been to teach her to initiate conversations; not to wait for some one else to start, but to think of something with which she is thoroughly familiar and then start the conversation on that subject and discreetly direct it along lines she feels competent to discuss. This, together with her general efforts to increase her self-confidence, is proving effective; but how much easier it would have been if she had sought help before she was forty! It is easy to correct such deficiencies in school days. In fact, these diffident tendencies should be corrected in children before they enter high school. Teachers and parents should pay more attention to this, as it means a hard struggle after one has reached middle life.

And so, no matter what your handicap may be, whether handed to you by your ancestors through heredity or acquired through disease or accident, accept the fact and go on about

your business. Remember, for instance, that stuttering is neither a crime nor a sin; it is simply a curable handicap. Make up your mind to get well, and while doing so, live a normal and happy life.

THE SISSIFIED BOY

Fond parents, particularly mothers who are overanxious about their children and those who have lost their husbands and are raising their boys without a father's influence and help, sometimes tend to make their boys more or less sissified. When such boys go out to mingle with other boys, they are laughed at, and this contributes to the formation of a social inferiority complex.

I have a patient now, a chap whose mother kept him so close to her that he had little experience in associating with boys. One day when he did escape he went out to play ball, and the first time he threw the ball the boys all laughed and shouted, "Oh, look at Henry! He throws just like a girl!" He never tried to play ball again. He was sensitive and brokenhearted, and stayed close by mother's apron strings. He never learned to drive a horse. I doubt if he could drive an automobile to-day. He never indulged in athletics. He doesn't know how to play games. He never had a boyhood. He only had a girlhood, growing up with his mother, and he was even afraid to get married. His personality was but a sort of budding—like the yeast plant, coming off the mother; he never, as an individual, was really born until he was thirty-five years of age, when he decided to break away and live his own life.

Parents make a great mistake in oversheltering and overprotecting their children. Give them a chance to think, to act, to decide; encourage it; indeed, force it; if you have a boy who is growing up without learning to do things that other boys do, force him out, put him into the game. See that he takes his place in life. And if you have girls, do the same thing. Put them in the kitchen, teach them to cook; put them through an average training, and you will be doing much to prevent the development of an inferiority complex.

We are meeting these cases of oversheltered youth all the time. It is difficult to advise parents in such matters. If we urge them to throw their children out into the world, and something goes wrong morally, the parents are inclined to blame us and to feel that they have made a great mistake in not continuing to protect their offspring. Yet contact with the world is absolutely necessary for normal development.

I have advised the parents of another oversheltered boy who is under my care to send the lad out for a number of summers to a well regulated camp; and I am going to ask those in charge of the camp to put him through all the he-man paces on the program. We are going to force this boy, in his school work, into the more vigorous and masculine athletic activities, and shame him away from the sissified habits and practises he is now indulging. My next move is to get him away from his mother for at least a year or two. I haven't had the heart to tell her this, face to face, but I have told the boy's father. This mother is simply ruining the future of her boy, and she doesn't know it. She is doing it all out of an overflowing, kind and motherly heart. In fact, I am not sure that it would be necessary to do much except take him

away from his mother. She simply idolizes him and seems to have no common sense whatever when it comes to his management and upbringing.

No one—at least no one who has been a parent himself—feels like advocating a boy's running away from home; but if you had to see these things from the physician's angle, as I have to, you would say that in a case like this it would be a godsend if the boy had grit enough to pack up and leave home, join the navy, or do something like that; but this boy won't do it. We shall have to plan things for him and send him away. His mother has already so thoroughly sissified him that there will be no danger of his getting up courage enough in the next few years to leave home.

LEARN TO BE A GOOD LOSER

Every now and then I run across a person who is all but ruining his life through conscientious worry over some minor mistake he made when young. I could fill this chapter with stories of such people. They are worrying over some immature decision, or over this or that indiscretion or folly of their salad days. If you belong to that foolish group, resign from it at once. Lack of judgment is an inevitable part of youth, and remorse for an error of that kind is both useless and unfair to yourself.

One of the first things a person with a tendency to an inferiority complex should learn is to be a *good loser*. Nobody can always be on top of the heap, and it is a wonderful help—in overcoming the tendency to pick on yourself—to remember that it is no proof of inferiority to lose occasionally. This is why I like to see young people play games, go into athletics, have debating groups at school; they are learning to take defeat gracefully—to go up and congratulate their more successful opponents.

We shall have less cause to pick on ourselves if we treat some of these passing events as trivial, if we expect them, if we get over the notion that we can win every contest; and then, when we have done our best, when we have played the game squarely, when we have run our course fairly, we can accept trifling defeats and transient disappointments as a part of life, without qualms of conscience on the one hand or self-criticism on the other.

THE CONSCIENCE COMPLEX

MODERN civilization would not last long if human beings lost their conscientious regard for the sanctity of their pledges and lapsed into indifference regarding personal, social, and moral obligations. Modern business is transacted largely on the basis of mutual confidence, and it is worth a great deal to have it said of us, "His word is as good as his bond." Nevertheless, every physician who has much to do with nervous troubles and emotional disorders soon comes to recognize that thousands of well-meaning individuals are suffering from mental torture and various nervous disorders as the result of overworking the conscience.

I am very sure we could not get along without conscience, but at the same time it seems a pity that so many splendid men and women should make themselves ill by overscrupulousness. Certainly it is possible to find out how to live conscientiously without having to suffer the tortures of what we have come to regard as the *conscience complex*.

"Doctor, this thing is just driving me wild. I simply can't make things go. I have tried my best, but I have made a perfect failure of it." This is the way a middle-aged woman of hyperconscientious temperament introduced her story to me the other day. This good lady, a few years ago, had heard a sermon on the Scripture text, "But I say unto you, That every idle word that men shall speak, they shall give account thereof in the day of judgment." She took it seriously, literally, and began to think of all the social palaver, the frivolous chit-chat, and the various other ways in which we loosely use words—not to mention our humor and jokes—and made up her mind that her social circle folks would have much to account for on the day of judgment. She decided to reform her own communications in this respect, and so she largely lost humor out of her life, ceased to tell funny stories, and could not make a social call without condemnation by her own conscience because of the use of idle words.

You can imagine her condition after one month of trying to live this artificial and unnatural life. Her digestion became affected, her sleep was disturbed, her religion was all but ruined, and her happiness had vanished. Her husband became so alarmed that he took her to see a doctor.

And this is but an introduction to the story I want to tell you about conscience in relation to health. I am meeting people all the time who are sick because of conscientious worries, and I want to discuss some of these cases with a view to helping thousands of others who may be in needless trouble with their consciences.

WHAT IS CONSCIENCE?

I can do no better than to outline here the method I had to use in the case of this poor soul who had gotten into such a jam with her conscience. In the first place I had to explain to her that conscience was not what she thought it was—"The voice of God to the soul." I

don't know just where that definition of conscience had origin, but it must have been at the hands of one of the poets. It may, in a way, embody a beautiful sentiment, but it is not true, and in this respect it recalls the quip of the humorist who said that it was "better not to know so much than to know so much that ain't so." Conscience is nothing more nor less than the inward sense of our inherited and acquired standards of right and wrong. Conscience is dependent upon education and training, and is tremendously influenced by our associates and environment.

Conscience is a state of mind that tells us always to do right; it never tells us what is right. I tried to make it clear to the woman in question that other mental powers must be brought into service to find out what is right—judgment, reason, idea discrimination, and choice—that it is the part of the other mental powers to determine what is right in the circumstances, and that conscience is merely the monitor which admonishes us to do the right thing after we have thus determined it. I had to explain to her that it was wrong to offend her neighbors by not visiting with them; that the second great commandment of Jesus was to "love your neighbor as yourself." I had to remind her of the doctrine that Christ came that our "joy might be full"; that we were to "cast our burdens on the Lord" and "rejoice evermore." I had to look up a lot of texts for this woman, such as "A merry heart doeth good like a medicine."

I found her religion was all soured and mildewed, and it was no small job to get it sweetened up, but we succeeded. She is getting back into normal ways of living, and is regaining her health; but six months or a year of this sort of foolish living had about spoiled her disposition. I had to remind her that it was conscience that led the zealous Hindu mother to throw her helpless babe into the jaws of the crocodile—until the British authorities put a stop to it. Conscience has led many people, in times of ignorance, to commit acts that we now call crimes. Conscience has been behind many a fanatical and horrible persecution, and to-day we see that it still leads its willing victims into paths of disease and ill health.

Different races have different conscientious reactions in the presence of the same situations. In this connection we must remember that we are all confronted with the problem of adapting our primitive instincts and emotions to the demands of civilization, and that conscience is not equal to the task of sitting as sole judge and arbiter of the conflicts which this problem entails.

A dozen chapters could be filled with true stories of well-meaning men and women, young and old, who have made themselves ill and unhappy by allowing their consciences to intrude into unwarranted realms and thus unnecessarily to interfere with their pleasures, decisions, and habits of living; but, fortunately, there is no mental twist or intellectual kink of this kind that the average individual can not straighten out if he goes about it with a will.

Much of our trouble with conscience grows out of the teaching of the Puritans, which rather inclined to the idea that if anything was pleasurable it was sinful. As soon as some overconscientious souls find out that something is enjoyable—that they are having fun—they rein themselves up suddenly and look around to find out what is wrong. They have an idea that they can't have a good time until they get to heaven—that this world is a "vale of tears," and that there is no use looking for a good time here below. Of course, this mental attitude

fosters and augments the hyperconscientious tendencies which so many people have.

Far be it from me to decry the conscientious tendency in the human species. I merely want to see that it is used and not abused. I want it to be so utilized as to help us enjoy better health and a larger measure of happiness. As a physician, I well know that wrongdoing is at the bottom of a large amount of sickness and suffering. Immorality is the cause of a tremendous amount of modern disease, and the guilty conscience, one that is rightfully guilty, predisposes to worry, nervousness, and even semi-invalidism; but fear is not only the handmaiden of sin; fear comes to be misapplied to a great many innocent and harmless things in life.

We all recognize the value of so living as to have "a conscience void of offense toward God and toward man." We know that sin is at the bottom of a great deal of human misery; but we should also know that worry and fear, when hooked up with conscience, are able to torment and torture the innocent soul, and through a misunderstanding of conscience, produce ill health and unhappiness.

HEALTH COMPLEXES

I have as a patient a woman who was more or less nervous; when she got tired out and worried, her digestion went on a strike; and, as was only natural when she had these stomach-upsets, she would think back and remember what she ate at the last meal. If she had eaten tomatoes, she perhaps would recognize a little of the tomato flavor when belching, and would come to the conclusion that tomatoes had upset her digestion; therefore, she wouldn't eat tomatoes any more.

After six or eight years of this, she came to the place where there wasn't anything left but baby food and a few special invalid preparations. From 150 pounds she had gone down to 91. In the midst of this worry about her digestion she began reading all the books she could find on diet, and soon had a religious twist to her dietetic practises. She decided, rightfully enough, that the laws of health were the laws of God, and thus her dietetic worries were also of a conscientious nature.

I remember well the first time I talked with her. She quoted the text to me that our bodies are "the temple of the Holy Ghost." That is good Scripture, and I think some careless and conscienceless folks would do well to remember it; but this poor soul needed rather to get hold of that text describing how the early apostles "ate their meat with gladness." After explaining the difference between diet and religion, and making it clear to her that her stomach trouble was altogether due to her upset nerves, I administered a few months of reeducation along these lines, with definite periods of rest in the middle of each day. She is now learning to manage her conscience when it talks to her in a foolish way about eating, and she is making a steady gain in weight.

This woman still has a standard of right and wrong about eating. Conscience has a domain in which she allows it to function, but she does not allow it to dictate as to whether she shall have her potatoes fried or baked. She has learned that when she is not tired out nervously she can digest fried potatoes just as well as baked potatoes. The eating of fried

potatoes, by the way, was one of the dietetic practises she regarded as a sin. She read somewhere that when potatoes are fried the starch becomes smeared over with oil and can't be digested. I had to explain to her that if it was not digested in the mouth and stomach, farther on in the digestive tract old Mother Nature had provided a means for performing just such digestive feats, and that it was a shame not to make use occasionally of Nature's provision and thus to keep the machinery limbered up.

Of course, I know that some people should give more conscientious attention to their diet. I have a patient now, a man about fifty years old, who is living on the scavengers of the earth, sea, and sky, and is going to check out of this life ten or twelve years earlier than he would if he would consult his conscience in regard to what he eats and drinks; but I am not discussing that case now; I am talking about the folks who make themselves sick by hyper-conscientious worry.

THE PHYSICAL CULTURE COMPLEX

Let me tell you about a man, now thirty-five years of age, who has made a religion of physical exercise. He thinks he must go through certain exercises every morning, walk so many miles each day, do just the same number of exercises each evening before he retires. I think he has allowed his conscience to intrude into everything he does of a physical nature, unless it be yawning; he can still yawn as Nature wants him to, I believe; but everything else must be done systematically, by rule; yes, by conscientious rule.

He was greatly benefited years ago by his devotion to physical exercise. It did improve his health and efficiency, but this idea has grown in his mind until he has allowed his physical culture fad to become an annex to his religion. He actually told me not long ago that he went to church one Sunday and didn't enjoy the service because his conscience told him he had not taken his regular amount of exercise the week before. He thinks exercise, talks exercise, almost eats exercise. His wife and friends think he is becoming a nuisance. His outdoor social life is spoiled because he can't do anything as other people do—because he must have a certain amount of exercise in a certain way.

What are we doing for him? How are we going to set him straight on this point without upsetting his conscience in moral matters? We are attempting to have him redefine conscience to his own mind, and are explaining to him the value of being more free and spontaneous in health practises; showing him the danger of monotony, pointing out that he should vary his exercises, that he should be able, if the occasion requires, to do without them one day and then return to them the next day. We are trying to show him, in short, that he is a slave to his own system; and already we are beginning to succeed.

I have a patient at the present time, an earnest soul, who thought it was wrong to engage in an innocent pastime that all the rest of her family indulged in; but she did not wish to be queer, so she gave in and did what the rest of her family did. And then her conscience began to worry her. In less than three months her health was wrecked; insomnia, indigestion, and various other ills came to distress and plague her; she was a sick woman, ready to take to her bed, all because her conscience worried her over this simple little matter.

She is getting well now because we persuaded her to take this pastime out of the realm of conscience; told her that conscience was an intruder, that this was a matter of personal choice. She has come to see that it is far better to play with her family and to keep in touch with them, than to indulge what she now says was her conscientious ego. She now regards her hyperconscientious reaction as Pharisaical.

THE PROFESSIONAL COMPLEX

I know an overconscientious physician, a splendid doctor, who broke down worrying over his patients. In taking care of an accident case, he not only showed ordinary human sympathy, but went through nervous reactions that might make you think he was responsible for the accident. I once asked him, while he was taking care of a patient who had been injured by an automobile, "Did you run over the man?" "Why, no," he said. In his surgical work he not only took the ordinary precautions, and even extra precautions, but allowed conscience, in an unnecessary and harmful degree, to intrude itself. In spite of warnings, he persisted in this overwork, overworry, overanxiety; the result was a breakdown, and it will probably be a year before he ministers again to ailing humanity. I think he has learned his lesson.

Here is another case: a school teacher, thirty-seven years old, a hyperconscientious woman, easily the best teacher in the group to which she belonged. Not satisfied with being an ordinarily good teacher, even the best in her school, she was so overconscientious (and I think there was an element of personal pride, professional egotism, also) that she worked early and late; put in uncalled-for extra time on two or three backward pupils; attended everything that had to do with teachers and teaching; was the leader and moving spirit of the Parent-Teacher Association; took advanced work every summer for ten or twelve years; never had a real vacation. Result, a sudden breakdown. For a year now she has been resting, and she said to me the other day: "Doctor, I have learned my lesson. I am not going to try to be the best teacher in the world any more. I am going to be among the best teachers. I am going to do an honest day's work, but I am not going to allow conscience to tyrannize over me any longer. This breakdown has educated my conscience, and told it a few things it didn't know. Some other things my conscience made me do to be a good teacher, in years gone by, my reeducated conscience will not allow me to do in the future. I have learned that I have a duty to myself and my family as well as to my school and its pupils."

THE MOTHER COMPLEX

Experiences by the score could be related which would go to show how the overconscientious mother may ruin her health, break down her constitution, by unduly ministering to a sometimes not altogether appreciative family. When parents have done their duty to their children, why should they worry? Maybe later on the children will not act just as we would like to have them. Maybe they will have a program of their own and will run away from

home to carry it out, or skip out to get married. Why should father and mother—particularly mother, for she seems more inclined in this direction—lessen their usefulness, diminish their efficiency, jeopardize their health, not to say happiness, by overconscientious worry and useless regret regarding these family episodes, which seem to be a part of life on this planet, and which happen even in the best of families.

A few years ago I had under my care a splendid young mother, about twenty-six years of age, who had three small children. She went completely to pieces. There was nothing the matter with her except overconscientious attention to her family, particularly the children. She was one of those who get up in the middle of the night and go to the bedside of the children to see if they are breathing all right, are covered, and so on. She was constantly worrying over their feeding, and when she stopped to think that the oldest one would have to go to school in a year or two, it was too much for her. How could she bear to have her children out of sight? Something certainly would go wrong in school—they would get hurt, catch diseases, meet bad companions. As the result of all this she simply went to pieces, and for eighteen months had to stay away from her family. Her children had to be left in the care of a stranger, and the father told me, confidentially, that they did very much better in the hands of the practical nurse; that they developed more character than they did under their mother's solicitous care. It would crush her, all but kill her, no doubt, if we were to tell her that; yet even she has begun to realize, in the last year, that children have a habit of growing up in spite of everything.

All this is not said to detract from the value of intelligent and faithful parental training. These are necessary; but why ruin your health by overanxiety? When you have done your duty, why not be satisfied? The trouble is that certain people are born with this overanxious tendency. They develop it sometimes to the point where we call it an *anxiety neurosis*, and when they happen, besides, to be of the overconscientious type, the combination means serious trouble unless these tendencies are recognized and early brought under proper control.

THE FIFTH COMMANDMENT COMPLEX

Then there is the case of the overconscientious sons or daughters who devote their lives to taking care of their parents. Their spirit is beautiful, like that of a mother's devotion to her child; but how disastrous it is, say, for a young woman—maybe the youngest of three or four children, all the rest married and settled down—to devote her life to taking care of father and mother, perhaps going occasionally to help her sisters or sisters-in-law when there is to be an addition to the family, and meanwhile toiling as a teacher or at some other vocation to make a comfortable home for one or both of the parents!

It is beautiful, but it is a sad spectacle when the parents pass on, and this old maid sister is unwelcome in the homes of any of her married brothers and sisters. She is too old to teach school. She can't enjoy the company and affection of the children of other parents, and so her health fails, and she finds herself somewhere between forty-five and sixty years of age, sitting in a doctor's office broken in heart and in health. Of course, it is too late then, but she

sees clearly that she should have married like her brothers and sisters, and then they all together should have cared for the father and mother; or that the son or daughter most favorably situated should have borne the burden.

Just the other day I saw a man of forty-seven, unhappy and discontented. He has only one satisfaction in life—the knowledge that he has sacrificed everything for his parents. Five brothers and sisters are happily married and have children of their own, and now this lone bachelor is beginning to become cynical and bitter. He is soured on the world. He considers taking care of his parents an unpleasant duty. He is determined to see it through, but life for him is all but ruined.

The obligation to care for parents is real and genuine, but who is going to care for the old bachelor or old maid? Have they no rights in this situation? Children can be selfish, but parents can become very selfish, too, and I believe every parent is selfish who monopolizes the lifetime of a son or a daughter, thus making it impossible for him or her to marry and live a normal life. In cases where for some other reason a son or daughter does not get married, I grant you, it seems only natural that such unmarried children should live with their parents and make a home for them in their old age. I do not have such voluntary associations in mind; I refer not to such cases, but to those in which the son or daughter has definitely refused to marry in order to care for the parents. That, I believe, is both wrong and unnatural, and results in a tragedy in later life.

Even the Saviour, when offering up His life on the cross and beholding His mother, did not suspend His work for the world, but called the attention of His disciple John to His mother and asked John to look out for her. He went on with His life work. I am willing to recognize that this care of parents may be our supreme obligation next to the living of our lives, but I cannot conceive that it is right to allow overconscientious devotion to such a duty utterly to nullify one's life's program.

THE FAMILY COMPLEX

Then we see this hyperconscientiousness in other family relations. I have in mind two sisters who are trying to live together. As time goes on, their personalities are developing, and each has more and more of a desire to live her own life; but they are always fearful of hurting each other's feelings. They keep themselves in hot water all the time because one of them can't do anything without trying to explain it to the other. If they would go right ahead and live their lives and get over this squeamishness about hurting the other's feelings, it would be much better; but they are overconscientious, and so unhappy. I had to sit down and explain to them not long ago, when they came to me with their troubles, that if each one of them would go about her business, and be natural and normal, and not feel that she had to live as the other lived, within a year's time they would be fairly happy.

It would be well for all of us to realize that when people in the same family try to live together after growing up, they are going against Nature. It is the plan of Mother Nature to scatter families and thus to work against inbreeding. She seems to want a widespread distribution of the germ plasm of the race, and so she sees to it that the task of living together

becomes more and more difficult as we grow older.

All that I have said about hyperconscientiousness in the family applies to husbands and wives in their daily efforts to get along together. I don't often see cases of this sort; but occasionally a wife becomes overconscientious as to her duties in the home aside from the children. Another thing: I wish especially to warn parents against worrying over their failure wholly to eradicate inherited traits in their children. Remember that children inherit not from their parents but rather *through* their parents, and that when you have done your duty as parents to overcome defective heredity in your children, you can cease to worry about it. Let them go out into the game of life, and there gain that experience which will admonish them to put forth personal efforts to correct these inherent weaknesses. Parents are responsible only for doing their duty; they can't make over their diversified children; they have to accept them as they are born and make the best of their hereditary endowments.

THE MISSIONARY COMPLEX

Several years ago I had a city missionary who worried over her religious prospects. After studying her for a number of weeks, I became convinced it was a case of worry, pure and simple. I told her she would have to get another brand of religion. That was a great shock—not only to hear that there was something wrong with her religion, but to have a doctor suggest that her physical troubles were rooted in her religious experience.

I asked her to go home and think the matter over; but before she left the office, I told her the story of a feeble-minded boy, who when he went on his pony to the mill for chop-feed, came riding home with the two-bushel sack on his shoulder. When asked why he didn't put the sack down on the horse and sit on top of it, he wrinkled his brow, scratched his head, and said, "Well, I reckon if the horse is willing to carry me, I ought to be willing to carry the feed." I tried to illustrate to this missionary that the good Lord had no more trouble carrying her on top of her burdens than underneath them; He had to carry them all anyway. She came back in a few days to tell me that my efforts had been successful, that my story had turned the trick, that she really had found a new religion, or rather, as she expressed it, "not a new religion, but a new dip in my old religion." She had come to see a new meaning in "Cast all your care upon Him, for He careth for you," "Come unto me all ye that are weary and heavy laden, and I will give you rest." And she recovered.

At the present time I have a very interesting case on my hands; I suppose he would be called a professional reformer. He has worked so hard and so continuously, trying to make the world over, trying to get everybody to do things just as he does them, that he has broken down—gone to pieces trying to save the world. Now, I am willing to subscribe to the idea that every human should try to make the world a better place to live in, but I think the task ought to be handled with some sense of values and proportions. Why should we get sick trying to make everybody do some trifling thing just the way we do it? I know that this is ticklish ground I am treading on, for we all have our pet hobbies, and I have no wish to quarrel with a single reader; but I insist that it is not a wise expenditure of energy to break

down your health trying to reform the world. You won't be a success as a reformer if you are sick, grouchy, and a victim of chronic worry.

If this uplift business is so good, get other people in it with you. Don't be so egotistic as to think you are the only one who can do it. Share this splendid enterprise with your friends and neighbors, and thus save your own health and contribute to the spiritual edification of your friends.

CONSCIENCE AND LOVE AFFAIRS

A number of years ago I met a man who had ruined his life through yielding to the tendency to be overscrupulous. He had been an average, normal boy, and it was not until adolescence, when he was about fourteen years of age, that this tendency to worry, and to worry conscientiously, began to manifest itself in his experience.

He was so overconscientious in his high school work that he would study until 2 o'clock in the morning to try to be absolutely perfect in his lessons, and then he would apply himself to athletic activities with the same religious ardor. He had no fun in any of these; the games were a duty to him, a stern duty to do his best—not his best in the ordinary sense, but in a religious, hyper-conscientious sense. In college this young man broke down after the first year. He took everything, including himself, so seriously. After his collapse at college, his parents sent him west to the ranch of a relative, and out in that country some young woman chanced to lose her heart, became infatuated with him, and then he all but had a second collapse. His conscience wouldn't let him fall in love with this girl, because he was not in the best of health and not prepared to marry. But he worried over her. He would be everlastingly responsible if anything happened to the girl, if she should break down or go crazy through her love for him; so this young fellow really did the best he could to go crazy himself. He became hysterical, and for months was almost unmanageable. I suppose the only reason he didn't go insane was that he didn't have that tendency in the family. What he inherited was the tendency to hyperconscientiousness, not to insanity.

They had to bring him away from the ranch, of course, and then for more than two years he moped and worried over what would happen to this poor girl. He couldn't write to her; that would encourage her; and if he didn't write, she might go insane, and then he would be responsible. After two years of careful planning and hard work, we succeeded in directing his mind in other channels, and he was getting along finely when up in his section of the city they started revival meetings; after attending two or three of these meetings, with their emotional appeal and their effort to quicken conscience, he was all astir once more. He made up his mind that his sufferings were due to the fact that he never really had been converted, that he had never been right with God. He heard a sermon one evening on the text, "Whoso covereth his sins shall not prosper." He looked himself over and decided that he had not prospered, and immediately came to the conclusion that he had been covering his sins. He gave up his position. He spent weeks and weeks trying to get right with God, talking of his sins and confessing them. He prayed and prayed, and of course his parents became alarmed again. I tried to reassure them, but a sister, who was a little bit on the same order, began to

worry over him, and the whole household was again thoroughly upset.

This went on all winter and into the spring and summer; he was relieved only by patient effort and by getting him away for the summer to a boy's camp, where he acted as an instructor in certain activities and otherwise participated in recreations and outings. He came back in the autumn fairly well, and obtained a new position; but within a few weeks a situation arose, a very ordinary one in business, in which he was requested to keep still; it was a sort of commercial confidence, but when he was admonished to say nothing about it, his conscience bothered him. Could it be anything wrong? If everything were all right, why should he be asked not to disclose these secrets? By Christmas time he was in deep water, and his conscience compelled him to resign his position. To make a long story short, there is a list of twenty-five positions which this man held from the time he was twenty-five years of age until he was forty.

And now what has happened? He began to grow more philosophical as he neared forty, and concluded that he had been foolish about this matter of conscience. He looked back over his life and decided that conscience had been a tyrant, a slave-driver, and that he was going to be free of it; but instead of acting on his philosophy, keeping his feet on the ground, and proceeding in a sane and sensible manner, he flopped over to the other extreme. He decided that life was meant to be lived and enjoyed, and so for six or eight months he cut loose to have a good time, and went in for all the amusements and questionable entertainments that he formerly had shunned; and when he failed to get peace of mind and comfort of soul out of this life, he reverted to one of his conscientious spells of depression, and this time he had real trouble. He knew he had done wrong; no question in his mind about the sin of his recent experience. In his efforts to set himself right with God, he encountered the mental difficulty that he had deliberately gone into evil, that he had committed the unpardonable sin, and so on. It took another year of effort on the part of friends, ministers, and doctors, to try to straighten him out. But he then started in to worrying over the fact that he had never married, that he hadn't done his duty to the world, that he never would be happy now. He had no wife and children to comfort him. Pretty soon he would be an old man.

I could fill a whole chapter with the story of this one man and the way he wrecked his career, making himself a nuisance to himself and all his associates. His aged mother's chief worry is still this wobbly, unbalanced, hyperconscientious boy. Fortunately, very few of us are born with such a pronounced tendency to over-scrupulousness; and if we have it to a mild degree, we can easily overcome the handicap.

Let us therefore learn to live cheerfully and gracefully; let us become experts in taking ourselves less seriously. Let us master the art of living with ourselves as we are, and with the world as it is, according conscience its legitimate place, but recognizing that reason and judgment have their part to play in relegating conscience to its legitimate sphere of action.

THE FEELING OF INADEQUACY

HUMAN beings are born with a great many defects, slight variations from the average normal, which are bound to be apparent as they grow up. The vast majority of us learn to make such adjustments that these minor handicaps, these trifling departures from the normal, in either mental endowment or physical development, never cause us very much trouble. But in the case of certain highly sensitive individuals, or of those whose attention is unduly called to these defects, so that they become inordinately self-conscious, there comes to be developed a chronic *feeling of inadequacy*.

We see these people on every hand and in all levels of society. Some of them are regarded as being merely a “bit peculiar”; others are designated “odd geniuses.” They are always more or less sensitive, usually seclusive, and are poor mixers. They are often given over largely to day-dreaming and are regarded, on the whole, as a fairly decent sort, but as being impractical; unless afforded intelligent help, they are destined to prove at least partial failures in life.

THE INADEQUACY COMPLEX

The ideal time to help this group of slight deficient to make adjustments to life is in their early years, and especially during the period of adolescence. A little effort spent on these individuals in the nursery years is highly productive of good results. Following adolescence it becomes increasingly difficult to help them. Early in our effort to help them, we must accept the fact that the necessary adjustments to overcome this paralyzing feeling of inadequacy will not occur in and of themselves. It is a dangerous policy to expect a child to outgrow such a tendency. More often the trouble tends to become aggravated as the boy or girl grows up through the teens and gets into the early twenties. The fight is won only by means of careful planning, logical thinking, and persistent acting and reacting.

This feeling of inadequacy is especially prone to develop when the child goes to school and is forced into competition with his playmates. But competition is inescapable in modern life. We can't hope to avoid being compared with our fellow mortals; and it is this competition that causes our minor deficiencies, particularly weaknesses of either mind or body, to stand out prominently in our own consciousness. Some time in our lives we have all been made to feel that we are deficient, that we are not quite the equal of our competitors. Now, when this idea becomes isolated, when it has to do more particularly with one special difficulty or weakness, it may come in time to grow into a real inferiority complex. We have discussed that in a previous chapter, but it is the intention here to deal with this feeling of inadequacy as manifested in its simpler forms and on up to the time when it becomes a real inferiority complex—or a stage-fright complex or some other serious psychic affair.

I suppose that the feeling of inadequacy in the presence of certain situations or as the result of failure in some competitive trial is the most common form of psychic distress to which humanity is heir. We have all had it. We can't always be winners. We have to learn sometime in life to be good losers, and victims of this feeling of inadequacy as a rule are very poor losers.

If this feeling is not early recognized and properly handled by parents and teachers, it is liable to become chronic and make serious trouble in later years. When that happens, the victim is fortunate if he falls into the hands of some psychologist or physician who can teach him how to escape the clutches of this gradually forming inadequacy complex.

Such a complex inevitably leads us to view all social contacts, where our deficiencies would be on exhibition, with more or less fear. In fact, as we grow up and this inadequacy complex becomes more and more developed, it assumes the proportions of a stage-fright complex. We find ourselves the victims of rapid breathing, flushing of the face, cold perspiration, palpitation of the heart, weakness of the knees, and even dizziness and nausea. Many a stage-fright complex has been built up out of these minor feelings of inadequacy.

An individual thus afflicted will naturally seek some avenue of escape. When these fear complexes begin to develop we have to make up our minds to engage in either flight or fight. Fear sooner or later becomes our master unless we subdue it; unless we make an intelligent and successful fight upon it, in time, fear will induce flight. We will seek to avoid every situation in which our deficiencies or shortcomings may become manifest.

ORIGIN OF THE INADEQUACY COMPLEX

The methods whereby we seek to avoid the embarrassments and regrets connected with our inadequacy complex are termed *defense reactions*. The majority of those who suffer from this feeling of inadequacy spend much of their lives in commonplace vacillation between flight and fight. Sometimes they try to master this tendency; at other times they cravenly flee from the field of battle.

In the study of the inadequacy complex, we must remember that we are born into this world quite helpless. Things which adults do without thought, commonplace activities which have become purely reflex actions, are all tremendous undertakings to the young infant. Laboriously, through the early months of life, he must struggle on by means of the experimental trial and error method, getting instruction from his parents and imitating his elders until by and by he acquires the ability to do fairly well most of the things that a human being is supposed to do; but every individual is doomed inevitably to be slightly deficient in some phase of thinking and acting as compared with the average human being, and this constitutes a perfectly natural and ever-present source of that state of self-consciousness which every developing human must needs pass through, and which, in certain sensitive and susceptible individuals, shows a tendency to evolve into an inadequacy complex.

There are many small but definite physical deficiencies and diseases which may prove to be the starting point of this feeling of inadequacy, such as chorea (St. Vitus' dance), heart

disease in childhood from rheumatism, which prevents normal physical activity, or partial paralysis following infantile paralysis. No matter what it is, whether it be goiter, pimples or some other skin disorder, irregular teeth, an obese tendency or a tendency to emaciation—any simple physical condition may prove to be the starting point of this self-consciousness about being different from the average run of humanity.

One of the most unfortunate cases of this kind I ever saw started from having to wear glasses—on account of eye trouble following measles—when the boy was only eight years old. It so happened that no other boy or girl in his room at school wore glasses, and the teasing that resulted all but ruined his life. Speech defects are still more commonly the starting point of this feeling of relative insufficiency. Stuttering or stammering, if not brought under control, is a very common cause of the early loss of self-confidence. The social standing of one's parents may be a cause of this feeling of inadequacy, especially if one be trying to mingle with other children who belong to a group whose parents are socially and financially better situated. Race, nationality, and even the sound of one's name have to do with this matter, as well as the clothes children wear, more particularly if they are required to dress a little differently from the other children in their social group. Later on in life our own social and financial standing, as well as our education, has a great deal to do with aggravating or helping to overcome this feeling of inadequacy.

But I think, aside from all hereditary and environmental causes, that the unwise attitude of parents and possibly of teachers is especially to blame. Parents should be very careful how they over-criticize and ridicule sensitive children who are already entertaining the feeling that they are not quite as good as the average run of their associates. This feeling of inadequacy, as well as the inferiority complex, is greatly contributed to by harsh methods of family discipline and by overbearing and bulldozing attitudes on the part of the parents, which serve effectually to break the will, and later on lead to the disastrous practise of oversuppression of the emotions.

As emphasized in the chapter on the inferiority complex, giving children tasks which they are unfitted successfully to execute is a very serious mistake. Parents and teachers are too often guilty of doing this. Give a child something to do which common sense should teach us he can't do, and failure is inevitable; each failure is another stone laid in the building of this prison-house of the inadequacy or inferiority complex.

All normal persons have this feeling of inadequacy—have periods of depression or what we might call the “blues” every now and then—but it is a transient affair. We quickly rise above it and go on about our normal way; but with certain types of diffident, reticent, and sensitive children, as the result of the gradual accumulation of self-consciousness on this point, or as the result of some spectacular situation, this state of mind comes to be a habit which settles down to torment them.

The inadequacy complex many times seems first to crystallize around some occasion of a social nature, such as when you were requested early in life to meet some very wealthy people or to pay a visit to the mansion of a prominent citizen; during this experience all the physical feelings of stage fright were developed and such a combination of psychic and

physical reactions occurred as to make an indelible impression upon the mind and memory.

I recall the case of a man who struggled along with this feeling in his teens, but never became really panic-stricken until after he had finished high school and was in business. At a banquet one evening he was suddenly called upon to make a speech. The state of his mind was more than panicky; he was seized with terror. He mumbled through a few words, almost unintelligible and inaudible, and sat down, flushing excessively and drenched with perspiration. From that time on, for a period of almost ten years, his life was all but ruined. He was seized with the conviction that he was going to make a failure of his career; it was no use; he had struggled on through his early years, but now he knew he was a failure. It required a great deal of patient, painstaking teaching on the part of his medical advisers to save him from really throwing up the sponge and leaving his family. At times it seemed he was doomed to become nothing more nor less than an educated tramp, an intelligent ne'er-do-well; he did succeed in pulling himself together, and gradually he mastered his difficulty; but not long ago he told me that even now, when he goes to a banquet or sits down with anyone at the table except his own family, he is seized with the impulse to get up and flee. The memory of this experience still grips him.

DANGEROUS DEFENSE REACTIONS

Now, what are we going to do about these cases? I have found it very helpful, especially in adolescence, after explaining the situation fully to such youths, to inquire carefully into their various activities and find some one thing they can do fairly well, and then encourage the development of this talent so that it will give them an opportunity to show off a bit. It gives us at least a talking point to convince them that they are not inferior in every respect. It is a good starting place in our effort to help them to a new or changed viewpoint.

Of course, there is a danger in this that as a defense reaction, and in their effort to overcome the tendency toward an inferiority complex, they may develop a superiority complex. Their heads may swell out with the feeling of superiority and they may develop such an exaltation of ego as to make themselves persona non grata with their associates. They may become "smart Alecks" and a nuisance even to their own families. And if the "smart Aleck" state of mind progresses too far we may develop a paranoidal state of mind. While a subsequent chapter is devoted to paranoia, it may be well here to explain that the paranoidal state is essentially a twin state of mind. Two ideas are reciprocal in its production, and they are: (1) the delusion of grandeur, the feeling of great superiority in some particular direction, and (2) the idea of persecution, the notion that other people are running us down, ridiculing us, even to the point of systematic persecution.

Thus certain types of egotistic individuals, when they have this feeling of inadequacy, instead of facing the facts and making adjustments thereto, prefer to go to the other extreme, developing a defense reaction of righteous indignation based on jealousy and hatred of their superiors; and this construction of a fictitious superiority complex by way of a defense reaction leads dangerously near to the borderline of the paranoidal state. It may end up in the individual acquiring a real paranoia and the God-man or super-man complex. Fortunately,

some of these paranoid states are transitory and curable. It has been my observation that only those who have a very bad strain of heredity toward the insanities are ever seriously afflicted with true paranoia. In the case of the average individual whose family history is free from insanity, this tendency stays in the domain of the neuroses, tho it may continue to torture him as an inadequacy complex or even a full-fledged inferiority complex.

FLEEING FROM REALITY

Some sufferers from the inadequacy complex develop an anxiety neurosis or some other nervous ailment which will make semi-invalids of them, and thus they establish an alibi for staying away from all situations where there would be comparison between their physical or mental equipment and that of their supposedly more fortunate fellows. Of all the defense reactions belonging to this group, hysteria is the most satisfactory. Hysteria will enable them to escape from any social obligation by providing a suitable fit at the proper time, and there is no limit to the severity of these attacks. The utilization of hysteria as a defense reaction in dodging responsibility in the presence of inadequacy will be more fully understood after perusal of the chapter on hysteria.

Another very common method of trying to get away from this feeling of inadequacy has been termed by the psychologists "the flight from reality." Persons afflicted with this feeling develop into the wish-fulfilling type of day-dreamer. They go back to the nursery, lead a life of fantasy, and simply refuse to think about the demands of competitive living. They indulge the mind in an attitude of entertaining and contemplating nothing more serious and practical than fairy stories, and allow it to engage in no task more difficult than air-castle building. Just as certain predisposed types of these victims of the inadequacy complex drift into paranoia, another group indulge in this defense reaction of "flight from reality," and may become such confined and shut-in personalities as to drift to the borderline of the dementia præcox class. Again I hasten to say that it has been my experience that these feelings of inadequacy do not lead beyond the so-called neuroses as a defense reaction except in those cases where there is a very serious nervous hereditary tendency.

It would appear that our social evolution is outrunning brain development and psychologic evolution. Our more recently attained social status and our more recently acquired standards of civilized living are certainly far in advance of the basic development of the average human being. The subconscious of the average individual seems to have evolved but little beyond the phase of primitive savagery. As far as the subconscious is concerned, man is a playing animal and a fighting animal, but hardly a working animal. The day-by-day application to work, the steady job, is something rather new to the human race. The subconscious is interested only in doing enough work to supply the necessary food for the individual's sustenance. The goad of ambition, the stimulus of conscience, and the lash of duty, drive the modern races on at a lively pace in their efforts to acquire the necessities and luxuries of present-day civilization; but the subconscious is more interested in comparative ease and exciting adventure—in that comparative inactivity which characterizes the dreamer,

the hunter, and the explorer.

And so we find, as we face the realities of modern life in civilized lands, that the subconscious is always seeking for some excuse which will serve as an alibi for retiring gracefully from the scene of turmoil into the comparative ease of the sheltered life of the nervous semi-invalid. The subconscious is a chronic shirker when it comes to meeting the responsibilities of modern life; it seeks all the while, through nervous feelings and various physical symptoms of nervous origin, to afford us an excuse for fleeing from reality back to the life of fantasy, fairy-tales, and day-dreams. Thus, in the more serious groups, we often find that the inadequate individual simply throws up his hands, lies down on the job, calls himself a failure, and refuses to take any serious interest in life. This is the type that has a tendency, when the nervous heredity is very bad, to drift into melancholia or to become a life member of the ancient order of chronic and confirmed hypochondriacs.

ILLUSTRATIONS OF THE INADEQUACY COMPLEX

A married woman, forty-five years of age, is brought in by her husband, a professional man, who complains that she is “just simply no good,” that “she is always ailing,” that he “never can depend on her,” that if it isn’t one thing it is another. She can’t entertain socially; she can’t travel during a vacation; she has positively refused to bear children because she isn’t strong enough—she can’t bear the thought of the responsibility of raising children—and so on his bill of particulars runs. He turns the woman over to us. “For God’s sake, Doctor, do something for her. I can’t stand it much longer.”

Examination of this woman shows that she is physically in very good condition. Her history discloses that she doesn’t indulge in hysterical outbreaks very often—only when she is pressed hard to do something she has absolutely made up her mind she can’t or won’t do. This is the picture we have—a woman who shirks the least responsibility, who dreads to undertake the smallest task; who simply lives, eats, drinks, sleeps, sometimes gets up in the morning, but half the time stays in bed until noon. When she loses a maid it is a tragedy, because if she has to choose between two or more she can’t make up her mind which one to take. She feels utterly apprehensive about everything, but the condition is hardly serious enough to diagnose as an anxiety neurosis. She is depressed at times, but we hardly feel like calling her trouble melancholia. She indulges in emotional sprawls several times a year, but not often enough to be called hysteria. She has mild delusions about her husband and his neglect of her and his possible fondness for other women, but hardly enough to be called paranoia. She has a great deal of fatigue, but this symptom is not sufficiently marked to warrant a diagnosis of psychasthenia or neurasthenia. And so here we are—what shall we say is the matter with her? She craves a name for her trouble. Even her husband would like to know exactly what it is, and so we have to make a diagnosis. We call it maladjustment, or the inadequacy complex.

In the citation of cases from chapter to chapter in this book, I am constantly telling about how people have succeeded in curing themselves of nervous disorders; how they have

succeeded in escaping from the clutches of the subconscious; but in all fairness I should admit now and then that many of these nervous people do not get well—that is, not immediately. They are not disposed to follow instructions; they are not willing to pay the price; they are not inclined to make the effort and maintain that struggle which is essential to victory. I dislike to record the fact that only about one-half of these people, when they are studied and diagnosed, will cooperate sufficiently to get themselves out of their nervous bondage. About one-half of these neurotic ailers are disinclined to make the effort. They sit back, as much as to say: “I am from Missouri. I don’t think you can cure me, but if you can, go ahead. I am willing.” Of course, the physician can do very little for such patients; they have to work out their own cure; and all we can do is to pass these people on to the next doctor, the osteopath, the chiropractor, the mental science cults, and so on. Yet these patients could get well just as surely as those that do work their way to victory.

I remember an actor who came to me several years ago. He gave a history of never having been well since he was fifteen years of age. He was more or less depressed, but not to the extent of melancholia. He had periods of fatigue, but it was hardly neurasthenia; he was almost hysterical at times, when he was seized with the fear of taking part in a stage performance—when he felt he was sick and should be at home in bed with a doctor and a trained nurse. Yet he had managed to make a living, down through the years, at his stage profession.

After two or three weeks of observation it was necessary to make a diagnosis of the feeling of inadequacy, or, as we sometimes put it for short, maladjustment, altho that term, in its strict meaning, is used to cover a little different group of cases. I am glad to record that this man, between thirty-five and forty at the time he came under observation, decided to take himself in hand, and master this mischief-making complex, and he has been more or less successful. That was ten years ago. I saw him only recently, and while he is far from being perfect—at least I would judge this from my conversation with his wife—nevertheless he has made great improvement. She no longer has to follow him to the theater each evening to make sure he goes on instead of calling a physician or rushing to the hospital. The improvement has been slow, but he has practically gained possession of himself. He responded from the start to my program of explaining carefully and fully to him what the trouble was and how it originated, and of applying corrective treatment, point by point. He early grasped the idea that he had to cure himself; that all the help he could hope to get from me was guidance, direction, instruction, and inspiration.

