

25TH
ANNIVERSARY
EDITION

— THE —
ROAD LESS
TRAVELED

A New Psychology of
Love, Traditional Values
and Spiritual Growth

M. SCOTT
PECK, M.D.

With a New Introduction by the Author

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PERHAPS NO BOOK IN THIS GENERATION has had a more profound impact on our intellectual and spiritual lives than *The Road Less Traveled*. With sales of more than 7 million copies in the United States and Canada, and translation into more than 23 languages, it has made publishing history, with more than 10 years on *The New York Times* bestseller list.

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(continued from front flap)

and turn to again and again for inspiration and understanding. As Phyllis Theroux wrote in *The Washington Post* when the original edition of *The Road Less Traveled* was first published, "It is not just a book but a spontaneous act of generosity."



M. SCOTT PECK, M.D., is a psychiatrist and bestselling author. Educated at Harvard (B.A.) and Case Western Reserve (M.D.), Dr. Peck served in administrative posts in the government during his career as a psychotherapist, and later in private practice as a psychiatrist. For nearly two decades, he has devoted much of his time and financial resources to the work of the Foundation for Community Encouragement, a nonprofit organization that he and his wife, Lily, helped found in 1984. He lives in northwestern Connecticut.

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*The Road
Less Traveled,
25th Anniversary Edition*

A NEW PSYCHOLOGY OF LOVE,
TRADITIONAL VALUES
AND SPIRITUAL GROWTH

M. SCOTT PECK, M.D.

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(continued on page 316)

To my parents,
Elizabeth and David,
whose discipline and love
gave me the eyes
to see grace

Introduction to the 25th Anniversary Edition

Tomorrow a stranger will say with masterly good sense precisely what we have thought and felt all the time.

—Ralph Waldo Emerson,
“Self Reliance”

The most common response I have received to *The Road Less Traveled* in letters from readers has been one of gratitude for my courage, not for saying anything new, but for writing about the kind of things they had been thinking and feeling all along, but were afraid to talk about.

I am not clear about the matter of courage. A certain kind of congenital obliviousness might be a more proper term. A patient of mine during the book's early days happened to be at a cocktail party where she overheard a conversation between my mother and another elderly woman. Referring to the book, the other woman said, “You certainly must be very proud of your son, Scotty.” To which my mother replied, in the sometimes tart way of the elderly, “Proud? No, not particularly. It didn't have anything to do with me. It's his mind, you see. It's a gift.” I think my mother was wrong in saying that she had nothing to do with it, but I think she was accurate my authorship of *The Road* was the result of a gift—on many levels.

One part of that gift goes way back. Lily, my wife, and I had made friends with a younger man, Tom, who had grown up in the same summer colony as I. During those summers I had played with his older brothers, and his mother had known me as a child. One night a few years before *The Road* was published, Tom was

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coming to have dinner with us. He was staying with his mother at the time, and the evening before he had said to her, "Mom, I'm going to have dinner tomorrow night with Scott Peck. Do you remember him?"

"Oh yes," she responded, "he was that little boy who was always talking about the kinds of things that people shouldn't talk about."

So you can see that part of the gift goes way back. And you may also understand I was something of a "stranger" within the prevailing culture of my youth.

Since I was an unknown author, *The Road* was published without fanfare. Its astonishing commercial success was a very gradual phenomenon. It did not appear on the national bestseller lists until five years after its publication in 1978—a fact for which I am extremely grateful. Had it been an overnight success I doubt very much that I would have been mature enough to handle sudden fame. In any case, it was a sleeper and what is called in the trade a "word-of-mouth book." Slowly at first, knowledge of it spread by word of mouth by several routes. One of them was Alcoholics Anonymous. Indeed, the very first fan letter I received began: "Dear Dr. Peck, you must be an alcoholic!" The writer found it difficult to imagine that I could have written such a book without having been a long-term member of AA and humbled by alcoholism.

Had *The Road* been published twenty years previously, I doubt it would have been even slightly successful. Alcoholics Anonymous did not really get off the ground until the mid-1950s (not that most of the book's readers were alcoholics). Even more important, the same was true for the practice of psychotherapy. The result was that by 1978, when *The Road* was originally published, a large number of women and men in the United States were both psychologically and spiritually sophisticated and had begun to deeply contemplate "all the kinds of things that people shouldn't talk about." They were almost literally waiting for someone to say such things out loud.

So it was that the popularity of *The Road* snowballed, and so it is

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that its popularity has continued. Even toward the end of my career on the lecture circuit, I would tell my audiences: "You are not an average cross section of America. However, there are striking things that you have in common. One is the remarkable number of you who have during the course of your lives undergone—or are still undergoing—significant psychotherapy either within the Twelve Step programs or at the hands of traditional academically trained therapists. I doubt you will feel that I am violating your confidentiality when I ask all of you here who have received or are receiving such therapy to raise your hands."

Ninety-five percent of my audience would raise their hands. "Now look around," I would tell them.

"This has major implications," I would then continue. "One of them is that you are a body of people who have begun to transcend traditional culture." By transcending traditional culture I meant, among other things, that they were people who had long begun to think about the kinds of things that people shouldn't talk about. And they would agree when I elaborated on what I meant by "transcending traditional culture" and the extraordinary significance of this phenomenon.

A few have called me a prophet. I can accept such a seemingly grandiose title only because many have pointed out that a prophet is not someone who can see the future, but merely someone who can read the signs of the times. *The Road* was a success primarily because it was a book for its time; its audience made it a success.

My naive fantasy when *The Road* first came out twenty-five years ago was that it would be reviewed in newspapers throughout the nation. The reality was that, by pure grace, it received a single review . . . but what a review! For a significant part of the success of the book I must give credit to Phyllis Theroux. Phyllie, a very fine author in her own right, was also a book reviewer at the time and accidentally happened to discover an advance copy among a pile of books in the office of the book editor of *The Washington Post*. After scanning the table of contents she took it home with her, returning two days later to demand she be allowed to review

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it. Almost reluctantly the editor agreed, whereupon Phyllie set out, in her own words, "to deliberately craft a review that would make the book a bestseller." And so she did. Within a week of her review *The Road* was on the Washington, D.C., bestseller list, years before it would get on any national list. It was just enough, however, to get the book started.

I am grateful to Phyllis for another reason. As the book grew in popularity, wanting to assure that I would have the humility to keep my feet on the ground, she told me, "It's not your book, you know."

Immediately I understood what she meant. In no way do either of us mean that *The Road* was the literal word of God or otherwise "channeled" material. I did the writing, and there are a number of places in the book where I wish I had chosen better words or phrases. It is not perfect, and I am wholly responsible for its flaws. Nonetheless, perhaps because it was needed, despite its flaws, there is no question in my mind that as I wrote the book in the solitude of my cramped little office I had help. I really cannot explain that help, but the experience of it is hardly unique. Indeed, such help is the ultimate subject of the book itself.

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Preface

The ideas herein presented stem, for the most part, from my day-to-day clinical work with patients as they struggled to avoid or to gain ever greater levels of maturity. Consequently, this book contains portions of many actual case histories. Confidentiality is essential to psychiatric practice, and all case descriptions, therefore, have been altered in name and in other particulars so as to preserve the anonymity of my patients without distorting the essential reality of our experience with each other.

There may, however, be some distortion by virtue of the brevity of the case presentations. Psychotherapy is seldom a brief process, but since I have, of necessity, focused on the highlights of a case, the reader may be left with the impression that the process is one of drama and clarity. The drama is real and clarity may eventually be achieved, but it should be remembered that in the interest of readability, accounts of the lengthy periods of confusion and frustration inherent in most therapy have been omitted from these case descriptions.

I would also like to apologize for continually referring to God in the traditionally masculine image, but I have done so in the interest of simplicity rather than from any rigidly held concept as to gender.

As a psychiatrist, I feel it is important to mention at the outset two assumptions that underlie this book. One is that I make no distinction between the mind and the spirit, and therefore no distinction between the process of achieving spiritual growth and achieving mental growth. They are one and the same.

The other assumption is that this process is a complex, arduous and lifelong task. Psychotherapy, if it is to provide substantial assistance to the process of mental and spiritual growth, is not a quick or simple procedure. I do not belong to any particular school of psychiatry or psychotherapy; I am not simply a Freudian or Jungian or Adlerian or behaviorist or gestaltist. I do not believe there are any single easy answers. I believe that brief forms of psychotherapy may be helpful and are not to be decried, but the help they provide is inevitably superficial.

The journey of spiritual growth is a long one. I would like to thank those of my patients who have given me the privilege of accompanying them for major portions of their journey. For their journey has also been mine, and much of what is presented here is what we have learned together. I would also like to thank many of my teachers and colleagues. Principal among them is my wife, Lily. She has been so giving that it is hardly possible to distinguish her wisdom as a spouse, parent, psychotherapist, and person from my own.

SECTION I

Discipline

Problems and Pain

Life is difficult.

This is a great truth, one of the greatest truths.* It is a great truth because once we truly see this truth, we transcend it. Once we truly know that life is difficult—once we truly understand and accept it—then life is no longer difficult. Because once it is accepted, the fact that life is difficult no longer matters.

Most do not fully see this truth that life is difficult. Instead they moan more or less incessantly, noisily or subtly, about the enormity of their problems, their burdens, and their difficulties as if life were generally easy, as if life *should* be easy. They voice their belief, noisily or subtly, that their difficulties represent a unique kind of affliction that should not be and that has somehow been especially visited upon them, or else upon their families, their tribe, their class, their nation, their race or even their species, and not upon others. I know about this moaning because I have done my share.

Life is a series of problems. Do we want to moan about them or solve them? Do we want to teach our children to solve them?

Discipline is the basic set of tools we require to solve life's problems. Without discipline we can solve nothing. With only

* The first of the "Four Noble Truths" which Buddha taught was "Life is suffering."

some discipline we can solve only some problems. With total discipline we can solve all problems.

What makes life difficult is that the process of confronting and solving problems is a painful one. Problems, depending upon their nature, evoke in us frustration or grief or sadness or loneliness or guilt or regret or anger or fear or anxiety or anguish or despair. These are uncomfortable feelings, often very uncomfortable, often as painful as any kind of physical pain, sometimes equaling the very worst kind of physical pain. Indeed, it is *because* of the pain that events or conflicts engender in us all that we call them problems. And since life poses an endless series of problems, life is always difficult and is full of pain as well as joy.

Yet it is in this whole process of meeting and solving problems that life has its meaning. Problems are the cutting edge that distinguishes between success and failure. Problems call forth our courage and our wisdom; indeed, they create our courage and our wisdom. It is only because of problems that we grow mentally and spiritually. When we desire to encourage the growth of the human spirit, we challenge and encourage the human capacity to solve problems, just as in school we deliberately set problems for our children to solve. It is through the pain of confronting and resolving problems that we learn. As Benjamin Franklin said, "Those things that hurt, instruct." It is for this reason that wise people learn not to dread but actually to welcome problems and actually to welcome the pain of problems.

Most of us are not so wise. Fearing the pain involved, almost all of us, to a greater or lesser degree, attempt to avoid problems. We procrastinate, hoping that they will go away. We ignore them, forget them, pretend they do not exist. We even take drugs to assist us in ignoring them, so that by deadening ourselves to the pain we can forget the problems that cause the pain. We attempt to skirt around problems rather than meet them head on. We attempt to get out of them rather than suffer through them.

This tendency to avoid problems and the emotional suffer-

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ing inherent in them is the primary basis of all human mental illness. Since most of us have this tendency to a greater or lesser degree, most of us are mentally ill to a greater or lesser degree, lacking complete mental health. Some of us will go to quite extraordinary lengths to avoid our problems and the suffering they cause, proceeding far afield from all that is clearly good and sensible in order to try to find an easy way out, building the most elaborate fantasies in which to live, sometimes to the total exclusion of reality. In the succinctly elegant words of Carl Jung, "Neurosis is always a substitute for legitimate suffering."*

But the substitute itself ultimately becomes more painful than the legitimate suffering it was designed to avoid. The neurosis itself becomes the biggest problem. True to form, many will then attempt to avoid this pain and this problem in turn, building layer upon layer of neurosis. Fortunately, however, some possess the courage to face their neuroses and begin—usually with the help of psychotherapy—to learn how to experience legitimate suffering. In any case, when we avoid the legitimate suffering that results from dealing with problems, we also avoid the growth that problems demand from us. It is for this reason that in chronic mental illness we stop growing, we become stuck. And without healing, the human spirit begins to shrivel.

Therefore let us inculcate in ourselves and in our children the means of achieving mental and spiritual health. By this I mean let us teach ourselves and our children the necessity for suffering and the value thereof, the need to face problems directly and to experience the pain involved. I have stated that discipline is the basic set of tools we require to solve life's problems. It will become clear that these tools are techniques of suffering, means by which we experience the pain of problems in such a way as to work them through and solve them

* *Collected Works of C. G. Jung*, Bollingen Ser., No. 20, 2d ed. (Princeton, N.J.: Princeton Univ. Press, 1973), trans. R. F. C. Hull, Vol II, *Psychology and Religion: West and East*, 75.

successfully, learning and growing in the process. When we teach ourselves and our children discipline, we are teaching them and ourselves how to suffer and also how to grow.

What are these tools, these techniques of suffering, these means of experiencing the pain of problems constructively that I call discipline? There are four: delaying of gratification, acceptance of responsibility, dedication to truth, and balancing. As will be evident, these are not complex tools whose application demands extensive training. To the contrary, they are simple tools, and almost all children are adept in their use by the age of ten. Yet presidents and kings will often forget to use them, to their own downfall. The problem lies not in the complexity of these tools but in the will to use them. For they are tools with which pain is confronted rather than avoided, and if one seeks to avoid legitimate suffering, then one will avoid the use of these tools. Therefore, after analyzing each of these tools, we shall in the next section examine the will to use them, which is love.

Delaying Gratification

Not too long ago a thirty-year-old financial analyst was complaining to me over a period of months about her tendency to procrastinate in her job. We had worked through her feelings about her employers and how they related to feelings about authority in general, and to her parents specifically. We had examined her attitudes toward work and success and how these related to her marriage, her sexual identity, her desire to compete with her husband, and her fears of such competition. Yet despite all this standard and painstaking psychoanalytic work, she continued to procrastin-

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ate as much as ever. Finally, one day, we dared to look at the obvious. "Do you like cake?" I asked her. She replied that she did. "Which part of the cake do you like better," I went on, "the cake or the frosting?" "Oh, the frosting!" she responded enthusiastically. "And how do you eat a piece of cake?" I inquired, feeling that I must be the most inane psychiatrist that ever lived. "I eat the frosting first, of course," she replied. From her cake-eating habits we went on to examine her work habits, and, as was to be expected, discovered that on any given day she would devote the first hour to the more gratifying half of her work and the remaining six hours getting around to the objectionable remainder. I suggested that if she were to force herself to accomplish the unpleasant part of her job during the first hour, she would then be free to enjoy the other six. It seemed to me, I said, that one hour of pain followed by six of pleasure was preferable to one hour of pleasure followed by six of pain. She agreed, and, being basically a person of strong will, she no longer procrastinates.

Delaying gratification is a process of scheduling the pain and pleasure of life in such a way as to enhance the pleasure by meeting and experiencing the pain first and getting it over with. It is the only decent way to live.

This tool or process of scheduling is learned by most children quite early in life, sometimes as early as age five. For instance, occasionally a five-year-old when playing a game with a companion will suggest that the companion take first turn, so that the child might enjoy his or her turn later. At age six children may start eating their cake first and the frosting last. Throughout grammar school this early capacity to delay gratification is daily exercised, particularly through the performance of homework. By the age of twelve some children are already able to sit down on occasion without any parental prompting and complete their homework before they watch television. By the age of fifteen or sixteen such behavior is expected of the adolescent and is considered normal.

It becomes clear to their educators at this age, however, that a substantial number of adolescents fall far short of this

norm. While many have a well-developed capacity to delay gratification, some fifteen- or sixteen-year-olds seem to have hardly developed this capacity at all; indeed, some seem even to lack the capacity entirely. These are the problem students. Despite average or better intelligence, their grades are poor simply because they do not work. They skip classes or skip school entirely on the whim of the moment. They are impulsive, and their impulsiveness spills over into their social life as well. They get into frequent fights, they become involved with drugs, they begin to get in trouble with the police. Play now, pay later, is their motto. So the psychologists and psychotherapists are called in. But most of the time it seems too late. These adolescents are resentful of any attempt to intervene in their life style of impulsiveness, and even when this resentment can be overcome by warmth and friendliness and a nonjudgmental attitude on the part of the therapist, their impulsiveness is often so severe that it precludes their participation in the process of psychotherapy in any meaningful way. They miss their appointments. They avoid all important and painful issues. So usually the attempt at intervention fails, and these children drop out of school, only to continue a pattern of failure that frequently lands them in disastrous marriages, in accidents, in psychiatric hospitals or in jail.

Why is this? Why do a majority develop a capacity to delay gratification while a substantial minority fail, often irretrievably, to develop this capacity. The answer is not absolutely, scientifically known. The role of genetic factors is unclear. The variables cannot be sufficiently controlled for scientific proof. But most of the signs rather clearly point to the quality of parenting as the determinant.

