

A N I N T E R P R E T A T I O N

M. L. P. was presented at an E.S.H. clinical conference on Friday, Nov. 18, 1954, with Dr. Jules Masserman presiding. Thruout the interview she was friendly and self-possessed. She told her story frankly and without embarrassment and at times smiled herself at the funny ideas and behavior she reported. In substance it differed little from that given in this study.

In his interpretation Dr. Masserman began by saying that her story, as she told it was a classic example of a schizophrenic process. He asked if there was any one present who saw anything constructive in her experience. He himself did not. What he saw was a girl who had been functioning as a psychopathic personality. By that he meant that she had gone around testing the tolerance of others and getting by with the aid of certain manipulative techniques. There was in her no conscience formation, no inner controls, no settled policy in life. Her character structure was that of a prostitute and it exhibited the progressive stages of maladjustment from that of psychopathic personality thru an acute schizophrenic disturbance to a good remission from her psychotic state. She had gone into the schizophrenic tail-spin when her manipulative structure in real life broke down, when her foster-father, her lawyer guardian and her church forsook her. The significance of this psychosis lay in the fact that after her manipulative techniques became impossible in the real world, she turned to a world of phantasy and wishful thinking. The "schiz" was thus between the real world of people in which the pressure had become too great and the world of phantasy into which she sought to escape. First she conceived of herself as a page of the Blessed Mother - a high and important role in which she was the center of attention. Once she even thought of herself as a female Jesus. She thought the bell-boys were making her the center of attention, but when she found that they were interested only in tips, she was driven farther still. When she is hauled before the judge, her wish-fulfilling phantasy continues to operate. The day of judgment becomes a day of deliverance. The judge is God and he is on her side. We have thus an example of the universal phantasy of a Last Judgment Day as taught in so many religions because it is necessary for the draining off of anxiety. The schizophrenic reaction, as represented in this case, is thus not to be interpreted as a problem-solving experience in which the patient is groping desperately for a new role in life. It consists rather in the break-down of the manipulative way of life. She hasn't learned a lesson and it is not to be expected that she will make an improved adjustment after she leaves the hospital.

A SECOND INTERPRETATION

We have here a bright, attractive girl of superior intelligence, brought up by a well-to-do foster-father and given many advantages. While without any stable home life, she was reared in good Catholic schools and exposed to the best that church has to offer. For the first nine years she seems to have been fairly responsive. She tells us that she was a good bit of a tomboy, but she liked the nuns and there is no record of serious misbehavior. Then at 13 she was sent to another school. Here she had a hard time. The nuns were stern. They insisted on her becoming a lady. She insisted on wearing jeans. For this and other misdemeanors she was punished. She was spanked, she was made to stand against the wall until she would apologize, she was sent to see the psychiatrist. After two years she was sent to another school. There she roomed with a girl who "knew her way around." This girl drank, she carried on with boys, she went on wild parties. M. L. went along; but she still continued to read the Bible and pray and she kept a diary. She thus began to "get mixed up about herself." Soon she begins to go out with boys on her own, and she is lectured by the nuns and sent to the psychiatrist. In the mean-time her foster-father, who had just got married again, seems to have been getting fed-up with her. He sent her to one of his farms to help take care of a large family of children. But she refused to stick it out. He then sent her to a Catholic detention home. Here she took up with a girl who was quite wild. She was also thrown with a lot of "queers." With the latter she was much disgusted and she gives that as a reason for running away. But she was soon picked up and sent to the Juvenile Detention Home in Chicago. She then appealed to her foster-father, but he refused to have anything more to do with her. She was next paroled to a young lawyer and his wife. Now for the first time, according to her account, she had heterosexual relations. This happened at a wet-party at which she was doped. Her new guardians now turn her back to the court. Here she is given a break. She is assigned to another home and steered into nurses' training. But again, with her now characteristic irresponsibility she and another girl take off for Texarkana. There they live quite loosely and she decides to get married before she gets into trouble. She immediately gets pregnant. Four months later she gets a divorce. She then returns to Chicago after turning the baby over to the father. Once more she begins nurses training and again she begins drinking and running around. Again she becomes pregnant. The man involved is a college student, a rather decent fellow, who, according to her account, offers to marry her. She, however, did not take him up on this because she could not see basing a marriage upon a mistake. The disturbance which brought her to the hospital began just two weeks after the birth of the baby. It began abruptly and was characterized by deep regression. There were ideas of death, of cosmic catastrophe, of mystical identification, of re-birth, of previous incarnation and of mission. It cleared up quickly and she seems now quite recovered.

This brief sketch of M. L.'s life is sufficient to indicate that it has been extremely unsatisfactory. It has been characterized by light-hearted irresponsibility. Dr. Masserman has ample reason for his pessimistic prognosis. Nonetheless I regard this case as a classic example of an experience which is at once mental disorder of a most pronounced and unmistakable variety and religious experience of a potentially constructive type. In support of this view, let me point out the following considerations:

1. Even tho this girl had been light-hearted and irresonsible she has been out-going and friendly, "dyssocial" rather than "anti-social" or a-social. What is more, there has been a deeper side to her nature which is represented by Bible-reading, by prayer and by the keeping of a diary.
2. The disturbance followed a momentous event, the hirth of a baby. The birth of a child is one of those crisis experiences which are likely to force either parent to think intensely about the things which matter most.

3. She had, according to her account, done something virtuous and sacrificial. The father of her baby had offered to marry her. She had refused because she could not see a marriage based upon a mistake.

4. The actual disturbance began with prayer, Bible-reading, intense pre-occupation and sleeplessness. This means that the conditions of creative mental activity were present in exaggerated form but functioning at the expense of judgment and perspective.

5. The ideas with which she was concerned are central in any attempt to work out a valid philosophy of life. Who am I? What is my relationship to God? What is blocking the fulfilment of my potentialities? How can I be saved (or cured)? These are precisely the questions with which theology is concerned. Her answers are not exactly orthodox but they spring from a situation in which she feels herself face to face with what for her is ultimate Reality. Such ideas represent anything but wishful thinking.

6. Cases of this type constitute a continuum which extends from acute and destructive mental disorder to religious experience in its more dramatic problem-solving manifestations. This girl, for example, has heavy odds against her and she may have further trouble, but that in no way alters the fact that such disturbances are manifestations of the power to heal analogous to fever or inflammation in the body.

7) Successful treatment requires that the therapist should recognize the meaning of such experiences and work with the healing forces and not against them. The hope of a constructive outcome in this case depends largely upon helping this girl to believe in herself and to believe in this experience as "something more than just a nervous break-down." To take away that faith would mean destruction for her. Her disturbance was religious experience of a potentially constructive variety and it must be so recognized. What is needed is to separate the wheat from the chaff.

8. Failure to recognize the religious significance of such a case as this is something far deeper than a matter of semantics, It is analogous to the failure to recognize that the earth goes round the sun instead of the sun around the earth. It means failure to understand mental disorder in its wider implications and failure to make the contribution that psychiatry ought to make toward the understanding of human nature either individually or collectively.