The real trouble we have with so many of these cases is that they expect the doctor to cure them. Why not? Physicians cure other human ailments, or at least administer remedies and bring about such a change of conditions as results in recovery. But these people fail to recognize the fact that they are suffering from a *mental and nervous disorder* and not a disease. If they had a disease we might hope to find a remedy, but they merely have a distortion, a perversion, a tangling of their thoughts and emotional reactions. Our greatest difficulty with these nervous cases is to get them to the point where they realize that they, themselves, must work out the cure.

DODGING THE REALITIES OF LIFE

Just now I have a pathetic case on my hands—a woman who has reached the age of forty-three, a college graduate, who has been married seventeen years. She has two splendid children, a boy of about five and a girl of ten. She is passing through her seventh breakdown; that is, what she calls a breakdown; I would not regard her spells—if they have been like the present one—as nervous break-downs; they are merely periods of utter discouragement with considerable depression. They are defense reactions on her part in an effort utterly to escape the responsibilities of life, of running a home, of raising children, of meeting neighbors, of facing all the vicissitudes of living in this modern and strenuous age. True, she was run down a little physically from poor appetite and failure to take sufficient nourishment; but in three weeks this was corrected by putting her on a milk and orange-juice diet, so that her weight was brought up to normal. Then we told her that, being physically able to face the world, she must do it. For three weeks she contended strenuously with our diagnosis that her condition was an inadequacy complex and that she was indulging in these accentuated and exaggerated spells as a means of escaping the realities of living. Finally, one morning she threw up her hands and said: “Doctor, you are right. I am a coward. I am a quitter. You are perfectly right. I am raising all this rumpus in order to get away from the whole thing. I am trying to flee from reality, just as you have said. Now, I will ’fess up to the whole thing. What do you want me to do?”

Needless to say, she began to get results from that day forward. After another three weeks she was back on the job, attending to her children, and supervising her home; while not fully recovered or altogether happy, she was well on the road to self-mastery. We have some hope of giving this woman permanent help. She is not merely rested up from her troubles; she is not merely going back to the same experience in the same old way; she has a new viewpoint of herself and life and its responsibilities. She knows the truth about herself. With a little training and some constructive reading, we can hope to bring about a condition where this woman will never have another of these so-called breakdowns. I have had a few conferences with her husband, and we are going to see that certain things in life that are perhaps a little too much for her, in view of her constitutional deficiencies, are regulated so that we shall not be asking her to face the impossible.

One of the most interesting cases of inadequacy complex I ever met came along recently—a woman of twenty-four, who, altho more or less nervous in her teens, managed to get through high school and two years of college. Her grades were passable, but she found everything hard. She acquired the reputation of being a bit peculiar, somewhat nervous, but on the whole an average sort of young woman. She never confessed the many dreads she had, the phobias, the anxiety about everything she undertook. All these fears she kept entirely to herself. She fell in love with a young professional man and they seemed to be wrapped up in each other. The marriage took place, and she went off to Michigan to join her life with that of her husband in the town where he was located in the practise of his profession. But the furnishing of a home which the husband had planned and built before their marriage proved to be a serious task for her. She became indecisive. It was hard for her to make up her mind.

She began to shun social contacts. All the while, of course, she kept secret her lifelong fear to face reality, her dread of meeting actual conditions. And so, at the end of the first year of married life, she apparently collapsed; just blew up; went to bed, refused to lift her hands about the management of the home, and was taken to a sanatorium. More than a year at the sanatorium under the rest-cure treatment showed little progress. As far as I can judge, the diagnosis must have been old-fashioned neurasthenia, nervous exhaustion, brain fag, and she certainly did have all the earmarks of such a condition. Finally she grew tired of being in bed and implored her husband to take her home; it was at this stage that I first saw her. She was utterly dilapidated in general appearance, and seemed to have lost all interest in living. She was suffering from an exalted case of ennui, to say the least.

The study of this young woman's case showed that she, too, belonged to the inadequacy-complex group. She was suffering from the accumulated outburst of years and years of continuous suppression of the feeling of inadequacy. True, at certain times she was more or less melancholic and depressed. At other times, especially after her "spells," she was more or less hysterical. She never had any delusions, altho on two or three occasions she attempted suicide; but she always attempted it by means of some simple procedure that would leave no disfiguring marks in case she failed, and she took pains to see that there were plenty of folks around to come to the rescue. She has confessed to me since that she doubts if she ever seriously attempted to commit suicide. While she said she longed to be out of the way, she had many opportunities to jump out of high buildings and to take poison, but she did neither.

Again we see what the subconscious will do. It will do anything in order to forward a conspiracy to escape from the realities of living, and get back into something that approaches the easy and inactive life of the fantasy days of the nursery.

This woman made rapid and complete recovery—one of the most remarkable I ever saw. Her parents, friends, and husband could hardly recognize her. She seemed to develop another personality and to grow into a different woman. She has a great hunger now for activity, she has an appetite for meeting real conditions and solving genuine problems. She is not afraid of difficulties. She tackles them sanely and sensibly and persistently. I cannot help pausing to wonder how much the parents could have done to prevent this trouble had they maintained such relations with her as would have encouraged her telling her problems to them as she grew up; thus they would have been in a position to help her dissipate her misgivings instead of allowing them to accumulate until they reached the explosion point and produced so much sorrow.

The real cure of all these nervous people is the prevention of the trouble by proper training in the nursery. The vast majority of neuroses could be "nipped in the bud" during cradle days. The other sufferers could be rendered all but immune to future attacks before they reached adolescence.

WHAT CAN WE DO ABOUT IT?

In bringing this chapter to a close, I can do no better than to quote a concise summary of the methods of management of this group of disorders recently suggested by Dr. Meyer Solomon, who says:

There is much to be learned from the study of the causes and results of the feeling of inadequacy. It should teach us the need of common sense and the practise of logical and critical thinking. We must avoid states of self-consciousness in which we make ourselves the center of the universe and become overwatchful and oversuspicious of the meaning of the behavior and intentions of others, ever on the alert to bring remote and distant occurrences into their possible relation to our personal lives, interests, wishes and fears, with distortion and projection.

It should show us the harmfulness of worry concerning the non-essentials in life, such as unnecessary competition with our neighbors. We should see clearly the need of avoiding jealousy and envy.

Neither should we ask for the unreasonable and impossible. We must be willing to work and plan instead of merely wishing for improvement and success. "If wishes were horses, beggars would ride."

Persistent seclusion and isolation, not for the purpose of doing concentrated work, but in order to avoid possible undesirable situations and possible competition, are certainly unhealthy and harmful ways of meeting life.

Feelings of inadequacy, insufficiency, incompetency, inability, insecurity, uncertainty, failure, or inferiority should be overcome by well directed efforts to improve ourselves in our conditions as best we can under the circumstances. We must be willing to bring this about gradually by persistent thinking and acting, while prepared for possible failure or partial success.

None of us should demand of ourselves perfection. We should not be surprised at the discovery of errors, defects, or imperfections in ourselves, other persons, institutions, or things.

The need of hobbies, with broadening multiple interests and a wide variety of human contacts, is plain.

In overcoming defects or handicaps, we should avoid the extremism of overcompensation with excessive assertion of the personality, over-aggressiveness, cruelty, unscrupulousness, boastfulness, and their ilk.

A certain degree of the feeling of inadequacy and inferiority (in the sense of self-knowledge and self-realization of our limitations as well as our capabilities) is absolutely necessary and healthy. In fact, persons with a feeling of superiority, exaggerated ego and self-esteem, are indeed difficult to live, work, or play with. Great minds and big souls know their imperfections sufficiently, so that, despite the measure of recognition, wealth, or power attained or the praise or plaudits of the multitude and habitual hero-worshippers, they remain unspoiled, and withal know the stuff whereof they are really made. It is this feeling of relative incompetency and proper insight into one's abilities and strength which makes for efforts at ever more and more self-improvement.

One thing is certain: change of climate, going away from home, quitting one's job, is not going to accomplish anything. There is no royal road or easy path of escape from this sort of harassment.

The basic reason for this feeling of inadequacy—aside from hereditary tendency and unwise early training—is a subconscious moral cowardice; and these folks must be helped to recognize that they have developed a neurosis merely as an alibi, as an excuse for getting out of doing something which they do not want to do, or which they fear to do, or which, because of their inadequacy complex, they are embarrassed in doing.

There is a secondary motive, of course, in some of these defense reactions, especially when they are allowed to progress to the point of hysteria; the patient indulges in all this furor in order to enlist sympathy, which, he feels, he would otherwise fail to receive. In other words, being self-conscious of the feeling of inadequacy, bordering even on the inferiority complex, and not choosing to admit the fact, and being unwilling to indulge in an exhibition that could be interpreted as running away from duty or falling down on the job, such patients sell the idea to themselves that it would be better to have some sort of a fit, to get sick, and

thus, in a more or less honorable way, be excused from facing a disagreeable task, and at the same time receive the kind ministrations and sympathy they so much crave at the hands of their family and loved ones.

NEURASTHENIA AND PSYCHASTHENIA

I AM coming more and more to feel that the term neurasthenia, which is so generally used to designate all sorts of nervousness, should be limited to those conditions of nervous exhaustion, brain fag, and fatigue, which are more or less the result of actual physical conditions, such as overwork and other forms of long-continued stress and strain.

We must not overlook the fact that we can actually form a *fatigue complex*; that, as the result of overwork, long-continued muscular tension, and perhaps certain deficiencies in the ductless-gland secretions, we can bring about conditions of chronic fatigue which will make such an impression upon consciousness that in time the sympathetic nervous system will be able to bring on all the symptoms of fatigue as the result of habitual reaction. In this sense fatigue really comes to be an obsession, and perhaps it is all right to designate such patients as belonging to the neurasthenic type or group.

THE FATIGUE COMPLEX

I have in mind now the case of a woman in her late forties, the wife of a professional man, who has developed this sort of fatigue. Unquestionably she has a fatigue complex. She is organically sound, physically in perfect condition.

It is not a case of psychasthenia—fatigue from childhood or adolescence—as this woman was all right until almost thirty years of age, when she had her first so-called nervous breakdown. There was some basis for this breakdown; there was overwork as well as overworry—long-continued stress and strain. She recovered in normal fashion from the breakdown, but she never recovered from the fatigue. She has had it from that day to this. Subsequent to this attack she had three or four spells of what was diagnosed as nervous exhaustion, but so far as I can see they were only exacerbations of this legacy of chronic fatigue which has continued to curse her for almost two decades.

During seven years of semi-invalidism she never walked across the room without assistance. Before any attempt was made to have her walk, she was put on the rest cure and fed up until she gained in weight from about ninety pounds to one hundred and forty pounds. Explanations were made to her which she apparently accepted. The whole experience was analyzed and reanalyzed, traced out and retraced for her. We started her out with a trained nurse to walk. By a persistent régime and with the encouragement of the nurse we were able to get her to walk four blocks, but the nurse had to get right after her or she would sit down on the curbstone or walk into the first house to rest on the porch. She has driven an automobile for a hundred miles, but she will do absolutely none of these things if left alone. As her nurse says, "If she is left to herself she immediately squats."

I have not given up hope that this woman will be cured of her fatigue complex, but I must confess that none of the methods thus far employed have delivered her. If we had

maintained supervision of her for longer periods, I presume she would have been cured; but it costs money to keep doctors and trained nurses on the job, so when she is a bit improved, both she and her husband feel that she ought to be well enough to go on about her business, and she goes home; then in six months she drifts right back to an easy chair or a soft mattress. All you can get from her when you urge her to make physical effort to do things and go to places is: "But, Doctor, you don't understand how tired I am. I am utterly worn out. I want to do these things, but I am simply exhausted. I just can't do it."

Not only would this patient be permanently cured if she could remain under supervision longer, but she would also probably be cured if she were forced into action to earn a living. She was well taken care of by her well-to-do parents before she was married, and her husband has supplied her every need all these years; so she is not compelled to lift a finger in order to satisfy her physical wants. Under supervision she will put forth the necessary effort to prove, even to herself, that she can do the work, that she can safely ignore fatigue and ridicule exhaustion; but when left alone without the necessity of making these efforts, she gravitates back to a life of ease. She takes the path of least resistance, and I don't believe she is ever going to get well unless force of circumstance compels her to make an effort that will last until new habits can be formed—until the fatigue complex can be displaced by one of self-confidence and stamina sufficiently strong to overcome it permanently.

An architect, forty-three years old, who is in perfect physical condition, but who has quit work three different times in his life for periods ranging from three months to a year, comes in to discuss his fears. He has been well instructed about the nature of his trouble. He understands the ancestral rôle of fear. He knows well enough that there is absolutely no foundation for his symptoms, but when he quit work a few weeks ago he gave as an excuse to his wife and associates that he was overcome with an inexplicable fatigue, that he was just tired out.

This patient is in good flesh, in good health, but, having failed to overcome and uproot his fear complex, he is developing now, as a defense reaction, a real *fatigue complex*. He has not been willing to make those adjustments which would enable him to drive out his fears and occupy his mind with faith activities. He has been too negligent in the past management of his case. He has not sincerely carried out his doctors' instructions. He is a moral coward. I have explained to him that if he would get rid of his "fear-mosquitos" he must not only clean up his own back yard and dig out the under-brush, but must also get around and clean up the neighborhood and the vacant lots adjoining. In the case of the little foxes that spoil the vines, I have told him, it is not enough to stop up one hole in the fence; every hole must be stopped up.

But what I am especially presenting this case for is to call attention to the *fatigue complex as a defense reaction*. No longer could he go to his wife and confess his fears; no longer could he tell his associates that he had these old-time dreads—but he had them. He wanted a new story to tell. He wanted to flee from reality, to retire from the fight, but he wanted to save his face, and so he has for several years been developing this fatigue complex. He has subconsciously worked it out in every detail. He has perfected it so that he has a tired feeling

and everything that goes with it, including palpitation, tremors, and that pathetic facial expression, that martyr attitude of “Well, I suppose I could go on until I dropped in my tracks. I am willing if you think best, but I certainly am all in.”

And this man comes to me to get medical support and endorsement for his fatigue complex! Of course, I don't give it to him. He is going right back to work. It is his only salvation, and I expect him to go back this time with determination to make an end of his fear complex and also of the associated fatigue complex.

Just as the fear complex can be formed so that you can have all the physical exhibitions of terror without having a fraction of a drop of the adrenal secretion poured into the blood stream, so we can develop a fatigue complex to the point where we can have all the nervous and physical accompaniments of profound exhaustion in the presence of robust physical health and in the absence of any real physical fatigue.

THE MAKING OF A FATIGUE COMPLEX

Undoubtedly fatigue can become habitual. Unquestionably thousands of people suffer from purely nervous fatigue, a tired feeling which bears no relation to preceding muscular work, and which has no real foundation in the physical organism. Now, how do these “sons and daughters of rest” acquire this sort of a fatigue complex? It comes about, as a rule, after the following fashion: The fatigue complex is nearly always preceded by a fear complex. There is brought about that chronic reaction to fear on the part of both mind and body which is so characteristic of the fear or stage-fright complex. The mind is more or less apprehensive, there may be even a mild state of anxiety. The psychic background is one of chronic fear or worry.

I have called attention in a previous chapter to the fact that fear is the psychic state of alarm which acts upon the sympathetic nervous system so as to cause it to pull the adrenal trigger, throwing the powerful secretion of these ductless glands into the blood stream, as a result of which all the physical accompaniments of fear and anger are forthwith manifested. The purpose of all this is to prepare for increased efficiency in flight, or for more determined resistance in combat. The natural end-result of such exertions would be more or less of a feeling of exhaustion, of fatigue. And so it seems natural that the nervous system should prepare to send out fatigue warnings and to bring on that tired feeling, to be followed by rest and relaxation, as the result of every episode of the excitation of this fear-anger mechanism.

When the sympathetic nervous system has learned to short-circuit this affair, and, as the result of chronic worry, to produce—on its own initiative and quite independent of any participation of the adrenal secretion—these psychic and physical manifestations of fear, it is little wonder that it acquires the trick of bringing on this spontaneous, ever-present, and distressful fatigue. It seems to say to itself: “Since the end-product of all this business is fatigue and rest, since all this false alarm I am turning in has no other objective than to wear the patient out and bring on fatigue, I will cut the whole process short and give him an ever-present tired-out feeling. Rest is what he wants. The purpose of this whole performance

is to escape from reality, to get out of doing things. Then why should I produce these frequent upheavals involving rapid breathing, thumping heart, increased blood pressure, dizziness, nausea?" And so the chronic state of fear comes to be associated with the chronic state of fatigue. Biologically, the end-result of all fear phenomena would be physical fatigue; therefore, in the modern nervous counter-part of primitive forest experience, we indulge in psychic fear and immediately experience nervous fatigue, a fatigue which is so wonderfully perpetrated as to possess all the earmarks of genuine physical tiredness.

HABITUAL TENSION AND FATIGUE

In the earlier stages of our various nervous troubles, sometimes before the stage of chronic fatigue is reached, the sympathetic nervous system in its reactions pauses for a while in the domain of muscular tension. As a part of the fear-anger reaction, the muscles are made very tense, and it is only after the flight or fight that the fatigue naturally ensues. Now, in our mild types of nervousness, in the early stages of most psychoneuroses—particularly the anxiety states—the patient may indefinitely remain in a state of constant muscular tension. There is almost complete inability to let go, to relax. These patients are more or less tense even in sleep. They are particularly tense on retiring.

Nervous tension—in reality, of course, muscular tension—is so characteristic of some of these cases, and intrudes itself so obviously, that it is almost entitled to a place in the diagnosis. We even have the anomaly of a physical condition of nervous muscular tension along with brain fatigue, a comparative psychic exhaustion, indecision, deficient memory, etc.

And thus nervous or physical tension comes to be—in connection with the arousal of the fear-anger mechanism—a half-way station on the road to the final culmination of this process as nervous fatigue. These chronic fatigue states have been, in the past, diagnosed as neurasthenia, nervous exhaustion, nervous prostration, brain fag, etc., but no matter what name we may assign to the condition, the fatigue is essentially of nervous origin. It is habitual tiredness that has become conditioned as a reaction to the psychic states of chronic fear and anxiety, and it represents an effort on the part of the sympathetic nervous system to accommodate its neurotic owner in the matter of acquiring a good and sufficient alibi for dodging responsibility, avoiding work, escaping reality; with some saving of one's dignity, to have a good and sufficient reason for seeking prolonged rest. In other words, chronic fatigue is the camouflage to cover one's retreat from the world of reality back to the nursery.

While this is the real purpose of the subconscious in the early establishment of these complexes of fear and fatigue, we must recognize the fact that when they have been long functioning, when they have become chronic, we are likely to suffer from fatigue at the very time when we are about to engage in some pleasurable activity. The fatigue habit becomes a secondary experience which serves to prevent our enjoying many things in which we delight. The same thing is illustrated in the case of alcoholism. The individual drinks alcohol at first in an effort to get away from an unpleasant situation, to forget, to flee from reality, and it serves this purpose temporarily; but as time passes he becomes the victim of a drug habit,

and so continues repeatedly to drink alcohol as the result of this chemical craving; thus the alcohol which enables him to escape certain unpleasant duties at first, later on serves to incapacitate him for engaging in many pleasurable and desirable activities.

The biology of fear was destined to assist us in fleeing from danger, but in the case of the psychoneuroses it is perverted into the rôle of a conspirator whose only objective is to assist us in fleeing from reality.

THE EARMARKS OF NEURASTHENIA

The symptoms of neurasthenia do not differ from those found in the other neuroses, except that, in the view of present-day science, they are more complex. If we take a typical case of the inadequacy feeling, a case of chronic fear, perhaps complicated by some other complex, and roll these all into one, as we sometimes do find them in life, adding, perhaps, some physical cause that has contributed to the breakdown, then, I think, we are justified in continuing to use the old-fashioned term of neurasthenia.

It should be remembered that probably no one patient has all the symptoms that are herewith presented as being those of a typical neurasthene. Let me make it clear that, in general, neurasthenics present these five cardinal symptoms:

1. Exaggerated suggestibility.
2. Oversensitiveness.
3. Abnormal impressibility.
4. Increased emotionalism.
5. Extraordinary fatigue.

Neurasthenics are always more or less depressed; they have general fears and definite dreads, even bordering on the anxiety states. They apprehend some impending doom. They have characteristic fits of neurasthenic despair, but are more alarmed by their psychic inadequacy. Not only are they unable to make decisions, not only is memory affected, but they have a peculiar and alarming tendency to what they call "brain wandering." It is really a partial loss of conscious control over the mind. This, of course, they regard as a forerunner of insanity, and in that way it contributes greatly to the augmentation of their anxiety states.

Other patients develop a dreamy state of mind, accompanied by lack of all interest in life; a pitiful sort of generalized feeling of inferiority, so that they come to regard themselves as the helpless victims of some subtle disorder; and it becomes an established policy never to do anything to-day that can be put off until to-morrow.

This feeling inevitably leads the patient to dread the future. His fears are multiplied, his obsessions augmented, his premonitions intensified, his apprehensions enormously magnified. The neurasthene reflects on everything he does. He has to reason about every thought, and yet can reach no definite decisions. He feels his feelings, and fears his fears. A vicious circle is established. He lives very little in the present; he lives, rather, in feelings of regret for the past and of apprehension for the future. He constantly spies on himself and is destined to become more or less hypochondriac.

Self-contemplation results in the production not only of a diseased imagination, but of an unhealthy and unwarranted egotism, culminating in irritability, sleeplessness, and characteristic fits of neurasthenic anger. Neurasthenes soon come to believe that they have not had a square deal in life; that everyone is down on them, and that even their dearest friends and loved ones are unsympathetic and hard-hearted as regards their sufferings.

While their capacity for mental work is greatly abridged, there occurs from time to time a sort of psychic explosion that sets the mental machinery running at a rapid pace for a short season. Such an attack may even come on at night and is sure to produce insomnia. These patients sometimes have a tendency to lose their natural affection, and this abnormal state is accompanied by that ever-present peevishness which makes it so hard for the neurasthenic's family either to please him or to live with him. Nervous sufferers of this kind become very sensitive about their own personal dignity. Every little thing is construed into a personal slight; they want to occupy the limelight, and are hurt when their friends are not disposed to listen to their long recitals of misery. They are highly suspicious of the motives of their friends and families; they develop quickly into chronic ailers and become a burden to themselves and a nuisance to their associates.

Of course, all this time there are the usual symptoms of headache, neuralgic feelings, darting pains, full feelings in the head, buzzing sensations, trembling, and even nausea and vomiting.

On top of all this, sooner or later will come the three marked fears of neurasthenia—the fear of insanity, the fear of death, and the fear of suicide. The fact that doctors repeatedly examine these patients and tell them they are all right only convinces them that the doctors have fallen down on the job, and they prepare for an immediate journey to the insane asylum. If they have succeeded in overcoming the fear of impending dissolution, the mind often becomes tainted with the fear of suicide, which thought they are doomed intermittently to entertain as a possible escape from their suffering.

All sorts of sensations are experienced around the spinal column, but the one characteristic and ever-present symptom is fatigue—that terrible feeling of exhaustion, that utter tiredness which is always present, but usually more exaggerated in the morning. It is a characteristic symptom of neurasthenia or nervous exhaustion that the more these patients sleep, the worse they feel when they wake up in the morning. They simply feel “rotten” when they first get out of bed. During the forenoon they begin to pick up a little; by noon they feel fairly decent; in the afternoon many of them have a complete collapse and have to lie down; but, however this fatigue behaves during the day, after dinner and during the evening the neurasthenic nervous system strikes its stride, gets into its swing; they feel fairly well, sometimes are able to participate in the party and stay up until a late hour without experiencing anything like the exhaustion which gripped them earlier in the day.

Neurasthenic symptoms are especially prone to attack the digestive system: there is stomach trouble and gas in the bowels, which sometimes serves to make pressure on the heart and to set it jumping and thumping in a fashion that is highly disconcerting. These nervous sufferers are always complaining of some sort of stomach trouble. If it isn't nervous dyspepsia,

it is constipation. They become dietetic faddists in an effort to cure their digestive troubles, including those profound flutterings in the abdomen, and other real or imaginary gastrointestinal disorders. They always fear cancer of the stomach, and the classic explanation for their trouble is the old-fashioned autointoxication; instead of being willing to recognize that it is their nerves which are plaguing them, they settle upon autointoxication as the cause of their affliction.

Neurasthenics are always suffering from circulatory disturbance in some part of the body. They are too hot, or too cold. They usually have a rapid pulse. They have frequent attacks of so-called palpitation. Their skin is usually pale, but not always; many of them complain of insomnia, tho the majority of nervous sufferers, except those in the acute throes of a nervous breakdown, sleep fairly well, and all of them usually sleep more than they think they do.

The reader should be assured that I am by no means reciting the complete list of neurasthenic symptoms. There are literally hundreds that have not even been mentioned here, and yet this whole galaxy of symptoms and feelings can be present in a single neurotic sufferer, while at the same time the most exhaustive research examination will show him to be organically sound and in every way normal as a physical specimen of humanity; all of which only goes to prove what a rumpus, what a bunch of nervous capers, can be started up by an uncontrolled mind and a highly irritable nervous system without in the least being able to produce a real or organic disease.

PSYCHASTHENIA—TRUE BRAIN FAG

Janet uses the term psychasthenia to include almost everything of a neurotic order that doesn't fall under the head of hysteria, but in this country I think there is a tendency to limit the term more to a sort of hereditary neurasthenia, an inborn fatigue, a constitutional inadequacy, or, as we sometimes diagnose it, constitutional inferiority.

It should be made clear at the outset that this inferiority does not necessarily have to do with the quality of the patient's mental work; some of the best of minds, qualitatively speaking, belong to this group. It has more to do with the efficiency—the quantitative output of the mind and the ability of the nervous system to stand up under ordinary function and usage. Many unfortunate individuals are condemned to go through life with a functionally crippled nervous system. They are foredoomed to suffer more or less from mental fatigue—brain fag—all due to their heredity.

The psychasthene is able often to comfort himself with the flattering knowledge that he travels in exceedingly good company, for it is a fact that a very large number of the world's geniuses in science, art, and letters, have been more or less psychasthenic. Many individuals who manifest exceptional control of the mind along some particular line are found to be greatly lacking in brain control as regards the common experiences of their every-day life.

I do not for one moment admit that psychasthenia is the gigantic disorder which its discoverer, Janet, claims it to be. This French authority would lead us to believe that psychasthenia embraces almost every sort of nervous disturbance, ranging from simple neurasthenia up to melancholia and arrant madness. I look upon psychasthenia as an

hereditary affair—as an hereditary or inborn weakness* in the matter of brain control and emotional reaction. Of course, I also recognize that overwork, emotional stress, and intoxication, together with all the so-called neurasthenic factors, may serve to develop and accentuate this hereditary psychasthenic predisposition. Many a psychasthenia does not appear in the individual's experience until the nervous system is subjected to some extraordinary strain.

Right along we meet with victims of psychasthenia and other forms of nervous trouble who insist that they have always enjoyed good health, and that they experienced no trace of their nervous troubles until a certain time when they were afflicted with the "flu," or when they experienced some form of nervous stress and strain; but if we take the pains to make inquiry into the family history and to scrutinize the past mental and nervous life of these patients, we seldom find any difficulty in settling the fact that they have long been subject to abnormal mental and nervous states. They have been all along the victims of a latent psychasthenia that was smoldering in the mind as fear and anxiety, or as the tendency to escape from reality, and it only awaited a suitable occasion on which to burst forth as a bona fide psychoneurosis, as a real nervous break-down or neurotic upheaval. In fact, the event or experience which these patients so often settle upon as the starting-point of their trouble was simply the straw that broke the camel's back, the drop of water that caused the vessel to overflow.

THE EMOTIONAL THRESHOLD

Psychasthenia is in reality a lowering of the emotional threshold. It differs from ordinary neurasthenia not only in the fact of its more uniform hereditary origin, but also in that it is more largely concerned with purely psychic and emotional influences as regards the exciting causes. In the case of so-called neurasthenia, the exciting causes are more often in the nature of some extraordinary grief, some new fear or some unusual anger. These shocks or strains are, of course, no more than those which the normal individual is meeting constantly, but in the case of unusually sensitive minds these stresses serve to precipitate a nervous attack of some sort. In the case of psychasthenia, the exciting cause is more often a purely mental or emotional reaction which is not founded on any actual experience or real event, but merely represents a psychic upheaval which originated largely in the patient's mind. These things which fan the smoldering psychasthenia into flame are usually of such a nature as to be more or less upsetting to a normal mind if they really existed; but in the case of the psychasthene they usually do not exist.

I have in mind the case of a psychasthenic girl—she is now about thirty years of age—who every year or so gets into a terrible jam with herself over the fear that she might commit some crime. At a large church gathering in Chicago, a few years ago, several prominent prelates were severely poisoned—someone having to do with the cooking of the

* In some cases this condition is a true inheritance and so will be duly transmitted to succeeding generations; in other cases it may be due more largely to congenital influences or may result from unusually faulty training during early childhood, in which case the deficiency would not be handed down to posterity.

food had deliberately arranged to poison the whole group. Of course, this came out on the first pages of the newspapers the following morning, and before the day was over this woman was in my office in a serious state of mind over the fear that she might get it into her head to poison the family she was working for; or if she should go home on a visit, as she contemplated doing soon, what was to hinder her poisoning her whole family? I have seen this patient go through a dozen such attacks. It requires months and months for her to get over one of them. She is a typical psychasthene with certain hysterical tendencies. She has always been in this condition, and, generally speaking, always will be. She suffers from inordinate fatigue; has been tired ever since she was fourteen years of age; never gets rested. She can never carry through the majority of the things which she has the ambition and creative imagination to initiate. The quality of her mental output is good, but quantitatively she just can't hold out. She collapses in the midst of practically everything she undertakes. When I explain to her how unreasonable are all her fears she is almost persuaded to laugh at them; but she soon grows sober and drifts back into her old dread.

We are all more or less subject to our emotions. Transiently we take on the color of our environment. When at the theater or when reading a novel, and even when indulging in a day-dream, we may be brought to the place where we tremble with emotion, shed real tears, and violently contract our muscles in righteous indignation; but the moment this episode has passed we quickly right our emotions, pull ourselves together, and restore our nervous equilibrium. The psychasthene, however, is the victim of an ever-present emotional upset of this sort; it becomes, not a transient episode in his psychic life, but a permanent state of mind and body. It is altogether easy for him, under these conditions of emotional stress, to imagine himself committing some revolting crime, or to persuade himself that he has become suddenly insane, or to envision himself as a victim of some tragic accident. These things are all very real and intense to him. He is not just day-dreaming; he is the victim of something which has become so fixed upon his memory as to be a part of his life. And so these harmful emotions become habitual in the case of psychasthenes, causing a drain upon the nervous system.

The important fact in psychasthenia is not that such ideas or emotions come to find their existence in the mind or rise up into the consciousness; the thing to bear in mind is not only that there is some habitual psychic tendency at work, but that there seems to be an actual physical condition of the cortex of the brain which permits and favors this uncontrolled and injurious form of extraordinary emotional and physical reaction to passing states of fear and fancy. In many respects psychasthenes behave and reason like a child. They are affected by external influences and react to internal impulses in a manner which indicates that their viewpoint is that of the easily upset and quickly alarmed mentality of childhood. They are victims of retardation of development as regards their emotional control.

Still further to make clear the difference between neurasthenia and psychasthenia, I may say that those influences of irritation, stress, and strain, which would, in a fairly normal individual, result in producing neurasthenia, will, in the case of these susceptible and hereditarily predisposed individuals, produce a genuine case of psychasthenia. The perplexing feature of so-called acquired psychasthenia (in reality, hereditary) is that in the earlier stages

it exhibits nearly all the commonly observed symptoms which belong to neurasthenia. On the other hand, psychasthenes are far more likely than neurasthenes to manifest symptoms which are suggestive of more serious mental disorders; as a clinical disorder, therefore, psychasthenia comes to occupy a place between the less serious neurasthenias, on the one hand, and the more serious hysterias, phobias, melancholias, and manias, on the other.

ACTIVE AND LATENT FORMS

The so-called congenital psychasthenia usually makes its appearance at or around puberty. The child is spoken of as delicate, nervous, and timid; while the acquired form (I prefer the term latent) may not appear until the patient is well past middle life, and then only after some prolonged and unusual period of hard work and overworry. Many a business or professional man experiences his first real attack of neurasthenia or psychasthenia when between forty and fifty years of age. Others are able to postpone this catastrophe until after retiring from business, and then, with nothing to think about but themselves, they quickly succumb to their latent, hereditary nervous tendencies, and with amazing rapidity develop into full-fledged neurasthenes or psychasthenes.

At the present time I have a patient fifty-five years of age who has until recently been at the head of a large business enterprise. He has retired, and altho for twenty-five years he was threatened, off and on, with nervous breakdown, he always successfully avoided it. Now, however, he is the victim of a most distressing psychasthenia. His mental fatigue annoys him terribly, his appetite is gone, his sleep disturbed, his initiative is slipping, and it is little wonder that he complains that his mental powers are "breaking up," and that he gravely fears insanity. And yet his ailment is nothing more than this acquired (latent) form of psychasthenia.

EMINENT PSYCHASTHENES

The thought must not for one moment be entertained that our psychasthenes are recruited from the ranks of hysterics and other people of mediocre mental caliber. As previously remarked, they are frequently found among the most intellectual classes; and many of these great minds have been so successful in the mastery of their mental and nervous weaknesses that they have been able entirely to surmount their hereditary tendencies. Sir Francis Galton, the eminent British scientist—the father of our infant science of eugenics—who lived well beyond four score years in the full possession of his mental and physical powers, meanwhile turning out a vast volume of work, was evidently predisposed to psychasthenia, for, concerning one of his attacks or breakdowns, he says:

I suffered from intermittent pulse and a variety of brain symptoms of an alarming kind. A mill seemed to be working inside my head; I could not banish obsessing ideas; at times I could hardly read a book, and found it painful to look at even a printed page. Fortunately I did not suffer from sleeplessness, and my digestion failed but little. Even a brief interval of rest did me good, and it seemed as if a dose of it might wholly

restore me. It would have been madness to continue the kind of studious life that I had been leading. I had been much too zealous, had worked too irregularly and in too many directions, and had done myself serious harm.

Psychasthenes are like poets—born, not made. Nevertheless, it must not be supposed that every one who is afflicted with worry, fears, and obsessions, is a victim of psychasthenia. On the other hand, when not one but all of these imperative moods of thought, coupled with enfeebled will power and more or less brain fag, manifest themselves comparatively early in life without adequate cause, and are sufficiently developed to interfere with one's usefulness, I think it is safe to diagnose such a condition as psychasthenia.

As psychasthenia is usually some sort of defect in hereditary evolution, it overtakes us without our will or leave. Our personal responsibility has to do only with avoiding everything that will tend to make the situation worse, and doing whatever we can to overcome nature's handicap, thus enabling us to make a creditable showing with an otherwise abnormal nervous mechanism and a crippled nervous control.

PSYCHASTHENIC FATIGUE

The psychasthene is the individual who was "born tired," and who has remained more or less tired throughout life. A careful medical examination will differentiate between the "weariness" of psychic fatigue and that of physical and parasitic maladies, such as hookworm disease, and the like.

Many psychasthenes who are born and reared in the country get along fairly well. Those who are so unfortunate as to grow up in a great city find it much more difficult to live happy, useful, and self-supporting lives. It is largely from this class of neurologically disinherited individuals that the common "ne'er-do-wells" of modern society are recruited. The majority of our inveterate and incurable tramps are affected with this psychasthenic taint; as are also those scions of certain aristocratic and wealthy families who are now and then so strikingly attacked by the *wanderlust*. It would thus appear that the term "psychasthenia" might be pressed into service for the purpose of describing certain strata of modern society which are otherwise commonly called "lazy."

It is the handicapped individual suffering from an extreme case of congenital psychasthenia, who, when he finds himself unable to compete for a livelihood with his fellows, does not hesitate to turn criminal and begin to pillage and plunder society. These represent the brightest and shrewdest of our criminal classes, and are in marked contrast to the feeble-minded criminals who compose by far the larger part of the inmates of our penal institutions.

PSYCHASTHENIC SYMPTOMS

In addition to the characteristic mental fatigue of psychasthenia, the patient suffers from a variety of mental disturbances, many of which are identical with, and common to, the sufferings of the various neuroses. Practically, the chief complaint is an incapacity for doing

things, coupled with an ever-present overattention to everything connected with one's thinking, living, and working.

The psychasthene spends the larger part of his mental effort and nervous energy in watching himself and trying to help carry on those varied mental and physical processes which nature designed to be automatically executed. In this way his energies are almost wholly consumed in useless channels—in efforts which are not only unnecessary, but which are highly harmful to the normal workings of both the psychological and physiological processes and mechanisms of the human organism.

All introspective patients are not necessarily psychasthenic, but all psychasthenes are introspective. They watch all the workings of the mental machinery and the physical processes with the eagle eye of a trained detective. They are incessantly spying upon themselves. They watch the minutest details of their daily work, only to criticise their best efforts and worry over the results. When they engage in play or recreation, they watch so closely for the expected relief, that they effectually destroy all the good that might have come from their otherwise beneficial diversions. They watch their stomachs so closely as to lose their appetites and spoil their digestions. It is a physiological fact that no self-respecting stomach will continue to do a good grade of work if its owner insists on watching its operations with a suspicious eye.

These patients even try to watch themselves sleep, and, of course, there can be but one result—insomnia. Even when the attention is relaxed sufficiently to permit sleep to overtake them, their slumbers are more or less disturbed by nightmares and other vivid dreams, all largely born of the apprehensive watchfulness of their waking hours. And so it is little wonder that they awaken in the morning unrested and unrefreshed.

The psychasthene is especially prone to worry about his work. He is always going back to see if things are done right; trying the door again to see if it is locked; getting up out of bed and going downstairs to see if the cat was put out or the dog was let in. A generalized dread seems to possess the mind—a chronic overattention to things that need no attention—a short-circuiting of the nervous forces to the performance of useless work, as in the case of the dynamo, when a short circuit so diverts the current that instead of passing outside for the performance of useful work, it is dissipated within the generator, thus deranging the functions of the machine and interfering with both the quantity and quality of its work.

Psychasthenics frequently appear to be well nourished—in good flesh. Such cases are often diagnosed as neurasthenia, and the patients are started out on long walks, horseback riding, golf playing, etc. Such mistaken treatment only leads to early and utter collapse—to the complete discouragement of the patient and the utter bewilderment of friends. These patients are not like the mild neurasthenes who are fatigued all day but can dance all night.

The psychasthene is usually highly impressionable, more or less timid, hesitating, lacking in initiative, an odd genius, usually a dreamer, often overscrupulous, unfailingly exaggerating the importance of his personal shortcomings, all the while extremely irritable, very changeable in humor and more or less despondent—in rare cases even mildly melancholic at times.

ILLUSTRATIONS OF PSYCHASTHENIA

About fifteen years ago I was called to see a woman, then about thirty-five years of age, who had been in bed for three years, suffering from what had been called a profound nervous exhaustion. She was the mother of three children, and had a husband who adored her and was abundantly able to provide her with all the necessities and luxuries of life, even to trained nurses.

This woman was an only child, had been raised in a sheltered environment, had always had her own way, and was utterly spoiled; both before and after marriage she had been petted and pampered, but the one outstanding thing about her was that ever since she was fifteen she had been afflicted with a tired feeling. She had always been short of breath; she never could do all the things that other young people did, because she couldn't stand the pace. She said she had never known a full month in her life in which she felt rested; and so the responsibilities of married life, the bearing of three children, and a few years of effort to help in their raising, had "done her up." She spent more and more time in bed following the birth of the children, and finally after a case of the "flu" she just decided to stay in bed—made up her mind she wouldn't get up. She had not stepped her foot on the floor for over three years when I saw her.

Every examination that could be made in her home was gone through with and she was found to be sound. Interesting to say, she was in good flesh—always had been. She always had a fairly good appetite, notwithstanding her repeated attacks of indigestion. When I asked her what was the matter, she replied: "Everything on top of the earth. I have everything but brain tumor, and I am not sure but that I am getting that."

She had had gall-stones, cancer of the stomach, numerous tumors, heart disease, kidney disorders, liver trouble, and tuberculosis, earlier in life. That is, she thought she had these diseases. Every time she read a health book or the medical column of a newspaper, or an almanac thrown on the front porch, she had some new disease. She had tried about every form of medicine, medical practitioner, and healing cult in existence—except Christian Science. She was a firm believer in the Methodist religion and could never bring herself to give up the faith she had been raised in.

What was to be done? For a number of sessions I sat down and explained to her exactly what the trouble was, told her that the diagnosis was psychasthenia, perhaps complicated by hysterical flare-ups now and then. I told her frankly that she was going to be fatigued in this way all her life. I explained to her that she was about a 50-per-cent. woman, speaking in terms of quantitative work-product; that she was a low-pressure boiler, a slow-speed motor; but that she could get right up out of bed any day she wanted to and go about her business, and that she would probably live long and have a fairly good time if she would but master the art of properly relating herself to herself and to the world at large. I explained that she could do what any other woman could if she would give herself twice the time in which to do it.

And be it said to the everlasting credit of this woman that after the third session of this kind of talk, she sat right up in bed, saying: "I am going to try it. I am disgusted with this sort of life. If I had all the diseases I thought I had I would have been dead a long time ago, and

if there was anything really wrong with my mind I would have been insane before this. It looks to me as if I weren't going to die or go crazy, and my religion won't let me commit suicide. I am going to get right up and I am going to do it now." And she did. In general, she has been out of bed ever since. Throughout all these years she has returned to fairly normal life, raising her family and doing her part in the world. Two of the children are married. She became a useful club-woman and grew to be an expert in getting along with her constitutional fatigue. She has come to possess more self-control, so that she starts but a few projects and finishes most of them. She has learned how to get along with the feeling of inadequacy that must always be more or less present because of her inability to compete with her fellows on an even basis; but, on the whole, she is leading a normal, healthy life. She is now happy, and, of course, her home is a far different place from what it used to be when she led a life of semi-invalidism.

I think it is best to limit the term psychasthenia to this sort of hereditary or constitutional fatigue. It resembles neurasthenia, but as far as the fatigue is concerned it is incurable. There is a definite limit to the capacity for achievement, and this handicap must be accepted. The treatment consists in the successful adjustment to conditions as determined by the hereditary endowment or congenital handicap.

Not long ago I met a middle-aged society woman who had been all over this country and Europe seeking treatment for nervousness. She had never had a nervous breakdown, but she had grown, since adolescence, to be less and less efficient. She suffered more and more from fatigue. There was a progressive disorder of some kind, she feared, at the bottom of her trouble, and she never ceased to seek medical help. Finally, she was persuaded to stop flitting around from doctor to doctor and from sanatorium to sanatorium, to be examined, studied, and critically analyzed; I found her in a very favorable state of mind to begin work on. She had about given up the idea that she had any organic disease, as she had once feared, and was quite willing to accept the diagnosis of psychasthenia.

We began to work out a program. She learned that she could do fairly good work if she would attempt but a limited amount, and so the past two years have been very different. Her entire plan of living and working has been reorganized. She gets up with the family in the morning, and does between two and three hours' work about the home, and then she rests an hour before lunch. After lunch there are two hours of activity, followed by two hours of rest, relaxation; sometimes she sleeps and sometimes she does not. Then there is a walk or outdoor exercise of some sort before dinner, and she is quite a normal woman throughout the evening, provided she doesn't stay up late more than one or two nights each week.

During the past year she has been all but free from headaches; she has had only one digestive upset, tho she has had palpitation attacks; she has gone on about her business, and, as she says, has had the first happy year of her life since she was sixteen years of age. But has she been delivered from her fatigue? Not at all. She said to me the other day when I asked her about the fatigue: "You have taught me not to think about that. I have learned from you to keep my mind on what I am doing and not on how I feel. When I stop to think how I feel, I am just as tired out as when I first came to you." And so, while I apply the term

neurasthenia to an acquired fatigue complex, I would like to reserve the term psychasthenia for this form of inherent fatigue, this constitutional inferiority, coupled with mental insufficiency, which will not permit its victims to lead a normal, average life as it is lived in this competitive world. They must learn how to modify their lives and to live happily even in the presence of this ever-present tired-out feeling. They must simply learn to forget their fatigue.

