

the journal of Orgonomy



Major articles

The Impulsive Character (Part III).....
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of Western Culture
John M. Bell, M.A.

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NARI BERGGRAV

First International Orgonomic Conference, at Orgonon, August 30, 1948.

EDITOR'S PAGE

Reich felt very strongly that the present generation, together with all past generations, had failed miserably as builders of a rational way of life in keeping with natural laws. There was only one hope for the world—that children be allowed to grow up healthy from the beginning. Having focused on the problem, it soon became clear that we did not know what the healthy child was like and knew even less about how to raise one.

For this reason, on December 16, 1949, Reich met with forty professional workers—physicians, educators, social workers, and baby nurses—to discuss the study of the healthy child. At this meeting, the Orgonomic Infant Research Center was formed. Its object was fourfold: 1) the prenatal care of relatively healthy pregnant women, 2) careful supervision of the delivery and the first few days of the newborn's life, 3) prevention of armoring during the first five or six years of life, and 4) the study and recording of the further development of the child. The project was purely for research, with no effort to influence the child. It sought mainly to remove obstructions as far as possible from the child's development and to see that only the interests of the child were served. By this means, we hoped to learn what a healthy child really was like and what factors are necessary to secure a healthy development.

There was considerable interest and enthusiasm. Reich held several seminars in which he presented and discussed babies and talked to new mothers. He reported on the O.I.R.C. at the Second International Orgonomic Conference in Rangeley, Maine, in August, 1950. In 1951, a conference of the Orgonomic Infant Research Center was held at Rangeley. At this conference, Dr. Albert I. Duvall and I read papers which were followed by considerable discussion. Altogether four papers were published: two by Reich, one by Dr. Chester M. Raphael, and one by myself. And then—nothing. Thus the Orgonomic Infant Research Center died.

The emergency created by the Oranur Experiment required Reich's full attention in the following years, and no one other than myself, to my knowledge, continued to study babies and follow them as far as possible in their developing years, and published a paper on the subject.

Infants and healthy children were Reich's greatest interest and hope for the future. He left his estate, the Wilhelm Reich Infant Trust Fund,

for their welfare. Infant research is orgonomy's great obligation and the one most neglected. The past twenty years have largely been wasted in this respect; we still know very little about the healthy child and even less about how to raise one. In the meantime, the world is fast being destroyed, and man is as irrational as ever.

From my experience, I would still not draw any conclusions. Only one child among those whose development I followed did not require removal of beginning armoring. I last saw him at three years of age, after which his family moved some distance away. He is now sixteen, and the father feels that he is still quite healthy, and he has promised to arrange for me to see him. The children I have been able to follow have grown up independent, decisive, open, superior in their school work, and with a good social adjustment. In all cases, at least one parent was treated, usually both. I believe these children have made gains over the older generation, but I would not consider them examples of health. We need a great deal of continued and extensive research.

*Love, work and knowledge
are the well-springs of our life.
They should also govern it.*

Wilhelm Reich

From the History of Orgonomy

The Impulsive Character (Part Three)*

By WILHELM REICH, M.D.

CHAPTER FOUR

Ambivalence and Ego Formation in the Impulsive Character

No matter how fruitfully psychoanalytic research delves into childhood experiences of the third to sixth years of life, we cannot deny that we lack the basic ingredients for fully grasping how the psyche unfolds. This is because in analyzing adults we can rarely go deeper than the third year of life. Earlier memories do appear from time to time, but they are so vague, so sparsely connected to the organic whole, that we dare not build upon them any safe conclusions. However, this we may safely assume for the present: What happens to a person in the first two years of life is more decisive than what happens later on. The child enters the highly critical oedipal phase with attitudes preformed, at least in broad outline, if not in their final detail. The Oedipus complex may be likened to a lens through which the rays of the impulses are refracted. They give this phase its special imprint and undergo far-reaching modifications through the experiences of this phase. Anna Freud's case of an hysterical symptom in a child of two and one-quarter years shows how obscure this realm still is.¹

*Translated by Barbara Goldenberg Koopman, M.D., from *Der triebhafte Charakter*, Int. Pschoanal. Verlag, 1925. Parts I and II appeared in Volume 4, Nos. 1 and 2 of this journal, with introductory editorial comment by the translator.

¹"Ein hysterisches Symptom bei einem zweieinvierteljährigen Kinde," *Imago*, Bd. IX, 1923.

The difficulties in methodology seem insurmountable. So far, we have some reports of recent direct observations of children, but they deal only with children after the second year of life. We lack analytically-trained child and infant nurses.

Another, indirect way to fathom the earliest phases of development is clinical research into certain forms of schizophrenia and melancholia, whose fixation points we believe lie in those early, postembryonal states. There are schizophrenics who show attitudes and mechanisms really corresponding to those of the infant or one-year-old child and, indeed, even to those of the embryonal state itself. Tausk's² case teaches us a great deal about effacement of the boundary between ego and outside world; Nunberg's³ case is highly instructive vis-à-vis the most primitive sexual conflicts. Since certain forms of schizophrenia show partial or complete effacement of ego boundaries, along with definite infantile characteristics, it is not merely speculative for psychoanalysis to assume that the child's ego initially and gradually frees itself from chaos, that the ego boundary develops slowly, and that in this primordial phase of ego-unfolding the basis for ego maldevelopment is laid.

A pure impulse or pleasure ego confronts the stimuli of the surround, "identifies" with them insofar as they are pleasurable, and rejects them if they are unpleasurable, even if they stem from the impulse ego itself. The primordial pleasure ego has broader boundaries than the later real ego insofar as it deals with pleasure experiences (Freud),⁴ and narrower boundaries insofar as it deals with unpleasure. Pleasure objects of the outside world are perceived as part of one's own ego; since the mother's breast is the central object of this first phase, we feel we may now comprehend the driving force behind the sending out of object libido from the narcissistic reservoir: The maternal breast must finally be recognized as belonging to the outside world; it must be shifted from the ego and drawn to the libidinal attitude attached to it. Thus, for the first time, narcissistic libido is transformed into object libido. The first objects are not total persons from the environment, but the organs of such persons insofar as they are pleasurable. During analysis, the object gradually dissociates into its component organs: For example, with regard to the mother, the breast especially stands out.

²"Entstehung des Beeinflussungsapparates in der Schizophrenie," *Int. Ztschr. f. PsA.*, Bd. V, 1919.

³"Über den katatonen Anfall," *Int. Ztschr. f. PsA.*, Bd. VI, 1920.

⁴"Formulierungen über zwei Prinzipien des psychischen Geschehens," *Ges. Schriften*, Bd. V, 1911.

Just as, in retrograde analysis, the tender libido leads back ultimately to a pure organ libido, so the infantile organ libido settles progressively into sublimated forms of tender libido. From the mother's breast, the libido extends to the dispenser of food, love, and relaxation; that is, to the mother.

The Effects of Upbringing

However, right in the very first phase of this important process, denial comes into play: The mother's breast is taken away. Gratification and denial oppose each other at every step of development; indeed, further development from stage to stage comes about only through denial. But in the juxtaposition of impulse gratification and denial we discern, with Graber, the ontogenetic root of ambivalence. The child loves the impulse gratifier and hates the impulse denier. Whenever hatred is older than love, as Stekel and Freud have pointed out, the reason for this is unpleasure at birth. This unpleasure is then forgotten, thanks to the effects of organ pleasure, and reappears in the form of birth anxiety or a wish to return to the womb, as Rank has observed, whenever the impulse denials turn out to be overly severe from the very beginning.

Thus ambivalence is natural and necessary to psychic development. Since everyone has experiences that engender ambivalence, we must ask ourselves—what is the added factor that makes ambivalence pathogenic? It depends on the following: the form and intensity of the denial; the stage of impulse gratification at which it was introduced; and the attitude of the child toward his nurturer at the moment in question. There are four main possibilities:

1. Partial impulse gratification plus partial, gradual denial, and through this, gradual repression. This situation represents the optimum developmental approach. In the state of partial impulse gratification, the child learns to love the nurturer and then takes the denial "for the sake of" this person. We strive to achieve this optimum even in the analytic situation. The impulse satisfaction must be partial from the very beginning. For example, the infant must at the outset get used to feeding at certain hours.⁵ Denial must become increasingly strong without, however, leading to total impulse restraint. In this way, the impulse to be repressed can be sublimated or replaced by another partial impulse.

⁵*Editorial note:* Reich subsequently repudiated this approach to infant feeding in favor of self-regulation.

2. The impulse denial does not occur gradually, but proceeds full force, at every phase, right from the start. This is tantamount to total impulse inhibition, such as one sees in some cases of abulia. This is how in many cases—for example, bottle feeding or total repression of genital masturbation—the capacity to love is inhibited.⁶ If the impulsive tendency is strong, the ambivalence conflict is biased in favor of hatred. This is true of many impulse-restrained compulsive neurotics.

3. Impulse denial is totally or virtually absent at the time of earliest development, owing to the fact that the child grows up without supervision. This can only result in uninhibited impulsivity. Since, sooner or later, the reactions of their expanding environment come into play, severe conflicts must of necessity arise. The first two possibilities we can verify analytically; the third we postulate in this extreme form. However, we are convinced that analytic investigation of criminals, prostitutes, etc., will bring such facts to light.

4. As to the fourth possibility, we see, finally, the typical configuration of the impulsive character, according to my experience. In part it dovetails with the third possibility. In the analysis of impulsive characters, we find with surprising regularity that an inordinate, unbridled impulse gratification was often met with a belated ruthless, traumatic frustration.

Thus, for example, one such patient of mine was raped by her father, yet beaten senseless if she had anything to do with playmates on the street. Another patient grew up entirely unsupervised, indulged in genital games at age three (perhaps even earlier), yet was brutally beaten by her mother who chanced to catch her at it. It commonly happens, for example, that children are strongly restricted in certain matters, but left entirely to themselves the rest of the time. Thus the father of a patient of mine insisted upon the children's eating everything, but ignored their masturbating and playing with dirt. Often, too, children undergo minimal supervision and consequently develop poor impulse repression. Then, one day, the whole thing becomes too much for the parents who now, suddenly—without warning and with great vehemence—"sing a different tune." We shall spare ourselves the listing of further possibilities. Every insightful educator will have more to say on the subject. Inconsistent upbringing, *i.e.*, faulty impulse denial focussed on a single detail, on the one hand, or sudden and belated inhibition, on the other—such is the common denominator in the genesis of the impulsive character.

⁶Case 6, Reich: "Über Genitalität," *Int. Ztschr. f. PsA.*, Bd. X, 1924.

Conflict, born of ambivalence, here takes on quite characteristic forms. Constant hate and fear for the nurturer may predominate, together with unrestrained impulsivity, occasionally reinforced by stubbornness. Or, equally often, an intense, unsatisfied longing for love is opposed by a hatred of the same intensity. Varying factors determine whether the result of such a development takes a sadistic or masochistic form. The incapacity for love is always gross here and much more outspoken than in simple symptom neurosis. Allied to this is a strong craving for love.

In contrast to the ambivalence of the compulsive, there is the distinct difference that reaction formation is lacking, and sadistic impulses are more or less fully lived out. In the typical compulsion neurosis, the ambivalence is displaced, in a seemingly senseless way, to details and to a lack of concern. Occasionally, an impulsive will show such displacement, but, typically, the ambivalent relationship to the original objects or their corresponding substitutes remains persistently evident. In the impulsive character, the damage done by the nurturer's attitude is clearly manifest; in simple neurotics, such damage does occur occasionally, but, in most cases, this type of damage is not present or at least not more pronounced than in people who have remained healthy. The infantile experience of impulsive characters is riddled with severe traumas; symptom neurotics suffer none at all or, occasionally, only one. Typical experiences, such as healthy people undergo, like castration threats or primal scene, take on especially blatant forms in the impulsive character. This may be because the latter has suffered extreme cruelty for trivial offenses, experienced multiple seductions at the hands of the nurturers, or grew up in a sadistic environment. There are all gradations, ranging from the cultured person's unhappy marriage to the drunkard's brutal marital excesses. It is precisely this type of case which supports Freud's assumption that neurosis and pathological character formations are largely learned.⁷ Clearly, an environment marked by scanty impulse control makes for poor ego ideal formation in the child; on the other hand, it allows the impulse frustration to be more brutal than necessary. Hence the typically acute and outspoken ambivalence of the impulsive, who could rightly say that he was not taught any differently. The unfeeling attitude of the nurturer is then reflected in the child's unfeeling attitude toward the environment. It would be quite incorrect to speak here of an absence of ego ideals. The impulse-negating ego ideal has been formed and is present, yet the impulse-

⁷"These crazy moods, attributed to nature, yet planted only by education . . ." writes Rousseau in his *Confessions* (*Ausgew. Werke*, Cotta, Bd. I, S. 51).

affirmative superego has also been acquired at the same time. If this were not the case, unbridled impulsivity without neurotic constructs would result, as occurs in many psychopaths who lack such structures. The omnipresent feeling of guilt, especially in the masochistic forms of the impulsive character, points to a strong position of the ego ideal; the strength of the ego ideal position must be paralyzed momentarily if the impulsivity is to be effectively unleashed in defiance of it. This pathogenic superego formation appears in all impulsive characters; it is mainly conditioned by outside forces and countered by an inner force. At the same time, a constitutional factor figures here: an abnormally early sexual readiness, which can regularly be documented, *i.e.*, an overly strong emphasis on all erogenous zones. I would emphasize that the genitality of such patients reaches full development at an abnormally early age. In healthy individuals and mild neurotics, sexual activity in early childhood is the rule; the genital phase seems to peak regularly around the fourth or fifth year of life. Often the genital phase unfolds in a situation of fully repressed impulsivity: Sexual and incest wishes never enter consciousness with full, sensual impact, but retain their full strength in the unconscious.

By contrast, impulsives have lived out their sexuality not only very early but also with fully conscious incest wishes. In this state of affairs, one libidinal phase does not free up another, as in symptom neurotics; instead, the partial impulses stay more or less juxtaposed and of equal weight. These are the patients who have a characteristic history of polymorphous perverse child's play. Owing to lack of supervision, such patients see and grasp far more of adult sexual life than do the simple neurotics. The latency period is activated minimally or not at all. If we consider the importance of the latency period in human ego development vis-à-vis sublimations and reaction formation, we can gauge the damage done here.⁸ Puberty is ushered in with extreme breakthroughs of the sexual drive. Neither masturbation nor intercourse, which are taken up at a very early age, can afford relief, for the whole libidinal organization is torn apart by disappointment and guilt feelings.

The following case is very instructive in this regard. It illustrates such mechanisms as feelings of guilt, as well as the polymorphous perverse libidinal structure found in other types of impulsive characters, also. The latter I shall discuss in connection with a subsequent section on "isolation of the superego."

⁸*Editorial note:* Reich subsequently changed his views on latency: If the oedipal conflict is decathected in childhood through *peer*-related sexual activity, there is no need for sexual repression in the so-called latency period.—BGK

The Question of "Borderline Cases"

We are dealing here with a compulsion neurosis, but the diagnosis of schizophrenia is very much in the forefront.

A nineteen-year-old patient sought analysis because of a tormenting idea which always appeared whenever she thought she had done something bad: The world ends; it is totally annihilated. Whenever she was supposed to work, she compulsively thought, "Why should I do all this if the world is going to end tomorrow anyway?" The next day she would be utterly amazed that the world was not yet destroyed. Along with this there was no trace of manifest anxiety. Instead, feelings of great sadness and desolation accompanied the fantasy of world disaster: "Everything is dead, extinct; I often marvel that people are still moving around." These states of depersonalization were always connected with the world extinction fantasy, but they also appeared on other occasions several times a day.

At first she did not experience the end-of-the-world fantasy as an illness. In the beginning, she maintained very firmly that she believed in the possibility of world annihilation. Sometimes the patient would look lost, interrupt her speech, and stare absentmindedly; sometimes her speech was circumstantial. The first impression was that of dementia praecox. The parents' observation that for days she was lost in dreams and unwilling to work bears this out.

Before continuing this history, we should like to mention that her older and prettier sister was well-adjusted and showed no neurotic manifestations, as far as was known. The father was a functioning and capable individual, with a violent temper—irascible, domineering, intelligent. The mother was reportedly healthy, but a person with somewhat limited spiritual horizons.

The typically schizoid traits described above stood in sharp contrast to the patient's disposition, which bespoke an intense relationship to the outside world, especially towards the parents and sister; a relationship marked by stubbornness and spite. The patient felt extremely inferior and was unable to do anything, even though she was supposedly able to do everything. She would have liked to have learned every trade, understood mathematics, and grasped the construction of a machine, and she saw inability as "an oppression of the woman by the man." Whenever she saw a girl learning to ride a bicycle on the street, she had the compulsive thought that a man must be more adept, and she saw the learner's inability as an oppression. The inferiority feeling was very closely tied to conscious, self-tormenting tendencies. For example: She

learned how to cook and felt inferior; very often she did everything wrong consciously and deliberately, and her biggest delight was being scolded by her mother. She herself admitted that she did many things wrong in order to anger people and get reprimanded. She learned how to sew and purposely miscut material so that it had to be thrown out. In analysis, she was stubborn and unbudgeable, and after a few sessions asked why she didn't get thrown out. The world destruction fantasy always went hand in hand with the self-torment. But she even tormented others, especially her mother. She would purposely trip her to make her "fall and break her neck." She delighted in inventing cruel fantasies with both masochistic and sadistic goals. An example of the former: A sword is thrust up her vagina until it pierces the top of her head. Or she is made to walk barefoot and bleeding on a board spiked with nails.

The first fantasy related to her gonorrhea, which she pinpointed accurately as having occurred in her fourth year of life and which she presumably caught from a governess. She also dated the onset of her "craziness" from age four. For six years, she underwent special treatment, and the sword fantasy has a real basis in the pain she endured from dilatation of the cervix.

The second fantasy related to masturbation, which she had practiced continually since early childhood. It appeared at age four when her father yelled castration threats at her, tied her hands up all night, and inflicted other similar excesses.

Her sadistic fantasies can all be derived from the masochistic ones. Thus she told her mother: "Take a board, spike it with nails, and bash father's skull"; or, "Climb up on the window and throw yourself out. Meanwhile, if I happen to be eating, I shan't hinder you. I'll calmly finish eating and then go into the yard to have a look at your broken body." She perceived these outbursts as neither sick nor objectionable. She spoke them calmly without spontaneous feeling. On the other hand, she could throw herself on her mother's neck and kiss her.

It took long, hard effort in analysis to make the patient see that the world-collapse fantasy was related to her feelings of guilt, which actually stemmed from her sadistic impulses. The patient got special fun from "scratching" with fingers bent close to her mother's eyes, as if to blind her.

The patient felt oppressed by the father, but respected him because he was "smart" and the master of the house. The father, an evidently highly sadistic character, beat the children mercilessly (sometimes he even used switches) for the slightest infraction. Despite this, or, in keep-

ing with her masochistic attitude, because of this, she respected him. Indeed, she even adopted his attitude and treated the mother just like the father did. She broke dishes in anger and was sarcastic and cruel to the mother; at the same time, she gave her big rival, the prettier and preferred sister, all her love and admiration (later on, at least), just as the father did. The mother annoyed her "just by her mere presence." She seemed stupid, weak, overly permissive, and therefore unworthy of respect.

We can clearly see how the brutal fatherly ideal took over the patient's ego and how strong her father identification is. Next to this, at a deeper layer, lies the masochistic surrender to the father which runs parallel to the sadistic attitude toward the mother. Yet both sadistic and masochistic tendencies are fully conscious. Thus we see here the typical aspect of this case—precisely in the fact that such tendencies are fully conscious and not buried under the strongest repression in the manner of a simple compulsion neurotic. Our patient also failed to show the typical over-scrupulousness of the latter category; on the contrary, she was without qualms most of the time.

An analogy to the compulsive's over-scrupulousness is expressed by the central symptom, the world destruction fantasy, which corresponded to tremendous guilt feelings toward the mother (and later to broader and deeper determinants), but was associated with simple, trivial occurrences. But it was just this displacement of guilt feelings to trivial matters that made the manifest sadistic attitude possible. During analysis, this connection was correctly reestablished; but now the patient began to feel her sadistic attitude toward the mother as a compulsion. At this point, the impulsive, compulsive-neurotic character was transformed into a typical compulsive symptom.

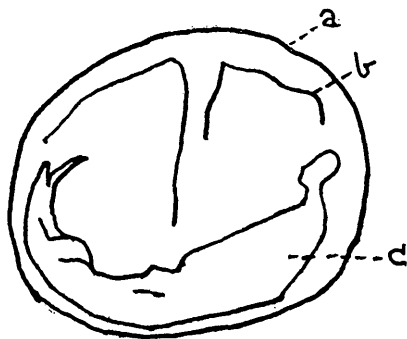
The typical case of compulsion neurosis presents with an undisguised compulsive thought or impulse, and the guilt feeling is directly related to the symptom. In the sharp separation between sadistic impulse and guilt feeling, we see one of the typical mechanisms of the impulsive character. As further evidence, we note the following: In the hyper-scrupulous compulsive who has completely repressed his sadistic impulses, guilt feelings are connected to trivial events, just as they are in the impulsive.

Later on, we shall have to deal more exactly with the key question concerning the impulsive character—what makes the separation of guilt feelings from manifest sadism possible?

I should like to present briefly the libidinal aspects of our case, whose sexuality is unrepressed to an extreme degree.

The patient masturbates almost every day without orgasmic sensation and with abundant masochistic fantasies. There is no intercourse. In this respect, we label her libidinal structure as totally polymorphous perverse. One masturbatory fantasy is that she and her father would eat stuffed vaginas that had previously been cut out and filled with dirt. We have, therefore, components from all three libidinal levels: eating (oral); vaginas (genital); dirt-filled (anal); and the whole thing is experienced masochistically (she is forced to do it). Manifest coital fantasies of a normal nature play a minimal role. The oral component of this fantasy has its special history. During childhood, she and her sister suffered from eating disturbances. To combat this, the family doctor (!) recommended they be forced to eat by any means available; should they regurgitate, they should be forced to eat the vomitus also. This happened repeatedly. How understandable that repression and sublimation of oral and anal tendencies failed, so that the patient was still eating dirt and vaginal secretions in her seventh and eighth years of life. At the time of the analysis, the patient used to take great pleasure in smearing vaginal secretions between her fingers.

Fantasies of the womb also loomed large in this patient's symptomatology, along with the libidinal development. A vivid visual image went hand in hand with the world destruction fantasy, which in the final analysis was a temporary regression to the womb, dictated by feelings of guilt: The patient sees herself lying in a "globe." The drawing is from the patient herself: a) represents the globe; b) are the eyelids which "like shelves line the interior and run to the body"; c) represents herself. We do not hesitate to take this for a womb situation.⁹



⁹I should only like to call attention to the strange position of the shelves. It is totally reminiscent of the development of the amniotic membrane. I am avoiding any attempt at interpretation but would like to point out that the patient, as far as we know, had never seen a picture of the embryonic set-up and that this fantasy had existed since early childhood.

We may better understand the libidinal structure of such patients if we compare it to that of a classical case of hysteria and compulsion neurosis, respectively. In the analysis of a pure anxiety hysteria, we find a repressed genital libido as the central pathogenic factor. Moreover, even if a different libidinal component emerges as a symptom or in the course of a depth analysis, we still have no reason to doubt that the main fixation in pure anxiety hysteria is at the genital stage. Hysteria, according to Freud, is an illness of the genital phase. This is true even in a conversion hysteria of an oral type—a case of hysterical vomiting for example—where we find a central oral fixation in the libidinal pattern. Analyzing the total personality of the hysterical character, and the meaning and cause of the oral symptom soon tells us that the oral zone has acquired a genital meaning (“displacement upwards”), as Freud and Ferenczi pointed out. In a classic compulsive, whether he shows sadistic impulses or cleaning rituals based on anal eroticism, the pre-genital anal-sadistic fixation always occupies the central position (Freud); it gives rise to the symptoms, and it gives the compulsive character his specific stamp (over-conscientiousness, orderliness, etc., as reaction formations against repressed sadism and anality). In melancholia, the oral fixation is central, as Abraham conclusively demonstrated—a fact which every analytically trained clinician can easily prove for himself. In the mixed forms of compulsion neurosis and hysteria, a depth analysis can, without difficulty, reduce the various symptoms and character traits to their corresponding fixation points. True, there is still a myriad of unsolved, crucial problems centering around the developmental thrust from the anal sadistic to the genital stage—which really has to do with the problem of specific etiology. Nevertheless, in the milder and purer forms of hysteria and compulsion neurosis, we do delineate circumscribed fixations and developmental blocks of a portion of the personality with more or less sharply defined libidinal positions. In the extreme impulsive character, such as our case, we can never make such an evaluation. If we try to relate a host of attitudes and symptoms to a genital or anal fixation, we must ascribe to the oral fixation as important a role. Even with extensive analysis, we cannot find a common fixation point at a given stage of libidinal development, but, rather, a more or less equal juxtaposition of all known partial impulses in combinations and permutations which cannot be sorted out most of the time. We get the impression—to use a drastic expression—of a bull unleashed in the china shop of infantile development.

Our case shows a lasting, marked ambivalence toward the father and mother, which is especially expressed in the cruel words and deeds

toward the mother. Her superego is totally oriented toward the male. She admires her strong, rough father and acts just like the father toward the "dumb" weak mother. The identification is fully conscious. The inferiority feelings, so prominent in her complaints, hark back totally to the father identification and to the envy towards the sister who is her father's favorite.

Analysis revealed the following about the father: He had almost certainly inflicted severe damage with his sadistic attitude; he had provided the model for the sadistic ego ideal; but, most of all, he was very likely a party to the defective impulse repression. He had approached the children with unveiled sexual intent; indeed, I strongly suspected that he had given the patient gonorrhea when I learned that he himself had suffered from chronic gonorrhea. The patient herself dated the onset of her illness to around the fourth year of life, the exact time of the gonorrhea infection, and she always felt immensely shy toward the father: She was always fantasizing being "raped" by the father.

The father is also implicated in the poor control of anal impulses. He forced the children to eat vomitus, thus fostering coprophilic tendencies which at any rate were present to begin with.¹⁰ It is understandable that anal repression was defective. He beat the children mercilessly for the slightest transgression but felt completely free himself in anal matters. One might object that the older sister remained healthy despite growing up in the same environment. To this we counter the fact that she was always held up as a model to the younger sister and was favored and over-esteemed in every way, a factor which was surely weighty enough to turn the scales. Moreover, we really do not know anything about the sister's libidinal vicissitudes or what had really promoted the favorable outcome. She hated the parents as much as the sister did, but opportunely freed herself from home.

The case shows pronounced schizophrenic mechanisms side by side with classical compulsive mechanisms. Many readers will make a diagnosis of schizophrenia. The major compulsive symptom, the rumination about the end of the world, is schizophrenic both in content and in the way it is perceived. The patient tends toward autism. The absence of repression, the conscious awareness of the sexual wishes, bespeak schizophrenia; yet, all the grosser dissociations of affect and confusion are lacking for a strict diagnosis, nor are there hallucinations or delusions. Although we do not expect to make a diagnosis, it is still not unproductive to ask whether we are dealing here with a schizophrenia or a com-

¹⁰The fantasy of the dirt-filled vaginas.

pulsion neurosis. Only future developments will tell. If we apply Bleuler's¹¹ broader concept of schizophrenia here, we shall tend toward a diagnosis of latent schizophrenia with compulsive symptoms. At the same time, we must rule out dementia praecox, according to Kraepelin's narrower definition,¹² but we can consider the patient a kind of "psychopath" which, as Kraepelin notes, is an early precursor of true psychosis. In the final analysis, we see that the whole question becomes a struggle over terminology.

The question of borderline cases warrants considerable discussion, since most patients with this clinical picture show not only various schizophrenic symptoms but also an oscillation of their libidinal structure back and forth between autism and object cathexis. In almost all severe cases of impulsive character, we must raise the question as to whether a schizophrenic process exists.

From the psychoanalytic standpoint, we can approach this question only in the dynamic context of a libidinal position. Even in psychoanalysis we speak of "latent schizophrenia"; but this does not imply the actual existence of a schizophrenic position that is merely covered over by transference-neurotic symptoms and attitudes. Such an assumption would diametrically oppose the libidinal-dynamic principles we have come to understand. It would impart a static quality to an area we see as purely dynamic. In the absence of typical schizophrenic symptoms like stupor, delusions, word salad, or hallucinations, we cannot say there is a schizophrenia present, nor can we talk about latent schizophrenia. But, in keeping with the above, we must always remember that what we are talking about is a greater tendency toward the schizophrenic withdrawal of libido from the outside world. There is often a deterioration from an overly strong narcissistic position to a "latent" schizophrenia. On the other hand, there are neurotics who could never be called schizophrenic, yet who show a narcissistic position matching in intensity that of the schizophrenic.