The Sins of the Father

It is not that the homes of these unself-disciplined children are lacking in parental discipline of a sort. More often than not these children are punished frequently and severely throughout their childhood—slapped, punched, kicked, beaten and whipped by their parents for even minor infractions. But this discipline is meaningless. Because it is undisciplined discipline.

One reason that it is meaningless is that the parents themselves are unself-disciplined, and therefore serve as undisciplined role models for their children. They are the "Do as I say, not as I do" parents. They may frequently get drunk in front of their children. They may fight with each other in front of the children without restraint, dignity or rationality. They may be slovenly. They make promises they don't keep. Their own lives are frequently and obviously in disorder and disarray, and their attempts to order the lives of their children seem therefore to make little sense to these children. If father beats up mother regularly, what sense does it make to a boy when his mother beats him up because he beat up his sister? Does it make sense when he's told that he must learn to control his temper? Since we do not have the benefit of comparison when we are young, our parents are godlike figures to our childish eyes. When parents do things a certain way, it seems to the young child the way to do them, the way they should be done. If a child sees his parents day in and day out behaving with self-discipline, restraint, dignity and a capacity to order their own lives, then the child will come to feel in the deepest fibers of his being that this is the way to live. If a

child sees his parents day in and day out living without self-restraint or self-discipline, then he will come in the deepest fibers of being to believe that that is the way to live.

Yet even more important than role modeling is love. For even in chaotic and disordered homes genuine love is occasionally present, and from such homes may come self-disciplined children. And not infrequently parents who are professional people—doctors, lawyers, club women and philanthropists—who lead lives of strict orderliness and decorum but yet lack love, send children into the world who are as undisciplined and destructive and disorganized as any child from an impoverished and chaotic home.

Ultimately love is everything. The mystery of love will be examined in later portions of this work. Yet, for the sake of coherency, it may be helpful to make a brief but limited mention of it and its relationship to discipline at this point.

When we love something it is of value to us, and when something is of value to us we spend time with it, time enjoying it and time taking care of it. Observe a teenager in love with his car and note the time he will spend admiring it, polishing it, repairing it, tuning it. Or an older person with a beloved rose garden, and the time spent pruning and mulching and fertilizing and studying it. So it is when we love children; we spend time admiring them and caring for them. We give them our time.

Good discipline requires time. When we have no time to give our children, or no time that we are willing to give, we don't even observe them closely enough to become aware of when their need for our disciplinary assistance is expressed subtly. If their need for discipline is so gross as to impinge upon our consciousness, we may still ignore the need on the grounds that it's easier to let them have their own way—"I just don't have the energy to deal with them today." Or, finally, if we are impelled into action by their misdeeds and our irritation, we will impose discipline, often brutally, out of anger rather than deliberation, without examining the

problem or even taking the time to consider which form of discipline is the most appropriate to that particular problem.

The parents who devote time to their children even when it is not demanded by glaring misdeeds will perceive in them subtle needs for discipline, to which they will respond with gentle urging or reprimand or structure or praise, administered with thoughtfulness and care. They will observe how their children eat cake, how they study, when they tell subtle falsehoods, when they run away from problems rather than face them. They will take the time to make these minor corrections and adjustments, listening to their children, responding to them, tightening a little here, loosening a little there, giving them little lectures, little stories, little hugs and kisses, little admonishments, little pats on the back.

So it is that the quality of discipline afforded by loving parents is superior to the discipline of unloving parents. But this is just the beginning. In taking the time to observe and to think about their children's needs, loving parents will frequently agonize over the decisions to be made, and will, in a very real sense, suffer along with their children. The children are not blind to this. They perceive it when their parents are willing to suffer with them, and although they may not respond with immediate gratitude, they will learn also to suffer. "If my parents are willing to suffer with me," they will tell themselves, "then suffering must not be so bad, and I should be willing to suffer with myself." This is the beginning of self-discipline.

The time and the quality of the time that their parents devote to them indicate to children the degree to which they are valued by their parents. Some basically unloving parents, in an attempt to cover up their lack of caring, make frequent professions of love to their children, repetitively and mechanically telling them how much they are valued, but not devoting significant time of high quality to them. Their children are never totally deceived by such hollow words. Consciously they may cling to them, wanting to believe that they are

loved, but unconsciously they know that their parents' words do not match up with their deeds.

On the other hand, children who are truly loved, although in moments of pique they may consciously feel or proclaim that they are being neglected, unconsciously know themselves to be valued. This knowledge is worth more than any gold. For when children know that they are valued, when they truly feel valued in the deepest parts of themselves, then they feel valuable.

The feeling of being valuable—"I am a valuable person"—is essential to mental health and is a cornerstone of self-discipline. It is a direct product of parental love. Such a conviction must be gained in childhood; it is extremely difficult to acquire it during adulthood. Conversely, when children have learned through the love of their parents to feel valuable, it is almost impossible for the vicissitudes of adulthood to destroy their spirit.

This feeling of being valuable is a cornerstone of self-discipline because when one considers oneself valuable one will take care of oneself in all ways that are necessary. Self-discipline is self-caring. For instance—since we are discussing the process of delaying gratification, of scheduling and ordering time—let us examine the matter of time. If we feel ourselves valuable, then we will feel our time to be valuable, and if we feel our time to be valuable, then we will want to use it well. The financial analyst who procrastinated did not value her time. If she had, she would not have allowed herself to spend most of her day so unhappily and unproductively. It was not without consequence for her that throughout her childhood she was "farmed out" during all school vacations to live with paid foster parents although her parents could have taken care of her perfectly well had they wanted to. They did not value her. They did not want to care for her. So she grew up feeling herself to be of little value, not worth caring for; therefore she did not care for herself. She did not feel she was worth disciplining herself. Despite the fact that she was an intelligent and competent woman she required the most elementary in-

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struction in self-discipline because she lacked a realistic assessment of her own worth and the value of her own time. Once she was able to perceive her time as being valuable, it naturally followed that she wanted to organize it and protect it and make maximum use of it.

As a result of the experience of consistent parental love and caring throughout childhood, such fortunate children will enter adulthood not only with a deep internal sense of their own value but also with a deep internal sense of security. All children are terrified of abandonment, and with good reason. This fear of abandonment begins around the age of six months, as soon as the child is able to perceive itself to be an individual, separate from its parents. For with this perception of itself as an individual comes the realization that as an individual it is quite helpless, totally dependent and totally at the mercy of its parents for all forms of sustenance and means of survival. To the child, abandonment by its parents is the equivalent of death. Most parents, even when they are otherwise relatively ignorant or callous, are instinctively sensitive to their children's fear of abandonment and will therefore, day in and day out, hundreds and thousands of times, offer their children needed reassurance: "You know Mommy and Daddy aren't going to leave you behind"; "Of course Mommy and Daddy will come back to get you"; "Mommy and Daddy aren't going to forget about you." If these words are matched by deeds, month in and month out, year in and year out, by the time of adolescence the child will have lost the fear of abandonment and in its stead will have a deep inner feeling that the world is a safe place in which to be and protection will be there when it is needed. With this internal sense of the consistent safety of the world, such a child is free to delay gratification of one kind or another, secure in the knowledge that the opportunity for gratification, like home and parents, is always there, available when needed.

But many are not so fortunate. A substantial number of children actually are abandoned by their parents during childhood, by death, by desertion, by sheer negligence, or, as in

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the case of the financial analyst, by a simple lack of caring. Others, while not abandoned in fact, fail to receive from their parents the reassurance that they will not be abandoned. There are some parents, for instance, who in their desire to enforce discipline as easily and quickly as possible, will actually use the threat of abandonment, overtly or subtly, to achieve this end. The message they give to their children is: "If you don't do exactly what I want you to do I won't love you any more, and you can figure out for yourself what that might mean." It means, of course, abandonment and death. These parents sacrifice love in their need for control and domination over their children, and their reward is children who are excessively fearful of the future. So it is that these children, abandoned either psychologically or in actuality, enter adulthood lacking any deep sense that the world is a safe and protective place. To the contrary, they perceive the world as dangerous and frightening, and they are not about to forsake any gratification or security in the present for the promise of greater gratification or security in the future, since for them the future seems dubious indeed.

In summary, for children to develop the capacity to delay gratification, it is necessary for them to have self-disciplined role models, a sense of self-worth, and a degree of trust in the safety of their existence. These "possessions" are ideally acquired through the self-discipline and consistent, genuine caring of their parents; they are the most precious gifts of themselves that mothers and fathers can bequeath. When these gifts have not been proffered by one's parents, it is possible to acquire them from other sources, but in that case the process of their acquisition is invariably an uphill struggle, often of lifelong duration and often unsuccessful.

Problem-Solving and Time

Having touched upon some of the ways in which parental love or its lack may influence the development of self-discipline in general, and the capacity to delay gratification in particular, let us examine some of the more subtle yet quite devastating ways in which difficulties in delaying gratification affect the lives of most adults. For while most of us, fortunately, develop sufficient capacity to delay gratification to make it through high school or college and embark upon adulthood without landing in jail, our development nonetheless tends to be imperfect and incomplete, with the result that our ability to solve life's problems is still imperfect and incomplete.

At the age of thirty-seven I learned how to fix things. Prior to that time almost all my attempts to make minor plumbing repairs, mend toys or assemble boxed furniture according to the accompanying hieroglyphical instruction sheet ended in confusion, failure and frustration. Despite having managed to make it through medical school and support a family as a more or less successful executive and psychiatrist, I considered myself to be a mechanical idiot. I was convinced I was deficient in some gene, or by curse of nature lacking some mystical quality responsible for mechanical ability. Then one day at the end of my thirty-seventh year, while taking a spring Sunday walk, I happened upon a neighbor in the process of repairing a lawn mower. After greeting him I remarked, "Boy, I sure admire you. I've never been able to fix those kind of things or do anything like that." My neighbor, without a moment's hesitation, shot back, "That's because you don't

take the time." I resumed my walk, somehow disquieted by the gurulike simplicity, spontaneity and definitiveness of his response. "You don't suppose he could be right, do you?" I asked myself. Somehow it registered, and the next time the opportunity presented itself to make a minor repair I was able to remind myself to take my time. The parking brake was stuck on a patient's car, and she knew that there was something one could do under the dashboard to release it, but she didn't know what. I lay down on the floor below the front seat of her car. Then I took the time to make myself comfortable. Once I was comfortable, I then took the time to look at the situation. I looked for several minutes. At first all I saw was a confusing jumble of wires and tubes and rods, whose meaning I did not know. But gradually, in no hurry, I was able to focus my sight on the brake apparatus and trace its course. And then it became clear to me that there was a little latch preventing the brake from being released. I slowly studied this latch until it became clear to me that if I were to push it upward with the tip of my finger it would move easily and would release the brake. And so I did this. One single motion, one ounce of pressure from a fingertip, and the problem was solved. I was a master mechanic!

Actually, I don't begin to have the knowledge or the time to gain that knowledge to be able to fix most mechanical failures, given the fact that I choose to concentrate my time on nonmechanical matters. So I still usually go running to the nearest repairman. But I now know that this is a choice I make, and I am not cursed or genetically defective or otherwise incapacitated or impotent. And I know that I and anyone else who is not mentally defective can solve any problem if we are willing to take the time.

The issue is important, because many people simply do not take the time necessary to solve many of life's intellectual, social or spiritual problems, just as I did not take the time to solve mechanical problems. Before my mechanical enlightenment I would have awkwardly stuck my head under the dashboard of my patient's car, immediately yanked at a few wires

without having the foggiest idea of what I was doing, and then, when nothing constructive resulted, would have thrown up my hands and proclaimed "It's beyond me." And this is precisely the way that so many of us approach other dilemmas of day-to-day living. The aforementioned financial analyst was a basically loving and dedicated but rather helpless mother to her two young children. She was alert and concerned enough to perceive when her children were having some sort of emotional problem or when something was not working out in her child-raising. But then she inevitably took one of two courses of action with the children: either she made the very first change that came to her mind within a matter of seconds—making them eat more breakfast or sending them to bed earlier—regardless of whether such a change had anything to do with the problem, or else she came to her next therapy session with me (the repairman), despairing: "It's beyond me. What shall I do?" This woman had a perfectly keen and analytical mind, and when she didn't procrastinate, she was quite capable of solving complex problems at work. Yet when confronted with a personal problem, she behaved as if she were totally lacking in intelligence. The issue was one of time. Once she became aware of a personal problem, she felt so discomfited that she demanded an immediate solution, and she was not willing to tolerate her discomfort long enough to analyze the problem. The solution to the problem represented gratification to her, but she was unable to delay this gratification for more than a minute or two, with the result that her solutions were usually inappropriate and her family in chronic turmoil. Fortunately, through her own perseverance in therapy she was gradually able to learn how to discipline herself to take the time necessary to analyze family problems so as to develop well-thought-out and effective solutions.

We are not talking here about esoteric defects in problem-solving associated only with people who clearly manifest psychiatric disturbances. The financial analyst is everyman. Who among us can say that they unfailingly devote sufficient time to analyzing their children's problems or tensions within the

family? Who among us is so self-disciplined that he or she never says resignedly in the face of family problems, "It's beyond me"?

Actually, there is a defect in the approach to problem-solving more primitive and more destructive than impatiently inadequate attempts to find instant solutions, a defect even more ubiquitous and universal. It is the hope that problems will go away of their own accord. A thirty-year-old single salesman in group therapy in a small town began to date the recently separated wife of another group member, a banker. The salesman knew the banker to be a chronically angry man who was deeply resentful of his wife's leaving him. He knew that he was not being honest either with the group or with the banker by not confiding his relationship with the banker's wife. He also knew that it was almost inevitable that sooner or later the banker would learn about the continuing relationship. He knew that the only solution to the problem would be to confess the relationship to the group and bear the banker's anger with the group's support. But he did nothing. After three months the banker found out about the friendship, was predictably enraged, and used the incident to quit his therapy. When confronted by the group with his destructive behavior the salesman said: "I knew that talking about it would be a hassle, and I guess I felt that if I did nothing, maybe I could get away with it without the hassle. I guess I thought that if I waited long enough the problem might go away."

Problems do not go away. They must be worked through or else they remain, forever a barrier to the growth and development of the spirit.

The group made the salesman aware in no uncertain terms that his tendency to avoid problem-solving by ignoring a problem in the hope that it would go away was in itself his major problem. Four months later, in the early autumn, the salesman fulfilled a fantasy by rather suddenly quitting his sales job and starting his own furniture-repair business, which would not require him to travel. The group deplored the fact that he was putting all his eggs in one basket and also ques-

tioned the wisdom of making the move with winter coming on, but the salesman assured them he would make enough to get by in his new business. The subject was dropped. Then in early February he announced that he would have to quit the group because he could no longer pay the fee. He was dead broke and would have to start looking for another job. In five months he had repaired a total of eight pieces of furniture. When asked why he hadn't started looking for a job sooner, he replied: "I knew six weeks ago that I was running through my money fast, but somehow I couldn't believe that it would come to this point. The whole thing just didn't seem very urgent, but, boy, it's urgent now." He had, of course, ignored his problem. Slowly it began to dawn on him that until he solved his problem of ignoring problems he would never get beyond step one—even with all the psychotherapy in the world.

This inclination to ignore problems is once again a simple manifestation of an unwillingness to delay gratification. Confronting problems is, as I have said, painful. To willingly confront a problem early, before we are forced to confront it by circumstances, means to put aside something pleasant or less painful for something more painful. It is choosing to suffer now in the hope of future gratification rather than choosing to continue present gratification in the hope that future suffering will not be necessary.

It may seem that the salesman who ignored such obvious problems was emotionally immature or psychologically primitive, but, again, I tell you he is everyman and his immaturity and primitiveness exist in us all. A great general, commander of an army, once told me, "The single greatest problem in this army, or I guess in any organization, is that most of the executives will sit looking at problems in their units, staring them right in the face, doing nothing, as if these problems will go away if they sit there long enough." The general wasn't talking about the mentally weak or abnormal. He was talking about other generals and senior colonels, mature men of proven capability and trained in discipline.

Parents are executives, and despite the fact that they are usually ill-prepared for it, their task can be every bit as complex as directing a company or corporation. And like the army executives, most parents will perceive problems in their children or in their relationship with their children for months or years before they take any effective action, if they ever do. "We thought maybe he would grow out of it," the parents say as they come to the child psychiatrist with a problem of five years' duration. And with respect for the complexity of parenting, it must be said that parental decisions are difficult, and that children often do "grow out of it." But it almost never hurts to try to help them grow out of it or to look more closely at the problem. And while children often "grow out of it," often they do not; and as with so many problems, the longer children's problems are ignored, the larger they become and the more painful and difficult to solve.

Responsibility

We cannot solve life's problems except by solving them. This statement may seem idiotically tautological or self-evident, yet it is seemingly beyond the comprehension of much of the human race. This is because we must accept responsibility for a problem before we can solve it. We cannot solve a problem by saying "It's not my problem." We cannot solve a problem by hoping that someone else will solve it for us. I can solve a problem only when I say "This is *my* problem and it's up to me to solve it." But many, so many, seek to avoid the pain of their problems by saying to themselves: "This problem was caused me by other people, or by social circumstances beyond my control, and therefore it is up to other

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people or society to solve this problem for me. It is not really my personal problem."

The extent to which people will go psychologically to avoid assuming responsibility for personal problems, while always sad, is sometimes almost ludicrous. A career sergeant in the army, stationed in Okinawa and in serious trouble because of his excessive drinking, was referred for psychiatric evaluation and, if possible, assistance. He denied that he was an alcoholic, or even that his use of alcohol was a personal problem, saying, "There's nothing else to do in the evenings in Okinawa except drink."