CLASSIFICATION OF THE PSYCHONEUROSES

While, for the purposes of advice and treatment, we recognize many forms of fear, worry, feelings of inadequacy, and many other complexes, together with hysteria, neurasthenia, etc., neurologists more recently have endeavored to put all these psychoneuroses into the following three classes:

1. *The anxiety neuroses* or neurasthenia—Under this group are found those cases in which the patients are thoroughly preoccupied with themselves—the restless, emotional, introverted, and inhibited type of individual—and the symptoms which are characteristic of this group have to do with disturbance of functioning in some vital organ or system due to emotional depression or as the result of suggestion, together with an inordinate degree of introspection and consciousness of normal physiological functions. These cases are always characterized by fatigue and numerous other sensory disturbances.

2. *Hysteria*—The hysteric patient seeks to meet the difficulties of life by a sort of negative emotionalism. There is a trumping up of symptoms which constitute sufficient excuse for the disinclination to continue the life-struggle.

3. *The compulsion or obsessional neuroses*—Recently some neurologists have proposed that this entire group be called psychasthenia. Within this group are placed those neuroses which are characterized by the effort to ignore many of the ordinary difficulties of life, or to pretend that they are absent; and in association with this attitude toward life there are present certain compelling or obsessing symptoms of thinking, feeling, and acting.

And we must not overlook the fact that a patient can be afflicted with more than one kind of neurosis. He may suffer from an anxiety neurosis, hysteria, and some form of a compulsion neurosis, all at the same time.

THE REALITY FEELING—TRANSFERENCE AND PROJECTION

THERE is something in the human consciousness which may very appropriately be defined as the *reality feeling*. Whatever it is, no matter what its component factors may be, it serves the purpose of causing one's ego to be aware of the presence of reality.

When our special senses report to the brain centers that they have made contact with certain real sights, sounds, odors, objects, etc., this reality feeling becomes attached, as it were, to these sensory recognitions, and the individual immediately chooses to affirm that these sensations are evidences of the presence and existence of the realities which gave them origin. And so, in the case of the various neuroses, no matter whether the individual's fears, sensations, feelings, and experiences be of outward and bona fide origin or of inner and imaginary origin, the ego, in the presence of this reality feeling, immediately recognizes them as genuine, regardless of how foolish and fictitious may be the bases for such belief. The association with the reality feeling is a passport to the recognition of any sensation as real on the part of our consciousness.

"THE REALITY FEELING"

In the case of certain peculiar types and temperaments the "reality feeling" works very well in connection with the clairaudient state—automatic hearing. And it is easy to suppose that in a spiritualistic séance many individuals whose minds are attuned—"en rapport," as the professionals call it—will be able to see and hear the same things the mediums see and hear. It is a sort of collective sensation or collective illusion—some one has called it "collective hypnotism."

Every now and then some one arises who attempts to make other people believe in the things which he sees and hears in his own mind. Self-styled "prophets" attempt to convince us of the reality of their visions. Odd geniuses appear who tell us of the voices they hear or the visions they see, and if they appear fairly sane and socially conventional in every other way, they are sometimes able to build up vast followings, to create cults and establish churches; whereas, if they are too bold in their imaginings, if they see a little too far or hear a little too much, they are promptly seized and lodged within the confines of an insane asylum. That is the penalty of allowing the "feeling of reality" to gain possession of the intellect, of failing to discriminate between the creatures of consciousness and those of the material world.

If we ardently will to believe a certain thing, it greatly helps us in transferring our memory images and our imaginative creations from one psychic association to another; that is, to transfer the "feeling of reality" which comes of an external visual sense to an association that is purely and properly a visual image of consciousness; or to transfer a "feeling of reality" connected with the reception of sound waves through the external ear, to a concept or

sensation of sound which is internal in origin, but which is made real to consciousness by such transfer.

Much of the disagreement between the spiritualist and the scientist of to-day hinges upon the proper definition and understanding of this "reality feeling." Mediums insist that the images which they see in their minds are real—that there is a corresponding spirit entity, separate and apart from their minds, which gives origin to these images and their associated emotions. The scientist grants that the medium has seen these things in her own mind, that they really do exist in her consciousness, but he believes that the "reality feeling" which she attaches to them is a form of "transference" which she has unconsciously indulged, a feat of psychic legerdemain; that her subconscious has juggled the associations—transferred, shifted, and substituted on her; that she is honest when she says she "saw it," but that the beginning and end of the whole experience are confined to the medium's own inner consciousness.

It must be evident, then, that the phenomena evoked at the average spiritualistic séance have to do with the operation of natural law. Not only are the sitters deceived, but the mediums themselves are deceived. The physiologist and the psychologist, in attendance on these occasions, are able to explain what happens as natural phenomena. Our knowledge, limited tho it is, of the psychology of the unconscious enables us to understand many of these things. And to the extent that the laws of psychology are applicable to them, we may continue, in a scientific way, our study and investigation of so-called spirit phenomena.

TRANSFERENCE OF THE "REALITY FEELING"

The séance is in every way favorable to transferring the reality feeling on the part of the expectant sitters to the suggested phenomena of the séance room. It is a simple matter for the "sitter" to transfer this feeling of reality from an actual experience of external sensation to the mental image of the immediate occasion. Says one writer: "The psychical researchers have set a trap for a spirit, and their expectations would be sadly disappointed if no spirit appeared. The spirit does indeed appear—Man's Unconscious Spirit, or the 'spirit' of one's own unconscious."

Owing to the widespread prevalence of spiritualistic teachings, there is a tendency on the part of many people to confuse their psychic experiences or "inner voice," with their beliefs about ghosts and apparitions, all the while forgetting how tricky the subconscious mind is in palming off on its owner the creatures of its own conjuring. It is failure to recognize this fact that leads the insane and the near-insane to become victims of hallucinations and delusions. It must be remembered that the average human mind cannot be trusted to tell exactly, precisely, and truthfully what is going on in its own depths.

In general, belief is but the conscious recognition or expression of an unconscious desire or wish. One of the dominant human wishes is for glory, power, self-aggrandizement. All down through the ages, outside of the military hero and the sovereign of the realm, a seer was the most honored of all men. We looked with reverence and awe upon the men and women who were supposed to be in touch with unseen power. We are inclined to worship those of

our fellows who have been able to push aside the veil and peer into the realms beyond. In modern times, the medium has become the would-be successor of the ancient seer.

The ordinary clergyman, it is true, reads his Bible, and prays, and then orates his message from the pulpit; but the medium leans over the threshold of another world, and there—so he claims—actually hears the voices and sees the forms of spirit beings, angelic hosts, departed souls. And so the medium is adored as a seer by the faithful believers in spiritualism—until such time as the deception is disclosed; and even then many of the faithful are slow to abandon their belief in the powers of their chosen medium.

Scientists, psychologists, and physiologists, have been forced to explore the subconscious in their study of spiritualism, for it must be in the realm of the unconscious that the spirit of man reigns and operates; how can we hope to know aught of the spirit after death if we do not make a sincere effort to study it during life? And, indeed, our greatest rewards in the study of spiritualism have come to us—from a psychologic viewpoint—in our study of the spirit of man as it operates in the subconscious realms, where we find it to be anything but an infinite intelligence and a high-minded spiritual guide. We find it to be wholly human and faltering, entirely selfish, seeking all the while to fulfil the wishes of the mind; and withal a crafty, cunning, and subtle deceiver, and sometimes guilty of conduct devoid of either conscience or moral scruples.

I have been much impressed, in the study of mediums and clairvoyants, by the observation that a very large number of them are of a highly neurotic temperament, and many of them of such mental instability that they closely border on the hysteric and even the insane realms. In fact, it is not uncommon to have a clairvoyant, medium, or trance-talker come of her own accord to the physician, seeking a diagnosis, frankly explaining her own misgivings concerning her mental state.

In olden days many of the witches must have belonged to this group of nervously unstable individuals. Some of the signs of witchery would now be regarded as signs of hysteria. This is especially true of the notorious “Devil’s claw,” which seems to have been a patch of insensitive skin somewhere upon the body of the alleged witch; to-day, this would be regarded as a symptom of hysteria and would be recorded among the physical findings—at the time the patient was examined—as “hysterical anesthesia.”

THE MEDIUM’S MIND

There can be little doubt that many of these spiritualistic mediums are deluded and more or less unable to understand their own performances. They are often greatly influenced by suggestion; as, for instance, in the case of a person who asks for communication with a dead sister when he has no dead sister, and yet receives from the medium long messages, supposed to come from the sister.

There can be no doubt that the minds of many so-called mediums are striking illustrations of dissociation among groups of conscious mental processes; they verge on actual hysteria and double personality. In so far as this is the case, one must in fairness admit that such a medium is not fundamentally (I mean morally) a fraud, but rather the subject of an

elusive, functional nervous disorder, and at the same time clever enough to capitalize the disorder and make it provide the necessities of life. In whatever instances this is the case, the so-called messages from the dead are made up of the more or less coherent trains of ideas that troop in from the marginal consciousness in response to those suggested ideas which come into the medium's attention when he or she is in a state of partial or complete trance. To whatever extent this represents the nature of mediumship, it, together with the so-called spirit messages, admits of scientific and psychologic investigation.

It must be said at this juncture, however, that there are many men of science in good repute who believe that the whole problem of spiritualistic phenomena cannot be fought out on this line; that there is a residue that cannot be approached by means of scientific experiment.* It seems highly probable that the ultimate solution of the problems involved in the phenomena of spiritualism (of this sort) will have to be referred to the theological courts.

No doubt much of the psychology of clairvoyants and spirit mediums takes place out in the dim consciousness of the marginal state or in the subconscious. That is, these spirit manifestations originate in the subconscious mind much as the fantasies of the dream-world originate there during the night season, when the analytical and conscious centers of the brain are asleep—dead to the world.

Man has only a single mind, but he has a dual consciousness. This dual consciousness is never separated by hard and fast lines. The conditions of health, of the nervous system, of the psychical centers, are all concerned in constantly moving back and forth the lines of demarcation between the central and the marginal consciousness.

We know that certain individuals are highly susceptible to being hypnotized—that is, to having their consciousness thrown clear over into the marginal state. We likewise know that other individuals are subjected to enormous and sudden fluctuations—sudden shiftings of the boundary line between the conscious and the subconscious—and that they bring up from the depths of this marginal state of their psychic life certain ideas and images which impress them vividly. So new and strange do these ideas appear, that they seem to the recipients to have been whispered by intelligences or spirits outside of their own minds and foreign to their own personalities.

“TRANSFERENCE” IN MEDIUMS

As a child grows up, it formulates and deposits in the mind a group of ideas, feelings, and emotions, which become centered around a certain individual, say its mother or its father. Later in life, we may imagine situations in which this group of ideas and emotions might be *transferred* to another individual, as upon the death of one or both of the parents. We are all of us, no doubt, more or less transitorily transferring our accumulated mental states from one individual to another, but only in a partial way and on a minor scale. It should be borne in mind that when such “transference” takes place, the process involves a whole group of complexes and a host of mental images and records of inner sensations. By way of illustration:

* See Appendix.

I had a young man seriously ill in the hospital. He had recently lost his father, and it was very evident, not only to me but also to his mother and other members of the family, that the lad was transferring bodily most of the thoughts and feelings which had been grouped about the thought of his father, to me as his physician.

We recognize that a similar sort of transference takes place between the sincere spiritualistic believer and the medium. And there is an added element—that of belief in the supernatural. The sitter in the séance circle comes to regard the medium as one who—like his father or his minister—is to be ardently loved and highly respected; but, on top of all of this, the very idea of spiritism suggests to the human mind that the medium be regarded with the awe and reverence that belong to one who has been selected by Divine agency as a consecrated channel of communication between the living and the dead—the oracle of one world to another.

In childhood we look upon the parent, at least in our earlier years, as being well-nigh all-powerful and all-wise. We build up a group of feelings permeated with this reverential awe, this worshipful attitude of trust and confidence; and then, as we grow older, this associated group of ideas, feelings, and emotions becomes buried in the unconscious mind, whence, in later years, it may be recalled by this technique of “transference,” and applied to a physician, minister, medium or other type of leader or teacher. Thus we can understand something of the psychology of that childlike credulity, that pathetic trustfulness, with which spiritualists come to regard the high priests of their cult and to follow them blindly through devious paths of deception and delusion.

Of course, the mediums do their full part to help the average mortal attain this extraordinary confidence. They claim to be above natural law—to do things which scientists cannot do. They allege that they can take the spiritual and materialize it so that it can be seen, heard, felt, and even photographed. All this, if it is believed even in the slightest degree, must serve, in the mind of the average individual, to exalt the medium high above ordinary mortals, and to facilitate the transference to the medium of that confidence and respect which we have had for our parents.

BURIED MEMORIES

We should remember that our own minds are constantly seeing things which we do not see, hearing things which we do not hear; and that these memory-images and their accompanying emotions are filed away in the subconscious mind, whence we can later draw them forth and become guilty of remembering things that we do not remember. These spurious memory-images can also be conjured up at any time as a part of the spirit manifestation of medium-ship, or as a part of the symptoms and suffering of the neurotic ailer.

Mediums, at least those of the more genuine type, have extraordinarily free access to, and contact with, their subconscious centers. This becomes a source of great danger if it is carried too far, as in the case of the insanities, where the conscious contact is widened to the point of flooding the conscious mind with the incoherent images, sounds, feelings, and impulses of the subconscious reservoir, absolutely destroying the normal flow of the stream of

consciousness.

Observation makes it certain that many of the messages perpetrated by mediums, and purporting to be of spirit origin, are nothing more nor less than the insidious flow into the medium's consciousness of messages from the unconscious memory centers of that great lower stratum of the medium's mind—the subconscious intellect. That this is really true will be shown by certain scientific observations more fully discussed in chapters to follow.

The psychic development of childhood, youth, and the earlier post-adolescent periods, is much the same in different individuals. We all have a great deal in common. Indeed, this is also true of subsequent periods of life; those of us who belong to the same race and are of the same sex, at least, have much in our psychology that is more or less in common. Now, if the medium succeeds in bringing forth from his or her unconscious memory-storehouse things which are really the residue and record of the experiences of former years, it is not unlikely that many of the sitters in the séance room will recognize ideas more or less identical with their own experience—much that seems to be familiar. Thus a great deal that can be recalled as having occurred in the lives of departed souls may be reproduced at the séance and receive recognition on the part of some of the spectators.

Many instances in our lives would fit the medium, the sitter, or the departed dead, or they would fit equally well if expressed by the alleged spirit of some one who departed this world a thousand years ago. The spiritualists tell us that in a given case there would not be one chance in a thousand that the medium could guess rightly; but this is not true. Granting mediums that degree of indefiniteness which they practise, that ambiguity which is characteristic of their statements, I am of the opinion that they have about an equal chance of making a passing guess in more than 50 per cent. of the matters with which they deal in the séance room.

THE TECHNIQUE OF "PROJECTION"

"Projection" is the process of reversing the physiology of the conduction of sensory impulses from the body to the brain, there to form ideas, images, memories. In "projection," ideas and images are aroused in the mind, and from there travel outward and are recognized through the sense organs as having had origin outside the body. Ordinarily our visual images and our auditory sounds go with the feelings and emotions which they arouse and which accompany them, for registration and attention in the archives of memory; ordinarily these sights and sounds, as well as other sensory impressions, originate outside the body as the result of its contact with the external and material world.

Now, if we imagine a reversal of this process—that instead of these symbols of material things, these sights and sounds originating without the mind and external to it, and passing in as sensory impressions over the nervous system to the brain, to be there recognized by the mind and therein to be recorded and retained as memories—if we can imagine a reversal of this process so that we would have arising, down in the unconscious centers of the mind, various memory images and sounds which would travel outward over the nerves to the centers of hearing and vision, there to be recognized, there in reality to appear just as if they

had come from without in the normal manner (and as they no doubt originally did arise before they were buried in the forgotten regions of the unconscious), then you will have a picture in your mind of the *technique of projection*.

Your imagination needs to go but one step farther: throw these sounds and images from the seeing and hearing centers of the mind, out of the body into the external world, and you have the foundation all laid for perfect hallucinations. In this way an hysterical individual, a spiritualistic medium, or an insane person, will be able to hear and see things that do not exist—that is, that do not exist in the external world—things which are not discoverable except to those people who, from whatever cause, are “seeing things” and “hearing things.”

This sort of “projection” is, to a certain extent, normal to all of us, and is no doubt unconsciously practised—to a limited degree—by most of us. Occasionally we run across an individual who has become a victim of “projection” in one particular phase of his life. He is thoroughly sane and rational in every other avenue of thought, but on some one thing he has become a monomaniac. He sees and hears things that are not real; his mind is not controlled by reason, and is not dominated by logic in this particular realm of thought, as in all others; when this is well marked and classic, we say that such a person has paranoia.

We are quite likely to “project” some of our own fears and feelings upon other people—it is notorious that we have a tendency to judge other people by ourselves. We judge many of our own acts by the way in which we think our friends and neighbors would judge us. Our standards of morality are largely those that are “projected” from the consciences of other people upon us. We are influenced by tribal standards; we are governed largely by fashion; we regulate our lives in accordance with convention; we are constantly interchanging ideas and feelings, emotions and reactions between ourselves and other people.

For instance, as children we were subject to much criticism. It is common to hear parents speak to the children of some act as being “naughty” or “not nice.” Later on, as this child reaches maturity, the parent may not be there to criticize some trivial act, and yet the child will, as it were, subconsciously, as the memory of the act is put on record, place there alongside, and with it, the thought of parental disapproval. Therefore, in subsequently recalling this mental registry, the memory will attribute to the parent a specific disapproval of the act. This is projecting to the parent something of internal origin, and seeing the parent as having expressed a criticism which he did not express, but which the individual in memory recalls as expressed disapproval, and attributes to the parent in all his subsequent thinking.

Another illustration of projection: One of my associates expressed surprise that I did not know of a consultation which had been arranged with a certain patient, saying, “Why, Doctor, you told me Saturday that you would see this patient with me on Monday,” and I replied, “But, Doctor, I did not make this promise and did not know that I was to see this patient until I reached the office a few moments ago and found the appointment on my book.” What had happened? Simply this: On Saturday my colleague spoke to me regarding this patient, and in connection with the hurried mention of the matter undoubtedly inferred that I would go into a further discussion of the case subsequently; and, knowing that the patient would be leaving the city Monday evening, set down in his mind alongside the

memory-registry of this episode the notation—"Dr. Sadler will see this patient with me on Monday." And, naturally, when the case came up for consideration on Monday, this parenthetical memory-registration was projected forward with the real material into consciousness, and, with the "reality feeling" duly attached, was accepted as a bona fide memory-registration. This was told to me as a fact—as a recalling of an actual statement which I had made. But I had made no such statement—in fact, the situation was such on Saturday that I could not possibly have consistently made such a promise. And it is in just this manner that serious misunderstandings and grave altercations arise between real friends and associates.

This sort of illusive projection is very often due to long-continued emotional suppression. Thus, a person may ascribe to others what is characteristic of his own unconscious self, and may condemn it in others all the more strongly because it is part of his nature that he thinks undesirable. This may partially account for the prevailing attitude in society toward the criminal. Projection is also illustrated by the universal tendency to believe that the person we hate, hates us; that the person we love, loves us; that the person we have broken faith with, is unfaithful to us. Such beliefs are satisfying and often enable the individual to avoid self-reproach.

Projection also accounts in part for the pleasure people take in gossip and scandal-mongering. In this way they get a vicarious expression of their own desires. Many other things in every-day life may be regarded as indirect expressions of repressed trends or desires, or as symbolical representations of mental conflict. Some of these are: mannerisms, slips of the tongue, forgetting important engagements, some forms of wit, dreams, and many nervous symptoms.

ORIGIN AND NATURE OF PROJECTION

It would seem that primitive people—savages—were wont to project their ideas and emotional reactions on a great variety of things, both animate and inanimate, and so these simple children of Nature came to endow rocks, clouds, and rivers, not to mention the sun, moon, and stars, with spirits and various supernatural attributes, as shown by the superstitious beliefs of ancient peoples, as well as by the highly organized mythology of the Greeks and Romans.

It was observed that animals breathed, and then the savage saw the mist arise from the waterfall, looking not unlike the condensation of his own breath on a frosty morning. How easy for the primitive mind to reason that the waterfall had a spirit as shown in the mist floating from the plunging waters! And so, later on, the trees were endowed with spirits, and the whole primitive psychology of a spirit world was built up, which still clings to the human mind and infests the human consciousness, predisposing the men and women even of a civilized generation to the sophistries of spiritualism.

The practical working of the technique of projection is well stated by Hart, who says:

“Projection” may be defined as a peculiar reaction of the mind to the presence of a repressed complex, in which the complex or its effect is regarded by the personality as belonging no longer to itself but as the production of some other real or imaginary individual. The meaning of this definition will be made clear by the consideration of some simple examples. People who possess some fault or deficiency of which they are ashamed, are notoriously intolerant of that same fault or deficiency in others. Thus the parvenu who is secretly conscious of his own social deficiencies talks much of the “bounders” and “outsiders” whom he observes around him, while the one thing which the muddle-headed man cannot tolerate is a lack of clear thinking in other people. In general, it may be said that whenever one encounters an intense prejudice one may with some probability suspect that the individual himself exhibits the fault in question or some closely similar fault. We may express the psychological processes seen in these cases as follows: the fault constitutes a complex which is repugnant to the personality as a whole, and its presence would therefore naturally lead to that particular form of conflict which is known as self-reproach. The personality avoids this conflict, however, by “projecting” the offending complex on to some other person, where it can be efficiently rebuked without that painful emotion which inevitably accompanies the recognition of deficiencies in ourselves. That is to say, the personality reacts to the repugnant complex by exaggeratedly reproaching the same facts in other people, thereby concealing the skeleton in its own cupboard. The more comfortable expedient of rebuking one’s neighbor is substituted for the unpleasant experience of self-reproach. The biological function served by projection is, therefore, the same as in all other varieties of repression, the avoidance of conflict and the attainment of a superficial peace of mind.

So this psychologic practise of projection, so well understood as pertaining to the every-day life of the average individual and so well known in the case of the neuroses and the insanities, is undoubtedly the explanation of much of that which comes to be real in the mind of the medium. The medium has mentally built up certain things, believes certain things, ardently wishes for certain things—we are talking now of honest mediums, those who are sincere tho self-deceived; and these things which are aroused or created in the reservoirs of the medium’s unconscious mind are projected, not upon another individual, as in the case where we seek to blame another for our own faults, but out into imaginary spirit beings, and then are received back into the mind of the medium as having had origin in a world external to the body—the world of spooks.

Sometimes, when the appendix is telephoning distress messages, the stomach bell rings, and we get the message twisted, so that we think we have stomach trouble when the trouble is really in the appendix; and so sometimes we have mutterings and groanings in some corner of the subconscious mind, and these disturbances, in their effort to get out, likewise become entangled in transit, and when they reach our consciousness we think we are in receipt of spirit messages from ghostland.

We have noted that most people desire to live after death. In our desires and wishes, we are unconsciously engaged, all the while, in projecting ourselves into the future and invisible world as some sort of spirit entity. We are encouraged in this sort of thinking by the teachings of most widely accepted religions. Thus the present-day basis for belief in spirits goes back to a very remote time in the history of our racial ancestors.

HALLUCINATIONS

Hallucinations do not always represent the vagaries of a maniac. They may be very orderly in origin, and their psychology can sometimes be accurately traced. No doubt many mediums suffer from a mild form of hallucination, more or less systematized and controlled. That many of the things which mediums think they see or hear are transitory hallucinations, more or less regulated by the technique of suggestion, is indicated by the following experience related by Prince:

I may mention one more example of conservation of a forgotten experience of every-day life, as it is an example of mode or reproduction which differs in certain important respects both from that of ordinary memory and that observed under the artificial methods thus far described. This mode is that of a *visual* or an *auditory hallucination* which may be an exact reproduction in vividness and detail of the original experience. It is a type of a certain class of memory phenomena. One of my subjects, while in a condition of considerable stress of mind owing to the recurrence of the anniversary of her wedding day, had a vision of her deceased husband who addressed to her a certain consoling message. It afterwards transpired that this message was an actual reproduction of the words which a friend, in the course of a conversation some months previously, had quoted to her as the words of her own husband just before his death. In the vision the words were put into the mouth of another person, the subject's husband, and were actually heard as an hallucination. Under the peculiar circumstances of their occurrence, however, these words awakened no sense of familiarity; nor did she recognize the source of the words until the automatic writing, which I later obtained, described the circumstances and details of the original episode. Then the original experience came back vividly to memory.

On the other hand, the "automatic writing" not only remembered the experience but recognized the connection between it and the hallucination. The truth of the writing was corroborated by the written testimony of the other party to the conversation.

Hallucinations are nothing more nor less than false sense impressions. The medium—like hysterical patients and sufferers from certain forms of insanity—sees and hears things which have no real existence: hears imaginary voices and sees fantastic spirit forms floating about the room. I remember very well that, in the days when I was a medical student, we were taught that patients who had delusions and hallucinations were definitely insane. We hardly take that view at the present day. We regard many such patients as victims of hysterical dissociation. In one case the hysterical patient hears a constant voice which speaks in reproach for the individual's sins and brings about a mental state of religious melancholy. In another, the patient hears a voice which represents itself as the spirit of a departed friend or relative, and he rapidly develops into a first-class spirit medium.

An interesting part of the study of hallucinations has to do with the consideration of the influence of drugs in producing this form of abnormal mental behavior. Alcohol seems to work along the line of cancelling the inhibiting complexes, so that the individual is released from his sense of responsibility and from all tendency toward overconscientiousness. Under the influence of alcohol he markedly regresses toward the moral level and sexual conduct of his primitive ancestors. Delirium tremens is a good illustration of hallucinations artificially produced, and the illusions of this state of intoxication are, while characteristic, nevertheless after the general order of the hallucinations of the insane.

In the case of chronic and periodic drinkers there seems to be developed an alcohol complex. There is some inexplicable charm in this drug, and it probably consists in the fact that it enables the individual for the time being to retreat from the real world to one of dreams and fantasy. Later on, as the result of habitual drinking, there may be established a chronic alcoholic drug habit.

No doubt much drinking is due also to the desire for relaxation from the stress and strain of modern civilization. It is in reality an effort on the part of the drinker to dodge the trials and tribulations of the moment, and to seek solace and transient relief in intoxication. As we so often hear, many a man drinks in an effort to “drown his troubles in alcohol.”

Tobacco undoubtedly operates in the same direction in a minor way. It is no doubt possible to develop a smoking complex—a certain association of ideas which contributes to the belief or consciousness that tobacco is stimulating or quieting, and thus, with the appearance of the smoke, these associated reactions are experienced in consciousness. I am firmly convinced that many of the effects of tobacco are purely psychic. In other cases, smoking, especially on the part of young people, may be connected with an effort to exalt the ego, to assert individuality. It is a part of the phenomena of the power complex—merely one of the steps in the process of trying to grow up, trying to appear big. Tea and coffee may perhaps operate in a similar way along these lines, but certainly in a very minor capacity as compared with alcohol and tobacco.

No doubt the use of alcohol, tobacco, and even other drugs is sometimes only a manifestation of that innate tendency on the part of many individuals to rebel against authority, to be “agin the government”; but in most of these cases where drugs are used there will be found a family history of neurotic tendency. Many of the ancestors of the drug addicts will be found not only to present a marked neurotic history but also to yield the fact that they were drug users.

EMOTIONAL FIXATION

A constellation of complexes such as the sex urge, power urge, etc., may become fixed at some point in its evolution through the years, and so, instead of progressing normally, feelings and emotions connected with this complex have an undue tendency to gravitate toward the point of fixation.

The Freudians speak of the love life as being developed after the following scheme:

1. Auto-erotic stage, in which the infant is merely interested in being warm and well fed.
2. The Narcissistic stage, in which the child is in love with itself.
3. From four to seven years of age the family state, in which the child is in love with father and mother, brothers and sisters, and perhaps playmates, there being a slight tendency for the girl to think more of the father, and the boy, more of the mother.
4. The outward swing of the love, the period of crushes, intense intimacies and the friendships of adolescence, often with a slight tendency to homosexuality.
5. The more definite fixation of the love life on one of the opposite sex.
6. Now we may have arrested emotional evolution of these affections—they may become fixated at any one of these points in their process of natural development.

Thus we have the cases of men who never marry, but stay home to take care of their mothers, and so on. Or we may have the cases of so-called acquired homosexuality. In this connection we should pause to differentiate between inherited (congenital) and acquired homosexual tendencies. In the case of the inherited form a man seems to be born with a male body but with a female brain, as far as reactions to sex impulses are concerned; and so, in the opposite sex, we may have an individual with a woman's body but with the brain reactions after the fashion of a male.

Now, acquired homosexuality is entirely different, and is quite readily curable. I recently had a case of a young man who, while he seemed to be a splendid specimen of manhood physically, was more or less effeminate in his tastes; but the striking feature of his psychology was that he possessed an undue admiration for his own sex. An analysis proved that it all came about through an association of ideas in his early childhood, as the result of a habit he formed of riding about, when a little chap, on the foot of his father, who was a robust man, six feet in height. This little fellow was subject to considerable sexual irritation from not having been circumcised, and he early experienced certain sex emotions in connection with this habit of riding about astride his father's foot, and in this way he came to associate sex feelings and the sex urge with his own sex; later he transferred this association from his father to others, more particularly to acrobats and athletes. He was twenty-two years of age when he undertook the subjugation of this unfortunate complex, and it required between two and three years really to bring about a state of mind that enabled him to acquire a normal attitude toward the sexes.

As an illustration of the fixation of the evolving sex urge, the Freudians have made a great deal out of the Œdipus and Electra complexes—more, I think, than is warranted. The Œdipus complex, as will be recalled, has to do with the son falling in love with his own mother and seeking to get his father out of the way so he can have unopposed sex relations with his mother. The Electra complex is based upon another legend in which the daughter seeks to dispose of the mother in order to have the undivided attention and devotion of the father. As I say, I think these ideas are greatly overworked, but in a mild manner this is true in all families. The daughter naturally has a peculiar attraction for the father and the son for the mother. Mothers take special interest in their sons and fathers exercise particular care over their daughters. There is a sex element, subconsciously, even in the ordinary family life, as there is in school life, especially in the adolescent years when youths are in attendance at coeducational schools and colleges.

The fixation of the affection at some point early in childhood, no doubt serves partly to explain the development of the cruel tendencies so often seen in children. Who has not seen a child one moment affectionately fondle a pet and the next moment actually torture it? The initiation ceremonies among civilized as well as savage people into the various societies and lodges are no doubt mild reversions to this form of cruelty.

It is highly probable that the popular interest in the gruesome details of murders, seductions, prize fights, further indicates that there is something of a "hang-over" in this feeling of pleasure at the sight of actual suffering even among our more highly civilized races.

It is also likely that certain sadistic tendencies should be classified in this group—those frequently-discovered proclivities that cause suffering in connection with the manifestation of love. In a minor manner, perhaps, we could similarly class the tendency to tease inordinately those we love.

In connection with this doctrine of fixation of the emotions, we should also remember its corollary, the *displacement* hypothesis. To displace emotion is to shift its center of gravity from the originally significant to some originally insignificant portion of the same complex. I presume our behavioristic psychologists would call this a reconditioning reaction, and in this connection it must be remembered that the Freudian school of psychology always envisions a complex as a thing dynamic, as a sort of psychic individuality in some way connected with one of the fundamental human drives. Displacement is mentioned in this connection because in modern literature it is sometimes used in a very confusing manner, more or less synonymously with transference.

Condensation is the Freudian term that refers to the putting of several suppressed ideas into one group, and is illustrated in those cases where some apparently trifling feeling becomes definitely attached to one of the great emotional drives and therefore comes to play an inconsistently conspicuous part in the individual's psychic life.

It may be well in this connection to make clear the terms introversion and extraversion. In introversion we try to flee away from reality by withdrawing within our consciousness. In extraversion we try to get away from reality by taking up more intensively some other form of reality-activity.

In Freud's definition of *transference*, attention should be called to the fact that he believes that patients, in the process of psychoanalysis, first transfer their troubles and relay their affections to the doctor. This is theoretically only a transient process in the cure, and the psychoanalyst is supposed to manipulate matters so that eventually these feelings shall be properly transferred to their legitimate destinies.

Likewise the more strictly Freudian definition of *projection* has to do with the patient's disowning something which has originated in his mind and attributing it to some external source. A typical illustration, often met with, is the tendency of certain hysterical women who accuse innocent men of misconduct. The counterpart of projection is called *introjection*, and is the phenomenon we see in paranoia, where a patient ascribes personal meaning to every little thing that happens in his environment.

DISSOCIATION AND DOUBLE PERSONALITY

DOUBLE or multiple personality (for sometimes there are more than two) is one of the most interesting psychic phenomena of modern times. That an individual may actually possess a dual psychic nature, may actually be one person one day, another the following, and still a third a few days subsequently, is a fact now well established in the study of abnormal psychology. Interesting as it would be further to go into this question here, space will not permit, and I can only touch upon it as an illustration of the manner in which some types of psychic phenomena may be adequately explained.

In cases of double personality, individuals may wander off and be under the guidance of the subordinate personality, and then return, after days or weeks, not knowing where they have been or what has occurred. Under the influence of one personality, a girl will go into the woods, gather garter-snakes, and bring them home in boxes addressed to her other personality, just to witness the consternation of the other individual when the wriggling reptiles crawl out of the box when it is opened. One personality is afraid of snakes, the other is not. Again, one personality may be able to write shorthand, the other cannot; one may speak French fluently, while the other knows not a word of the language. These are but a few illustrations of how one personality may know absolutely nothing of what the other personality, dwelling in the same mind, may say or do.

HYSTERICAL FUGUES

We should not overlook the fact that most cases of transient amnesia, loss of memory, wandering away from home, etc., are not exhibitions of double or multiple personality, but rather belong to the group of *hysterical fugues*. They are but transient dissociations, psychic mix-ups, which cause people to wander off and do these strange things. However, in this connection we must remember that many people know about this psychic state, and when they go off on some wild and disgraceful escapade they are wont to fall back on the idea of these transient fugues as an alibi.

While a great many cases of double personality have come to notice in this country and Europe, multiple personality is very rare. Up to the present time there are only slightly over fifty cases of undoubted multiple personality which have been reported in medical and psychologic literature.

Many of our cases of supposed double personality, especially in the younger individuals, are merely exhibitions of the common pre-adolescent phenomenon of "living on the inside." These cases are very common and merely represent an exaggerated case of introspection, or better, perhaps, introversion. Again we must not confuse with double personality the fact that some of us are many-sided in our inner character and have a tendency to experience

mood-swings—shifting violently from one temperamental mood to another.

A little more as to what is embraced in the term *personality*: In medical psychology the term is used to cover the sum-total of the neuropsychic organization. It is therefore apparent that transient amnesias, somnambulisms, and hysterical fugues are not manifestations of double personality.

The outstanding characteristic of the hysterical fugue is the desire to run away. It is a convenient arrangement on the part of the subconscious to enable its owner to get off the job and out of an unpleasant situation; just to pick up and move on, and then come back with an alibi—generally speaking, a truthful alibi—that he knows nothing about what happened after a certain date; in fact, such patients often do not have a very clear memory of what happened just preceding their leaving home.

In most cases the victims of fugue suffer from dissociation of impulses and emotions, with no memory of events happening during the period of amnesia; and I think there is little doubt that the whole performance is a subtle and ingenious subconscious defense reaction to enable these neurotic individuals to flee from reality, and then subsequently to justify the desertion of duty by denying, and truthfully, all memory of everything connected with the escapade.

We must remember that the subconscious, as shown in former chapters, is capable of fairly sound reasoning. Its judgment is more or less logical and its procedure is all but uncanny. That this is true is shown by the fact that when we go to sleep with many unsolved problems on our minds, we often wake up in the morning with these things solved, and solved wisely and efficiently. There is certainly a process of reasoning which goes on in the depths of the subconscious. This subtle subconscious behavior is well illustrated also by the fact that we sometimes like or dislike people against our judgment. In fact, what we call intuition is nothing more nor less than the process of spontaneous association of ideas coupled with subconscious reasoning. Probably the only reason that women appear to have more intuition than men is that they are less trained in logical reasoning and therefore depend more upon these spontaneous subconscious deductions.

A short time ago I came across a typical case of hysteric fugue, and it will be instructive—as illustrating the difference between fugue and double personality—if we give space to a rather full recital of the behavior of this fugue victim. The history of the case is as follows:

The patient is a man of thirty-six, very strong physically, and equally strong mentally. He has had a fine education, both classical and technical, and has been acting as consultant on industrial building problems. He has done considerable writing and lecturing on these matters, and has a national reputation for knowledge along his particular lines. He has taught in a technical college; his tastes are quiet and intellectual. He is highminded and seems to like only the better things of life. Morally, he has always borne the finest of reputations. He has been brought up in the Catholic faith, and while not fanatical, has a deep religious experience. He has been happily married for seven years. During the last couple of years he has had a great deal of financial trouble, which has bothered and harassed him very much. He is not a good business man, as he is overgenerous, and is gullible in matters of investment.

This man came to Chicago in September to attend a business conference, bringing his wife with him; the wife planned to visit her home in an adjoining State, while her husband was to attend to his business affairs, later joining her where she was visiting, and they were to return home together. She went on to the home of her relatives and he left Chicago to visit three near-by towns.

Just one week later he telephoned his wife from one of these towns, saying he would be with her that night. The only peculiar feature up to this time was that his wife had not heard from him during the week, which was very unusual. It was his custom to write every day. On the day that he telephoned he said he would drive over to meet her. This he did, and his wife noticed nothing at all unusual in his actions except that he seemed frightfully fatigued and slept several hours after getting there, an unusual procedure for him.

He mentioned to his wife that a young woman associated with one of the plants he had visited, had ridden home with him. He said she had asked him if he was married. Nothing further happened until Christmas time, when this young woman began calling him up wherever she could reach him, declaring that he was married to her and that he must meet her at different places which she designated. He was working in and about Chicago at the time.

According to his story, he was completely bewildered by this onslaught, but thought she was either laboring under a delusion or trying to blackmail him. He told his wife about it, and she felt it was a serious matter and suggested that they see a lawyer at once, which they did. The husband insisted, and still does, that he knows nothing of this woman, in fact never saw her until the day she rode that short distance with him.

In January he entered upon new work and continued to ignore this woman. But as time passed her attacks became more violent and threatening, and his company put a detective on the case. She had threatened legal action and told him he would find the marriage records to substantiate her claims at a certain town in Indiana. The company, considering him a valuable man, and feeling that this affair was blackmail, sent an investigator to this town—and found such records.

On going back, date by date, in an effort to have him account for this period in September, he was utterly unable to explain where he had been after he left his wife. He remembers nothing. His firm, of course, discharged him. Nobody believed his story—except his wife. The other woman has done everything possible to harass him, torment him, and discredit him. She has gone to all his friends and relatives; has threatened criminal action, etc. Since he has found out that there is this blank space in his life and that there are such marriage records, he has gone to pieces and is overcome with the horror of the situation.

The summer preceding the affair he worked very hard during the extremely hot weather; was under great strain, as he was worried about financial matters; and as his wife was away on account of illness in her family, he was much alone. During that time he went to a certain factory every day for ten days and repeated so much of his work that the man in charge noticed the repetition and finally spoke to him about it. He then realized that he had no recollection of having been there on previous occasions. A doctor at the plant who examined

him said he thought he had a temporary loss of memory due to the bursting of a small blood-vessel. He had frightful headaches and still has them. He has always been absent-minded.

This is a typical case of hysteric fugue. It is not a case of double personality. It is indeed pathetic to contemplate an otherwise perfectly decent and well-meaning man wandering off absent-mindedly and entering into a bigamous marriage, while his trusting wife waited at home for his return; and then to have him come back to his family without the slightest memory of what he had done during this period of ten days' lapse of memory—this hysteric period of partial dissociation or fugue.

DISSOCIATION AS RELATED TO SPIRITISM

It is evident that a mild double personality—an incipient attack of this disorder—would furnish the ideal mental mechanics for the making of a high-class medium. If we could conceive that all the conditions were present for the manifestation of double personality, but that there remained some deep subconscious connection between these personalities, so that one could communicate with the other after some sort of psychic clandestine fashion, then we should have the stage ideally set for the self-deception of the medium herself, to begin with, as well as for the magnificent deception of those who would seek to investigate such a phenomenon by ordinary methods of observation.

It is my opinion that about 75 per cent. of commonplace spiritistic manifestations are frauds—conscious, deliberate, commercial frauds—and that about 25 per cent. belong to the order described in this chapter, and include the possible cases of actual spiritual or supernatural phenomena which, it will be observed all the way along, I admit may exist, tho I have personally come in contact with but one or two cases that could lay even remote claim to falling into this last-named group.*

Thus it will be seen that it is indeed difficult to draw the line between the sphere of mediumship or clairvoyance—where detached complexes, double personality, etc., would act in a sane person to produce these queer psychic phenomena—and those cases in which the mental equilibrium has been upset to the point where we would be justified in diagnosing insanity. In other words, it is difficult, as we start down the incline of abnormal psychology, to know where clairvoyance ends and insanity begins. How preposterous, then, to form the habit of getting one's inspiration and life-guidance from such abnormal fountains of pseudo-wisdom! What a calamity that the uncertain cerebrations of abnormal minds should be regarded by tens of thousands of persons as communications from departed friends and relatives! The time has certainly come to apply common-sense methods of reasoning to our investigation of psychic phenomena, and to apply rigid, sober-minded, scientific tests to all men and women who claim to be channels through which disembodied spirits manifest themselves to the living.

* See Appendix.

Undoubtedly, much of the psychology of mediums is explainable, not only on the hypothesis of hysteric dissociation, but also on the ground that many of them closely approach double personality—at least so far as mental complexes are involved in the production of the peculiar psychic phenomena having to do with their hearing spirit voices and seeing materialized spirit forms.

I have a patient who is very much disturbed in his psychic life by what he terms “a part of his mind constantly talking to the rest of him.” He is not of the hysterical or neurotic order. He is a hard-working individual, whose family history is quite free from evidences of insanity or other serious mental disorders. A careful study of this man leads one into the belief that he is the victim of systematized dissociation—a dissociation which has been carried so far, and is so consistently sustained, that it amounts, in a limited way, to a double personality. I have had him under observation for a number of years. He does not seem to grow either better or worse. He has had neither the time nor the inclination to attempt a thoroughgoing course of treatment to correct his dissociation. It should be noted here that when he first came to consult me he had these voices definitely linked up in his mind with spiritistic phenomena, and it is very interesting to record that under painstaking instruction he not only continues to keep away from the séance room, but that these voices which speak to him have come almost entirely to represent themselves as personalities other than discarnate spirits. Slowly but surely the process of training which he has undergone is changing the philosophic background and the theologic basis of both the personality and content of the messages delivered by his “inner voices.”

I have not the slightest doubt that, had he not fallen into medical hands, this man would have turned out to be a high-class and successful medium. As it is, he is quite disposed to accept the explanation which we have so persistently reiterated, namely, that his peculiar psychic phenomena are entirely due to complex dissociation. Of course, economically considered, it seems a pity that I should have spoiled such a good medium and deprived him of the easy affluence that would have been his portion had he been allowed to develop his psychic powers along spiritualistic lines; but, on the other hand, I console myself in the belief that I have thus indirectly been the means of saving many hundreds of unsophisticated mortals from further deception and delusion.

COMMONPLACE DUAL PERSONALITY

When we get down to practical, every-day life, we are forced to the conclusion that most of us carry around two or more personalities in our workaday psychology. We are, at least many of us, in the situation of the apostle Paul, who had a constant fight going on in his mind, being unable to do the things which he wanted to do while all the time doing those things which he did not want to do. Perhaps it is on moral grounds and in connection with our sex fears that we most commonly detect these dual personalities, which exist alongside each other in the domain of the human mind.

In fact, we might come to consider that, as our memory life is laid down, decade by decade and layer after layer, these separate layers, together with the sentiments and emotions

of the preceding decades, constitute a series of psychic personalities which coalesce and interlace themselves into a whole which is represented by a systematic personality, on the one hand, and a unified consciousness, on the other. At least, it seems proper that the normal individual should regard his mental life as having existed in a number of epochs or definite periods. For instance, suppose a German peasant to have married in the Fatherland and raised a number of children. His wife has died and the children have been distributed among the relatives. He has emigrated to America, where he has married another woman, raised another family of children, learned a new trade and a new language. This man certainly has lived a double life; in more ways than one has had a dual existence. The memories of these two families can well be understood to live along-side each other in the storehouse of memory, and yet they are diverse. Likewise in fantasy and imagination, entirely separate lines of thought and reverie may be pursued; diverse complexes may be built up which, later on, may be utilized by the subconscious in the vagaries of the various neuroses and by the spirit medium as a source of obtaining spirit messages and hearing spirit voices, so that one section of the intellect will thus be able to communicate in a most mysterious and impressive manner with the other.