To what degree does a schizophrenic's narcissistic position differ from that of a "narcissistic," inaccessible transference-neurotic's? This is still a question without a satisfactory solution. And it is not our purpose to deal with it here. However, analytic research of "borderline" cases like our patient warns against the assumption of a "ready-made" schizophrenia, as it were, which subsequently "becomes manifest."

I treated a forty-year-old female psychopath who, from earliest childhood and particularly since puberty, presented the clinical picture of

¹¹"Gruppe der Schizophrenien," in Aschaffenburg, *Handb. d. Psychiatrie*, 1911.

¹²*Klinische Psychiatrie*.

"latent" schizophrenia. She was a complaining patient, who thought she was pursued by fate and maltreated by everybody. She also suffered from states which differed little from catatonic stupors, in addition to phobias, compulsive rumination and impulses, and conversion symptoms. At the psychiatric observation ward, where she had been a number of times, she was diagnosed once as a psychopath, another time as a compulsive, and finally as a paraphrenic, without any appreciable change in the clinical picture since puberty. There are some typical compulsives who, owing to their cyclic depressions, belong in the group of cyclothymic disorders and seem to be totally excluded from a schizophrenic diagnosis. Again, there are others who show a special relationship to schizophrenia (our patient, for example). The whole problem becomes clearer if we free ourselves from the prejudice (still held even in analytic circles) that schizophrenia, owing to its organic nature, is a basically different illness from the rest of the "psychogenic" neuroses. (Jaspers¹³ speaks of a "schizophrenic process.") Even Schilder¹⁴ still holds to this. In psychiatric literature, we often do not see the connection between the outbreak of a psychosis and the actual history, because we are trapped by the prejudice of a ready-made, organically preformed psychosis. Hartmann¹⁵ had occasion to observe two sisters who became schizophrenic at the same time, coinciding with their father's death. How can this be compatible with the idea of a preformed psychosis?

There are two theories in particular concerning this question: One postulates that schizophrenia is caused by internal secretions; the other assumes that schizophrenia is constitutional, especially since Kretschmer's work.¹⁶ Of course, Freud has always thought about an internal secretory process even in the etiology of transference neurosis, and his whole theory of "erogenous zones," so central to his theory of the neuroses, is based upon this assumption ("sexual hormones"). However, according to this schema, transference neurosis would not differ basically from schizophrenia. Even the assumption of a specific constitution, Kretschmer's "schizoid group" for example, does not contradict a psychogenetic viewpoint. The schizoid group covers a much broader territory than the realm of schizophrenia. Compulsives, and, in particular, hysterics also belong here. Likewise, the finding of pathological changes

¹³*Psychopathologie*, Berlin, 1920.

¹⁴*Seele und Leben*, Berlin, 1923.

¹⁵"Ein Betrag zur Lehre von den reaktiven Psychosen," *Monatsschr. f. Psychiatrie u. Neur.* Bd. 57, 1924.

¹⁶*Körperbau und Charakter*, Berlin, 1922.

in the cerebral cortices of old, burned-out schizophrenics does not contradict our view. In the first place, we do not know what kind of changes (cytoarchitectural perhaps) may occur even in hysterics and compulsives. Thus far, none has been found. Moreover, the rarity and sparsity of such findings is markedly disproportionate to the high incidence of schizophrenia—even if we do not consider whether such changes in the burned-out dementias represent atrophy from lack of activity. If this is so, the transformation of a compulsion neurosis into a schizophrenic disorder remains a problem; we think it would be of utmost help not to erect a wall between these illnesses. The relationship between them is all too obvious.¹⁷

During the analysis of an impulsive character, we can observe transitory delusions *in statu nascendi*; moreover, we see how an irresistible impulse, normally not felt as a compulsion, is transformed into a compulsive act. At this point, the content remains and only the form is changed. During analysis, in conjunction with a homosexual transference which became acute, one of my erethrophobes developed a fully systematized delusion of persecution of five days' duration. He was presumably an Aryan, I was a Jew and therefore wanted to hurt him; he felt I was watching him and he was afraid of me. I was a sensuous pig, I had sensuous lips, and I looked at him sensuously. All he had done was to project on to me his homosexual wishes, which had just come up in analysis. When this phase passed, he realized the connection of the wishes to himself and he would reproach himself for being lasciv-

¹⁷The discussion of the etiology of schizophrenia has been well organized by Wilmann, who put the psychoanalytic viewpoint in proper perspective. ("Die Schizophrenie," *Ztschr. f. d. ges. Neur. u. Psych.*, 78. Bd., 4 u. 5. H., "Vorträge zur Schizophreniefrage.") Collected here is all the pertinent literature.

All the cases of impulsives with strong asocial trends, whom I studied analytically and observed personally, had this in common: Since early childhood, their activities were unrestrained. Gerstmann and Kauders published some interesting cases who, following an encephalitic illness, and, during a post-encephalitic condition bordering on hyperkinesia, developed a dyssocial, impulsive state. ("Über psychopathieähnliche Zustandsbilder bei Jugendlichen," *Archiv f. Psychiatrie*, 1924.) The analyst should not disregard such facts. The cases cited were not, of course, fully examined with regard to their premorbid personality; in particular, the libidinal transformations are not discussed. Therefore, further conclusions are not permissible. We would just like to point out that Schilder and others have repeatedly discussed the problem as to what extent brain disease triggers psychogenic processes. The fact that a disease of the midbrain or basal ganglia "begets" a dyssocial reaction is as incontrovertible as the fact that paresis "produces" delusions. Certainly a somatic process can occasionally encroach upon psychic causality. ("Cortex—Stammganglien: Psyche—Neurose," *Ztschr. f. d. ges. Neur. u. Psychiatrie*, Bd. 74, 1922, and "Über den Wirkungswert psychischer Erlebnisse und über die Vielheit der Quellgebiete der psychischen Energie," *Arch. f. Psych.*, 1923. Also, "*Seele und Lebe*," Berlin, 1923.)

ious and having intercourse with his eyes, etc. As H. Deutsch¹⁸ has stressed, excessive neurotic distrust, especially in compulsives, stems from the fact that their own repressed sadistic tendencies are projected on to others. We know the role played by distrust in cases of paranoia.

A patient whom we shall discuss later on—in whose case schizophrenia could not be totally ruled out—developed acute transient auditory and visual hallucinations during analysis. She had learned of the death of a loved one and wished to deny it. During a session, she heard this person cry out and pound on the door and saw her standing clearly in front of her. A strong denial of the experienced loss—the wish that the deceased would live—was fulfilled through hallucinations.

In all such cases, a transient clouding of reality-testing occurs, which enables the patient to experience delusionally the content of her experience. Cases of the type we just discussed are especially prone to transient clouding of reality-testing. This undoubtedly has to do with an acute withdrawal of cathexis, with narcissistic regression. When the ego is flooded by narcissistic libido, this must have a distinct effect upon that part of consciousness which receives perceptual stimuli and controls reality-testing. (The *Wahrnehmungssystem* of Freud.)

It appears that the road connecting the "narcissistic reservoir" to the object-libidinal position is far broader in such cases than in the simple transference neurotic. The roughest assumption we can make is that the "breadth" of communication between ego and outside world implements this great tendency toward regression. The libido of such patients is in a perpetual state of oscillation: At the slightest denial or disappointment on the part of reality, an acute withdrawal of cathexis ensues. Freud has already clarified the difference between this and the libidinal regression of simple transference neurotics who have no schizophrenic mechanisms: After a disappointment, the neurotic withdraws libido from real objects and recathects fantasied objects with it. The schizophrenic, or the neurotic with schizophrenic mechanisms like our main case, deflects the withdrawn libido into the ego and even renounces cathexis of the fantasy. This is how the cathecting of a fantasy with object libido serves as a protection against narcissistic regression. A broader regressive pathway to autism, no matter what its nature and origin, will unfavorably balance the outcome against the cathexis of the fantasy.

(To be continued in the next issue of this journal.)

¹⁸"Psychologie des Misstrauens," *Imago*, VII, 1921.

Development of a Cancer Biopathy

By MORTON HERSKOWITZ, D.O.*

Statistics predict that one of every four persons now alive will develop cancer. Most cancer research concentrates on the chemical, immunological, and genetic characteristics of the cancer cell. Reich's investigation of the cancer biopathy focussed instead upon the dysfunction of the orgone energy metabolism in the total organism. He found that a cancer tumor is the local manifestation of a deep-seated contraction and dying of the biosystem, which is functionally identical with characterological resignation. The following case presentation demonstrates the evolution of a cancer biopathy in a patient whose organism was severely damaged in early life.

The patient, Rita S., a forty-three-year-old former department store executive, came to therapy suffering from a postpartum depression of several months' duration. There had been constant troublesome nausea throughout the course of the pregnancy, to which was added an abiding belief that some harm would befall the baby during or following the pregnancy. This belief was held with such force that the patient did not purchase clothing or supplies for her baby prenatally. Though she had been informed that she was incapable of conceiving again, she had desired this child. Labor had been induced, was of four to five hours in duration, and caudal analgesia had been administered in parturition. There were no medical complications with delivery. The baby was being cared for currently by a nurse, outside the home, and was in good health.

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Medical anamnesis revealed a history of appendicitis, pneumonitis, and recurrent bouts of pleurisy as a young adult; later, a cerebral aneurysm with slight hemorrhage which caused a minor stroke whose only residuum was a weakening of the eye muscles (diplopia) when tired, a bout of nephritis from infected teeth, mononucleosis, and following the birth of her first child nine years before, she had suffered from effects of Sheehan's syndrome (a postpartum pituitary necrosis characterized by symptoms of hypopituitarism—mammary and ovarian involution, amenorrhea, lethargy, etc.).

The history of emotional disorder was equally extensive. There had been a psychotic breakdown at age nineteen, with recovery after three months following a course of electroconvulsive therapy. Two suicidal attempts were made in 1952, once with sleeping pills and once by leaping from a high bridge from which very few have escaped death. She was again institutionalized at that time and treated with insulin. The birth of her first child had also been followed by depression.

At the time of the initial interview, the patient was suffering from anxiety of moderate severity, from fear of being alone, insomnia, depression, feelings of unworthiness, hopelessness, and being a drag-weight on others' lives. She despaired over the loss of her usual "even-temperedness" and the ability to maintain an ordered home. She harbored suicidal wishes, but entertained no specific suicidal plans.

Rita was the second of three children. Her older brother was schizophrenic, in institutional-based psychotherapy for several years. Her mother was a woman of social elegance, devoid of emotion and caring. Her father, an extremely successful businessman, had been apprehended mishandling funds and had committed suicide shortly before her own attempts at suicide. She idolized him, and had been severely shaken when, during his exposure, she discovered that not only had he failed to live by those precepts of impossible scrupulousness with which he regularly admonished her, but that he had enjoyed many extra-marital affairs. Despite these disclosures, she maintained that he was a tender, loving father, one of the finest men who had ever lived.

Though she could recall very little of her childhood, she knew enough about it to describe it as a general misery in the midst of material wealth. As a matter of fact, life was a tedious misery up to the time of her marriage thirteen years earlier, when she knew peace for the first time. Her husband was supportive, considerate, and bright; and, she said, he had changed the tone and course of her life. She had affection and admiration for her husband. Her sexual attitude was compliant. This had been her only sexual relationship, and she regarded it

as neither particularly pleasurable nor unpleasurable.

The prevailing impression that one gained on viewing the patient on the couch was of fragility. Rita seemed a delicate organism battling with what little energy was available to her to keep from falling to pieces. Her eyes were soft and unfocused. Because of a recent disorganization, she had taken to writing everything down to keep her thoughts and actions sensible; a procedure she had instituted after she found herself waking her sleeping baby to change her diapers. One sensed a courageous animal fighting against tremendous odds to maintain itself. She looked at one when she spoke, though through a veil. Her face was composed through long years of training, and, though tears drifted down her cheeks in a continuous stream, her voice was well modulated and deep, with overtones of profound sadness. Throughout her body, armoring was soft, but deep. Her neck and shoulders were held stiffly, but not rigidly. Breathing was very shallow, with the chest held in the inspiratory position. Abdomen and pelvis followed the pattern of a chronic armoring with insufficient energy to maintain itself forcefully. Through years of expenditure of energy in containment, Rita had managed to quiet her body and reduce it to a state of stillness.

Because of the impression of extreme tissue fragility coupled with a low energy state, and a medical history of repeated physiological and psychological breakdown, the therapeutic plan was to relieve the patient of her depression as quickly as possible without attempting to effect profound structural or deep characterological changes. Her husband was informed of this goal and was in agreement.

Rita's general practitioner had instituted a medical regimen prior to her referral to me. She had been receiving Librium 10 mg. q.i.d. and Aventyl 100 mg. daily for more than one month. She had noted no improvement during this regimen, in either the level of anxiety or the depth of depression. During her initial therapy, the medication was reduced to Triavil 2-25 tabs II taken before bedtime.

In a total of twenty-two sessions, the therapeutic emphasis was on slowly relieving the armoring of chest and throat so that the patient became capable of crying relatively freely, vocally; performing coordinated eye movements and maintaining eye contact to reestablish the integration of ideation and feeling and to maintain the ability to concentrate; beginning mobilization by punching the couch, growling, and looking angry, to provide an avenue of expression for her repressed rage and to relieve her guilt.

At this time, she reported gradual symptomatic improvement. Her husband reported that she was irritable and at times overtly angry with

him for the first time in their marriage, for which she apologized at first, but as time went on did more guiltlessly. She began to feel the desire to have her child at home with her, and, as time passed, not only felt anxiety-free with her baby, but began to feel warm motherly love. She was now able to run her household efficiently and was again busying herself in her garden, an activity which was dear to her. There was some liveliness in her expression, and occasionally even a twinkle in her eye. She had discontinued her medication for some weeks.

Upon her request, therapy was discontinued at this time with the proviso that she return immediately should any symptoms recur. For several months, Rita reported by telephone that she was feeling and functioning well.

Approximately six months after discharge, her husband called. She had developed a chronic cough which at first had been assumed to be from smoking (she smoked heavily). When the cough persisted, her general practitioner had ordered an X-ray which revealed diffuse pulmonary carcinoma with axillary involvement. She had been sent to a specialized institution for treatment with massive doses of radiation and was now ready to be discharged. She had been informed that she had a tumor in her lungs, but not that it was malignant. She was again acutely depressed.

When she returned, I visited her at home. The deathly calm had returned, and she said she expected death. For several weeks, she improved slightly, then was seized with abdominal cramps and hospitalized. Examination revealed widespread metastasis throughout her abdomen, and, in a few weeks, she died.

Treatment

The interest of this case lies far more in the unfolding of a cancer biopathy than in the orgone-therapeutic treatment of a specific depressive episode. The treatment section of this discussion will therefore be limited to those aspects that shed light on the biopathic process.

The postpartum depression was viewed as an organismic contraction which had followed upon the expansion of pregnancy. The therapeutic goal was to reestablish the movement of energy from the center to periphery. Whereas in other depressed patients one might proceed to arouse the repressed rage more audaciously by physical and emotional provocation, the delicate crystal fragility of the patient's tissue precluded such an approach. The approach was rather through sympathetic discussion, work on eye movement coordination and focusing, and mobilization of the chest segment through breathing and vocalization of

anger, together with fist-pounding. The armoring of the upper segment was not heavy, so it was with not too much difficulty that the patient became able to cry relatively freely and to express a limited range of anger. The deepest rage was never approached, so that the patient was never forced to deal with the fierce betrayal by her father or her emotional abandonment by her mother. However, her anger was mobilized sufficiently for her husband to report that, for the first time in their marriage, the patient was irritable with him, criticized him, and argued heatedly. This freeing of affect was of course accompanied by the gradual lifting of depressive symptomatology and freeing of energy for useful work. The pelvic segment was never approached therapeutically.

The therapeutic effort was aided by the patient's candor and cooperation. It was as if, having tacitly established that the patient's private trap would not be destroyed, exposing her to forces too difficult to bear, she embarked with honesty and courage to help me make the trap more habitable. Each of us acted mindful of the limitations.

Discussion

This case illustrates the tragic process of biopathy which Reich described in *The Cancer Biopathy* (1) and corroborates some of Robert A. Dew's ideas as described in "The Biopathic Diathesis" (2).

Rita S. was born into a life-inimical household. On the maternal side, emotional contact was minimal, if not wholly negligible. On the paternal side, approval rested on ethical standards rather than on the enjoyment and appreciation of a little girl. Given these conditions, the way was set for Rita to move through life as a performer, denying her natural needs.

Her childhood was free of acute physical or emotional disorder, though she was a sad, shy, quiet child. The things that brought her joy in childhood were always solitary activities—reading, walks through the woods, riding her favorite horse. She had very little contact with males throughout her childhood and adolescence; not, indeed, till well into adulthood.

The armoring necessary to sustain such a childhood and adolescence can easily be imagined. The pathognomonic characterologic resignation must certainly have had its roots in early childhood, though it was offset by the child's natural energy and the hope for fatherly attention so long as she fulfilled his expectations.

In late adolescence, the equilibrium was shattered. The chest armoring, which had held against the needs of a bright and sensitive young girl, could no longer contain the repressed sighs and cries in quietude.

The long-sustained protoplasmic contraction of the chest segment lowered her natural resistance in that area, exposing her to recurrent pneumonic and pleuritic infections.

Of more serious import was her psychotic breakdown at nineteen. The history of failure of maternal contact in infancy foretold the probability of an armoring process in the eyes and base of the brain. The eye block, confirmed in orgonomic examination, bespoke a weakened bond between the self and the real world, and made her prey to disorganization under pressure.

The cerebral aneurysm was probably a genetic structural defect. Whether this was related to a prenatal uterine environment that was uncongenial to healthy structural development is at this point only a matter for conjecture.

The onslaught of mononucleosis, renal dysfunction, and Sheehan's syndrome reveal a protoplasmic tendency to infection and degeneration.

It is instructive to review the patient's longitudinal history in the light of Reich's definition of a biopathy as "a disturbance of the biological function of plasmatic pulsation in the total organism" (1) and Dew's organization of biopathies according to organismic capacity for lumination (2).

Childhood was marked by a character disorder expressed in extreme shyness, withdrawal, and interpersonal dysfunction. The expansion of adolescence caused critical reactions in the still-luminating organism—acute infections and acute psychotic breakdown. In young adulthood, the capacity to react sharply and actively still obtained, as evidenced by nephritis, appendicitis, and, in the emotional realm, the ability to react with the fervor of an active, serious attempt at suicide.

In later adulthood, as the capacity to luminate decreased, the reactions assumed a quieter (though certainly not less deadly) form. On the psychological side, she developed depressive reactions. (In reviewing *The Cancer Biopathy*, it is instructive to note the frequent concurrence of depressive symptomatology and cancer biopathy in Reich's case histories.) On the somatic side, she was afflicted with Sheehan's syndrome, a disorder in which the pituitary first hypertrophies in an attempt to meet an emergency and then, in company with other endocrine organs, burns out.

Reich assumed that, in the cancer biopathy, "chronic emotional calm . . . must correspond to a depletion of energy in the cell and plasma system." He compared the growth of cancer cells in the quieted energy stream to the rapid growth of protozoa in waters that have become stagnant. He said, "the biopathic shrinking is the continuation, in the

realm of cell functioning, of chronic characterological resignation."

This patient, at the time of her appearance in therapy and prior to the symptomatic onset of cancer, certainly fulfilled the description of sexual, emotional, and characterological resignation. It remains to speculate on the question of why the lungs were the target organ for cancer cell growth. The patient smoked heavily, and this was certainly a contributing factor. But probably the held, armored chest, tightened since childhood, was a more important agent. It is very likely that the severity of chest armoring is the factor that determines whether or not heavy smokers develop lung cancer.

When the specific, large pulsations of Rita's life are reviewed, it is evident that in her childhood, through parental contactlessness, lies, and unreasonable demands, a clamp was fastened upon the free and vital pulse with which she was born. She proceeded through childhood with this restrained pulsation. The energetic expansion of adolescence occasioned an acute reactive swing defined symptomatically as psychosis and acute infections. Having recovered from these, her energetic pulse was on a limited upswing when her value system was challenged by the revelation of her father's misdemeanors. The ensuing downswing resulted in serious suicidal attempts. With marriage, there was peace and some element of happiness for the first time in her life. The expansion of energy in the first pregnancy was too large for the constricted organism to tolerate, and this led to the initial depression and symptomatology of Sheehan's syndrome. She recovered and was leading a "tolerable" life when she again became pregnant. To this energetic increase, she reacted with a second deeper depression.

Through all these vicissitudes, the amplitude of pulsation was steadily decreasing to the point of energy stillness where cancer developed.

One might wonder, "What was the point at which the cancer biopathy began?" The answer could reasonably be, "The day she was born."

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Intolerance of Aggression — A Case History

By CHARLES KONIA, M.D.*

The following case illustrates the problems and pitfalls encountered in treating a patient with heavy armoring from the neck up and virtually no armoring below. The intolerance of expansion present in all patients here takes on an especially severe and tenacious form until armoring is formed in lower segments, thereby enabling the patient to better withstand the orgonotic charge.

Case History

A twenty-six-year-old ballet dancer came to therapy because of anxiety, confusion, inferiority feelings, and marriage difficulties.

This marriage, her second, of four years' duration, had deteriorated to the point where she and her husband had little to do with each other. His only interest in her was sexual, and he beat her if she did not submit to his sexual demands. She was barely able to function and had fears of going insane. At the same time, she felt that she "loved" him and wanted to make the marriage work. The husband was quite impulsive and irresponsible. He would become involved sexually with her friends. He squandered whatever money he earned, which resulted in his becoming financially dependent on her income. She was invariably tolerant of his irrational behavior.

Raised in a repressive home by authoritarian "old world" parents, she was especially close to her father, as a child. Yet she felt that he favored her brother, who was four years her senior and in relation to

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whom she always felt inferior. Although she was not Catholic, her father sent her to a parochial school where she suffered from the strict disciplinary atmosphere. When she reached puberty, she alienated herself from her father by running around with a "fast" crowd. He strongly disapproved of her behavior, and they had violent arguments. His excessive moralizing contempt and allusions to her activities as dirty and "whorish" served only to further separate them. Her brother was even more critical of her than the father. Finally, the patient had no other recourse but to leave home and support herself. She married soon afterward.

She was in good medical health except for episodes of bursitis in her hips and left shoulder, which occurred following periods of prolonged dancing.

Initial Findings

During the initial interview, she appeared quite frightened, and she repeatedly stressed her husband's role in the marriage problem. She desired counseling and did not want to dissolve the marriage. When I stressed the serious nature of her disturbance, she looked, at times, as if she were about to cry. She admitted that she was frightened and confused and that she really didn't know what to do.

Biophysical examination revealed that her armoring was confined primarily to the first three segments and that she was relatively free of armoring below her neck. Her eyes were frightened, appeared suspicious and confused, and were fairly immobile. She was unable to roll them. There was also heavy armoring of the scalp and occiput, especially on the left side. Her face appeared sad and there was a great deal of disgust around her mouth.

Mobilization of the Ocular Segment

In the early sessions, I focused on mobilizing her ocular segment vigorously. This produced intense trembling, especially of the lower segments, with a pelvic reflex* but strong holding in the head and neck. Her sexual feelings alternated with fears of losing control and going insane. She felt afraid of the whole world. Screaming alleviated her fear somewhat, and she attempted to control her sexual sensations by intensifying the holding in her head and on the left side. Soon after she started therapy, she realized that she did not love her husband, and they separated.

*In a pelvic reflex, the pelvis moves forward on expiration.

Her intolerance to anger became evident quite early. Whenever she became angry, she would either become depressed or break down and cry. I regarded her heavy armoring in the upper segments, coupled with the absence of any armoring in the lower segments, as the biophysical basis for this intolerance. Specifically, this armoring effectively inhibited the development of aggressive (especially angry) impulses in the head. Characterologically this was manifested by her "nice, sweet girl" facade which was repeatedly pointed out to her. I was not certain at this time to what extent this armoring could be overcome. I kept working with her eyes, and gradually she was able to verbalize her distrust of me.

In the seventeenth session, facial mobilization and concomitant breathing produced intense involuntary spasms on the left side. Her head turned to this side, and then she shook it violently, screaming, "No!" This was followed by fears of letting go. (I noticed at this time that her left side was armored much more strongly than her right. She habitually "faced the world" from her left side. As a child, she had had a left-sided tic which she successfully controlled by stiffening this side.) Gradually she became able to express more anger toward me. She accused me of being rigid and was angered by my silence, but she could hit with only moderate affect and would then become depressed. This sequence of partial outbursts of anger followed by depression became typical as therapy progressed. She reacted to her anger by self-deprecating thoughts, feelings of worthlessness, and the outbreak of a peri-oral eczema. She was frightened and masochistically fantasied being massacred by barbaric tribes. Later it came out that she had been very angry with me but afraid to show it. I focused on her inhibited aggression, and, after a few sessions, she was able to express more negative feelings, which produced some relief. But again she contracted, especially in her head, and her lips became cyanotic.

Mobilization of the Oral Segment

Mobilization of her oral segment produced strong reactions of disgust and misery and more verbal anger. At this time, she was able to tolerate somewhat more rage, both toward me and in general. As a result, she felt strong excitement and tingling.

She became depressed again and was generally contracted for several weeks. Her intolerance to rage was manifested characterologically by the intensification of her "nice, sweet little girl" facade, and biophysically by her generalized contracted state, with myalgia in her head, neck, hips, and legs. Pointing out her defensive attitudes produced some rage, as did mobilization of her legs (although she was a dancer, she was

unable to kick when she first started therapy).

As she became able to kick, her oral segment also opened. This was followed by a brief period of expansion. She experienced currents with strong trembling, especially on the left side. This was accompanied by a pelvic reflex, with her eyes going off. She developed feelings of guilt and worthlessness again. It was clear that there was still a great deal of inhibited rage.

At this time, as a result of not taking adequate precautions, she became pregnant. She felt extremely guilty and appeared helpless and confused. Discussion of her feeling of sexual guilt temporarily relieved her contracted state, but the thought of going through with an abortion terrified her. Before she was through, she underwent two unsuccessful attempts to induce an abortion. A pelvic infection ensued. This, plus a D & C at a hospital where she felt humiliated by the hospital staff, aggravated her already guilt-ridden condition.

It was my impression that open and rational discussion of guilt-laden material could, for brief periods, open her eye segment and enable her to feel guilt-free.

Later Sessions

She believed that she was pregnant for a second time, but fortunately this proved to be a false alarm. At this point, when she kicked, I was able to mobilize more rage and disgust from her head, accompanied by shouting and angry grimacing. She breathed deeply at the end of the session, but not completely through to the pelvis and therefore felt nauseated. This was followed by sadness and crying. She began having nightmares which revolved around being abandoned. She related this to a feeling of being second-best in her relationship to me. When she recalled that, as a child, her father preferred her older brother, she became distrustful of me, which she expressed both verbally and in her eyes. As I mobilized her eyes, she began to tremble and had what she described as cosmic feelings.

Shortly thereafter, she was able to trace her guilt back to her relationship with her father when she was an adolescent. From his repressive and excessive moralizing, she had developed a severe conscience accompanied by a rebellious attitude toward authority. This was a defense against her oedipal wishes. She said her first sexual experience was an act of revenge against her parents, who forced her to submit to a pelvic examination when they wrongly suspected her of having had sexual relations. Following this admission, she was able to talk directly and openly for the first time. She then had a sado-masochistic phantasy

involving conquistadors and martyrs. In the next session, she opened her eyes wide in fright, and imagined seeing someone burning on the crucifix. Following this, she expressed some rage with hitting and head-banging, and some verbal sadism directed at me. Again a pelvic reflex developed, which was accompanied by "evil" feelings.

Outside the therapy sessions, she became spiteful and vengeful towards me by taking marijuana, dancing for long periods of time, even though it put a great strain on her legs, and finally by having relations with her girl friend's husband. She glibly denied any feeling of responsibility or concern over her behavior. She was acting out her revenge toward me as she had done as an adolescent toward her father. Following this, her left side severely tightened and there was an intensification of her eye block.