"Do you like to read?" I asked.

"Oh yes, I like to read, sure."

"Then why don't you read in the evening instead of drinking?"

"It's too noisy to read in the barracks."

"Well, then, why don't you go to the library?"

"The library is too far away."

"Is the library farther away than the bar you go to?"

"Well, I'm not much of a reader. That's not where my interests lie."

"Do you like to fish?" I then inquired.

"Sure, I love to fish."

"Why not go fishing instead of drinking?"

"Because I have to work all day long."

"Can't you go fishing at night?"

"No, there isn't any night fishing in Okinawa."

"But there is," I said. "I know several organizations that fish at night here. Would you like me to put you in touch with them?"

"Well, I really don't like to fish."

"What I hear you saying," I clarified, "is that there are other things to do in Okinawa except drink, but the thing you like to do most in Okinawa is drink."

"Yeah, I guess so."

"But your drinking is getting you in trouble, so you're faced with a real problem, aren't you?"

"This damn island would drive anyone to drink."

I kept trying for a while, but the sergeant was not the least bit interested in seeing his drinking as a personal problem which he could solve either with or without help, and I regretfully told his commander that he was not amenable to assistance. His drinking continued, and he was separated from the service in mid-career.

A young wife, also in Okinawa, cut her wrist lightly with a razor blade and was brought to the emergency room, where I saw her. I asked her why she had done this to herself.

"To kill myself, of course."

"Why do you want to kill yourself?"

"Because I can't stand it on this dumb island. You have to send me back to the States. I'm going to kill myself if I have to stay here any longer."

"What is it about living in Okinawa that's so painful for you?" I asked.

She began to cry in a whining sort of way. "I don't have any friends here, and I'm alone all the time."

"That's too bad. How come you haven't been able to make any friends?"

"Because I have to live in a stupid Okinawan housing area, and none of my neighbors speak English."

"Why don't you drive over to the American housing area or to the wives' club during the day so you can make some friends?"

"Because my husband has to drive the car to work."

"Can't you drive him to work, since you're alone and bored all day?" I asked.

"No. It's a stick-shift car, and I don't know how to drive a stick-shift car, only an automatic."

"Why don't you learn how to drive a stick-shift car?"

She glared at me. "On these roads? You must be crazy."

Neuroses and Character Disorders

Most people who come to see a psychiatrist are suffering from what is called either a neurosis or a character disorder. Put most simply, these two conditions are disorders of responsibility, and as such they are opposite styles of relating to the world and its problems. The neurotic assumes too much responsibility; the person with a character disorder not enough. When neurotics are in conflict with the world they automatically assume that they are at fault. When those with character disorders are in conflict with the world they automatically assume that the world is at fault. The two individuals just described had character disorders: the sergeant felt that his drinking was Okinawa's fault, not his, and the wife also saw herself as playing no role whatsoever in her own isolation. A neurotic woman, on the other hand, also suffering from loneliness and isolation on Okinawa, complained: "I drive over to the Non-Commissioned Officers' Wives Club every day to look for friendship, but I don't feel at ease there. I think that the other wives don't like me. Something must be wrong with me. I should be able to make friends more easily. I ought to be more outgoing. I want to find out what it is about me that makes me so unpopular." This woman assumed total responsibility for her loneliness, feeling she was entirely to blame. What she found out in the course of therapy was that she was an unusually intelligent and ambitious person and that she was ill at ease with the other sergeants' wives, as well as with her husband, because she was considerably more intelligent and ambitious than they. She became able to see that her loneliness, while her problem, was not necessarily

due to a fault or defect of her own. Ultimately she was divorced, put herself through college while raising her children, became a magazine editor, and married a successful publisher.

Even the speech patterns of neurotics and those with character disorders are different. The speech of the neurotic is notable for such expressions as "I ought to," "I should," and "I shouldn't," indicating the individual's self-image as an inferior man or woman, always falling short of the mark, always making the wrong choices. The speech of a person with a character disorder, however, relies heavily on "I can't," "I couldn't," "I have to," and "I had to," demonstrating a self-image of a being who has no power of choice, whose behavior is completely directed by external forces totally beyond his or her control. As might be imagined, neurotics, compared with character-disordered people, are easy to work with in psychotherapy because they assume responsibility for their difficulties and therefore see themselves as having problems. Those with character disorders are much more difficult, if not impossible, to work with because they don't see themselves as the source of their problems; they see the world rather than themselves as being in need of change and therefore fail to recognize the necessity for self-examination. In actuality, many individuals have both a neurosis and a character disorder and are referred to as "character neurotics," indicating that in some areas of their lives they are guilt-ridden by virtue of having assumed responsibility that is not really theirs, while in other areas of their lives they fail to take realistic responsibility for themselves. Fortunately, once having established the faith and trust of such individuals in the psychotherapy process through helping them with the neurotic part of their personalities, it is often possible then to engage them in examining and correcting their unwillingness to assume responsibility where appropriate.

Few of us can escape being neurotic or character disordered to at least some degree (which is why essentially everyone can benefit from psychotherapy if he or she is seriously willing to participate in the process). The reason for this is that the

problem of distinguishing what we are and what we are not responsible for in this life is one of the greatest problems of human existence. It is never completely solved; for the entirety of our lives we must continually assess and reassess where our responsibilities lie in the ever-changing course of events. Nor is this assessment and reassessment painless if performed adequately and conscientiously. To perform either process adequately we must possess the willingness and the capacity to suffer continual self-examination. And such capacity or willingness is not inherent in any of us. In a sense all children have character disorders, in that their instinctual tendency is to deny their responsibility for many conflicts in which they find themselves. Thus two siblings fighting will always blame each other for initiating the fight and each will totally deny that he or she may have been the culprit. Similarly, all children have neuroses, in that they will instinctually assume responsibility for certain deprivations that they experience but do not yet understand. Thus the child who is not loved by his parents will always assume himself or herself to be unlovable rather than see the parents as deficient in their capacity to love. Or early adolescents who are not yet successful at dating or at sports will see themselves as seriously deficient human beings rather than the late or even average but perfectly adequate bloomers they usually are. It is only through a vast amount of experience and a lengthy and successful maturation that we gain the capacity to see the world and our place in it realistically, and thus are enabled to realistically assess our responsibility for ourselves and the world.

There is much that parents can do to assist their children in this maturation process. Opportunities present themselves thousands of times while children are growing up when parents can either confront them with their tendency to avoid or escape responsibility for their own actions or can reassure them that certain situations are not their fault. But to seize these opportunities, as I have said, requires of parents sensitivity to their children's needs and the willingness to take the time and make the often uncomfortable effort to meet these

needs. And this in turn requires love and the willingness to assume appropriate responsibility for the enhancement of their children's growth.

Conversely, even above and beyond simple insensitivity or neglect, there is much that many parents do to hinder this maturation process. Neurotics, because of their willingness to assume responsibility, may be quite excellent parents if their neuroses are relatively mild and they are not so overwhelmed by unnecessary responsibilities that they have scant energy left for the necessary responsibilities of parenthood. Character-disordered people, however, make disastrous parents, blissfully unaware that they often treat their children with vicious destructiveness. It is said that "neurotics make themselves miserable; those with character disorders make everyone else miserable." Chief among the people character-disordered parents make miserable are their children. As in other areas of their lives, they fail to assume adequate responsibility for their parenting. They tend to brush off their children in thousands of little ways rather than provide them with needed attention. When their children are delinquent or are having difficulty in school, character-disordered parents will automatically lay the blame on the school system or on other children who, they insist, are a "bad influence" on their own children. This attitude, of course, ignores the problem. Because they duck responsibility, character-disordered parents serve as role models of irresponsibility for their children. Finally, in their efforts to avoid responsibility for their own lives, character-disordered parents will often lay this responsibility upon their children: "You kids are driving me nuts," or "The only reason I stay married to your father [mother] is because of you kids," or "Your mother's a nervous wreck because of you," or "I could have gone to college and been a success if it weren't for having to support you." In such ways these parents in effect say to their children, "You are responsible for the quality of my marriage, my mental health and my lack of success in life." Since they lack the capacity to see how inappropriate this is, the children will often accept this

responsibility, and insofar as they do accept it, they will become neurotic. It is in such ways that character-disordered parents almost invariably produce character-disordered or neurotic children. It is the parents themselves who visit their sins upon their children.

It is not simply in their role as parents that character-disordered individuals are ineffective and destructive; these same character traits usually extend to their marriages, their friendships and their business dealings—to any area of their existence in which they fail to assume responsibility for its quality. This is inevitable since, as has been said, no problem can be solved until an individual assumes the responsibility for solving it. When character-disordered individuals blame someone else—a spouse, a child, a friend, a parent, an employer—or something else—bad influences, the schools, the government, racism, sexism, society, the “system”—for their problems, these problems persist. Nothing has been accomplished. By casting away their responsibility they may feel comfortable with themselves, but they have ceased to solve the problems of living, have ceased to grow spiritually, and have become dead weight for society. They have cast their pain onto society. The saying of the sixties (attributed to Eldridge Cleaver) speaks to all of us for all time: “If you are not part of the solution, then you are part of the problem.”

When a psychiatrist makes the diagnosis of a character disorder, it is because the pattern of avoidance of responsibility is relatively gross in the diagnosed individual. Yet almost all of us from time to time seek to avoid—in ways that can be

quite subtle—the pain of assuming responsibility for our own problems. For the cure of my own subtle character disorder at the age of thirty I am indebted to Mac Badgely. At the time Mac was the director of the outpatient psychiatric clinic where I was completing my psychiatry residency training. In this clinic my fellow residents and I were assigned new patients on rotation. Perhaps because I was more dedicated to my patients and my own education than most of my fellow residents, I found myself working much longer hours than they. They ordinarily saw patients only once a week. I often saw my patients two or three times a week. As a result I would watch my fellow residents leaving the clinic at four-thirty each afternoon for their homes, while I was scheduled with appointments up to eight or nine o'clock at night, and my heart was filled with resentment. As I became more and more resentful and more and more exhausted I realized that something had to be done. So I went to Dr. Badgely and explained the situation to him. I wondered whether I might be exempted from the rotation of accepting new patients for a few weeks so that I might have time to catch up. Did he think that was feasible? Or could he think of some other solution to the problem? Mac listened to me very intently and receptively, not interrupting once. When I was finished, after a moment's silence, he said to me very sympathetically, "Well, I can see that you do have a problem."

I beamed, feeling understood. "Thank you," I said. "What do you think should be done about it?"

To this Mac replied, "I told you, Scott, you do have a problem."

This was hardly the response I expected. "Yes," I said, slightly annoyed, "I know I have a problem. That's why I came to see you. What do you think I ought to do about it?"

Mac responded: "Scott, apparently you haven't listened to what I said. I have heard you, and I am agreeing with you. You do have a problem."

"Goddammit," I said, "I know I have a problem. I knew

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that when I came in here. The question is, what am I going to do about it?"

"Scott," Mac replied, "I want you to listen. Listen closely and I will say it again. I agree with you. You do have a problem. Specifically, you have a problem with time. *Your* time. Not my time. It's not my problem. It's *your* problem with *your* time. You, Scott Peck, have a problem with your time. That's all I'm going to say about it."

I turned and strode out of Mac's office, furious. And I stayed furious. I hated Mac Badgely. For three months I hated him. I felt that he had a severe character disorder. How else could he be so callous? Here I had gone to him humbly asking for just a little bit of help, a little bit of advice, and the bastard wasn't even willing to assume enough responsibility even to try to help me, even to do his job as director of the clinic. If he wasn't supposed to help manage such problems as director of the clinic, what the hell was he supposed to do?

But after three months I somehow came to see that Mac was right, that it was I, not he, who had the character disorder. My time *was* my responsibility. It was up to me and me alone to decide how I wanted to use and order my time. If I wanted to invest my time more heavily than my fellow residents in my work, then that was my choice, and the consequences of that choice were my responsibility. It might be painful for me to watch my fellow residents leave their offices two or three hours before me, and it might be painful to listen to my wife's complaints that I was not devoting myself sufficiently to the family, but these pains were the consequence of a choice that I had made. If I did not want to suffer them, then I was free to choose not to work so hard and to structure my time differently. My working hard was not a burden cast upon me by hardhearted fate or a hardhearted clinic director; it was the way I had chosen to live my life and order my priorities. As it happened, I chose not to change my life style. But with my change in attitude, my resentment of my fellow residents vanished. It simply no longer made any sense to

resent them for having chosen a life style different from mine when I was completely free to choose to be like them if I wanted to. To resent them was to resent my own choice to be different from them, a choice that I was happy with.

The difficulty we have in accepting responsibility for our behavior lies in the desire to avoid the pain of the consequences of that behavior. By requesting Mac Badgely to assume responsibility for the structure of my time I was attempting to avoid the pain of working long hours, even though working long hours was an inevitable consequence of my choice to be dedicated to my patients and my training. Yet in so doing I was also unwittingly seeking to increase Mac's authority over me. I was giving him my power, my freedom. I was saying in effect, "Take charge of me. You be the boss!" Whenever we seek to avoid the responsibility for our own behavior, we do so by attempting to give that responsibility to some other individual or organization or entity. But this means we then give away our power to that entity, be it "fate" or "society" or the government or the corporation or our boss. It is for this reason that Erich Fromm so aptly titled his study of Nazism and authoritarianism *Escape from Freedom*. In attempting to avoid the pain of responsibility, millions and even billions daily attempt to escape from freedom.

I have a brilliant but morose acquaintance who, when I allow him to, will speak unceasingly and eloquently of the oppressive forces in our society: racism, sexism, the military-industrial establishment, and the country police who pick on him and his friends because of their long hair. Again and again I have tried to point out to him that he is not a child. As children, by virtue of our real and extensive dependency, our parents have real and extensive power over us. They are, in fact, largely responsible for our well-being, and we are, in fact, largely at their mercy. When parents are oppressive, as so often they are, we as children are largely powerless to do anything about it; our choices are limited. But as adults, when we are physically healthy, our choices are almost unlimited.

That does not mean they are not painful. Frequently our choices lie between the lesser of two evils, but it is still within our power to make these choices. Yes, I agree with my acquaintance, there are indeed oppressive forces at work within the world. We have, however, the freedom to choose every step of the way the manner in which we are going to respond to and deal with these forces. It is his choice to live in an area of the country where the police don't like "long-haired types" and still grow his hair long. He has the freedom to move to the city, or to cut his hair, or even to wage a campaign for the office of police commissioner. But despite his brilliance, he does not acknowledge these freedoms. He chooses to lament his lack of political power instead of accepting and exulting in his immense personal power. He speaks of his love of freedom and of the oppressive forces that thwart it, but every time he speaks of how he is victimized by these forces he actually is giving away his freedom. I hope that some day soon he will stop resenting life simply because some of its choices are painful.*

Dr. Hilde Bruch, in the preface to her book *Learning Psychotherapy*, states that basically all patients come to psychiatrists with "one common problem: the sense of helplessness, the fear and inner conviction of being unable to 'cope' and to change things."† One of the roots of this "sense of impotence" in the majority of patients is some desire to partially or totally escape the pain of freedom, and, therefore, some failure, partial or total, to accept responsibility for their problems and their lives. They feel impotent because they have, in fact, given their power away. Sooner or later, if they are to be

* Nowhere, to my knowledge, is the issue of the freedom to choose between two evils more eloquently and even poetically defined than by the psychiatrist Allen Wheelis, in the chapter "Freedom and Necessity" in his book *How People Change* (New York: Harper & Row, 1973). It was tempting to quote the chapter in its entirety, and I recommend it to anyone who desires to explore the issue more fully.

† Cambridge, Mass., Harvard Univ. Press, 1974, p. ix.

healed, they must learn that the entirety of one's adult life is a series of personal choices, decisions. If they can accept this totally, then they become free people. To the extent that they do not accept this they will forever feel themselves victims.

Dedication to Reality

The third tool of discipline or technique of dealing with the pain of problem-solving, which must continually be employed if our lives are to be healthy and our spirits are to grow, is dedication to the truth. Superficially, this should be obvious. For truth is reality. That which is false is unreal. The more clearly we see the reality of the world, the better equipped we are to deal with the world. The less clearly we see the reality of the world—the more our minds are befuddled by falsehood, misperceptions and illusions—the less able we will be to determine correct courses of action and make wise decisions. Our view of reality is like a map with which to negotiate the terrain of life. If the map is true and accurate, we will generally know where we are, and if we have decided where we want to go, we will generally know how to get there. If the map is false and inaccurate, we generally will be lost.

While this is obvious, it is something that most people to a greater or lesser degree choose to ignore. They ignore it because our route to reality is not easy. First of all, we are not born with maps; we have to make them, and the making requires effort. The more effort we make to appreciate and perceive reality, the larger and more accurate our maps will be. But many do not want to make this effort. Some stop making it by the end of adolescence. Their maps are small and sketchy, their views of the world narrow and misleading.

By the end of middle age most people have given up the effort. They feel certain that their maps are complete and their Weltschauung is correct (indeed, even sacrosanct), and they are no longer interested in new information. It is as if they are tired. Only a relative and fortunate few continue until the moment of death exploring the mystery of reality, ever enlarging and refining and redefining their understanding of the world and what is true.