Suppose we imagine an individual having had half a dozen such lives on earth. Further let us suppose that each one of his wives was of an entirely different sort—one allowing him much personal liberty, another forcing him to lead the life of a henpecked husband. Still others might have been natural-born flirts and have produced no end of jealousy in his mind. In the case of death, of which one of these lives would his spirit be the counterpart? Which would he be if he returned to earth to rap on our bedsteads? Someone has suggested that possibly this sort of thing accounts for the dazed condition apparently manifested by many spirits newly arrived on the other side when they undertake to communicate with the world of their recent departure. It is suggested that they may be more or less “bewildered by the problem of finding out who they really are.”

DUAL PERSONALITY IN MEDIUMS

We are forced to the conclusion that many of the honest mediums are examples of double or multiple personality in some phase or other. In the case of multiple dissociation, the medium can well have a systematized, orderly group of complexes in the mind, which becomes the home of the various controls and guides under whose direction he seems to operate. It is very evident that the method of conducting the modern séance lends itself very favorably to permitting the medium to be now under the control of one dissociated complex and now under the control of another. In this way the numerous secondary complex personalities, which these nervously unstable individuals have allowed to be built up in their minds, function at the séance, as guides, controls, and discarnate spirits.

As to the physical contortions and other gymnastic maneuvers in which mediums so constantly indulge, it is difficult to say what their true nature may be. Undoubtedly much of this “horse play” is used first to divert attention from some of the tricks of the medium, in the case of those who are fraudulent, while in the case of the true psychic performers it may

merely represent the muscular contractions which are a part of hysteric manifestations; and, too, the medium may discover that these things serve to attract attention and otherwise constitute good psychology in furthering the ends of the séance, so that he is tempted to exaggerate his natural tendencies in this direction.

The normal person is able effectually to repress into the subconscious the performances of his secondary complexes, but the neurotic individual fails in his efforts directed to this end, and these secondary complexes intrude themselves into the stream of consciousness, in the one case, as the relatively harmless conceptions, phobias, fears, and other silly idiosyncrasies of the neurasthenic and psychasthenic individual; while, in the case of those having a more substantial nervous system and better control, they sometimes become systematized, not as the vagaries of the neurotic, but as the mysterious voices and performances of the spirit medium.

SOMNAMBULISM

Janet would have us believe that hysteria and somnambulism are not far apart. Perhaps there is little difference between the performance of the sleep walker and the phenomena of the trance medium. Each is in a more or less unnatural and artificial state of mind, and both are more or less automatically executing their various actions. The authority just named says:

In this view things become somewhat clearer; the essential phenomenon that, in my opinion, is at the basis of these double existences, is a kind of oscillation of mental activity, which falls and rises suddenly. These sudden changes, without sufficient transition, bring about two different states of activity; the one higher, with a particular exercise of all the senses and functions; the other lower, with a great reduction of all the cerebral functions. These two states separate from each other; they cease to be connected together, as with normal individuals, through gradations and remembrances. They become isolated from each other, and form these two separate existences.

When these alterations of behavior are very slight, we commonly speak of them as being simply moods of the individual—a temperamental fluctuation; thus much of this sort of behavior passes for every-day experience. It is only when a subordinate complex asserts a transient independence and begins to function as a separate entity that we take cognizance of it as a manifestation of double or multiple personality. In other cases, when these subordinate personalities or constellations of complexes start on a rampage, they exceed the limits of a mere mood, altho they fall short of carrying their insurrection to the point of an independent existence such as would be exemplified by trances, cataleptic hysteria, or spirit voices; and then such an individual experiences that keen suffering which accompanies the vagaries of neurasthenia, brain fag, nervous exhaustion, psychasthenia, etc.

We are all more or less familiar with the somnambulistic phenomena of the “sleep-walker”; how he automatically performs marvelously intricate pedestrian feats while oblivious to all surroundings, and utterly unconscious of the things he does on these nocturnal strolls. I merely wish here to emphasize the fact that sleep-walkers are unconscious of what they are doing, and that they continue to do it exceedingly well as long as they are not aroused from their slumbers or molested in their performances.

Now, in the case of numerous phenomena connected with abnormal psychology in general and with mediumistic performances in particular, we have conditions that are identical with, or analogous to, the sleep-walker's automatic performances. In the case of the sleep-walker, the subconscious mind is directing the leg:—the feet are made to execute the mandates of the great unconscious—while in the case of automatic writing it is the hands that have fallen under the control of the subconscious centers. In automatic talking, the tongue and speaking centers of the minds are dominated by the unconscious. In the case of hearing voices and seeing images of supposed spirits, we have the same general condition prevailing, only in these cases it is the sense of hearing and the sense of sight that have become in their turn the victims of subconscious domination—the subject of this outward projection of subconscious machinations.

In this way we come to see that these widely diverse phenomena are, after all, rooted in quite the same general principle as regards their ultimate psychological explanation, and that the sleep-walking of the somnambulist sheds light on the whole gamut of mediumistic performances, embracing automatic writing, automatic speaking, crystal gazing, and the rest.

AN INTERESTING CASE

Dr. W. F. Prince has reported a case of dissociation, or multiple personality, which is very interesting when studied in the light of mediumship. It should be borne in mind that in cases of multiple personality the mind is split up, or “fissured,” after the fashion of a tree with many branches which in turn are connected with numerous sub-branches. In the case of multiple personality, as a rule, there is a primary personality which represents the original mental life, or stream of consciousness, to which the others must gradually be united or fused. These multiple personalities, it must be clearly understood, are not moods or temperamental fancies of the individual, but real, mental, working, unit-thinking entities.

There are really several distinct consciousnesses which irregularly take turns in being in evidence. To the uninitiated spectator there indeed appear to be strange and extreme changes of mood and behavior, accompanied by a “play-acting” ability to alter the voice, facial expression, etc., to suit, and a disregard for truth evidenced by contradicting stories and claims. But it is a fact that each personality has a different consciousness, will-memory, range of ideas and tastes, and a different set of bodily reactions in the form of individual facial and vocal expression and individual peculiarities of sensation, hearing, vision, etc.

An interesting individual was Doris Fisher, who had five personalities including the primary one. Before the death of her mother she had at least two or three personalities, the uncertainty being due to the fact that *she claimed one of her personalities was a spirit*. Here is a case which directly proves the psychic origin of much that appears in the performances of modern spirit mediumship. Further describing this case, Doctor Prince says:

These were the primary personality afterwards known as the Real Doris, and the secondary personality, who came to be called “Margaret.” By turns during the day these came “out” and conducted affairs. But “Margaret” had the advantage that when she was subliminal or “in” she was co-conscious, so that when she came “out” with a snap of the neck, she knew just what to do or say in order to carry things along smoothly,

while poor "Real Doris" was unconscious when "in" and if suddenly summoned into consciousness by the disappearance of "Margaret" often had to "fish," to "mark time" and to employ devices to orient herself, making blunders at that and incurring blame for her supposed wilfulness or falsity. "Margaret" never developed beyond the mentality of a very sagacious child of ten. So that in the last year of the mother's life, she was used to seeing her daughter at times behaving after the fashion of a young lady of seventeen and at other times like a romping child given to dolls and sports, always fond yet at times disobedient and at other times roguishly heedless; now showing a comprehension suitable to her age, but again betraying an almost infantile belief in fairies and in the advent of babies in a doctor's satchel.

This case, complicated by a third or "spirit" personality, by a fourth personality acquired at the shock of the mother's death, and by a fifth a year later, was taken in hand in 1911, and by stages, through a course of treatment of three and a half years, was finally restored to normality. Not only was a daily diary of the progress of the case kept during the three and a half years, but a large number of facts and incidents, gathered from the conversations of the several personalities, were recorded; so that there was a written record of many facts utterly unknown to the reconstructed Doris, since none of the memories of "Margaret," who consumed what would amount to several years of her life, ever have emerged in her consciousness. Doris was adopted by Doctor and Mrs. Prince, and still makes her home with them.

TREATMENT OF MULTIPLE PERSONALITY

The cure of this disorder could hardly be undertaken by the layman. Aside from the milder and more common phases, as exhibited in the transient lapses of consciousness associated with hysterical seizures, these psychic difficulties call for the most expert attention of experienced medical psychologists.

The treatment, of course, consists in thoroughly explaining to the victims of this disorder the nature of their ailment and enlisting their hearty cooperation in an effort to improve the psychic tension and emotional reaction. This is the one psychologic difficulty in which hypnotism, wisely utilized, may be of real benefit, especially in the matter of perfecting the diagnosis, isolating the dominant personality, and in the hands of an experienced practitioner may be of some help in the treatment.

AUTOMATIC WRITING

AUTOMATIC writing and speaking are close of kin to so-called trances and visions. The study of multiple personality has shed much light on the psychology of automatic writing. When practising it, the patient may appear to be in his usual state; in fact, he may be conversing with someone in a perfectly natural manner, when, if a pencil is placed in his hand, he will begin to write continuously, writing long essays which are carefully composed, logically arranged, and sometimes extraordinarily fine in rhetorical expression; and all this is accomplished while the central consciousness is ignorant of everything that is going on.

TECHNIQUE OF AUTOMATISM

The conditions governing automatic writing are in no essential different from those of crystal-gazing, shell-hearing, and hypnosis. The activities of the marginal consciousness are projected outward along the motor line of writing. In this case, the subconscious activities are not sensory; the primary cause rests neither in auditory nor in visual sensation, as in shell-hearing, and crystal vision, but in sensations of touch and movement—they are entirely motor. The central consciousness does not become aware of what is going on in the marginal consciousness until it sees the words that have been automatically written.

It will be apparent that to the central consciousness these messages would indeed appear as coming from another world; and thus many a psychically unbalanced person has been led to believe that these written messages were from the dead, or from spirits inhabiting other planets.

The phenomenon of automatic speaking occurs in the same way. It is another case of motor expression of psychic projection. This time the subject is concerned with spoken words instead of written words. The speaking may take the form of meaningless syllables, which may sound like a new tongue, or the language may be entirely intelligible and logical. These cases are illustrations of those peculiar and automatic talking performances which come to be regarded as the miraculous "gift of tongues"; and every syllable of their jargon is reverently listened to by their followers, who regard these mysterious utterances as messages from another world.

It is not necessary, in our study of abnormal psychology, to settle whether or not all of these automatic writers and talkers are self-deceived souls, or whether their writing and speaking has its origin entirely in an overactive subconscious mind which is able to eliminate its complexes in this peculiar fashion. I am not at all disposed to pronounce all these cases frauds, or even instances of self-deception. It may be altogether possible that some of them are manifestations of genuine activity on the part of actual spiritual forces, but that is not a

point for further discussion in this connection.* The purpose of their recital here is primarily to call attention to the fact that, as they are commonly met with in our every-day life, their net result is to render those who tamper with them more and more susceptible to spiritualistic propaganda.

The automatic talkers and writers, those who “speak with tongues,” etc., constitute the most interesting group of individuals who live their queer lives out on the borderland between the normal and the abnormal in psychology. I have recently been privileged to study not less than half a dozen men and women who are supposed to have the “gift of tongues,” and who are prominently identified with religious movements that exhibit these gifts of the spirit as evidence of heavenly authenticity.

CLASSES OF AUTOMATIC WRITERS

I have had some very interesting experiences in connection with the study of automatic writers. I remember one case which came under my observation many years ago; after this man had had a thorough course of instruction regarding the physiology and psychology of his strange performances, he gradually lost the power of automatic writing, and for the last six or eight years he has been wholly unable to indulge in this phenomenon. Years ago he was able to take a pencil in his hand, drop off into something approaching a passive dream-state, when suddenly the pencil would start to write messages, as he supposed, from the spirit world. In this connection let me record it as my opinion that automatic writing and the automatism manifested in the ouija-board performance are very nearly, if not quite, one and the same. That is, I regard them as identical in their psychologic roots—in their psychic origin and direction.

I have found it exceedingly difficult to segregate the sincere and subconscious automatic writers from those who are to a certain degree consciously fraudulent. There seems to be an inherent tendency on the part of these psychic freaks and so-called “sensitives” to exaggerate their gifts and, childlike, magnify their performances. The mental attitude of the medium seems to be to try to outdo other “psychics,” and so there is ever present this urge to the perpetration of fraud.

Notwithstanding the frauds to be found among automatic writers, there is, nevertheless, a residue who are wholly sincere; honest men and women who believe they are “spirit controlled,” or that in some other way their automatic writings have a spiritual origin. It would appear that Mr. G. B. Shaw’s mother was an automatic writer. I have a very good friend, a professional man, who is an automatic writer, but who no longer considers that his messages are dictated by discarnate spirits.

While Flammarion never became an out-and-out spiritualist, it is well known that he was a fluent automatic writer in his young days, as was also Sardou, the dramatist, who more largely indulged his gift along the line of automatic drafting. Flammarion, in reciting some of his own experiences, sheds an interesting sidelight on the performances of automatic writers

* See Appendix.

when he explains how, after he had written out a considerable thesis on science, he subconsciously signed it "Galileo."

A STRANGE CASE OF AUTOMATIC TALKING

As indicating that all our experiences are conserved in memory*, and as a demonstration that anything in the memory—even in the unconscious—can be recalled and find expression in both thought and words, I would cite the case of a patient suffering from Jacksonian epilepsy, which I have reported elsewhere. This singular case is one of automatic talking.

At the time when this patient, Mr. C., was operated upon, he was about thirty years of age. His general health was good; he had never passed through any severe illness. Four years before coming under our observation, he had been engaged in a scuffle with an armed man, who dealt him a severe blow on the head with a gun-stock. A short time after this accident he developed a typical case of Jacksonian epilepsy. Immediately after each epileptic attack he seemed to be in a dazed condition, during which he would often engage in extraordinary escapades, even to the extent of going out on the streets at night and holding up pedestrians at the point of a revolver. As time passed, these attacks of post-epileptic insanity grew more and more severe, and would last for longer periods of time.

During the periods of mental aberration following his seizures, the patient would wander away from home, sometimes being absent two or three days. It was during one of these wandering periods, in which he was only semi-conscious of what he was doing, that he was picked up and brought to the institution where I was enabled to make the observations here recorded.

Shortly after being placed in his bed, and under guard, the patient began to talk in an apparently rational and chronological manner. His eyes seldom moved, his gaze was fixed and concentrated straight ahead. It soon appeared that he was relating a section of his life-experience in chronological order, hour by hour and day by day. All went well, as he talked hour after hour (only requiring that his lips be moistened now and then), until he came to the time in his life marked by the fight in which he was hit over the head with the gun-stock; whereupon he was immediately seized with a paroxysm of convulsions of extraordinary severity and duration. It required four powerful men to hold him in bed at this time, or rather on the bed, for the mattress and springs were quickly precipitated to the floor.

Immediately after one of these paroxysms, the patient would begin to talk in a moderate tone of voice, somewhat of a monotone, concerning his experiences, thoughts, and acts. He would begin with some Monday morning, stretching his arms as on awakening in bed. He would speak very distinctly when expressing his leading thoughts, while he would quickly slur over numerous unimportant matters. At one time, I remember, it required only about twenty minutes to pass through a day's experience, and during this brief time he repeated aloud his chief thoughts, and described or illustrated in abbreviated pantomime his chief acts. He

* It is highly probable that time, say thirty or forty years, will serve actually to efface many of our less vividly registered memories. Many of our memory patterns are not necessarily of lifelong duration.

would sometimes move his hands during these narratives, but never undertook to leave the bed, lying quietly on his back and talking continuously. He would pass through a day's experience in from ten minutes to half an hour, depending on how recent the events were; and upon completing the story of a day he would apparently grow sleepy, and after but a few seconds of silence, which seemed to correspond with the night's sleep, would awaken, yawn, stretch his arms upward, yawn again, and then immediately begin the narration of the next day's thoughts and actions.

IS MEMORY INFALLIBLE?

During one of his longer recitals, lasting about thirty-six hours, he passed through three and a half years of his life, apparently relating all the leading thoughts and chief events. At another time he passed over a period of eleven days which were very thoroughly known to his attendants and observers, and his recital included every known conversation and experience of this period, each of which was very fully, accurately and chronologically repeated.

I remember, on one of these occasions, when he was approaching a point where he would soon be due to describe an interview with me, I told this experience, as best I could, in advance of his narrative. In fifteen or twenty minutes he reached the experience I had anticipated, and gave it just as accurately, filling in a number of details that had slipped my mind; but wherein the details of his story were different from mine, I was compelled in each case to recognize that he was right and I was wrong; thus it was demonstrated that his memory in the trance state was far more reliable than my normal memory.

In passing through an experience of this sort, ranging from two hours to almost two days, he never slept, but talked incessantly. He would take no nourishment during this time, but would sit up in bed and drink from one to three glasses of water, or allow his lips to be moistened from time to time. The drinking of water was all we ever discovered that would stop his talking. His expression was usually quite fixed, except on certain occasions when his face would grow pale and an angry look would come across it. At other times his countenance would light up somewhat while he was describing some ridiculous experience or relating some humorous episode.

Careful inquiry (after one of the attacks) showed that he possessed absolutely no memory of anything that had happened since the time of his seizure. He could always recall that his "mind was feeling queer" as he described it, and that he was afraid he was "going to have another spell." None of his various depredations (in one of these monologues he described holding up six men, and four strange purses were found on his person) could be recalled to his mind. He seemed to be blissfully ignorant of all that he had done and all that he had said. He apparently knew of these things only by quizzing his attendants.

Aside from the surgical aspects of this case, it demonstrated fully to my mind that human memory retains well-nigh everything which has passed through the state of consciousness. While the power of recalling facts or experiences may be incomplete, all the incidents—the neural patterns—exist in the so-called subconscious mind or marginal state, relatively perfect

and complete. Further, it seems that this case demonstrates that the mind possesses an inherent chronological sense, that its memories are grouped and sorted in chronological order; that the marginal consciousness is in possession of all the memory data of the mind, and is able, under certain conditions, and within reasonable time limits, to recall and reproduce the same in logical order.

Observation of this patient could not fail to impress one with the fact that the human brain-memory, in its behavior, is in many respects analogous to a phonograph record, while the mind performs in the capacity of that power which operates, utilizes, reproduces, and otherwise manipulates those things recorded on the brain through the sensory receiving apparatus of the body. This case of automatic talking also serves to throw considerable light on the problem of automatic writing.

ILLUSTRATIONS OF AUTOMATISM

Among British spiritualists, perhaps the most famous of the automatic writers was the Rev. Stainton Moses. But a careful study of his writings pertaining to history and other subjects shows that he must have been reexpressing the data found in the storehouse of his own memory. That some of the data of his subconscious mind were unreliable is proved by the fact that many of his statements concerning ancient Oriental races have been shown by subsequent discoveries to be entirely false. A careful scrutiny of his statements shows what books he had been reading—books that were a little out of date even in his day, and that have since been shown to be entirely untrue.

Most automatic writers insist that they have not read books whose contents would account for what they write. Andrew Jackson Davis, one of the early wizards of automatic writing, wrote much about evolution. He denied having read books on this subject, but examination of his writings shows so much in common with Chambers's work that one can only believe he had at some time read the book. In this connection we must remember that it is entirely possible for a normal person to read a book or magazine article, and to have its subject matter stored away in the subconscious archives of the brain, wholly forgotten by the normal consciousness, and yet to bring it all to light by means of hypnosis, dreams, or automatic writing.

Of the many thousands of pages of automatic writing left by the Reverend Mr. Moses, much was published after his death by trustees to whom he left his manuscript. These records are interesting, but far from convincing as proofs of anything supernatural. So far as we are aware, no message has ever been received by automatic writing that could not plausibly be shown to have had a natural and normal origin from well-known material which could easily have found its place, through ordinary channels of reading and observation, in the subconscious centers of the mind.

The study of automatic writings shows that they fall into two groups:

1. Those which are but a restatement of ideas and facts which the automatic writer has psychically assimilated in perfectly normal fashion through reading, attendance upon lectures, and otherwise mingling with his fellow men.

2. Those which are manifestly fraudulent on their face. About ten years ago a London paper offered a thousand pounds to any medium who would give proof, before a competent tribunal, of possessing telepathic power or of giving supernatural messages by means of automatic writing, etc. No one has ever appeared to claim the reward. Likewise, I think Rinn's offer of a thousand pounds, which he deposited with the American Society for Psychic Research, to be given for bona fide evidence of communication with the dead under proper conditions, has never been awarded. Most mediums prefer to work for smaller fees with a sympathetic audience. The five thousand dollar award of *The Scientific American* was not won by any of the mediums examined.

Spiritualists ordinarily maintain that the hand of the automatic writer is controlled by spirit forces, and that therefore the writing has little or no connection with the mind of the writer—that it is supernatural in origin and represents a message dictated by spirits. But there is no need of a spirit hypothesis to explain automatic writing. The explanation of the phenomenon is comparatively simple. A dissociation has taken place—one far more complete than those of ordinary hysteria. The field of consciousness is divided into two distinct parts, one engaged in ordinary conversation, perhaps, while the other is dealing with those ideas and complexes which are concerned in automatic writing.

FORGOTTEN EXPERIENCES

In discussing the technique of automatic writing, one authority (Morton Prince) says:

The recalled experiences being brought back by associative memories enter into the associations and become true conscious recollections, while in automatic writing the memories are reproduced in script without entering the personal consciousness at all and while the subject is still in ignorance. Often even after reading the script his memory still remains a blank. It is much as tho one's ideas had been preserved on a phonographic record and later reproduced without awakening a memory of their original occurrence.

In the investigation of Mrs. Holland's automatic writing there was found in one of her automatic scripts a statement in the exact words—as well as reproducing the sentimental context—of a letter which she had written twenty years before. This experience she had long since forgotten, but the original letter was accidentally discovered. In the automatic script, which purported to be a spirit message from a dead friend named Annetta, there was found this sentence: "Tell her this comes from the friend who loves cradles and cradled things." Now, the meaning of this enigmatic sentence was revealed by the discovery of the aforementioned letter of twenty years and more before, for the letter quoted an extract from Annetta's will, reading, "because I love cradles and cradled things." Undoubtedly, if more old letters could be unearthed, or if we could walk at will in the halls of our early memories, we could discover the origin of much that appears in our daily conversation, and in many cases the automatic writers would be able to trace out their alleged spirit-dictated writings to a perfectly normal, natural, and human source, among the rich deposits of past experiences conserved in the unconscious realms of the mind.

And so we must conclude that, in the case of both automatic writing and automatic talking, we now have a thoroughly scientific hypothesis which will account for all phenomena of this kind that deserve to be classified as genuine. Nothing as yet has ever come to us through automatic writing which bears any evidence of super-natural origin, or which contains authentic truths, facts, or principles heretofore unknown to the human race. The automatic writers have given us nothing but what is in every way consistent with our belief that such messages are only a rehash of the common elements of human experience stored away in the subconscious centers of the automatic writer's own mind.

The reader is referred to the Appendix for brief notice of a very unusual case of supposedly automatic writing associated with other psychic phenomena which came under my observation many years ago.

TELEPATHY—MIND READING

TELEPATHY has been variously called mind reading, thought transference, and universal intelligence, and it has been more associated with the propaganda of spiritualism in Great Britain than in this country. This is probably due to the fact that early in his spiritistic investigations Myers attached a great deal of importance to the rôle of telepathy in connection with various occult manifestations. Myers was so impressed with the province of telepathy in this connection that he once called it “almost the fundamental doctrine of spiritualistic philosophy.”

Telepathy should not be confused with alleged second sight, intuition, clairvoyance, etc. It rests upon an entirely different and separate hypothesis, tho all these peculiar psychic tendencies appear to run in families. Intuition has been defined as an inherited and more or less subconscious spontaneity of idea association, and there is little question that these so-called psychic gifts, as well as certain well-known psychical tendencies, are definitely hereditary.

THE TELEPATHY HYPOTHESIS

Telepathy has been defined as “the transmission of thought or feeling from mind to mind independently of the recognized channels of sense.” Scientists, as a general rule, whether they belong to the domain of physical science or to that of psychology, have not been disposed to accept the telepathic hypothesis. I think the consensus among scientists to-day would be that telepathy is merely a popular word-symbol which has come into use to explain how the same thought sometimes may be entertained at the same moment by two living persons, and that the fact is to be accounted for in two general ways:

1. By chance—coincidence, pure and simple.
2. By similarity of hereditary predisposition, or environmental influences, either or both of which may tend to cause two individuals to think of the same thing, approximately, at the same time and under similar circumstances.

The attitude of the scientific mind is perhaps well expressed by Professor Armstrong, who is disposed to treat telepathy and spiritualism as one and the same thing, and brands them both as popular superstition. He maintains that there is no such thing as action of mind upon mind, apart from the recognized physical and sensory channels, and explains most of the remarkable coincidences cited by believers in telepathy as the product of shrewd guessing.

Thus we come face to face with a very confusing—not to say amusing—situation in the scientific world. A minority of eminent scientists have accepted some sort of telepathic hypothesis as a part of their working philosophy, and seek to account for many of the more dignified phenomena of spiritualism on the basis of telepathy, while at the same time the major portion of the scientific world assigns the entire galaxy of telepathic performances to

the limbo of guesswork, coincidence, and fraud.

There are investigators who admit telepathy as a fact while they deny its connection with anything spiritual or supernatural, claiming that these communications between living minds are effected through channels which are as yet unknown, but which will be found to be in every way natural and material when they are once discovered. Most scientists who have accepted telepathy as a demonstrated fact, have been rather driven to this position against their wills in an effort to find something to offset the claims of spiritualism. Having failed to institute sufficiently thoroughgoing investigations of spiritistic phenomena to show either their fraudulent character or their psychologic origin, numerous investigators have been tempted to get out of their dilemma by referring certain types of so-called spirit phenomena to telepathy. The spiritualists are not averse to accepting telepathy as a part of their working philosophy, so long as the term is allowed to include the possibility of discarnate spirits communicating with the minds of living humans.

It is only fair to the reader to state that, so far as actual and reliable experimentation has proceeded, there has not been developed, up to the present time, a thread of actual evidence which would warrant us in entertaining the belief that one mind can penetrate the sub-conscious realms of another mind, and there, from an almost infinite storehouse of ideas and experiences, select those which would, when brought forth, give proof of either the telepathic hypothesis or the existence of a discarnate spirit performing such a miracle.

The theory of telepathy is based upon certain assumed laws of intercommunication between human minds, and keeps alive the witchcraft delusions of former times. It also serves as the supposed scientific basis for the present-day belief in absent treatments and malicious animal magnetism.

IDENTICAL TWINS

Further, in consideration of the fact that hereditary similarity may account for the apparent coincidence of two individuals in different parts of the world thinking of the same thing at the same time, we may cite the many recorded instances of identity of thought on the part of so-called "identical twins."

Identical twins are supposed to take their origin from a single egg, and they are always of the same sex and sometimes look so nearly alike that even their own parents are hardly able to tell them apart. Now, there are numerous cases on record to show that such identical twins have been known to take the same disease on the same day and at the same hour, to dream the same dream on the same night at the same hour, awaking practically at the same time; and further, twins of this sort have been known to think substantially the same thought on the same day at the same time, even when the Atlantic Ocean intervened between them.

We explain phenomena of this sort on the ground that these two individuals are really one; that they are exactly alike; that they are but a split embryologic entity. But may not this interesting fact, which in this case we can to some extent understand, serve as an illustration of another and less well-known fact, viz., that two or more individuals, apparently not closely related by blood relationship, may be born with certain basic human endowments and

tendencies which are very similar? May not two such individuals, even tho they are not related by family ties, be, after all, psychic or philosophic twins? We know that people who are not closely related may look alike physically; we know there are national, as well as racial, types and tendencies; and so, is it not possible that individuals may be found who run so closely toward a certain type that they can almost read one another's thoughts; that they can almost anticipate one another's feelings and emotions? At least, it has occurred to me, in the study of heredity in reference to twins—more particularly so-called identical twins—that the facts there discovered might be of assistance in explaining some phases of so-called telepathy.

THE PHILOSOPHY OF TELEPATHY

No doubt many illustrations of so-called telepathy are merely coincidences. It would be very remarkable, indeed, if no such co-incidences should ever occur. I am far from believing, however, that this offers anything like a general principle which can clear up the whole problem. One must remember, too, that the fallibility of memory may lead to the description of coincidences which never actually occurred. Likewise it may lead to a judgment of agreement between the thought of the "receiver" and that of the "transmitter," when no such agreement, as a matter of fact, exists.

All intelligent beings recognize the existence of gravitation—that universal law of cohesion which holds all things together. If a new world should be created in the universe, untold billions of miles away—so far that hundreds of years would pass before its light could reach our earth—the moment such a new planet was born, our world would feel its pull of gravity. Gravitation is an omnipresent force acting independently of time and space; and even if we were not confronted with the universal religious teaching of a Great Spirit, we would suspect by the suggestion of analogy from the well-known force of gravitation that there might exist an all-pervading and universal spiritual intelligence.

This plausible hypothesis of a Universal Mind completely does away with the assumption of the transfer of thought from one finite mind to another. There may be a Universal Intelligence whose emanations radiate to all who are in harmony with the Divine Mind. Every soul who is "in tune with the Infinite" would enjoy the possibility of receiving messages and inspirations from this Central Source. If this is true, it is not difficult to see that two minds may have the same thought at the same time, just as two wireless telegraph stations which are attuned alike may receive, at the same time, the same message flashed from a vessel far out at sea. Many good people adhere to this view and derive comfort therefrom. Their own intimate experiences, they affirm, supply testimony in its favor.

Even the American Indian had in his religion the "Great Spirit." All modern religions recognize the presence of a universal spirit. It is a cardinal thought of Christianity that God should pour out His "Spirit upon all flesh." Christ told His followers, before He departed, that He would send them the "Comforter," who would teach and guide them "into all truth."

I do not feel that I am compelled to follow the illogical reasoning of the telepathist in order to find an explanation of these common experiences of thought-harmony and identity.

I am rather disposed to accept the equivalent of the Christian doctrine of the omnipresent Spiritual Teacher, the doctrine of the Universal Mind, as a basis for some of the phenomena commonly described under the head of telepathy.

If such phenomena find their explanation either in the doctrine of the Universal Mind or in any other doctrine which assumes the activity of spiritual forces in their production, they, of course, lie outside the realm of physical science and in that of personal religious belief; they are problems in spiritual culture.

DIVERSE THEORIES

Some advocates of telepathy even hold that the phenomenon is but the individual recognition of some system of universal broadcasting of spiritual intelligence, another phase of the doctrine of universal intelligence. This presumes the residence within man of some non-physical, or spiritual, entity. Telepathy and some of its allied phenomena seem also to imply the existence of an intelligence within the individual which can migrate—which can manifest itself in other individuals or at places distant from the personality of its abode. The telepathists argue for a so-called communication between souls which is equivalent to migration of personality. They even teach that the brain of one individual may be so idle and unused that another mind may take possession of it and work it; but they cite little if any evidence, unless it be that of the Watseka Wonder.

According to theosophy, telepathy includes the projection of “thought-forms” from one person to another. This projection involves the idea of etheric substance or force vibrating between human beings, as in wireless telegraphy.

Sir Oliver Lodge, like the late Dr. Funk, believes that he has encountered genuine phenomena which serve to establish the essential claims of telepathy. Sir William Crookes’s explanation of phenomena of this kind is that thought makes vibrations, and these vibrations, after the manner of the radio, are caught by any human brain receiver which may be attuned to the brain transmitter.

People in sympathy with each other tell us that they at times have sat together by the hour, and tho they scarcely have uttered a word, yet they have felt that somehow they have communed with each other. We all remember the story that is told of Tennyson once visiting Carlyle; these two men sat together in front of the great fireplace and smoked for three hours, and in all that time uttered only now and then a word or two; at last, when Tennyson rose to go, Carlyle said to him, “Come again, Alfred, we have had a grand time,” and he meant it.

MRS. PIPER AND THOUGHT TRANSFERENCE

By the time Mrs. Piper got into the spiritualistic game it was becoming rather dangerous for mediums to indulge in physical manifestations, and so she stuck rather closely to the direct-voice mode of transmitting spirit messages, occasionally indulging in performances that bordered on the trance. Prof. James Hyslop, in his investigation of Mrs. Piper, was so

impressed by the large number of coincidences—or shrewd guesses—that in a published report of his sittings with this medium he said that no matter what his ideas might be about Mrs. Piper's ability to communicate with the dead, he was sure of her ability to communicate with the minds of the living. In one case it was claimed that Mrs. Piper was able to project a trans-Atlantic communication, getting a message from some living mind in England; and it was asserted that this particular message, while it started out from Great Britain in English, was received in this country in Latin; and yet it was claimed that Mrs. Piper understood nothing of the Latin language.

Most of the investigators who studied Mrs. Piper, if they believed at all in telepathy, usually reached the conclusion that her séances were largely to be explained on that hypothesis. And so it seems that the theory of telepathy has become, in recent years, very convenient to the psychic researcher as a means of accounting for a vast sphere of psychic phenomena which the investigators cannot prove to be fraudulent, and yet which is not sufficiently evidential to establish its claim to supernatural or spirit origin.

TELEPATHY FRAUDS

Sir Arthur Conan Doyle dislikes to think he is not an expert in the detection of fraud and trickery, and says he is “a doctor of medicine, a trained man of science, and an authority upon deductive reasoning.” But Sir Arthur unwittingly reveals how easily he, like Sir William Crookes, can be duped. He states that he tested the Zancigs and knows they possess genuine telepathic power. The joke is on Sir Arthur, because the Zancigs are members of the Society of American Magicians, and have never made any claim to supernatural or telepathic power. In fact, Mr. Zancig publicly stated, in the Alhambra Theatre in London, that if he lost his eye-sight and hearing they could never do any of their tricks.

Let us note, in this connection, the following case reported in *The Scientific American*. Mrs. X., the wife of a Dr. X., was stricken with what was plainly a mortal illness; a compact was made that, after her decease, if she preserved her identity and found communication possible, she would try to communicate. A countersign was agreed upon and stored away in a safe-deposit box under proper seal; this countersign was to be used by her in any genuine message. After her death, Dr. X. sought communication from her through mediums. He obtained alleged communications from numerous mediums, but never the password. He finally offered \$500 for the countersign, but he still has his money. He has had direct sittings with a large number of mediums, and has had mail communications, more or less spontaneously, from many others. He has received 109 different alleged countersigns, not one of them correct.

Dr. X. feels about telepathy more or less as I do, and he would be just about as well pleased to get the correct countersign in one way as in another. He has accordingly made no effort to exclude telepathy from his sittings. He has, on the contrary, sat in the presence of mediums and concentrated with all his mental energy upon the true password, but to no effect. The production of 109 incorrect countersigns under such conditions can mean but one

thing as regards the mediums: a very great number of persons are masquerading as mediums who lack proper capacity for producing genuine "direct messages." Says the Doctor:

We can forgive a medium for failure to produce any results, for the conditions governing mediumistic procedure are not clearly known and there seems every reason for believing that they are erratic and delicate. We could even forgive a few mediums for getting the wrong message from the wrong spirit or from the wrong telepathic source. But 109 consecutive specific performances that are wrong impress us very unfavorably. It looks altogether too much like an out-and-out guessing contest.

At the same time, the failure of any of Dr. X.'s mediums to produce his countersign telepathically is rather a blow to the adherents of that theory.

THE ANNA EVA FAY TYPE

In the last twenty years I have attended many performances on the order of mind-reading, and more or less after the type of the Anna Eva Fay séances. Spectators in the séance room, or among the audience in the theater, are allowed to write questions which they desire answered, signing their names to these questions. Sometimes they retain the messages, and sometimes the slips are handed to the usher. The medium sits upon the stage, blindfolded, and begins to call out the names of these questioners and to answer the questions in detail.

It should be stated that the spectators usually write on paper which is furnished them by the medium or her agent. It is easy to see that any one of a dozen tricks could be employed for securing transcripts of the inquirer's question and signature, which could be rushed by the ushers around the theater and underneath the stage, whence both the questions and the names could be telephoned or telegraphed up to the blindfolded medium, who could thus, in full view of the audience, intelligently discuss any and all of the questions which had been asked her in writing.

I knew of one performer who could read questions written by persons in the audience on their own paper, or at least could call their names and make a show at endeavoring to read and answer questions. I have observed, however, that they are never so successful as in those cases where the questions are written on the paper which the medium's agents furnish. I have myself attempted this many times, but the medium was never able to give my name or answer my question, except upon one occasion, a dozen or more years ago,—I remember it well—when a medium, tho failing to get my question through intelligently, did call my name. I was never able fully to discover how she did this, but I am satisfied that one of the ushers, or someone in the house, had seen me writing my question, and altho not able to discover its content, had recognized me, as might easily have been the case in one's own home town, where one had for many years been accustomed to appear in public.

Another thing I have noticed when you seek to make a test question of this sort for a medium or mind-reader, by writing out the question at home and bringing it to the performance, is that as you read it over the attendant usually has you "spotted." He steps up

to your side and says, "Let me see, can I help you?" Or he may suggest that he can help by concentrating his mind also upon the question. In this way he is able to read your question and prompt the medium by various code tones and words, or by the order of asking his questions. Her assistants are thus able to give her, sometimes, a very full idea of the nature of the question.

I recently attended a performance of this type in which, I am satisfied, communications were carried to the medium by means of radio. She wore a form of hair-dressing which extended high upon her head, and I believe she had a radio antenna concealed within it, and her hair covered her ears in such a manner that I am convinced a small watchcase receiver could have been so concealed as to enable her to hear radio messages. This is the first time I have seen a medium carry on such an exhibition and at the same time move about the stage.

And it should be borne in mind that most of these demonstrations are offered to the public as proofs of telepathy.

THE PROBLEM INVOLVED IN TELEPATHY

It is the attitude of the scientific mind to seek a material explanation for all the doubtful phenomena that are brought forth under the head of telepathy. True, we may not be able at once to find an acceptable materialistic or psychologic explanation for them, but perseverance will enable us to unravel almost all these apparent mysteries. Lay states the problem admirably when he says:

Taking any of the phenomena of spiritism, e.g., telepathy, where an idea in the shape of a mental image of sight, sound, touch, etc., appears in my conscious life, and is of such a nature that I cannot explain how it came there through ordinary conscious perception, it is evidently much more in the spirit of the principle of parsimony to explain it as a production of my own mind, not my conscious mind, but the unconscious or subconscious mind. Certainly it is not truly scientific to invoke, for peculiar mental circumstances, an explanation that is far more elaborate and roundabout than necessary. Therefore it will have to be repeatedly emphasized that the scientist's first duty is to explain the apparently exceptional phenomena of telepathy in any of its forms, for example, as merely the transformation of an unconscious trend into a conscious idea, the message to my conscious life from a part of me that is and always will remain almost totally unconscious.

If telepathy were based on natural laws, then any person, by mastering these laws, could practise telepathy. If telepathy were based on science, as are telegraphy and telephony, anybody could do it. When radium was discovered by Curie, the description of the process of its detection was sufficient to enable any other chemist, having the same materials, to secure the same product. When Jenner published his discovery of vaccination, any other physician could perform the operation. When antitoxin was discovered, every intelligent physician was in a position to use it successfully. When telepathy is scientifically proved, then can any and all psychologists practise it. Natural laws are universal in their application.

I am not saying that the theory of telepathy will never be substantiated. I am merely saying that it has not been proved up to date. But the fact that the telepathic hypothesis

remains as yet unproved has nothing to do with the further fact that the idea of telepathy is very firmly established in the minds of the common people. Bird and most of the psychic investigators accept the telepathic hypothesis, and use it freely in explanation of psychic phenomena.

The present-day psychologist would undertake to explain the phenomena of telepathy by one or more of the following methods:

1. Possibility of illusion and omissions and inaccuracies of observation of detail.
2. Coincidence—shrewd guessing.
3. Emphasizing the positive, neglecting the negative incidents.
4. Memory distortions.
5. Human coefficients—certain numbers, cards, events, and designs are more likely to be thought of, such as drawing circles, squares, triangles, etc.
6. Hereditary identity—as in the case of twins.
7. The possible functioning of alleged spiritual or supernatural beings.

I would not deny that we encounter, now and then, a phenomenon which seems to require something analogous to the telepathic hypothesis to afford a satisfactory explanation. Separate and apart from the whole question of spiritualism, there may exist laws of a perfectly natural order which are at the bottom of some of these unique experiences. I am willing to continue to look at this phase of occult investigation with an open mind. So far, the theory has not been adequately formulated—nor has it been proved.

HYPNOTISM

THE purpose of writing a chapter on hypnotism and psychic diagnosis in a book devoted to the study of abnormal psychology is this: I have stated repeatedly, in the chapters which have gone before, that much if not all of the material advanced by mediums as having had its origin in the supernatural world, is brought forth from the confines and reservoirs of their own subconscious minds. Now, it is by means of hypnotism on the one hand, and psychic analysis on the other, that we are able to obtain this proof. Experimentally, by means of hypnosis and psychic analysis, we can take these clairvoyants and mediums in hand, and after they have transmitted to us messages from their spirit controls and given us touching converse with our dear and departed dead, we are able to prove, first to ourselves and subsequently to the mediums themselves—if they are sincere—that all this stuff, the whole sordid mess, has a purely human origin in the depths of their own subconscious minds.

HYPNOTISM

Hypnotism may consist of the hypnoidal state, in which the patient is really awake but in a passive state of mind, ready to receive the suggestion and teachings of a medium or a healer, on down through increasing passivity to a profound state of hypnosis, in which the patient is oblivious of his surroundings and under comparatively full control of the hypnotizer.

Hypnotism is basically wrong as a method of strengthening the intellect and educating the will, in that it leads its victims to depend more and more upon the hypnotic operator. Hypnosis is certainly not a natural state of mind; it is highly artificial and unnatural. Some authorities have endeavored to show that hypnotic sleep was analogous to natural sleep, but that certainly is a mistake. The hypnotic state in some respects resembles the somnambulistic state, but somnambulism is not a state of natural and normal sleep. Hypnotism necessitates the surrender of the mind and will in a peculiar way to the influence of another personality; I regard these procedures as in the highest degree subversive of individual strength and stamina of character. But, notwithstanding all these facts, hypnotism is an invaluable agent for perfecting our diagnosis in the case of numerous abnormal psychic individuals, such as multiple personality, complex dissociation, etc., and is indispensable in the investigation of mediums.

Hypnotism operates to produce dissociation between the higher reasoning centers of the mind (the central consciousness) and the lower and automatic centers (the marginal consciousness).

Mesmerism is the old-fashioned method of inducing hypnosis, by making physical contact with the patient. Modern hypnotism is usually practised without this physical contact. Leading physicians throughout the world now recognize hypnotism as an exceedingly

dangerous two-edged therapeutic sword. They recognize that frequent repetition of hypnotic procedures, in the case of highly neurotic and nervously unstable individuals, not infrequently leads to insanity.

We feel impelled especially to condemn the public exhibitions carried on by professional hypnotists. The authorities should speedily bring these demonstrations to an end. They are debasing and demoralizing.

PSYCHIC ANALYSIS

Many years ago I became interested in psychic analysis and its possibilities in the study and treatment of nervous disorders, but I had not gone far in the employment of this method when, as a result of an experience that came to me through the study of a spirit medium, I saw I had accidentally stumbled upon what, to me, seemed the most valuable tool I had as yet discovered for scientifically investigating and intelligently explaining the more subtle phases and phenomena of spiritualism. I take it for granted that the reader understands something of the principles and methods of psychic analysis. Suffice it to say, in this connection, that psychic analysis enables us, without putting the patient into hypnotic sleep, systematically to explore the superficial strata of the subconscious mind. In this way I have been able to show, again and again, that practically all of those things which mediums bring forth as communications from departed spirits have been palmed off on their critical consciousness by their own subconscious selves.

In the case of the sincere spiritualist I am able to sit down and look him straight in the eye as I listen to his enthusiastic recital of the marvelous phenomena associated with his favorite medium, while I say: "It is all very interesting, but I have in my own mind another, and what seems to me to be a much more reasonable, explanation of what you are telling me. If your medium is sincere and you will bring him to me, and he will honestly and fairly submit to the tests that I can put him through, I will first prove to you that his physical manifestations and phenomena are materialistic and fraudulent, and, second, that his psychic phenomena—his messages from the dead—take origin in the subconscious depths of his own mind." By means of either or both hypnotism and psychic analysis, and perhaps in certain cases by means of automatic writing, if these mediums are sincere, this can usually be demonstrated.