For the next month, all I could do was to symptomatically relieve her depression. Intense work on the negative (father) transference and mobilization of the occiput produced a stronger breakthrough of rage. Pelvic armor began to appear, which I took to be a defense against her oedipal wishes. Disparagingly, she accused me of not helping her, of being arrogant and "full of shit." This was the most powerful rage she had expressed thus far. As expected, after a brief period of expansion, she clamped down and developed a sore throat and a cold. But, for the first time, she was able to expand *on her own* prior to my seeing her. This made her feel hopeful and excited. She was tolerating more expansion. In therapy she worked more independently and expressed rage without my help.

Termination Phase

She obtained a job dancing at night and was able to hold two positions, whereas when I first saw her she had difficulty maintaining even one. Her work as a dancer was quite grueling. In spite of the fact that her body became tense, she was holding up remarkably well.

As she became more integrated, it became possible to deal with her dependency, which was manifested, on the surface, as an exaggerated indiscriminate expectation from men, both at work and in her personal life. This would invariably be followed by frustrated anger and disappointment.

At this point in therapy, her father died. When I saw her after his funeral, she was behaving masochistically and felt confused about her career as a dancer. There was a big "NO" in her. She felt like one big knot and actually moved as if she were made in one piece. She now manifested considerable armoring below the neck. Mobilizing the para-

spinal muscles resulted in a violent rage, this time directed exclusively at her father. She recalled his moralistic and repressive attitude, which was all expressed under the guise of being "reasonable." Ever since she could remember, she had wanted to dance. He considered this ugly, dirty, and immoral, an attitude which he shared with her older brother. When she was seven years old, she developed her left-sided tic. Only then, when their family physician explained to him that there could be a connection between the tic and her not being permitted to dance, did he allow her to take dancing lessons "for medical reasons." This, however, did not relieve the tic, and later she held it back by tightening strongly on the left side. The breakthrough of rage in this session was followed by vigorous expansion. The knot behind her left eye disappeared for good, and her guilt-ridden behavior abated.

Alternating expansions and contractions of her biosystem followed, but she was able to maintain her outside functioning quite well. Her eyes were clear, she behaved rationally, and her demanding attitude was noticeably absent. She was able to accept the limitations of others. She relieved her occipital holding by herself, and there was a striking change in her appearance; she looked vibrant and attractive.

We were ready to deal with her feelings toward her mother. Prior to the following session, pressure had been building in her head. Jaw mobilization produced anger followed by forceful sucking. She recalled that as an infant she never had enough milk. She felt that her mother was totally inadequate. As a child, she was continually slapped down for crying or showing anger. She felt she could not afford to be helpless and dependent on her mother; that she had to grow up quickly, or she would not survive. She defended against this by armoring and developing an exaggerated need for independence. She responded to this memory breakthrough with strong expansion. In this session, her eyes rolled back in her head as her body gave in totally to the reflex. She was able to stay in contact with her feelings and felt deep streamings in her chest and throat, spreading to the periphery. This brought out holding in her chest and jaws. I encouraged her to give in to her sounds, and she cried like a baby. Then she felt that she was holding in her arms and legs. I encouraged her to reach out with them, and this produced intense trembling. For the first time in a long time, she actually *felt* like dancing. I pointed out how closely this was related to her existence. She felt and looked hopeful and happy in her eyes and said that things were finally fitting together.

The remaining eight sessions were involved with clearing up the residual armor in the first two segments. Breathing produced a tighten-

ing of the left side of her face, and she gave in to crying with twitching of this area and a forceful turning of her head from side to side. She looked as if she were being slapped in the face and recalled the beginning of her facial tic. She remembered the violent beatings on the head and face, especially on her left side (her mother was right handed). Following this, her facial expression appeared more open. Further mobilization of her face produced grimaces and spitting. She recalled her disgust at the breast. This was followed by streamings in her neck and lips. She felt badly battered about her head. Stroking it with her hands produced crying from deep inside her head. This was followed by intense anxiety. She had fears of being destroyed. This was related to feelings of vulnerability as a result of becoming capable of open and honest emotional expression. She gave in to intense generalized trembling.

In her work and sexual life, she was displaying the characteristics of orgasmic potency: She became emotionally independent; her work capacity increased markedly and became quite gratifying; she stopped overworking herself; and she became capable of tolerating sexual feelings without guilt and of genital self-regulation. The duration of treatment was 145 sessions.

DISCUSSION:

This case illustrates some of the clinical problems originating from an intolerance to aggression. This intolerance was manifested *characterologically* by the patient's inhibited structure—inability to show rage, guilt-ridden behavior, feelings of worthlessness and self-depreciation, etc., and *biophysically* by the well-defined spastic attitude of the first three segments, particularly on the left side. This armoring was unopposed by any armoring process further down and greatly enhanced the biophysical fear of expansion. The historical source of her inhibited structure was, of course, her severely repressive childhood upbringing. This resulted in contractions each time expansion was produced in therapy. This was demonstrated physically by cyanosis, eczema, and throat infections, and emotionally by depression and a tendency to cry when she became angry.

The object of therapy was to reverse the chronic contraction and to increase her capacity to hold charge. This was accomplished by the outward redirecting of her self-destructive impulses. Self-depreciation was turned into depreciation of the therapist, self-disgust into disgust for the therapist, etc.

To summarize: The layering of this patient's armor, her surface "nice little girl" attitude, was a defense which warded off her fear that she would be attacked or taken advantage of. She often expressed this jokingly as: "You wouldn't hurt little me, now, would you!" Her fears were then out in the open and were manifested in the transference as suspicions of being tormented and having her feelings manipulated by the therapist. This covered her anger at being dominated and influenced by others, and in the therapy she accused me of controlling her, of being power-hungry, etc. Expressing this anger produced dependency fears, specifically of not being able to rely on me. This in turn uncovered her anger over the fact that she felt I was unreliable, which she expressed indirectly as criticism: I am rigid, silent, I forget, I don't understand her, etc. Revealing this produced feelings of worthlessness and fears of rejection by her father. In therapy, she had sado-masochistic dreams and fears of pregnancy (defense against the wish for father's child). In the transference, this anxiety was expressed as a fear of being rejected and slapped down. This in turn gave way to a very deep layer of hatred directed toward her father for his repressive, depreciating, and contemptuous attitude. This was a major characteristic of her own structure. Expressing this hatred mobilized a great deal of energy and eliminated many of her inhibitions and guilt-ridden attitudes. But, as soon as a deeper layer of rage became activated, she reverted to her previous over-independent attitude. This rage was directed at her mother on an oral level, at the latter's helplessness and inability to adequately provide for her infantile needs. This gave way to the incest wish, which resulted in fears of destruction and a feeling of vulnerability. She felt endangered by her newly found ability to openly show her deepest feelings. Orgasm anxiety followed, the working through of which then released her genital impulses.

Functional Vocal Training (Part Two)*

By CORNELIUS L. REID*

RESONANCE

The second area of functional interest during training is resonance. Ideally, registration, the vowel, and resonance are equal concerns, no one superseding the others in importance. In actual practice, however, the focal point of instruction will shift from one to the other. With poorly formed voices, registration is always more crucial, because a well-tuned resonance adjustment is impossible when the registration is out of line. On the other hand, when the technique is advanced, the resonance adjustment demands greater attention than the registration, as the efficiency of the registration can be enhanced under certain technical conditions by concentrating on purification of the vowel. During intermediate stages of development, there will be a dual emphasis; each lesson will include those exercises designed to correct the registration, as well as those whose intent is to improve the resonance adjustment. As resonance is so important to vocalization, it is essential that it be defined.

Resonance is an immediate amplification of tonal vibrations set in motion by the vocal cords and occurs whenever a cavity is formed whose natural frequency corresponds to the natural frequency of the pitch. The principal cavities involved in forming a chamber of resonance are the oral, the postnasal, and the laryngeal pharynx. The air in these cavities also vibrates in sympathy with the harmonics, or overtones, within the fundamental vibrations determining pitch. This further increases the intensity of the initial source of vibration and reinforces the tone. Tonal resonance, therefore, is the product of a cavity formation which is "tuned" to the natural frequency of the vibrating cords. Quality is a product of the type of vibration set into motion by the vocal membranes, plus the manner in which overtones are concentrated, dis-

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persed, and augmented. As the quality of sound given off by the vibrating cords alone is inconsequential, cavity resonance of the kind described is an extremely important factor in singing.

Not all of the resonance heard in vocal tone, however, is the product of cavity resonance. In addition, there is forced resonance and sounding board resonance. Forced resonance is a condition in which the initial source of vibration, that is to say, the vibrator, forces a resonator to respond despite the absence of sympathetic tuning. If, for example, a tuning fork is set in motion and touched to a solid object, the initial source of vibration will be reinforced and become louder. Both the piano and the violin operate on the principle of forced resonance. Sounding board resonance has to do with the reflection of tone, as with the echo. The band shell and the tester poised over the pulpit in most churches are good examples of sound reflectors which increase resonance. It is probable that forced resonance plays a prominent part in vitalizing vocal tone. The solidity of the singer's bone structure and general sturdiness of frame (notable in so many great singers) undoubtedly contribute substantially to tonal vitality and could possibly be said to represent a superior potential. Sounding board resonance merely gives the illusion of amplification, the apparent increase being due to an efficient transfer of vibrations from the vibrating source. It is hardly a factor in singing.

As a vocal concern, resonance is a relatively new development. Earlier instruction centered on but two elements, registration and "purity of intonation." A hasty judgment would equate purity of intonation with pitch perception, but, although pitch is a factor, there is more to it than that. Vocal exercises were designed to strengthen the organic response, perfect the registration, and train the ear. But always the tone had to be pure. Pier. Francesco Tosi (1647-1727) made this clear when he wrote, "Let the master attend with great care to the voice of the scholar, which, whether it be *di petto* or *di testa*, should always come forth neat and clear, without passing through the nose, or being choked in the throat." He also counseled, "Let the scholar be obliged to pronounce the vowels distinctly . . . if the fault is not the master's, it is the singers', who are scarce got out of their first lessons" (6). Purity as defined by Tosi implies an unblemished tone quality, and a pure tone is always resonant. Purity of intonation, resonance, and vowel purity are synonymous, each being the reflection of a precisely adjusted coordinative process.

Resonance as such was not considered a factor in singing until the early part of the twentieth century. Herbert Witherspoon, a prominent

teacher and singer (1873-1935), wrote of "this comparatively new bugaboo, Resonance." He further remarked, "It is an interesting fact that the term nasal resonance I have never found in one of the old books upon the art of singing, either in this country or in Europe" (7). This statement seems to be accurate. A considerable number of books appearing in the nineteenth century deal with the subject of *resonators*, but not resonance. In Garcia's *Hints on Singing*, published in 1894, the subject is not mentioned.

With the arrival on the scene of the music of Wagner and Berlioz (and to a lesser extent, Verdi), it was only natural that greater interest should be shown in resonance. Suddenly, the size of the orchestra almost doubled, with heavy augmentation of the brass. Purity of intonation and registration seemingly needed a reinforcing agent. Volume of tone came to be more highly prized than purity of tone, and functional concerns were shunted aside in favor of concepts given over to tonal "projection." Forcing for volume resulted, and strained, effortful vocalization gradually displaced the free-flowing cantilena of the Golden Age of Song. Only a small minority remained faithful to the idea of the immutability of functional laws—that the correct way to sing is correct for Wagner, Berlioz, and Schoenberg, as well as for Mozart.

With the advent of new techniques, abuse of the mechanism became increasingly common, and the throat doctor indispensable to a career. The vocal cords were apparently fragile, and something had to be done. H. Holbrook Curtis suggested "taking the attack from the cords" and focusing the tone in the masque (frontal sinuses) in order to relieve the pressure (8). Ernest White carried this idea a step further and declared, "The vocal cords have absolutely nothing whatever to do with voice. Their function is to *prevent* the passage of air into the mouth, nose and head." Consequently, "registers most positively exist, but are controlled by making a definite and selective use of the different cavities or sinuses of the head." White also quotes Sir Milsom Rees, who, in lecturing before the British Medical Association at Belfast (1937), commented, "These high tones with heavy volume mean an enormous strain with consequent exhaustion" (9).

With an increase in the demand for big voices and voluminous tone, resonance became the focal point of most training methods. The result was that the core of the functional problem was neglected in favor of peripheral concerns. Before too long, few seemed to remember that the sensations of vibration felt in the head or in the chest were due to registration. New systems were devised to "place the voice," the singer being encouraged to feel the vibrations in the chest and head, to reso-

nate in the sinuses, or to encourage the "ping" in the tone. These practices have been proven failures, and such vocal training, instead of solving problems, tends to create them.

The concept of head and chest resonance, of course, cannot be taken seriously. The antrum and sinuses are small, nonadjustable cavities, heavily damped and not at all suitable for tonal amplification. Furthermore, the openings to the sinuses are so small that these cavities can scarcely be considered a constituent part of the resonance system. William Vennard reports the findings of Warren B. Wooldridge, who, having blocked off entry into the nasal passage with cotton gauze, found no perceptible difference in the characteristics of resonance. Both Vennard and Wooldridge arrive at the same conclusion, finding the entire concept of nasal resonance totally without validity (10). Head resonance should probably be considered an illusion, an illusion created by forced resonance.

Chest resonance is also the product of illusion. In reality, the chest is a cage, not a cavity. Filled with soft, spongy material, it acts as a damper rather than a resonator. The only cavities which are large, adjustable, and possessed of suitable resonating surfaces are the postnasal pharynx, the oral pharynx, and the laryngeal pharynx. Because the larynx houses the vocal cords and surrounds the vocal membranes, and can be positioned, moved, and adjusted, it is ideal for the purpose of resonating tone. The laryngeal pharynx, together with the oral pharynx, represents the functional core of the vocal process. The mouth and the organs of articulation must be considered auxiliaries and, consequently, peripheral concerns. When the coordinative process within the functional core has been made right, all peripheral matters logically fall into place.

The muscles which position the resonators are of little practical interest. The vocal organs are respiratory organs, and muscular activities are involved which extend from the head to the pelvic floor. Some of the muscles can be brought under direct control; most can not. In any event, the interplay of muscles is so complex that the singer who worries unduly about them is in danger of becoming immobilized. He would be like the centipede who paused to think about which leg moved after which. A positioning process does take place, however, and this process is called a "resonance adjustment." To know his voice, the singer must discover those areas in which he can exercise legitimate control over the resonators. This requires an entirely new concept of teaching and learning, one in which knowledge and understanding are gained by observing the natural responses of inner organic functions after they have expressed themselves in movement.

CONTROL

Regardless of the functional area with which one may be concerned during training, nothing happens without movement. The balancing of the registers, the adjustments made for resonance, and the positioning of the pharyngeal cavities for the vowel all involve some aspect of movement. But movement per se is of no great consequence. What we are really interested in is natural movement, the kind of movement which indicates that the respiratory organs are being adapted to the vocal process in a compatible manner. Healthy movement is free movement; therefore, it is free movement which training procedures must cultivate and encourage.

Before natural body rhythms can be set into motion, the conditions must be right. Here the student must develop a new attitude toward learning. In effect, he must learn to prepare by not preparing. He must face the difficulty of "getting out of his own way," of "letting go," of "allowing things to happen," and of being willing to lose all control, control which is related to nonfreedom and an absence of spontaneity. Should he succeed in this, the natural movements which will spring into being should provide a means of access to the muscular processes operating below the threshold of consciousness; that is to say, the important muscular activities which are related to phonation.

When contact has been made with interior body rhythms, the vocal organs, provided the proper stimulus patterns have been selected, will of their own disposition seek to move in a manner more in keeping with the functional logic by which they are governed. In short, like a wound that heals itself, the organs of voice will correct themselves—by responding more freely, they will adapt to the congenial climate to which they have been exposed. What the student must do is give in to an inner-directed impetus, and, by following and observing, learn the nature of vocal control.

Natural breathing offers the best example of what is meant by "getting out of the way" so that one can learn how to assist spontaneous organic rhythms. Breathing is both voluntary and involuntary. By removing all disciplines affecting the way one breathes, the act of inspiration and expiration will proceed naturally on an involuntary basis. Therefore, by observing the natural rhythm of breathing, one is able to perceive the sensation of movement, and so learn the mechanics of the function.

The moment one becomes aware of the natural rhythm of involuntary breathing, there should be no great difficulty in learning how to

assist that movement through volitional effort, and in breathing either shallowly or deeply without losing the natural rhythm. This is the only sure way of gaining contact with a purely natural movement. Not until an inner force indicates the direction in which movement should be encouraged can one possess insight into the nature of an organic function and be in a position to institute legitimate control.

All muscles which respond to the inner rhythmic impetus of the vocal organs are, of course, involuntary. By keeping volitionally controllable muscles passive through nonmovement, a perception of interior movement can be gained. Under these conditions, all movement will be completely involuntary. Thus the singer, by observing, can sense the order, the logic, the impetus, and the laws of the vocal function. By proceeding in this manner, it is possible to maintain the integrity of his singing, both technically and interpretatively, because he has come to understand functional needs.

Awareness of inner movements and their natural rhythm is achieved by combining the rhythm of natural breathing with the movement of the musical phrase—its contour, intensity pattern, and vowel. At the onset of phonation, the posture of the body should reflect a condition of poised readiness, very much like a good dancer who is *about* to move. Then, without raising the chest or tensing the shoulder muscles, sufficient breath should be inspired to answer the needs of the musical phrase. With all volitionally controllable muscles maintained in a state of passivity, the rib cage will naturally expand. Upon sensing that contact has been made with the rhythm of the inspiratory movement, the phrase must be launched forth without disturbing the rhythmic impulse, *con slancio*, with a sense of continuing movement.

The next step to be taken in developing contact with involuntary muscles is to devise an exercise pattern containing at least one variable. A simple major triad, to be sung on the vowel "ah" at a comfortable level of volume, fills this requirement nicely. Having initiated the attack in the manner prescribed, the student's next point of concentration is the detail of the musical phrase—the pitches, the vowel, and the levels of intensity—and with singing musically. Further, he must obliterate from his mind all concepts dealing with what he *thinks* his voice should sound like, or how he would *like* it to sound; he must be ready to "do" without being conscious of the manner of "doing"; he must "get out of his own way" so as to permit involuntary movements to take over, to let nature operate on her own terms.

With voluntary muscles now passive, the variable element in the triad (pitch) becomes the main point of interest. Vocalizing, the stu-

dent must make certain to concentrate on moving from pitch to pitch *mentally*, prohibiting all external movement. This is not easy, and great care must be taken by the teacher to ensure that no stiffness is permitted to creep in. If the exercise is sung correctly (with a proper register balance and as pure a vowel as the singer can manage), the involuntary muscles governing the functional response at the point of tonal inception will have been activated. Because peripheral tensions to a considerable extent will have been lessened, a change will occur in the organic response. New sounds will appear; these sounds will serve to alter the student's self-image and make him aware of the "feel" of the functional elements at work. Under this regimen, contact will have been made with the natural movement of inner organs.

There are, of course, innumerable possibilities contained within the framework of this approach. An exercise which I have found particularly useful is the practice of the trill. I use it at all stages of development, but rarely with the hope of executing a clean trill; rather, with the purpose of innervating involuntary muscles. This exercise must be started on the upper note of the trill. As the tone is moved a full step lower, first slowly, then oscillated more rapidly, the resonance adjustment must be positioned and maintained without change. Two benefits are to be gained from the practice of this exercise: Throat tension of the wrong kind will be relieved, and the singer will be able to feel the interior workings of the organic response and sense how to energize involuntary muscles. The trill, as such, is not a matter of immediate concern, as its proper execution demands an extremely high level of technical competency.

Most contemporary methods overlook the fact that "voice" has no function of its own, but is the product of another set of functions. Also overlooked is the involuntary nature of the muscles which position the vocal organs to meet the requirements of pitch, vowel, and intensity. The general scheme of things is to bring the organs of voice under control by conscious effort. The mouth, tongue, and lips are carefully positioned, the diaphragm pushed in, up, out, or held, and the tone is resonated in the facial masque (even the use of the word "masque" is significant as it represents an excellent hiding place), or "hooked," "lifted," or "placed" forward and up.

It is pointless to attempt a complete listing of the techniques used to obtain direct control. All such techniques miss the functional point, and all are damaging in the extreme. Of more than casual interest, however, is the general inclination to get things backward. Control of the breath is thought to effectively control function, whereas it is function

that controls the expenditure of breath (the size of the glottal space regulating the amount of breath flow and the glottal space narrowing because of a well-balanced registration). High and low "placement" is used to free the voice, but the voice is free because of a healthy functional response within the throat parts. All legitimate control over tone is lost once the cords become vibratile. Placing the tone does not free the voice; it inhibits function. Neither is resonance "made" by putting the tone in any particular orifice. Resonance adjustments are made by positioning the oral, the postnasal, and the laryngeal pharynx in response to specific patterns of pitch, intensity, and the vowel. The important muscles involved in the positioning process are involuntary, and it is impossible to act directly upon an involuntary movement except to reverse it. Attempts at volitional control over a faulty coordinative process will encourage throatiness and be self-defeating.

RHYTHM, MOTION, AND EMOTION

If movement ceased, the universe would no longer exist; for in nature there is an ongoing ontology—rhythm, if you like. The galaxies are in a constant state of expansion and contraction, civilizations rise and fall, the seasons change, cells expand, contract, divide, and proliferate, and life forms have their cycles, all phenomena being expressed in terms of constant ebb and flow—in terms of movement, rhythm. Movement is a characteristic of all animate nature and reflects the manner in which energy is being expended. It is the agency through which contact is made with our inner being, with our fellow humans, and with the universe at large. Movement holds the key to the unblocking of a faulty coordinative process, and it is the means by which legitimate emotional identification is made with the materials of music.

When the functional properties of the vocal organs have been released, contact has been made with an essential life rhythm. Bodily organs become expansive, and, with expansive movement, pleasurable feelings are awakened. As the singer learns to energize and preserve the rhythmic integrity of inner movements, he will gain a profound insight into his voice as "self." Equally important, he will have gained a perception of rhythm as expressive movement, as emotion.

The first scientist to recognize and define the organic connection between movement and emotion was Wilhelm Reich. He states, "Expressive movement is an inherent characteristic of the protoplasm. Literally, the term means that in a living system something presses itself out, consequently causing movement. This means protoplasmic move-

ment, the contracting and expanding of an organism. The literal meaning of emotion is moving out, which is the same as expressive movement. The movement of the plasm, then, has an expression in the sense of an emotion, and the emotion or the expression of an organism is bound to movement" (11).

On the basis of this evidence, it is clear that the quality of one's emotional equilibrium equates with the quality of one's motility. Whether an organism is blocked or free has a direct bearing upon the quality of its emotional status, its capacity for feeling, the objects and events which attract or repel it, and, obviously, with vocal technique, musical taste, and interpretation. Rhythm is the communicating link through which contact is made between an organism and its environment, emotion and intellectual comprehension, a performer and his listener. In short, it is the release mechanism which determines the kind of relationship one is capable of sustaining in the dual world in which all of us live, the world inside ourselves and the one outside ourselves.

The purpose of vocal training, therefore, is to establish a condition of functional freedom, freedom of motility. When the vocal organs respond to a conceptual image, a rhythmic impulse will, when the technique is free, move outward. With energy directed toward an outer periphery, the organic participation becomes articulate; it appears to want to move *this* way and not *that* way. By this means, the singer who has learned to trust his instincts will sense with a high degree of perception the manner in which the plasmatic movements should be energized. His intuitive "feel" for singing will impel him to do that which is functionally correct.

If the vocal organs are to be encouraged to respond in terms of their own natural order, "getting with" the rhythmic essence of the material being worked is of the highest importance. Rhythm promotes spontaneity and, as expressive movement arouses feeling, the emotion awakened will be genuine and unforced. Both a secure vocal technique and interpretation are almost wholly dependent upon this kind of emotional identification. Rhythm and registration, combined with skillful employment of the vowels and tuning of the resonators, are the basic tools the teacher has at his disposal for developing such a technique. When used with discretion and understanding, they are more than sufficient.

THE VIBRATO

Nowhere is the presence of inner rhythmic movement more apparent than in the oscillations normal to all musical tone. Tonal oscillations

may be of various kinds: tremulous, wobbly, sporadic, or perfectly regular. Regular (rhythmic) oscillations are known as a vibrato, and the vibrato is one of the primary manifestations of a healthy vocal technique. Few singers use their voices correctly and, consequently, a true vibrato is rare.

A vibrato is readily distinguishable through its physical features—an amplitude which increases and decreases in direct proportion to the rise and fall of intensity, coupled with a periodicity which remains constant. Other tonal movements such as the tremolo and the wobble behave differently. With less desirable tonal movements, it will be found that the amplitude has little relationship to intensity, while the periodicity is disturbingly irregular. A useful rule of thumb in estimating the character of tonal pulses is to determine whether or not the fluctuations are *noticeable*. In a true vibrato, one is unaware of oscillating movements; pitch appears to be centered, and the tone alive, vibrant, and beautiful.

An important feature of the vibrato is that it permits the voice to move rhythmically through the musical phrase; it establishes the voice as a legato instrument. When tonal oscillations are rhythmic, there is bound to be a moment in time when it is logical to move. This disposition to move does not necessarily occur in terms of the singer's sense of musical discipline, but within his organic logic. Such movements may not always coincide with the time values set by the composer, but they will be, nevertheless, *rhythmically* correct. Historically, many singers with but the most prosaic musicality have proved effective and phrased beautifully simply because their voices moved in response to a natural, free organic rhythm.

Above and beyond these important considerations, the vibrato is the reflector of the emotions, in speech as well as in song. The voice will tremble with rage, bubble with laughter, sound heavy with fatigue and despair, grow unsteady when depicting age, and, in general, reflect every emotion experienced by the singer. The vibrato indicates a healthy functioning vocal technique and is a sensitive barometer of the emotions. Technically, its appearance is due to a precisely balanced registration combined with an open-throated resonance adjustment. Artistically, it is an important and essential element in the development of musicianship and interpretation.

INTERPRETATION

The inescapable truth concerning interpretation is that none of its mechanical aspects (correct tempi, phrasing, accuracy of pitch, good

tone quality, elegant diction, a sense of style, and knowledge of tradition) necessarily ensures an effective performance. As is also true with the mechanics of good manners, just being correct is not enough. Certainly the essence of an exciting vocal performance must lie elsewhere. If we return to the point made by Reich, that "the literal meaning of emotion is moving out, which is the same as expressive movement," and accept his conclusion that "movement of the plasm, then, has an expression in the sense of an emotion, and the emotion or the expression of an organism is bound to movement," we will recognize the essence of a vital communicative experience.

If rhythm is the consequence of an expressive movement and an expressive movement is recognizable as emotion, then organic (functional) freedom, freedom to inwardly move in response to an outer stimulus, must be the primary point of emphasis in building interpretive skills. Whether or not the student's emotional identification will be in agreement with the poetic and musical context of the work being performed depends upon his ability to move freely. An unfree organic response must, by definition, turn expressive movement from its true course and create an emotional dichotomy.

In all areas of daily living where relatedness is involved, this same phenomenon may be observed. Characterological traits are reflected in movements which record with astonishing accuracy the emotional impetus causing them. In this sense, the body clearly possesses an expressive language which is essentially nonverbal. Movement relates its own story, and it is a story of contact or contactlessness, whether our sensate nature is tuned in or tuned out. It is through free organic movement that music comes alive.

In essence, this is what communication is all about, and the process of "reading between the lines" and seeking for "more than meets the eye" is that level of articulateness which operates beyond word language and the details of musical notation. Thus, the core of a moving interpretation will be found to combine the mechanical niceties listed above with kinetic movements to which they legitimately correspond. When these factors are balanced with intelligence and imagination, musical performance becomes transformed into art. To help bring the student to the point where he is able to identify with the expressive movements initiated within the deepest recesses of his being is the ultimate challenge of vocal pedagogy.

In discussing the purely technical aspects of the vocal function, the need to "let go," to stop initiating either overt or covert control, was strongly emphasized. Such a procedure is not only essential for the

release of inhibitory tensions, but for wholesome emotional identification with every phase of music, poetry, and drama, as well. Expressed in these terms, emotion in singing is not something that is projected, it is something that is awakened. Emotion awakened through free organic movement, guided by intelligence, refined by sensitivity and taste, and directed with imagination and understanding is the essence of an effective interpretation.

OPENING THE THROAT

We now have the necessary means at our disposal for attacking the most serious of all vocal problems, throat constriction. Throat constriction primarily affects the resonance adjustment, but it is also associated with a mixed registration and distortion of the vowel. It has already been established that a resonance adjustment, to be effective, is largely dependent upon a well-balanced registration. Nevertheless, it would be incorrect to suggest that this is always so. Psychological factors are involved, and it is often extremely difficult to determine whether vocal faults are the result of muscular imbalances or psychic tensions.