But the biggest problem of map-making is not that we have to start from scratch, but that if our maps are to be accurate we have to continually revise them. The world itself is constantly changing. Glaciers come, glaciers go. Cultures come, cultures go. There is too little technology, there is too much technology. Even more dramatically, the vantage point from which we view the world is constantly and quite rapidly changing. When we are children we are dependent, powerless. As adults we may be powerful. Yet in illness or an infirm old age we may become powerless and dependent again. When we have children to care for, the world looks different from when we have none; when we are raising infants, the world seems different from when we are raising adolescents. When we are poor, the world looks different from when we are rich. We are daily bombarded with new information as to the nature of reality. If we are to incorporate this information, we must continually revise our maps, and sometimes when enough new information has accumulated, we must make very major revisions. The process of making revisions, particularly major revisions, is painful, sometimes excruciatingly painful. And herein lies the major source of many of the ills of mankind.

What happens when one has striven long and hard to develop a working view of the world, a seemingly useful, workable map, and then is confronted with new information suggesting that that view is wrong and the map needs to be largely redrawn? The painful effort required seems frightening, almost overwhelming. What we do more often than not, and usually unconsciously, is to ignore the new information.

Often this act of ignoring is much more than passive. We may denounce the new information as false, dangerous, heretical, the work of the devil. We may actually crusade against it, and even attempt to manipulate the world so as to make it conform to our view of reality. Rather than try to change the map, an individual may try to destroy the new reality. Sadly, such a person may expend much more energy ultimately in defending an outmoded view of the world than would have been required to revise and correct it in the first place.

Transference: The Outdated Map

This process of active clinging to an outmoded view of reality is the basis for much mental illness. Psychiatrists refer to it as transference. There are probably as many subtle variations of the definition of transference as there are psychiatrists. My own definition is: Transference is that set of ways of perceiving and responding to the world which is developed in childhood and which is usually entirely appropriate to the childhood environment (indeed, often life-saving) but which is *inappropriately transferred* into the adult environment.

The ways in which transference manifests itself, while always pervasive and destructive, are often subtle. Yet the clearest examples must be unsubtle. One such example was a patient whose treatment failed by virtue of his transference. He was a brilliant but unsuccessful computer technician in his early thirties, who came to see me because his wife had left him, taking their two children. He was not particularly unhappy to lose her, but he was devastated by the loss of his children, to whom he was deeply attached. It was in the hope of regaining them that he initiated psychotherapy, since his

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wife firmly stated she would never return to him unless he had psychiatric treatment. Her principal complaints about him were that he was continually and irrationally jealous of her, and yet at the same time aloof from her, cold, distant, uncommunicative and unaffectionate. She also complained of his frequent changes of employment. His life since adolescence had been markedly unstable. During adolescence he was involved in frequent minor altercations with the police, and had been jailed three times for intoxication, belligerence, "loitering," and "interfering with the duties of an officer." He dropped out of college, where he was studying electrical engineering, because, as he said, "My teachers were a bunch of hypocrites, hardly different from the police." Because of his brilliance and creativeness in the field of computer technology, his services were in high demand by industry. But he had never been able to advance or keep a job for more than a year and a half, occasionally being fired, more often quitting after disputes with his supervisors, whom he described as "liars and cheats, interested only in protecting their own ass." His most frequent expression was "You can't trust a goddamn soul." He described his childhood as "normal" and his parents as "average." In the brief period of time he spent with me, however, he casually and unemotionally recounted numerous instances during childhood in which his parents had let him down. They promised him a bike for his birthday, but they forgot about it and gave him something else. Once they forgot his birthday entirely, but he saw nothing drastically wrong with this since "they were very busy." They would promise to do things with him on weekends, but then were usually "too busy." Numerous times they forgot to pick him up from meetings or parties because "they had a lot on their minds."

What happened to this man was that when he was a young child he suffered painful disappointment after painful disappointment through his parents' lack of caring. Gradually or suddenly—I don't know which—he came to the agonizing realization in mid-childhood that he could not trust his parents. Once he realized this, however, he began to feel better,

and his life became more comfortable. He no longer expected things from his parents or got his hopes up when they made promises. When he stopped trusting his parents the frequency and severity of his disappointments diminished dramatically.

Such an adjustment, however, is the basis for future problems. To a child his or her parents are everything; they represent the world. The child does not have the perspective to see that other parents are different and frequently better. He assumes that the way his parents do things is the way that things are done. Consequently the realization—the “reality”—that this child came to was not “I can’t trust my parents” but “I can’t trust people.” Not trusting people therefore became the map with which he entered adolescence and adulthood. With this map and with an abundant store of resentment resulting from his many disappointments, it was inevitable that he came into conflict after conflict with authority figures—police, teacher, employers. And these conflicts only served to reinforce his feeling that people who had anything to give him in the world couldn’t be trusted. He had many opportunities to revise his map, but they were all passed up. For one thing, the only way he could learn that there were some people in the adult world he could trust would be to risk trusting them, and that would require a deviation from his map to begin with. For another, such relearning would require him to revise his view of his parents—to realize that they did not love him, that he did not have a normal childhood and that his parents were not average in their callousness to his needs. Such a realization would have been extremely painful. Finally, because his distrust of people was a realistic adjustment to the reality of his childhood, it was an adjustment that worked in terms of diminishing his pain and suffering. Since it is extremely difficult to give up an adjustment that once worked so well, he continued his course of distrust, unconsciously creating situations that served to reinforce it, alienating himself from everyone, making it impossible for himself to enjoy love, warmth, intimacy and affection. He could not even allow himself closeness with his wife; she, too,

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could not be trusted. The only people he could relate with intimately were his two children. They were the only ones over whom he had control, the only ones who had no authority over him, the only ones he could trust in the whole world.

When problems of transference are involved, as they usually are, psychotherapy is, among other things, a process of map-revising. Patients come to therapy because their maps are clearly not working. But how they may cling to them and fight the process every step of the way! Frequently their need to cling to their maps and fight against losing them is so great that therapy becomes impossible, as it did in the case of the computer technician. Initially he requested a Saturday appointment. After three sessions he stopped coming because he took a job doing lawn-maintenance work on Saturdays and Sundays. I offered him a Thursday-evening appointment. He came for two sessions and then stopped because he was doing overtime work at the plant. I then rearranged my schedule so I could see him on Monday evenings, when, he had said, overtime work was unlikely. After two more sessions, however, he stopped coming because Monday-night overtime work seemed to have picked up. I confronted him with the impossibility of doing therapy under these circumstances. He admitted that he was not required to accept overtime work. He stated, however, that he needed the money and that the work was more important to him than therapy. He stipulated that he could see me only on those Monday evenings when there was no overtime work to be done and that he would call me at four o'clock every Monday afternoon to tell me if he could keep his appointment that evening. I told him that these conditions were not acceptable to me, that I was unwilling to set aside my plans every Monday evening on the chance that he might be able to come to his sessions. He felt that I was being unreasonably rigid, that I had no concern for his needs, that I was interested only in my own time and clearly cared nothing for him, and that therefore I could not be trusted. It was on this basis that our attempt to work together was terminated, with me as another landmark on his old map.

The problem of transference is not simply a problem between psychotherapists and their patients. It is a problem between parents and children, husbands and wives, employers and employees, between friends, between groups, and even between nations. It is interesting to speculate, for instance, on the role that transference issues play in international affairs. Our national leaders are human beings who all had childhoods and childhood experiences that shaped them. What map was Hitler following, and where did it come from? What map were American leaders following in initiating, executing and maintaining the war in Vietnam? Clearly it was a map very different from that of the generation that succeeded theirs. In what ways did the national experience of the Depression years contribute to their map, and the experience of the fifties and sixties contribute to the map of the younger generation? If the national experience of the thirties and forties contributed to the behavior of American leaders in waging war in Vietnam, how appropriate was that experience to the realities of the sixties and seventies? How can we revise our maps more rapidly?

Truth or reality is avoided when it is painful. We can revise our maps only when we have the discipline to overcome that pain. To have such discipline, we must be totally dedicated to truth. That is to say that we must always hold truth, as best we can determine it, to be more important, more vital to our self-interest, than our comfort. Conversely, we must always consider our personal discomfort relatively unimportant and, indeed, even welcome it in the service of the search for truth. Mental health is an ongoing process of dedication to reality at all costs.

Openness to Challenge

What does a life of total dedication to the truth mean? It means, first of all, a life of continuous and never-ending stringent self-examination. We know the world only through our relationship to it. Therefore, to know the world, we must not only examine it but we must simultaneously examine the examiner. Psychiatrists are taught this in their training and know that it is impossible to realistically understand the conflicts and transferences of their patients without understanding their own transferences and conflicts. For this reason psychiatrists are encouraged to receive their own psychotherapy or psychoanalysis as part of their training and development. Unfortunately, not all psychiatrists respond to this encouragement. There are many, psychiatrists among them, who stringently examine the world but not so stringently examine themselves. They may be competent individuals as the world judges competence, but they are never wise. The life of wisdom must be a life of contemplation combined with action. In the past in American culture, contemplation has not been held in high regard. In the 1950s people labeled Adlai Stevenson an "egghead" and believed he would not make a good President precisely because he was a contemplative man, given to deep thinking and self-doubts. I have heard parents tell their adolescent children in all seriousness, "You think too much." What an absurdity this is, given the fact that it is our frontal lobes, our capacity to think and to examine ourselves that most makes us human. Fortunately, such attitudes seem to be changing, and we are beginning to realize that the sources of danger to the world lie more within us than

outside, and that the process of constant self-examination and contemplation is essential for ultimate survival. Still, I am talking of relatively small numbers of people who are changing their attitudes. Examination of the world without is never as personally painful as examination of the world within, and it is certainly because of the pain involved in a life of genuine self-examination that the majority steer away from it. Yet when one is dedicated to the truth this pain seems relatively unimportant—and less and less important (and therefore less and less painful) the farther one proceeds on the path of self-examination.

A life of total dedication to the truth also means a life of willingness to be personally challenged. The only way that we can be certain that our map of reality is valid is to expose it to the criticism and challenge of other map-makers. Otherwise we live in a closed system—within a bell jar, to use Sylvia Plath's analogy, rebreathing only our own fetid air, more and more subject to delusion. Yet, because of the pain inherent in the process of revising our map of reality, we mostly seek to avoid or ward off any challenges to its validity. To our children we say, "Don't talk back to me, I'm your parent." To our spouse we give the message, "Let's live and let live. If you criticize me, I'll be a bitch to live with, and you'll regret it." To their families and the world the elderly give the message, "I am old and fragile. If you challenge me I may die or at least you will bear upon your head the responsibility for making my last days on earth miserable." To our employees we communicate, "If you are bold enough to challenge me at all, you had best do so very circumspectly indeed or else you'll find yourself looking for another job."*

* Not only individuals but also organizations are notorious for protecting themselves against challenge. I was once directed by the Chief of Staff of the Army to prepare an analysis of the psychological causes of the My Lai atrocities and their subsequent cover-up, with recommendations for research that might prevent such behavior in the future. The recommendations were disapproved by the Army general staff on the basis that the research recommended could not be kept secret. "The

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The tendency to avoid challenge is so omnipresent in human beings that it can properly be considered a characteristic of human nature. But calling it natural does not mean it is essential or beneficial or unchangeable behavior. It is also natural to defecate in our pants and never brush our teeth. Yet we teach ourselves to do the unnatural until the unnatural becomes itself second nature. Indeed, all self-discipline might be defined as teaching ourselves to do the unnatural. Another characteristic of human nature—perhaps the one that makes us most human—is our capacity to do the unnatural, to transcend and hence transform our own nature.

No act is more unnatural, and hence more human, than the act of entering psychotherapy. For by this act we deliberately lay ourselves open to the deepest challenge from another human being, and even pay the other for the service of scrutiny and discernment. This laying open to challenge is one of the things that lying on the couch in the psychoanalyst's office may symbolize. Entering psychotherapy is an act of the greatest courage. The primary reason people do not undergo psychotherapy is not that they lack the money but that they lack the courage. This even includes many psychiatrists them-

existence of such research might open us up to further challenge. The President and the Army don't need more challenges at this time," I was told. Thus an analysis of the reasons for an incident that was covered up was itself covered up. Such behavior is not limited to the military or the White House; to the contrary, it is common to Congress, other federal agencies, corporations, even universities and charitable organizations—in short, all human organizations. Just as it is necessary for individuals to accept and even welcome challenges to their maps of reality and *modi operandi* if they are to grow in wisdom and effectiveness, so it is also necessary for organizations to accept and welcome challenges if they are to be viable and progressive institutions. This fact is being increasingly recognized by such individuals as John Gardner of Common Cause, to whom it is clear that one of the most exciting and essential tasks facing our society in the next few decades is to build into the bureaucratic structure of our organizations an institutionalized openness and responsiveness to challenge which will replace the institutionalized resistance currently typical.

selves, who somehow never quite seem to find it convenient to enter their own therapy despite the fact that they have even more reason than others to submit themselves to the discipline involved. It is because they possess this courage, on the other hand, that many psychoanalytic patients, even at the outset of therapy and contrary to their stereotypical image, are people who are basically much stronger and healthier than average.

While undergoing psychotherapy is an ultimate form of being open to challenge, our more ordinary interactions daily offer us similar opportunities to risk openness: at the water cooler, in conference, on the golf course, at the dinner table, in bed when the lights are out; with our colleagues, our supervisors and employees, with our mates, our friends, our lovers, with our parents and our children. A neatly coiffured woman who had been seeing me for some time began to comb her hair each time she got up from the couch at the end of a session. I commented on this new pattern to her behavior. "Several weeks ago my husband noticed that my hairdo was flattened in the back after I returned from a session," she explained, blushing. "I didn't tell him why. I'm afraid he might tease me if he knows I lie on the couch in here." So we had another issue to work on. The greatest value of psychotherapy derives from the extension of the discipline involved during the "fifty-minute hour" into the patient's daily affairs and relationships. The healing of the spirit has not been completed until openness to challenge becomes a way of life. This woman would not be wholly well until she could be as forthright with her husband as she was with me.

Of all those who come to a psychiatrist or psychotherapist very few are initially looking on a conscious level for challenge or an education in discipline. Most are simply seeking "relief." When they realize they are going to be challenged as well as supported, many flee and others are tempted to flee. Teaching them that the only real relief will come through challenge and discipline is a delicate, often lengthy and frequently unsuc-

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cessful task. We speak, therefore, of "seducing" patients into psychotherapy. And we may say of some patients whom we have been seeing for a year or more, "They have not really entered therapy yet."

Openness in psychotherapy is particularly encouraged (or demanded, depending upon your point of view) by the technique of "free association." When this technique is used the patient is told: "Put into words whatever comes into your mind, no matter how seemingly insignificant or embarrassing or painful or meaningless. If there is more than one thing in your mind at the same time, then you are to choose to speak that thing about which you are most reluctant to speak." It's easier said than done. Nonetheless, those who work at it conscientiously usually make swift progress. But some are so resistant to challenge that they simply pretend to free-associate. They talk volubly enough about this or that, but they leave out the crucial details. A woman may speak for an hour about unpleasant childhood experiences but neglect to mention that her husband had confronted her in the morning with the fact that she had overdrawn their bank account by a thousand dollars. Such patients attempt to transform the psychotherapeutic hour into a kind of press conference. At best they are wasting time in their effort to avoid challenge, and usually they are indulging in a subtle form of lying.

For individuals and organizations to be open to challenge, it is necessary that their maps of reality be *truly* open for inspection by the public. More than press conferences are required. The third thing that a life of total dedication to the truth means, therefore, is a life of total honesty. It means a continuous and never-ending process of self-monitoring to assure that our communications—not only the words that we say but also the way we say them—inevitably reflect as accurately as humanly possible the truth or reality as we know it.

Such honesty does not come painlessly. The reason people lie is to avoid the pain of challenge and its consequences.

President Nixon's lying about Watergate was no more sophisticated or different in kind from that of a four-year-old who lies to his or her mother about how the lamp happened to fall off the table and get broken. Insofar as the nature of the challenge is legitimate (and it usually is), lying is an attempt to circumvent legitimate suffering and hence is productive of mental illness.

The concept of circumvention raises the issue of "shortcutting." Whenever we attempt to circumvent an obstacle, we are looking for a path to our goal which will be easier and therefore quicker: a shortcut. Believing that the growth of the human spirit is the end of human existence, I am obviously dedicated to the notion of progress. It is right and proper that as human beings we should grow and progress as rapidly as possible. It is therefore right and proper that we should avail ourselves of any legitimate shortcut to personal growth. The key word, however, is "legitimate." Human beings have almost as much of a tendency to ignore legitimate shortcuts as they do to search out illegitimate ones. It is, for instance, a legitimate shortcut to study a synopsis of a book instead of reading the original book in its entirety in preparation for an examination for a degree. If the synopsis is a good one, and the material is absorbed, the essential knowledge can be obtained in a manner that saves considerable time and effort. Cheating, however, is not a legitimate shortcut. It may save even greater amounts of time and, if successfully executed, may gain the cheater a passing mark on the exam and the coveted degree. But the essential knowledge has not been obtained. Therefore the degree is a lie, a misrepresentation. Insofar as the degree becomes a basis for life, the cheater's life becomes a lie and misrepresentation and is often devoted to protecting and preserving the lie.