I have had experience with both sincere and insincere mediums, when it comes to investigations of this sort. I have had mediums who knew I was going to discover their tricks, and they took particular pains to see that I did not. I have had other mediums who were self-deceived and who honestly believed they were channels of communication between the living and the dead. And in every one of these cases, where the mediums came to me as patients of their own volition, I have been able not only to convince myself, but also to convince them that their hallucinations all had birth in the buried memories and subconscious machinations of their own minds. Maeterlinck recognizes this possibility when he says, in *The Unknown Guest*:

For the present it (the spiritistic theory) simply relegates to posthumous regions the phenomena that appear to occur within ourselves; it adds superfluous mystery and needless difficulty to the mediumistic mystery whence it springs. . . . Before returning toward the mystery beyond the grave let us first exhaust the possibilities of the mystery here on earth.

PSYCHIC ANALYSIS OF MEDIUMS

Mediums should be warned against submitting to psychic analysis of a thoroughgoing sort if they wish to persist in the practise of their profession as a means of gaining a livelihood, for all those of any honor will be forced to seek other ways of making a living; any experienced psychoanalyst can soon convince them of the auto-psychic origin of their so-called spirit communications.

Within the last year I have had five or six cases of clairvoyants and mediums, who, after they had been but superficially studied and analyzed, have abandoned belief in the supernatural origin of their voices and visions, and who are rapidly bringing their minds into safe and normal channels. It is only fair to say that these persons—with but one exception—came for professional advice of their own volition, and that they entered upon the study with a spirit in every way cooperative. In fact, they were anxious to know what modern psychic science had to offer along the lines of diagnosing and determining the nature of their peculiar gifts.

The societies for psychic research have done much to eliminate the grosser frauds among mediums; it must be said to their credit that they have always been quick to repudiate the mediums detected in fraud, but they have done little or nothing to help the situation when it comes to those honest but self-deceived mediums whom we are here discussing. Little progress can be made in this direction until trained psychologists and experimental psychoanalytic clinicians are brought in contact with these cases, and until the mediums themselves are brought to desire the truth, so that they will fearlessly submit to all tests requisite to the proper diagnosis of their peculiar gifts. And it is a question if we can lead many successful mediums to do this. They are making too easy a living. The medium who can become the idol of a coterie of rich men and women can, within a few years, amass thousands of dollars, and few such are willing to make voluntary sacrifice of themselves for the advancement of science and the welfare of the race.

The spiritualists have set us an example—they have appealed to men of science to substantiate their claims—they have dared to go to science to prove their allegations. Now the time has come for science to go back to them, to ask them to come out into the open, to shake off their trumpery and submit themselves to honest laboratory examination. But the trouble is that the true believers and honest mediums seem to live on a plane separate and apart from the rest of the human family. They seek to progress without knowledge and to grow without demonstrated truth. They exist in a world of fantasy; everything is made subordinate to the realization of their great desire—the wish to communicate with the dead.

REPRESSION AND SUPPRESSION

We now know that the subconscious centers of the average individual are swarming with suppressed ideas, emotions, hungers, instincts, and longings, and that these are all struggling for expression. We believe that a great deal of our dream-life is the manifestation of these suppressed desires. In other words, the unconscious maintains an incessant drive to eliminate these repressed emotions, and it is my belief that clairvoyance, spirit mediumship, etc., as well as spiritualism as a system of religious belief, constitute a vent for their escape; that the dogmas of spiritualism constitute the only channel discovered hitherto whereby many of these individuals with an exaggerated ego and an unsettled nervous system can gain that self-satisfaction which accompanies the liberation of their buried emotions.

The medium's surroundings in a trance, and the automatic writer's quiet and repose, both are appropriate situations for the removal of repression from certain sections of past memories, because both shift the responsibility for what is said, done, and written from the medium and automatist to some other "personality," either the medium's "control" or the dictating "spirit."

One writer recently reported an interesting case of automatic writing in which a Miss X. wrote some matter pertaining to art which seemed to be mysterious and which was correct; but when Miss X. was hypnotized it was found that she had once met the artist who was named in her automatic writings; that she had read in a newspaper about his death, and had seen his photograph; and that on another occasion she was in a hotel in a town where this artist lived and had him pointed out to her. It further developed that she remembered seeing, in a convent school, one of the chemicals noted in her automatic writings, labeled "liver of sulphur." Now, all these things had been forgotten by Miss X., but they remained in her subconscious mind and were brought out in a connected and intelligent fashion in her automatic writing; thus the employment of hypnosis served to clear up the mystery.

THE CASE OF ELSA BARKER

Elsa Barker represents the type of sincere psychics who are willing to cooperate with science in an effort toward further honest investigation of all psychic and spiritistic phenomena. In the introduction to her work, published several years ago, she tells of becoming interested in psychoanalysis, and writes of her experiences as follows:

When made aware of the presence of "X" I take a pencil and a note-book, as any other amanuensis would, and by an effort of will, now easy from long practise, I still the activity of my objective mind, until there is no thought or shadow of a thought in it. Then into *the brain itself* come the words, which flow out without conscious effort at the point of my pencil. It is exactly as if I heard the dictation with a single auditory instrument, like a small and very sensitive sphere, in the center of the brain. I never know at the beginning of a sentence how it will end. I never know whether the sentence I am writing will be the last or if two thousand words will follow it. I simply write on, in a state of voluntary negativity, until the impression of personality described above leaves suddenly.

This woman is undoubtedly correct—these things do emanate from her own subconscious mind; her experience is not greatly unlike my own. On the majority of occasions when I am dictating, the ideas seem to be all fully formulated in my mind. I visualize the material in paragraphs, with all the punctuation clearly recognized. In the majority of instances, when I am dictating to my secretary, as I have often expressed it, I am merely redictating what I see passing before my own eyes, as I would look upon the titles of a moving picture flashed upon the screen. My experience in writing is sometimes so marked in this respect that I could easily be persuaded that I was under the control of some external power, that my mind was being used by another author, and I am sure that if I were a devotee of spiritism, I could even persuade myself that much that I write is indited by spirits separate and apart from my own mind and body. I have talked with many of my patients who have the same experience in writing letters. Most of us have had thoughts come to us with a suddenness that startled us. It seems as if they had been whispered to us from some source outside of our own minds. These are all commonplace experiences, but in the case of our psychics and mediums, they have this a little more highly developed at some point, so that they themselves become more or less confused; they continue to encourage its development because it is a means, first of producing a livelihood, and second, of gratifying the ego. We all like to be the hero whom the public is glad to worship.

WHEN IS HYPNOTISM VALUABLE?

It should be made clear to the reader that hypnotism, in and of itself, has nothing directly to do with spiritism. Hypnotism is purely a psychological and physiological proposition, and in the last analysis probably consists in bringing about a psychic state that enormously increases the suggestibility of the patient.

I am inclined to believe that hypnotism is a short cut to the subconscious, that it brings about such conditions of mind and body as favor the tapping of the subconscious; tho in some cases it seems to me that the patient's behavior under hypnosis far more resembles hysteria, so that it may be, after all, that in some persons hypnotism merely artificially induces the hysterical state. At any rate, I am sure that the actual condition of the individual under hypnosis varies from person to person.

The psychoanalysts believe that hypnotism is a reversion to that state in which the child shows submission to its parents—that under the hypnotic spell the subject tends to behave much as he would have behaved as a child in the presence of his parents and elders. There is much to substantiate this interpretation of hypnotism because we know that there does exist in the human heart a willingness to be led. In certain ways and up to a certain degree, we all enjoy submitting ourselves to the direction and leadership of others; this is well shown in the crowd listening to an orator, or in the case of the mob as it is swayed by some frenzied agitator. We perhaps see this in the case of certain classes of religious revivals.

It should be made clear that the removal of disease-symptoms by hypnotism is only transient. It is not curative. In this respect, at least, Freud is right when he speaks of

hypnotism as being merely a psychic cosmetic—it leaves the patient fundamentally unchanged. While hypnotism may not weaken the will to the extent that some authorities have thought, its frequent repetition undoubtedly serves to bring about unnatural and undesirable dependence of the patient upon the hypnotizer.

Hypnotism may be induced by various methods, such as gazing at a crystal, eye strain, monotonous tom-tom beating, etc., but it is more frequently induced by the patient's intelligent cooperation with the operator. Drugs are of no value in producing true hypnosis.

Under hypnotism the patient responds to both negative and positive suggestions, but will never do anything that is diametrically opposed to his moral and ethical standards or to his habitual mode of thought. If you suggest a criminal act to an individual when hypnotized, he will either refuse to carry out your suggestion or immediately awaken. It is a well-known fact that when you tell patients under hypnosis to do a certain thing at a certain time, in the majority of cases they will proceed, tho the spell has long been removed, to carry out the instruction when the time arrives. Under hypnosis there is sometimes marked alteration of sensations, and the state may be carried to rigid catalepsy.

It has often been said that a patient cannot be hypnotized against his will, and in general this is no doubt true; but in certain peculiarly susceptible cases, if the individual has great fear of hypnotism, or has a profound belief in the ability of some operator to hypnotize him, it is possible that he may be hypnotized against his will.

Hypnotism then, is largely a matter of increased suggestibility and depends upon the individual's range of consciousness, the directness or indirectness of the suggestions made, and the willingness of the subject to be hypnotized, not to mention his general health.

It will be apparent that I allow little place for hypnotism in the treatment of psychic and nervous disorders, aside from its value as a means of perfecting the diagnosis in cases of marked dissociation, double personality, trance mediumship, and in some cases of profound hysteria, more especially in hysterical fugue.

THE ORIGIN AND NATURE OF DREAMS

PRELIMINARY to our study of dreams it might be well to devote just a little time to the consideration of sleep. It is a well-known fact that sleeping persons will oftentimes respond to simple commands; they will obey these directions and yet in the morning be wholly oblivious to the experience. Frequently it is quite easy for us to induce our bed-mates to turn over and do other simple things during sleep, and these acts are performed wholly unconsciously.

There are so many theories concerning the nature of sleep that it would seem a foregone conclusion that no one of them could be right in its entirety. My own opinion at present is that sleep is best explained by taking into consideration certain factors of all of these four or five different hypotheses. The present-day theories of sleep are:

1. *The circulatory theories*—The teaching that we get drowsy and tend to become unconscious because of brain anemia.

2. *The neurologic theory*—The doctrine that sleep is caused by the retraction of the so-called dendrites—the little terminal feelers of the nerve cells which reach out to make contact with their fellows; through the resultant fatigue from the day's work of thinking, these cells are supposed to be weary. Retraction takes place and thus continuity of nerve connection is more or less broken and sleep is supposed to result.

3. *The chemical theory*—The oxygen exhaustion hypothesis—the teaching that the ability to take in oxygen is diminished by the day's activities and that sleep comes on as the result of this partial suffocation. In this group should also be included the theory that modification of the secretions of the ductless glands favors sleep production. There is also the toxin teaching—the belief that lactic acid or some other poison accumulates in the blood stream during the day, and partially anesthetizes the brain cells and thus brings on drowsiness.

4. *The psycho-biological theory*—This is the theory that sleep is an instinct, a reversion to the animal resting stage; that it is a modification of hibernation; that its purpose is to prevent exhaustion and that it is brought on by merely producing a complete muscular relaxation. There is a great deal to support this contention—at least some phases of it—as both animal and human experiments show that muscular relaxation, if it is thoroughgoing and complete, is soon followed by sleep.

5. *The psychoanalytic theory*—The teaching that sleep is but a regression to the infantile state. It is a well-known fact that the new-born infant sleeps almost twenty-four hours out of the day. It is only aroused when taking nourishment. The Freudians would have us believe that sleep is but an effort to retreat from reality, to get back to the nursery.

ABNORMALITIES OF SLEEP

Dreams are but one of the many abnormalities that occur as a part of commonplace sleep disturbances. The common disturbances of sleep may be summarized as follows:

1. *Hallucinations*—There is no question that the state of sleep favors the entertainment of certain hallucinations. In dreams or night terrors, things are made to appear real that are, on waking judgment, registered as unreal. There are also memory disturbances in connection with sleep, as shown in the dream-life. There may be marked nervousness in sleep, with constant rolling and tossing about on the bed; some nervous patients frequently wake up with a headache, and I am persuaded that sometimes this is the result of dreams and other psychic disturbances bordering on night terrors which have just preceded.

2. *Insomnia*—When an individual becomes more than ordinarily wakeful or persists in remaining awake for considerable periods of time during the night when once aroused, it is common to diagnose such sleep disturbance as insomnia. Insomnia, we know, is favored by extreme fatigue, by toxins, and even by habit. If something happens to wake one up at a certain time for a few nights, it is very easy to drift into the habit of waking up about that time. Many of our cases of insomnia are merely the fear of sleep. Certain types of nervous folks simply are afraid to fall asleep; at least, this was the case at one time during their nervous experience, and they have thus formed the habit of staying awake as the result of actually fighting against sleep. Again, we have those patients who fear insomnia to such an extent that they watch themselves trying to go to sleep, and of course they do not succeed in falling off into slumberland.

3. *Partial sleep*—Sleeping with “one eye open”—illustrated by light sleepers, as the mother who is sleeping by the side of her infant’s crib; and those human alarm clocks who form the habit of waking up at 6:15 each morning, or those who can set their minds to wake up at 5, and nine times out of ten they do. This could not be said to be an abnormal condition, and it is one which gradually increases as we grow older. Older people do not sleep as soundly as the younger generation.

4. *Night terrors*—The night terror is simply an unusually distressing dream, in which the individual tosses about, sometimes moaning or crying out. Night terrors are influenced by unusual nervous stress and strain, as well as by storms occurring during the night, and seem to be very often associated with digestive disturbance.

5. *Sleep-walking*—Somnambulism is not uncommon and has been fully considered in preceding chapters. It is probably a form of hysteria, and when once experienced is quite likely to reappear. The condition of sleep during this state is fairly normal—at least, normal for that type of individual in which somnambulism occurs—and it should be borne in mind that this condition seldom appears except in those who belong to the hysteria group and thus are more or less prone to partial dissociation.

6. *The prolonged state of sleep*—This is probably no more nor less than an accentuation of the somnambulistic or hysterical accompaniment of sleep which we see sometimes continued over into the cataleptic state. It is in reality a form of hysteria and is not normal sleep.

7. *An excessive tendency to sleep*—Here again, barring those cases that are bona fide sleeping sickness, we are dealing with an effort to get back to the nursery, to the infantile state of freedom from responsibility. We meet with certain hysteric individuals every now and then, who, when they want to escape from troublesome duties, just take a prolonged nap. They seem to be able to revert easily to the nursery and to sleep indefinitely. There is no doubt that this form of sleep is a defense reaction to escape from disagreeable duties and unpleasant situations.

8. *Sleep of the insane*—There seems to be a peculiarly profound and unusual state of sleep which characterizes some of the insanities, an accentuation of the stupors of the insane to the point of unconsciousness, with a tendency to indulge in prolonged and deep sleep.

9. *Drugs and sleep*—There are many powerful drugs which are able to produce profound unconsciousness, but this condition can hardly be called sleep. Other and milder drugs belonging to this group may encourage a condition of relaxation which contributes to sleep, so that by their use more or less natural sleep is induced.

THE CONTENT OF DREAMS

I am persuaded that the average individual is engaged in dreaming all night long, perhaps indulging in simultaneous dream episodes on different levels of consciousness; but we remember our dreams only when sleep is shallow or when we are suddenly awakened and catch the tail-end of the dream fleeing through consciousness. Most of the dreams which we remember are found to occur after 4 o'clock in the morning. When we are awakened at any time during the night we are usually aware that a dream was passing through consciousness at the moment of awakening.

Most dreams are built up of visual or auditory imagery, and it is interesting to record that colors seldom appear in our dreams; they are mostly in dull gray.

It appears that unpleasant dreams occur about two or three times as often as pleasant or passably pleasant dreams. When young, we experience many fairy dreams. Later on the wish-fulfillment dreams begin to predominate, and still later in adult life we have more of the fear type of dreams; at various times of life, in addition to our wish-fulfillment type of dreams, we also have those which belong to the punishment type. Wounded soldiers during the World War dreamed a great deal of battle. They had built up a battle complex, and this intruded itself in the dream-life as a sort of repetition compulsion, just as in our waking moments we indulge in tics, twitchings, and other motor obsessions. New automobile drivers are always dreaming about automobile accidents.

Children often confuse their dreams with the memory-images of real experiences. They tell stories in which their dreams are mixed up with their waking memories. I am satisfied that many a new fear has been suggested to neurotic patients by a dream; altho they awaken without the consciousness of the terrorizing experience of the dream, this fear became attached to their waking consciousness during the moment of passing from sleep to wakefulness and it appears the following morning as a new fear.

The speed of dreams is well known but difficult to prove. Every now and then cases occur in which we know we had only dozed off to sleep for a few moments and yet dreamed over a period of years. I have had such an experience myself. It seems that the dream symbolism, the technique of the pageantry employed by the subconscious, enables it to shove up into the mind an enormous mass of material which has been previously prepared and made ready for just such an exhibition, and in this way the vast panorama of life is viewed by just a momentary sweep of the sleeping eye around the borderland of consciousness.

The absurdity and grotesqueness of our dreams is due not only to the fact that we do not understand the symbolism of dreams, but also to the fact that we recall only the terminal fringe of any one dream experience. If we could see it all and could understand the interpretation of the dream symbolism, then we would probably form a more correct appreciation of the real content and significance of these dream parades.

Dreams are, then, essentially sleep hallucinations, tho it would appear that the average dream is not quite so vivid as the waking hallucination; but when they reach the night-terror stage they become just as realistic and vivid as any waking hallucination entertained by an insane mind.

INTERPRETATION OF DREAMS

From time immemorial man has sought to find some key whereby he might interpret his dreams. The ancient peoples took dreams very seriously, and the survival of the old-fashioned dream-books testifies to man's effort to find an interpretation for these nocturnal vagaries.

It is probable that a dream, in trying to ascend consciousness, follows the path of least psychic resistance; no doubt in its ascent of the mind it picks up, on the fringe, many irrelevant ideas, and it probably does not hesitate to incorporate within its main drift any current sensory stimuli which may be coming in from the physical sensorium to the mind centers being traversed. Organic sensations—visceral sensations—as they arise in the internal organs are also transferred immediately to the brain and may become incorporated in our dream-life. This would explain why digestive disturbances so directly contribute to the production of nightmares.

The chemistry of the blood stream and its content of the secretions of the ductless glands have something to do with our dream-life, as was shown in the case recorded where the patient had the most pleasant and agreeable type of dreams while taking pituitary extract, but under the administration of the adrenal secretion, the dreams became of the fear type and culminated in nocturnal seizures of terror.

It is not strange that certain types of individuals should indulge in premonitory dreaming, since they live during their waking hours in fear of everything that could happen. These premonitory dreams might in some degree come to be fulfilled, but there is no real proof on record that "coming events cast their shadows before" in the form of nocturnal dreams.

There is more on record to prove the probability of prodromic dreams; that is, dreaming that something is going to happen physically, and then to have it occur—such as dreaming of a feeling of congestion around the thigh, to have it followed later by genuine attacks of

sciatic neuralgia. In this case the dream-life was merely more sensitive to the early symptoms of the disease, and therefore was able to record in advance the fact that the process was working, thus making it appear that the dream had really preceded the disease or that the attack was the result of the dream.

The fact that two individuals dream the same thing at the same time does not mean very much. Such dreams have been reported. In the chapter on telepathy we called attention to the fact that identical twins have dreamed the same thing at the same time, even when separated by the Atlantic Ocean. Most of these cases are simply coincidences, or in the case of twins, the two individuals are very much alike and under similar circumstances it is not strange that they might experience an all but identical dream.

Dreams of levitation, of soaring through the air, are very common. They have to do with disturbance in the so-called kinesthetic sense—the muscular, tendon, and joint sensations. These sensations are similar to those reported by patients when they are going under an anesthetic, when they feel as tho they were floating in the air. They are not due to reversion to the flight memories of our bird-ancestors or anything of that kind. They are merely the result of the arousal of the kinesthetic sensations. The dreams of falling belong in this same group. Many times the individual remains asleep until he strikes bottom, and contrary to the popular notion, nothing serious happens.

Dreams having to do with derangement of the special senses are very common. Patients often dream of being paralyzed or being blind and deaf. Very commonly we dream of wanting to talk, to sound an alarm in the presence of danger, but find ourselves unable to utter a sound, and what consternation comes over the sleeping soul who finds himself in the dream state trying to call for help, but speechless!

The dream-life of the congenitally deaf and dumb is found to be different from that of ordinary individuals, as they have no memory-images stored in the mind as the result of sound and speech.

Recurrent dreams are very difficult to explain. Even nightmares are sometimes recurrent. Patients complain to me of dreaming night after night of the same horrible proceedings. I myself have had a recurrent dream over a period of twenty years. Every few weeks I dream of being in a terrible predicament because I cannot get to some appointment, some lecture, on time. Everything on top of the earth is happening to interfere with my getting there. My experiences would make almost a serial movie thriller. Yet I am not conscious, in my waking hours, of worrying about being late to my appointments. All my life I have been punctual. In meeting hundreds and hundreds of speaking engagements I do not recall ever having been late. I have reasoned with myself about this matter, and yet this dream persists. It is the only type of recurrent dream I have ever had. In fact, aside from this one dream, I cannot recall having dreamed about anything a second, and certainly not a third or fourth time. Sometimes I can find a plausible reason for recurrent dreams, but frankly, in other cases, I find no rational explanation.

THE FREUDIAN THEORY OF DREAMS

The psychoanalytic theory of dreams supposes that the censor lives in the foreconscious realm of the mind, which also contains much memory material that has not been forcibly repressed. Memory material from this region is supposed to be easily recallable. Of course, the Freudian theory of dreams is predicated on the hypothesis of the pleasure principle, the theory that the individual is always engaged in an effort, whether awake or asleep, to produce pleasure and avoid pain; when the Freudians speak of dreams being phenomena of wish-fulfillment, they include under the term wish, instinct-impulses, desires, hopes, and longings.

And so Freud believes that dreams afford an opportunity for repressed wishes to find modified or symbolized expression; that our primitive and unacceptable wishes, which have been more or less suppressed, are thus, when dressed up, able to get by the censor, and, at least in our sleeping consciousness, to find an opportunity for self-expression. In a few words, they believe that a dream is the concealed expression of a repressed wish.

The Freudians are wont to divide all dreams into manifest content and latent content. They believe that even a dream has something significant concealed within and beyond its symbolism, and in their system of dream interpretation they frequently use such terms as condensation, displacement, dramatization, and secondary elaboration. By condensation they mean that a single idea of a dream may be composite in origin; by secondary elaboration they teach that the dream often picks up something all but foreign in an effort to make itself more plausible, or that in our interpretation of the dream, which seems to be so bizarre and meaningless, we seize upon certain loosely associated elements, whose incorporation would serve to make the whole thing more acceptable, to render the dream picture more coherent and presentable. The Freudians maintain that the dream is the protector of sleep, not the disturber. They claim that these ideas that come up from the subconscious would waken us were it not for their elaboration and modification into the less disturbing and distressing symbolic dream form.

While I may be disposed to accept some of Freud's views of dreams, I am not disposed to accept his contention that practically all wishes that are suppressed and seek expression in the dream life are of a sexual nature. I believe that other wishes and feelings having to do with the five great dynamic urges of life may be almost equally concerned in furnishing themes and data for the fabrication of dreams.

DAY-DREAMS

Day-dreaming is a state of consciousness which deserves separate consideration. It is a mental station midway between waking and sleeping. In the day-dream, the adult mind tries to achieve by psychic drifting and fantasy that indulgence which it longs for in reality but has been unable to attain.

Day-dreaming is nothing more nor less than plain, premeditated relapse of consciousness into the infantile state and method of thinking. A certain amount of day-dreaming is altogether harmless, but when overindulged it not only leads to that state of mind and

associated conduct which we commonly designate as “the dreamer,” but when indulged to its fullest extent it drifts off dangerously near to the borderland of dementia præcox, tho I would hasten to say that there is no direct connection between the ordinary day-dreamer and the well-defined case of dementia præcox. In the one case we have a simple and very common form of psychic indulgence; in the other we have a definite and well recognized form of insanity.

Let us not make the mistake of confusing day-dreaming with the indulgence of constructive imagination. When the artist, the architect, or the author, indulges in the panoramas of imagination and flights of fancy which we call day-dreams, and when these lead to action on his part—to successful effort to produce in the world of reality those visions which have entertained and enthralled him during his flights of fantasy he is more than a dreamer; he is a thinker, a doer, a builder. Constructive imagination followed by actual effort at practical realization is certainly without objection.

Some of our delirious states are closely allied to dream states; not only the delirium of fever patients, but the delirium of alcoholics—except that in the latter case there is usually indulgence in motor activity. The dream state of the insane is so highly confused as to be far different from the psychic condition of either day-dreaming or nocturnal dreaming. We frequently find such experiences in the insanities as a patient entertaining a delusion of pregnancy wholly traceable to a dream of being raped.

There is more or less dissociation in the dream life, just as there is in major hysteria; the state of dissociation is sometimes very marked in the case of the day-dreamer who allows his mind to drift on, unopposed, amid the scenes of its own imagination, as he sways in the breeze in a hammock out under the shade trees on a beautiful summer day. In fact, in trying to present the relation of dreams to the neuroses, we could truthfully say the hysterical patient is one who is simply trying to live a dream.

EXPLANATIONS OF UNIQUE DREAMS

Not long ago prominent mention was made in the daily press of the case of a railroad builder who claimed to be under the control of spirits in the planning and execution of his engineering feats. The particulars were reported by a correspondent of the *Chicago Tribune*, as follows:

New York, June 14—(Special)—At an exhibition of spirit pictures at the Anderson galleries to-day, a railroad builder told how spirits had furnished him nightly with the plans for more than 3,000 miles of track, which he constructed.

Arthur E. Stillwell, formerly a leading figure in Chicago railway circles, according to Arthur Conan Doyle and other authorities on this subject, has had the greatest psychic experiences of any man living. He has been president of many railroads, and was president for seven years of the National Surety Company.

“I have built more than 3,000 miles of railroad,” Mr. Stillwell said, “and that, I believe, is more than any other living man has built. Every part of every route has been determined by spirits who have come to me in my dreams and told me what to do.”

When he was building the route of the Kansas City Southern, Mr. Stillwell said, he was warned by his spirits not to build the terminal at Galveston, as was planned, because that would lead to disaster, but to

terminate it at Lake Sabine, where he built the terminal of Port Arthur, which is named after him.

“Four days after the terminal was completed,” he said, “the great tidal wave wiped out Galveston.”

Mr. Stillwell said that nearly all his life he had made a secret of his powers, because he feared that people would think him a “nut.” For years, however, some of his friends and many directors in companies associated with him, knew the source of his inspiration and believed in his spirits.

“To-day I am telling everything. I don’t care whether I am called a ‘nut’ or not. I receive communications to-day from a corps of spirits, I do not know how many. The engineering plans that I have put in effect have all come from an engineer who has been long dead.

“I have transcribed scores of poems which have been dictated to me by spirits. I have written the music of many songs which have been dictated to me by spirits. I ask them why they choose me. They say, ‘For some reason it is easier to communicate through you than through others. You don’t know why and neither do we.’ I do not know the names of any of them. I have asked them and they tell me that it makes no difference and that I should not bother about who they are.”

I am familiar with many cases like the foregoing. I know an inventor, most of whose inventions originated in dreams. I am acquainted with an author who plans many of his books in his dreams. I have a patient, a business man, who dreams out most of his financial deals—and they are usually successful, too. I have myself solved many a complicated problem in my dreams, and the dream solution was very much better than the ones I had worked out during my waking moments. The fact that dreams may “come true,” or that the conclusion reached in the dream state proves to be valuable or serviceable, in no way connects the dream-life with supernatural forces or with discarnate spirits.

It should be made clear to the reader that during sleep the subconscious mind is in full commission, in fact, is able to act much more freely, unhampered by the restraints and cautions of the higher powers of reason, judgment, and logic; altho it must not be inferred that the subconscious mind does not reason; it does reason, but it reasons largely by deduction, not so much by induction.

It is not unusual to meet persons who dream much concerning their work, and who obtain valuable suggestions from their dreams—tho they are the exception, not the rule. The average engineer who builds railroads by his dreams, or by the guidance of “spooks,” will make a sorry mess of the whole undertaking; but there are exceptions, many of which I have investigated and studied. But it is not necessary to fall into the arms of spiritualism in order to understand, explain, or account for these interesting and unusual cases.

Many persons get suggestions from their dreams, just as they would if they reclined in a hammock, out on a mountainside on a summer’s afternoon, and allowed fantasy to run riot in the mind, indulging in day-reveries, permitting the marginal consciousness to push far up into the central consciousness, and thus by reflection and meditation inducing many new ideas to come trooping into the conscious mind. And this is true, whether the meditations be of the religious sort or of the mechanical sort.

Now, it is easy to imagine, in the case of the average individual who has been exposed to a long course of preparatory training leading to a belief in spirits, that he might connect his dream experiences—in which new and valuable ideas concerning his life-work were unfolded by the subconscious mind—with spirit beliefs or other fantastic and symbolic maneuvers of the dream-life. The tricks of association employed by the subconscious mind

also would aid in giving him this impression. Thus it is easy for those who already lean toward a belief in spiritualism, to have their dreams of a quiet, orderly, and sometimes valuable nature connected with supposed spirit manifestations. The railway engineer above mentioned, it will be recalled, was very indefinite about the identity of his spirits; he merely connected two ideas—the fact of what he dreamed and the belief in spirit revelations.

I have under my care at the present time an architect who gets up early in the morning and draws the plans which he has dreamed out, and which, until I explained these matters to him, he had really come to believe were revelations presented to him by the disembodied spirits of departed architects. By proper teaching of the psychology of it, the matter has been made quite clear to him, and he now fully understands, indulges, enjoys, and profits by these dream revelations, the nocturnal outpourings of his subconscious mind.

The threshold between the central and marginal consciousness in this sort of individual is such that it permits, during certain sorts of sleep, the memory and retentive centers of the waking consciousness to receive a large volume of material from the subconscious reservoir, which can be (in many cases) recalled after the individual is fully awakened.

AN INTERESTING EXPERIENCE

I had a friend, a physician, who died a dozen years ago. We were very intimate, and two or three years back I had a vivid dream one night of his coming to me and discussing quite minutely a certain paper which I had in preparation, or which I contemplated preparing. The suggestions he gave me, or the ideas I gathered from our dream conversation, were very interesting, and on waking up I jotted them down, feeling that I had received a valuable “hunch.” In fact, I wrote the article along this line, and it proved to be something out of the ordinary. Now, it would have been very easy for me to utilize this as a demonstration of the return of the spirit, of spirit control, and of help from the spirit land, would it not? Indeed, but for two reasons:

1. I am not disposed to grab for spiritistic explanations of ordinary physical and psychic phenomena, and

2. After the article was published, in one of those periodical house-cleanings that occur—when one goes through the memoranda that accumulate in the desk drawers—I found an outline of this article, which I had prepared long before, and totally forgotten. The outline showed that I had planned the article almost exactly as my departed medical friend discussed it with me in my dream. I had written these memoranda while traveling on a train one afternoon, en route to Chicago; had mislaid them, and had forgotten all about them.

The psychology of my experience is simply this: The outline which I had thought out in a day-reverie came up again, with certain modifications, in a night-reverie, and this night-reverie happened to collide and become confused with the dream-vision concerning my departed friend. What was more natural than that he and I should talk over this, as we had talked over many similar things in life? And yet how easy, without analysis, it would be

to proclaim my article, which was one of the most successful I ever prepared, as having been transmitted to me by the spirit of my dead colleague?

And so one remarkable spirit communication after another, as related by numerous individuals, vanishes into thin air when accurately analyzed. Yet I am frank to say that it would have been very difficult for me to explain my experience had I not found the forgotten memoranda. Such an experience, however, helps us to understand some others which we are not in position to analyze in the same fortunate manner.

PSYCHOLOGY OF DREAMS

The dream may have as its content, directly employed or symbolically utilized, anything that has ever been registered in consciousness. Not only can we employ in our dreams the ideas, sensations, feelings, emotions, and sentiments, as such, deposited in the reservoirs of memory; but in our dream-life the mind undoubtedly has the power of recombining these various elements into entirely new situations; thus our dreams may come to be characterized by these familiar ideas and emotions as well as by situations that are new and, to our waking consciousness, altogether unique.

Most authorities on psychology believe that we may have a symbolic expression in our dream-life of almost any situation, thought, or idea which has associated with it strong emotional tones. In particular, those things which cause us great sorrow or joy—our anxieties, apprehensions, beliefs, wishes, fears, and scruples—represent the complexes which are most likely to come trooping forth from the subconscious to exercise themselves in our dream-life.

Whatever may be said for or against the Freudian philosophy, one thing is certain—Freud has taught us, by the systematic analysis of dreams, that they are devoid of a spiritual content. Psychoanalysis has finally and forever settled the matter of the natural genesis and the psychologic province of ordinary dreams. Dreams can be induced experimentally, can be suggested by hypnotism, and their careful analysis unfailingly shows their purely natural and psychologic origin. Our dreams and our premonitions originate within our own minds and represent the recombination of those ideas which are symbolic of the natural content of our own minds.

The Freudian hypothesis of dreams, their origin and interpretation, also contributes much evidence to warrant us in the belief that the subconscious mind is a working, functioning mechanism, and that its content is systematized, organized, and capable of conducting itself in an intelligent manner. Freud believes that underlying all dreams there is a subconscious process which fabricates the dream themes, ideas, and symbols.

Not all of us are able to agree with Freud in all the factors of his hypothesis, but we do agree on the fact that the dream is a fabrication of the subconscious mind. Personally, I believe that dreams are just as likely to be an expression of antecedent doubts, fears, and anxieties as they are to be a reflection or echo of some of the immediate activities in the life-work and experience of the preceding day. At any rate, the study of dreams does show that they are fantasies of the unconscious; and such study definitely suggests the possibility

of an overflow of just that sort of dream material—in the waking state or in the trance state—which is characteristic of mystics and mediums. Dreams represent a type of hallucination, and we need only imagine the medium to be in something of the same state without the profound unconsciousness which characterizes ordinary sleep.

HYSTERIA

WHEN it comes to the discussion of hysteria, it should be our first duty to make clear the distinction between hysterics and hysteria. Any person suffering from nervous instability may be at times more or less hysterical, but that is not necessarily a sign of genuine hysteria.

Hysteria is a disorder rather than a disease, and it involves not only the mind but both the sympathetic and general nervous systems. The physician is familiar with hysteria, and knows very well how to arrive at a diagnosis of this disorder when the condition seems to be complicated and unusual; but this same physician, who sees so much of hysteria, is more or less at a loss when it comes to undertaking to define or more fully explain the exact nature of hysteria.

One school of medical thought sought to explain hysteria on the ground of increased suggestibility, and it is true that hysterical patients are exceedingly suggestible. Janet holds to the theory that hysteria is the result of a loosely organized and poorly controlled mind. Indecision or lack of what he calls psychic tension is supposed to be the characteristic psychic state which predisposes to these attacks. In accordance with this theory, hysteria is a dissociation in the psychic state. It is believed that sometimes these dissociated psychic centers are loosely connected by bridges, deep down in the subconscious, and that it is this arrangement which accounts for the bizarre manifestations of various forms of hysteria.

Our Freudian friends are wont to account for hysteria on the ground of neurotic personality from infancy, and they explain the manifestations of the disorder on the theory of displacement and new association of ideas. They affirm, for instance, that the vomiting of hysteria is merely the desire to get rid of something, to dodge an issue, to avoid some disagreeable psychic situation, and that transference has merely taken place to the stomach. The psychoanalysts, in common with others, believe that many of the common hysteric symptoms are in reality the clandestine indulgence of some suppressed wish or the fulfillment of some submerged desire.

In the study of hysteria, as well as other forms of neurosis, the experiences of the World War did a great deal to upset the Freudian theory. The more these psychoneuroses are studied the more we are inclined to believe that they can be properly understood only by admitting the existence of several constellations or groupings of psychic impulses, as suggested in a former chapter, where I have undertaken to classify human emotions and impulses under the five great drives of human experience.

THE CAUSES OF HYSTERIA

When we come to consider the causes of hysteria, I have no hesitancy in setting down the inheritance of an unstable nervous system as being first in order of importance, while next comes lack of proper training in the nursery. Much of our hysteria, after all, notwithstanding the hereditary predisposition, is the result of failure to learn self-control in childhood.

The question of mental stress and strain deserves next consideration. All sorts of psychic upsets predispose to both hysterics and hysteria. Disappointment in love, an unhappy marriage, desertion in family life, overambition, business cares, worries, fatigue, and exhaustion—all these contribute to an outbreak of hysteria. In the World War the condition called shell-shock was nothing more than a psychoneurosis, in no way different from hysteria and its associated states.

Age has a good deal to do with hysteria, as does also sex. Hysterical outbreaks are more likely to occur at adolescence and about the time of the menopause. Hysteria is less frequent before puberty and after forty.

Education has a great deal to do in determining whether or not a given individual will be able to live above the hysteria threshold. Nervous children who are brought up in narrow channels or who are subject to the teachings of faddists and extremists are almost certain to become victims of hysteria. I know it is the custom, these days, to advocate raising children without corporal punishment. This plan is all right for children who are easy to raise—children who have well-balanced nervous systems and respond easily to teaching; but my advice to parents with constitutionally nervous children is to use discipline and get obedience early in the child's career, not hesitating to resort to the rod if that is necessary. Hysteria is bound to be the result in all those cases of erratic and neurotic children where the parents are too sparing of the rod. These children grow up without inhibitions, with uncontrolled temperaments, and if they are of the day-dreaming, artistic, temperamental type, they are going to be victims of hysteria early in life; and this psychoneurosis will plague them to the end of their days if they do not learn how to control their emotions and acquire the mastery of their wobbly nerves.

While suggestion plays a prominent part in hysteria, it is not the sole cause. Crude and unwise examinations on the part of careless physicians sometimes start hysterical patients on a new track. New symptoms are suggested and new diseases are put into the minds of these susceptible individuals. Hysteria is always increased by social upheavals—by the disturbed conditions which follow fires, earthquakes, and wars. Even religious revivals sometimes contribute enormously to the outward manifestation of hysterical tendencies. While social and economic conditions are indirect causes, they do not deserve much consideration as direct causes of hysteria. Hysteria appears more often in the extremes of society—among the wealthier classes and among the poorer classes. The middle classes are, comparatively speaking, free from this troublesome disorder.

All forms of organic disease, when they appear in these abnormally unstable individuals, have a tendency to augment the hysterical tendency. Anything which depletes physical strength or adds to psychic stress is sure to render hysterical patients more hysterical.

FORMS OF HYSTERIA

1. *Simple Hysteria*—In the more simple form of hysteria, which is little more than an hysterical outbreak, we are confronted with the manifestation of simple emotional excitement. In these cases there are often mild and convulsive seizures of laughing or crying. In the more violent form, the tendency may go on to the stage of scratching, biting, tearing, etc.; when such attacks are over, the patient is not left exhausted, as in epilepsy. In fact, sometimes hysteria patients feel better after an attack, and this is what has led to the belief that hysteria might possibly be the disguised gratification of repressed sex or other desires. This theory has also been partially sustained by the fact that many times when such repressed emotions or submerged desires are dug up and squarely faced—when they are put before the patient and their relation to hysteria properly explained, and when emotional elimination has taken place—the hysterical symptoms largely disappear or the attacks of hysteria are cured.

2. *The Hysteria Fugue*—Another form of hysteria is represented by sudden disappearances—otherwise normal individuals run away from home. This condition has already been alluded to. Periodic wanderlust of this sort is no doubt merely a mild form of hysteria with partial dissociation and more or less amnesia.

3. *Hysterical Sleep*—Hysteria appears in other individuals as fits of sleeping. This is pseudo-sleeping sickness. During this sleep the patients sometimes are engaged in constant muttering.

4. *Hysterical Paralysis*—In other cases, we have hysterical paralysis—one or more limbs may be paralyzed, and the patients go around for years believing they are victims of a real, organic paralysis. They represent the large part of the miraculous cures that are made by faith healers and the high priests of the various religious healing cults.

5. *Hysterical Anesthesia*—We have, in other cases, the well-known hysterical anesthesia—parts of the body become more or less insensible to pain. But these disturbances of sensation represent skin areas which are not associated with any definite nerve supply. This form of sensory disturbance has been well called “glove anesthesia,” since it seems to represent a more definite and local skin area of the body than it does a region supplied by any single nerve. We also have other sensory derangements, such as hysterical blindness and hysterical deafness, and their cure is sometimes most spectacular.

6. *Other Hysterical Manifestations*—Other forms of hysterical manifestation are the tics and contractures, and the troubles of those who complain of unusual sensations in the internal organs.

The Freudians are wont to classify hysteria into three groups—conversion hysteria, anxiety hysteria, and compulsion hysteria.

There is little doubt in the minds of medical men that a large part of the so-called “demoniacal possession” of the Middle Ages would to-day promptly be diagnosed as major hysteria, while the remainder would be regarded as some degree of insanity. Some of our present-day hysterics, had they lived in other centuries, would have been in grave danger of being burned for witchcraft.

In the past ages many a great religious movement has had its origin in the revelations and contortions of some earnest and conscientious, but manifestly hysterical, woman with strong religious tendencies. It is only in recent years that we have come to understand the relations of hysteria to religion, insanity, and far-reaching national upheavals.

The physician of olden times looked upon hysteria as a malady that was largely feigned—as a fictitious sort of performance on the part of certain types of nervous and emotional women. Men were not supposed to have this disorder, and if they had it, they met with scant courtesy at the physician's hands; they were looked upon as "effeminate." Even some modern authorities call neurasthenia a man's disease, and hysteria a woman's disease.

IMAGINATION AS AN ACTOR

Human imagination is a marvelous actor. The ability to impersonate, the power to think and feel and act as another person would think and feel and act, constitutes both the stock in trade and the secret of success of the emotional actress. But what would be the result if the actress, while on the stage and in the midst of the play, should succumb to her imagination, and actually believe herself to be, in truth, the very character she was endeavoring to impersonate? That is exactly the sort of prank that suggestion and imagination play upon the hysterical patient. Hysteria is merely an actor who temporarily has lost his head but goes on playing his part thinking it to be real.

Hysteria is a breakdown in the normal and necessary cooperation and coordination between the sensory-motor or voluntary nervous system and the great sympathetic or involuntary nervous mechanism, thereby resulting in great disturbances of sensation and unusual disorder in the motor control of the body. Hysterical attacks might thus be regarded as a mild and temporary form of bodily insanity, resulting from the decreased or deranged control of the sympathetic (vegetative) nervous system on the part of the cerebrospinal system. And it is exactly this disturbance in the delicate balance between these two nervous systems that is responsible for the production of the whole vast concourse of hysteria symptoms—symptoms that are able so to group themselves as to suggest almost all forms of every known disease.

Young people, when associated together, as in boarding schools, may suffer from epidemic attacks of hysteria as a result of suggestion and imitation. Even predisposed adults, as a result of physical or mental overwork and under the influence of a powerful suggestion associated with some protracted religious meeting, may develop hysterical attacks and exhibit dancing spasms, crying, and other emotional manifestations that accompany intense religious excitement, especially in rural districts, which are ordinarily so quiet and tranquil.

THE SIMULATIONS OF HYSTERIA

The so-called accidental symptoms of hysteria are usually so grouped and manifested as to simulate the clinical picture of some other disease, and it will be best to consider them in

that light. The fact that the patient is so largely self-occupied explains how these hysterical symptoms come entirely to fill up consciousness; and in accordance with the laws of the threshold of pain, previously considered, it will be easy to understand how the hysteric's common sensations may be transmuted into a veritable avalanche of suffering.

These patients are indeed a "fastidious" class. They are both unbalanced and erratic, and their life-experience is marked off by certain well-defined "crises." These characteristic and impulsive explosions are not at all unlike the periodical catastrophies of the inebriate, especially as regards the uncontrollable and rhythmic behavior of the attacks.

It should be remembered, as we now take up these hysterical attacks, that very often there exists some trifling physical basis for such manifestations, and that this, in connection with the nervous and mental state, is able to determine the particular and definite form which the hysterical manifestation assumes from time to time.

1. *Gastric Crisis*—There are sudden seizures of stomach pain, behaving almost identically with those of the gastric crises of loco-motor ataxia. Other cases are limited to a sudden and unusual appearance of gas in the stomach and bowels, accompanied by severe colic. These patients also sometimes suffer from a rectal crisis and experience great pain. Many of these individuals are chronic "air swallows."

2. *Vomiting Crisis*—These attacks of repeated vomiting are very alarming to the patient's friends. They sometimes appear without the slightest excuse, but it is observed that they usually stop before the patient has experienced the loss of much flesh. Closely akin to this manifestation are the fasting fads of hysterical patients. They not infrequently go a week or ten days without eating. I am of the opinion that most of those who appear to have gone without eating for a longer period were probably getting food on the sly.