Regardless of the source of tenseness, it must be eliminated. In this respect, success in vocal training is largely dependent upon the characterological structure of the individual. To open the throat during phonation is pleasurable, and the movement of energy stimulating. The willingness with which the singer responds to the energy charge when the throat opens will determine his ultimate potential for mastering a vocal technique that is functionally free. This means facing up to the fear and anxiety that are ever present throughout the formative stages of training. No other phase of the learning process is quite as important as this. How the singer meets this challenge will determine whether or not his artistic ambitions will be realized.

Since anxiety is so intimately bound up with physical contraction and fear of movement, one of the major problems during training is to break down the student's innate dread of inner expansion. To accomplish this, knowledge of the mechanics of registration is absolutely essential. Given their nature, the registers *do* appear as a response to specific combinations of pitch, intensity, and the vowel; they *do* represent sounds which are the product of a particular kind of coordinative process; they *do* reflect some kind of muscular movement. When the vocal registers are skillfully used, they *can* be used to break down interfering tensions; they *can* assist the tonal impetus in such a way as to cause the throat to open.

Before constrictor tensions of the throat can be released, however,

certain prior conditions have to be met. First, the student must possess the necessary vocal talent; second, and equally important, he must be able to respond. The other side of the coin has to do with the skill of the teacher and centers on such properties as sensitivity of hearing, knowledge of the dynamics of registration, and an ability to empathize. When these properties merge and reinforce one another, it becomes possible to release inhibiting tensions and become involved in a truly creative experience. Empathic identification is mandatory if the teacher is to succeed in his efforts to lead the student into a full-throated resonance adjustment.

The first step toward relieving a throat constriction is to rebalance the registration, which usually means some degree of separation. The specific mechanics for achieving this have already been discussed. Having separated the registers, the resonance adjustment can be worked on as a direct object of instruction. The chest register is particularly helpful in this. A rugged mechanism, it can tolerate a great deal of pressure, in which respect it differs radically from the falsetto, or even the head voice. Neither of the latter can be pressured and, when over-driven, will buckle and constrict.

Using the chest register to break down constrictor tensions involves a calculated risk. We have already seen that the ultimate goal of technique is the proper execution of the *messa di voce*, and that a correctly sung forte contains the optimum amount of head register participation. To eliminate interfering tensions, this goal must be abandoned. If the throat is to be opened, the chest register must be made to dominate the technique, yet in such a way as to achieve the desired effect without creating new problems which could be as serious as the old. There is no other way around this difficulty, as it is the chest register, not the head register, which provides the leverage for dislodging a constriction.

Both the falsetto and the chest register have something special to contribute in breaking down constrictor tensions, and the role of each must be clearly understood. One of the areas of confusion is the precise position of the falsetto within the tonal range, as well as its relationship to different voice types. The falsetto in its pure form begins on B, below middle C, and extends to the octave above. It is found in exactly the same area in all voices, regardless of sex. Expansion of the tonal range immediately introduces some degree of coordinate action with the chest register, and this causes a change in the resultant tonal texture. When the registers have coordinated, the new texture will be clearer and more "singing," and it is this physical arrangement which is commonly referred to as the head voice. When the two mechanisms are

unified, they should be combined in such a way as to leave the head register dominant at all levels of intensity.

Unlike the head voice, which is flexible but limited in strength, the chest register is robust and inflexible. Its tonal range extends from E, above middle C, downward to C, an octave and a third below. How great the lower extension will be depends, of course, on the natural tessitura of the individual voice. Women's voices of all types should have little difficulty singing to F, below middle C; men's voices, to at least the octave below that.

With registration so crucial to a successful unblocking of the mechanism, we must review the correlative patterns with which a register is associated. The formula is elemental: The chest register is always associated with low pitches coupled with high levels of intensity, the head register with lowered intensities covering a tonal range which extends from low G, below middle C, on upwards. On a given pitch and intensity, the so-called closed vowels tend to bring in more head register; open vowels, the chest. As throat constriction is so closely linked with a mixed registration, the solution to this problem lies with a rebalancing process in which each mechanism is encouraged to respond in a manner consonant with its lawful order.

A mixed registration is common to all voice types and seems to receive encouragement from two major sources, training and culture. In outlining possible cures, it is necessary to discuss the male and the female voice separately; it must be clear, however, that there is absolutely no functional difference between them, the sole difference being one of tonal range, women singing an octave higher than men.

Our cultural attitude decrees, long before formal voice training, that women speak in the head voice, that this is more feminine. As a result, the chest register is left unused and, being unanchored, is free to drift into a tonal area far too high, in the region of C, above middle C, to the fourth above. This causes the voice to become weak in the lower range, overly strong in the upper middle, and somewhat short-ranged and "spread" at the top. As the chest register cannot tolerate reduced levels of volume, even within its legitimate tonal range, it becomes badly thinned out when forced higher and closes the throat.

Correcting a mixture of this kind is difficult. The chest register cannot be two places at once. If it is active in the upper middle range, it is not able to respond in the tonal area to which it rightfully belongs. For this reason, it is often unwise to attempt to establish contact with the chest register until the mixture is corrected. The theory behind this practice is obvious: If there are two parts to the whole, by isolating and purify-

ing one part, the other automatically disengages and becomes pure. Thus, before any serious attempt is made to use the chest register, the mixed registration must be corrected.

When, as in a mixed registration, the mechanism cannot be immediately separated, steps must be taken to reduce the overweighted upper middle range. There are numerous ways of doing this, but in principle each will be quite similar: The voice, like a rubber band, can be weakened in the middle by being stretched in both outer directions. Not having the chest register articulate makes this procedure difficult. Preliminary exercises, therefore, must be designed to work the chest register out of the upper middle range, where it does not belong. One such exercise is the octave interval with a descending arpeggio. The first note, usually E or F, must be sung firmly with good depth and solidity so that the tonal weight is anchored. Moving from the lower to the upper tone, a true legato must be preserved, but at the same time the weight must be left on the bottom note, as the upper octave is taken lightly at a firm mezzo piano. This should introduce a softer tonal texture, the appearance of which will indicate that the registers have begun to separate. It is important in descending the arpeggio that the tonal weight which was subtracted while moving upward is added again, thus rebalancing the mechanism toward the chest register in the lower tonal range. The most favorable vowel for this exercise is "ah," the exercise itself moving in descending patterns from E or F, if possible, to the octave below.

Continuing to work on the elastic band principle, the voice must be stretched into its upper reaches. This is accomplished by starting on the upper tonic and moving to the third above, then descending on an arpeggio of one octave and a third. In this way, the upper register will be pulled away from the improper mixture in the upper middle range; under which circumstances, the head voice should take over the task for which it is so well suited. The "ah" and the "ee" vowels are helpful in this, and the exercise must be sung at full intensity. Care must always be taken in working these exercises to preserve the purity of the vowel and to avoid "spreading."

Another scale pattern which helps extract some of the tonal weight from the upper middle range is the double octave arpeggio. This exercise should commence on the lower G and progress stepwise as far as is practical. The intensity level throughout should remain at a firm mezzo piano, the upper tones not being permitted to burgeon out. If worked successfully, considerable stress will have been placed on the head voice, with chest register participation minimized. The voice

should now be more buoyant and less "grabby" in the upper area and, if so, the chest register should be ready to reappear where it rightfully belongs—in the lower tonal range.

At this point, single tones should be employed to test the articulation of the chest register. Should it respond, a whole world of possibilities opens up. Soon the resonance adjustment can be directly worked on to good effect. After the chest register has been consolidated, octave jumps are helpful, the low tone being started in a strong chest register, the upper note taken in the head voice. The purpose here is to take advantage of the fact that the chest register will have opened the throat. This being so, the skip into the octave above, *provided the singer has not moved*, should accommodate the upper register within the identical resonance adjustment formed by the chest register. If these exercises have been correctly executed, the singer will have sensed a new adjustment for the upper tone, an adjustment which will be freer and more open-throated. Again, it must be stressed that throughout all of these exercises the instruction to "not move" is important. This is particularly true of the octave jump, because the purpose of this exercise is to change the registration (a reflex response), but not the resonance adjustment.

If the octave jump is well executed, both function and concept immediately become more viable. Once the mechanism can be made to move out of an habitual pattern of response, consistent progress is assured. With the release of wrong muscular tensions, the vocal organs themselves, articulating their own functional laws, tend to dictate the character of subsequent instruction. Obviously, new situations demand new stimulus patterns, and the new requirements of the mechanism often call for remedies diametrically opposed to those which had worked so well at an earlier stage of development.

Other exercises for the release of interfering tensions are the trill, the staccato, and rapid scales. The staccato is especially helpful in creating an awareness of laryngeal activity, for, unless the throat resists the energy expended, it is impossible to execute this musical effect. When the throat does resist, the student is able to feel what it is like to have the throat actively open. (Garcia called this action the *coup de glotte*, stroke of the glottis, which, because of its being so widely misinterpreted, is a practice now totally discredited.)

If the staccato is well executed, the concept of laryngeal activity can easily be carried over into the legato phrase. To preserve the connection between the legato and the staccato, each can be alternated, the arpeggio first being sung staccato, the second time legato. The easiest way to

do this is to sustain the top tone the second time around so that both the legato and the staccato continue to share an identical position of resonance. Rhythm is important to a good staccato, and the feeling should be one of a pendulum freely moving.

Some contact should now have been made with the singer's instinct for oral expression, leading, in turn, to a sensual awareness of functional needs. Rapid scale passages are important at this time. If organic functions are recognized as being rational, the vocal organs must be given every opportunity to respond in terms of their innate logic. Rapid scale passages provide such an opportunity. Here the student must resist the impulse to control the voice. Concentration must be directed toward naturalness of posture, toward following the design of the melodic figure, the vowel, and the intensity pattern, and "getting with" the rhythmic sweep of the phrase, nothing else. Of paramount importance is the fact that the rhythmic impetus must begin with the intake of breath, before phonation, and that all of the notes of the scale are conceptualized as a unit. Rhythmically, one moves *through* the tonic, *through* the upper octave, and then back to the tonic. Provided the psychological barriers have been successfully overcome, the vocal organs should have already begun to assume a position of open-throated resonance.

How to utilize the exercises suggested above is, of course, a matter of judgment. They must be employed on a discretionary basis in varying combinations, and there is no format or order of procedure to be followed. Like good cooking, it is a little of this and a little of that, then seasoned to taste. It must be reemphasized, however, that it is the chest register alone which is capable of eliminating a throat constriction. It must also be stressed that, regardless of the pitch and intensity level, in a correct technique, the head register is always the dominant factor. Arranging the technique so that the nominally weaker mechanism becomes dominant is an apparent contradiction which has to be successfully resolved if the voice is to be free.

The problem of open-throatedness with men would appear to be far less severe and more easily corrected than would be the case with women. All male voices have access to a considerable amount of chest register, at least an octave and a third, and this provides a strong opening wedge for the release of constrictor tensions. In reality, however, the male voice simply presents different problems. Tenors offer an example of one basic difficulty, since their range straddles the register break. Consequently, unless they solve the problem of register transition successfully, they will either fail to acquire their high tones or con-

strict the throat. To a slightly lesser degree, this is a basic cause of constriction with basses and baritones.

Making a smooth register transition is difficult. At the moment of transfer, the chest register is operating in its upper tonal range, where the intensity is quite high. At the same time, the chest register must be coordinated with the head voice, which at the transition point is rather weak. This requires careful manipulation of the intensity, as well as the vowel. Errors of execution will immediately show up in the form of throat constriction. A rule of thumb is this: Enough chest register strength must be maintained at the transition point to keep the throat open, while the head register must be encouraged to take over as the dominant factor in the technique.

Other devices for opening the throat are the "straight" tone and the vowel "a" as in "cat." Each of these serves the same purpose; namely, to establish a sense of laryngeal resistance. For straight tones (tones with no oscillating movement), an arpeggio sung on the vowel "ah" is ideal. By pushing the tone straight, contact will have been made with an open-throated position which, by being pressed gently outward, can be maintained throughout the duration of the phrase. When this exercise is executed correctly, the tone will change; it will commence to pulsate regardless of the steady pressure being applied.

An important aspect of this exercise is that the new pulse will bypass the singer's preconcept. As a result, he will not only discover how to energize the correct laryngeal action, but to hear new sounds in relation to his own personality. The "a" vowel achieves somewhat the same result and basically serves a similar purpose. One must be certain in using this vowel that the lips do not spread and that the easy resonance of the chest register is never lost. It is also important that the intensity of the upper notes of the scale is not permitted to exceed that of the tonic.

To list all of the variations now possible would be impractical. Exercises repeated again and again become dull, so variety for the sake of variety is often desirable. With technical development, however, one exercise is indispensable—the double octave arpeggio. It can be effectively used at all levels of intensity, preferably on the vowels "ah," "ee," and "oo," and every effort must be made in working this exercise to preserve the legato connection. Double octave scales are virtually foolproof and contain within themselves a tendency to rebalance the mechanism. An important benefit of this practice is that it will decrease the excessive tension in a mixed registration and permit the chest and head voices to shift into their rightful areas of operation. Theoretically,

the double octave arpeggio should effectively combine the registers and, when the overall intensity is gradually increased through practice, pave the way for a beautifully executed *messa di voce*.

Exercises for opening the throat are virtually the same for men as for women, and those discussed can be used interchangeably. As a mixed registration is usually at the root of most technical difficulties, the first procedure is to realign the registration. With an improved registration and the throat relieved of its closing tension, the resonance adjustment commands greater attention. In attacking this problem, the functional response of the registers is pitted against the psychic, as well as physical, impediments barring the way. Nature herself offers an assist at this point, because after proper development the chest and head register mechanisms will balance themselves reflexly. But it must not be assumed that a resonance adjustment will have been formed simply because of an absence of muscular interference. The real difficulty is that the throat must be maintained in an open position of resonance throughout the duration of the musical phrase. Furthermore, if the singer is to have knowledgeable control over his voice, the resonance adjustment must be volitionally positioned.

The technique for gaining volitional control over involuntary movements has already been discussed. By approaching the problem in the manner described, the idea of a volitional positioning of the vocal organs becomes acceptable as a physical and conceptual possibility. On this basis, the singer can sense the nature of involuntary movements and understand how to assist them; he becomes aware of a control potential which avoids the arbitrary and promotes that which is natural. Yet, however skillful the teacher or responsive the pupil, the picture is not complete. What is required now is something extra, and this extra something is the singer's instinct for oral expression. Unless there is a strong desire to break through and fulfill a functional potential, the singer will never experience a truly open-throated resonance adjustment.

Apart from these considerations, the key to open-throated resonance lies with the attack, for it is that which occurs at the moment of tonal inception which will determine the success or failure of a vocal exercise. We have already stressed the need for a rhythmic launching of the phrase, and it has also been emphasized that it is the chest register which serves to dislodge constricting tensions. It is equally important to recall that the register balance must be permitted to readjust for every pitch and intensity, while at the same time the resonance adjustment remains unchanged. All exercises designed to open the throat, therefore, must combine these elements, all of which must be summed up in the attack.

Care must also be taken to ensure that the pitch, the vowel, the intensity, and the register balance are all precisely articulated. There must be no slurring; the chest register must be well-coordinated, solid, and secure, and the singer must concentrate on a pure legato. Whatever the shape of the exercise, and for whatever purpose it is employed, if these details are attended to, the throat will not only open, it will remain open.

Another phase of technique which has a direct bearing on open-throated resonance is the factor of tonal duration. In a legato phrase, tonal vitality must be sustained. If tone is not to alter or diminish, the resonance adjustment must not only be formed, it must be maintained. To be precise, it must be "held." This need is often recognized, but usually such a holding action is attributed to "support," and few methods now in vogue fail to incorporate a special technique of breathing with tonal support as the direct object of instruction.

All methods of breath control have proved to be impractical. Neither the breath nor any technique of controlled breathing is capable of supporting a tone. Acoustically, tone is nothing more than rapidly contracting and expanding air particles, and it is not possible to support moving currents of air. Physically, muscles can either relax or contract, and the kind of relaxation or tension shared by muscles which are mutual antagonists determines the character and efficiency of the coordinative process, not breath support. Support is probably confused with the positioning process which reflects an open-throated resonance adjustment.

A concept somewhat awkward to comprehend here is the use of the word "held." But this is precisely what happens! As the vocal organs move reflexly into position to establish a condition of cavity resonance, they must, as long as tonal duration remains a factor, "hold" the position to assure uniformity of quality. This holding process which maintains the resonance adjustment is crucial, for if it is not correct, in all likelihood the throat will constrict.

If we equate this concept of holding a resonance adjustment with energy output, a better perspective is gained. Energy must, if it is to be utilized economically, be confronted by resistance. This resistance is supplied by the muscles which position the vocal organs. When properly adjusted, all of the laryngeal muscles which function antagonistically are brought into equalized tension and counterbalance one another. When such a balance of tension occurs, the system is said to be in equilibrium. A resonance adjustment, therefore, must literally be "held" in balanced tension in order to resist the energy output. To the

degree that it is held in a state of perfect equilibrium, the coordinative process will be correct.

A basic law of physics is applicable to the functional activity here described. It states that "for every action there is an equal and opposite reaction." The singer who enjoys a technique where the resonance adjustment and the registration are both held in a condition of balanced tension fulfills that law. His voice will be free because the energy used will prompt a physical *reaction* which will virtually cancel the *action*. As a result, energy is never wasted or diffused.

One may conclude from the foregoing that the establishment of balanced tension is a prerequisite to a secure vocal technique. Such a condition depends upon two factors: 1) registration, which when correctly balanced will cause the edges of the vocal cords to run parallel, thus closing the glottal space, and, 2) open-throated resonance, in which all constrictor tensions caused by muscular interference are absent, thereby opening up unlimited possibilities for accurate "tuning" of the resonators as a coordinate act with registration.

There is an expression frequently used by the early Italian masters clearly indicating a need for "holding" (without tenseness) a resonance adjustment. Common reference was made to "*appoggiare la voce*," to "lean on the voice." Obviously, there is but one way to safely lean upon anything, and that is to have a resisting force providing an "equal and opposite reaction." To accomplish this, the muscles which position the resonators must "hold." It is a natural equilibrium among opposing muscle groups which leads a performer into believing his tone to be "supported." To attribute this feeling to any special technique of controlled breathing would be a tragic error.

An interesting sidelight of functional training is the physical symptoms which invariably accompany a release of constrictor tension and the consequent opening of the throat. Yawning, dizziness, giggling, tingling sensations, and distracting conversation are common, while quite frequently the student will complain of having to regurgitate. On rare occasions, symptoms of asthma will make it almost impossible for the singer to phonate, a symptom which always accompanies an obviously more open-throated condition of resonance. Another oddity is the singer's tendency to stop in the midst of a tone which is undeniably freer. In such instances, it is difficult to judge whether the interruption is due to being ill at ease with a new tonal identity, or whether it grows out of anxiety. Quite clearly, contact with natural movement leads to sensual awareness and a breakdown of psychic defenses.

Since time immemorial, man has erected defense mechanisms to pro-

tect himself from a fear of his own sensations. He has done this by tensing certain areas of the body. As a result, he became "armored." Elsworth F. Baker defines two kinds of armoring, "natural or temporary muscular contraction and permanent or chronic contraction." He then says, "the former occurs in any living animal when it is threatened, but is given up when the threat is no longer present. The latter originates in the same manner, but because of continued threats is maintained and becomes chronic, reacting eventually to permanent inner rather than environmental dangers" (12). Of particular interest is the fact that armoring is known to divide into seven segments (ocular, oral, cervical, thoracic, diaphragmatic, abdominal, and pelvic) and that each of these segments, except the ocular, forms an integral part of the respiratory system.

Are they vocal organs or respiratory organs? This is an important question because if it is the respiratory system that is adapted to the vocal process, then psychological attitudes must be dealt with effectively. One sings with the entire body and, to quote the great English baritone Ffrangcon-Davies (1855-1918), "The whole muscular system from head to feet, will be in the wise man's singing, and the whole man will be in the tone."

With six of the segments of bodily armoring related to the organs of respiration, tension or release of tension in one area of activity is bound to affect all others. Obviously, for the teacher of voice to transgress the limits of his own discipline would be a dangerous presumption. Nevertheless, he must learn to recognize psychological barriers for what they are and, by stimulating the movement of those involuntary muscles which serve to open the throat, help promote an overall functional improvement. Should he succeed, the whole man will not only be in the tone, but both tone and man will be more complete.

MENTAL CONCEPTS

It may seem strange to comment on mental concepts last when in fact this phase of the subject would appear to come first. But, concepts held by the singer are one of the prime barriers to learning. While it is true that one cannot sing a tone not first conceptualized, it is also true that that which one conceptualizes is largely due to conditioning. Consequently, subjective evaluations are at odds with objective ideals. Like controls which must be relinquished, the mental concept must also be relinquished. The basic element in every vocal problem is that the concept, like the control, is incorrect. Just as the singer must learn to lose all control in order to discover a new kind of control, so, too, he must

change his concepts so that they agree with functional reality. When objective and subjective concepts are in agreement, the singer may be said to have fulfilled his talent potential.

Concepts entertained by singers are invariably misconcepts. Being subjective, they merely represent a form of self-image. Many factors contribute to the formation of this image. Sounds uttered from infancy to adulthood become personalized, and to this kind of identification there is usually added other influences such as training, imitation of other singers, personal taste as it relates to aesthetics, and characterological structure. At the onset of phonation there is an automatic pre-forming of this concept which becomes, with rare exceptions, a pattern established by habit and familiarity. Consequently, there is a need to reform this concept. The obstacle here is that the quality looked for is the one quality the singer has never heard. Personalized qualities are the product of a coordinative process which reflects the *condition of the functioning mechanism*, not its ultimate quality potential.

The problem during training, therefore, is in the bypassing of the singer's pre-concept; he must be taught to do the seemingly impossible—produce a sound he has never conceptualized. The solution to this problem lies within the registration. If we recall that the vocal registers yield tonal qualities that appear as a response to a particular pitch-intensity pattern, and that those responses are independent of the singer's concept of quality, we have a ready means for changing both the coordinative process and the concept at one and the same time. It is for this reason that "preparing by not preparing"—"letting go," and the willingness to respond without inhibition—is so important to learning. When the student is cooperative, it is not too difficult to venture into new tonal experiences, experiences which are consonant with natural order and better serve the needs of a creative striving.

As almost all learning techniques deal with concepts, it is awkward to adopt an attitude which virtually disposes of this element. To be more precise, however, one does not have to reject concepts so much as goals. Certainly, a pitch, intensity, and vowel pattern represent a concept to which the student responds; but it should be a concept entertained without the encumbrance of aesthetic goals. What must be realized is that internal organs function beyond concepts. Watching infants grow offers proof of this, for they function in accordance with organic law long before they have developed the ability to form concepts. To bring a badly conditioned reflex into conformity with nature's laws, the singer must abandon those concepts which have become part of his conditioning. He must reject learned responses and learn to respond.

He must become like a little child and view events without prejudice, without prejudgment, and without aesthetic preference. In this way, he can become physically, emotionally, and vocally free.

CORE OR PERIPHERY?

In a rather whimsical moment, D. A. Clippenger wrote that "the real art of singing was lost immediately after it was found . . . [that] the only time it was perfect was when it began . . . [and] ever since it began we have been searching for it without success" (13). This statement seems ludicrous, but it is at the same time extremely perceptive. Man has always been at odds with his own nature, as well as the nature around him. We read in the Bible of man's need to be "reborn," of ridding himself of the old Adam and taking on the new man, of becoming as a little child. Philosophies abound, all with intent of showing the way back to a state of nature which has been lost.

The history of vocal training has followed this same pattern. Great teachers have had special insights into functional activities and have understood the mechanism. These special qualities were lost because they could not be passed on like family heirlooms; each successive generation of teachers must rediscover that which has already been discovered. As in other areas of learning, new bodies of knowledge have been incorporated which on the surface would seem to clarify training procedures and expedite progress. Unfortunately, the reverse is too often the case; the simple is rejected for the complex, the core for the periphery, the natural way for mechanistic methods. Too often man builds better mousetraps only to become caught in them.

The structure upon which early training had been based was obviously one in which functional laws were formulated, understood, and utilized on a practical basis. Proof of this is to be found in a statement by Mancini. "Art," he suggests, "consists of knowing where nature directs us, and to what we have been destined; understanding at once the gifts of nature, cultivating them easily, man can perfect himself; how sure is harvest for the attentive farmer, who has observed and understood the different seeds, which are fecund in diverse types of earth" (14). Another writer, Isaac Nathan (1792-1864), a legitimate heir of the Porpora school, made a distinction between core and periphery when he declared, "The subject of voice includes two principle considerations, tone and articulation. . . . To the organs of tone, which will be briefly noticed in the progress of this treatise, the nose, the uvula, the palate, the teeth, and the lips, may be considered only as auxiliaries, since they are more especially organs of articulation . . ." (15).

If Mancini's analogy to farming is taken seriously, we can retrace our way to the point where functional health, resonance, vowel purity, and purity of intonation meet as one. For, without question, his statement indicates an awareness of function, of a correlation between stimulus and response, of the importance of gaining consonance with nature's laws and, by implication, that the organic response of the vocal mechanism is predictable.

We have already discovered registration to be an organic response to a stimulus pattern comprised of pitch and intensity. If the vowel is considered, it, too, will be recognized as being the result of a positioning process. This process not only involves the vocal cords, but the entire respiratory system. When the system is well coordinated, the tone quality is pure. When there is muscular interference, there will be a corresponding degree of tonal distortion. Thus, the idea that has been projected as a conceptual image to which the student responds is similar to the planting of seed in the ground, while the vocal organs can be compared with the fertile earth. When the total environment is favorable to the needs of internal organs, a natural growth process takes place. Just as plant life flourishes when exposed to a congenial climate, so, also, the vocal mechanism will yield sounds which are pure, resonant, flexible, and capable of encompassing an extensive tonal range whenever they are confronted with the kind of environment their growth pattern demands. As long as this energy exchange is maintained in perfect balance, the voice will be free and totally responsive to the singer's will.

Purity of intonation and registration remained clear-cut concepts for almost three centuries. Judged on the basis of Mancini's observation, training procedures were purely functional. The Porpora school placed some emphasis on breathing, but the idea of breath "control" was a much later development. Other and more serious departures were to follow. Garcia's invention of the laryngoscope was one. Another occurred toward the end of the nineteenth century. Singers who could best be described as having natural voices (voices extremely well formed with little or no formal training) introduced, when their careers had terminated and they became teachers, concepts which can only be described as pure fantasy. Lilli Lehmann (1848-1929) was a leading exponent of this kind of school, and her book contains entire chapters given over to the Resonance of the Head Cavities, Sensations of the Palate, Sensations of the Nose, and Sensations of the Tongue (16). The renowned Alessandro Bonci (1870-1945) brought his kind of thinking to its logical conclusion when he said, "Singing is like squeez-

ing paint out of a tube" (17).

The Lehmann-Bonci "nonsense school" must be rejected out of hand as an unfortunate aberration having nothing to do with tradition or new bodies of learning. Far more serious has been the kind of misdirection supplied by devoted pupils and followers. Herman Klein, a distinguished pupil of Garcia's, one who collaborated in the preparation of *Hints on Singing*, offers a clear example of how well-intentioned friends and supporters can abandon the functional core for peripheral concerns. In Garcia's *Hints*, there are seven pages of material on the registers of the voice; not one word on resonance, very little on breathing, and nothing on breath "control."

Writing some years later, Klein lists the various elements of Garcia's training procedures in the order of their importance. These are set forth as follows: (a) breathing, (b) resonance, (c) vowel formation and attack, (d) the *sostenuto* (sustained tone), (e) the legato (slow scale, registers), (f) the *portamento*, (g) the *messa di voce*, (h) agility (coloratura, ornaments). Klein goes on to state, "The old Italian teachers had no trouble in obtaining a bright, ringing tone. Resonance, therefore, may not have entered very largely into their theory, but was far from being ignored in their practice" (18).

Here, quite clearly, Klein mounts the bandwagon. Witherspoon's "new bugaboo, Resonance" must, if one is "with it," be incorporated into the old scheme of things. Klein apparently had not realized that resonance is an event that occurs at the moment of tonal inception and is due to a precise positioning of the pharyngeal cavities. His was a typical state of mind which made the time ripe for the acceptance of Lilli Lehmann's propositions. Lehmann was one of the world's great singers and a strong advocate of learning through feeling (purely on an "I feel it, therefore, you feel it" basis). If one is steeped in an older tradition and uncertain about the nature and cause of resonance, then it might be helpful to accept her idea that the sensations of vibrations felt in the palate, nose, and tongue are truly the cause of resonance. At the same time, DeReszke's postulate of nasal resonance (singing *dans la masque*) offered further inducement. But, if tone is to be resonated in the facial masque, it must be directed into and concentrated in that area. This led to techniques for volitionally "placing" the tone to get it "forward" into the frontal sinuses. There the vibrations could be concentrated and reinforced and the problem of resonance solved. No longer were teachers concerned with registration or a coordinative process which positioned the laryngeal and the oral pharynx. The new concepts of resonance would take care of everything.