Genuine psychotherapy is a legitimate shortcut to personal growth which is often ignored. One of the most frequent rationalizations for ignoring it is to question its legitimacy by saying, "I'm afraid that psychotherapy would get to be a

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crutch. I don't want to become dependent on a crutch." But this is usually a cover-up for more significant fears. The use of psychotherapy is no more a crutch than the use of hammer and nails to build a house. It is possible to build a house without hammer and nails, but the process is generally not efficient or desirable. Few carpenters will despair of their dependency on hammer and nails. Similarly, it is possible to achieve personal growth without employing psychotherapy, but often the task is unnecessarily tedious, lengthy and difficult. It generally makes sense to utilize available tools as a shortcut.

On the other hand, psychotherapy may be sought as an illegitimate shortcut. This most commonly occurs in certain cases of parents seeking psychotherapy for their children. They want their children to change in some way: stop using drugs, stop having temper tantrums, stop getting bad grades, and so on. Some parents have exhausted their own resourcefulness in trying to help their children and come to the psychotherapist with a genuine willingness to work on the problem. Others as often as not come with the overt knowledge of the cause of their child's problem, hoping that the psychiatrist will be able to do some magical something to change the child without having to change the basic cause of the problem. For instance, some parents will openly say, "We know that we have a problem in our marriage, and that this likely has something to do with our son's problem. Nonetheless, we do not want our marriage tampered with; we do not want you to do therapy with us; we want you just to work with our son, if possible, to help him be happier." Others are less open. They will come professing a willingness to do anything that's necessary, but when it is explained to them that their child's symptoms are an expression of his resentment toward their whole life style, which leaves no real room for his nurture, they will say, "It is ridiculous to think that we should turn ourselves inside out for him," and they will depart to look for another psychiatrist, one who might offer

them a painless shortcut. Farther down the pike they will likely tell their friends and themselves, "We have done everything possible for our boy; we have even gone to four separate psychiatrists with him, but nothing has helped."

We lie, of course, not only to others but also to ourselves. The challenges to our adjustment—our maps—from our own consciences and our own realistic perceptions may be every bit as legitimate and painful as any challenge from the public. Of the myriad lies that people often tell themselves, two of the most common, potent and destructive are "We really love our children" and "Our parents really loved us." It may be that our parents did love us and we do love our children, but when it is not the case, people often go to extraordinary lengths to avoid the realization. I frequently refer to psychotherapy as the "truth game" or the "honesty game" because its business is among other things to help patients confront such lies. One of the roots of mental illness is invariably an interlocking system of lies we have been told and lies we have told ourselves. These roots can be uncovered and excised only in an atmosphere of utter honesty. To create this atmosphere it is essential for therapists to bring to their relationships with patients a total capacity for openness and truthfulness. How can a patient be expected to endure the pain of confronting reality unless we bear the same pain? We can lead only insofar as we go before.

Withholding Truth

Lying can be divided into two types: white lies and black lies.* A black lie is a statement we make that we know is false. A white lie is a statement we make that is not in itself false but that leaves out a significant part of the truth. The fact that a lie is white does not in itself make it any less of a lie or any more excusable. White lies may be every bit as destructive as black ones. A government that withholds essential information from its people by censorship is no more democratic than one that speaks falsely. The patient who neglected to mention that she had overdrawn the family bank account was impeding her growth in therapy no less than if she had lied directly. Indeed, because it may *seem* less reprehensible, the withholding of essential information is the most common form of lying, and because it may be the more difficult to detect and confront, it is often even more pernicious than black-lying.

White-lying is considered socially acceptable in many of our relationships because "we don't want to hurt peoples' feelings." Yet we may bemoan the fact that our social relationships are generally superficial. For parents to feed their children a pap of white lies is not only considered acceptable but is thought to be loving and beneficent. Even husbands and wives who have been brave enough to be open with each other find it difficult often to be open with their children.

* The C.I.A., which has particular expertise in this area, naturally uses a more elaborate system of classification and will speak of white, gray and black propaganda, gray propaganda being a single black lie and black propaganda a black lie falsely attributed to another source.

They do not tell their children that they smoke marijuana, or that they fought with each other the night before concerning their relationship, or that they resent the grandparents for their manipulativeness, or that the doctor has told one or both that they have psychosomatic disorders, or that they are making a risky financial investment or even how much money they have in the bank. Usually such withholding and lack of openness is rationalized on the basis of a loving desire to protect and shield their children from unnecessary worries. Yet more often than not such "protection" is unsuccessful. The children know anyway that Mommy and Daddy smoke pot, that they had a fight the night before, that the grandparents are resented, that Mommy is nervous and that Daddy is losing money. The result, then, is not protection but deprivation. The children are deprived of the knowledge they might gain about money, illness, drugs, sex, marriage, their parents, their grandparents and people in general. They are also deprived of the reassurance they might receive if these topics were discussed more openly. Finally, they are deprived of role models of openness and honesty, and are provided instead with role models of partial honesty, incomplete openness and limited courage. For some parents the desire to "protect" their children is motivated by genuine albeit misguided love. For others, however, the "loving" desire to protect their children serves more as a cover-up and rationalization of a desire to avoid being challenged by their children, and a desire to maintain their authority over them. Such parents are saying in effect, "Look, kids, you go on being children with childish concerns and leave the adult concerns up to us. See us as strong and loving caretakers. Such an image is good for both of us, so don't challenge it. It allows us to feel strong and you to feel safe, and it will be easier for all of us if we don't look into these things too deeply."

Nonetheless, a real conflict may arise when the desire for total honesty is opposed by the needs of some people for certain kinds of protection. For instance, even parents with excellent marriages may occasionally consider divorce as one

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of their possible options, but to inform their children of this at a time when they are not at all likely to opt for divorce is to place an unnecessary burden upon the children. The idea of divorce is extremely threatening to a child's sense of security —indeed, so threatening that children do not have the capacity to perceive it with much perspective. They are seriously threatened by the possibility of divorce even when it is remote. If their parents' marriage is definitely on the rocks, then children will be dealing with the threatening possibility of divorce whether or not their parents talk about it. But if the marriage is basically sound, parents would indeed be doing their children a disservice if they said with complete openness, "Mommy and Daddy were talking last night about getting a divorce, but we're not at all serious about it at this time." As another instance, it is frequently necessary for psychotherapists to withhold their own thoughts, opinions and insights from patients in the earlier stages of psychotherapy because the patients are not yet ready to receive or deal with them. During my first year of psychiatric training a patient on his fourth visit to me recounted a dream that obviously expressed a concern with homosexuality. In my desire to appear to be a brilliant therapist and make rapid progress I told him, "Your dream indicates that you are concerned with worries that you might be homosexual." He grew visibly anxious, and he did not keep his next three appointments. Only with a good deal of work and an even greater amount of luck was I able to persuade him to return to therapy. We had another twenty sessions before he had to move from the area because of a business reassignment. These sessions were of considerable benefit to him despite the fact that we never again raised the issue of homosexuality. The fact that his unconscious was concerned with the issue did not mean that he was at all ready to deal with it on a conscious level, and by not withholding my insight from him I did him a grave disservice, almost losing him not only as my patient but as anyone's patient.

The selective withholding of one's opinions must also be practiced from time to time in the world of business or politics

if one is to be welcomed into the councils of power. If people were always to speak their minds on issues both great and small, they would be considered insubordinate by the average supervisor, and a threat to an organization by management. They would gain reputations for abrasiveness and would be deemed too untrustworthy ever to be appointed as spokesmen for an organization. There is simply no way around the fact that if one is to be at all effective within an organization, he or she must partially become an "organization person," circumspect in the expression of individual opinions, merging at times personal identity with that of the organization. On the other hand, if one regards one's effectiveness in an organization as the only goal of organizational behavior, permitting only the expression of those opinions that would not make waves, then one has allowed the end to justify the means, and will have lost personal integrity and identity by becoming the *total* organization person. The road that a great executive must travel between the preservation and the loss of his or her identity and integrity is extraordinarily narrow, and very, very few really make the trip successfully. It is an enormous challenge.

So the expression of opinions, feelings, ideas and even knowledge must be suppressed from time to time in these and many other circumstances in the course of human affairs. What rules, then, can one follow if one is dedicated to the truth? First, never speak falsehood. Second, bear in mind that the act of withholding the truth is always potentially a lie, and that in each instance in which the truth is withheld a significant moral decision is required. Third, the decision to withhold the truth should never be based on personal needs, such as a need for power, a need to be liked or a need to protect one's map from challenge. Fourth, and conversely, the decision to withhold the truth must always be based entirely upon the needs of the person or people from whom the truth is being withheld. Fifth, the assessment of another's needs is an act of responsibility which is so complex that it can only

be executed wisely when one operates with genuine love for the other. Sixth, the primary factor in the assessment of another's needs is the assessment of that person's capacity to utilize the truth for his or her own spiritual growth. Finally, in assessing the capacity of another to utilize the truth for personal spiritual growth, it should be borne in mind that our tendency is generally to underestimate rather than overestimate this capacity.

All this might seem like an extraordinary task, impossible to ever perfectly complete, a chronic and never-ending burden, a real drag. And it is indeed a never-ending burden of self-discipline, which is why most people opt for a life of very limited honesty and openness and relative closedness, hiding themselves and their maps from the world. It is easier that way. Yet the rewards of the difficult life of honesty and dedication to the truth are more than commensurate with the demands. By virtue of the fact that their maps are continually being challenged, open people are continually growing people. Through their openness they can establish and maintain intimate relationships far more effectively than more closed people. Because they never speak falsely they can be secure and proud in the knowledge that they have done nothing to contribute to the confusion of the world, but have served as sources of illumination and clarification. Finally, they are totally free to be. They are not burdened by any need to hide. They do not have to slink around in the shadows. They do not have to construct new lies to hide old ones. They need waste no effort covering tracks or maintaining disguises. And ultimately they find that the energy required for the self-discipline of honesty is far less than the energy required for secretiveness. The more honest one is, the easier it is to continue being honest, just as the more lies one has told, the more necessary it is to lie again. By their openness, people dedicated to the truth live in the open, and through the exercise of their courage to live in the open, they become free from fear.

Balancing

By this time I hope it is becoming clear that the exercise of discipline is not only a demanding but also a complex task, requiring both flexibility and judgment. Courageous people must continually push themselves to be completely honest, yet must also possess the capacity to withhold the whole truth when appropriate. To be free people we must assume total responsibility for ourselves, but in doing so must possess the capacity to reject responsibility that is not truly ours. To be organized and efficient, to live wisely, we must daily delay gratification and keep an eye on the future; yet to live joyously we must also possess the capacity, when it is not destructive, to live in the present and act spontaneously. In other words, discipline itself must be disciplined. The type of discipline required to discipline discipline is what I call balancing, and it is the fourth and final type that I would like to discuss here.

Balancing is the discipline that gives us flexibility. Extraordinary flexibility is required for successful living in all spheres of activity. To use but one example, let us consider the matter of anger and its expression. Anger is an emotion bred into us (and into less evolved organisms) by countless generations of evolution in order that our survival may be encouraged. We experience anger whenever we perceive another organism attempting to encroach upon our geographical or psychological territory or trying, one way or another, to put us down. It leads us to fight back. Without our anger we would indeed be continually stepped on, until we were totally squashed and exterminated. Only with anger can we survive. Yet, more often than not, when we initially perceive others as attempt-

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ing to encroach on us, we realize upon closer examination that that is not what they intend to do at all. Or even when we determine that people are truly intending to encroach on us, we may realize that, for one reason or another, it is not in our best interests to respond to that imposition with anger. Thus it is necessary that the higher centers of our brain (judgment) be able to regulate and modulate the lower centers (emotion). To function successfully in our complex world it is necessary for us to possess the capacity not only to express our anger but also not to express it. Moreover, we must possess the capacity to express our anger in different ways. At times, for instance, it is necessary to express it only after much deliberation and self-evaluation. At other times it is more to our benefit to express it immediately and spontaneously. Sometimes it is best to express it coldly and calmly; at other times loudly and hotly. We therefore not only need to know how to deal with our anger in different ways at different times but also how most appropriately to match the right time with the right style of expression. To handle our anger with full adequacy and competence, an elaborate, flexible response system is required. It is no wonder, then, that to learn to handle our anger is a complex task which usually cannot be completed before adulthood, or even mid-life, and which often is never completed.

To a greater or lesser degree, all people suffer from inadequacies of their flexible response systems. Much of the work of psychotherapy consists of attempting to help our patients allow or make their response systems become more flexible. Generally, the more crippled by anxiety, guilt and insecurity our patients are, the more difficult and rudimentary this work is. For example, I worked with a brave thirty-two-year-old schizophrenic woman to whom it was a veritable revelation to learn that there are some men she should not let in her front door, some she should let into her living room but not her bedroom, and some she could let into her bedroom. Previously she had operated with a response system by which she either had to let everyone into her bedroom or, when this

response did not seem to be working, not let anyone in her front door. Thus she bounced between degrading promiscuity and arid isolation. With the same woman it was necessary for us to spend several sessions focusing on the matter of thank-you notes. She felt compelled to send a lengthy, elaborate, hand-written, phrase- and word-perfect letter in response to each and every gift or invitation she received. Inevitably she could not continually carry such a burden, with the result that she would either write no notes at all or would reject all gifts and invitations. Again, she was astounded to learn that there were some gifts that did not require thank-you notes, and that when these were required, short notes sometimes sufficed.

Mature mental health demands, then, an extraordinary capacity to flexibly strike and continually restrike a delicate balance between conflicting needs, goals, duties, responsibilities, directions, et cetera. The essence of this discipline of balancing is "giving up." I remember first being taught this one summer morning in my ninth year. I had recently learned to ride a bike and was joyously exploring the dimensions of my new skill. About a mile from our house the road went down a steep hill and turned sharply at the bottom. Coasting down the hill on my bike that morning I felt my gathering speed to be ecstatic. To give up this ecstasy by the application of brakes seemed an absurd self-punishment. So I resolved to simultaneously retain my speed and negotiate the corner at the bottom. My ecstasy ended seconds later when I was propelled a dozen feet off the road into the woods. I was badly scratched and bleeding and the front wheel of my new bike was twisted beyond use from its impact against a tree. I had lost my balance.

Balancing is a discipline precisely because the act of giving something up is painful. In this instance I had been unwilling to suffer the pain of giving up my ecstatic speed in the interest of maintaining my balance around the corner. I learned, however, that the loss of balance is ultimately more painful than the giving up required to maintain balance. In one way or

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another it is a lesson I have continually had to relearn throughout my life. As must everyone, for as we negotiate the curves and corners of our lives, we must continually give up parts of ourselves. The only alternative to this giving up is not to travel at all on the journey of life.

It may seem strange, but most people choose this alternative and elect not to continue with their life journeys—to stop short by some distance—in order to avoid the pain of giving up parts of themselves. If it does seem strange, it is because you do not understand the depth of the pain that may be involved. In its major forms, giving up is the most painful of human experiences. Thus far I have been talking about minor forms of giving up—giving up speed or the luxury of spontaneous anger or the safety of withheld anger or the neatness of a thank-you note. Let me turn now to the giving up of personality traits, well-established patterns of behavior, ideologies, and even whole life styles. These are major forms of giving up that are required if one is to travel very far on the journey of life.

One night recently I decided to spend some free time building a happier and closer relationship with my fourteen-year-old daughter. For several weeks she had been urging me to play chess with her, so I suggested a game. She eagerly accepted and we settled down to a most even and challenging match. It was a school night, however, and at nine o'clock my daughter asked if I could hurry my moves, because she needed to get to bed; she had to get up at six in the morning. I knew her to be rigidly disciplined in her sleeping habits, and it seemed to me that she ought to be able to give up some of this rigidity. I told her, "Come on, you can go to bed a little later for once. You shouldn't start games that you can't finish. We're having fun." We played on for another fifteen minutes, during which time she became visibly discomfited. Finally she pleaded, "Please, Daddy, please hurry your moves." "No goddammit," I replied. "Chess is a serious game. If you're going to play it well, you're going to play it slowly. If you don't want to play it seriously, you might as well not play it

at all." And so, with her feeling miserable, we continued for another ten minutes, until suddenly my daughter burst into tears, yelled that she conceded the stupid game, and ran weeping up the stairs.

Immediately I felt as if I were nine years old again, lying bleeding in the bushes by the side of the road, next to my bike. Clearly I had made a mistake. Clearly I had failed to negotiate a turn in the road. I had started the evening wanting to have a happy time with my daughter. Ninety minutes later she was in tears and so angry at me she could hardly speak. What had gone wrong? The answer was obvious. But I did not want to see the answer, so it took me two hours to wade through the pain of accepting the fact that I had botched the evening by allowing my desire to win a chess game become more important than my desire to build a relationship with my daughter. I was depressed in earnest then. How had I gotten so out of balance? Gradually it dawned on me that my desire to win was too great and that I needed to give up some of this desire. Yet even this little giving up seemed impossible. All my life my desire to win had served me in good stead, for I had won many things. How was it possible to play chess without wanting to win? I had never been comfortable doing things unenthusiastically. How could I conceivably play chess enthusiastically but not seriously? Yet somehow I had to change, for I knew that my enthusiasm, my competitiveness and my seriousness were part of a behavior pattern that was working and would continue to work toward alienating my children from me, and that if I were not able to modify this pattern, there would be other times of unnecessary tears and bitterness. My depression continued.