3. *Secretory Crisis*—Hysterical patients are subject to sudden attacks of both increase and decrease in the bodily secretions, accompanied by paroxysms of pain and attacks of vomiting; this condition may involve the stomach, liver, bowels, or kidneys; in the latter case the urine may become scant or be greatly increased in quantity.

4. *Appendicitis Crisis*—The patient is seized with the typical symptoms of acute appendicitis, and the puzzling part of the proposition is the fact that the patient's temperature may sometimes shoot right up to 102°—104° F. I no longer doubt or question the existence of this so-called "hysterical fever." The diagnosis, of course, can be differentiated by the history of the case and an examination of the blood; however, there is a case on record of a hysterical patient who had five operations for appendicitis, during the last of which, the surgeon tattooed on the patient's abdomen this surgical warning, "No appendix here."

5. *Gallstone Crisis*—Fictitious gallstone colic has led careless surgeons into the performance of many a useless operation. It is very common for hysterical patients to think they have gallstones, and it is only by painstaking and thorough examination that the physician will be able to avoid serious diagnostic blunders in dealing with these deceptive sufferers.

6. *Renal Colic Crisis*—The patient is able to present all the symptoms of stone in the kidney and of stone passing down the ureter, with the exception that in a bona fide case the

urine is suppressed, while in hysteria there is usually a greatly increased flow. In these cases, too, many an operation has been performed, but no stone has been found in the kidney.

7. *The Headache Crisis*—These attacks of headache are often so severe and persistent as to suggest brain tumor. It is a common experience to have a patient come to us who is rather undernourished, suffering from poor circulation, generally nervous, highly emotional, and giving a history of having frequent “nervous spells.” Such an hysterical sufferer often complains of violent headaches which she describes as follows: “Doctor, when I get these dreadful headaches, it seems as if someone were driving a nail right into the top of my head. It is something terrible, and it nearly drives me crazy; I think it has a whole lot to do with my nervous spells.” This is a characteristic description of the headache of hysteria, a rare form of nervous headache.

This hysterical headache is treated by applying very hot fomentations to the top of the head for ten or fifteen minutes. These applications should be repeated every hour or two, in connection with a very hot foot-bath. Such sufferers are usually greatly benefitted by taking a warm bath at about 100° F. This bath tends to quiet the nervous system and greatly relieves the patient’s sufferings.

8. *Pain Crisis*—In other cases the hysterical outbreak manifests itself as an explosion of pain—an avalanche of suffering. It may be an earache, pains in the arms, legs, or some internal organ, or even in a joint. In the milder cases the pain may be described as a soreness or a “deep ache”; following these painful attacks the patient usually complains of great muscular fatigue. Pain may center in some internal organ, such as the heart, giving rise to pseudo-angina pectoris.

9. *Motor Crisis*—These are the fits, spells, and spasms of hysteria. They may imitate convulsions, St. Vitus’ dance, or epilepsy. They embrace those cases of muscular paralysis, or hysteric palsy, in which the patient is sometimes unable to stand or walk; for years at a time he may suffer from hysteric joints, the hip and the knee being the joints usually involved. Such cases present tremors that resemble exophthalmic goiter. The victims experience laughing, crying, and choking, and often create internal tumors which are so hard and fixed as to deceive the surgeon into the performance of an operation—if he neglects the precaution of first putting the patient into a prolonged hot bath. This usually causes the tumor to vanish.

SHELL-SHOCK

It should be made clear that shell-shock is not a new disease brought on by the World War. It is merely a military form of behavior, in which a man tries—subconsciously—to get away from an unpleasant or unbearable situation; and it is a good illustration of the fact that self-preservation, after all, is one of the dominant, if not the all-dominant psychic complex, instead of the Freudian sex theory’s libido. The civilian recruit, when taken away from his home surroundings and placed under new and strange conditions—under new stress and strain, amid horrible sights and unpleasant sounds—soon began to sicken and experience extreme fatigue, and ere long the nervously unstable soldier blew up—went to pieces

nervously. It makes no difference whether you call it hysteria, shell-shock, or military fugue, it was all a behavior reaction, nothing more nor less than a defense reaction—a conspiracy between the subconscious mind and the sympathetic nervous system to get the individual out of the fix he was in, away from danger, and into the sheltered atmosphere of the hospital.

The soldiers early learned that there were but two honorable ways of escaping—wounds and death. Any other method, by means of desertion or malingering, would be likely to result in detection and speedy punishment. Many a brave officer deliberately courted death in order to escape from the terrible situation he was in. In contrast with this, the mediocre and neurotic soldier blew up nervously, went into a fluke, threw a fit, and went back to the hospital. This was one way to get out of his dilemma without subjecting himself to court-martial or otherwise endangering his self-respect or his military and social standing.

I am satisfied that the only time—Freud notwithstanding—that normal human beings experience the death-wish is when they are in some condition where life, for the time being, has become unbearable, just such a condition as we find at the front in modern military action.

Attention has already been called to the fact that the dreams of these wounded soldiers were about war, battles, and death—and not about sex matters, as the Freudian theory would presuppose.

THE WANDERINGS OF A HYSTERIC

Here is the case of a woman who was about thirty years old when she began her medical wanderings. She had been slightly nervous, more or less emotional, all her life, but had enjoyed fair health. She was married at twenty-five, and the responsibilities of a home seemed to make her more nervous. At about thirty she began to have dizzy spells. This meant, of course, consultation with many physicians, including eye and ear specialists; it also meant a great deal of introspection on her part, and as a result of this thinking about herself, she very soon began to experience vague and wandering pains in different parts of her body—which led to consultation with more doctors, including osteopaths. She was better at times—worse at others. Months passed, and the next thing she experienced was a feeling of nausea, with distress in the region of the stomach. This led to consultation with two or three stomach specialists, one of whom was bold enough to make a diagnosis of duodenal ulcer. The patient was put on a rigid diet, lost considerable flesh, and soon had become a confirmed semi-invalid—thought about nothing but herself. Almost a year of this dieting showed little improvement, and it was thought best to counsel with other physicians. Among the half-dozen new doctors to examine this woman, one was a surgeon who made a positive diagnosis of chronic appendicitis. He told her that all her trouble in the stomach was from the appendix, and that, in his opinion, she had never had an ulcer. An immediate operation was proposed, but her husband objected. He was reaching the conclusion that where so many doctors had disagreed on the diagnosis, it was not wise to rush into a major operation; so he sought still other physicians, including specialists, gynecologists, and so on.

After three years of this, you can imagine what a nervous wreck the patient had turned out to be. Her symptoms were no longer limited to dizziness and nausea. She had palpitation of the heart, shortness of breath, choking sensations, pulsations in the abdomen, numbness, chills, profound weakness, trembling, and betimes, convulsive attacks that bordered on unconsciouness. When these last-named attacks came, the neurologist finally had his turn. It was at this juncture that I met the patient, and I do not recall ever seeing another such an abject specimen of humanity up and about, able to walk into the doctor's office, or rather, stagger in and slump down on a chair, utterly exhausted.

I have not mentioned the fact that various health articles, health books, and faddish dietetic systems from two or three different sources, all had come in to complicate this case; but rest assured that they had, and that everything else that could be done to make a woman sick, psychologically, had been done. And now I had to tell her there was nothing at all wrong with her, organically; that in my opinion she had never had ulcers or appendicitis; that there was nothing wrong with her eyes, heart, liver, lungs, or kidneys—in fact, that, apart from her state of partial nervous exhaustion, with some anemia, she was in good health, and that if these conditions could be corrected she would be as healthy as she had been at any time in her life.

It required a great deal of faith upon her part to accept this diagnosis, and to agree to go into the fight for health; but she enlisted with her whole heart and soul. It was just about a year from the time we started in on this program of facing facts and getting control of her nerves and emotions, before she was back to normal, and was feeling as well as ever.

This case illustrates the too frequent mismanagement of the neurotic patient on the part of the medical profession. It must be remembered that hysteria can simulate almost any disease, and that it puts up such a good front that only the most experienced practitioner will be able to look beneath the surface and find that the real basis of all these symptoms is in the hysteric constitution of the patient.

HYSTERICAL CONFUSION

A few years ago a middle-aged business woman came in, sat down in the office, and said, "Doctor, I am so nervous, I am afraid I am going to do something." Of course, I asked her what she felt she was going to do. "I don't know, but I am going to do something desperate. It just came over me the other day. Do you think I had better go away for a while, take a trip to Europe, or something?"

I told her that running away would do no good, because if the trouble was really in her own mind, she would take her emotions and feelings along with her. So she agreed to be examined and to take hold of the problem in the right way. It proved to be another case of hysteria. Without realizing it, she had been pampering her feelings and babying herself in more ways than one, and the results were now coming up to the surface. The notion that she couldn't do her work had got hold of her. She would do anything we asked except go back to work. For three months she persisted in her refusal, and for weeks, after she did go back, her condition was pitiful, she seemed to suffer so when she tried to do anything of a business

nature. She would tremble, and the perspiration would stand out on her forehead. Little progress was made until we unearthed a group of emotional struggles—a tremendous conflict that was going on between her ideals and some of the realities that confronted her in her position. Some of these things were eliminated, others sublimated, and fortunately one of her male business associates, who was at the bottom of part of her troubles, resigned from the company; thus, after a period of almost a year, the woman was enabled to do her work again in the enjoyment of fair health.

Not long ago another woman in the early thirties—a college graduate, unmarried—came in, complaining of being nervous and of suffering from queer feelings and fears. Soon after awakening in the morning—or at any time during the day—strange sensations would creep over her, and her heart would immediately begin to beat rapidly. She was short of breath, dizzy, and sometimes nauseated, and would tremble from head to foot. She described herself as being on the verge of unconsciousness at times. She had frequently aroused the household and summoned physicians, but by the time the doctors got there, she had usually calmed down; in fact, she admitted that she began to feel better the moment she knew the doctor had been called. I remember I found her quite normal, except for profound exhaustion, when I arrived about an hour after being called. The house had been upset for more than three years, and the mother and other members of the family were all discouraged; but the patient was taken in hand, examined, studied; a diagnosis of hysteria was made, and treatment was begun. That was about three years ago, and to-day the patient, while not perfectly cured, is practically delivered from those troublesome seizures. To be sure, she still has queer sensations, but she knows what they are. She ridicules them when they appear—defies them. As far as lies within her power, she treats them with contempt, and the other members of the family do like-wise. She has been told that the whole performance was an effort to provide an alibi, to avoid doing certain disagreeable things. She understands that it was a working conspiracy between her subconscious and the sympathetic nervous system to enable her to retire from reality and to enjoy the sympathy and attention which nurses, doctors, and her family gave her as the result of these alarming nervous attacks. But, best of all, she has gone to work, has ceased to fritter away her time in nursing her neurotic symptoms. She is doing a real piece of work in the world and is happy, contented, being in the most ideal position, short of normal married life, to help her in remaining above the neurotic level where hysterical symptoms operate. She has acquired emotional immunity.

IDEALS AND REALITY

Many of our mildly neurotic patients do well during their early years, especially if they are not subjected to too much stress and strain; but the nervous young man, about thirty or thirty-five, who has not been able to earn enough to warrant him in getting married, who is going along in the same place, doing always the same work, begins to succumb to this monotony. He looks about and says to himself, “What is ahead of me? What future have I in this position?” The whole thing begins to pall on him. He becomes discouraged and begins

to lose interest in his work. Various symptoms appear, and he consults the doctor. Perhaps the doctor advises him to change his work or take a vacation, but this, of course, affords no permanent help. Changing climate is of no real value in the treatment of psychoneuroses.

Here is a young woman I saw a few days ago—thirty-four years of age, private secretary to a prominent business man. She has been very happy, but now she begins to have a conflict with her ideals; she has begun thinking she ought to have a home of her own and be raising children. She is becoming discouraged with her position in life, and as a result of these conflicts between her ideals and the realities of the situation, she is getting nervous; headaches, dizziness, fatigue, and other nervous manifestations are beginning to appear.

On the other hand, a few days ago I saw a young woman of twenty-six who was married two years ago. Now she is missing the noise, bustle, and excitement of her former business life. She is out in the suburbs keeping house in a little bungalow. She is very lonely; her married life is becoming monotonous; she is starting in on her nervous career by having crying spells. She even doubts whether she is in love with her husband. This young woman had better go back to work for at least a part of each day, or begin to raise a family, and I have so advised her husband. She is not going to be happy unless she does one or the other. She has been in the business world since she was eighteen, and greatly enjoyed meeting people.

No one can stand introspection very long. Self-contemplation is fatal to the health and happiness of the average individual. We have to learn how to live our lives so that we can keep our minds off ourselves.

FIGHTING IT OUT TO A FINISH

About five years ago, from a near-by sanatorium, there was brought to me a patient whom we will, for present purposes, call Frances. Frances was a beautiful girl, seventeen years of age, tall, slender, rather under-weight at this time; large eyes, peaches-and-cream complexion; intelligent, conscientious—almost overconscientious; she seemed very anxious to get well. A year before she had been seized with a spell of weakness and trembling, with fluttering of the heart. She was dizzy most of the time, and the slightest exertion produced not only nausea but actual vomiting. She would vomit for days. Frances was an only child, and her parents were much alarmed; they consulted many physicians, and, of course, received many diagnoses. One or two physicians suggested that the condition was probably mostly one of nerves, and that she should take a long rest, spend the summer in the country, etc. This was done, but the patient was unimproved. In the autumn she was taken to a sanatorium, where she remained six months, gradually growing worse. The parents received the impression that there was probably something wrong with her mind. She was violent at times; she became almost unmanageable and had to be strapped down in bed. She would throw dishes about. One time she all but wrecked the place—broke up everything breakable in the room and smashed the front windows.

At times Frances acted like a little saint, and at other times she would fight her nurse and “raise Cain.” Now, a careful examination revealed two things physically wrong—she was considerably under-weight, and had an anemic tendency. The girl was put to bed and given

a milk-and-orange-juice diet, with intravenous injections of iron, and in about six weeks was in excellent physical condition; but she was no better nervously. She insisted that something was wrong. She always stuck to it that she wanted to get well, but the doctors had failed to find out the cause of her trouble.

For a few weeks she would center her attention on her heart, then on her stomach, with an increasing tendency to nausea and vomiting, and then on the queer feeling in her head. Week after week she harped on this headache—a feeling of emptiness—and she felt sure she was going crazy. Something must be done, she always insisted, but everything that was done seemed to give no relief—at least, only transient relief. After we had racked our brains and found some new treatment, for a few days she would feel better; but within a week she would be right back in her old groove and have the same old tantrums.

Everything seemed to center about the mother in this case. Frances couldn't be happy if she was away from her mother, and the mother had been around most of the time, so I decided to take her away from her mother; she was installed in a kitchenette apartment with a trained nurse, and her parents were not allowed to see her. It was a battle royal for three months. She refused to eat until she was threatened with a stomach tube. I never saw such a nice, beautiful girl who could so suddenly turn into such a veritable demon and be so mean, contrary, and cantankerous.

The question of diagnosis had been under consideration all this time, but the longer the patient was observed, the more it seemed there was nothing to do but call it major hysteria. The battle was continued along this line, and at length Frances was so much improved that she was sent, in company with her nurse, for a three months' trip in the East and South, going down through the Adirondacks, and thence, as the weather grew colder, south to Asheville, North Carolina. Another three months away from her mother, and she was doing finely. The nurse's reports looked sufficiently good to have the patient return to Chicago. I thought we had won our fight.

The parents were elated, to say the least, and the doctors were happy, so word was sent that Frances could come home. All went well until the train reached the suburbs of Chicago, when she had an attack of dizziness, followed by nausea. She said to her nurse, "I feel it is all coming back on me." And you may be sure it did all come back. She was a sick woman by the time she reached the station. These thirty minutes had changed her whole reaction to life. She had not acquired emotional immunity. After all, the cry-baby complex, the desire to have her own way, the impulse to flee from reality into the arms of her mother by means of these hysteric fits, had not entirely left her. Either we had not done our work thoroughly, or, as I rather think, we had never received the full cooperation of the mother. Frances always felt that her mother was on her side. So when she was returning to Chicago, she only needed to realize that she was coming back to her mother, and instantly the wicked conspiracy between the subconscious and the sympathetic nervous system gained the upper hand, and she threw a real, first-class nervous fit.

When Frances reached home, her parents telephoned us, and we had her come out with the nurse, and made ready to start the fight all over again. The next week was worse than any

she had previously gone through. I remember one time, when food was offered to her, she threw it all over the floor; we stood right over her, and notwithstanding her delicate hands, made her get down and clean up every bit of it and mop the floor. It was at this point that the father awakened to the realization that her parents had a real part to act in the cure of the daughter. He was secretary of a large corporation, and had so neglected his business and depleted his bank account, as a result of these three years of furor, that he received a kindly intimation from one of his business associates that at the next annual meeting he was probably going to be relieved of his position. Now things began to happen. The mother came to me and said, "I am going to accept your diagnosis unqualifiedly; I am going to join you in a finish fight." And the mother did. From that time on she stood right behind everything which the doctors ordered done, and it was only ten days from the time she was converted to the diagnosis and enlisted in the fight with whole-hearted determination that the daughter was cured—practically cured. They were ten terrible days for all concerned, and it seemed cruel to put the poor girl through all she went through. How she did appeal to her mother and father to take her away from the doctors! When she saw her parents turn against her and join the doctors, then her only thought was to get new doctors. For more than two years she had been perfectly contented to go along with the same doctors, but when doctors and parents entered into a real and lasting cooperation to effect her cure, she sought to get out of our hands. Her parents, however, were adamant. So she surrendered and said: "I can't be right when my parents and the doctors are both against me. I give up. What do you want me to do?"

That was all there was to it. That was the end of the three years' struggle. That was nearly five years ago, and Frances has never had any serious trouble with herself since then. True, she gets dry in the mouth when she is surprised; her face flushes and her heart sometimes goes pitapat when she is out in public; sometimes she feels faint and at other times dizzy; but she goes on about her business. She can only do about one-half, socially speaking, that other girls can do, but otherwise is perfectly normal. She has now acquired emotional immunity. Her feelings are not controlling her; she is the boss—she is controlling her feelings.

HYSTERIC BLINDNESS AND DEAFNESS

Not long ago I had the case of a workman who had lost the sight of one eye when a small piece of steel was blown into it. The steel was removed, but the man could not see with that eye, altho several expert oculists could find nothing wrong with it. It was evidently a case of "hysterical blindness"—a figment of the man's imagination. Therefore, remembering the rule that what is caused by the mind can be cured by the mind, I set to work to relieve him by that method.

The patient contended that the steel had not all been removed from his eye. Accordingly, I told him of a powerful magnet that could draw a piece of steel out of the eye from half-way across the room, and made elaborate preparations, calculated to prepare his mind. Three times a day I had him come to my office, and the nurse dropped a little boric

acid into his eye. There happened to be an electrician working around the place, and the patient was given to understand that this was in connection with installing the wonderful magnet that was to restore his sight.

At the end of five days he was told that everything was ready. Meanwhile I had borrowed a magnet for the occasion. I carefully placed the patient and explained that when he saw some red lights go on, across the room, the magnet would be working and his sight would be instantly restored!

That is exactly what happened. When the red lights flashed on, he exclaimed, "Thank God! I can see!"

We had bandaged the other eye so that he would know he was cured. Of course, the magnet was not connected with the electrical circuit at all. It was a pure case of building up his expectation and his faith. Anything else that would have made him believe he was going to be cured would have done just as well.

This chapter could be filled with the recitation of remarkable cures of hysteric blindness and deafness, not to mention paralysis. The various healing cults and all schools of medical practise have benefitted from remarkable hysteric cures. When the religious healers get hold of these cases they often effect such spectacular cures as to simulate miracles.

PSYCHICS AND HYSTERIA

A psychic complex is a community or constellation of brain cells which are functionally more or less related and associated. These so-called complexes or aggregations of thinking units are more or less coordinated and loosely organized into working groups and systems.

Some authorities look upon hysteria as a temporary dissociation of certain important complexes or groups of complexes. The consciousness of the individual is thus deprived of the coordinate and simultaneous directing influence of these distracted and diverted mind centers; and this derangement is responsible for that demoralized, disorganized, and incoordinate mental and physical behavior which the patient exhibits in a typical hysterical attack. Severe hysteria, according to this theory, borders closely on the phenomena of dissociation of personality, multiple personality, etc.

If we accept this theory of temporary complex-dissociation, it would appear that in the case of highly suggestible individuals, some all-pervading idea—now free from natural restraints and customary restrictions—sweeps through the mind and out over the body, completely dominating and absolutely controlling the organism. In its physical manifestations it is able to produce cramps, paralysis, and fits, while, in a mental way, the patient may become as one possessed of the devil. Or, on the other hand, she may establish herself as a spiritualistic medium or go forth in some noble and daring rôle, as did the heroic maid of Orleans.

It is now believed by most specialists in abnormal psychology that somnambulism is due to the dissociation of a group of complex systems in the field of consciousness. There is little doubt in my mind that the majority of trance mediums belong to this group. In the case of

many spirit mediums the dissociated complexes come to occupy the center of the stage and wholly to control the medium's flow of consciousness, completely dominating the talking, seeing, hearing, and thinking centers. For the time being, to all intents and purposes, the medium is a victim of double personality.

It is generally recognized by authorities on insanity that many of the noises and other hallucinations of the insane patient are due to dissociation. They seem intensely real to the patient, but to the on-looker they can but be regarded as figments of the imagination. It is unquestionably true, too, that in the case of many mediums we are dealing with a mental state that borders closely on the realms of insanity. But the recognition of this dangerous fact in no wise lessens the reality of the visions seen, or the voices heard, by the spirit medium. These things are all very real to the medium. They are dissociated portions of his own consciousness. That is, they are dissociated from the consciousness of personality, so that the medium does not recognize them as a part of his real self. Thus the dissociated complex can speak with its own voice to the medium's personality, and he recognizes it as something separate and apart from his own stream of consciousness, altho he is aware that it arises within his own mind or brain. This splitting of the patient's stream of consciousness into two parts, so that he holds continuous conversation with himself, is a phenomenon to be seen any day in an insane asylum.

That mediums should "see things" as the result of dissociation is not strange. It is a well-known fact that vision, owing to its highly complicated nature, is one of the most common functions to experience disorder in hysteria, and one that is most markedly influenced by any serious form of psychic dissociation. In fact, the eye is so subject to disturbances of a psychic nature, that it is possible, through mental or hysterical influences, to produce actual functional blindness.

It should be borne in mind that long-continued psychic conflict, as well as over-concentration of mind, may lead to complex dissociation in certain hysterical types of individuals.

HYSTERIA AND MEDIUMSHIP

Hysteria is a form of mental depression and nervous derangement characterized by "retraction of the field of personal consciousness and a tendency to the dissociation and emancipation of the systems of ideas and functions that constitute personality."

It is going to be neither a small nor an easy task concisely to define hysteria for the layman; in fact, hysteria is a disease about which we doctors disagree probably more than about any other common disorder to which human flesh is heir; nevertheless, I am disposed to attempt to define this interesting and unique nervous malady. As I understand it, hysteria is some disorder in the personality, occurring in hereditarily predisposed individuals who are highly suggestible, and who possess but a small degree of self-control. And just here is our difficulty in understanding hysteria—it has to do with personality, and that is a subject which none of us know much about. An eminent French physician once said that a definition of hysteria had never been given and never would be. Hysteria is a mental state—possibly a

disease largely due to cerebral insufficiency, manifesting itself in so many ways and producing so many diverse symptoms as to impersonate almost every known form of human illness. It is certainly true that a diseased and uncontrolled imagination plays a large part in the cause and conduct of this perplexing disorder.

Briefly summarized, then, hysteria is a nervous disorder characterized by lack of control over the emotions and over certain physical acts, by morbid self-consciousness, by perversion of sensory impressions, and by an extraordinary ability subconsciously to simulate the symptoms of numerous minor and major diseases.

Hysterical patients in a former generation were burned at the stake as witches. To-day they preside over parlor séances and perform as spirit mediums. And to-day, as in olden times, their performances are characterized by falsehood and duplicity as well as by a continuous series of impersonations. It should be remembered that hysterical women are not only able to simulate serious diseases of the body, but are equally gifted in psychologic legerdemain, in that they are able to impersonate, and otherwise make representations of, the spirits of departed human beings.

Speaking of hysterical temperaments, one writer (Tardieu) says:

A common feature characterizes them, namely, instinctive simulation, the inveterate and incessant need of unceasingly lying, without reason, solely for the sake of lying; and this, not only in words but also in action, by a kind of parade in which the imagination plays the principal part, gives birth to the most inconceivable incidents and sometimes proceeds to the most disastrous extremities.

So falsehood becomes the stigma of hysteria. Janet, under the term "retraction of the field of consciousness," summarizes and includes the three major stigmata of hysteria, namely, suggestion, absent-mindedness, and alternation.

While the causes of hysteria are many, there is usually to be found both an hereditary basis and some exciting physical cause. It is about equally divided between the two sexes. In the lower classes of society more cases appear among men, while in the higher social classes, women predominate. The disorder appears in all countries and all races, but the Latin, Slavonic, and Jewish races seem to be most susceptible.

TREATMENT OF HYSTERIA

When it comes to the treatment of hysteria, we must do everything possible to improve the patient's general health and nerve tone. After a careful examination and study of the patient, the physician should sit down and tell him the truth about himself. Of all the neuroses, it is most highly important that hysterics should develop a passion for the truth, a real and sincere desire to know the facts about themselves and then to face these facts with courage and determination. The one thing the hysteric needs and lacks is stamina, and all our efforts at treatment should be directed toward the development of stamina.

During an attack an effort may be made to divert the patient's concentrated attention, but while dire threats and other spectacular stunts may produce effects when artfully

employed, they soon lose their influence. It has been my experience that treatment is of little avail during an attack. I usually let the patient alone and do my reasoning with him subsequent to the hysterical spell.

The physical treatment of hysteria embraces general attention to good hygiene, proper physical exercise, fresh air, good food, and, if the patients are underweight, a modified form of the rest cure—employed early in the régime.

The mental treatment is all summed up in our attempt to explain the facts to them and to show them the real nature of their trouble, to assist them to isolate any exciting causes, such as love affairs, family troubles, unusual stress, as well as to help them in uncovering any hidden motive or long-suppressed emotion, which may be more or less concerned in the production of their hysterical spells. It is especially desirable that we should make an effort to search out, to isolate, and assist them in eliminating, any buried emotional experiences in connection with their early life, such as childhood frights, dreams, shocks, or emotional disappointments. And we must not overlook the value of diverting the patient's mind from herself to other people, such as helpless children, needy neighbors, civic enterprises, club work, and so on.

Many bothersome symptoms appear from time to time, chief of which is mucous colitis. This condition I have come to regard as being largely a nervous affair. Colitis of the simple variety is really a neurosis, one of the accompaniments of these neurotic states. In case colitis appears in connection with hysteria, I think it is best managed—after making proper dietetic suggestions—by giving a good dose of castor oil once a week, especially if the attacks persist for any length of time.

Since hysteria is largely a behavior reaction to maladjustment—a defense reaction to get away from some unpleasant situation—it is apparent that our first duty to the patient is to assist him in trying to adjust himself to his environment. Of course, sometimes we can make a compromise and try to change the environment somewhat to suit the likes and dislikes of the patient; very often, in fact, we work out a still further compromise in which the patient makes some changes and we also try to change the environment somewhat. This means, in reality, a process of reeducation, or what we sometimes call psychic and nervous reconstruction. The physician, before he gets through, finds that he is compelled to employ all the methods known to mental medicine, embracing suggestion, persuasion, instruction, and encouragement, not to mention inspiration and assurance on his part, coupled with the necessary discipline which enables these patients—after the real cause of their trouble has been fully explained to them—to indulge enough faith, hope, and courage to get well; and, on special occasions, our discipline may have to be extended far enough to embrace coercion, and, in some of the younger cases, even corporal punishment. In other words, anything and everything must be done that will help the patient to pry himself out of his habitual rut of fits and spells and enable him to get back on a basis of self-understanding and self-control.

Fortunately, most victims of hysteria are in a mental state bordering on the juvenile; they are, therefore, highly suggestible, and we should not fail to utilize this fact in planning the treatment; but great care must be exercised lest adverse suggestions be inadvertently dropped.

Physicians, nurses, and the family must be very careful lest a careless remark or some thoughtless suggestion start them off on new lines of worry and tantrums of fear. It is fatal for the physician to give expression to doubt or to be inordinately perplexed; for this reason, repeated medical examination should be avoided as far as possible. I make it a practise to go over such patients “with a fine-tooth comb” when I take the case—get to the bottom of everything, make out written reports—and then, unless something new and acute arises, refuse to examine them within six months or a year, confining subsequent efforts merely to such physical and mental treatment as they may need.

Let us remember to treat our patients for what they have—hysteria. If that is the diagnosis, then let us confine all treatment to the real trouble and not be led astray into treating a thousand and one symptoms which appear as a part of the hysteria phenomenon. The thing that is needed in these cases is one thorough examination, and then treatment directed to whatever is actually wrong; if the condition is one that is exclusively hysteria, then no other treatment should be given except that which is directed toward the cure of hysteria.

Commenting on the nature of hysteria and the method of management, Dr. Hugh T. Patrick makes the following helpful observations:

Now, our daily life is full of difficult situations; perplexities, disappointments, things that frighten us, things that disgust us; fights that we hate to make; labors that seem too heavy, problems we can't solve; luscious grapes beyond our reach; especially conflicts between our fundamental trends and the laws, edicts and tabus of the social cosmos. Some of us meet these manifold difficulties pretty well and an indulgent public calls us normal. Some of us can't or won't make this adjustment and we then are the unsuccessful, the unhappy, the cranks, the drunkards, the phobics, the hysterics; the dwellers in sanitariums; part of the throng that fills the reception room of specialists.

A perfect type of the psychoneurosis is (in most instances) ambulatory automatism: what the newspapers call amnesia. The patient suddenly disappears from his ordinary haunts, wanders about or settles down elsewhere under another name until, sooner or later, he has doubts about his name, realizes that he doesn't remember his past, is curious about his identity and, quickly or slowly, recovers. What has happened? *Such a patient has always run away from something.* For adequate reasons he doesn't abscond or elope or run away in the usual conscious way. He passes into a state of secondary consciousness and in that runs away. The secondary consciousness is his alibi. Hysteria is just that; or just like that. If it happened to suit the purpose of this ambulatory automaton, he might just as well have hysterical blindness or paralysis or fits or vomiting. For instance:

The right arm of a farmer's hard-working faithful wife had suddenly become paralyzed; apparently a stroke. But it wasn't that at all. Some weariness of her unending job; some, possibly well-founded, discontent with her husband; a little domestic friction; a little soreness in the arm; and the paralysis was a temporary way of settling all her difficulties. She didn't have to work, her husband became most affectionate and attentive; the entire family, not to mention neighbors, became solicitous. Life was easy, and relatively pleasant.

A young lady of eighteen had lost her voice three years before; since then she could speak only in a whisper. And during most of that time she had been making daily visits to a doctor's office for electric treatment. No results. What was the matter? A sensitive girl, a rather difficult situation at home, trouble in school, then a bad cold making her quite hoarse and suggesting loss of voice; and the partial solution of most of her problems by becoming voiceless.

LOOKING FOR SYMPATHY

Not long ago I ran across a very interesting case of hysteria—a woman some fifty years of age, with a family of five or six children, largely grown up but most of them living at home. Her husband was stricken with Bright's disease and he lingered along at the point of death for a number of months. There were trained nurses in the house, sometimes both day and night attendants, and of course this anxious wife and mother labored under a severe strain on her nervous system. She was naturally of a hysterical type. Many years before she had been bothered with hysterical paralysis, which had been almost miraculously cured by giving her treatments two or three weeks, at the same time assuring her that a cure would be brought about.

After several months of this stress and strain the poor woman must have subconsciously come to crave some attention for herself. At least, one afternoon she just up and swooned, fainted dead away, was apparently unconscious for more than twenty-four hours. The family was greatly excited; doctors and nurses were called; and there was a great hubbub. No doubt she was conscious of almost everything that was being said in her presence, and she gave every evidence of enjoying the attention she was receiving. The following day she gradually came to and began to take an interest in things. She inquired very minutely as to what had happened. When it was explained to her that she had simply been overdoing and had collapsed, she was entirely satisfied with the diagnosis. And when she asked when she could get up, she was greatly relieved when told she would have to remain in bed a week or ten days to rest. Within a few hours she became quite cheerful; was reconciled to her rest in bed; began to make inquiries about other members of the family, including her sick companion. She then expressed a desire to get up and look after his food, but when she was told she must carry out the doctor's orders and remain in bed, she was readily reconciled to her fate.

This is a typical illustration of what happens in hysteria, and it does not mean that the patient is a fraud. This woman was not at all guilty of consciously doing this. It was all a wicked conspiracy between her subconscious and the sympathetic nervous system. I do not mean to imply that certain slightly hysterical patients do not utilize these spells consciously for the accomplishment of their ends, even as spiritistic mediums may sometimes accentuate some of the symptoms associated with their experience of going into trances. Undoubtedly the hysterical girl often uses these spells to impress both her parents and her lover; but as a rule these blow-ups are not faked, the patient is not malingering. This is all genuine as far as they are concerned, and even the state of unconsciousness or partial consciousness which they enter into and during which they hear everything that is said in their presence, is not a "put on" affair; it is all a genuine part of the hysteric attack.

We are all entitled to regress now and then to the free and easy life of childhood. We all crave to get back to the play-life of our earlier years, and so we are entitled to our annual vacations, with their enjoyment, as well as our other periods of relaxation and merriment. We are all entitled to sympathy, love, and affection, as well as admiration and praise for the things we accomplish; but the way in which to obtain all this is not to have a hysterical fit; that is getting it by false pretenses. Rather, let us escape from the stress and strain of living

and the realities of a "hard boiled" world by our regular, natural, and legitimate play-life. Let us get sympathy, love, and devotion from our families and friends by developing a personality of poise, and exhibiting that degree of self-control which will make us beloved by all who come in contact with us. Let us honestly earn the sympathy of our associates, and then by means of application in our chosen path of life, let us act so as to merit their admiration. We can all learn to do something well—as well as the average, or perhaps even better—and this will entitle us to that distinction of attainment which we all crave, and which so many seek to obtain in an undeserving manner by means of hysteric spells.

EMOTIONAL IMMUNITY

Now we come to the case of a woman around forty-five years of age, who had unfortunately, fifteen years before, as the result of an infection, lost both of her ovaries, so that her neurotic tendencies were complicated by this endocrine disturbance. The giving of ovarian extract and other efforts to counteract her endocrine shortage afforded but little help. She had queer heart attacks, notwithstanding the fact that more than a dozen physicians had pronounced her heart organically sound. She seemed to be cheerful and ambitious, but attacks of weakness intervened; while taking a telephone message or writing a letter, she would have to stop in the midst of it. She would take to her bed and remain there for days at a time. She would implore us to find out the cause of her trouble. After many years of this she was persuaded to undergo a thorough examination, and, aside from being a trifle overweight, was found to be entirely sound. Much to her dislike, the doctors started in to explain to her the nervous nature and origin of her trouble; but she was an educated woman, and presently was converted to the idea that she was a victim of hysteria.

This woman is in the midst of her course of training, which is designed to provide emotional immunity. We are trying so to vaccinate her mind that she will be immune, emotionally speaking, to the various sensations and queer feelings that come into her brain from different parts of her body. This is the only thing that can save her from chronic invalidism, and she is progressing very favorably, notwithstanding the complications which are the result of the earlier surgical operation.

In this connection, let me emphasize the fact that many a neurotic reader of this book may just as well make up his or her mind to start right in on this program of acquiring emotional immunity. This is the goal which chronic hysterics must attain before they can hope to enjoy good health and reasonable happiness.

JUGGLING WITH CONSCIOUSNESS

BY this time, have I not made it clear that human consciousness is a tricky deceiver? Have I not shown how one's wishes and desires may lead directly to the juggling of consciousness and to the sinister manipulation of its elements? Let us take another and parting glimpse of the methods whereby one thus comes to practise deception upon one's own self.

Just as concentration of the mind will serve to focus the attention and thus narrow the consciousness, so will other environmental influences serve to widen or broaden the stream of consciousness. It may be that the peculiar and highly suggestive environment of the séance room, with its dimmed lights, soft music, etc., is of real psychologic value; first, to help the medium to broaden the stream of her consciousness, thus facilitating communication between the conscious and the unconscious; and second, to prepare the sitters more easily to draw upon their imagination and thus more readily and sympathetically to interpret and receive the purported spirit messages.

It has always seemed to me that the séance is most admirably planned and conducted for the purpose of encouraging, in every way possible, the free association of ideas and the favorable reception and recognition of the slightest impressions on the part of all in attendance. From a psychologic viewpoint it is well understood how important it is to facilitate free association, when it comes to the encouragement of imagination, fantasy, and experimental hallucinations. The ideal environment and psychic state on the part of both medium and believers would be that which would favor and facilitate the free and easy transference of the "feeling of reality" from one idea or emotion to other ideas and emotions. Thus we are able to recognize the monotonous quietude of the séance as being in every way favorable to dissociating the "feeling of reality" from the ideas in the forefront of the mind, and to reassociating it with the slightest sound or the faintest image that may pass through the mind, or which may be suggested by the medium as passing through her mind.

Unquestionably the séance room, as conventionally conducted, is in every way calculated to encourage the emergence of visual or auditory hallucinations from the realms of the unconscious. These no sooner appear than the expectant attitude of both medium and spectator disposes them early to transfer to these children of subconscious creation that "feeling of reality" which justifies the consciousness in its reception of these phenomena as a bona fide experience. Images become more real as external influences are decreased in intensity. The less the outside is allowed to intrude, the more will come from the inner consciousness, and vice versa. These hallucinations will not appear to all sitters at a séance as images. Many persons do not think pictorially—they think verbally.

FORGOTTEN EXPERIENCES

Under hypnosis we can resurrect in the patient's mind two distinct sorts of experiences:

1. Those of which he has at one time been conscious, and which in the waking state he will recall as being his experiences; that is, he will remember events, images, episodes, etc.

2. Those experiences of which he was never consciously aware, but which—as in the case of a recent happening—can be proved to have occurred, and thus to have been resurrected from his unconscious centers. I have in mind a case in which, under hypnosis, we secured the account of an experience in which the subject had heard a friend of his make a certain statement to a third person. This statement was very clearly and completely recovered from his subconscious mind during hypnosis. In the waking state he denied all knowledge or memory of it. In fact, he expressed a doubt that friend No. 1 had ever made such a statement to friend No. 2; but investigation proved that such a statement was made by friend No. 1 to friend No. 2, and made at a time when the subject was engaged in a telephone conversation a few feet away.

I could cite many cases similar to this, which prove that we not only conserve, in the realms of the unconscious, things which we once knew and have forgotten; but that we also hold there a great deal of material of which we have never been aware—it has dropped into the subconscious reservoir without ever attracting our attention. And how easy to understand that just such material as this could be brought up from the subconscious mind of the medium, and, further, that the medium would be sincere and thoroughly honest in regarding such strange material as a spirit communication!

Says Morton Prince:

We have also seen that coconscious processes may exhibit intelligence of a high order, and the same thing is possibly true in a less degree of unconscious processes. We found evidence showing that a conserved idea may undergo subconscious incubation and elaboration, and that subconscious processes may acquire a marked degree of autonomy, may determine or inhibit conscious processes of thought, solve problems, enter into conflicts, and in various modes produce all sorts of psychological phenomena (hallucinations, impulsive phenomena, aboulia, amnesia, dissociation of personality, etc.) We have seen how, by the use of experimental method of "tapping," and by hypnotic and other procedures, that this same autonomy can be demonstrated, manifesting itself by impulsive phenomena (writing, speech, gestures, and all sorts of motor automatisms) on the one hand, and sensory automatism (hallucinations) on the other.

TAPPING THE SUBCONSCIOUS

It has been scientifically demonstrated that the subconscious mind can hold, formulate, and subsequently give forth for expression, ideas, images, emotions, and associations of ideas, which have never been consciously recognized or entertained for one instant—even in the fringe of the personal consciousness. Never have these things been brought to the attention of the individual, so that in their subsequent upbringing from the subconscious depths they seem wholly foreign to the very mind that has just given them birth. That this is true is conclusively shown in the case of Mrs. Holland, who, both by automatic writing and in hypnosis, described things in her environment of which she was wholly unaware at the time.

In experiments of this sort, I have known subjects to recall events which had been read in newspapers, but read without sufficient attention to enable the critical consciousness to be aware of the fact. I have also known them to trace out, in the very depths of the subconscious mind, experiences which had been long forgotten, and which were produced as new creations in automatic writing or in trance speaking.

Again, in crystal vision, people see things as a new apparition which are but a resurrection, or a rehash, of images and ideas buried in the unconscious. Likewise, in dreams these buried and forgotten complexes are reproduced, and it is just such scientific facts as are being brought forth in profusion at the present time that enable us to offer, at last, a rational and scientific explanation for the so-called psychic phenomena of spiritualism and the endless vagaries of the psychoneuroses.

We are now in position to prove that the bulk of the information divulged by mediums as emanations from the spirit world are but an up-to-date translation of their own buried and forgotten experiences. And, strange as it may appear, we are using the very same methods every day in our medical offices to determine the secret origin of nervous disorders, worries, fears, hysterical paralyses, and a host of other neurotic disturbances.

The subconscious can also be tapped in some persons by means of automatic writing. Thus, if I hypnotize a susceptible subject, and suggest to her that after waking she will write certain phrases from the Bible, a certain poem, or a thesis on a given subject; and if, after coming out from the hypnotic state, her attention be diverted, and then we put a pencil in her hand, she will write exactly as she has been instructed to write; and yet a thorough examination will show that her conscious mind knows nothing of the instructions given to her while hypnotized; in executing her automatic writing she has no thought that she is doing so in obedience to a command. Here again we have the scientific evidence—actual proof—of the conservation of our experiences in the unconscious mind, and of their ability subsequently to escape in an intelligent and orderly fashion.

TRANCES AND CATALEPSY

In the cataleptic state, consciousness is diffused; it seems to be pushed far out toward the periphery and to be at a dead level of intensity. The mental life is largely in the dim marginal state. The physiological processes of the body are slowed down; in fact, they come to assume conditions very much like those which prevail in the hibernating animal. The body may become stiff—absolutely rigid. It is in this condition that the great trance mediums of history and of the present time usually are found when they receive their extraordinary revelations and see their wonderful visions.

It is not uncommon for persons in a cataleptic trance to imagine themselves taking trips to other worlds. In fact, the accounts of their experiences, which they write out afterward, are so marvelous as to serve as the basis for new sects, cults, and religions. Many strange religious movements have thus been founded and built up. It is interesting to note that these trance mediums always see visions in harmony with their own theological beliefs. For

instance, a medium who believed in the natural immortality of the soul, was always led around on her celestial travels by some of her departed friends. One day she changed her religious views—became a “soul-sleeper”—and ever after that, when having trances, she was piloted about from world to world on her numerous heavenly trips by the angels; no dead friends ever made their appearance in her visions after this change in her belief.

Nearly all these victims of trances and nervous catalepsy, sooner or later come to believe themselves to be messengers of God and prophets of Heaven; and no doubt most of them are sincere in their belief. Not understanding the physiology and psychology of their afflictions, they naturally come to look upon their peculiar mental experiences as something supernatural, while their followers blindly believe anything they teach because of the supposed divine character of these so-called revelations.

For more than twenty-five years, I have been a careful observer of many different persons who were trance mediums, and who exhibited these peculiar psychic and physical phenomena in connection with dreams and visions. More than four-fifths of the individuals studied—they have numbered more than a score—have been women. It seems that both the nervous system and the endocrine or ductless gland system of the female lend themselves more readily to these phenomena. I am slow to believe that the spiritual forces of the universe visit the female of the species more frequently because she happens to be a more highly spiritualized creature; I am inclined toward the belief that the phenomena in question are due to the posterior pituitary body and other factors of an endocrine or chemical nature, which directly serve in subjecting the nervous system of the female to periodic upheavals and disturbances of both a psychologic and physiologic nature. I have never yet observed these phenomena to survive the menopause.