How easy it is to part company with a functional truth. Nathan made a sharp distinction between tone and articulation, naming the nose, palate, teeth, and lips as auxiliaries. Garcia supported this view and observed that "the real mouth of the singer ought to be considered the pharynx" (5). Dr. Marafioti, personal physician to Caruso and writer on vocal technique, chose to move toward the periphery and declared, "Voice is speech, and is produced by the mouth and not by the vocal cords" (19).

Contemporary theorists have continued to move from the core to the periphery, following the path set by Lehmann and DeReszke. D. Ralph Appelman, in a book filled with harmonic analysis of tones and detailed description of the muscular processes involved in phonation, makes these comments on the subject of vowel formation:

Each vowel represents certain well defined, physiological positions involving the tongue, labial orifice (lips), velum, mandible, and larynx, which have been determined by X-ray photographs and cinefluorography. **TONGUE.** To produce the basic vowel, the tip of the tongue must be placed against the bottom front teeth during phonation (production) of all vowel sounds sung on pitches within the area of stability. **LIPS.** In the high frontal, mid-frontal, and low frontal vowels, the lips are more spread than rounded. In the lowback, mid-back, and highback vowels, the lips are rounded progressively more than from lowback to highback positions. **LARYNX.** The laryngeal position is more lowered during phonation than the passive position assumed during normal breathing (20).

Conscious control leads to stiff, mechanical singing.

Another contemporary authority whose opinion carries considerable weight is William Vennard. He states, "We are accustomed to think of the larynx as merely the vibrator, since it is the site of the vocal bands, but after all, it is a cavity. Startling as it may be, our most prized resonance may be here!" Later on, speaking of the ring in the voice, he observes, "This ring has various characteristics that associate it with the larynx." But this is getting too close to the functional core, because in a subsequent discussion of "focus" and "covering" he declares, "The way to build a voice is from the front to the back, and not from the throat into the mouth. A means to this end is that synthetic consonant which I have called the 'hum on the tongue.' . . . This is an implement for achieving the correct 'placement' of the tone, and thereby insuring its healthy development" (10).

In each of the above quotations, there is an all-pervasive theme: avoidance of a functional core for peripheral concerns. Appelman's

"well-defined, physiological positions" never arouse sufficient interest to develop a technique for influencing the positioning process at the point of tonal inception, for getting at the vocal organs and making them work from the inside. The idea of stimulating involuntary muscles is either abhorrent or never thought of. All approaches seem to favor the plan advocated by Vennard and work to "build a voice from front to back, and not from the throat into the mouth."

This oversight is not peculiar to the scientifically oriented voice teacher. Almost all teachers in one form or another pursue an identical course. When the technique is "throaty," the suggested cure is to "get the tone out of the throat" and to "bring it forward," obviously an avoidance of core activity. Tone is initiated in the throat, so the problem is not to get the tone "out" of that area but to release the constricting tensions within it. The solution to this problem depends upon a program given over to *opening* the throat, in which the entire coordinative response of the organs involved in phonation is reversed.

If a stone is thrown into the water, the ripples will move out from the point of impact in a series of concentric circles. In this natural event, we have a perfect example of the meaning and purpose of functional vocal training. By developing techniques which energize the core of the vocal process, all peripheral matters will take care of themselves; the tongue will assume the correct position, there will be no jaw tension, the mouth and lips will position themselves normally, tones will not waver, there will be no wastage of breath, and quality will be individual, pure, and beautiful.

Now is the time for teachers to forget such irrelevancies as the Bernoulli effect, and pronouncements which state that "in a position of rest the space between the wings of the thyroid is greatest, whereas in singing it may be a centimeter less," and adopt principles based on natural order. Mancini had the right idea when he urged his scholars not to distrust "the inclinations in regard to nature, which, when overlooked, make every attempt to overcome or correct by the aid of art, futile" (14).

There is a story told of a young Buddhist who went to a priest and said, "Master, I want to be free." The master replied, "Who is binding you?" This story is pertinent because unless one is impatient with non-freedom, unless one wants to be free, functional training will fall on barren ground. Along with talent and other requisite gifts, the desire to fulfill one's potential is indispensable to the learning process. For those who have that desire, success, even in the face of adverse circumstances, can become a real possibility. The dream can become a reality.

Given this kind of desire and talent, the burden of instruction, especially in the beginning, falls upon the teacher. Many trees grow in the pine forest, but the tree that grows straightest, tallest, and most beautifully rounded is the one whose good fortune it has been to settle in the right environment. And environment is the teacher's direct responsibility. The exercises he selects, his understanding of functional mechanics, his sensitivity in knowing when to goad and when to coax, when to drive and when to relax, will determine whether or not the student's potential will be realized. Healthy life energy starts at the core and moves toward an outer periphery. Unless the work of "unbinding" is core-directed, both physical and psychological potential will remain unfulfilled.

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*O Oedipus, God help you!
God keep you from the knowledge of who you are!*
Sophocles

***Oedipus Tyrannus* of Sophocles— Core Drama of Western Culture**

By JOHN M. BELL, M.A.*

Introduction

Greek tragedy was richly social in function. It was offered and performed at religious festivals; it most often dealt with the central myths and the legendary or mythic heroes of the culture; its themes were the modes of life and religion on the individual and community level; it typically attempted to reconcile, resolve, or make meaningful the perplexing problems and paradoxes of human existence.

At Athens, tragedies were performed as part of the spring Dionysian rites, celebrating, ostensibly, the renewal of life, the recycling of the fertility of the earth. Although the tragic festivals were begun at Athens in historical time—about the middle of the sixth century B.C.—the tragedies themselves embody forms, themes, and rituals that date back to the very origins of civilized, agricultural man.

Indeed, the hero in the older rituals was the symbol of the dying year which had to be destroyed before the spirit of the new year could emerge (1). As this ritual was slowly transformed into myth (the ritual made general) and ultimately into drama, the necessity of the hero's destruction remained as an element of ritual consciousness. The point of the ritual was to propitiate the threatening gods who might otherwise suspend the new season of growth and hence destroy the community. The ritual was meant, too, to overcome symbolically the threat to

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life in all its forms, either as enemy, angry god, pollution, or sterility. Hence, when the more sophisticated drama developed in Athens, it preserved the fundamental notions behind the ritual (threat to life, death of hero) even as it began to serve more general and sophisticated ends. And, too, as in the older ritual, the hero took on the suffering and agony of the whole community. His demise was a social, not a private, affair.

But also, in that civilized, agricultural man is also armored man, the abiding concerns of his ritual, myth, religion—and tragedy—stem from his attempts to understand the myriad agonies and mysteries engendered by his armored condition (2: p. 103). In that armored man cannot perceive reality in a unitary way (3), he has the profoundest difficulty in experiencing his own being as a part of the nature from which he has emerged and about which he has such deep ambivalence. As a result, as Reich has shown, his feeling and thinking are split into opposing polarities. Armored man's intellect has been split off from his feelings and from reality; his interiorized split fashions and forms the bases of his modes of perception. Not only are his patterns of thinking split off from his organic unity, but his patterns of thinking become rigidified (mechanistic) or mystical (3: pp. 11-12). Further, despite armored man's apparent success in mechanistic or mystical thinking, he always experiences inward emptiness or incompleteness, the need to be "filled up." Hence, armored man always tries desperately to reestablish his lost bond with nature. But his armored modes of thinking are simply not sufficient to the task of perceiving his deepest links to nature, since he has altered nature within himself and, by extension, outside of himself. The burden of making "meaning" out of existence remains always a crushing urgency.

Even relatively unarmored man, *e.g.*, the Trobriander of Malinowski's description or the Bushman of the Kalahari, needs to interpret the world in which he lives. This seems to be a natural, rational human trait. While these "primitive" people might not understand certain facts of nature, they do have a deep intuitive contact with the world and its natural forces. Moreover, they make myth and enact ritual to give identification to the natural forces and to attribute cosmic dimension to the laws by which they live and which they experience within themselves. The myths of the Trobrianders reflect a sense of belonging in nature and a genial familiarity with its gigantic forces (4).

For armored man, however, the world is a much more threatening place, sensed as it is through the maze of repressed impulse and neurotic fear. There is an even more intense urgency for armored man to

impose order (meaning) upon the cosmos, because he must always foist order upon himself to control his secondary impulses. Since he cannot surrender himself up to organotic pulsation, he has a fear of deep movement everywhere, and so must try to control the cosmos itself through projection of his own rigidity (3).

This structuring of the cosmos takes many forms, among which are the familiar myths of creation, incest, destruction, mutilation, fear and, later in cultural time, the patterns of analysis and philosophical inquiry (3) which often mask, rationalize, and attenuate the more direct, basic fears. In other words, armored man is deeply fearful of the creation, does not understand it, and invents various intellectual devices (ritual, myth, etc.) to defend himself against it. The desire to maintain contact with reality remains, however, even though the contact is distorted; "man by nature desires to know" as Aristotle observes, and he investigates and ponders his links with nature in his religion, science, and philosophy with the deepest desire to understand. It is from the network of social and intellectual defenses and constructs that our culture derives its form and character (5: pp. 141-55). And, certainly, a major component of that culture is art.

What makes art rather different from many other aspects of culture is its embodiment of an accurate intuitive understanding of the human condition. As do ritual and myth, the best of Greek dramatic art explores the core of the human experience against the background of the cosmos itself. (Indeed, in almost all great dramatic and literary art, the very structure of the universe becomes a primary element of meaning; this clearly can be seen in Greek literature, and in Shakespeare, Milton, Melville, Lawrence, and many others as well.) Further, it combines a literally stated comment, often the thesis of the play, with a symbolically rendered perception of the deeper sources of the dilemma which the thesis sets forth. For example, the *Oresteia* of Aeschylus quite consciously takes as its theme the derivation of law (the Areopagus) at Athens; but beneath this theme surges a whole world of genital conflict and fear, which figured not only in certain elements of the trilogy's conscious materials, but primarily in the symbols and metaphors of Aeschylus' creation, and in the symbolic elements of the ancient rituals and myths Aeschylus has retained in the plays.

Both of these elements, the ritual-mythic and the artist's metaphoric material, come from the deeper layers of consciousness and even the unconscious. In the Greek creation myths, in the castration of Uranos by his son Kronos and Kronos by his son Zeus, the expression of patriarchal hostility is rather close to the surface, projected outward, of course, to

the primary gods and, therefore, to the nature of the universe itself. In later, more elaborate mythic material, much of such aggression and hostility is disguised, yet is still discernible. The artist's symbolic language, however, adds another dimension, that of the deepest insight into the social origins of emotional conflict, the bedrock of human armoring (2: pp. 102-3). This metaphoric language (and this might include the plot itself as metaphor) is, in effect, the artist's deepest conception, and it might run counter to the thesis at the surface; such a conception might not be entirely conscious, yet, in its clusters of images and cohesion, it comprises a systematic galaxy of meaning.

This discussion proposes to analyze Sophocles' *Oedipus Tyrannus* in functional terms, and to define the extent to which Sophocles apprized the character of the human condition—the tragic human condition—and structured his insight into the formal and metaphoric elements of his tragedy. The thesis of this paper is that a careful reading of the major symbols, events, and personae will show that Sophocles intuitively understood the basic features of armored life in its several facets, e.g., perverse sexuality, incest wish, mechanistic-mystical thinking, distorted perception, intellect split off from feeling, etc. We argue that Sophocles understood, however intuitively, that the tragic human condition (armored life) bears some causal relationship to the emergence and triumph of civilization and that the ever-recurring pattern of human tragedy has become an almost inevitable force.

Background of the Play

Sophocles' *Oedipus Tyrannus* is a benchmark of Western culture. To the Athenians of the fifth century B.C., it was a profound comment on the nature of being, natural, human, social, and intellectual. To the reader of our era, it is, in addition to this, a paradigm of the human unconscious; Freud's brilliant elucidation of the central complex of our patriarchal culture takes its name from Sophocles' play. Indeed, so strong has been Freud's influence, the modern reader tends to see *Oedipus Tyrannus* almost solely in Freudian terms. Freud's thesis is compelling, i.e., since we are still so deeply moved by the play, there is something universal about it which must be accounted for by more than merely dramatic terms.

Oedipus Rex is what is known as a tragedy of destiny. Its tragic effect is said to lie in the contrast between the supreme will of the gods and the vain attempts of mankind to escape the evil that threatens them. The lesson which, it is said, the deeply moved spectator should learn from the tragedy

is submission to the divine will and realization of his own impotence. Modern dramatists have accordingly tried to achieve a similar tragic effect by weaving the same contrast into a plot invented by themselves. But the spectators have looked on unmoved while a curse or an oracle was fulfilled in spite of all the efforts of some innocent man: later tragedies of destiny have failed in their effect.

If *Oedipus Rex* moves a modern audience no less than it did the contemporary Greek one, the explanation can only be that its effect lies not in the contrast between destiny and human will, but in the particular nature of the material on which that contrast is exemplified. There must be something which makes a voice within us ready to recognize the compelling force of destiny in the *Oedipus*, while we can dismiss as merely arbitrary such dispositions as are laid down in [Grillparzer's] *Die Ahnfrau* or other modern tragedies of destiny. And a factor of this kind is in fact involved in the story of King Oedipus. His destiny moves us only because it might have been ours—because the oracle laid the same curse upon us before our birth as upon him. It is the fate of all of us, perhaps, to direct our first sexual impulse towards our mother and our first hatred and our first murderous wish against our father. Our dreams convince us that this is so. King Oedipus, who slew his father, Laius, and married his mother, Jocasta, merely shows us the fulfillment of our own childhood wishes. But, more fortunate than he, we have meanwhile succeeded, in so far as we have not become psychoneurotics, in detaching our sexual impulses from our mothers and in forgetting our jealousy of our fathers. Here is one in whom these primeval wishes of our childhood have been fulfilled, and we shrink back from him with the whole force of the repression by which those wishes have since that time been held down within us. While the poet, as he unravels the past, brings to light the guilt of Oedipus, he is at the same time compelling us to recognize our own inner minds, in which those same impulses, though suppressed, are still to be found (6: pp. 176-7).

The clinical experience of psychoanalysis has tended only to prove more fully Freud's claim to the prevalence of the Oedipus complex and hence more strongly casts Sophocles' play into the Freudian mold for the modern reader. Yet, of course, the play is much more than just an evocation of our unresolved oedipal strivings and is much more than a play of destiny. Aristototele, who admired the play immensely, held that this play was the perfect example of the best sort of tragedy, one that reduced a hero to misery through an action of the hero himself and aroused and purged feelings of pity and terror. He did not himself feel that fate was the play's theme (7).

The modern classical scholars, with some notable exceptions, have

tended to sidestep Freud's thesis and persist in seeing the play in terms of the classical Athenian interplay of philosophy, religion, politics, and history. While very often their work has been of profound value, such evaluations miss much of the play, in effect its core, by neglecting Freud's discovery.

Other modern critics have been deeply influenced by Freud and psychoanalysis and have leaned heavily upon his concepts in interpreting *Oedipus*. Some of this criticism is valid and offers fruitful insights into the play. But the basis of such criticism, devoid of any meaningful standard of biophysical functioning and rather fully committed to armored concepts, allows for precious little progress into the heart of the play. The following is a typical example, admittedly taken in fragments from a source other than the original, which could not be located.

From this work (pp. 118-23) it appears that Jocasta "instead of stiffening Oedipus' courage as we should expect in the positive Oedipus complex . . . makes him back down in accord with her role as finger symbol in the breast complex of feminine identity and ring symbol in the negative Oedipus complex." "Laius' . . . double-pronged goad represents the two breasts transferred from the pre-oedipal to the oedipal level." "Mount Cithaeron . . . Parnassus . . . and Helicon . . . are breast symbols which represent the poet's ability to substitute words or symbols for the milk of which he wants to be masochistically deprived." Mr. Wormhoudt neatly resolves the much discussed problem of the exodus of the *Oedipus Tyrannus*: "what Oedipus accomplishes in the last scene of the play . . . is the substitution of exhibitionism for voyeurism" (8: p. 198).

This reading is chaotic; the critic seems to be indulging in an orgy of symbol-reading with little regard for either the design of the play or the systematic nature of Freud's concepts.

A more recent example can be found in an article by G. Devereaux where the mythic background and the play are seen almost exclusively as projections of homosexual urges, even to the point of interpreting the piercing of the infant Oedipus' ankles as Laius' "feminizing" of him (9: p. 172). Such elaborate motive-finding vitiates some otherwise intelligent comments, and distorts the literal intent of the play.

The main problem is, of course, that such critics deal with an artist as though he were a patient on the analytic couch, and rather carelessly interpret elements of dramatic symbol and structure as expressions of the artist's alleged neurosis. Even though an artist may have his share of neurosis, his work of art represents an orderly examination of the human condition. The artist is in creative control of his symbols to a far

greater extent than is the typical neurotic of his. The artist makes meaning where the average man only endures suffering; the artist brings insight and understanding; the average neurotic fights it. Finally, such psychoanalytic interpretations quite misconstrue the function of art and in so doing betray the artist and his creation.

Our purpose shall be to examine the play from a functional point of view, bearing in mind both the meaning of the play in its cultural setting and the prevalence and centrality of the Oedipal problem in our patriarchal* culture. While it is tempting, we do not at this time propose to examine the totality of the mythic material from which Sophocles drew in composing his drama; we will concentrate on the play and on those certain features of the myth which are relevant to our purpose.

The legends and myths about Oedipus were almost everywhere in ancient Greece. Nilsson (12: p. 105) dates the material back to Mycenaean times (ca. 2000-1200 B.C.). By Homer's time, the legend was very well known, and we find in the *Odyssey* (Book II, lines 251 ff.) the first Greek literary reference to Oedipus and his mother-wife Epikaste (Jocasta). There are many variations on the legend. That most generally known to Sophocles' time, and the one which he incorporated into his play, is roughly as follows:

Laius, King of Thebes, while a guest of Pelops, stole Pelops' son, Chrysippus, and committed homosexual rape upon him. For this violation, Laius was warned by the oracle that his son, should he have one, would murder him and marry Jocasta, Laius' wife. To prevent this, Laius ordered that his and Jocasta's new-born son be slain. The child was taken out into the hills of Citheron to be bound and exposed. But, the servant entrusted with the task, taking pity upon the child, gave him to a shepherd of Corinth, who in turn gave him to Polybus and Merope, the childless King and Queen of Corinth. Being reared a prince, young Oedipus, so named because of his mutilated foot (feet), heard a reveler at a royal banquet revile him with bastardy. Moved by this insult, Oedipus consulted the oracle at Delphi as to his lineage and was told that he would slay his father and sexually possess his mother. Dreadfully fearing the prediction, Oedipus fled Corinth and made his way

*In this discussion, we mean by "patriarchal," the familiar sex-negative, repressive, patriarchal social systems of armored man. By "matriarchate," we mean the hypothetical matrilineal, pre-Neolithic, Western society of a non-repressive (not yet armored) character, analogous to which are the Kalahari Bushmen and the Trobrianders; this matrilineal matriarchate is theoretically reconstructed by analogue, by evidence of Paleolithic artifacts (10), by evidence at Çatal Hüyük as reported by J. Mellaart (11), and by, most importantly, an understanding of the meaning and specific consequences of armoring.

towards Thebes. At a place where three roads met, he was rudely challenged by an older man and his bodyguard, and the ensuing altercation led to Oedipus' slaying the older man. Arriving at Thebes, he found a city bereft of a king and held in the dire grip of a vengeful Sphinx, presumably sent to punish the city. Answering the Sphinx's challenging riddle, a wrong answer to which would have meant death, Oedipus destroyed the Sphinx, saved Thebes, and was rewarded with the hand in marriage of the recently widowed queen, Jocasta, his own mother.

Years later, after Oedipus and Jocasta had had two sons, Eteocles and Polynices, and two daughters, Ismene and Antigone, a plague visited the city. In the course of attempting to rid the city of the plague, in interviews with the blind seer Teiresias and old shepherds, Oedipus discovers that the oracle has long since been fulfilled. His mother-wife having now hanged herself, Oedipus resigns the throne and wanders away an exile, blinded by his own hand.

There are many variations on the legend, but Sophocles has carefully selected those elements he needed and discarded others. Certainly, it would at first appear that this play is one of destiny, that is, a play examining the elements of fate and free will. But careful reading leads us somewhat away from this view.

Sophocles would know that his audience would be entirely familiar with the Oedipus legend. It was famous in ancient Greece and could be encountered quite frequently. In fact, there was a rather large literature devoted to the legend, including the now lost epics, *Oedipodia* and *Thebais*.

The Play

The plot of the play is to move Oedipus from complete ignorance of his state to the knowledge that the oracle has already been fulfilled. As Freud points out, the stages along the way are rather akin to the course of psychoanalysis. That is, the interviews with Creon, Teiresias, Jocasta, the messenger from Corinth, and the old Theban shepherd bring Oedipus inevitably closer to the truth until all of his past is made conscious once more and he knows who—and what—he is. As with anyone fighting each step of the way in uncovering the core conflict of his neurotic affliction, Oedipus fights against the truth desperately, yet finally yields to it and to his ultimate catastrophe.

The play begins with the people's appeal to Oedipus to save Thebes from a terrible plague. The plague is specific; it is a sickness, a disease of all levels of procreation in Thebes. We are told that the crops do not

yield, the domestic animals are barren, and that the women of Thebes no longer bring forth young (13: I, p. 112). The natural laws are interrupted here; the three primary sources of life for agricultural man are stopped. This, of course, would lead to the utter desolation of Thebes.

The full significance of this might be lost on a modern audience. Ancient cities were always the product of the greater efficiency of agriculture as compared to the hunting-gathering economy. A particular area, if managed with plant domestication and stock-breeding would support a much larger population. But as the population grew, the consequences of poor harvests or none would mean the death of the now greatly increased population. Gaster has shown that the earliest rituals and their accompanying myths in the ancient agricultural Near East stemmed from the very great anxiety lest the agricultural year not be renewed with another coming of spring (1: pp. 26 ff.). Further, since the neolithic agricultural revolution, people shifted away from earlier deities, or at least profoundly modified them, and identified them through a city or regional aspect. In other words, the city became the pathway of identity and being. The death of a city, or exile from it, would mean death of one's soul, annihilation of one's cosmic connection. Hence, there was a desperate issue involved in the citizens' plea to Oedipus.

The sexual nature of the blight immediately brings us up against the most ancient of problems. It is not so much one of politics or philosophy, but one concerning the very sources of life, touching upon man's involvement with nature. According to the ancient law of pollution, and Sophocles' point here, the crime which has brought on the blight is of the gravest primordial import.

The citizens, in their choral ode, call upon Apollo not to stop his punishment of Thebes, but to stop Ares' punishment. What begins to emerge here at the very beginning of the play is an opposition of cosmic impulses. Apollo is a god of reason; that is his primary aspect. He is preeminently masculine in all of his attributes and associations. He brings light; he brings reason. He is the embodiment of patriarchal justice. Ares, on the other hand, is a stranger god, one of war, division, chaos, or destruction. But, as Knox points out, his worship is very often linked to feminine elements, especially Aphrodite, goddess of carnal love (14: p. 10).

One suspects here a terribly ancient consciousness that Sophocles is drawing into the energies of the drama, that of the outraged, deposed matriarchate. Further, the supplicant priest uses a now very familiar

metaphor in describing Thebes, that of the ship of state, now tempest-tossed on a bloody sea (13: I, line 22). One is reminded both of the reality of the state as state—the polis—and also, of its fragility in the ocean of circumstance. Oedipus, as captain, then, has a gigantic responsibility.

The first section closes with the return from Delphi of Creon, Jocasta's brother, who at Oedipus' order had gone to consult the oracle about the cause of the plague. The news that there is an unpunished murderer in Thebes gives the drama its plot, the discovery of the murderer of King Laius. With Oedipus undertaking the task of finding himself to be the murderer, the play is set for the richest and most agonizing ironies. As Oedipus pronounces sentence of exile and excommunication upon the unknown murderer, he himself fixes the doom of his own self-discovery.

The first major interview, with Teiresias the blind seer, is quite remarkable. Teiresias comes reluctantly and is forced much against his will to speak the truth. His reticence moves Oedipus to quick anger, thus revealing the very human qualities of the hero. But it is through Teiresias' reluctance to divulge what he knows of the whole matter that Sophocles makes two closely related points. The first is that truth has little chance of being understood in this world and if let loose might bring about utter catastrophe. Thus begins a commentary upon the thin skin of cultural appearance which conceals the underlying morass of wretchedness and hostility. The second is a related point: Oedipus cannot yet recognize the truth even when so directly laid out before him. Or, rather, because it is so direct, he cannot comprehend it even intellectually; he must avert it. Only at the end of the interview with Teiresias, surprised by Teiresias' riddling reference to Oedipus' birth, does Oedipus become softened. His process of learning can begin only when he is reminded of his ignorance about his own being, and he has the courage and honesty to recognize this ignorance; a lesser man would not admit it even to himself. It would be easier to avoid the whole issue. As king, Oedipus must pursue the issue, of course. But it is his manner of pursuit that is the measure of Oedipus the man. Teiresias' reference is like the taunt of the drunken reveler many, many years ago in Corinth. The first taunt of bastardy impelled Oedipus' journey to destruction, and this similar challenge of Teiresias begins Oedipus' journey into the past, to recover the truth of who he was and discover the unspeakable thing he has become. The scene between Oedipus and Teiresias is incredibly rich in ironic meaning. The audience is told, in fact, the goal of the play's action, and the subsequent interviews with Creon, Jocasta,

the messenger from Corinth, and finally the aged Theban shepherd, move with terrifying necessity to the point where Oedipus finally acknowledges the fulfillment of the oracle's promise of doom. At each stage towards understanding, Oedipus approaches, then veers from the truth, and each oscillation pitches him alternately higher and lower until the final catastrophe.

That truth should be represented by a blind old man is, of course, ironic. Sophocles had to deal here with the tradition; but he focuses upon the image, realizing the rich, bitter promise of the legend. The seer of great truth must be blind to the world; or, to put it another way, one who understands the depths of cosmic functioning (Teiresias, who is Apollo's chosen) finds the human world too painful to behold. The point is that even though the human world and cosmos are somehow linked, the typical values of human affairs, in this tragic scheme, distort this divine connection. Is Sophocles saying here that man, now caught in the web of tragic circumstance, is no longer familiar with truly divine things and that all his systems of reality are merely erroneous illusion? One must begin to think so.

It is this fuller significance of Teiresias which points up more starkly the role and meaning of the seer and which suggests the almost necessary exile role of one who deeply understands cosmos and man. (One is reminded here of Cassandra as Aeschylus portrays her in the *Oresteia*.)

In mythology, Teiresias is said to have seen two snakes in coitus; the female attacked him and he slew it. For punishment, he was changed into a woman and lived as such for years. He then saw the same once again, but this time slew the male, whereupon he reverted to manhood. Afterward, in a quarrel between Zeus and Hera over who derives more pleasure from sexual intercourse, man or woman, Teiresias said that women did; in a rage, Hera killed him, but Zeus, grateful for his support, restored his life and rewarded him with the gift of prophecy tempered by physical blindness and great longevity (15: p. 195). There are some variations on this legend.

One does not have to look far here to see the typical patriarchal sexual inhibition, the *verbot* and emotional damage associated with the primal scene in the affairs of armored man. The parental authority is rendered as divine prohibition (snakes are frequent remnants of ancient Zeus worship) (16) and retribution (the punishment for witnessing the snakes' act). Teiresias' forbidden knowledge is punished with symbolic castration—all quite typical. In fact, one can see in Teiresias' affair a not-so-distant analogue of the Oedipal situation, complete with

its violation of the incest taboo and the symbolic castration (blindness).

The argument between Zeus and Hera is typical of the neurotic crippling to be found in a sex-inhibited patriarchal culture. Zeus is rationalizing his own sexual and social mastery over Hera; *i.e.* man (the male) is justifying his overturning of the more ancient matriarchy. Rose dismisses this legend as "pure fairy tale" (15: p. 195). Rose unfortunately misses the profound significance of the snakes' coupling and the parental role of the gods, and by so doing does not see the projected fears and anxieties of a culture which would devise such a tale. But the full meaning of Teiresias is not lost upon Sophocles. Indeed, he makes Teiresias dramatically and symbolically crucial to the play's deepest intent.