My depression is over now. I have given up part of my desire to win at games. That part of me is gone now. It died. It had to die. I killed it. I killed it with my desire to win at parenting. When I was a child my desire to win at games served me well. As a parent, I recognized that it got in my way. So it had to go. The times have changed. To move with

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them I had to give it up. I do not miss it. I thought I would, but I don't.

The Healthiness of Depression

The foregoing is a minor example of what those people with the courage to call themselves patients must go through in more major ways, and often many times, in the process of psychotherapy. The period of intensive psychotherapy is a period of intensive growth, during which the patient may undergo more changes than some people experience in a lifetime. For this growth spurt to occur, a proportionate amount of "the old self" must be given up. It is an inevitable part of successful psychotherapy. In fact, this process of giving up usually begins before the patient has his first appointment with the psychotherapist. Frequently, for instance, the act of deciding to seek psychiatric attention in itself represents a giving up of the self-image "I'm OK." This giving up may be particularly difficult for males in our culture for whom "I'm not OK and I need assistance to understand why I'm not OK and how to become OK" is frequently and sadly equated with "I'm weak, unmasculine and inadequate." Actually, the giving-up process often begins even before the patient has arrived at the decision to seek psychiatric attention. I mentioned that during the process of giving up my desire to always win I was depressed. This is because the feeling associated with giving up something loved—or at least something that is a part of ourselves and familiar—is depression. Since mentally healthy human beings must grow, and since giving up or loss of the old self is an integral part of the process of mental and spiritual

growth, depression is a normal and basically healthy phenomenon. It becomes abnormal or unhealthy only when something interferes with the giving-up process, with the result that the depression is prolonged and cannot be resolved by completion of the process.*

A leading reason for people to think about seeking psychiatric attention is depression. In other words, patients are frequently already involved in a giving-up, or growth, process before considering psychotherapy, and it is the symptoms of this growth process that impel them toward the therapist's office. The therapist's job, therefore, is to help the patient complete a growth process that he or she has already begun. This is not to say that patients are often aware of what is happening to them. To the contrary, they frequently desire only relief from the symptoms of their depression "so that things can be as they used to be." They do not know that things can no longer be "the way they used to be." But the unconscious knows. It is precisely because the unconscious in its wisdom knows that "the way things used to be" is no longer tenable or constructive that the process of growing and giving up is begun on an unconscious level and depression is experienced. As likely as not the patient will report, "I have no idea why I'm depressed" or will ascribe the depression to

* There are many factors that can interfere with the giving-up process and, therefore, prolong a normal, healthy depression into a chronic pathologic depression. Of all the possible factors, one of the most common and potent is a pattern of experiences in childhood wherein parents or fate, unresponsive to the needs of the child, took away "things" from the child before he or she was psychologically ready to give them up or strong enough to truly accept their loss. Such a pattern of experience in childhood sensitizes the child to the experience of loss and creates a tendency far stronger than that found in more fortunate individuals to cling to "things" and seek to avoid the pain of loss or giving up. For this reason, although all pathologic depressions involve some blockage in the giving-up process, I believe there is a type of chronic neurotic depression that has as its central root a traumatic injury to the individual's basic capacity to give up anything, and to this subtype of depression I would apply the name "giving-up neurosis."

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irrelevant factors. Since patients are not yet consciously willing or ready to recognize that the "old self" and "the way things used to be" are outdated, they are not aware that their depression is signaling that major change is required for successful and evolutionary adaptation. The fact that the unconscious is one step ahead of the conscious may seem strange to lay readers; it is, however, a fact that applies not only in this specific instance but so generally that it is a basic principle of mental functioning. It will be discussed in greater depth in the concluding section of this work.

Recently we have been hearing of the "mid-life crisis." Actually, this is but one of many "crises," or critical stages of development, in life, as Erik Erikson taught us thirty years ago. (Erikson delineated eight crises; perhaps there are more.) What makes crises of these transition periods in the life cycle—that is, problematic and painful—is that in successfully working our way through them we must give up cherished notions and old ways of doing and looking at things. Many people are either unwilling or unable to suffer the pain of giving up the outgrown which needs to be forsaken. Consequently they cling, often forever, to their old patterns of thinking and behaving, thus failing to negotiate any crisis, to truly grow up, and to experience the joyful sense of rebirth that accompanies the successful transition into greater maturity. Although an entire book could be written about each one, let me simply list, roughly in order of their occurrence, some of the major conditions, desires and attitudes that must be given up in the course of a wholly successful evolving lifetime:

The state of infancy, in which no external demands need be responded to

The fantasy of omnipotence

The desire for total (including sexual) possession of one's parent(s)

The dependency of childhood

Distorted images of one's parents

DISCIPLINE

The omnipotentiality of adolescence
The "freedom" of uncommitment
The agility of youth
The sexual attractiveness and/or potency of youth
The fantasy of immortality
Authority over one's children
Various forms of temporal power
The independence of physical health
And, ultimately, the self and life itself.

Renunciation and Rebirth

In regard to the last of the above, it may seem to many that the ultimate requirement—to give up one's self and one's life—represents a kind of cruelty on the part of God or fate, which makes our existence a sort of bad joke and which can never be completely accepted. This attitude is particularly true in present-day Western culture, in which the self is held sacred and death is considered an unspeakable insult. Yet the exact opposite is the reality. It is in the giving up of self that human beings can find the most ecstatic and lasting, solid, durable joy of life. And it is death that provides life with all its meaning. This "secret" is the central wisdom of religion.

The process of giving up the self (which is related to the phenomenon of love, as will be discussed in the next section of this book) is for most of us a gradual process which we get into by a series of fits and starts. One form of temporary giving up of the self deserves special mention because its practice is an absolute requirement for significant learning during adulthood, and therefore for significant growth of the human spirit. I am referring to a subtype of the discipline of balanc-

ing which I call "bracketing." Bracketing is essentially the act of balancing the need for stability and assertion of the self with the need for new knowledge and greater understanding by temporarily giving up one's self—putting one's self aside, so to speak—so as to make room for the incorporation of new material into the self. This discipline has been well described by the theologian Sam Keen in *To a Dancing God*:

The second step requires that I go beyond the idiosyncratic and egocentric perception of immediate experience. Mature awareness is possible only when I have digested and compensated for the biases and prejudices that are the residue of my personal history. Awareness of what presents itself to me involves a double movement of attention: silencing the familiar and welcoming the strange. Each time I approach a strange object, person, or event, I have a tendency to let my present needs, past experience, or expectations for the future determine what I will see. If I am to appreciate the uniqueness of any datum, I must be sufficiently aware of my preconceived ideas and characteristic emotional distortions to bracket them long enough to welcome strangeness and novelty into my perceptual world. This discipline of bracketing, compensating, or silencing requires sophisticated self-knowledge and courageous honesty. Yet, without this discipline each present moment is only the repetition of something already seen or experienced. In order for genuine novelty to emerge, for the unique presence of things, persons, or events to take root in me, I must undergo a decentralization of the ego.*

The discipline of bracketing illustrates the most consequential fact of giving up and of discipline in general: namely, that for all that is given up even more is gained. Self-discipline is a self-enlarging process. The pain of giving up is the pain of death, but death of the old is birth of the new. The pain of death is the pain of birth, and the pain of birth is the pain of death. For us to develop a new and better idea, concept,

* New York: Harper & Row, 1970, p. 28.

theory or understanding means that an old idea, concept, theory or understanding must die. Thus, in the conclusion of his poem "Journey of the Magi," T. S. Eliot describes the Three Wise Men as suffering the giving up of their previous world view when they embraced Christianity.

*All this was a long time ago, I remember,
And I would do it again, but set down
This set down
This: were we led all that way for
Birth or Death? This was a Birth, certainly,
We had evidence and no doubt. I had seen birth and
death,
But had thought they were different; this Birth was
Hard and bitter agony for us, like Death, our death.
We returned to our places, these Kingdoms,
But no longer at ease here, in the old dispensation,
With an alien people clutching their gods.
I should be glad of another death.**

Since birth and death seem to be but different sides of the same coin, it is really not at all unreasonable to pay closer heed than we usually do in the West to the concept of reincarnation. But whether or not we are willing to entertain seriously the possibility of some kind of rebirth occurring simultaneously with our physical death, it is abundantly clear that *this* lifetime is a series of simultaneous deaths and births. "Throughout the whole of life one must continue to learn to live," said Seneca two millennia ago, "and what will amaze you even more, throughout life one must learn to die."† It is also clear that the farther one travels on the journey of life, the more births one will experience, and therefore the more deaths—the more joy and the more pain.

* *The Complete Poems and Plays, 1909–1950* (New York: Harcourt Brace, 1952), p. 69.

† Quoted in Erich Fromm, *The Sane Society* (New York: Rinehart, 1955).

This raises the question of whether it is ever possible to become free from emotional pain in this life. Or, putting it more mildly, is it possible to spiritually evolve to a level of consciousness at which the pain of living is at least diminished? The answer is yes and no. The answer is yes, because once suffering is completely accepted, it ceases in a sense to be suffering. It is also yes because the unceasing practice of discipline leads to mastery, and the spiritually evolved person is masterful in the same sense that the adult is masterful in relation to the child. Matters that present great problems for the child and cause it great pain may be of no consequence to the adult at all. Finally, the answer is yes because the spiritually evolved individual is, as will be elaborated in the next section, an extraordinarily loving individual, and with his or her extraordinary love comes extraordinary joy.

The answer is no, however, because there is a vacuum of competence in the world which must be filled. In a world crying out in desperate need for competence, an extraordinarily competent and loving person can no more withhold his or her competence than such a person could deny food to a hungry infant. Spiritually evolved people, by virtue of their discipline, mastery and love, are people of extraordinary competence, and in their competence they are called on to serve the world, and in their love they answer the call. They are inevitably, therefore, people of great power, although the world may generally behold them as quite ordinary people, since more often than not they will exercise their power in quiet or even hidden ways. Nonetheless, exercise power they do, and in this exercise they suffer greatly, even dreadfully. For to exercise power is to make decisions, and the process of making decisions with total awareness is often infinitely more painful than making decisions with limited or blunted awareness (which is the way most decisions are made and why they are ultimately proved wrong). Imagine two generals, each having to decide whether or not to commit a division of ten thousand men to battle. To one the division is but a thing, a unit of personnel, an instrument of strategy and nothing

more. To the other it is these things, but he is also aware of each and every one of the ten thousand lives and the lives of the families of each of the ten thousand. For whom is the decision easier? It is easier for the general who has blunted his awareness precisely because he cannot tolerate the pain of a more nearly complete awareness. It may be tempting to say, "Ah, but a spiritually evolved man would never become a general in the first place." But the same issue is involved in being a corporation president, a physician, a teacher, a parent. Decisions affecting the lives of others must always be made. The best decision-makers are those who are willing to suffer the most over their decisions but still retain their ability to be decisive. One measure—and perhaps the best measure—of a person's greatness is the capacity for suffering. Yet the great are also joyful. This, then, is the paradox. Buddhists tend to ignore the Buddha's suffering and Christians forget Christ's joy. Buddha and Christ were not different men. The suffering of Christ letting go on the cross and the joy of Buddha letting go under the bo tree are one.

So if your goal is to avoid pain and escape suffering, I would not advise you to seek higher levels of consciousness or spiritual evolution. First, you cannot achieve them without suffering, and second, insofar as you do achieve them, you are likely to be called on to serve in ways more painful to you, or at least demanding of you, than you can now imagine. Then why desire to evolve at all, you may ask. If you ask this question, perhaps you do not know enough of joy. Perhaps you may find an answer in the remainder of this book; perhaps you will not.

A final word on the discipline of balancing and its essence of giving up: you must have something in order to give it up. You cannot give up anything you have not already gotten. If you give up winning without ever having won, you are where you were at the beginning: a loser. You must forge for yourself an identity before you can give it up. You must develop an ego before you can lose it. This may seem incredibly elementary, but I think it is necessary to say it, since there are

many people I know who possess a vision of evolution yet seem to lack the will for it. They want, and believe it is possible, to skip over the discipline, to find an easy short-cut to sainthood. Often they attempt to attain it by simply imitating the superficialities of saints, retiring to the desert or taking up carpentry. Some even believe that by such imitation they have really become saints and prophets, and are unable to acknowledge that they are still children and face the painful fact that they must start at the beginning and go through the middle.

Discipline has been defined as a system of techniques of dealing constructively with the pain of problem-solving—instead of avoiding that pain—in such a way that all of life's problems can be solved. Four basic techniques have been distinguished and elaborated: delaying gratification, assumption of responsibility, dedication to the truth or reality, and balancing. Discipline is a *system* of techniques, because these techniques are very much interrelated. In a single act one may utilize two, three or even all of the techniques at the same time and in such a way that they may be distinguishable from each other. The strength, energy and willingness to use these techniques are provided by love, as will be elaborated in the next section. This analysis of discipline has not been intended to be exhaustive, and it is possible that I have neglected one or more additional basic techniques, although I suspect not. It is also reasonable to ask whether such processes as biofeedback, meditation, yoga, and psychotherapy itself are not techniques of discipline, but to this I would reply that, to my way of thinking, they are technical aids rather than basic techniques. As such they may be very useful but are not essential. On the other hand, the basic techniques herein described, if practiced unceasingly and genuinely, are alone sufficient to enable the practitioner of discipline, or "disciple," to evolve to spiritually higher levels.

SECTION II

Love

Love Defined

Discipline, it has been suggested, is the means of human spiritual evolution. This section will examine what lies in back of discipline—what provides the motive, the energy for discipline. This force I believe to be love. I am very conscious of the fact that in attempting to examine love we will be beginning to toy with mystery. In a very real sense we will be attempting to examine the unexaminalble and to know the unknowable. Love is too large, too deep ever to be truly understood or measured or limited within the framework of words. I would not write this if I did not believe the attempt to have value, but no matter how valuable, I begin with the certain knowledge that the attempt will be in some ways inadequate.

One result of the mysterious nature of love is that no one has ever, to my knowledge, arrived at a truly satisfactory definition of love. In an effort to explain it, therefore, love has been divided into various categories: eros, philia, agape; perfect love and imperfect love, and so on. I am presuming, however, to give a single definition of love, again with the awareness that it is likely to be in some way or ways inadequate. I define love thus: The will to extend one's self for the purpose of nurturing one's own or another's spiritual growth.

At the outset I would like to comment briefly on this definition before proceeding to a more thorough elaboration. First, it may be noticed that it is a teleological definition; the behavior is defined in terms of the goal or purpose it seems to

serve—in this case, spiritual growth. Scientists tend to hold teleological definitions suspect, and perhaps they will this one. I did not arrive at it, however, through a clearly teleological process of thinking. Instead I arrived at it through observation in my clinical practice of psychiatry (which includes self-observation), in which the definition of love is a matter of considerable import. This is because patients are generally very confused as to the nature of love. For instance, a timid young man reported to me: "My mother loved me so much she wouldn't let me take the school bus to school until my senior year in high school. Even then I had to beg her to let me go. I guess she was afraid that I would get hurt, so she drove me to and from school every day, which was very hard on her. She really loved me." In the treatment of this individual's timidity it was necessary, as it is in many other cases, to teach him that his mother might have been motivated by something other than love, and that what seems to be love is often not love at all. It has been out of such experience that I accumulated a body of examples of what seemed to be acts of love and what seemed not to be love. One of the major distinguishing features between the two seemed to be the conscious or unconscious purpose in the mind of the lover or nonlover.

Second, it may be noticed that, as defined, love is a strangely circular process. For the process of extending one's self is an evolutionary process. When one has successfully extended one's limits, one has then grown into a larger state of being. Thus the act of loving is an act of self-evolution even when the purpose of the act is someone else's growth. It is through reaching toward evolution that we evolve.

Third, this unitary definition of love includes self-love with love for the other. Since I am human and you are human, to love humans means to love myself as well as you. To be dedicated to human spiritual development is to be dedicated to the race of which we are a part, and this therefore means dedication to our own development as well as "theirs." Indeed, as has been pointed out, we are incapable of loving another unless we love ourselves, just as we are incapable of

teaching our children self-discipline unless we ourselves are self-disciplined. It is actually impossible to forsake our own spiritual development in favor of someone else's. We cannot forsake self-discipline and at the same time be disciplined in our care for another. We cannot be a source of strength unless we nurture our own strength. As we proceed in our exploration of the nature of love, I believe it will become clear that not only do self-love and love of others go hand in hand but that ultimately they are indistinguishable.

Fourth, the act of extending one's limits implies effort. One extends one's limits only by exceeding them, and exceeding limits requires effort. When we love someone our love becomes demonstrable or real only through our exertion—through the fact that for that someone (or for ourself) we take an extra step or walk an extra mile. Love is not effortless. To the contrary, love is effortful.

Finally, by use of the word "will" I have attempted to transcend the distinction between desire and action. Desire is not necessarily translated into action. Will is desire of sufficient intensity that it is translated into action. The difference between the two is equal to the difference between saying "I would like to go swimming tonight" and "I will go swimming tonight." Everyone in our culture desires to some extent to be loving, yet many are not in fact loving. I therefore conclude that the desire to love is not itself love. Love is as love does. Love is an act of will—namely, both an intention and an action. Will also implies choice. We do not have to love. We choose to love. No matter how much we may think we are loving, if we are in fact not loving, it is because we have chosen not to love and therefore do not love despite our good intentions. On the other hand, whenever we do actually exert ourselves in the cause of spiritual growth, it is because we have chosen to do so. The choice to love has been made.