I desire to make it distinctly clear that I am not, in this discussion, calling in question or challenging belief in the validity of true prophets, either of ancient or of modern times, who may have been in actual contact with the spiritual forces of their day and generation. I am not desirous of either raising or discussing that question at all in this thesis. I, for one, am perfectly willing to admit that such divinely taught persons may have lived, or may even now live; but I am equally desirous of making it plain that it is my opinion that the vast majority of those who have made such supernatural claims were either out-and-out frauds or self-deceived individuals, who, in their ignorance of things psychical, actually believed their spells, visions, or visitations to be of divine origin. As far as my actual experience goes—as far as I have personally been able to test and observe those who have seizures or experiences of this sort—I have not yet met with a case in which I could not, after a thoroughgoing examination, discover certain psychic, chemical, and physical influences which quite fully accounted—at least to my own satisfaction—for their extraordinary behavior.

Perhaps this statement should be qualified by adding that there are possibly one or two exceptions to this general classification of so-called psychics and trance mediums. Many years ago I was made acquainted with a very extraordinary phenomenon of this sort, which it has been my privilege to observe periodically from that time to this, and some day I hope to report more fully upon this unique case; but I hasten to say that in none of my observations of this

individual and the peculiar associated experiences of the night period was there ever anything that pointed toward spiritualism. In fact, the contacts of this individual with the alleged forces which dominated at such times, whatever they were, were always in a most positive manner antagonistic to, and condemnatory of, all beliefs or tendencies associated with the idea of the return of the dead to participate in the affairs of the world of the living.*

SPIRITISTIC TENDENCIES

But what is the actual influence, the net result, upon the popular mind, of these visions, trances, and other similar manifestations? It must be evident that in the main they are bound to contribute to increasing credulity on the part of the common people, and to lead to a deep-rooted belief in the idea that spiritual forces hovering over us are able to set aside certain suitable and favorable types of individuals to use as mediums and thus to communicate with the living.

Upon persons untrained in the methods of the laboratory, these trances and visions cannot help but make a profound impression. To such minds they constitute conclusive evidence of the existence of spiritual forces operating upon, and through, physical beings; and when these phenomena become associated with the propaganda of the belief in the ability of the spirits of departed humans to communicate with the friends they have left behind among the living, the cause of spiritualism has gained its most powerful ally. And even in cases where such manifestations are not directly allied with spiritualism, their real influence upon the public mind is naturally in that direction.

CRYSTAL-GAZING AND SHELL-HEARING

Among the psychic delusions of the recent past which persist even to the present hour are to be found the practises of crystal-gazing and shell-hearing. Certain persons with unstable nervous systems, when they have long gazed intently into a crystal, become, in a measure, auto-hypnotized. In such a state, groups of thoughts may be transmitted from the marginal consciousness to the central consciousness, with such a suddenness and vividness as to impress the crystal-gazer with the idea that they originated in the external world. These thoughts are suddenly projected outward and take hold of the semi-hypnotized inquirer after the fashion of an ordinary hallucination. That is, the crystal-gazer has his subconscious images apparently projected into the crystal, so that he sees pictures and other things, which, in his ignorance, he believes originated and actually exist in the crystal.

The old practise of shell-hearing is an instance of this same sort of reversion of psychic behavior. In this case voices originate in the marginal consciousness (the subconscious mind) and are projected outward into the shell, and thus the listener experiences auditory hallucinations. Crystal-gazing and shell-hearing are analogous to automatic writing and speaking, which have already been considered.

* See Appendix.

In crystal-gazing we may also have transference of sensory impressions; that is, something once heard may be transferred in the memory centers from the auditory group to the visual. This is well illustrated by a case reported by Dr. Morton Prince. On looking into a crystal, the subject read some printed words—a cable-gram which she had previously, but unconsciously, overheard being read. The words were, if I recall correctly, “Best wishes and a happy New Year.” Now, this woman actually saw those words while gazing intently into a crystal globe. The words, as such, in the cablegram, had never been seen by her; but she had recently heard them, and in explaining what actually occurred, psychologically speaking, Dr. Prince offers the following suggestion:

The antecedent auditory perception manifested itself in consciousness *after an interval of time* as a visual hallucination of the words. There was a reproduction of the original experience but not in its original form. It had undergone a secondary *alteration* by which the visual perception replaced the auditory perception. As a memory it was a conversion or *translation* of an auditory experience into terms of another sense. Now the conversion must have been effected by some mechanism outside of consciousness; that is to say, it was not an ordinary visualization, i.e., intensely vivid secondary images pertaining to a *conscious* memory, as when one thinks of the morning’s breakfast table and visualizes it; for there was no conscious memory of the words or knowledge that there ever had been such an experience. The visualization therefore must have been induced by something not in the content of consciousness—something which we have called a secondary process, of which the individual is unaware.

Like automatic writing, the crystal vision can be cultivated by certain individuals with unstable minds and nervous systems. Sitting down before the crystal encourages the shifting of the border consciousness, and facilitates the transference of its content into symbols of vision. This whole practise is nothing more nor less than visual hallucination; other psychic souls can indulge such experiences without the aid of the glass ball. They are able to turn the mind adrift and see these visions at will. And in the case of certain forms of insanity, of course, it is this very sort of hallucinatory vision that has taken possession of the brain and goes on grinding out these hallucinations without end.

In crystal vision, the subconscious is being more or less deeply tapped—at least it is being superficially drawn upon—and the crystal or other object used is an artificial aid to the concentration of the attention. It also probably serves, indirectly, as a suggestive influence.

MEMORY ABNORMALITIES

Animals without an associative memory are not given to worry, for worry is chronic fear; and it is highly probable that the defective functioning of memory is sometimes more or less responsible for the initiation and accumulation of our neurotic fears.

The psychologists are in the habit of recognizing four different kinds of abnormalities which characterize memory, and they are:

1. *Imperfect impression*—This occurs when the sensory stimuli are very slight or when the attention is distracted. Anything which tends to lessen the intensification of the sensory impressions or their emotional accompaniments has to do with lessening memory.

2. *Imperfect retention*—It is well known that even our most profound sensory impressions are sometimes imperfectly retained. This is more especially shown in those cases of accidents in which, after recovery, an individual is unable to recall things which happened immediately before the accident.

3. *Abnormal reproduction*—In other cases, altho the content of the memory is normal, the patient is unable properly to recall past events. This amnesia may be more or less complete. The entire past life of the patient may be for the time wiped out. In other cases there appears to be a local dissociation, so that memory is lost only for a certain time and for certain things. This is well illustrated in the case of hysterical paralysis. The patient for the time being has lost the memory of how to move the supposedly paralyzed arm.

4. *Defective memory due to disturbance of recognition*—We have four groups of memory disturbance belonging to this class:

a. Those cases characterized by complete failure of memory of the illusion of “never having seen.”

b. The illusion of having already seen. I have had this experience a number of times in viewing natural scenery or upon first visiting a town, experiencing very definitely the impression that I had seen these places before.

c. Distortion of memory—getting the imagination mixed up with the factual details, as is so commonly illustrated by the tendency to make agreements between telepathic experiences, spiritistic séances, etc. There is a very definite tendency to get fictitious details woven into the narrative of facts.

d. Retroactive memory. Hearing about things that happened before you were born, and then attaching them to your memory complex, so that later on you actually think you remember these events. I very well remember recalling a flood experience in my youth; but in adult life investigation proved it happened a year before I was born; it had been so vividly related during my babyhood that it became confused with my memory of real events. It is also highly probable that we indulge in fantasy and then subsequently get these images scrambled with the realities of living, all of which tends to confuse us afterward when we attempt to recall these memories.

SIMPLE PARANOIA

WHILE in a general way paranoia is recognized as belonging to the psychoses—the insanities—there are many important forms of this disorder which are worthy of consideration in connection with the study of the neuroses. Paranoia is sometimes associated with a mild type of dementia præcox, and it no doubt can exist as a mental condition separate and apart from other psychic disorders.

In paranoia the unfortunate victim is living a fairy tale—not simply reading about it, or telling it. A study of the technique of the subconscious serves to afford a better understanding as to the origin of both the delusions and the hallucinations of paranoia. In the previous generation, hallucinations were regarded as one of the diagnostic earmarks of insanity; but many students of these problems no longer hold this view. I am meeting every few weeks in my office, nervous individuals, sensitives, psychics, mystics, and hysterics, who undoubtedly have hallucinations, either auditory or visual, and sometimes both; yet careful study of these people would hardly warrant us in classifying them as insane.

I meet with individuals in whom I can induce or suggest these hallucinations of hearing and vision by experimental means, sometimes not going so far as to put them in a state of hypnosis or even of hypnoidisation, which is a sort of vestibule or antechamber to the deeper state of hypnosis. Crystal vision, as already considered, is little more than a suggested visual hallucination. From an experimental standpoint, visual hallucinations are much more easy to suggest or induce than auditory hallucinations.

Both visual and auditory hallucinations are common in connection with highly emotional experiences and sudden religious conversions. It is not uncommon for hysterical subjects, under the stress and strain of religious excitement, to see visions of Christ and the angels, and to hear spirit voices and recognize the Divine call. This same sort of religious intensity and conscientious devotion, in connection with the mechanism of the unconscious, needs only to be focused upon spiritualism—to be dedicated to the task of communicating with the dead—and the stage is set, the machinery provided, for the production of all the subtle and spectacular phenomena which characterize the psychic manifestations of mediumship.

THE PARANOID TENDENCY

We have given considerable space to the technique of projection, and attention should be called to the fact that in paranoia we have present the opposite condition, that of introjection. Introjection means that the patient is possessed with the mania for ascribing a personal meaning to everything going on about him. The paranoiac, as he walks down the street, thinks that everybody is talking about him and casting significant glances toward him. Street noises, noises in the kitchens of restaurants—all the things that happen about him

during the day's work or in places of public entertainment—he believes are directed in some subtle manner toward himself.

Paranoia is, after all, a sort of return to the infantile state of mental existence—that state in which the individual believes himself to be the center of the universe. There is, along certain lines, more or less complete regression from adult life back to the infantile mental status. All normal individuals are accustomed to revert more or less, periodically, to the state of childhood; but we do it in our ordinary play, in our week-end diversions and annual vacations. This is a natural, restful form of regression; but in paranoia it becomes exceedingly distressing when an individual feels that everything that is going on in the world about him is centering about his personality and has something to do with his happiness—or more especially with his unhappiness and psychic torture.

When paranoiacs begin to get tangled up in their thinking, when they begin to suffer persecution at the hands of various persons or groups, they naturally—being fairly sane in all other directions—try to figure out why they are thus tortured and persecuted. And they are usually able to discover what seems to them to be a satisfactory explanation of it. In the olden days a great deal was ascribed to telepathy. Paranoid sufferers maintained that people were telepathing disagreeable thoughts to their minds, or that other individuals were stealing their thoughts and knew everything that was going on in their minds. The more recent radio vogue has given these patients a cue, and they now maintain that their minds are receiving stations for the undesirable emanations from numerous other minds.

While paranoia is one of the most common forms of dementia præcox—there being at least three other forms—it is also found in other conditions. We see many of these cases which really get well, and it is this type that I am most interested in describing—cases that we might denominate *simple paranoia*.

PERSISTENT DELUSIONS

When an otherwise apparently normal mind picks up a delusion which it holds on to persistently, or when this individual describes hallucinations which you cannot reason with him about, we call the condition paranoia. These delusions and illusions, when they become fixed in the mind, are almost always associated with suspicion, persecution, or some dominant or grandiose idea. If we make a diagnosis of simple paranoia we presuppose there is no dementia. I must admit that in this pure form paranoia is a rather rare disorder—that marked cases of paranoia are usually associated with a more general psychic condition which we commonly call dementia præcox.

Having arrived at a fixed point for their delusions of persecution, these paranoiacs begin to ransack their memories of past events for experiences which could serve as possible explanations for their persecution; in this way they sometimes dig up secondary delusions, coming to regard themselves as supermen, or as emissaries of God, and offering this as an adequate explanation of their persecution.

Sometimes the paranoiac will endure delusions of persecution for weeks and months, or even years, in silence. I knew of one who had gone along for months, working in an office

under the delusion that he was being spied upon and followed and otherwise harassed by his fellow workers, but never giving intimation of his feelings until one afternoon he turned around to the man at an adjoining desk, and, figuratively speaking, "knocked him into the middle of next week." Whereupon he went over to the closet, got his coat and hat, and walked out of the place. This is the only time this man has ever shown any tendency to become violent, tho he has been bothered for two or three years with these delusions.

Patients of this kind are running around loose among us in large numbers. They are sometimes spoken of as being slightly "cracked," a little bit "off," "cranks," and so on. When but mildly afflicted they are often found vigorously functioning as members of anti-this or anti-that, or pro-this and pro-that, and aside from being just a bit one-sided, not very well balanced, they are quite normal.

Other mild cases of this disorder manifest themselves only by an inordinately quarrelsome tendency; these people, when opposed, are liable to become violent, and not infrequently they attack some innocent person whom they have come to believe to be among those responsible for their miseries. Or perhaps they suddenly plunge into protracted litigation in court over some trifling incident. The quarrelsome type of female belonging to the paranoid group is a dangerous individual and not infrequently prefers serious charges against innocent citizens.

Paranoia is probably due to a working association between a group of powerful but perverted complexes, and experience shows that when it is not a phase of dementia præcox, or when, in case of dementia præcox, the underlying condition is comparatively slight, much can be done to help the patient out of his troubles.

Paranoia also seems to be the possible accompaniment of another form of insanity known as manic-depressive psychosis, and in this case the paranoid state is sometimes found in association with depression and at other times with exaltation.

ILLUSIONS AND HALLUCINATIONS

Hallucinations are common in association with fevers and acute alcoholism. In the alcoholic victim they are very real and are able thoroughly to terrorize the patient. In cases of paranoia the danger of using drugs to overcome hallucinations should be emphasized, tho we do occasionally, as a last resort, put these patients under the influence of non-habit-forming drugs for several weeks at a time in an effort to break the train of thought in the mind and help them to find themselves. I have seen this plan work to great advantage. Several years ago a man from a western state came to Chicago, thoroughly incapacitated for carrying on his business, having for more than six months been leading a life of abject fear. He was terror-stricken over the idea that a group of men had entered into a conspiracy first to mutilate and torture him and then to murder him. The foundation for this fear was a trifling incident in his early life, before his marriage. He had, through failure to understand the character of a certain young woman, just about become engaged to her; but, learning more about her, he had broken off all relations. The young woman had an older brother, who

became very angry over the affair, and threatened violence to the young man. Although twenty-five years had gone by, when, as the result of both overwork and overworry, this man became a little run down, that old fear came back into his mind, and it required only about six weeks for him to become literally obsessed by the idea that the girl's brother had organized a vast conspiracy. He admitted himself that no less than one to two thousand people were involved, and he actually saw himself being followed and even chased by all these people. The police force of his home town and the civil authorities of his State, he felt, had all entered into this conspiracy to "get him." It was pathetic to hear him talk. His sufferings were intense and no amount of reasoning had any influence on him. I have many times seen the use of quieting drugs fail in such cases, but in this particular case it was a complete success. Six weeks in the hands of doctors and under the careful supervision of a day and night nurse, brought such a change in this man's thinking, so arrested the current of his thoughts, that when he waked up and came back to normal living, he was practically delivered from his delusion.

I regard this case as one of simple paranoia. The subsequent performance of the patient goes a long way toward establishing the fact that his was not a case of dementia præcox, at least not as we ordinarily see it. Of course, time will be required to see whether or not there is any return of his trouble; but observation of a number of the milder cases of paranoia leads me to believe that some of them are really curable if the patients are properly instructed and come to understand themselves.

It should be explained that the man whose case we are discussing was not finally cured of his delusion until he was, after being greatly improved, taken back to his home town and there, through the cooperation of his family physician and friends, brought face to face with many of the supposed arch conspirators in the plan to harm him. When he found them back at home instead of out on this mission of persecution, he went right out and called me on the long distance telephone, saying: "Dr. Sadler, you are right. You are dead right. I am convinced, and completely convinced, that nobody has been trying to harm me. This is all a notion I got into my head, and I am glad to be delivered from it. You watch my smoke. I am going back on the job to-day, and I am not going to make my wife or anybody else any more trouble." And he hasn't. He has been behaving perfectly from that day to this. We were frank with him throughout. The facts of his case were fully explained to him; the psychology of his condition, the tendency of the complexes that form, and the technique of his deceiving himself and leading himself into believing that his delusions were real—all these matters were fully explained to him; he has been instructed, also, that if there is any tendency for this condition ever to recur, he is to report immediately to his physician.

I believe that these hallucinations sometimes originate in night terrors, and we must not confuse paranoia with the anxiety neurosis on the one hand, or with the anxiety and apprehension of hyperthyroidism—goiter disturbances—on the other.

Sensory illusions are commonly met. We can amputate a cancerous leg, and yet for weeks or even months the patient will go on complaining of pain in the amputated limb. The nerves going up from this former member were so habituated to carrying up painful impressions and

then carrying them back to be experienced in the diseased leg, that they go right on doing this even after amputation. In another case we may have illusions as the result of some defect in the function of the ordinary sensory mechanism of the body. The real difficulty in the case of illusions is not that patients have them, but that they are often unwilling logically to check them up and then disbelieve them. The mechanism for producing them is present with all of us, and doubtless we have had passing illusions from time to time; but we wake up and snap out of our day-dreams instead of becoming victims of them.

An illusion is nothing more nor less than a false perception concerning an objective reality, while an hallucination is a more serious perception-like process working in the mind and having no external object or source as its basis.

The most common hallucinations met with in paranoia are auditory. The patient hears voices speaking to him. Another type, not so often met, is that of the so-called audible thinkers. The patient complains that his thoughts are so loud that everyone near is able to hear them, and his belief in this fact is very distressing.

Visual hallucinations are not so common in paranoia, altho we meet with cases now and then where they say they see many queer things. One man complained of seeing small human beings everywhere, about six inches tall.

Skin hallucinations are very common. Who has not felt pricking, tingling, and other queer cutaneous sensations—perhaps of bugs crawling on the skin? I remember the case of a patient who spent thirty minutes every night brushing off the sheets in order to get the sand out of the bed (later it was bread-crumbs). She believed it was there—it was very real to her.

Smell and taste illusions are also commonly met with. They usually are described as smelling unpleasant odors—occasionally pleasant perfumes. Still rarer hallucinations are those of sensations of flying; of having lead in the stomach; or of having a hardened head, as if made of wood.

When the hallucinations of the paranoiac become associated with the idea of persecution, they often produce profound depression, and sometimes even terror. We can imagine something of the suffering of these unfortunates by recalling our own fright at the time of waking immediately following some nightmare.

It is hard to tell just how many of the extraordinary characters of history were paranoiacs. Mohammed heard voices; even Martin Luther, on one occasion, threw an inkwell at the devil he thought he saw in his study; Joan of Arc certainly heard voices. It would seem that Columbus, Napoleon, and Cromwell all had experiences of this character.

I have a patient who is terribly distressed because he thinks people are constantly talking to him or about him. He would not leave his room were he not forced by hunger to go out in quest of work. Automobiles that pass the house carry people whose remarks come in to him, and he is sometimes in a rage as the result of the uncomplimentary comments he thinks he hears them make.

Our more common hallucinations are the seeing of bright zig-zag lights when the eyes are shut, seeing stars and other unreal things. These conditions are commonly associated with nervous sick headache and are usually in no way indicative of either paranoia or insanity.

Some mild forms of sensory hallucination are due to a disturbed condition in the eye, ear, nose, or other sensory organs; but these rather deserve the name of pseudo-hallucinations, because the normal person quickly checks them up and throws them out of court as unwarranted and foolish—as sensory deceptions. We also have queer sensations and experiences bordering on hallucinations, in the twilight zone just before falling asleep, or between the time we begin to awake in the morning and the point where we fully regain consciousness. Even in our dreams, things become twisted so that rain on the roof is converted into beautiful music.

The real secret of this whole hallucination business, of course, is the dislocation of that floating attribute of consciousness which we call the reality feeling. In paranoia the reality feeling becomes attached to something which is not real, and then we find the patient is not open to reason—will not listen to reason on this point as he does on almost every other point. So the possible causes of paranoia, aside from its association with the insanities, are to be found by looking for organic changes or functional disturbances in some of the organs of special sensation. The trouble may often be found in an organic change in the brain itself, or in the central nervous system. In other cases a mild form of paranoia may come on as the result of imperfect development in the technique of forming nerve patterns or memory designs and association centers in the brain. It may also be possible for paranoia to come on as the result of some highly specialized and terrific drive of energy, due to some wish which has been imperfectly suppressed or incompletely controlled by elimination or sublimation.

ILLUSTRATIONS OF PARANOIA

Several years ago a young electrical engineer, twenty-eight years old, came in complaining that a certain great religious organization was engaged in persecuting him. The purpose of the conspiracy, he declared, was so to distress him that he would do something violent, get arrested, and be committed to prison. It required almost six months to talk him out of this idea, to convince him that this organization must be engaged in more important matters than following him up; furthermore, that if its tens of thousands of members had wanted to “get” him, they could have done so long before. Finally, he gave up this notion, but in less than two weeks he had a new one. His new obsession was built around the idea that there were many people in the world who took fiendish delight in being cruel. He had been reading psychology at the public library, and had decided that he had become the butt of all the people who enjoy seeing other folks suffer. He explained that he had a very sensitive mind which acted as a telepathic receiver (he had found sufficient support in scientific literature to warrant his believing in telepathy), that all the vulgar, belittling, and oft-times obscene thoughts which came pouring in upon him were put there by hostile men and women who enjoyed seeing him tortured by being made the dumping ground for all this unpleasant mental material. This delusion lasted for almost a year. I am sure I never would have stuck to the case with any hope of helping the patient had it not been for the importunities of his wonderful mother, who would never listen to the advice of his medical advisers that the case be given up as one

of paranoid dementia præcox and that the lad be committed to an institution.

He did get better. He began gradually to improve, and it is a pleasure to report that he finally come to the place where he said: "Doctor, I am going to believe you. You must be right. I don't seem to be getting much better, but I must be wrong. At any rate, there seems to be more evidence against me than for me. You ought to know your business as I know mine as an engineer. You tell me this is in my head. I have tried to believe it. It is hard for me to accept it, but logic is on your side. I am going to do my very best to act on your diagnosis from now on." And in a recent letter to his mother he says that the "activity," as these patients so often designate their trouble, continues, but in less degree. He is not free from it yet, but is greatly improved. He has gone back to work and is doing well. In fact, he was at work the larger part of the time he was under treatment.

This is a borderline case of paranoia, and I presume we are not warranted now in trying to settle the diagnosis, but rather should wait and let time tell whether he has been cured of paranoia, or whether he is merely experiencing a period of improvement in connection with a more serious mental and nervous state.

Not long ago I met a business man from the East who had some trouble about fifteen years ago with a competitor, and this competitor, when he last saw him, threatened to get even with him some time. The man worried over this threat for years, and at length, while traveling from New York to his home town, he fell ill after eating a meal in the dining car. The thought suddenly flashed through his mind that he had been poisoned, that his former business enemy had at last gone into action, had gone out to "get" him, as he put it.

Two years have gone by, and he has not ceased to entertain the idea that a vast number of conspirators are working to poison him. He will not eat food as it is ordinarily served in hotels and restaurants. He will not buy food except in the original package, and then he goes out to pick it up in the open market where it is being sold to the public, and is very careful about the first meal out of a package of crackers, or from an original box of cheese. He has numerous digestive upsets as the result of all this, and he explains them all by declaring that someone has "got" him again. I showed him one day that his enemy must be spending no less than five thousand dollars a day to carry on this vast network of conspiracy, but he believes that his former business competitor has been able to enlist vast resources in this work of "getting" him. A year and a half ago he left home, deciding that his wife was so unsympathetic with his predicament that she must have sold out to his enemies. He has not since been back to see his wife and three children. He is a very efficient man, and by working a few weeks now and then makes enough money to keep body and soul together and pay for a cheap room; but sooner or later there comes a digestive upset, and he has to flee that section and go five hundred or a thousand miles away; and in the end his enemies always find him. They have a vast network of spies observing him—and so on.

When this man came to Chicago to see me he carried some cheese and a loaf of bread with him, which he ate for a day or two; then for another day or two he refrained from eating. A ten days' examination showed him to be sound physically; and all his mental tests, his psychic observations, showed him to be all right in every way, aside from this delusion. But

he disappeared suddenly. He had ventured to buy some food in Chicago, and after eating it in his room, had become slightly nauseated; so he decided that “they” had located him again.

I am reciting this patient’s sufferings and wanderings merely to illustrate what paranoia really is. Simple paranoia is nothing more nor less than monomania—getting some absurd idea in your head; you are all right on everything else, but this one idea persists in the mind. It is a glorified compulsion neurosis, an obsession raised to the *n*th power, which comes so thoroughly to possess the mind that reason and judgment are of no avail against it.

I presume many of our queer freaks in society belong to this order. I had many a talk with the late John Alexander Dowie, the great healer who came from Australia and founded a religious settlement just north of Chicago. I haven’t the slightest doubt in my mind that Dowie really believed in himself. He was a victim of paranoia. When he stood up in the Auditorium in Chicago on Sunday and announced that he was Elijah the Prophet, reincarnated, my own opinion is that he was sincere—he really believed it.

I have a patient, a man who is well up in the insurance world, who is developing paranoia. His wife brought him in a few months ago and said he was nervous, restless, anxious, and worried. One Sunday afternoon she had coaxed him into telling her his troubles, and he had explained that, owing to a little business mistake he made about three years ago, one of his business associates had started in to “get” him. Of late he thinks of nothing else, talks of nothing else at home, and when away from the office he pays attention to little else than this conspiracy which is ever widening—more and more people are joining it—until he has now developed a very definite paranoid reaction. His wife and I both have made careful inquiry about his business connections, and have convinced ourselves that there is no more trouble or friction with his associates than would be found in any large corporation. He has agreed to submit to teaching and treatment, and as his case has been taken in hand early, with good health and otherwise sound mental state on our side, we have every reason to believe that he can be reeducated to see that his fears are without a real foundation.

And so the story goes on with paranoia, one case after another coming in, apparently all right in every way, mentally speaking, except on some one point, the domain of monomania. In business, in religion, and in various other realms we find these people going astray; and, of course, in connection with dementia præcox we find a whole group of them; but it is not my intention in this work to discuss the insanities.

In efforts to prevent the development of latent paranoidal or other nervous tendencies, it is highly important to curb all tendencies toward excessive suspicion, queerness, and sensitiveness, as well as any inclination to indulge in undue fault-finding. Early in life, individuals who give evidence of being potential neurotics, hypochondriacs, or paranoiacs should be thoroughly studied by means of emotional analysis, and should be put through a course of systematic psychic training, designed to bring about such reconstruction of their personality behavior as will enable them to avoid the full development of these undesirable tendencies.

SPIRITUALISTIC MEDIUMS

THE psychologist tells us that “we tend to believe in those things which we desire.” Belief is said to be merely the expression of our deep-seated and instinctive desires. As one author says: “It is appropriate to consider the nature of the motives which impel men to believe in survival and in communication with those personalities who, as they believe, in some spiritual or other state, survive death.”

The waves of spiritism which periodically sweep over society are concerned in the gratification of certain deeply rooted instincts and unconscious wishes. We do not need scientific proof for a thing we wish to believe—we just naturally believe it.

LOOKING BEYOND THE GRAVE

It is difficult for us to give up our loved ones. We become attached to our fellow mortals, and we shrink from the very thought of parting company with them forever. The spiritualists are endeavoring to live over again the life companionship of their departed friends and loved ones. In their fantasies and dreams they see them again about the house, and with them traverse the old familiar paths and roads, while in imagination they hear their voices, and feel the handclasp and embrace of those long since departed. They resurrect the love letters of former days and read and reread them. After our loved ones leave us, we, in our own concept of their characteristics, endow them with many beautiful qualities which they but faintly possessed when on earth, and we allow to fade out of our memories those disagreeable traits which we were wont to recognize as a part of their personality when they were with us. We collect their photographs, place them on our dressers and walls, and thus seek to keep the memory of these dear ones alive in our minds. When we are thus able to visualize the departed, it does not seem strange that the human mind, with its creative imagination, should dare to go one step farther, and seek actually to hear the voices—actually to communicate with the spirits—of those who have left us.

There is a persistent determination, on the part of most people, to cling to their dead; they simply will not let them go. This state of mind is reflected in the behavior of many persons who throw their arms about the departed ones at the funeral rites with violent weeping, clinging to their lifeless forms to the very last moment. It is not strange, then, that after the form of clay has been laid away in the cemetery, intelligent beings begin to ask concerning their deceased loved ones: “Where are they? What are they doing? Can they come back to this world? Do they come back? Do they know what we are doing? Do they know how much we miss them?”

It is only natural that a curious and speculative human brain should indulge such thoughts. And as the world of to-day asks itself these questions concerning the departed, the

answer seems to be coming back in a flood of spiritistic literature and a deluge of spiritualistic performances.

The shelves of the bookshops are heavy with the writings of those who claim to have been in communication with the spirits of the dead. Serious claims, even preposterous pretensions, are made by the mediums, the high priests of modern spiritualism. If we do not attend the séances of our favorite medium, we experiment with the ouija board. If it is not clairvoyance that we dabble in, then it is through the avenue of psychology that we seek telepathic communication between the minds of the living.

COMMUNICATING WITH THE DEAD

The average person, having passed through some sorrowful bereavement, craves satisfying assurance that his loved one has only passed on to enjoy the pleasures of a better world. The bereaved soul is tortured by anxiety and uncertainty, and craves that which will demonstrate and prove that his loved ones have survived death—that they enjoy consciousness beyond the vale. How eager is the bereaved to catch a glimpse—to discern even the faintest glimmer—of the light that would testify to life beyond the tomb! This is not strange, since we recognize the almost universal belief in a future life. Why should not those of us who remain behind desire to know where our loved ones are, what they are doing, whether they are in this world or another? The answer to these questions can be found only in the guidebooks of the revealed religions or in the messages of the séance room. Science offers us no proof of existence beyond the grave.

To just the extent, therefore, that men and women drift away from their belief in the theologic teachings and dogmas of their family church connections, they are likely—if they do not meanwhile develop an independent philosophy concerning such matters—to become ready and willing experimenters with spiritualism in their effort to solve the problems of an unseen world and a future life.

We are all desirous of knowing whether we shall meet and recognize our friends and loved ones on the other side. We would like to know if there is a social life and a communistic enjoyment among those who have departed this sphere. Are they joyful and happy in their inter-association, after the fashion of beings on earth, or are they lonely and engaged—in some segregated portion of the universe—in atoning for their misdeeds here, or in efforts to attain new heights of spiritual development? These and many other questions throng the minds of mortals and clamor for an answer; and as long as they are there, spiritualism will have an excuse for existence—and an opportunity to deceive and to delude.

Of course, certain stoic minds of long scientific training may, like Huxley, assume the “agnostic” attitude, and manifest but a minimum of interest in what is going on in the world beyond. But even so great a mind as Huxley’s wavered in the presence of that sorrow which attended the loss of his child. In replying to a letter from Charles Kingsley, Huxley sought comfort by indulging in faith and hope to such an extent as to express belief in the “ledger of the Almighty.”

There are, then, three sources from which we can look for an answer to our desire to communicate with the dead. They are:

1. *Science*—Science to-day is noncommittal. To science the dead are dead. Science offers no hope beyond the grave. It stands ready to investigate anything having to do with the material universe and the physical laws of Nature; but it has found no technique by which the living may communicate with the dead.

2. *Revealed religion*—The revealed religions, such as Judaism, Mohammedanism, and Christianity, offer little teaching that would encourage us to believe that surviving mortals may hope to communicate with the spirits of departed friends and relatives. Buddhism certainly holds out no such hope, while it is doubtful even that the teachings of Confucius, with all their burden of ancestor worship, offer any great assurance of the living being able to communicate with the dead.

3. *Spiritualism*—Spiritualism is the only system of religious belief or occult pretension which claims to be able to put the living in communication with the dead, and therein is the secret of its widespread diffusion. Human beings would like to communicate with the dead. Science provides no way and revealed religion offers little or no help; therefore they turn to the séance and the medium. But how foolish for intelligent human beings to expect the Witch of Endor to supply us with something which both religion and science refuse us!

THE REACTION TO MATERIALISM

We cannot close our eyes to the fact that during the past fifty years materialistic tendencies have made great progress in the minds of the more intelligent elements of society. The channels of religious consolation patronized by the last generation have been more or less blocked to the thirsty souls of to-day. This change in the spiritual complexion of the people is probably due to three distinct causes:

1. A general breakdown in the religious tenets and authority of former generations.

2. The spread of socialism and kindred teachings, which are devoid of a spiritual background and setting.

3. The rapid spread of materialistic tendencies, due to the enormous development of the physical sciences.

Science starts out with the theory that the mind has nothing in it except that which enters through the physical senses; but sooner or later even the scientist is brought face to face with intellectual phenomena which it is difficult to explain on the theory that thinking can have its origin only in sensory feeling. There is an uncanny creative element in the human mind; there is a power of imagination that tends to assert itself over and above that residue of mind and memory which we conceive as having had origin in the physical impressions of the special senses. Even the physical scientists and psychologists tend sooner or later to gravitate to that place where they are willing to admit the possibility, if not the probability, of the existence of spiritual forces in connection and contact with the human mind. And thus, without suitable principles for guidance, the way is wide open for the

intrusion of some phase of spiritualism or spiritistic doctrine.

The scientist of purely materialistic tendencies still maintains that “consciousness is a function of the brain,” but in most cases he is willing to grant the possible existence of super-physical agencies, tho he relegates their study and discussion to the province of the metaphysician. He does, however, insist that, as we know and understand consciousness on this planet, it is always strictly associated with the material organism—the physical brain; that it is strengthened or weakened directly in proportion to the strengthening or weakening of the physical machine, and that it disappears, from a scientific standpoint, when the organism succumbs,—when the body is stricken down by the hand of death. True, the scientist does not undertake to prove that death destroys consciousness; but he does prove that it destroys all other functions of the organism, and he assumes that the burden of proof for the existence of consciousness after death rests upon the metaphysician and theologian.

The scientist further calls attention to the fact that all down through the ages no universally accepted and authentic message has come to us from over the Great Divide. He is inclined, therefore, very strongly to presume that the spirits, if there be such, have not been able habitually to communicate with living mortals. True, the unprejudiced scientist grants that science can only assume this to be a fact, while he stands ready to examine anew any sincere claims which may be put forth on the part of those who believe in spiritual forces and spiritual communications between the living and the dead.*

All honest attempts to investigate spiritism have been greatly hindered by the discovery of much that is ungenune or brazenly fraudulent. So persistent is this element of fraud, that the high-minded scientist is tempted early to relinquish his research in disgust and wash his hands of the whole sordid mess. Such was the experience of the late William James, the psychologist, who, in his declining years, turned his thoughts toward an investigation of spiritualism.

My experience has been, when seeking communications through spiritualistic mediums, that the “control” of the communicating spirit finds himself called elsewhere every time it is brought up to the place where I am going to get some real information—or subject it to a bona fide test. This, in connection with the triviality of the communications alleged to have their origin with departed spirits, has compelled my own reason fundamentally to doubt the genuineness of these communications.

Again I must record that I have come in contact with a few individuals of psychic peculiarity, who were the channel of communication for numerous messages that were not of a trivial nature; but in no instance did these messages lay claim to have had their origin with deceased human beings. They always claimed an origin separate and apart from the realm of departed spirits.

* See Appendix.

SPIRITISTIC PHILOSOPHY

As already intimated, the history of human thought indicates that mankind tends to oscillate, in generation cycles, from one extreme to the other in its philosophic beliefs. A period of superstition and credulity is usually followed by a period of materialistic reaction. The spiritism and mysticism of the dark ages culminated in the rank infidelity and materialism of the French Revolution. On the other hand, the materialistic tendencies of the latter half of the nineteenth century, with the great expansion and development of the physical sciences and the increasing tendency of science to lean toward materialism and fatalism, led to an inevitable outbreak of mystic cultism at the dawn of the twentieth century, as outlined in the teachings of Christian Science, and still further and more recently in the unprecedented tendencies toward spiritualism and other efforts to get in touch with the invisible world beyond the grave.

I believe that our present dilemma, the spiritualistic maze into which so many earnest souls are creeping, has been brought about by a failure to recognize the proper provinces of science and religion. Each has its own sphere, and the failure of the one to recognize the domain and function of the other has done much to bring confusion to the popular mind.

Just about the time when the scientists succeed in convincing the people that there is no spirit, that all is material, the average individual, having found the dry husks of materialism useless for the quenching of an ever-present spiritual thirst, turns in revolt to some creed at the other extreme of credulity. Refusing to believe that when he dies he is merely going, like the cats and dogs and other beasts, to rot in the ground and be no more, the distraught and spiritually famished individual settles his philosophic difficulties by suddenly abandoning the ship of scientific materialism, and startles us by taking one grand plunge into the sophistries and delusions of Christian Science, spiritism, or some other mystic, metaphysical cult.

The prevalence of Christian Science to-day is but a reaction to the scientific materialism of the closing decades of the nineteenth century. Tens of thousands of people find it more comforting to indulge the belief that "all is spirit and nothing is matter," than to believe that all is material and nothing is spirit. This confusion is the result of the tendency of dogmatic theologians to combat the demonstrated teachings of science, and the tendency of dogmatic scientists to destroy the foundations of religious faith and hope by their discoveries and demonstrations. The theologians refuse to accept new scientific truth, and the scientists refuse to recognize the necessity for, and reality of, the spiritual domain of human thought.

Scientists have largely failed to recognize that while man is an animal, he is an animal plus—plus something which science has nothing to do with, and which scientists can never prove or disprove by laboratory methods. Religionists, scientists, and philosophers must learn to function in their own spheres, and to allow their contemporaries to do likewise.

INSTINCTIVE LONGINGS

We do not find any great and dominant instinct, any universal appetite or longing, which has become a part of human life, without at the same time discovering that means have been provided for the satisfaction of such biologic instinct. Hunger for food, thirst for water, social

or sexual cravings, which are a part of men's lives, are all susceptible of being gratified more or less. Whatever may be argued as to the origin of this so-called worshiping instinct in the human race, and the well-nigh universal belief in a future existence, it would seem but philosophic consistency to expect that the spiritual forces of the universe must have made some adequate provision for the satisfaction of these spiritual longings which are so uniformly implanted in the hearts of mankind, or which have arisen in the human breast—as some would have us believe—by gradual evolutionary processes. I am perfectly willing to recognize that invisible and spiritual forces may be in working coordination with the visible and material energies of the realm. On the other hand, many things which we call spiritual may, after all, be purely psychological, and in their ultimate analysis, even physiologic.

The frontiers of science are being constantly advanced. Gradually the borderlands of superstition and mysticism are being pushed back. That which was supernatural in one age is recognized as perfectly natural in the next. Many of those things which struck terror to the soul of the barbarian are now looked upon as natural phenomena, and the laws governing them are more or less well understood. Year by year science is narrowing and limiting the sphere of superstition; but at no time can or will science ever destroy or eliminate those higher realms of spiritual experience, with their instinct of worship and desire for immortality.

IS SPIRITISM BIOLOGIC?

Popular religious belief, encouraged by much of our hymnology and preaching, inculcates the idea that everybody is intensely desirous of living on after death; and that “even the few who have abandoned hope of doing so, cannot wholly suppress the wish that it were otherwise.” Hence—so the argument runs—a desire so universal cannot but imply the existence of a corresponding reality. “The heart has reasons which the reason cannot understand.” As one popular writer says:

The philosopher in rummaging through the treasure-house of the soul finds the idea of immortality and also the desire for it. He cannot help asking if this desire for immortality may not be evidence of man's capacity for it. If there is an appetite for life everlasting, the chances are that the appetite will not go unsatisfied.

But someone has asked, “Do all men really want to live after death?” It is true that the majority of religions have held up the hope of immortality before the eyes of men, yet the Hebrew faith, as the prophets proclaimed it, and the religion of Buddha in its purest form, renounce the thought, the one teaching that man's real destiny was limited by the grave, the other promising as the prize to be won, Nirvana, in which consciousness shall be “as a blown-out lamp.” The pessimism of the East, which looks forward to sheer annihilation, has invaded the West, and philosophers like Schopenhauer and poets like Thomson and Swinburne have “glorified death as the last and highest word of the universe to its creature, man.”

Professor J. H. Leuba informs us that of the highly educated men of scientific temper to whom he put the question whether they desired immortality, 27 per cent. did not desire it at all, 39 per cent. desired it moderately, and only 34 per cent. admitted that they desired it intensely.

Dr. Felix Adler, the head of the Ethical Culture Movement, says:

As for myself I admit that I do not so much desire immortality as that I do not see how I can escape it. If I as an individual am actually under obligation to achieve perfection, if the command, "Be ye therefore perfect," is addressed, not only to the human race in general but to every single member of it (and it is thus that I must interpret the moral imperative), then on moral grounds I do not see how my being can stop short of the attainment marked out for it, of the goal set up for it.

Even in the case of "those unhappy souls for whom life has lost its savor and who turn from it in disgust," it may well be questioned whether in every instance the passion for death is the hope of, or belief in, extinction. Many a suicide has left behind him a pathetic prayer for forgiveness, not from man only but still more from God, because of the motive of the deed, perhaps unbearable mental or physical pain; perhaps overstrained remorse for some shameful memory, some rooted sorrow which no healing hand could "pluck from the brain."

"If a man die, shall he live again?" is a question as old as Job. Great minds in all the past have tugged away to demonstrate the immortality of the soul. From the days when the Egyptian priests consulted the oracles of Isis, and the Greeks sought truth at Eleusis, there has been a belief in the evocation of the spirits of the dead. We do not have to look for it in mythology, for numerous examples are given in the Old Testament. It was known as necromancy, witchcraft, divination, and magic, but the last issue is spiritualism.

THE DESIRE OF THE AGES

A careful study of the ancient peoples, even the prehistoric races, shows that very early in the development of the human species there appeared a tendency to recognize and worship supernatural beings and forces, and along with this we find definite evidence of the belief in, and hope for, immortality. There exists abundant evidence that even that prehistoric race of artists and artisans, the Cro-Magnons, whose wonderful polychrome paintings have been uncovered in recent years in the caves of France, practised the ceremonial burial of the dead. The finding of ochre in their burying places, and their custom of burying various implements with their dead—much after the practise of the North American Indian—leads to the belief that these ancient people, among their numerous intellectual accomplishments, entertained a belief in life beyond the grave.

A study of the later races, which usher in the historic period of human kind, such as the Sumerians, the predecessors of the Babylonians and Assyrians, also shows unmistakable evidence of a definite system of religious belief and worship, and a profound confidence in the teaching of human survival—the doctrine of life beyond the grave.

In whatever age we study the human species, in whatever state of barbarism or civilization we examine man's spiritual beliefs and religious tendencies, we invariably find, at the very center of the religions of barbaric fear or the theology of the highest civilization, the hope for life—a belief in immortality, natural or conditional.

For many years it has been the practise, as a part of the psychologic analysis of all my patients undergoing a research examination, in the effort to ascertain the behavior of the emotional life of the individual, to inquire into his or her religious status, to find out to what extent the emotional life has found expression through the religious channels of worship, meditation, and activities more or less of a spiritual nature. Throughout my whole professional career, I have scarcely found a single person who did not indulge some sort of belief, hope, expectation, or anticipation, as regards life after death. Many disturbed souls who are more or less skeptical about a personal God, who entertain many doubts about a supreme centralized Deity in control of all the visible and invisible forces of the universe, who are more or less skeptical of all the tenets of orthodox theology, still believe in some sort of survival beyond the grave.

I have found that education and training, not to mention the inherent bent of certain types of mind, serve to influence the expression of this well-nigh universal tendency to believe in a future life—but only to modify its expression; it is still there, altho sometimes almost covered up by the accumulations of a college course or of other intellectual training. When these individuals become confidential in the privacy of the doctor's consulting room, where they feel free to express their inmost thought, they almost unfailingly admit their belief in, and confess their hope for, something beyond the grave.

The instinct to live is so intense, is so biologic and innate, that it extends over and beyond the span of our natural life on earth, and seeks to lay hold of another life beyond—seeks to merge life on this earth with that of a future existence. And I have found this desire existing in varying forms in all classes of my patients, from the humblest and most ignorant to the most highly educated and intellectual.

SPIRITUALISTIC FASHIONS

In our study of mediums and spiritualistic phenomena, it is very interesting to note not only that waves of fashion—epochs of characteristic behavior—have dominated spiritualism from decade to decade, but that spiritualism is directed in its performance, and tends to crystallize its dogmas differently among different peoples. There is a nationalistic tendency in spirit manifestations.

It seems that such manifestations are liable to take on the current color of the time and place in which they originate. It is easy to suppose that a writer might receive from his subconscious centers certain ideas which he believes to be of spirit origin, and since they would be quite likely to harmonize more or less with his theories of life in general and with his spiritistic philosophy in particular, it is easy to imagine that his mind, thus aroused, would continue to develop these ideas. Now, suppose such an author has theosophical leanings: it is quite likely that the whole spiritualistic message will evolve into a theosophical dissertation.