The interview with Teiresias closes with Teiresias' long and powerful speech where he again relates the truth about the murderer, but in general terms. Teiresias here speaks as seer; his words not only touch upon the past, but describe the future as well (*i.e.*, that the discovered murderer shall go blind in exile from Thebes). He concludes (13: l. 456 ff.) with the horrible description of the unthinkable abomination the murderer shall prove to be:

He shall be proved father and brother both
to his own children in his house; to her
that gave him birth, a son and husband both;
a fellow sower in his father's bed
with that same father he murdered.

It is, as the audience knows and will hear from Oedipus, an almost exact echo of the oracle's prediction that caused Oedipus to flee Corinth; he leaves the stage at this point in silence, where before he had answered each comment of Teiresias. He is profoundly moved. But, too, this speech has a special power. Teiresias dwells upon the repellent dual nature of the incest-committing murderer as "father and brother," "son and husband." He makes conscious not only the incestuous fear (wish) in Oedipus' mind, but its consequences, as well. The bringing of this into consciousness is terribly painful—not just to Oedipus, but also to an audience deeply enmeshed in the Oedipal constellation typical of patriarchal culture (*e.g.*, the Uranos, Kronos, Zeus father-son relationships). Further, Sophocles' sexual metaphor (a "fellow sower in his father's bed") evokes the plague described at the opening of the play and points later to Oedipus' own words after his self-discovery. Knox points out that this agricultural-sexual metaphor is common to Greek literature (14: p. 113); it is also, we feel, further evidence of

Sophocles' linking up of the human tragic condition with the very basis of his cultural life. There may not necessarily be a causal relationship. But, since man has built his culture upon agriculture, many of his deepest experiences, identities, and deities are largely defined and experienced through his agricultural experience.

The subsequent events in the play lead with overwhelming irony to the fulfillment of Teiresias' and the earlier Delphic oracle's prediction. There is a terrible sense of necessity here, but the recovery of the past is impelled by Oedipus' insistence on knowing.

The bitter quarrel between Oedipus and Creon where Oedipus accuses Creon of plotting with Teiresias for the throne and power of Thebes not only dramatizes Oedipus' quickness to anger, but leads to the centrally placed conversation with Jocasta, who tries to resolve the quarrel. In arguing that Teiresias' comments merit little attention, Jocasta utterly dismisses prognostication and cites as evidence the oracle's prediction to Laius. In so doing, she repeats her version of the oracle's prophecy, not in Teiresias' general terms, but specifically. The effect on Oedipus is stunning (13: l. 725 ff.):

O dear Jocasta

as I heard this from you, there comes upon me
a wandering of the soul—I could run mad,

and

What have you designed, O Zeus, to do with me?

The terrible fear that he has indeed slain Laius is what now moves Oedipus, not yet the even more ghastly possibility that Laius was his father and Jocasta his mother. That final truth will come in steps, preceded by moments of elation and self confidence, almost as though he were defending against the reality of his position with every possible means. His great intelligence seeks every possibility of escape, but his courage impels him forward.

The scene with Jocasta introduces several pivotal elements. The first concerns her attitude toward nature and the design of the world. As she dismisses the very validity of prediction (13: l. 706 ff.), she is in effect dismissing the basis of meaning in the universe and is saying there is no design, no intent, no god—all is accident (13: l. 976 ff.). Her position, from Sophocles' point of view, is irreligious (17). The seer can see because he is allowed to know a bit of the mind of God; oracles and predictions are possible only if there is divine order and law. To the ancients, it was only upon order that the possibilities of life's meaning could be based. In other words, if Jocasta is right, human

life has little or no meaning at all and no divine or cosmic dimension. Part of Sophocles' purpose is, then, to demonstrate the ultimate orderliness of the universe.

To be sure, the demand for the kind of order the ancient Greeks and others attributed to the universe, stemmed from an inability to sense organotically the orderliness of life. But even in this armored way, there is a profound respect for the lawfulness of nature, even though it is often distorted and made rigid. Sophocles, in the face of an increasing intellectual relativism in Athens, was making a deeply religious point, as well as an intellectual point, as it finally becomes tragically clear to Oedipus and Jocasta that the oracles indeed spoke the truth. Further, as Freud has pointed out, Jocasta's words thrust forward the patriarchal family's pattern of incest wish. In order to soothe Oedipus' concern over his fear of the oracle she says (13: ll. 976-84):

Why should man fear since chance is all in all
for him and he can clearly foreknow nothing?
Best to live lightly, as one can, unthinkingly.
As to your mother's marriage bed—don't fear it.
Before this, in dreams too, as well as oracles,
many a man has lain with his mother.
But he to whom such things are nothing bears
his life most easily. [Italics added.]

By so saying, Jocasta dismisses both dream and foreknowledge. But Sophocles is focusing upon natural laws; if predictions are true, then dreams are true, too, in their way. It is generally said that to the ancient Greeks, dreams were god-induced states of knowledge; this is one way of saying that dreams have validity. The validity that Sophocles affirms for "many a man . . ." is the prevalence of the wish and its concomitant anxiety about the content of this particular dream. And this point has universal application; it does not end just with the affairs of Oedipus, Jocasta, and Thebes. As the play's significance expands, so does Sophocles' insight into the tragic condition of humanity.

One last point about Jocasta: As female, she comprises a bit of the patriarchy-matriarchy pattern that Sophocles has introduced. She is also a victim of the tragedy, as well. It is the working out of the tragic impasse in this play that has given Jocasta a special significance. In much of Greek myth, the female is the bringer of destruction and disorder. The goddess Aphrodite can be particularly destructive; Helen of Troy, Phedra, Clytemnestra, and many other legendary women under Aphrodite's influence have wrought tremendous damage. The meaning of

this pattern is that in a patriarchal system, the woman is almost always transformed from a beloved giver of life, to an enigmatic giver-taker of life and lover-destroyer of men. It is the transformation of woman from the very ancient (paleolithic) earth mother (Demeter in her Greek version) to the dangerous, unpredictable, unreasoning (passionate), and frequently castrating (*vagina dentata*) unhappy woman of ancient Near Eastern myth and legend (10).

In this rendering, however, Jocasta's role is different. Sophocles treats Jocasta with greater understanding than do some of the other versions of the legend (*e.g.*, Jocasta's seducing Laius to produce a son, Jocasta's witnessing the slaying of Laius and urging it on, etc.) (18: p. 172). Sophocles' perception reads the legend and the human condition at a much deeper level: Jocasta is equally miserable in her state as tragic victim. In fact, when she guesses the truth just before Oedipus does, she realizes that he will persist in his efforts to get at the truth despite her desperate attempts to stop him. Finally, as she is about to leave the scene and go to her suicide by hanging, she says (13: l. 1068 ff.):

O Oedipus, God help you!
God keep you from the knowledge of who you are!

and

O Oedipus, unhappy Oedipus!
that is all I can call you, and the last thing
that I shall ever call you.

She is, in effect, naming her child, whom she at long last has found and recognized. It is a grim variation on the typical form for such scenes. Even as Oedipus is son-husband, she herself is mother-wife, equally loathsome in the sight of man. As woman, her nature has been denied, transformed. As tragic victim, she has been made into a vile, polluting thing. Unwittingly, it was she who laid the basis of the terrible plague described in the opening of the play. She conceived and brought forth misery for the people of Thebes, and blight upon its earth. And her tragedy is the tragedy of all mankind caught up in the ever-recurring cycle of misery and wretchedness. Sophocles does not flinch from his deeper reading of the human condition.

Related directly to this rendering of Jocasta is the role and nature of the Sphinx in this play. We do not see her here, but her presence is felt everywhere. Basically, the Sphinx is female—the head of a woman, body of a lioness, wings of a bird of prey, and the tail of a serpent. She is, one suspects, one version of the projection of the female transformed by neurotic fear. In that she here and elsewhere is portrayed as danger-

ous, vengeful, and death-dealing, she is most likely the figure of the outraged, overthrown, and violated spirit of the matriarchy. Or, to put it another way, she is the more ancient spirit of tribal identity which has been displaced by the structure of the family and its new pattern of identities. This ancient spirit can be seen in Aeschylus' *Oresteia* motivating the avenging furies.

Typically, such figures wreak revenge for the violation of an ancient code. Here, in the Oedipus legend, the Sphinx's role is to levy revenge against the city of Thebes for Laius' rape of Chrysippus. Some argue that Pelop's curse was uttered only because Laius had not asked for Chrysippus in an acceptable way and had violated only decorum in seizing him outright (9: p. 170). Such a view misreads both the function of the myth and most clearly Sophocles' handling of it. The point is, Laius' act is unnatural, perverted. The act itself can only arise in a context of armoring. Healthy functioning, of course, excludes homosexuality and rape and views them with revulsion. What the legend understands is that such an act violates natural laws, despite the frequently adduced evidence of homosexual practice in ancient Athens. The legend is far older than self-conscious Athens. To be sure, this act is an expression of secondary drives with their accompanying anxieties, but the consequences of the act (harassment by the Sphinx) reveal a repudiation of those perverted drives. Further, Sophocles sees the pattern of violation and retribution in a much broader context. The whole function of the play's expansive imagery is to elevate its meaning to a cosmic dimension. These are not local matters. Sophocles is confronting the tragic condition and goes to the core of human functioning.

As was suggested earlier, Sophocles raises questions about the functioning of intellect. We have seen in the contest between Oedipus and Teiresias that there is often a whole dimension of meaning that escapes the attention of man, *i.e.*, God's mind—the laws of natural functioning. In that natural laws have been so terribly violated by "tragic" man (*i.e.*, armored man), one can suppose that the human mind has difficulty even in understanding those laws. Or, rather, despite awareness of nature's laws, man all too frequently violates them, much to his regret. And it is in Oedipus' dealing with the Sphinx that Sophocles reveals the depths of the problem.

Oedipus' taking up the challenge of the Sphinx's riddle is nothing less than Sophocles' symbolic rendering of the confrontation by the patriarchy (reason, balance, Apollo, Athena, intellect) of the matriarchy (passion, impulse, vengefulness, Aphrodite). To be sure, the Sphinx is not pleasant, but she does, after all, represent ancient laws

violated, not followed. Her rage and mayhem are the understandable consequences of patriarchal repression of natural instincts.

The legend stated that the riddle the Sphinx posed was, "What creature is it that walks on four, then two, then three legs?" And the answer is, "Man, as baby, as adult, and as an old man with a cane." Challenged by the Sphinx, Oedipus came up with the answer, drove the Sphinx to her destruction, saved Thebes, became king, and won Jocasta. Apparently, a magnificent triumph. But it was this "triumph" that was Oedipus' undoing. He won only to lose. Had he been less bright, he would have died but been spared the incredible anguish of his catastrophe. Of course, had he been less a man, he would have been unconcerned and unsearching, and would never have left Corinth. But Oedipus was of heroic dimension, and he met the challenge of his life straight on. It was his intellect (note the power and mastery of his inquiry into Laius' death) that elevated him at Thebes, and destroyed him. His intellect was his trap.

Everywhere in the play, Sophocles contrasts what man thinks he knows with what he does not know. It is in the delusion that he can define and determine life itself (Laius and Chrysippus, the patriarchy) or that he has the answer (Oedipus and the Sphinx) that man compounds his own disaster. Sophocles is not deriding intellect; but he is attesting to the consequences of an intellect split off from the context of nature and being. An intellect separated from the lawfulness of nature provokes and intensifies agony. When Oedipus thinks himself the child of Fortune (accident, chance) (13: l. 1080 ff.) or when he prides himself on his intellectual strength (the triumph over the Sphinx) he only demonstrates the degree to which he has failed to reckon with his necessary involvement in the laws of nature. His intellect may triumph over the older ways, but his soul is made utterly wretched.

Sophocles' tragic point is that man has misread the laws which move the universe and which give form to life. It is not that Sophocles is slavishly orthodox here. Actually he isn't. It is that Sophocles argues a much more gigantic context of cosmic law than perhaps even Zeus could have dreamt of.

The final catastrophe falls, destroying Oedipus, completely smashing his trust in his wisdom, and making him the exiled prisoner of his own earlier edict of banishment and excommunication. His self-blinding, a symbolic castration, makes him a type of Teiresias, as yet unenlightened. But he, like Teiresias "saw" too much; he went beyond Teiresias; he enacted the primal scene. (Sophocles, much later, in the very last years of his career, in his early nineties, will have Oedipus

achieve the order of wisdom of a Teiresias in *Oedipus at Colonus*, but that is another story, yet the same.) The transformation of Oedipus is potentially the transformation of all mankind, but it is only the rare hero of great stature who has the strength and courage to pursue the truth, the ultimate truth, of his own being. Even knowing that he might be indeed the fulfillment of the oracle, Oedipus could not do otherwise than continue. This was not a measure of his folly but his greater wisdom. To be sure, his wisdom comes through overwhelming pain, but he would prefer the truth to the security of illusion.

What, then, is Sophocles' view of the human condition as it is detailed in *Oedipus Tyrannus*? Easy answers are suspect here. But, certainly, Sophocles' play not only delineates the extent of the human tragic condition but looks to certain features of the Oedipus legend as a possible explanation. Sophocles' thinking is very bold. Although religious, he is so with a difference; his is not orthodoxy, but reverence for the laws of life, taken in the broadest context. An orthodox thinker would not question at any level the patriarchal structure and definition of reality. This play, we suggest, does question patriarchy through the play's arrangement of the male-female symbolism in the context of nature's laws. Sophocles might not be entirely aware that he is reaching intuitively far back in time even before the emergence and structure of the patriarchal world view. No matter. The imagery and dynamics of the male-female elements of the play are there nonetheless. The point is that Sophocles detects a basic misapprehension in man's definition of reality, not merely that man unceasingly breaks orthodox laws. If it were a matter of the latter issue, we would not have tragedy, but moralism. It is tragedy that links the human condition to the laws of the universe in a chain of necessity, and it is the cultural definition of the laws of the universe that Sophocles is probing.

Needless to say, *Oedipus Tyrannus* raises the most fundamental questions about the meaning and function of culture. Admittedly, Sophocles is conservative in his view and would assume that, since man is caught in a tragic impasse (e.g., Oedipus was already involved; his catastrophe is the discovery of that fact) he must depend upon traditional modes of humility and behavior to preserve some order in his personal and social life. But even then there is no relief from the tragic condition, only a management of it. If, however, one begins to think oneself free of the tragic impasse, that one can "think one's way out of it," that nature and society can be easily altered, the direst consequences will follow. Sophocles is no relativist, as were many of the new breed of thinkers of Sophocles' time. He realizes, in his way, that there is such

a thing as proper functioning which stems from the laws of the universe to which all mankind is bound.

One other point. Freud himself felt that *Oedipus Tyrannus* was a play of destiny, of fate, and that the point of the play was the inevitability of Oedipus' catastrophe, for which he was not responsible. Such a view is attractive. But it is not correct.

Perhaps more than any other Greek tragedy, the gods are rather remote here. Sophocles is placing human actions not so much in the context of the gods' will as in the context of the eternal cosmic law to which even the gods themselves are subject. Many of the crucial events of the play are owing to Oedipus' free actions; e.g., coming to the oracle in the first place, killing Laius, happening by Thebes, marrying Jocasta, deciding to pursue the inquiry, condemning the unknown murderer and blinding himself; Oedipus is in a very real sense responsible for what happens to him. Even though certain actions were done in ignorance, they were done by choice and, as Knox justly points out, Oedipus knows it (14: p. 6). It might appear that Oedipus is not responsible, but there is the plague at the beginning of the play; nature is in revolt against the pollution of Laius' murder. Sophocles knows that it matters little if natural laws are violated in ignorance. In that man violates natural laws, there are consequences simply because they are laws.

In a sense, the emotional consequences of a patriarchal culture are not the "responsibility" of the children who are sickened by them; the children can hardly help getting sick. Yet, in their very structures, nature is grievously distorted; it would be absurd to say otherwise. Armor has its etiology and its consequences. Likewise, despite the ignorance of Oedipus in his acts, there are the consequences for which he is responsible, and he accepts the responsibility; that is why he is a hero. Others would miss the point and attribute their misery only to the gods. Oedipus' misery restores him to the universe, Sophocles is saying. The view Sophocles is propounding, let us remember, is tragic; he is trying to account for the seemingly never-ending pattern of human woe. There is a kind of inevitability in his view, even as there is in Reich's view of character formation (19: pp. 143 ff.).

Finally, while Sophocles could not be definitive about it, intuitively he understood that the tragic impasse had to do somehow with man's (armored) sexual nature and the cultural and intellectual features of the patriarchy. It would be going too far to say that he specifically attributed the origins of the tragic impasse to the emergence of the patriarchy and man's sexual misery. But there can be no question but

that Sophocles had an unerring instinct to fix upon these as being deeply involved. He was, after all, a tragedian, not a scientist. But as a tragedian he saw a pattern, and it is this pattern of meaning that still moves us 2,500 years later, for we are all still involved in the same dynamics that entrapped Oedipus, with the difference that most of us are rather less than Oedipus.

Conclusion

Even as this reading of *Oedipus Tyrannus* opens up deeper questions about the nature and function of our culture, it inevitably touches upon the crucial quarrel between Freud and Reich as to the social origins of the neuroses and the Oedipus complex and the function of culture. As Freud grew older, he came to feel that man was fated only to unhappiness and that the survival of civilization required and justified renunciation of instinctual drives. By the time this thesis was presented in *Civilization and its Discontents*, Freud had also propounded the theory of the death instinct, so far had he come from his earlier hopes of resolving neurosis through psychoanalysis. As Reich pointed out, the disappointment of that hope was tremendous (20: pp. 41 ff.). The sharp differences between Freud and Reich on culture (5: pp. 141-55) are, in effect, the result of Freud's asserting that destructive drives are primary, thus necessitating a culture of repression and sublimation of unresolved psychic conflict (5: p. 155). But, as Reich demonstrated clinically, and as Malinowski discovered among the Trobrianders (5: pp. 175 ff.), the kind of neurotic functioning which Freud had assumed to be universal proved to be a cultural artifact. With this great discovery, the function of culture became clearer, so that one could understand why it is our culture is at one and the same time an instrument of repression and a control of the results of that repression. This inherently paradoxical state of affairs proved to be itself an aspect of armored existence with its elaborately developed pattern of defense and counter defense.

In a very moving and exciting passage of his excellent *Oedipus and Akhnaton*, Velikovsky discusses the curious shift Freud made from his earlier view of religion in *The Future of an Illusion* to that of the very late *Moses and Monotheism*, written in his late seventies. Velikovsky gives us this further information:

When Freud approached Akhnaton he left behind all his experience and all his analytical tools. In analysis this is called repression. That there was

something in the person of Akhnaton and in his acts which deeply affected Freud can be learned from an incident, described by Jones, which occurred in September 1913 in Munich. During a "discussion of Abraham's essay on Amenhotep, in which Abraham traced the Egyptian King's revolution to deep hostility against his father, Jung protested that too much was made of Amenhotep's erasing of his father's name and inscriptions wherever they occurred; *any such death wishes were unimportant in comparison with the great deed of establishing monotheism.*" [Italics added.] Freud, who was discussing with Jung Abraham's recently published paper, suddenly fainted and fell on the floor unconscious. This episode should be recalled in considering Freud's repression of his entire psychoanalytical knowledge when he dealt with Akhnaton twenty-five years later.

Was Freud on the verge of some deep insight and, because of that, "blocked" as are analytical patients before an important truth reveals itself to them? I cannot dwell further here on Freud's intents and hidden motives, but I could not finish this study of the historical Oedipus and pass over in silence the man who elevated him to the greatest kingdom, the unconscious mind of all men (21: p. 202).

One is tempted to agree with Velikovsky that Freud began to see something quite overwhelming. Perhaps the tremendous implications and significance not only of monotheism, but, especially in Freud's case, of patriarchal religion began to emerge. The fainting might well have been Freud's confronting his own patricidal wishes, though he had after all been over that ground before. But, even so, the issue of monotheism, death wish, and patriarchal repression are all bound up together in the oedipal constellation. So, could it be that Freud for a brief moment anticipated what Reich was to argue more than a decade later and found the notion unacceptable? It is possible. But clearly we can see that Reich's clinical discoveries and theoretical formulations were proposed to someone who had at least begun to shudder at the problem. It may be that this is the seedbed of the rift between Reich and Freud, as the younger colleague began to discover and demonstrate the correctness of his teacher's earlier theoretical formulations, and to insist upon drawing from them the only satisfactory scientific conclusions about our culture as medium and instrument of sexual repression. Perhaps, Freud felt that, if Reich were right, then too many of the apparent glories of culture would have to be reexamined and surrendered as the secondary instruments of a socially generated system of neurosis, defense, and rationalization. Certainly, it was an inability of some sort to let go so many of the familiar categories of our culture that held even Freud within the trap. That in no way, however, can detract from

Freud's own tremendous courage in seeing what he did see. It is fortunate that Freud had Reich as a pupil who did him the very greatest honor by trusting his earlier discoveries and having the courage to follow them to their inescapable conclusions, though he himself did not, could not, recognize the honor.

Only by comprehending Freud's great discoveries and Reich's even greater discoveries stemming from them can we completely understand what Sophocles had intuitively grasped twenty five centuries before. Sophocles' insights are indeed staggering; he must have felt terribly alone in his knowledge of the human tragedy. But such aloneness itself, as Oedipus came to learn in *Oedipus at Colonus*, restores us to the rhythm of the cosmos.

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Personal Experience With Oranur

By JEROME EDEN, M.A.*

Society tends more and more toward the mechanization of all existence. Machines are a great blessing, as anyone who has used both axe and chainsaw to cut cordwood will attest. However, since the power used to run our machines is *secondary* energy—that is, energy derived from the primary orgone ocean—and since many sources of secondary energy irritate and are antagonistic to orgone energy, mechanistic society rides precariously between the horns of a dilemma. On the one hand, society requires more power and machines to meet its spiralling growth, while, on the other hand, continued and increasing use of secondary energy (*e.g.*, high-voltage electricity, nuclear energy, X rays) irritates the life energy and drives it into higher states of activity which are inimical and even deadly to the living organisms upon this planet.

Over the years, I have come to realize how important my orgonotic sense is for personal survival. My keener “survival instinct” is undoubtedly the result of having undergone psychiatric orgone therapy, plus nearly two decades of using an orgone energy accumulator.

The increase of oranur in our environment makes it mandatory for an individual to learn to trust his *subjective* impressions, especially where OR functions are involved. It occurred to me that a recounting of some personal experiences with oranur-contaminated atmospheres would be of benefit to others who might tend to doubt the validity of their own orgonotic sense.

The first incident deals with an oranur atmosphere engendered by high-voltage electricity. I was working as a sales engineer for a large company that manufactured laboratory equipment, which I demon-

*Writer and homesteader.

strated and serviced. The equipment included a microslide projector which used a mercury-vapor light source. The lighting of this lamp required high-voltage electricity, and the lamp is rich in ultraviolet light, an additional irritant to OR.

Whenever I worked in the vicinity of this projector, I invariably developed pounding headaches that circled my head at the ocular segment. Prolonged, soaking, lukewarm baths, and crying relieved the pressure. It did not take me long to recognize the connection between the headaches and the projector. However, I could not avoid contact with this machine, which I demonstrated regularly. While I was demonstrating the machine for physicians in poorly ventilated rooms, a few of the viewers fell asleep; others appeared lethargic. Instead of developing a tolerance for the projector (*i.e.*, for the oranur atmosphere it triggered), I became increasingly sensitive to its influence. Eventually, I left this job in search of other employment.

X Rays

I obtained a job with a midtown Manhattan importer of wild animals. I had discussed my inability to tolerate fluorescent lights with my boss, and he kindly agreed to replace those in my work area with incandescent fixtures. By this time, I was accustomed to my reactions to the irritating atmosphere of fluorescently lit spaces. They made me extremely uncomfortable, and the longer I remained in them, the greater was the discomfort. My body grew cold, especially my hands and feet. I felt a constant need for oxygen, became very thirsty, and often noticed mottling of the palms. It made little difference whether I worked directly under the fluorescent fixtures or was merely in their presence, as the oranur atmosphere pervaded the whole area—although the closer I was to them, the greater the immediate effect. Nevertheless, if I could work near an open window and was able to drink much water and lukewarm tea (as Reich recommended), and if I could bathe my hands, face, and the back of my neck several times daily in cold water, I could function to some degree. However, my ability to work was always sharply reduced in such atmospheres. I became increasingly irritated or dulled and found myself unable to do anything but rest at the end of the day.

But to return to my job with the Manhattan importer: It lasted exactly four days. In addition to the reactions described above, I found myself extremely anxious in the office and unable to think—as if I were being constantly “short-circuited.” My reactions swung widely from deep contractions with accompanying cold sweats, to severe, irrational

anger at my employer. I could not understand my behavior. The situation did not appear to warrant such reactions; and, being at a loss to explain them, I began to doubt my senses. My wife, however, pointed out the pallor of my skin and the black circles under my eyes. She suggested that I quit the job immediately. Our financial situation, however, was not good, so I continued a second day, and then a third.

There was no denying my subjective sensations of severe anxiety, prolonged thirst, need for oxygen, and inability to function. I knew I was in a severe oranur atmosphere, but I couldn't pinpoint the source. The fourth morning, I reported for work earlier than usual and examined the office carefully. Besides a few fluorescent fixtures and the usual metal file cabinets, I could locate no unusual triggering irritant to explain the immediate and overpowering discomfort I felt. At lunchtime I went into the street to air out. Returning to my office, I "accidentally" got off the elevator at the floor *below* my own. As I glanced around at the unfamiliar offices and workshops, the answer literally hit me: The entire floor beneath my office was occupied by a manufacturer of X-ray machines. I quit my job immediately.

The next incident was even more baffling. My wife and I had moved about ninety miles out of New York City and were managing a summer resort in the country. To supplement our income, I took a job as a surveyor's apprentice with a professional engineer. I enjoyed the work. My time was divided almost equally between field work in the woods and office work at the drafting table. My employer was a straight-forward, considerate man, and we liked each other. I told him I could not tolerate fluorescent lights, and he replaced the ones over my work area with incandescent fixtures. Nevertheless, my subjective reactions of acute, immediate, and continuous discomfort were undeniably strong in the office.

Each time I went into the woods and worked in the open air, I felt fine, alive, and vigorous. But whenever I entered the office, I was smitten with deep anxiety, hot and cold flashes, and a constant feeling of harassment, which I can only describe as "*being rayed*!" By this time, I could almost smell oranur. But where? Again, I was thoroughly familiar with the "usual" irritating atmosphere of stuffy offices and fluorescent lights. Such an atmosphere was bad enough; however, the surveyor's office was ten to twenty times more oppressive. I drank quarts of water plus a thermos of coffee each morning. My face flamed with an inner heat. I felt stupid, thick, foggy, or bursting with anger or unaccountable giddiness. On any pretext, I ran out of the office to get fresh air, or I bathed my hands and face in cold water. And whenever I was

alone in the office, I searched for the source of my "antagonist," but to no avail.

I held on to my job for three months. Again it was a matter of financial need. Also, where could one get another opportunity to learn surveying at first hand? And where could one work in this society without oranur? I would "be tough." I would "harden myself." Each evening, I looked forward to a prolonged, soaking tub.

But I found no immunity. As the days wore on, I felt weaker. The many hours spent in the open air gave me the strength to continue. At last I felt I must again quit my job. It was a depressing decision, especially since I could not find the reason for my alarming subjective impressions.

Determined to search one more time, I drove to the survey office on my day off. The office itself (actually a suite of rooms) was in a large motel-hotel complex. In the hotel office, I asked the desk clerk if he knew who occupied the rooms immediately adjacent to the survey office. (I don't know why this question had not occurred to me before.) The clerk replied that the adjoining office was vacant. I persisted. I wanted to know who was the last occupant of that office. He referred to his records and then gave me my answer: For several years, the office next to mine had been occupied by a *radiological laboratory*! The other side of my office wall was the location of the X-ray room, which had been lined completely, walls and ceiling, with lead.

I did my best to explain to my employer why I had to leave the job. That good man kindly advised me to place myself in the hands of a competent psychiatrist.

These experiences taught me very valuable lessons—especially since I was forced to continue to live and work in New York City. My next job found me working on a technical journal in midtown Manhattan. Fortunately, my employer saw fit to equip my private office with incandescent fixtures. The remainder of the office space on our floor, however, was fluorescently lit. I had, at last, my own office with two windows. Unfortunately, by now the entire New York City atmosphere had become intolerable to me, with its fluorescently lit subways, metal structures, smog, automobile fumes, and high-voltage equipment everywhere. On several occasions in my company's library, I noticed the OR energy as sharply moving white *units*, like exceptionally fine dust, darting in a downward direction.