As I indicated, patients who come to psychotherapy are invariably found to be more or less confused about the nature of love. This is because in the face of the mystery of love misconceptions about it abound. While this book will not

remove from love its mystery, I hope it will clarify matters sufficiently to help do away with these misconceptions, which cause suffering not only to patients but to all people as they attempt to make sense out of their own experiences. Some of this suffering seems to me unnecessary, since these popular misconceptions could be made less popular through the teaching of a more precise definition of love. I have therefore chosen to begin exploring the nature of love by examining what love is not.

Falling in "Love"

Of all the misconceptions about love the most powerful and pervasive is the belief that "falling in love" is love or at least one of the manifestations of love. It is a potent misconception, because falling in love is subjectively experienced in a very powerful fashion as an experience of love. When a person falls in love what he or she certainly feels is "I love him" or "I love her." But two problems are immediately apparent. The first is that the experience of falling in love is specifically a sex-linked erotic experience. We do not fall in love with our children even though we may love them very deeply. We do not fall in love with our friends of the same sex—unless we are homosexually oriented—even though we may care for them greatly. We fall in love only when we are consciously or unconsciously sexually motivated. The second problem is that the experience of falling in love is invariably temporary. No matter whom we fall in love with, we sooner or later fall out of love if the relationship continues long enough. This is not to say that we invariably cease loving the person with whom we fell in love. But it is to say that the feeling of ecstatic

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lovingness that characterizes the experience of falling in love always passes. The honeymoon always ends. The bloom of romance always fades.

To understand the nature of the phenomenon of falling in love and the inevitability of its ending, it is necessary to examine the nature of what psychiatrists call ego boundaries. From what we can ascertain by indirect evidence, it appears that the newborn infant during the first few months of its life does not distinguish between itself and the rest of the universe. When it moves its arms and legs, the world is moving. When it is hungry, the world is hungry. When it sees its mother move, it is as if it is moving. When its mother sings, the baby does not know that it is itself not making the sound. It cannot distinguish itself from the crib, the room and its parents. The animate and the inanimate are the same. There is no distinction yet between I and thou. It and the world are one. There are no boundaries, no separations. There is no identity.

But with experience the child begins to experience itself—namely, as an entity separate from the rest of the world. When it is hungry, mother doesn't always appear to feed it. When it is playful, mother doesn't always want to play. The child then has the experience of its wishes not being its mother's command. Its will is experienced as something separate from its mother's behavior. A sense of the "me" begins to develop. This interaction between the infant and the mother is believed to be the ground out of which the child's sense of identity begins to grow. It has been observed that when the interaction between the infant and its mother is grossly disturbed—for example, when there is no mother, no satisfactory mother substitute or when because of her own mental illness the mother is totally uncaring or uninterested—then the infant grows into a child or adult whose sense of identity is grossly defective in the most basic ways.

As the infant recognizes its will to be its own and not that of the universe, it begins to make other distinctions between itself and the world. When it wills movement, its arm waves

before its eyes, but neither the crib nor the ceiling move. Thus the child learns that its arm and its will are connected, and therefore that its arm is *its* and not something or someone else's. In this manner, during the first year of life, we learn the fundamentals of who we are and who we are not, what we are and what we are not. By the end of our first year we know that this is my arm, my foot, my head, my tongue, my eyes and even my viewpoint, my voice, my thoughts, my stomachache, and my feelings. We know our size and our physical limits. These limits are our boundaries. The knowledge of these limits inside our minds is what is meant by ego boundaries.

The development of ego boundaries is a process that continues through childhood into adolescence and even into adulthood, but the boundaries established later are more psychic than physical. For instance, the age between two and three is typically a time when the child comes to terms with the limits of its power. While before this time the child has learned that its wish is not necessarily its mother's command, it still clings to the possibility that its wish might be its mother's command and the feeling that its wish should be her command. It is because of this hope and feeling that the two-year-old usually attempts to act like a tyrant and autocrat, trying to give orders to its parents, siblings and family pets as if they were menials in its own private army, and responds with regal fury when they won't be dictated to. Thus parents speak of this age as "the terrible twos." By the age of three the child has usually become more tractable and mellow as a result of an acceptance of the reality of its own relative powerlessness. Still, the possibility of omnipotence is such a sweet, sweet dream that it cannot be completely given up even after several years of very painful confrontation with one's own impotence. Although the child of three has come to accept the reality of the boundaries of its power, it will continue to escape occasionally for some years to come into a world of fantasy in which the possibility of omnipotence (particularly its own) still exists. This is the world of Superman and Captain Marvel. Yet grad-

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ually even the superheroes are given up, and by the time of mid-adolescence, young people know that they are individuals, confined to the boundaries of their flesh and the limits of their power, each one a relatively frail and impotent organism, existing only by cooperation within a group of fellow organisms called society. Within this group they are not particularly distinguished, yet they are isolated from others by their individual identities, boundaries and limits.

It is lonely behind these boundaries. Some people—particularly those whom psychiatrists call schizoid—because of unpleasant, traumatizing experiences in childhood, perceive the world outside of themselves as unredeemably dangerous, hostile, confusing and unnurturing. Such people feel their boundaries to be protecting and comforting and find a sense of safety in their loneliness. But most of us feel our loneliness to be painful and yearn to escape from behind the walls of our individual identities to a condition in which we can be more unified with the world outside of ourselves. The experience of falling in love allows us this escape—temporarily. The essence of the phenomenon of falling in love is a sudden collapse of a section of an individual's ego boundaries, permitting one to merge his or her identity with that of another person. The sudden release of oneself from oneself, the explosive pouring out of oneself into the beloved, and the dramatic surcease of loneliness accompanying this collapse of ego boundaries is experienced by most of us as ecstatic. We and our beloved are one! Loneliness is no more!

In some respects (but certainly not in all) the act of falling in love is an act of regression. The experience of merging with the loved one has in it echoes from the time when we were merged with our mothers in infancy. Along with the merging we also reexperience the sense of omnipotence which we had to give up in our journey out of childhood. All things seem possible! United with our beloved we feel we can conquer all obstacles. We believe that the strength of our love will cause the forces of opposition to bow down in submission and melt away into the darkness. All problems will be overcome. The

future will be all light. The unreality of these feelings when we have fallen in love is essentially the same as the unreality of the two-year-old who feels itself to be king of the family and the world with power unlimited.

Just as reality intrudes upon the two-year-old's fantasy of omnipotence so does reality intrude upon the fantastic unity of the couple who have fallen in love. Sooner or later, in response to the problems of daily living, individual will reasserts itself. He wants to have sex; she doesn't. She wants to go to the movies; he doesn't. He wants to put money in the bank; she wants a dishwasher. She wants to talk about her job; he wants to talk about his. She doesn't like his friends; he doesn't like hers. So both of them, in the privacy of their hearts, begin to come to the sickening realization that they are not one with the beloved, that the beloved has and will continue to have his or her own desires, tastes, prejudices and timing different from the other's. One by one, gradually or suddenly, the ego boundaries snap back into place; gradually or suddenly, they fall out of love. Once again they are two separate individuals. At this point they begin either to dissolve the ties of their relationship or to initiate the work of real loving.

By my use of the word "real" I am implying that the perception that we are loving when we fall in love is a false perception—that our subjective sense of lovingness is an illusion. Full elaboration of real love will be deferred until later in this section. However, by stating that it is when a couple falls out of love they may begin to really love I am also implying that real love does not have its roots in a feeling of love. To the contrary, real love often occurs in a context in which the feeling of love is lacking, when we act lovingly despite the fact that we don't feel loving. Assuming the reality of the definition of love with which we started, the experience of "falling in love" is not real love for the several reasons that follow.

Falling in love is not an act of will. It is not a conscious choice. No matter how open to or eager for it we may be, the

The Myth of Romantic Love

To serve as effectively as it does to trap us into marriage, the experience of falling in love probably must have as one of its characteristics the illusion that the experience will last forever. This illusion is fostered in our culture by the commonly held myth of romantic love, which has its origins in our favorite childhood fairy tales, wherein the prince and princess, once united, live happily forever after. The myth of romantic love tells us, in effect, that for every young man in the world there is a young woman who was "meant for him," and vice versa. Moreover, the myth implies that there is only one man meant for a woman and only one woman for a man and this has been predetermined "in the stars." When we meet the person for whom we are intended, recognition comes through the fact that we fall in love. We have met the person for whom all the heavens intended us, and since the match is perfect, we will then be able to satisfy all of each other's needs forever and ever, and therefore live happily forever after in perfect union and harmony. Should it come to pass, however, that we do not satisfy or meet all of each other's needs and friction arises and we fall out of love, then it is clear that a dreadful mistake was made, we misread the stars, we did not hook up with our one and only perfect match, what we thought was love was not real or "true" love, and nothing can be done about the situation except to live unhappily ever after or get divorced.

While I generally find that great myths are great precisely because they represent and embody great universal truths (and will explore several such myths later in this book), the

myth of romantic love is a dreadful lie. Perhaps it is a necessary lie in that it ensures the survival of the species by its encouragement and seeming validation of the falling-in-love experience that traps us into marriage. But as a psychiatrist I weep in my heart almost daily for the ghastly confusion and suffering that this myth fosters. Millions of people waste vast amounts of energy desperately and futilely attempting to make the reality of their lives conform to the unreality of the myth. Mrs. A. subjugates herself absurdly to her husband out of a feeling of guilt. "I didn't really love my husband when we married," she says. "I pretended I did. I guess I tricked him into it, so I have no right to complain about him, and I owe it to him to do whatever he wants." Mr. B. laments: "I regret I didn't marry Miss C. I think we could have had a good marriage. But I didn't feel head over heels in love with her, so I assumed she couldn't be the right person for me." Mrs. D., married for two years, becomes severely depressed without apparent cause, and enters therapy stating: "I don't know what's wrong. I've got everything I need, including a perfect marriage." Only months later can she accept the fact that she has fallen out of love with her husband but that this does not mean that she made a horrible mistake. Mr. E., also married two years, begins to suffer intense headaches in the evenings and can't believe they are psychosomatic. "My home life is fine. I love my wife as much as the day I married her. She's everything I ever wanted," he says. But his headaches don't leave him until a year later, when he is able to admit, "She bugs the hell out of me the way she is always wanting, wanting, wanting things without regard to my salary," and then is able to confront her with her extravagance. Mr. and Mrs. F. acknowledge to each other that they have fallen out of love and then proceed to make each other miserable by mutual rampant infidelity as they each search for the one "true love," not realizing that their very acknowledgment could mark the beginning of the work of their marriage instead of its end. Even when couples have acknowledged that the honeymoon is over, that they are no longer romantically

in love with each other and are able still to be committed to their relationship, they still cling to the myth and attempt to conform their lives to it. "Even though we have fallen out of love, if we act by sheer will power as if we still were in love, then maybe romantic love will return to our lives," their thinking goes. These couples prize togetherness. When they enter couples group therapy (which is the setting in which my wife and I and our close colleagues conduct most serious marriage counseling), they sit together, speak for each other, defend each other's faults and seek to present to the rest of the group a united front, believing this unity to be a sign of the relative health of their marriage and a prerequisite for its improvement. Sooner or later, and usually sooner, we must tell most couples that they are too much married, too closely coupled, and that they need to establish some psychological distance from each other before they can even begin to work constructively on their problems. Sometimes it is actually necessary to physically separate them, directing them to sit apart from each other in the group circle. It is always necessary to ask them to refrain from speaking for each other or defending each other against the group. Over and over again we must say, "Let Mary speak for herself, John," and "John can defend himself, Mary, he's strong enough." Ultimately, if they stay in therapy, all couples learn that a true acceptance of their own and each other's individuality and separateness is the only foundation upon which a mature marriage can be based and real love can grow.*

* Those who have read the O'Neils' book *Open Marriage* will recognize this to be a basic tenet of the open as opposed to the closed marriage. The O'Neils were actually remarkably gentle and restrained in their proselytizing for open marriage. My work with couples has led me to the stark conclusion that open marriage is the only kind of mature marriage that is healthy and not seriously destructive to the spiritual health and growth of the individual partners.

More About Ego Boundaries

Having proclaimed that the experience of "falling in love" is a sort of illusion which in no way constitutes real love, let me conclude by shifting into reverse and pointing out that falling in love is in fact very, very close to real love. Indeed, the misconception that falling in love is a type of love is so potent precisely because it contains a grain of truth.

The experience of real love also has to do with ego boundaries, since it involves an extension of one's limits. One's limits are one's ego boundaries. When we extend our limits through love, we do so by reaching out, so to speak, toward the beloved, whose growth we wish to nurture. For us to be able to do this, the beloved object must first become beloved to us; in other words, we must be attracted toward, invested in and committed to an object outside of ourselves, beyond the boundaries of self. Psychiatrists call this process of attraction, investment and commitment "cathexis" and say that we "cathect" the beloved object. But when we cathect an object outside of ourselves we also psychologically incorporate a representation of that object into ourselves. For example, let us consider a man who gardens for a hobby. It is a satisfying and consuming hobby. He "loves" gardening. His garden means a lot to him. This man has cathected his garden. He finds it attractive, he has invested himself in it, he is committed to it—so much so that he may jump out of bed early Sunday morning to get back to it, he may refuse to travel away from it, and he may even neglect his wife for it. In the process of his cathexis and in order to nurture his flowers and shrubs he learns a great deal. He comes to know much about gardening

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—about soils and fertilizers, rooting and pruning. And he knows his particular garden—its history, the types of flowers and plants in it, its layout, its problems and even its future. Despite the fact that the garden exists outside of him, through his cathexis it has also come to exist within him. His knowledge of it and the meaning it has for him are part of him, part of his identity, part of his history, part of his wisdom. By loving and cathecting his garden he has in quite a real way incorporated the garden within him, and by this incorporation his self has become enlarged and his ego boundaries extended.

What transpires then in the course of many years of loving, of extending our limits for our cathexes, is a gradual but progressive enlargement of the self, an incorporation within of the world without, and a growth, a stretching and a thinning of our ego boundaries. In this way the more and longer we extend ourselves, the more we love, the more blurred becomes the distinction between the self and the world. We become identified with the world. And as our ego boundaries become blurred and thinned, we begin more and more to experience the same sort of feeling of ecstasy that we have when our ego boundaries partially collapse and we "fall in love." Only, instead of having merged temporarily and unrealistically with a single beloved object, we have merged realistically and more permanently with much of the world. A "mystical union" with the entire world may be established. The feeling of ecstasy or bliss associated with this union, while perhaps more gentle and less dramatic than that associated with falling in love, is nonetheless much more stable and lasting and ultimately satisfying. It is the difference between the peak experience, typified by falling in love, and what Abraham Maslow has referred to as the "plateau experience."* The heights are not suddenly glimpsed and lost again; they are attained forever.

It is obvious and generally understood that sexual activity

* *Religions, Values, and Peak-Experiences* (New York: Viking, 1970), preface.

and love, while they may occur simultaneously, often are disassociated, because they are basically separate phenomena. In itself, making love is not an act of love. Nonetheless the experience of sexual intercourse, and particularly of orgasm (even in masturbation), is an experience also associated with a greater or lesser degree of collapse of ego boundaries and attendant ecstasy. It is because of this collapse of ego boundaries that we may shout at the moment of climax "I love you" or "Oh, God" to a prostitute for whom moments later, after the ego boundaries have snapped back into place, we may feel no shred of affection, liking or investment. This is not to say that the ecstasy of the orgasmic experience cannot be heightened by sharing it with one who is beloved; it can. But even without a beloved partner or any partner the collapse of ego boundaries occurring in conjunction with orgasm may be total; for a second we may totally forget who we are, lose track of self, be lost in time and space, be outside of ourself, be transported. We may become one with the universe. But only for a second.

In describing the prolonged "oneness with the universe" associated with real love as compared to the momentary oneness of orgasm, I used the words "mystical union." Mysticism is essentially a belief that reality is oneness. The most literal of mystics believe that our common perception of the universe as containing multitudes of discrete objects—stars, planets, trees, birds, houses, ourselves—all separated from one another by boundaries is a misperception, an illusion. To this consensual misperception, this world of illusion that most of us mistakenly believe to be real, Hindus and Buddhists apply the word "Maya." They and other mystics hold that true reality can be known only by experiencing the oneness through a giving up of ego boundaries. It is impossible to really see the unity of the universe as long as one continues to see oneself as a discrete object, separate and distinguishable from the rest of the universe in any way, shape or form. Hindus and Buddhists frequently hold, therefore, that the infant before the development of ego boundaries knows real-

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ity, while adults do not. Some even suggest that the path toward enlightenment or knowledge of the oneness of reality requires that we regress or make ourselves like infants. This can be a dangerously tempting doctrine for certain adolescents and young adults who are not prepared to assume adult responsibilities, which seem frightening and overwhelming and demanding beyond their capacities. "I do not have to go through all this," such a person may think. "I can give up trying to be an adult and retreat from adult demands into sainthood." Schizophrenia, however, rather than sainthood, is achieved by acting on this supposition.