Such a spirit communication would have special influence with the devotees of the theosophical cult.

We observe that spiritualism in Germany, France, Great Britain, and America, tends to run in entirely different channels. Spirits, apparently, are not in possession of a working program and a universal propaganda. Apparently they are limited, in communicating with the living, to the beliefs, tendencies, and other influences which are in vogue among the different peoples and nations through which they operate. All of which suggests the fallible nature and purely human origin of the whole phenomenon.

Each medium takes us into the world of his own theoretical construction. There are types of belief, even national beliefs, expressed in books claiming to contain wisdom from the spirit world. Thus, a writer on spiritism, J. Arthur Hill, calls attention to the fact that spiritism in France is reincarnationistic, while in England and the United States, on the whole, it is not. The reason, in the case of France, is found in the fact that an early writer on spiritism, Allen Kordec, taught reincarnation. So, he assures us, spirits communicating in France regularly teach reincarnation, while spirits speaking in England as regularly deny it.

THE SPIRIT OF THE SUBCONSCIOUS

NOT only is physiology the basis of the greater portion of our psychology, but the physiological processes of the material body have much to do with the peculiar phenomena of psychics and neurotics. It therefore becomes necessary in our study of abnormal psychology to give considerable attention to the physiology of the brain and nervous system—to the physical basis of sensations and emotions—as factors of mind.

In the mind of the primitive savage it constitutes but a short step in reasoning from his dream experiences to the belief that his “consciousness” could be absent from the body, traveling about the world or roaming the universe; and so these two ideas put together—or rather the one growing out of the other—lead the primitive mind to believe in “consciousness” separate and apart from the physical body, and thus the foundation is securely laid for a belief in spiritism. Dreams seem to endow the mind with a power that is quite independent of time and space, and the fancies of the dream-world are not wholly unlike the extraordinary claims and superstitions of the spirit medium.

As far as physiology is concerned—or any of the other physical sciences—there is no spirit. Spiritual forces are not able to manifest themselves to the instruments employed in scientific investigation. They are immaterial, and science deals only with the material.

The scientist therefore, finds it difficult to believe in spirits, whose very existence, according to the psychical researchers, would seem to be for the purpose of nullifying the laws of Nature. Our universe is pretty well regulated by more or less rigid and dependable physical laws, and yet it seems to be the purpose of spirits, as revealed by the claims of spiritualism, to break these laws—to defy the precepts of Nature—and otherwise to show their superiority over the natural order.

I do not doubt the existence of spiritual forces, but I believe that they are engaged in operating in the spiritual realm, and that their time is not occupied with trivial intrusion into the materialistic realm—intrusion, apparently, with no more serious mission than the performance of marvels for the mystification of mortal minds.* At least, so far as science has been able to test spiritualistic performances, they have not as yet demonstrated their ability to suspend the known physical laws governing the material universe.

Science comes more and more to look upon that which lays claim to being supernatural, or spiritual, in the performance of spirit mediums, as being an emanation from the unconscious realms of the medium’s own mind; and to explain the entire performance by the laws of physiology, on the one hand, and of psychology, on the other. The very nature of the content of the majority of these spirit messages and revelations is sufficient to brand them as wholly human, in every way very ordinary, and utterly devoid of any ear-marks of that

* See Appendix.

superiority which would serve to identify them as supernatural.

Even the spiritualists themselves recognize that both good and bad, as judged by human standards, emanate from the mind of the medium as exercised and controlled in the séance room. Science prefers to explain these good and bad messages by the ordinary operation of the human brain—even as we recognize in our daily affairs both good and evil proceeding from the creative centers and the imaginative spheres of the human intellect—rather than to resort to good and evil spirits in order to explain them.

The primitive mind of man tends to project its own mental images into the external world about him, and thus these “spirits” of his own creation come to inhabit not only people and animals, but also rivers, trees, and mountains. And since it is the undisciplined mind that indulges in this sort of “spirit” projection, it is not strange that the spirits thus conceived should be characteristically infantile and juvenile in their attributes and conduct.

The psychologic basis for these spirit concepts seems to be largely dominated by the pleasure-pain instinct of the race. The most primitive soul desires to avoid pain and experience pleasure; and so, whether it be the Happy Hunting Ground of the savage or the exquisite Paradise of the orthodox Christian, the spirit world is supposed to be one affording its sojourner almost unlimited pleasure. Pain is banished, sorrow and death find no place in the Heaven of Happiness which is the final attainment and abode of redeemed spirits. And, as a rule, the pleasures which we conceive as being ours to enjoy on the other side are the very ones for which we most long during our sojourn in this world.

THE FEAR OF DEATH

As already remarked, the biology of spiritualism is rooted in the pain-pleasure complex of the human mind and nervous system. For numerous reasons, the primitive mind fears death. Death is usually preceded or accompanied by pain and suffering. Death spells the extinction of all possibility of pleasure-enjoyment, and therefore death becomes the culminating symbol of pain. On the basis of the wish to avoid pain and experience pleasure, therefore, the primitive mind desires in every way possible, in its effort to rise above the fear of death, to prove the unreality—the non-existence—of death.

And so the unconscious mind even of the savage reaches out with persistent longing to the belief of spirit survival after death, seeking to prove that death is but an illusion—but the vestibule to another and higher life.

We come thus to the place where we are able clearly to recognize that the key to spiritualism—that is, to the non-fraudulent, non-materialistic phases of it—is to be found in the physiology and psychology of the unconscious. Here, in this mysterious realm of the human intellect, are locked up the secrets and mysteries of mediumship, clairvoyance, trances, automatic writing, and the rest of the real and respectable manifestations of spiritualism.

Physiology is the key that will open the psychological lock which will enable us to continue our exploration of the secret birthplace, and abode of the phenomena of modern spiritualism.

What, then, is spirit? I would offer two definitions:

1. Spirit, in a theological sense, is an invisible, non-material entity or intelligence, operating in the spiritual world in accordance with spiritual laws and for the accomplishment of spiritual purposes; and limited, in its contact with the human mind, to the making of spiritual suggestions and to communicating with the spiritual monitors which are assumed to dwell in the human mind. Such assumed spiritual beings are not engaged in operating through natural law, nor in defying or nullifying natural law. The proof of their existence must ever be without the pale of science, and their recognition is wholly a matter of belief. Their contemplation is a matter of faith, and their reality and existence are not subject to scientific investigation.

2. Spirits, as pertaining to mediumship and the phenomena of modern spiritualism, are psychic projections—fantastic creations of the subconscious mind. Science, having studied them, finds that they have a biologic origin—that they are the deceptive offspring of a working conspiracy between the physiological and psychological powers resident in, and operating upon, the deep and unknown deposits of human sensation, memory, and emotions, which we commonly call the subconscious mind, but which is more properly and scientifically known as “the great unconscious.”

The spirits, then, that we deal with so largely in the study of spiritualism, exist within the human body, and from the realms of the unconscious centers of the mind project themselves outward for the production of their phenomena. They do not exist outside the body and come in to possess the body, and thus work upon the mind as an extraneous spiritual force. In brief, the spirits that operate in connection with occult manifestations, function only in connection with the body, and science thus far has not been brought face to face with any such phenomena that cannot be adequately explained on this hypothesis, or that cannot be reproduced by psychic manipulations and in accordance with physiological law.

THE CHALLENGE OF SCIENCE

Science, therefore, makes two challenges to the spiritualist, as follows:

1. Science declares that the existence of a spirit separate and apart from the body, operating to produce spiritualistic phenomena, is as yet unproved. It calls for further proof—asks for evidence.

2. Science challenges the ability of spirits, the projections of the subconscious mind, to affect any human body with which they are not connected, except through the ordinary agencies of suggestion and other well-known channels of psychic influence.

Science is in every way willing to admit the possibility, perhaps even the probability, of spirits being present in our bodies. The human being exhibits phenomena of higher intellectual activity that enormously stretch our present knowledge of physiological law and psychological conduct adequately to explain. While science can not recognize or demonstrate the existence of a spirit indwelling the human form, a vast number of scientists—if not a majority, certainly a very respectable minority—do believe more or less in the presence of a spirit as a part of man’s equipment as a moral being. But, it should be remembered, we simply

believe in the existence of this spirit—we offer no proof of it, and have thus far discovered no means of obtaining scientific proof of the existence of such a postulated spiritual entity.

As a scientist, therefore, I must limit my belief in spirits to a belief in my own possession of such a force or entity; assuming, of course, that other men, like myself, recognize that they also probably have such individual spirits within them. But the spiritualists and the psychical researchers ask us to believe in spirits that exist without bodies, that can act in defiance of natural law, and that operate in the physical world without visible forms. In fact, they go one step farther, and ask us to believe that these spirits are just like the spirits that dwell within us while we are living, and that they can visit us in the physical world after the bodies in which they have sojourned have long ceased to exist as such.

THE SPIRITUALISTIC TYPE

I have also observed that spiritualists are not, as a rule, the stoical, philosophical, phlegmatic type; they are usually persons of a more or less nervous temperament, often educated types that are capable of enjoying a high degree of pleasure. We are, therefore, brought back face to face with our primitive pain-pleasure instincts. Not only do our spiritualist friends want to avoid the thoughts of pain, suffering, death, extinction, annihilation, etc.; but they are likewise keenly alive to the desire to experience pleasure. Since pleasure is the opposite of pain and the antithesis of death, and since their central fear is that of death with its association of pain, the central complex for them—the very center of the solar system of pleasure complexes—becomes the “complex of life,” life never-ending.

And so the emotions of pleasure, which we all so much enjoy, and which certain types of individuals particularly enjoy, come to be clustered around, and associated with, the immortality complexes of the human mind; and thus the spiritualist is enabled to experience the highest degree of psychic exhilaration, the most profound enjoyment of mental and nervous pleasure, by indulging his unwavering belief in life and immortality; all the while seeking to strengthen such a mental attitude by the affirmation of his disbelief in death.

Thus the life-death conflict is built up in the human experience. Evidences group themselves on one side tending to prove death, annihilation, the eternal doom, the darkness of the grave. The scientific, materialistic teachings of the age tend to group themselves around these complexes. On the other hand, in conflict with this, the opposite complexes of life and immortality are fostered by the teachings of orthodox religion, and by the seeming evidences of modern spiritualism; and thus the mind seeks to gather—quite naturally, because of the greater pleasure associated therewith—evidence to prove that life, not death, is the goal of human existence. Spiritualism has on its side, and in its favor, the biologic urge of human instinct, the physiologic hunger and thirst for mortal pleasure, and the psychologic tendencies which unfailingly and instinctively lead the organism to seek out the paths of mental pleasure, while studiously avoiding the avenues of pain.

It is entirely true that in many individuals the fear of death is not the hub around which their pain-fears are grouped. It may be, as it is with many people, some other form of fear; but

it has its opposite set off against it as the hub of the pleasure sensations. Life and death are not the homologues of pain and pleasure in all individuals, but they are, certainly, in the vast majority of the present generation.

THE PHYSICAL BASIS OF MIND-NEUROGRAMS

The brain is the organ of the mind. Whenever we experience a feeling or emotion, record a sensation, or indulge in a thought, some actual change takes place in the brain. Every bit of mental activity is accompanied by some sort of physical process in the brain. Everything we experience leaves a permanent impress of some sort on the cells or neurons of the organ of mentality. It is also true that the same series of physical phenomena will recur when its corresponding series of mental processes are reawakened or otherwise resurrected into consciousness. In other words, as one specialist puts it, "Physical brain processes or experiences are correlated with corresponding mind processes or experiences, and vice versa."

We come to see, then, that every mental experience leaves behind a residue—some actual change in the neurons of the brain. This actual change becomes "the physical register of mental experience." Psychologists believe that this physical register is very largely preserved in the subconscious mind, so that the unconscious activity of the medium has at its disposal all that vast wealth of experience, sensation, and emotion which has been accumulated throughout an entire lifetime. Memory is but the consciousness of the restimulation, or awakening, of these physical registries of past experience.

Whether neurograms are chemical or physical is not material to this discussion. The brain cells may become chemically sensitized so as repeatedly to react to the conscious recalling of an experience, the same as they acted in the original experience. This we can easily understand when we come to recognize how sensitive the human organism may be to the chemical action of internal secretions, or the hay-fever patient to an infinitesimal amount of pollen stimulation. On the other hand, the brain may effect its registry of experience by means of a physical process—by having an experience stenciled, as it were, on its physical structure—and then be able, for purposes of memory, to recall past experiences somewhat after the fashion in which a stenciled bit of paper, when run through a player-piano, reproduces music.

No matter what may be the exact nature, theoretically, of these changes produced on the cells of the brain by our experiences, they are there; they constitute a residue of some sort which can be tapped and used variously by different individuals. Whatever they are, we can perhaps do no better than to adopt the term suggested by Prince and call them "neurograms." That the mind and body do thus reciprocally behave is shown by the experience of Pawlaw, the Russian physiologist, in the so-called "sham feeding" of dogs. His experiments serve to show the parallelism between mind and body: how the mind can start the body to acting and the body can start the mind to acting: how images can pass in through the eye, and sounds through the ear, to arouse the mind: and how the "neurograms," or memory register, of these same images and sounds can be resurrected and start out through the mind, so to impress the eye and ear with their reality as to lead mediums and psychics to believe that they have

actually seen and heard these phenomena—to deceive themselves into accepting, as real images and sounds from the spirit world, the resurrected memories of their own consciousness.

FUNCTIONAL DISTURBANCES

We find that the subconscious residue of the mind is capable not only of practising deception in the realm of spiritualism, but also of producing apparent disease disturbances of the body—actually of deranging the behavior of the organism. This is aptly shown in the case of various forms of hysteria. For instance, through purely mental sources and through the agency of the nervous system, an individual may become more or less color-blind. Violet, blue, and green seem to vanish first, red appearing to be the most persistent color. This has often been given as the explanation why most hysterics are fond of red. They perhaps prefer to dress in showy colors because these are the only ones they can see continuously. In hysteria, the so-called visual field may be modified in a very definite and regular manner, the visual field for blue becoming smaller than that for red. In certain cases of hysteria the whole field of vision is greatly narrowed concentrically. It will suffice to state the fact here and avoid going into the technical explanation of what is meant by the field of vision.

Many accurate tests are made to detect this freakish behavior of vision in hysteria, but spiritualistic mediums do not permit us to control matters so as to make such precise scientific tests with them. In the army, when the medical officers feel that a soldier is feigning blindness in the right eye so that he can not become a good marksman, they put him through a simple test which soon shows whether he is telling the truth or not. They use some such tests as the letters of Snellen or the box of Flees. In the former—

On an absolutely dark ground are pasted letters cut out of paper—some blue, others red. To the eye of the subject is applied a pair of eye-glasses, one of the glasses of which is quite of the same blue tint as the letters, and the other of the same red tint. Through the red glass, which lets only the red rays pass through, the red letters on the black ground can be seen, but the blue ones become as black as the background and cannot be distinguished from it. The result is that under these conditions, the right eye can read only one-half of the letters and the left eye the other half. A person who sees with both eyes instinctively complements one eye with the other and reads the whole word without difficulty.

Under these conditions, a one-eyed person can read only a part of the letters. What does our recruit do? With the eye-glasses on his eyes he quickly reads all the letters.

We recognize in hysterical subjects—and many mediums belong to this group—that the voice may be greatly influenced by the state of consciousness. In hysteria sometimes the voice is entirely lost. The mind can so influence the body as to cause a loss of appetite, not to mention serious digestive disturbances—bowel disorders, diarrhea, constipation. Many such sufferers have undergone long courses of medical treatment and subjected themselves to strenuous courses of dieting, all to little or no avail, sometimes subsequently to be cured in a moment by Christian Science or some other newfangled religion—or by treatment of some quack doctor.

I had a patient who, several years before, had seen her father almost choke to death on a fish-bone. After that fright she was unable to take solid food for years. She was cured of this fear by a few months' proper teaching. Many common mannerisms, or tics, are also illustrative of the projection of the mind outward on the body, as the result of sensations traveling out over the nerves from the mind. Sighing, sobbing, coughing, hiccoughing, and sneezing are sometimes produced by the outward projection of some element of the consciousness.

SUBCONSCIOUS NEUROGRAMS

That the content of the subconscious may lead to monstrous self-deception and cunningly delude even the wisest of us, is a fact long recognized by the specialists in psycho-pathology—those who deal with abnormal and peculiar minds. One authority in this field (Morton Prince) says:

In one sense, I suppose, we may say that everyone leads a double life. Let me hasten to say to you, I mean this not in a moral but in an intellectual sense. Everyone's mental life may fairly be said to be divided between those ideas, thoughts, and feelings which he received from and gives out to his social world, the social environment in which he lives, and those which belong more properly to his inner life and the innermost sanctuary of his personality and character. The former include the activities and the educational acquisitions which he seeks to cultivate and conserve for future use. The latter include the more intimate communings with himself, the doubts and fears and scruples pertaining to the moral, religious and other problems of life, and the struggles, and trials and difficulties which beset its paths; the internal contests with the temptations of the world, the flesh, and the devil. The conventionalities of the social organization require that the outward expression of many of these should be put under restraint. Indeed, society insists that some, the sexual strivings, are aspects of life and human nature which are not to be spoken or thought of. Now, of course, this inner life must also leave its neurographic tracings along with the outer life, and must, potentially at least, become a part of our personality, liable to manifest itself in character and in other directions.

More than this, and more important, there is considerable evidence going to show that conserved experiences functioning as subconscious processes take part in and determine the conscious processes of every-day life. On the one hand stored neurograms may undergo subconscious incubation, assimilating the material deposited by the various experiences of life, finally to burst forth in ripened judgments, beliefs, and convictions, as is so strikingly shown in sudden religious conversions and allied mental manifestations. Through a similar incubating process, the stored material needed for the solution of baffling problems is gathered together and oftentimes assimilated and arranged and formulated as an answer to the question. On the other hand, subconscious processes may be but a hidden part of that mechanism which determines our every-day judgment and our points of view, our attitudes of mind, the meanings of our ideas, and the traits of our characters.

COMPLEX-HUNTING

OVER and again we have asserted that the mischief-making complex must be located and disposed of as a part of the speedy and permanent cure of so-called nervous disorders—the neuroses—and so this chapter will be devoted to describing the methods which are employed in locating and disposing of these trouble-makers.

1. *Direct methods of complex-hunting*—Sometimes the medical psychologist feels impelled to employ one of three direct methods in endeavoring to locate trouble-making complexes—that is, when such methods are possible of employment. These so-called direct methods embrace crystal-gazing, automatic writing, and hypnosis. In my opinion it is seldom necessary to resort to any of these, and except in the more serious manifestations of double personality and hysteria, I seriously doubt the wisdom of resorting to hypnosis as a part of the effort to perfect the diagnosis. I have no desire to question the possibilities of hypnotism, both in diagnosis and, to a limited extent, in the treatment of some of these disorders; but I believe that we have equally good, if not more efficient, methods of exploring and training the human mind, which are at the same time entirely free from the objections which may be attached to hypnotism.

Automatic writing, of course, along with crystal-gazing, can be employed only in patients addicted to such anomalies. It would therefore appear that the so-called direct methods of searching for the complex are not those which will be most commonly used in our every-day effort to help the average nervous sufferer.

2. *Indirect methods of complex-hunting*—Of the various indirect methods of looking for complexes, the one we are probably most familiar with is the study and *analysis of dreams*; and while I cannot go all the way with Professor Freud in his claims of ability to get to the bottom of most cases of emotional suppression by the analysis of dream-life, I believe that we would do well systematically and painstakingly to inquire into the nature of our patients' dreams. We often get valuable hints from the dream-life of these nervous sufferers, particularly from dreams that are recurrent. It is highly probable that the inhibiting mechanism—the so-called censor—is much less active during sleep, so that if we can penetrate the symbolism and the conglomerate confusion of dreams, we are often able to possess ourselves of invaluable information as to the basic nature of the patient's trouble.

Another indirect method of complex-hunting is what is commonly known as the *free association test*—altho it is oftentimes almost anything but free association, since the very suggestions given out by the doctor so many times influence the patient in carrying out this program. The free association method consists essentially in a program of first getting acquainted with the patient in a succession of conferences, and then encouraging him to talk out his thoughts and troubles fully and freely. The sufferer is allowed to rest in a comfortable chair and is asked to talk about himself, his fears, his worries; he is told to be unsparing of

himself, to lay all pride aside, and tell the doctor all that enters consciousness respecting the subject under discussion.

This method is, on the whole, very successful; if the physician is wise and experienced, and is careful in collecting and classifying this material, in time he comes to possess himself of a fairly complete picture of what has been going on in his patient's mind. It is in reality *the talking cure*.

Then we have the method of *arbitrarily stimulated association*, the employment of various stimulus words. The technique of this procedure consists in getting the patient comfortably seated in the office and then, with an ordinary stop-watch in hand, testing him with a list of specially selected words or with some standardized group of words, such as Eder's list; he is asked to say the word which comes up in his mind, the very first word which is suggested to his consciousness, when he hears one of these test words. It will be found that the average person will develop an individual reaction-time, which ordinarily runs from one and one-half to two seconds; but when a word comes up which is in any way associated, directly or indirectly, with his buried complex, he is liable to delay the reaction-time; the delay is usually so marked that it calls immediate attention to the fact that this word is probably associated with the seat of his troubles.

A few days ago we had a case in which the patient was running right along on average time—1.5 seconds—and when we struck the word that was associated with his undiscovered complex he became paralyzed, as far as speech was concerned—in fact, could not think of anything for half a minute. It was a very marked demonstration of the value of this method, especially in certain types of patients. The standardized list of one hundred words, which we so often use for this purpose (Eder's List*), is as follows:

- | | | | |
|--------------|------------|------------|-------------|
| 1. head | 26. blue | 51. frog | 76. wait |
| 2. green | 27. lamp | 52. try | 77. cow |
| 3. water | 28. carry | 53. hunger | 78. name |
| 4. sing | 29. bread | 54. white | 79. luck |
| 5. dead | 30. rich | 55. child | 80. say |
| 6. long | 31. tree | 56. speak | 81. table |
| 7. ship | 32. jump | 57. pencil | 82. naughty |
| 8. make | 33. pity | 58. sad | 83. brother |
| 9. woman | 34. yellow | 59. plum | 84. afraid |
| 10. friendly | 35. street | 60. marry | 85. love |
| 11. bake | 36. bury | 61. home | 86. chair |
| 12. ask | 37. salt | 62. nasty | 87. worry |
| 13. cold | 38. new | 63. glass | 88. kiss |
| 14. stalk | 39. habit | 64. fight | 89. bride |
| 15. dance | 40. pray | 65. wool | 90. clean |
| 16. village | 41. money | 66. big | 91. bag |
| 17. pond | 42. silly | 67. carrot | 92. choice |
| 18. sick | 43. book | 68. give | 93. bed |

* From *Studies in Word Association*, by C. G. Jung; published by Dodd, Mead & Co., Inc.

19. pride	44. despise	69. doctor	94. pleased
20. bring	45. finger	70. frosty	95. happy
21. ink	46. jolly	71. flower	96. shut
22. angry	47. bird	72. beat	97. wound
23. needle	48. walk	73. box	98. evil
24. swim	49. paper	74. old	99. door
25. go	50. wicked	75. family	100. insult

The *writing cure* is another method which has been employed advantageously in a certain type of cases. Every now and then I run across a patient who does not talk freely, but who, the moment he leaves the office, thinks of things he should have brought to my attention—topics which he much desired to discuss. I teach these patients to bring memoranda with them to the office for discussion, and in certain types, where there seems to be a desire to write, I encourage them to write out everything that is going through their minds—to practise thus a sort of psycho-motor catharsis. It seems to do them a great deal of good, and they sometimes write out one hundred pages of manuscript a day. While it takes time to read this material, it proves to be of immense help in analyzing the patient's emotional life. I have come to depend a great deal, in certain cases, upon the help of this writing proclivity.

To sum up: the group of indirect methods of complex-exploration includes dream-analysis, free association, controlled association, and writing.

COMPLEX INDICATORS

Perhaps it would be in order to explain more fully what happens in the case of the word-association test or the controlled association probe of the mind when relevant data are contacted with. How do we know, in testing out a patient, when we have struck a word that is associated in some way with his buried complex? We have already mentioned the fact of prolonged association-time. We should also call attention to the fact that sometimes, when we strike a lead during this test, the subject will repeat the stimulus word. We are, for instance, using "man" as the test word. Instead of expressing the word suggested by man, the patient will simply repeat "man" one or more times. This sometimes indicates that you have struck a line of thought which leads directly to the buried complex.

We also suspect that we are getting warm on the trail of the complex when the patient responds with a very unusual word, especially if there is a delay in this response. More particularly are we impressed with the close proximity of the hidden complex when the patient fails to respond to the test word—at least for one-half minute or more. We likewise suspect that we are on the trail when the patient responds with two or more words and seems a bit over-anxious to impress us with his ability to respond to that particular test word. There is also sometimes significance to be attached to a pretended misunderstanding of the stimulus word, and some investigators think there is significance to be attached to the interpolation of "yes" or some other exclamation, either before or after the reaction.

When you are nearing the buried complex, some individuals show a tendency to repeat the response to the preceding stimulus word, and in that way spar for time to avoid responding to the stimulus word which is associated with their offending complex. Sometimes there is a tendency to whisper the response to the stimulus word that is in complex association, and in certain highly hysteric individuals there may be laughter, crying, coughing, or stammering, in the response. We also notice in some cases, when we strike a word that has to do with a hidden complex, that the patient will look around quickly and name some object that is within sight in the room, obviously a word having no connection whatever with the stimulus word.

This method of going on the trail of a complex and endeavoring to locate it by word association is not altogether easy, and is not invariably successful, especially in the hands of a novice; but it is of great value in many cases, and is a part of the technique which every psychotherapist employs in his effort to run down hidden and mischief-making constellations and complexes. One thing we should emphasize, and that is that there is no standardized pattern of reaction for different sorts of nervous disorders. There is no typical method of reacting for hysteria, dementia præcox, etc.

All these methods of exploring the mind are limited, not only by the skill and experience of the operator, but by the suggestibility and temperamental type of the patient. One of the reasons why hypnotism has fallen into the discard as a method of exploring the mind is that its very technique contributes to the suggestibility of the patient. You are liable to get what you are looking for—to find what you expect—because you have made the patient more suggestible; he has to be amenable to suggestion to be under the influence of hypnosis. So in all these methods there is to some degree this tendency on the part of the patient to give the doctor what he is looking for—thus yielding to suggestibility.

I have found it very valuable to check up all this work in the psychologic laboratory with as many tests as possible, using instruments of precision. Many years ago I devised a group of tests which can be varied and which are of great value in helping us to check our observations; in this way the laboratory work contributes to the stabilization of our less precise methods of study and observation.

EMOTIONAL ANALYSIS

We must not overlook the fact that there may be very little difference between a normal complex and a morbid, mischief-making complex; for the normal mind is filled with an enormous number of normal associations of this sort, altho they vary in accordance with the individual's tastes and temperament. There is a vast difference between the complex that is built up around the love of a woman and the complex centering upon a love of languages or a hatred of chemistry or physics. Yet all these are normal. We build up such mental associations in accordance with our likes and dislikes.

One of the earmarks of the morbid complex is an abnormal tendency of the patient to forget it; it cannot be voluntarily recalled in a short time. There is a definite and persistent tendency on the part of the subconscious to crowd the memory of it down into a psychic

corner where, altho we cannot recall it, it can continue to exist and become more and more potent for mischief. In other words, while the buried complex is not voluntarily recallable, it continues to influence our psychic state and daily life, as well as to crowd itself into our dreams. In fact, it would seem that the more deeply and successfully these complexes are buried, the more likely they are to seek gratification and manifestation in the dream-life.

It would thus appear that the abnormal or buried complex requires outside help to effect its resurrection and final elimination. We usually find that these morbid complexes are associated with some of the master emotional urges, one or another of our five so-called life-drives.

The shell-shock neuroses observed during and immediately following the World War afforded final and conclusive proof that not all neurotic symptoms are of sex origin; subsequent study of this question has shown that the desire for power, the superiority complex, may sometimes be the overdevelopment of a perfectly normal defense reaction against a pre-existing inferiority complex. We know that many times the inferiority complex is set up by the fact that an individual is small in stature, has poor health, or has other defects of development in limb or organ. Someone has suggested that anti-vivisectionists are simply an illustration of a defense reaction against the primitive urge of cruelty.

We observe the tendency on the part of many neurotics to seek out special healers and irregular practitioners because they dread going to a regular and competent physician, who will either ridicule their miseries or, more likely, tell them the plain and frank truth. No doubt the prosperity of the healing cults is in a considerable measure due to this defense reaction on the part of neurotics, who are trying to dodge the real truth about themselves. I think there is little doubt that substitution and compensation, in a certain measure, really tend to prevent many a disagreeable complex from coming up into the consciousness. They are, after all, a subtle form of defense reaction.

SELF-ANALYSIS

Patients can do very much that is helpful, if they are disposed to be thoroughly frank with themselves, in analyzing their own emotional life. It is impossible, of course, for any of us to have the gift of seeing ourselves as others see us; but neurotic sufferers, if they get a start in the right direction, may go far toward solving their own puzzles.

In this connection it may be observed that the technique of self-analysis may tend to make the patient introspective, to lead him into the habit of spying upon himself. This possible objection is quickly answered by the fact that neurotic sufferers are already introspective, sometimes almost to the point of hypochondria. We are merely teaching them how to think about themselves truthfully and logically instead of indulging in groundless fears and self-sympathy; we are merely substituting a helpful, controlled, and well-directed form of self-analysis for the "wild and woozy" self-consciousness they have been in the habit of indulging.

When once started on a program of self-analysis you should make a careful written notation of all situations which stimulate or tend to bring about, or contribute to, your

unpleasant and objectionable nervous reaction, whether that reaction be temper, depression, anxiety, or what not. Sit down and make a note of every recent appearance of the objectionable emotional reaction. Study the antecedents of these occasions. See if you can locate what led up to each explosion, each particular emotional sprawl, of the kind of which you have elected to cure yourself. Set down the particular words, the exact moment, and the actual situation of this pre-temper or pre-depression reaction. Carefully study what you were doing and in just what state of mind you were at the time the undesirable nervous manifestation made its appearance.

If you are going to practise self-analysis I would suggest that you spend one-half to three-quarters of an hour daily in letting your consciousness soar aimlessly while you gently guide it back into your past life and observe what channels it seems to drift into. Note where it pauses, observe what it tends to gravitate toward, and in this way you may gain helpful hints as to the real nature of your nervous troubles. Look back into your early life and frankly endeavor to recognize your earliest emotional shocks, serious disappointments, strong resentments; seek to identify your very early loves and hates, as well as to isolate your early ambitions and more profound nervous disturbances.

Make a careful study of your individual technique for formulating excuses for yourself—your alibis. Become increasingly skillful in detecting the tendency to camouflage; in other words, develop a technique of fairness in dealing with yourself, in observing and classifying your psychic reactions and emotional behavior. The real secret of self-analysis consists in being wholly frank and honest with yourself, in being true and sincere, willing to face the facts and react to the demands and difficulties of a real world as a real man or a real woman.

Self-understanding is an indispensable prerequisite to self-treatment and self-cure. No patient can sincerely and effectively ridicule his fears unless he really and truly understands the nature and origin of these fears. Thoroughgoing explanation must precede all attempts on the part of the patient intelligently to treat himself and otherwise to bring about those adjustments which are so essential to permanency of cure in the case of these functional nervous disorders, the so-called psychoneuroses.

THE CRAVING FOR DISTINCTION

Every human being craves not only sympathy but recognition in some line of human endeavor. We all enjoy the idea of being distinguished, and so sometimes when we fail to hear the applause of our friends—when we find we are not distinguished in any of the ordinary channels of human endeavor, and at the same time are facing extraordinary difficulties—we are able to avoid the unpleasant realities, and to enjoy sympathy and distinction, by developing a first-class honest-to-goodness case of so-called nervous breakdown. In still other cases, disappointed and depressed individuals develop a group of physical symptoms which are more or less puzzling to the average physician, and thus they achieve a kind of distinction as semi-invalids and chronic ailers. It cannot be doubted that certain types of neurotics really come to enjoy this sort of poor health, and take pleasure in going about reciting their miseries to the doctor and telling their friends about their unique nervous disorders.

These neurotic symptoms, if properly organized and exploited, serve not only to enable their owners to retreat from the difficulties and responsibilities of real life, but provide a host of sympathetic friends and neighbors, and gratify, in some measure, at least, a trio of commonplace human desires, namely:

1. The desire to escape from reality,
2. The craving for human sympathy, and
3. The ambition to be distinguished.

AUTOSUGGESTION

The wise physician is always engaged in giving his patients suggestions, whether he is aware of it or not. There is suggestion value in the very attitude of the patient coming as a pupil to the doctor as a teacher. But suggestion is only of temporary value in dealing with mental and nervous disorders; the real cure consists in finding out the truth and facing it, and then reeducating and retraining, putting in the place of these undesirable and unreliable reactions, desirable and wholesome methods of viewing life and reacting to one's environment.

If suggestion is going to be practised, there is no reason why the patient shouldn't learn to talk to himself in this transiently helpful way. But there is one thing we may be sure of, and that is that passive and half-hearted suggestions are not going to get very far in the presence of real and long-established fear complexes. If your phobias and fears have reached the place where they may be recognized as a complex, if they are able to produce physical symptoms, if there is a definite emotional tone in their arousal, then you will not be able to do very much with suggestion and reasoning, whether you attempt it on yourself or whether the doctor endeavors to apply it.

Man, after all, is ruled by his heart and not by his head. I have learned that I can reason with purely intellectual fears, superstitions and hoodoos—I can talk my patient out of a certain type of fear or phobia; but when the fear has been long established, in brief, when fear has an emotional consort—then it is not immediately subject to reason. If your emotions are hooked up with your fears, it will require education and reeducation, training and retraining—in fact, there must be a radical reconstruction, resulting finally in the displacement of the morbid complex by an effectively acting normal complex. After all, faith is the only known cure for fear.

Of course, autosuggestion works best in those cases where the patient most perfectly understands the nature of his trouble and most sincerely and honestly desires to effect a cure. And we must remember the great value of imagination in dealing with these nervous disorders. You are not going to accomplish so much by the exercise of sheer will power as by cultivating decision and utilizing the great power of imagination, really acting the part of the victor for the time being; and then, in time, you will actually come to enjoy and experience those things which at first you merely pretended.

REEDUCATION

Before the days of Freud, psychotherapists depended almost exclusively on hypnotism to locate the offending complex. Freud made one advance, at least, in that he got away from hypnotism, tho in my opinion he depended too much upon dreams. We have all come to accept many of Freud's ideas of repression, conflict, transference, and so on, even tho we reject his hypothesis of the libido and are not disposed to believe in his theory of the almost exclusive sex nature of our psychic conflicts.

Following Freud came Jung with his extravert and introvert theories, the extravert being one who fundamentally functions by feelings, and the introvert one who is more or less preoccupied with his purely thought life. Jung postulated a conflict between these two types, and sought for the trouble in the present conflict and not so much in the past life, as Freud was wont to do.

So we have come up through a metamorphosis in the matter of emotional study. Freud sought to bracket everything in life as pleasure—the avoidance of pain. Jung laid emphasis on adaptation to conditions of life, self-preservation; and Adler followed with his hypothesis of the power urge. I have, of course, made it clear in a former chapter that I have lately come to group my patients' conflicts into five grand divisions—the life urge, the sex urge, the power urge, the religious urge, and the social urge.

Reeducation is merely the term we have come to employ to embrace all the methods which are used in getting the patient out of the dominance of these morbid complexes and back into normal reactions and relations to life. We find it necessary to teach our patients to think accurately and sincerely, to be honest with themselves, largely to cease day-dreaming and get down to "brass tacks"; to meet difficulties squarely and to face obstacles bravely. In other words, what we are aiming at is the development of *stamina*.

We start out with the idea of training these wobbly, nervous individuals to accept the idea that there is far more real pleasure in directive thinking and actual achievement—in meeting the difficulties of life and surmounting them—than in day-dreaming and the shirking of responsibility.

Of course, we all want periods of freedom from responsibility. We want our week-end relaxation and our annual vacations, holidays, etc. They are all efforts to get away from the stress and strain of our complex modern life. We also seek for relief of this nature in novel reading and attendance upon the theater. It is only the abnormal indulgence of the fantasy-life that must be combated.

This reeducation or reconstruction consists, briefly, in training the patient in the art of getting pleasure out of the reality of performance and achievement, in place of seeking for it in the indulgence of fantasy. It is in connection with this desire to be enlisted in the attainment of an ideal—this perfection-hunger which is so laudable and which we all have more or less—that religion serves a great purpose in inspiring us with the ideal of infinity in our efforts at perfection attainment, inasmuch as it exhorts us to be "perfect even as our Father in Heaven is perfect."

As we grow up we must do something to deliver ourselves from the fetters of the more or less Narcissistic view of life, in which we were the center of things, and in which we could, in fancy, realize the fulfillment of every wish. Sooner or later we must distinguish between the possible and the impossible, become reconciled to the actual conditions of life, reckon with the fact of time, formulate long-distance plans, and learn to carry on a protracted struggle to realize our ambitions. No longer can we rub Aladdin's lamp and have one of the genii come forth to do our bidding and enable us to realize our dreams, regardless of time, space, and circumstance.

One of the most important things for the nervous patient to learn is to have a real object in life, to have a well-formulated plan for attaining this goal, and then to stay on the job and see it through; of course, this aim must be one that is not only possible but reasonably probable; and it is a good plan for the average nervous individual to have two objects—an immediate and a remote one—and to lay plans for the attainment of both. These two aims should be more or less in harmony and largely reciprocal.

In selecting an objective in life, get one that is not only possible, but possible for *you*. Too many heartbreaks come to nervous people because they have tried to play the rôle of a round peg in a square hole. If you have not been able to choose a program, write down all the things you would like to do, then take hold of the problem in a "hard boiled" way and check off those that are impossible for you; question-mark those that are improbable, eliminate those that are conflicting, decide which you can and should attempt, and thus make an end of traveling around in circles and indulging in vain wishes and impossible fancies. Get down to business, go into action, start somewhere, and, having decided what is your proper goal, keep your eyes on it until you arrive.

"What are you going to do?" I asked a woman who had experienced twelve or fifteen years of failure, tho she had a college education. "I just don't know," she said. I got her to write down a few things she would like to do, and she wrote—"study medicine," "teach school," "take up music," "be a private secretary." But she had no good reason for these choices. When I asked her why she wanted to study medicine, she said it was an honorable profession, everyone respected a doctor and if she could get hold of some wealthy patients she might make money quickly, and then she could travel and see the world. There you go! Trying to plant a crop one day and reap the harvest the next. This woman was not choosing sanely and reasonably; she was not allowing a sufficient interval between seed-time and harvest. Her reason for taking up music was that she had some little ability, that some rich person might get interested in her and finance her, and then she could sing in grand opera. There it is again—no real reason—just fantasy! Fairy stories lived over again in adult life. She had more reason for selecting teaching. It was the only honest choice in the whole group. Her only reason for wanting to be a private secretary (and she would not admit this at first) was that she might get a job with some millionaire or great business man who might be a bachelor or a widower, and might fall in love with her and marry her, and then all her problems would be solved. She would have a home and freedom from responsibility.

The purpose of repeating this unfortunate woman's experience is merely to show how not to start the program of reeducation when it comes to the subjugation of nerves. The conquest of nerves is to be effected by real, honest, sincere thinking—by practical planning, and by persistently carrying forward these plans regardless of obstacles—until in the end we acquire the habit of successfully reacting to our environment. There is no other way of achieving what we call stamina—of developing a strong character.

This is where Jung and others improved upon Freud, who thought that a patient could be cured by merely discovering the buried complex—by what he calls psychic catharsis. Jung, Dubois and others have more properly insisted upon the importance of reeducation, of getting the patient away from his distressing life and into an ordinary and practical technique of living.

In order successfully to master these neurotic complexes, the victim of nerves must make up his mind to understand himself thoroughly. The habit of dodging all undesirable thoughts and feelings must be abandoned. There must be an expansion of the idea of the conscious grasp of the personality. These nervous people must make up their minds to become masters of themselves, psychically and emotionally. They must not allow the knowledge of defects to breed within them either an inferiority complex, or, as a defense reaction, an obnoxious superiority complex.

Knowing ourselves as we really are, and notwithstanding our defects or mediocrity, we should accept the facts bravely and turn right around to master the situation, play the game, and not bewail the handicap. We should capitalize the abilities we have and learn how to make the best of them. An important step toward that end is learning to give up all sham and pretension. Thousands of people would immediately augment both their happiness and health if they would quit putting on an artificial front, indulging in so much sham and pretense.

APPENDIX

IN discussions of fraudulent mediums or self-deceived psychics, the reader of this book has several times encountered the statement that there were certain exceptions to the general indictments there made, and was referred to this appendix. It now becomes my duty to explain what I had in mind when those footnotes were inserted.

In the interests of scientific accuracy on the one hand, and of strict fairness on the other, it becomes necessary to explain that there are one or two exceptions to the general statement that all cases of psychic phenomena which have come under my observation have turned out to be those of auto-psychism. It is true that practically all the physical phenomena have proved to be fraudulent, while the psychic phenomena are almost invariably explainable by the laws of psychic projection, transference, reality shifting, etc. But many years ago I did meet one trance medium, a woman now deceased, whose visions, revelations, etc., were not tainted with spiritualism. As far as my knowledge extends, at no time did she claim to be under the influence of spirit guides or controls, or to communicate messages from the spirits of departed human beings. Her work was largely of a religious nature and consisted of elevated sayings and religious admonitions. I never had the privilege of making a thoroughgoing psychic analysis of this case, and am not in a position to express myself as to the extent to which her revelations originated in the subconscious realms of her own mind. I make mention of the case merely to record the fact that I have met one instance of psychic phenomena apparently of the trance order that was not in any way associated with spiritualism.

The other exception has to do with a rather peculiar case of psychic phenomena, one which I find myself unable to classify, and which I would like very much to narrate more fully; I cannot do so here, however, because of a promise which I feel under obligation to keep sacredly. In other words, I have promised not to publish this case during the lifetime of the individual. I hope sometime to secure a modification of that promise and to be able to report this case more fully because of its interesting features. I was brought in contact with it, in the summer of 1911, and I have had it under my observation more or less ever since, having been present at probably 250 of the night sessions, many of which have been attended by a stenographer who made voluminous notes.

A thorough study of this case has convinced me that it is not one of ordinary trance. While the sleep seems to be quite of a natural order, it is very profound, and so far we have never been able to awaken the subject when in this state; but the body is never rigid, and the heart action is never modified, tho respiration is sometimes markedly interfered with. This man is utterly unconscious, wholly oblivious to what takes place, and, unless told about it subsequently, never knows that he has been used as a sort of clearing house for the coming and going of alleged extra-planetary personalities. In fact, he is more or less indifferent to the whole proceeding, and shows a surprising lack of interest in these affairs as they occur from time to time.

In no way are these night visitations like the séances associated with spiritualism. At no time during the period of eighteen years' observation has there been a communication from any source that claimed to be the spirit of a deceased human being. The communications which have been written, or which we have had the opportunity to hear spoken, are made by a vast order of alleged beings who claim to come from other planets to visit this world, to stop here as student visitors for study and observation when they are en route from one universe to another or from one planet to another. These communications further arise in alleged spiritual beings who purport to have been assigned to this planet for duties of various sorts.

Eighteen years of study and careful investigation have failed to reveal the psychic origin of these messages. I find myself at the present time just where I was when I started. Psychoanalysis, hypnotism, intensive comparison, fail to show that the written or spoken messages of this individual have origin in his own mind. Much of the material secured through this subject is quite contrary to his habits of thought, to the way in which he has been taught, and to his entire philosophy. In fact, of much that we have secured, we have failed to find anything of its nature in existence. Its philosophic content is quite new, and we are unable to find where very much of it has ever found human expression.

Much as I would like to report details of this case, I am not in a position to do so at present. I can only say that I have found in these years of observation that all the information imparted through this source has proved to be consistent within itself. While there is considerable difference in the quality of the communications, this seems to be reasonably explained by a difference in state of development and order of the personalities making the communications. Its philosophy is consistent. It is essentially Christian and is, on the whole, entirely harmonious with the known scientific facts and truths of this age. In fact, the case is so unusual and extraordinary that it establishes itself immediately, as far as my experience goes, in a class by itself, one which has thus far resisted all my efforts to prove it to be of auto-psychic origin. Our investigations are being continued and, as I have intimated, I hope some time in the near future to secure permission for the more complete reporting of the phenomena connected with this interesting case.