Another inescapable irritant was television. My orgone energy accumulator always became extremely oppressive if placed as close as thirty feet from a TV set located in another room. On many occasions while

visiting someone who had a TV set in operation; I found the atmosphere was so unbearable I would have to leave. My reactions were similar to those felt while demonstrating the microslide projector, though not as intense.

Despite the fact that my private office contained incandescent lights, the prevalence of oranur was a constant irritant. Several of my co-workers remarked how "soft" or "different" was the atmosphere in my office. Many of them said they didn't like it, and I had fewer and fewer visitors.

One by one, I collected twelve plants to give me something green and alive to look at, and they seemed to soften the charge. An electric fan placed in an open window and blowing air into the room was a big help. On dry days, I turned on a humidifier, obtainable at any drugstore and commonly used as a vaporizer.

At about the same time that I obtained this job, my wife and I moved to an apartment in a new midtown building built over the Seventh Avenue subway. The apartment was on the second floor. When we moved in, I left my orgone energy accumulator disassembled and protected by a canvas cover on our open terrace. Later, I assembled the accumulator, and, after three days, the apartment was "jumping" with oranur. But why?

As I sat in my livingroom, I heard again the sound of a subway train rumbling past us, *two stories below*. The building shook slightly. On impulse, I got out my magnetic compass and waited for the next train to pass. As the train passed unseen beneath me, *the compass needle was deflected 45 degrees!* I was certain that the high voltage of the subway system, plus the metal in the building all interacted with the accumulator to produce the oranur effect. (Human beings, of course, are *living* accumulators.)

I disassembled the accumulator and replaced it on the terrace. The heavily charged atmosphere persisted, and, fearing the accumulator had become permanently contaminated, I dismantled it completely and had all the parts removed. Despite washing down of the walls and floor with water and frequent airing out of the apartment, the oranur atmosphere persisted for several months.

Nuclear Radiation

My wife and I decided to try our luck in the Alaskan wilderness (for the second time); and once more we moved near the south-central seacoast town of Valdez, Alaska. That summer, we took a trip into the Alaskan interior to visit friends. On the return trip, we

decided to rest on an open clearing off the Richardson Highway at approximately Mile 246. We had been driving all night and needed a few hours of rest.

I parked the car off the highway on the gravel clearing and spread out our sleeping bags on the ground. It was about 6:30 in the morning of a mild summer day. I remember admiring the unusually large, billowing clouds sailing dramatically overhead. Directly behind us, about a quarter-mile distant, was a single dome-shaped mountain.

We got into our sleeping bags and tried to sleep. But the sun seemed too hot; the mosquitoes too numerous. Suddenly I found myself unaccountably thirsty. My strong thirst was peculiar, because we had eaten breakfast only an hour before and had consumed several cups of coffee and drained our canteen of water.

We decided to outwit the mosquitoes and sunlight by pitching our lightweight tent. In a few moments, my wife and our German shepherd friend, "Sergeant," were in deep sleep inside. But sleep eluded me. My thirst was becoming an obsession, and I had to sit hard on my nerves to keep from flying into a panic. Was I crazy?

I lay on my sleeping bag and felt a deep and continuous vibration shuddering through my body. When I closed my eyes, bright red and purplish blotches pulsated in my inner vision. My pulse was racing. I broke out into a cold sweat—despite the heat—and it was all I could do to keep from "flying apart." The sight of my wife and dog asleep, however, reassured me somewhat, and this plus my tiredness overcame my survival instinct.

I do not know how long I slept, perhaps thirty minutes. I found myself sitting up, gasping for air, my body parched, my tongue swollen dry. I was *dying of dehydration!* My heart pounded in my chest. The engine-like throbbing of my body had increased to such a degree that I was almost helpless. Every bit of energy I possessed was screaming at me "*to flee!*"

I shook my wife awake and told her we had to leave immediately. She acted drugged and looked very pale. Sergeant appeared to have aged in front of my eyes. His head hung down. His eyes looked glassy. I found it difficult to coordinate my movements and had to tell myself to put on first one shoe, then the other. Don't bother to pack anything (I told myself), just throw everything into the car and drive! Get away! Get fresh air, water! Hurry! I was in the throes of the deepest death anxiety I had ever experienced.

In a few moments, we were on the highway again. The fresh air helped immediately. By the time we had reached the next roadhouse,

I had calmed down considerably, though the terrible thirst persisted. Both my wife and dog were sound asleep on the front seat. I filled our canteen, and all three of us drank freely. Then we washed with a soaked towel, and later repeated the washing at a roadside stream. We felt much better.

It wasn't until several days later that I found the answer to this frightening event. A few friends came to visit us at our cabin. I asked them if they knew of any government nuclear projects where we had camped. Of course they did, they informed us. Everyone knew of the "Donnelly Dome Area" (that dome-shaped mountain I had seen). That was a government nuclear installation and underground atomic stock pile. The entire area is honeycombed with underground structures containing nuclear devices. Of course, my friends reassured us, they had seen the whole project on television and it was all "quite safe."

In March, 1967, we moved to southeastern Idaho where I found work as city and military editor on a newspaper. Slowly, we rebuilt our finances, bought a home, and established ourselves in the community. We knew that the National Reactor Testing Station (NRTS) was located some forty miles west of us in the desert. However, friends repeatedly assured us that everything was, as usual, "quite safe," and that there was no danger from radioactive pollution.

We lived there for three years. To us, the oranur atmosphere was overpowering. As the months passed, we grew progressively weaker, and so, too, did our accumulator blankets. My wife, who never before had a blemish on her face, broke out with a fiery red skin rash. Our dog, Sergeant, developed a fungus-like infection on his ears, which five veterinarians could not diagnose. The disease began with the loss of hair on his ears and the appearance of a whitish "powdery" substance. We watched, helpless and heartsick, as the tips of his ears slowly dried and disintegrated. This, despite the application of eighteen different kinds of medication, used after OR accumulating devices proved ineffective.

In order to *move* each morning, I began taking cold baths. Some days, I would take a second cold bath on my lunch hour. Inquiries among friends and acquaintances revealed that almost everyone was sick or had a sick member in his family. Many complained of "chronic flu" symptoms. My wife became so weak that she had to remain in bed for long intervals. We slept with the windows wide open—even in winter—and often used a window fan for additional fresh air.

Desperate, we began fleeing into mountain and timber country at

every opportunity. The longer we remained away from the area, the stronger we felt, and my wife's skin rash would begin to subside. During our final six months there, I began a campaign to find out why our area felt so heavily oranurized. Letters to our congressional delegation, to the news media, and to Idaho's governor evoked some interesting information. The NRTS area was being used as a dumping ground for millions of gallons of nuclear waste material. The material was being dumped above the Snake River Aquifer, one of the largest underground bodies of water in the entire West. The NRTS noted that the alpha radiation over our city was thirty-four per cent higher than it was over the NRTS site. No rational explanation was ever given for this discrepancy. (The city is east of the NRTS, and the prevailing winds are from west to east.)

On invitation from Idaho Senator Len Jordan, I submitted to the Joint Congressional Committee on Atomic Energy documentary evidence detailing the hazards of radioactive pollution of the earth. The state's governor appointed a special commission to investigate possible hazards to southeastern Idaho.

There were personal retaliations in the form of vague threats to run me out of town. In typical emotional plague fashion, economic pressure was brought to bear on me. I sent hundreds of letters locally and state-wide, made statements on TV and radio, and paid for a display ad in the newspaper in an attempt to arouse the citizenry to act in their own self-interest. The overall reaction was the thunderous stillness of the desert.

Thus we were forced to move again. Still, even now, we have not been able to escape the increasing oranur and DOR atmosphere. The sad fact is that there is no spot left on this planet that is not polluted to some degree. ARM (armored man) has just about destroyed his basic planetary resources: the air, the water, the land; and he is, for the most part, totally unaware of the cosmic orgone energy that is the foundation of all life.

We are now living on a twelve-acre homestead in northern Idaho. It is probably one of the last remaining truly natural areas on our continent. Sergeant is here with us. He died four days after we moved into our new home. He got us here safely and then he just couldn't move anymore. We buried him at the edge of our clearing.



Courtesy of Kari Berggrav

**Reich at Nesowdden, Norway, summer of 1936, with Kari Berggrav
and unidentified German woman (left).**

Further Remarks of Reich: Summer and Autumn, 1948

By MYRON R. SHARAF, Ph.D.*

Editorial Note

These remarks were recorded by Dr. Sharaf at Orgonon and at Forest Hills, New York, where he studied under Reich. The first five sections of his notes were published in the last five issues of this journal, the first section (Vol. 2, No. 2) containing a description of the context within which these remarks occurred.

July 2: WR [Wilhelm Reich] was making plans for the First International Orgonomic Conference, to be held in August. He had scheduled only one afternoon for non-working wives of participants to visit the laboratory and tour the grounds of Orgonon. Otherwise, meetings were to be limited strictly to workers in the field. WR: "I'm dead set against wives who don't work. They are a nuisance. I've had all kinds of trouble with them. We are not married to the wives."

* * * *

Apropos of a letter that was to be sent out to help raise money for the planned Orgone Energy Observatory, WR asked somewhat facetiously, "Shall we show the letter to the Board of Directors of the Foundation [The Wilhelm Reich Foundation], or shall we be dictatorial and just send it out?"

There was some question about the amount of scientific information to be included in the fund-raising letter. WR: "I don't know if we should send it out with so much information. This stuff gets picked up, and then you never can tell what happens to it." I mentioned that some of the facts had already been mentioned at a seminar given by X, a student of orgonomy. WR became rather angry: "X did something that

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was very wrong and that I never could stop him from doing. He talked too much. He told about things before I had published them. There are some things in science one just doesn't do, and one of them is talk about things before they are published. I am not an anarchist, you know. Freedom *and* order; discipline *within* freedom."

* * * *

WR to a student: "How long is your working going to last?"

The student replied, "Don't worry about that."

WR: "But I *do* worry about it. This is very deep stuff. Once you get into it, you can't get out very easily unless you turn against it and start throwing mud at me."

A student to WR: "This work is very hard. You have to give up so much."

Reich looked at the student in a deep, strict way: "There! You have discovered something important. People think research is something you just sit down and do—without sweat, without giving things up."

WR to a student: "How do you like this kind of work? It's different than what you thought, isn't it? People come and are thrown by the way we work here. They think there is some genius here who sits around, sucks his thumb, and has ideas. There is no such genius. We don't have ideas here; we work, just plain work."

* * * *

July 9: WR: "I'm going to do my own translating [from German into English] from now on. I don't want to be dependent on any translators." And regarding the style (in German) of *The Mass Psychology of Fascism*: "It was written badly—not badly, but in the German academic style. I want to write more simply now."

In translating an article of WR's, I suggested to him that more background material, published in earlier writings, be summarized in the current article to help make matters clearer for the reader. WR replied: "No! You had to study a long time to be able to understand this paper. Let the readers study, too. I am not writing *for* anybody; I am writing *about things*. That is a typical socialist attitude you have—to help the reader.' Wrong! It has been tried for twenty centuries and it has gotten nowhere."

* * * *

"I was looking over something I wrote in 1921, and I saw that I was already then applying functional methodology without knowing it. It was only in 1933, when I looked back to find out how I had discovered what I had, that I saw the methodology I had been using. But at that time, I only applied it to a very narrow realm, to the instincts. Now it

can be applied quite generally, but it cannot be applied mechanically.”

A student mentioned to WR what a help the functional method of thinking was to him. WR replied, “Yes, it is quite a breakthrough. I know how it is for myself to use it. I would like to know how it is for someone else. It is too much for me; it is too much for any one person.”

* * * *

WR to secretary: “‘Openable’ windows—can I say that?”

Secretary: “You can’t say that.”

WR: “*You* can’t say it. *I* can.”

* * * *

WR: “The toughest part of this work is that you can’t direct it: you have to let it lead you.”

* * * *

“One of the hardest parts of working with this stuff [orgone energy] is that it is constantly shifting with atmospheric conditions. You can’t hold it and come back to it the next day.”

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WR, about some laboratory phenomenon: “What a beauty! Isn’t it a beauty?”

* * * *

August 24: This morning I asked WR about the relationship between dialectical materialism and orgonomic functionalism. WR: “I kept trying to put *my* ideas into *their* framework. It was the little man in me. These things weren’t there themselves in Freud or Marx. I was too loyal. But it was good I was that way. I immersed myself thoroughly in their theories before proclaiming my own. But it wasn’t just loyalty. I told Hoppe [Walter Hoppe, M.D., an Israeli orgonomist] that the reason I stuck to Freud so long was not just out of loyalty, but because I feared the responsibility for what I had discovered.”

* * * *

A student had lent WR Philip Frank’s book *The Foundation of Physics*. He commented on it: “It is quite terrible—many of the things in that book. They don’t do anything, and then they write and write about how they should begin to do things. First you should do a thing; then look back on *how* you did it. Reading something like that makes you feel the tremendous responsibility we have.”

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Apropos his early articles—in the 1920s—on childhood masturbation: “The big thing was that the psychoanalysts did not affirm masturbation, they only tolerated it.” I asked him about a sentence from his early writings to the effect that “masturbation can sometimes have good

results and sometimes bad," and he went on to explain that at that time there was no distinction between primary and secondary drives and that hence there was no answer to those who asked: "What about the children who masturbate continually?"; there was no distinction then to show that the children who masturbated compulsively were sick.

* * * *

I asked him what one should answer those who said that during the 1930s his work had the fault of being "too political," e.g., his belief that only under socialism could one raise healthy people. WR: "Just say that I was wrong. I tried to stay within the political framework. It was only when the Socialists and Communists began to attack me that I asked myself how it was possible that these people who said they wanted a revolution were afraid of changing the most essential and elementary things. I was always confronted with this irrationalism. I stayed in the psychoanalytic movement ten years longer than I should have and in the Marxist movement six years longer. Already in 1930, though, I told the doctors in the Sexpol movement that the sexual suppression was deeper than the economic suppression. The Marxists couldn't stand that. The Marxists accepted me as long as I placed the orgasm theory secondary to the economic and social factors, and the psychologists accepted me as long as I kept the orgasm theory within psychoanalytic formulations on sexuality. But the orgasm theory was wider, outside them both. I kept trying to stay within their frameworks. You had to work with other people. Intellectually, I knew how the people were—I lived and worked with them; but, at the same time, I worked as a Socialist, as a Communist, thinking that these people could bring about a revolution, could have real democracy. I was two people—one a researcher and the other a member of the Socialist Party or the psychoanalytic movement. When I discovered the bions, I acted like a real democrat. I called in the politicians, social workers, etc., and had a discussion about the bions. What a mess! Their talk was completely empty, and I asked myself: 'How are these people going to build a new world?'

"But at that time I knew only the energy in the bions. I knew nothing about the orgone in the atmosphere, et cetera. And they, from their comfortable positions, kept attacking me. I knew then *intellectually* that I was *outside*, but I didn't know it emotionally until 1945 when I wrote *Listen, Little Man!* Up until then, I had had a great faith in the little man, I wanted to work through him, I saw the living in him; but after that, I didn't let him touch me, affect me. In the old days everything was very simple. If a young man had a girl, then that was good. If he didn't, then it was bad. It was so simple, I didn't know why others

hadn't thought of it. But then why didn't they accept what I said? Only later did I realize that they were partially right. Supposing everyone had followed me? There would have been a *terrible mess*.

"Every word in *Character Analysis* is still correct today. But scientific thinking at that time was ruled by the idea that *here* was research on the pathological character structure and *there* was the world. I connected the two in the introduction to *Character Analysis*, but I behaved as though I didn't know it. I was still active in politics. It was only afterward, when I saw that politics itself was irrational, that I broke through.

"When I first came into contact with the vegetative streamings, around 1930, I was confused like everybody else who experiences them. For a while, I wondered whether I was crazy or the world. Intellectually, I knew what I was doing, but this was 'outside.' I was confused—'is it me or them?'—like every schizophrenic. In puberty things break through and everything is clear—both the outer world and within oneself. But the structure of the schizophrenic is not able to take it. The same thing would have happened to me if I were not so healthy. You see things clearly and then everybody tells you you are mad. If my sexual life were not in order, it would have gotten me. The difference between the neurotic and the psychotic is that the neurotic closes in on himself, whereas the schizophrenic is completely open.

"I had to keep myself outside. I had to break with two families and three organizations.

"When they say my work is crazy, that has meaning, too. This work deals with the stuff that makes people crazy. It breaks through, and they can't take it."

* * * *

"One of the main things is that you can't do anything if you do not remain a simple human being. That is why I had so much trouble with my coworkers. They want a 'great man'; they need somebody to hook onto. They expect—I don't know what—a man with a beard. They are so surprised when I am so simple."

* * * *

"The majority always accepted my views. Why then could a few pests [emotional plague persons] always stir them up? That was always a problem. But we know now that people have guilty feelings over the health in themselves; they fear it in themselves and in me, and that is why they can be stirred up."

* * * *

To me: "You are too fast in coming to conclusions. Much too fast.

Just observe and let the conclusions come out of the observations."

"Sometimes I think people will steal my findings, but that is petty. They cannot steal any of these things."

* * * *

"It has already become clear, and it will become clearer and clearer, that the old ways of thinking have ended. Then people will start coming to us and trying to get something."

* * * *

To me in therapy: "Somewhere between your surface seriousness and your deep seriousness is a layer of 'funniness' where you don't take other people seriously, where you laugh at them. There is something in you that is 'funny'; it is not in me, it is in you."

* * * *

September 3: The following are remarks made by WR during the First International Orgonomic Conference which was held between August 30 and September 3, 1948. About thirty-five persons attended, including Walter Hoppe from Israel, Ola Raknes from Norway, and A. S. Neill from England. Most of the remarks quoted below were made by WR in one or another context, *e.g.*, during a discussion following the presentation of a paper at the conference.

"It is hard to stay clean. You have to break with organizations, with families, and all that is very hard. I know; I lost two daughters that way. And you can't become Christ-like; you have to remain human."

* * * *

"[Theodore] Wolfe and I spent night after night—cleaning, cleaning, cleaning." [The term "cleaning" was one of WR's shorthand terms for a complex process: It meant making language, concepts, experiments, administrative procedures—indeed, anything involved with the work—more rational, more precise, more simple, sharper. It also meant eliminating from orgonomy derivatives from other ways of thinking that were not appropriate or gave a wrong twist to orgonomic findings and methodology.]

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"When a person comes into a laboratory and sees a way of doing something better, more efficiently, and tells me about it, I love that. But when he comes in without knowing anything about the work, without realizing what all this is about, without realizing or even allowing for the possibility that it destroys the foundation of all the old thinking in science, when he comes in and just says 'air germs,' then I feel like throwing him out."

"I am glad to hear that there were the same irrational reactions to

Dr. Hoppe's work with the orgone accumulator in Israel as there were to my work here. That shows these reactions are not due to my own personality, to my so-called 'aggressiveness,' 'tactlessness,' etc."

* * * *

"We constantly simplify, clean. First we got the reaction at the Geiger-Müller counter. Then, over the course of a year's work, we arrived at the motor. It was a constant process of throwing out, throwing out. Others would have complicated things more and more—more voltage, 200 volts, 300 volts.

"They exclude the simple right from the start. They have the phenomena of background count at the Geiger-Müller Counter. And right away they exclude it, push it out. It is the same with the atmospheric orgone. Immediately, they exclude it, push it out."

* * * *

"Whenever an organization is formed, it becomes more important than the work. All people do is talk about it—the organization—rather than the work. If it should ever come to that in this field, then I would not go along with it, you could count me out."

* * * *

WR frequently spoke of how people would observe one or another organomic experiment and then comment in a contactless way: "Very interesting."

"If I have to keep hearing 'very interesting,' then I will withdraw from people and occupy myself only with natural science."

* * * *

"If you understand two things, the fear of knowing orgone energy and the fear of knowing what it is really like to be a child, then you have penetrated to two of the greatest secrets of all."

* * * *

September 6: "The books [WR's] are not planned mechanically. That is why they last so long. Because there is not a mechanical plan."

* * * *

In therapy: "What was the matter with you yesterday? I didn't like you at all yesterday. There was something alien about you. You were jumping around and asking stupid questions.

"Talk with your chest down . . . have your hands like little snakes over your legs . . . and breathe . . . and move your legs. You either move your legs and your hands, and don't breathe, or vice versa." [Perhaps the patient's bodily position in psychiatric orgone therapy should be clarified. In the above situation, the patient was lying on his back on a couch, and with the knees raised and the heels touching the couch. By

'moving the legs' WR meant letting the knees swing back and forth horizontally. This kind of movement, combined with other orgone-therapeutic steps such as breathing fully, tended to encourage a tremor in the legs and a general softening of the armor in the lower part of the body.]

"You have a crooked smile. There is fear in your eyes."

"Look out for your urgency. It is always a sign of your fear before getting to the real thing."

"Do you feel that I am pinning you down?" [This referred to my work in orgonomy.]

"Feel your legs—inside of them, down them. Discover yourself. Move your fingers, too. Move them very slowly. And keep breathing. It is either one or the other with you. There in your legs you are a good citizen, you are safe.

"Your urgency is just a runaway. Just remain at your mother's breast."

"You won't be able to love a woman's body until you first learn to love your own body."

* * * *

A later therapeutic session: [At the time of these notes, I was a senior in college and debating whether I should go to medical school. I asked WR what he thought.] He shook his head violently: "No, you will make \$2,000 a month and then you will stop doing all work."

"There is something crooked about you. If this thing took over, you could easily be nothing." [I am including these characterological remarks of WR not because I am proud of what he had to say about me or out of masochism, but because I think it is important to demonstrate concretely how WR constantly worked with the character and the body in an extremely unified manner. Today, many approaches which emphasize bodily reactions do not keep the major character traits constantly in focus. If they do emphasize psychological factors, it is often in a somewhat random fashion, seeking for this or that traumatic earlier event, but not keeping characterological and biophysical identities in mind as guiding "red threads" to the treatment of the case.]

When I first began to feel the streamings in my legs, he said: "You have a dirty smile now. That is quite logical."

"Many rich people have come to us, and then they don't give a cent. And the worst part of it is you can't even hate them because that would be mean, and [sarcastically] *one mustn't be mean.*"

* * * *

September 10: I asked WR a question about the functioning of the motor, and he answered: "You want to know everything. . . . I don't

mind telling you—I trust you. But you should know that in another laboratory you could not get such questions answered. You can only know the little part you are doing. You don't see the whole. But I could not behave that way. I have to trust the people I am working with, I have to depend on their honesty. Otherwise I cannot work. Then they try to break my neck, but they only succeed in breaking their own."

* * * *

A new motor was constructed. Initially it did not work as well as the old one. WR said: "It needs time to soak [in an orgone-charged atmosphere]. We must always try to understand these things in terms of the emotions and emotional functioning."

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"In the beginning of my career, I was naive, I loved to give to the next fellow, to heal. And I was called a 'sucker.' What does that mean—to be a sucker? It is to be the one who sucks. And the fellow who sucks calls the other fellow a sucker."

* * * *

"Perhaps the human organism functions in the same way as the motor, with a buildup of energy and then a discharge. That may be what sleep is needed for, a buildup of energy."

* * * *

Regarding the functioning of a particular setup for the measurement of orgone energy: "Until you have really mastered all the individual details, you really do not know it, you haven't actually got it. . . . It's like marriage: First you get into it, and then you realize what it is all about. And until you realize it, you are not really married, in spite of the license."

* * * *

WR commented on the petering out of the response to the letter requesting contributions for the construction of the Orgone Energy Observatory: "That's humanity's 'very interesting.'"

* * * *

"Sometimes one wishes it [the number of orgonomic findings] weren't so much, that it didn't keep coming."

* * * *

September 11: On observing the construction of the observatory (much of the observatory is built of rock): "You see, I meant what I said when I wrote: 'Build your life on rock.'"

* * * *

When he heard from someone that Nic Waal, M.D. (a Norwegian psychiatrist now deceased, who was a student and colleague of Reich's

for many years) had met many unpleasant experiences at the Menninger Clinic where she spent a fellowship period of study in 1948: "I hope you will understand when I say that I think the experience will do her good. She always thought she could somehow reconcile them with us. She did not realize that it is either-or."

* * * *

Apropos an article on solar radiation which an orgone therapist showed to WR: "No, we cannot use that. It grows out of the old ways of thinking. We have to start afresh. And then later we can hook on with their results."

* * * *

September 13: In therapy: "Look out for X [a relative I was close to]. She is very rich in knowledge, but somewhere she is empty, she is structurally empty. She can become very dangerous. Look out for her influence on you."

* * * *

"How is your marriage coming along? Build it up properly. Don't sit on her. Let her go her own way, let her develop in her own way."

"Please, would you talk with your chest *down*."

"Let your legs swing freely back and forth. Find the place where the tremor sets in and then let it happen. There is so much noise that nobody hears what I am saying—that what you should experience as pleasure you experience as something else."

"'I want, I want.' Stop saying that! Let it come. Stop wanting it so much. Stop huffing and puffing so much. Don't make it such a task."

"Why is your pelvis so inert? Why are your hands so still? Let it live down there. Your hands are like a monk's hands." I said at one point that I felt the streamings in my genitals but still not in my legs. "There it is—not in my legs yet." So urgently—you want it, you want it."

* * * *

"I had quite a fight with Neill. He believes that the healthy child has no conflicts, that all is roses and cream."

* * * *

On reading a Trotskyite newspaper: "They have the *nerve* to think they can rule us. They are in for a tremendous surprise."

* * * *

"My best papers are not published."

[To be continued.]

BOOK REVIEWS

The Mass Psychology of Fascism. By Wilhelm Reich. Newly translated from the German by Vincent R. Carfagno. New York: Farrar, Straus & Giroux, 1970, 400 pp. Cloth, \$8.95; paper, \$3.25.

Undoubtedly a masterpiece, and Wilhelm Reich's most famous sociopolitical book, *The Mass Psychology of Fascism* has been out of print much too long. It is good to have it back, especially in these times. *The Mass Psychology of Fascism* is the functional cornerstone of Reich's sociopolitical thinking and, in my opinion, the clearest and most profound exposition of the forces that shape and move our sociopolitical structures. Along with this, it offers what I consider the only realistic approach to social organization in the form of what Reich called "work democracy."

First conceived in the early 1930s, spanning the rise of Hitler in Germany and Stalinism in the Soviet Union, it contained, along with sex-economic concepts, many Marxist terms and ideas. It was published in 1933, a second edition appearing in Denmark in 1934. The Nazis banned the book in 1935, and the Communist leadership denounced it as "counter-revolutionary." Even before the publication of *The Mass Psychology of Fascism*, Socialist and Communist organizations had banned the distribution of Reich's Sexpol publications, and his life was threatened "as soon as Marxists came to power in Germany" (1: p. xx). With the demand for an English edition, Reich began work on a revision in 1942, and the third revised edition, translated by Theodore P. Wolfe, M.D., appeared in 1946. For this revision, Reich found it necessary to correct a number of serious errors of thinking based upon Marxist concepts and terms, which proliferated in the early editions. Every sex-economic concept had remained valid, had withstood the test of time, whereas every Marxist idea had to be eliminated and replaced with functional concepts and terms. Thus the attempt to synthesize Marxism and depth psychology was permanently repudiated and terminated in print, as it had already been in Reich's thinking for a number of years.

In the original translation, by Theodore P. Wolfe, M.D., the book is concluded with Chapter X, "Work Democracy." The new translation, by Victor R. Carfagno, enlarges the number of chapters by creating

them out of the final sub-topic of Chapter IX ("The biosocial functions of work . . .") and two sub-topics of Chapter X, making a total of thirteen chapters out of the original ten. The effect of this arbitrary change from the Reich-approved Wolfe version is that it separates categories which, in my opinion—and, apparently, Reich's—belong together. For example, in the Carfagno version, the chapter entitled "Bio-social Function of Work" is, in its original sub-topical form, a continuation and logical conclusion of the chapter on "The Masses and the State." Since the sub-topic is concerned with the destructive effects of the "moralistic, authoritarian regulation of work" by the Soviet authorities, it belongs well within the analysis of the process of Soviet deterioration into Red Fascism that is dealt with in "The Masses and the State." In addition, the sub-topics referred to in the final chapter of Wolfe's version ("Work Democracy") are so logically intertwined with that theme that to interrupt the sense of continuity by arbitrary chapter separation is a disservice.

As Ilse Ollendorff has stated, Reich gave a great deal of personal attention to conveying his true meaning and intentions to Dr. Wolfe.* The Wolfe translation, therefore, is the only version authorized by Reich himself. That the Carfagno translation may include some material not included in Wolfe's version probably distorts Reich's intentions. Ultimate meanings and intentions may be as much expressed by deletions as inclusions. The following examples may illustrate this point:

On page 217, paragraph 4, of Carfagno's translation, Reich states:

. . . the Social Democrats and Liberal parties in the countries that were still not fascist lived precisely in the illusion that the masses as such, just as they are, were capable of freedom and liberalism, and that paradise on earth would be assured if only those wicked Hitlers were not around.

Wolfe's version omits the word "liberalism." In the light of Reich's own description of liberalism as a manifestation of man's superficial layer, this is an understandable omission, for, unlike freedom, the masses are all *too* capable of liberalism. Of course, Reich could have used the expression "genuine liberalism," but apparently his desire was

*Ilse Ollendorff writes, "A sociologist student of Reich's pressed for an English edition of *Mass Psychology*, and Wolfe now started work on this translation. I remember him, always carrying his little attaché case, coming for endless evening discussion about the correct phrasing of a paragraph here, the right word for one of Reich's special expressions there, and I always admired the conscientiousness with which Wolfe was able to convey the exact meaning of Reich's concepts" (2: p. 75).

to avoid confusion. Only Wolfe's translation should be trusted here.

As for the style of writing, compare Carfagno's ponderousness in the following passage (p. xi) with Wolfe's fluency:

As I have demonstrated in my book *Character Analysis*, these layers of the character structure are deposits of social developments which function autonomously.

Wolfe, p. vii:

As I have shown in my book, *Character Analysis*, these layers are autonomously functioning representations of social development.

Thus, it seems to me, the Carfagno translation falls short of the Wolfe translation in several important respects: It lacks the exactness of Reich's personally conveyed intentions; it lacks the *authority* of Wolfe himself; and finally, it lacks the fluency, warmth and down-to-earth quality of Wolfe's translating style. Nevertheless, it is interesting to know what some of Reich's thoughts were before their final editing, but not because of "exactness." Until the Wolfe version is made available again, this translation will have to fill the gap.

Grasping the thesis of *The Mass Psychology of Fascism* requires, ultimately, a functional understanding of Reich's orgasm theory and his theory of character. Presently it has come to mean an understanding of the lawful functioning of cosmic orgone energy in the human organism. In essence, it is as follows: Armored, orgasmically impotent man is structured in three broad characterological layers: In the *core*, he is natural, genitally healthy, self-regulating, rational, responsible and kind; capable of sustained and creative work and *natural* aggression (the realm of the *genuine* revolutionary). The blocking of this core layer in infancy and childhood precludes the capacity for healthy development and the adequate discharge of orgone energy, resulting in a *secondary* layer filled with brutality, sadism, perversion, and general irrationality, including licentiousness and destructive rebellion (the realm of the fascist). This middle layer is concealed by a veneer (the superficial or surface layer) of false niceness, pseudo-humanitarianism, fake fairness (the realm of the liberal). Since man is so armored, it is the secondary layer which predominates and must be kept in check by the superficial layer, or expressed through socially acceptable substitute mechanisms. The capacity for the genital expression is limited and, according to Reich, most often represented in rational creative work and artistic expression. Consonant with man's armoring are those social institutions and expressions which both reinforce his neurosis and extend it onto the social scene in the form of organized political irra-

tionality, of which fascism is the archetype. These are patriarchal authoritarianism (the *compulsive* family), religious, racial, and political mysticism, and mechanistic thinking and behavior, as well as their reactive mechanisms, such as licentiousness, pornography, and false "revolution."

Hence, Reich's view of fascism as a disease which is anchored in the psychic structure of the masses and which cuts across class boundaries. It is based upon the orgasmic impotence of armored man, who is structurally incapable of genuine democracy. As such, it gives rise to an authoritarian patriarchal society and a mechano-mystical orientation. The fascist state represents the armed, organized fascism of the average man, championed by the masses. In this respect, Reich differentiates between an ordinary military dictatorship and fascism, the point of departure being ideological appeal to and support by the masses.

Contrary to recent reviews of this book in the *New York Times* (3, 4), Reich is neither opposed to the family nor does he imply that all patriarchal societies *must* evolve into an organized fascist state. He is concerned about the *compulsive, patriarchal family*, not the *natural family*, and those aspects of human character structure which may culminate in a fascist state. Another implication in these reviews concerned women in Nazi Germany who were supposed to have been enjoying "their sex as much as present day members of Women's Liberation Leagues." An elementary understanding of Reich's orgasm theory might have precluded such an example, the facts being that sexual activity and orgasmic potency are not identical and that "clitoral orgasms" cannot replace vaginal orgasms (5).

With unerring logic, Reich traces the decline of social democracy in the Weimar Republic and its deterioration into Nazism; and the comparable process in the Soviet Union following the early years that led to Stalinism and Red Fascism. In both cases, Reich indicates the characterological incapacities of the masses for genuine social democracy and their strong reactions to ideological appeals based upon patriarchy, sexual anxieties, mysticism, and chauvinism.

I must disagree, however, with Reich's evaluation of Lenin, to whom I feel he gives more than earned credit both for humane motivations and a functional understanding of the characterological unpreparedness for freedom on the part of the masses. Recent documentations, such as Robert Payne's *The Life and Death of Lenin* (6), indicate that Lenin's motivations were considerably less humane and functional than Reich attributes to him:

Once Lenin had decided that all means were permissible to bring about the

dictatorship of the proletariat, with himself ruling in the name of the proletariat, he had committed Russia to intolerable deprivations of human freedom. His power was naked power; his weapon was extermination; his aim was the prolongation of his own dictatorship. He could write, "Put Europe to the flames" and think nothing of it. He could decree the deaths of thousands upon thousands of men, and their deaths were immaterial, because they were only statistics impeding the progress of his theory. The butchery in the cellars of Lubyanka did not concern him. He captured the Russian Revolution and then betrayed it, and at that moment he made Stalin inevitable (6: p.631).

Although one must disagree with Payne that it was Lenin, and not the Russian masses, who "made Stalin inevitable," it is clear that Lenin was no humanitarian.

Reich looked upon America with hope, genuine grievances and injustices notwithstanding. But the activities and distortions of the freedom peddlers made him fear for America's survival as a bastion of gradual social and sexual revolution and of concern for infants and children.

This was because he clearly saw how little the freedom peddlers understood the characterological—or biological—requirements for self-government and the capacity of the masses in this respect. He regarded the tendency, both in Scandinavia and the United States, to shift from private to state capitalism as ominous in view of existing character structure. This process struck him as the very mechanism by which a fascist state is created—as in Nazi Germany and the Soviet Union (1: pp. 280-84). Although he had no great admiration for narrow-visioned capitalists, Reich did not equate them with fascists; rather, he thought of them as adherents of an economic philosophy and practice as much to be expected in an armored world as socialists. To Reich, the evils of state capitalism were not due to its capitalistic features, but to the incapacity of the masses to administer their own lives, thus relegating more and more power to bureaucrats who turn into *führers* (7, 8). The characterological or biological factor is much deeper than any class or economic differences, and cuts across all lines.

The essential ingredient for a healthy society is core contact. Here, Reich offered a most meaningful approach to the human dilemma: *work democracy*, which combined the best features of capitalist individuality and enterprise, and social cooperativeness, yet transcended both by its emphasis upon pleasurable work grounded in genital health, a system without arbitrary classifications of proletariat and non-proletariat, but

rather comprising all those who do "vitally necessary work" as an expression of their natural capacity for work, love, and knowledge.

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Incubator for Savages. By Sanford Goodman. Big Sur, Cal.: Crazy Horse Books, c/o Coast Gallery, 1970, 46 illus. \$12.50.

One of the disasters of contemporary art criticism is that the critic uses his assumed knowledge of the work of great artists of the past to demean the work of living men. There is a fragility and susceptibility in the work of any good artist which can become the target of the critics' own doubts, fears, or rages. This book of Sanford Goodman's drawings, *Incubator for Savages*, is a tender and susceptible personal document. It could easily be faulted on a score of formal points by any critic callous enough to undervalue the expressive core of the book.

The forty-six drawings in this book are of human faces, or, more accurately, of expressions that occur on human faces and within them. The medium is pen and ink, and the technique is predominantly linear hatching, which occasionally achieves the tonality of atmospheric light. The facial expressions are largely of fixed attitudes or transient feelings that might be repellent if they were not done with a compassionate searching. There is an element of grief-stricken understanding in each drawing, as though the artist had experienced these things within him-

self, as well as in others. The drawings deal with the armored character of mankind that creates and incubates "homo normalis." This is certainly a worthwhile book, well worth its \$12.50 price.

If criticism can be constructive, and it sometimes can be when given by working artists, I feel that there is too heavy a reliance on word expressions in this book. The words tend to function as explanations of the drawings and thereby prevent the artist from deepening his pictorial expression in terms of tonality, form, and expressive content. The stated subject of the book covers potentially rich pictorial material that suggests a greater sense of continuity and thematic relationship than that which appears in this sequence of drawing pages. As it stands, the drawings do not have a strong connective thread and thereby miss the potential for narrative power that is inherent in the subject.

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Me and the Orgone. By Orson Bean. New York: St. Martin's Press, 1971, pp. 119, \$4.95.

In the introductory chapters of the author's experiences as a patient in orgone therapy, Orson Bean gives us an excellent review of Reich's understanding of the origin of neuroses. He explains the disorders that result from muscular armor produced in children when emotional and physiological expressions are blocked by intolerant parents and teachers. In clear language, he describes the reasons and methods employed by the therapist in dissolving the armor to permit orgone to flow unimpeded in the body. The therapeutic goal, orgasmic potency, its definition, and the energetic function of the genital embrace are stated in an unusually lucid and contactful way, providing the reader unfamiliar with these concepts with a concise appreciation of the treatment process.

However, emphasis is given to the physical manipulation of the musculature at the expense of examples of character analysis. In the course of treatment, both muscular and character armor, which are functionally identical, are dissolved together. Character traits which reflect an inhibition of energy movement through the organism are first understood before the patient is touched. Probing these defensive traits forces them out in the open while their anchoring in the musculature is loosened, freeing the held-back feelings. Bean does point out the absence of such patient and painstaking work in the experimental encounter groups which he fittingly dubs "road-company Reichs."

When he shares insights into his own character, particularly during his sessions, he is hilarious. The humor is a delight, epigrammatic in style, deriving its tone partly from satire and partly from irony. Interposed between the chapters dealing with his sessions are comments on social problems from an orgonomic functional viewpoint. They are developed in conjunction with the changes in his own structure and life at that period, which gives the book a most pleasing flow and continuity. Some of the best material deals with the Fifteenth Street School, which he established at considerable personal sacrifice. His efforts to restructure the school experience to fit the self-regulatory needs of the children are gratifying to witness.

There are two areas to which I take strong exception. Bean exhibits a definite confusion, or, more accurately, ambivalence, regarding his evaluation of the "revolutionary kids" and the New Left. He dismisses as "spoiled brat" behavior their destructive history of provocation with non-negotiable demands, intimidation, deception, terrorism, and murder. He then imbues them with a clarity of vision which sees our country as fascist with no hope of happiness for people "as long as our system of life and government remains in its present form" and with them erroneously indicts the socio-political establishment as responsible for society's sexual misery. In practically the same breath, he correctly points out that humanity is incapable of tolerating true freedom, that life-affirmative societies may evolve only out of generations of life-affirming people, and that the violent leftist revolutions everywhere else have resulted in sexual repression. This ambivalence rests on the wide-spread mistaken notion that the actions of the New Left "kids" are direct expressions of core emotions. In actuality, they result from the weakening of the most superficial social layer, permitting the emergence of secondary drives which push toward licentiousness rather than responsible freedom.

The widespread use of drugs encourages the expression of secondary drives on the social scene, and here, again, Bean has made the same qualitative error. Reich pointed out that drugs are utilized to obtain substitute gratification and to avoid sexual feelings. The use of marijuana, which Bean champions as an aphrodisiac, breaks down armor temporarily in local areas at the expense of increased holding in the eye segment (and probably the whole head as well). What results is not orgonomic streaming through the body, as he claims, but a local discharge through a hole in the armor perceived in a distorted way due to an intensified eye block. Contact, which depends on the free pulsation of energy from core to periphery, is seriously impaired, and the

quantitative aspects of the orgasm function, *i.e.*, mechanical tension and relaxation, are all that remain; bioenergetic charge and discharge are killed. Our clinical experience with drug users reveals their capacity for excitation to be drastically reduced because of changes in the quality of their armor and because their energy level appears greatly diminished. To represent marijuana and LSD as providing the ultimate in sexual pleasure is irresponsible and an example of a distortion of orgonomic truth.

In the many moments of tenderness which are deeply moving, Orson Bean reveals himself without a facade. This book expresses his reverence for life and the effort he endured to obtain his own aliveness.

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Communications and Notes

"The Future of Ecstasy"

Mr. A. C. Sectorsky, associate publisher and editorial director of *Playboy* magazine, invited Dr. Elsworth F. Baker to send him a letter commenting on Alan Watts' "The Future of Ecstasy," which appeared in the January issue of that magazine. The article is, to quote the publicity notice, "A visionary philosopher's [description of] the coming evolution of pleasure from an uptight vagary into an art, a science and a liberated life style." The article begins:

It wasn't until 30 years ago, in the 1960's that there began to be any widespread realization that ecstasy is a legitimate human need—as essential for mental and physical health as proper nutrition, vitamins, rest and recreation. Though the idea had been foreshadowed by Freud and stressed by Wilhelm Reich, there had never been anything particularly ecstatic about psychoanalysts, or their patients. They seem, on the whole, emotionally cathartized and drearily mature. Ecstasy, in the form of mystical experience, had also been the objective of a growing minority that, since the beginning of the century, had been fascinated with yoga, Tibetan Buddhism, Zen, Vedanta and other forms of Oriental meditation; and these people were always rather serious and demure.

But in the Sixties, everything blew up. Something almost like a mutation broke out among people from 15 to 25, to the utter consternation of the adult world.

From there, it goes on to describe how the present-day "counter-culture"

will change by 1990 into a new way of life in which only a tiny minority of people will work, while the rest spend their days in the enjoyment of sensual pleasure, aided by all manner of drugs and mystical regimens. Sex will be an elaborate ritual, commencing with meditation and mutual feeding, and leading up to prolonged, almost motionless intercourse lasting an hour or more before climax. According to Watts, such an existence based upon ecstasy will solve all of man's problems, including his self-destructiveness, as well as his destruction of the environment.

Here is Dr. Baker's reply:

December 31, 1970

Dear Mr. Spector,sky,

I appreciate the courtesy of your sending Alan Watts' article. "The Future of Ecstasy," with an invitation for my suggestions. I enjoyed reading Mr. Watts' article and would prefer to leave it at that, considering it a rather delightful fantasy based on considerable knowledge of present day social and psychiatric attitudes and written with tongue in cheek. If one takes Alan Watts seriously, I would have to disagree with him on several points. I cannot foresee such revolutionary changes as he depicts. Man can eliminate neither tension nor pollution in twenty years and one must wonder what life may still be here in 1990.

Tension (armor) and pollution are certainly the two great problems facing the world. The former makes man's every effort end destructively, while the latter is destroying all life, both plant and animal.

However, hope for the world lies not in the hippie approach to life nor in psychedelics or vibrations, as these are all unnatural attempts on the part of a dead organism to feel and can never result in a healthy and sane world. The world will never be emotionally healthy until we learn to bring up our children naturally and without tension from the beginning. This cannot be accomplished in 20 years. Perhaps in 5000 years if we have that much time.

The placid and idyllic world seeking ecstasy as its goal which is envisioned by the article is the paradise longing of pleasure-starved organisms who can never know satisfaction and can work only compulsively. Such a culture, revolving around pleasure, would gradually deteriorate into nothingness as it did in the time of the ancient Greeks and Romans or as visualized by H. G. Wells in *The Time Machine*.

True, the individual must be capable of experiencing pleasure, even ecstasy, and thereby be capable of discharging tension, but his life finds satisfaction in meaningful and creative work, not lolling around making artificial and prolonged love to his mate. Such love-making is not an ex-

pression of genitality but is infantile with oral and masochistic components.

I heartily agree that love-making should not be simply in bed at night. It should be a spontaneous expression of love when felt and when opportunity allows. However, it must be remembered that privacy in love-making is essential.

In orgonomy, our goal is indeed orgasmic potency with the ability to surrender completely in the love embrace and experience ecstasy. This, however, is not an end in itself but rather an indication that the individual has achieved the ability to give himself completely in any endeavor whether it be in work, play, or in love. He can thus maintain health by avoiding the build-up of excess energy which causes tension. This is the area in which Reich is almost invariably misunderstood.

I must emphasize that work must always fill a great portion of man's time for his life to be rewarding and satisfying. It should be meaningful work that is enjoyed.

Man should also have opportunity for harmonious contact with nature. Mr. Watts indicates some such contact in his gardening and walks in the garden. But we also need wilderness with its wildlife and deep silences even if we never experience them, just to know they are there as we know the moon and stars are there. This is necessary to satisfy our cosmic feelings.

Nature is not idyllic, and to live in harmony with nature we must accept the struggle, frustration, sorrow, and tragedy that are part of life. We experience feeling only by change, and eternal pleasure would become stifling.

The vision Mr. Watts presents in "The Future of Ecstasy" is essentially a symbolic return to the breast and the womb and has little to do with adult genitality.

Very sincerely,
 Elsworth F. Baker, M.D.
 Editor, *The Journal of Orgonomy*

Mr. Spectorisky doubtless thought it the better part of *Playboy* wisdom to let Mr. Watts keep his tongue in his cheek, for, as of the time this journal went to press, he had not seen fit to publish Dr. Baker's challenging letter.

• The annual two-part orgonomy courses at New York University's School of Continuing Education will again be presented under the di-

rection of Professor Paul Mathews. Part I, *Wilhelm Reich, Life and Work: Scientific Orgonomy* will be offered in the fall of 1971, and Part II, *Wilhelm Reich, Life and Work: Social Orgonomy*, in the spring of 1972. The lectures will be given by orgone therapists, scientists, and social scientists, in addition to those by Professor Mathews. A greater emphasis will be placed on audio-visual and laboratory demonstrations, as well as recent organomic findings in various areas than heretofore. However, they will be essentially introductory courses.

Topics for Part I will include fourteen lectures on: Wilhelm Reich—overview of life and work; orgasm theory; character analysis; psychic and muscular armoring; discovery of the orgone; organomic functionalism; orgone theory; cosmic superimposition; atmospheric phenomena; oranur and DOR; recent findings and application to various scientific and social disciplines.

Topics for Part II will include ten lectures on: A review of Reich's life and work; the emotional plague of mankind; fascism and sociopolitical characterology; contemporary sociopolitical problems; functional education and art; problems of children and adolescents; problems of adults—marriage and the lasting sexual relationship; the emotional plague versus orgonomy.

Part I is *not* a prerequisite for Part II, although the sequence would be preferable. Registration will be separate for each course.

Unless schedules and fees are changed, these courses will be held on Wednesday evenings, from 8:00 P.M. to 10:00 P.M., and the fees are \$60.00 tuition and \$10.00 registration fee for the fall course, and \$40.00 tuition and \$5.00 registration fee for the spring course. For further information, call (212) 598-2373 or write to New York University, Division of Continuing Education, 1 Washington Square North, N.Y. 10003. Persons desiring guest passes for one or two specific lectures should contact Professor John Bell at (212) 598-2392.

• *The Fifteenth Street School*, founded seven years ago by Orson Bean and his wife, Carolyn, is still thriving under the supervision of Miss Patricia Greene, who continues as director, although the Beans have moved to Australia. After reading A. S. Neill's *Summerhill*, Mr. Bean decided to start his own school, employing the same basic concepts of education and child-rearing as Neill's. (See "The Fifteenth Street School: An Experiment in Education" by Orson Bean, the *Journal of Orgonomy*, Vol. 2, No. 2, pp. 150-54.) Thus the goal of the school is education based on self-regulation of the children, who range in age from four to eleven. There are still some openings for the 1971-72

school year. Inquiries may be sent to the school at 206 West 15th Street, New York, N.Y. 10011, or telephone: (212) 929-3305.

- We have been asked to announce that the *World Congress of Psychiatry*, sponsored by the World Psychiatric Association, will take place in Mexico City from November 28 to December 4, 1971, in the Unidad de Congresos of the Centro Medico Nacional, I.M.S.S. For further information, write: Dr. Juan Luis Alvarez Gayou, Secretariado del "V" Congreso Mundial de Psiquiatria, Apartado Postal No. 20-123/24, Mexico, D.F.

- Within a period of four days, orgonomy has sustained two serious attacks, one in the form of an article and the other in the form of a physical outbreak. The *Sunday New York Times Magazine* of April 18, 1971, carried a lead article on Wilhelm Reich by David Elkind, Professor of Psychology and Psychiatry, University of Rochester. While Professor Elkind appeared to be fair-minded in dispelling some of the ugliest rumors about Reich and orgonomy, his conception of Reich's work and orgonomy is highly confused. On almost every crucial issue, Professor Elkind distorts or utterly misapprehends the nature of Reich's findings and concludes by denigrating some of Reich's most important discoveries, as well as Reich himself. He further distorts matters by claiming Reich as the rightful guiding spirit among the European and American student left-revolutionaries.

The second attack, now under investigation and court procedure, was an invasion of the final meeting, on Wednesday, April 21, of the New York University course on Social Orgonomy by two self-declared left-revolutionary women. They tried to distribute a well-prepared, four-page document attacking certain of the lecturers' positions on Reich's work, Reich's later socio-political statements, and claiming the "real" Reich as a violent revolutionary of the left. They then pelted the panelists—Drs. Barbara G. Koopman and Michael Ganz and Professors Paul Mathews and John M. Bell—with rotten eggs. The document's cartoon featured such an attack; there was also a warning and threat to those who espouse what is called "the worst of Reich" and who refuse to promote the "revolution."

Each of these attacks is serious, though not entirely unexpected. The question is, are they to presage more attacks and of severer nature? A fuller report on these matters will follow in a later *Journal*.

To Hold.
as Twere,
a Mirror



"and then . . . nothing!"

INFORMATION ON SUBMITTING MANUSCRIPTS

Manuscripts submitted for publication should be sent to Organomic Publications Inc., P.O. Box 476, Ansonia Station, New York, N.Y. 10023.

Manuscripts must be double-spaced throughout, typed on 8½x11 paper, with margins of *at least* 1 inch on all sides. An original and two duplicate copies should be submitted. All accepted manuscripts are subject to copyediting. They become the permanent property of *The Journal of Orgonomy* and may not be reprinted without permission from both the author and the journal.

References should be submitted on a separate sheet. They should be restricted to pertinent papers, and they should be given in sequence as they appear in the text. In the text, they should be marked (1), (2), etc., in order of citation. *References from journals* should include the author(s), title of article, name of journal, volume, page numbers, and year. *References from books* should include the author(s), or editor(s), title, publisher and city, and year. The author is responsible for the accuracy and completeness of references. References should be typed according to the following style for books and journals respectively:

1. Fowler, H. W.: *A Dictionary of Modern English Usage*, 2nd ed. New York: Oxford University Press, 1965.
1. Raknes, O.: "The Organomic Concept of Health and Its Social Consequences," *Organomic Medicine*, 1: 106-120, 1955.

Tables should be typed on separate sheets.

Photographs should be glossy prints, if possible. They should be identified, and a concise legend supplied for each.

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Affiliations and/or occupation of the author(s) must be given. Former affiliations may be given where relevant, as well as academic degrees and titles.

CURRENTLY AVAILABLE BOOKS ON ORGONOMY

Wilhelm Reich

Character Analysis, 3rd, enlarged ed. New York: Farrar, Straus and Giroux.

Function of the Orgasm, 2nd ed. New York: Farrar, Straus and Giroux.

The Sexual Revolution. New York: Farrar, Straus and Giroux.

The Murder of Christ: The Emotional Plague of Mankind. New York: Farrar Straus and Giroux.

The Mass Psychology of Fascism. New York: Farrar, Straus and Giroux.

Listen, Little Man! New York: Farrar, Straus and Giroux.

Selected Writings. New York: Farrar, Straus and Giroux.

Reich Speaks of Freud. Edited by Mary Higgins and Chester M. Raphael, M.D. New York: Farrar, Straus and Giroux.

Elsworth F. Baker

Man in the Trap. New York: Macmillan Company, 1967.

Ola Raknes

Wilhelm Reich and Orgonomy. New York: St. Martin's, 1970.

Orson Bean

Me and the Orgone. New York: St. Martin's, 1971.

(The above books may be obtained through bookstores. They are not distributed by Organomic Publications, Inc.)

AVAILABLE BACK ISSUES OF ORGONOMIC PERIODICALS

The Journal of Orgonomy (Major articles.)

Vol. 1 Nos. 1 & 2, 1967 (double issue, \$6.00): "The Basic Antithesis of Vegetative Life," Part I, by Wilhelm Reich; "Wilhelm Reich" by Elsworth F. Baker, M.D.; "United States of America v. Wilhelm Reich," Part I, by David Blasband, A.B., LL.B.; "The Cult of Orgonomy" by Norman M. Levy, M.D.; "A Functional Understanding of the Modern Liberal Character" by Paul Mathews, M.A.; "A Case of Trichotillomania in a Two-year-old" by Barbara Goldenberg, M.D., Ph.D.; "The Significance of the Eye Block in Psychiatric Orgone Therapy" by Richard A. Blasband, M.D.

Vol. 2, No. 1, 1968 (\$3.00): "The Basic Antithesis of Vegetative Life," Part II, by Wilhelm Reich; "United States of America v. Wilhelm Reich," Part II, by David Blasband, A.B., LL.B.; "From Reich to Where?" by A. S. Neill; "Emotional Expression as Resistance in Therapy" by Norman M. Levy, M.D.

Vol. 2, No. 2, 1968 (\$3.00): "The Orgasm as an Electrophysiological Discharge" by Wilhelm Reich; "The Biopathic Diathesis" by Robert A. Dew, M.D.; "Mass and the Gravitational Function" by C. Fredrick Rosenblum, B.S.

Vol. 3, No. 1, 1969 (\$3.00): "Experimental Investigation of the Electrical Function of Sexuality and Anxiety (Part I)," by Wilhelm Reich; "A Further Study of Genital Anxiety in Nursing Mothers," by Elsworth F. Baker, M.D.; "The Biopathic Diathesis (Part II)," by Robert A. Dew, M.D.

Vol. 3, No. 2, 1969 (\$3.00): "Experimental Investigation of the Electrical Function of Sexuality and Anxiety (Part II)" by Wilhelm Reich; "Problems of Atmospheric Circulation (Part I)" by Richard A. Blasband, M.D.; "The Electroscope (Part I)" by C. Fredrick Rosenblum; "The Biopathic Diathesis (Part III)" by Robert A. Dew, M.D.

Vol. 4, No. 1, 1970 (\$3.00): "The Impulsive Character" by Wilhelm Reich; "The Sex-economic Concept of Psychosomatic Identity and Antithesis" by Theodore P. Wolfe, M.D.; "Orgonomic Functionalism in Problems of Atmospheric Circulation (Part II. The Drought)" by Richard A. Blasband, M.D.; "The Electroscope (Part II)" by C. Fredrick Rosenblum, B.S.; "Hepatitis as a Complication of Therapy" by Norman M. Levy, M.D.

Vol. 4, No. 2, 1970 (\$3.00): "The Impulsive Character (Part II)" by Wilhelm Reich; "Problems of Atmospheric Circulation (Part III. On Desert)" by Richard A. Blasband, M.D.; "The Red Shift" by C. Fredrick Rosenblum, B.S.; "The Biopathic Diathesis (Part IV) by Robert A. Dew, M.D.; "A Case Complicated by a Tendency Toward Acute Anorgonia" by Karl Fossum, M.D.

Orgonomic Medicine (Major articles.)

Vol. 2, No. 1, 1956 (\$2.00): "Re-emergence of Freud's 'Death Instinct' as 'DOR' Energy" by Wilhelm Reich; "The Role of Genitality in the Therapy of Neuroses (1925)—From the History of Orgonomy" by Wilhelm Reich; "Atoms for Peace vs. the Hig: Address to the Jury—From the History of Orgonomy" by Wilhelm Reich.

FOR LIST OF BOOKS ON ORGONOMY, SEE INSIDE BACK COVER