Most mystics understand the truth that was elaborated at the end of the discussion of discipline: namely, that we must possess or achieve something before we can give it up and still maintain our competence and viability. The infant without its ego boundaries may be in closer touch with reality than its parents, but it is incapable of surviving without the care of these parents and incapable of communicating its wisdom. The path to sainthood goes through adulthood. There are no quick and easy shortcuts. Ego boundaries must be hardened before they can be softened. An identity must be established before it can be transcended. One must find one's self before one can lose it. The temporary release from ego boundaries associated with falling in love, sexual intercourse or the use of certain psychoactive drugs may provide us with a glimpse of Nirvana, but not with Nirvana itself. It is a thesis of this book that Nirvana or lasting enlightenment or true spiritual growth can be achieved only through the persistent exercise of real love.

In summary, then, the temporary loss of ego boundaries involved in falling in love and in sexual intercourse not only leads us to make commitments to other people from which real love may begin but also gives us a foretaste of (and therefore an incentive for) the more lasting mystical ecstasy that can be ours after a lifetime of love. As such, therefore, while falling in love is not itself love, it is a part of the great and mysterious scheme of love.

Dependency

The second most common misconception about love is the idea that dependency is love. This is a misconception with which psychotherapists must deal on a daily basis. Its effect is seen most dramatically in an individual who makes an attempt or gesture or threat to commit suicide or who becomes incapacitatingly depressed in response to a rejection or separation from spouse or lover. Such a person says, "I do not want to live, I cannot live without my husband [wife, girl friend, boyfriend], I love him [or her] so much." And when I respond, as I frequently do, "You are mistaken; you do not love your husband [wife, girl friend, boyfriend]." "What do you mean?" is the angry question. "I just told you I can't live without him [or her]." I try to explain. "What you describe is parasitism, not love. When you require another individual for your survival, you are a parasite on that individual. There is no choice, no freedom involved in your relationship. It is a matter of necessity rather than love. Love is the free exercise of choice. Two people love each other only when they are quite capable of living without each other but *choose* to live with each other."

I define dependency as the inability to experience wholeness or to function adequately without the certainty that one is being actively cared for by another. Dependency in physically healthy adults is pathological—it is sick, always a manifestation of a mental illness or defect. It is to be distinguished from what are commonly referred to as dependency needs or feelings. We all—each and every one of us—even if we try to

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pretend to others and to ourselves that we don't—have dependency needs and feelings. All of us have desires to be babied, to be nurtured without effort on our parts, to be cared for by persons stronger than us who have our interests truly at heart. No matter how strong we are, no matter how caring and responsible and adult, if we look clearly into ourselves we will find the wish to be taken care of for a change. Each one of us, no matter how old and mature, looks for and would like to have in his or her life a satisfying mother figure and father figure. But for most of us these desires or feelings do not rule our lives; they are not the predominant theme of our existence. When they do rule our lives and dictate the quality of our existence, then we have something more than just dependency needs or feelings; we are dependent. Specifically, one whose life is ruled and dictated by dependency needs suffers from a psychiatric disorder to which we ascribe the diagnostic name "passive dependent personality disorder." It is perhaps the most common of all psychiatric disorders.

People with this disorder, passive dependent people, are so busy seeking to be loved that they have no energy left to love. They are like starving people, scrounging wherever they can for food, and with no food of their own to give to others. It is as if within them they have an inner emptiness, a bottomless pit crying out to be filled but which can never be completely filled. They never feel "full-filled" or have a sense of completeness. They always feel "a part of me is missing." They tolerate loneliness very poorly. Because of their lack of wholeness they have no real sense of identity, and they define themselves solely by their relationships. A thirty-year-old punch press operator, extremely depressed, came to see me three days after his wife had left him, taking their two children. She had threatened to leave him three times before, complaining of his total lack of attention to her and the children. Each time he had pleaded with her to remain and had promised to change, but his change had never lasted more than a day, and this time she had carried out her threat. He had not slept for two

nights, was trembling with anxiety, had tears streaming down his face and was seriously contemplating suicide. "I can't live without my family," he said, weeping. "I love them so."

"I'm puzzled," I said to him. "You've told me that your wife's complaints were valid, that you never did anything for her, that you came home only when you pleased, that you weren't interested in her sexually or emotionally, that you wouldn't even talk to the children for months on end, that you never played with them or took them anywhere. You have no relationship with any of your family, so I don't understand why you're so depressed over the loss of a relationship that never existed."

"Don't you see?" he replied. "I'm nothing now. Nothing. I have no wife. I have no children. I don't know who I am. I may not care for them, but I must love them. I am nothing without them."

Because he was so seriously depressed—having lost the identity that his family gave him—I made an appointment to see him again two days later. I expected little improvement. But when he returned he bounced into the office grinning cheerfully and announced, "Everything's OK now."

"Did you get back together with your family?" I asked.

"Oh, no," he replied happily, "I haven't heard from them since I saw you. But I did meet a girl last night down at my bar. She said she really likes me. She's separated, just like me. We've got a date again tonight. I feel like I'm human once more. I guess I don't have to see you again."

This rapid changeability is characteristic of passive dependent individuals. It is as if it does not matter whom they are dependent upon as long as there is just someone. It does not matter what their identity is as long as there is someone to give it to them. Consequently their relationships, although seemingly dramatic in their intensity, are actually extremely shallow. Because of the strength of their sense of inner emptiness and the hunger to fill it, passive dependent people will brook no delay in gratifying their need for others. A beautiful, brilliant and in some ways very healthy young woman had,

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from the age of seventeen to twenty-one, an almost endless series of sexual relationships with men invariably beneath her in terms of intelligence and capability. She went from one loser to the next. The problem as it emerged was that she was unable to wait long enough to seek out a man suited to her or even to choose from among the many men almost immediately available to her. Within twenty-four hours after the ending of a relationship she would pick up the first man she met in a bar and would come into her next therapy session singing his praises. "I know he's unemployed and drinks too much, but basically he's very talented, and he really cares for me. I know this relationship will work."

But it never did work, not only because she had not chosen well but also because she would then begin a pattern of clinging to the man, demanding more and more evidence of his affection, seeking to be with him constantly, refusing to be left alone. "It is because I love you so much that I cannot bear to be separated from you," she would tell him, but sooner or later he would feel totally stifled and trapped, without room to move, by her "love." A violent blow-up would occur, the relationship would be terminated and the cycle would begin all over again the next day. The woman was able to break the cycle only after three years of therapy, during which she came to appreciate her own intelligence and assets, to identify her emptiness and hunger and distinguish it from genuine love, to realize how her hunger was driving her to initiate and cling to relationships that were detrimental to her, and to accept the necessity for the strictest kind of discipline over her hunger if she was to capitalize on her assets.

In the diagnosis the word "passive" is used in conjunction with the word "dependent" because these individuals concern themselves with what others can do for them to the exclusion of what they themselves can do. Once, working with a group of five single patients, all passive dependent people, I asked them to speak of their goals in terms of what life situations they wanted to find themselves in five years hence. In one way or another each of them replied, "I want to be married to

someone who really cares for me." Not one mentioned holding down a challenging job, creating a work of art, making a contribution to the community, being in a position where he or she could love or even have children. The notion of effort was not involved in their daydreams; they envisioned only an effortless passive state of receiving care. I told them, as I tell many others: "If being loved is your goal, you will fail to achieve it. The only way to be assured of being loved is to be a person worthy of love, and you cannot be a person worthy of love when your primary goal in life is to passively be loved." This is not to say that passive dependent people never *do* things for others, but their motive in doing things is to cement the attachment of the others to them so as to assure their own care. And when the possibility of care from another is not directly involved, they do have great difficulty in "doing things." All the members of the aforementioned group found it agonizingly difficult to buy a house, separate from their parents, locate a job, leave a totally unsatisfactory old job or even invest themselves in a hobby.

In marriage there is normally a differentiation of the roles of the two spouses, a normally efficient division of labor between them. The woman usually does the cooking, house-cleaning and shopping and cares for the children; the man usually maintains employment, handles the finances, mows the lawn and makes repairs. Healthy couples instinctively will switch roles from time to time. The man may cook a meal now and then, spend one day a week with the children, clean the house to surprise his wife; the woman may get a part-time job, mow the lawn on her husband's birthday, or take over the checking account and bill-paying for a year. The couple may often think of this role switching as a kind of play that adds spice and variety to their marriage. It is this, but perhaps more important (even if it is done unconsciously), it is a process that diminishes their mutual dependency. In a sense, each spouse is training himself or herself for survival in the event of the loss of the other. But for passive dependent people the loss of the other is such a frightening prospect that

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they cannot face preparing for it or tolerating a process that would diminish the dependency or increase the freedom of the other. Consequently it is one of the behavioral hallmarks of passive dependent people in marriage that their role differentiation is rigid, and they seek to increase rather than diminish mutual dependency so as to make marriage more rather than less of a trap. By so doing, in the name of what they call love but what is really dependency, they diminish their own and each other's freedom and stature. Occasionally, as part of this process, passive dependent people when married will actually forsake skills that they had gained before marriage. An example of this is the not uncommon syndrome of the wife who "can't" drive a car. Half the time in such situations she may never have learned, but in the remaining cases, sometimes allegedly because of a minor accident, she develops a "phobia" about driving at some point after marriage and stops. The effect of this "phobia" in rural and suburban areas, where most people live, is to render her almost totally dependent on her husband and chain her husband to her by her helplessness. Now he must do all the shopping for the family himself or he must chauffeur her on all shopping expeditions. Because this behavior usually gratifies the dependency needs of both spouses, it is almost never seen as sick or even as a problem to be solved by most couples. When I suggested to an otherwise extremely intelligent banker that his wife, who suddenly stopped driving at age forty-six because of a "phobia," might have a problem deserving of psychiatric attention, he said "Oh, no, the doctor told her it was because of menopause, and you can't do anything about that." She was secure in the knowledge that he would not have an affair and leave her because he was so busy after work taking her shopping and driving the children around. He was secure in the knowledge that she would not have an affair and leave him because she did not have the mobility to meet people when he was away from her. Through such behavior, passive dependent marriages may be made lasting and secure, but they cannot be considered either healthy or genuinely loving, because the

security is purchased at the price of freedom and the relationship serves to retard or destroy the growth of the individual partners. Again and again we tell our couples that "a good marriage can exist only between two strong and independent people."

Passive dependency has its genesis in lack of love. The inner feeling of emptiness from which passive dependent people suffer is the direct result of their parents' failure to fulfill their needs for affection, attention and care during their childhood. It was mentioned in the first section that children who are loved and cared for with relative consistency throughout childhood enter adulthood with a deepseated feeling that they are lovable and valuable and therefore will be loved and cared for as long as they remain true to themselves. Children growing up in an atmosphere in which love and care are lacking or given with gross inconsistency enter adulthood with no such sense of inner security. Rather, they have an inner sense of insecurity, a feeling of "I don't have enough" and a sense that the world is unpredictable and ungiving, as well as a sense of themselves as being questionably lovable and valuable. It is no wonder, then, that they feel the need to scramble for love, care and attention wherever they can find it, and once having found it, cling to it with a desperation that leads them to unloving, manipulative, Machiavellian behavior that destroys the very relationships they seek to preserve. As also indicated in the previous section, love and discipline go hand in hand, so that unloving, uncaring parents are people lacking in discipline, and when they fail to provide their children with a sense of being loved, they also fail to provide them with the capacity for self-discipline. Thus the excessive dependency of the passive dependent individuals is only the principal manifestation of their personality disorder. Passive dependent people lack self-discipline. They are unwilling or unable to delay gratification of their hunger for attention. In their desperation to form and preserve attachments they throw honesty to the winds. They cling to outworn relationships when they should give them up. Most important, they lack a sense of responsi-

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bility for themselves. They passively look to others, frequently even their own children, as the source of their happiness and full-fulfillment, and therefore when they are not happy or fulfilled they basically feel that others are responsible. Consequently they are endlessly angry, because they endlessly feel let down by others who can never in reality fulfill all their needs or "make" them happy. I have a colleague who often tells people, "Look, allowing yourself to be dependent on another person is the worst possible thing you can do to yourself. You would be better off being dependent on heroin. As long as you have a supply of it, heroin will never let you down; if it's there, it will always make you happy. But if you expect another person to make you happy, you'll be endlessly disappointed." As a matter of fact, it is no accident that the most common disturbance that passive dependent people manifest beyond their relationships to others is dependency on drugs and alcohol. Theirs is the "addictive personality." They are addicted to people, sucking on them and gobbling them up, and when people are not available to be sucked and gobbled, they often turn to the bottle or the needle or the pill as a people-substitute.

In summary, dependency may appear to be love because it is a force that causes people to fiercely attach themselves to one another. But in actuality it is not love; it is a form of antilove. It has its genesis in a parental failure to love and it perpetuates the failure. It seeks to receive rather than to give. It nourishes infantilism rather than growth. It works to trap and constrict rather than to liberate. Ultimately it destroys rather than builds relationships, and it destroys rather than builds people.

Cathexis Without Love

One of the aspects of dependency is that it is unconcerned with spiritual growth. Dependent people are interested in their own nourishment, but no more; they desire filling, they desire to be happy; they don't desire to grow, nor are they willing to tolerate the unhappiness, the loneliness and suffering involved in growth. Neither do dependent people care about the spiritual growth of the other, the object of their dependency; they care only that the other is there to satisfy them. Dependency is but one of the forms of behavior to which we incorrectly apply the word "love" when concern for spiritual evolution is absent. We will now consider other such forms, and we hope to demonstrate again that love is never nurturance or cathexis without regard to spiritual growth.

We frequently speak of people loving inanimate objects or activities. Thus we say, "He loves money" or "He loves power" or "He loves to garden" or "He loves to play golf." Certainly an individual may extend himself or herself much beyond ordinary personal limits, working sixty, seventy, eighty hours a week to amass wealth or power. Yet despite the extent of one's fortune or influence, all this work and accumulation may not be self-enlarging at all. Indeed, we may often say about a self-made tycoon, "He's a small person, mean and petty." While we may talk about how much this person loves money or power, we frequently do not perceive him as a loving person. Why is this so? It is because wealth or power have become for such people ends in themselves rather than means to a spiritual goal. The only true end of love is spiritual growth or human evolution.

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Hobbies are self-nurturing activities. In loving ourselves—that is, nurturing ourselves for the purpose of spiritual growth—we need to provide ourselves with all kinds of things that are not directly spiritual. To nourish the spirit the body must also be nourished. We need food and shelter. No matter how dedicated we are to spiritual development, we also need rest and relaxation, exercise and distraction. Saints must sleep and even prophets must play. Thus hobbies may be a means through which we love ourselves. But if a hobby becomes an end in itself, then it becomes a substitute for rather than a means to self-development. Sometimes it is precisely because they are substitutes for self-development that hobbies are so popular. On golf courses, for instance, one may find some aging men and women whose chief remaining goal in life is to knock a few more strokes off their game. This dedicated effort to improve their skill serves to give them a sense of progress in life and thereby assists them in ignoring the reality that they have actually stopped progressing, having given up the effort to improve themselves as human beings. If they loved themselves more they would not allow themselves to passionately settle for such a shallow goal and narrow future.

On the other hand, power and money may be means to a loving goal. A person may, for instance, suffer a career in politics for the primary purpose of utilizing political power for the betterment of the human race. Or some people may yearn for riches, not for money's sake but in order to send their children to college or provide themselves with the freedom and time for study and reflection which are necessary for their own spiritual growth. It is not power or money that such people love; it is humanity.

Among the things that I am saying here and throughout this section of the book is that our use of the word "love" is so generalized and unspecific as to severely interfere with our understanding of love. I have no great expectation that the language will change in this respect. Yet as long as we continue to use the word "love" to describe our relationship with anything that is important to us, anything we cathect, with-

out regard for the quality of that relationship, we will continue to have difficulty discerning the difference between the wise and the foolish, the good and the bad, the noble and the ignoble.

Using our more specific definition, it is clear, for instance, that we can love only human beings. For, as we generally conceive of things, it is only human beings who possess a spirit capable of substantial growth.* Consider the matter of pets. We "love" the family dog. We feed it and bathe it, pet it and cuddle it, discipline it and play with it. When it is sick we may drop everything and rush it to the veterinarian. When it runs away or dies we may be grief-stricken. Indeed, for some lonely people without children, their pets may become the sole reason for their existence. If this is not love, then what is? But let us examine the differences between our relationship with a pet and that with another human being. First of all, the extent of our communication with our pets is extremely limited in comparison with the extent to which we may communicate with other humans if we work at it. We do not know what our pets are thinking. This lack of knowledge allows us to project onto our pets our own thoughts and feelings, and thereby to feel an emotional closeness with them which may not correspond to reality at all. Second, we find our pets satisfactory only insofar as their wills coincide with ours. This is the basis on which we generally select our pets, and if their wills begin to diverge significantly from our own, we get rid of them. We don't keep pets around very long when they protest or fight back against us. The only school to which

* I recognize the possibility that this conception may be a false one; that all matter, animate and inanimate, may possess spirit. The distinction of ourselves as humans being different from "lower" animals and plants and from inanimate earth and rocks, is a manifestation of maya, or illusion, in the mystical frame of reference. There are levels of understanding. In this book I am dealing with love at a certain level. Unfortunately my skills of communicating are inadequate to encompass more than one level at a time or to do more than provide an occasional glimpse of a level other than the one on which I am communicating.

we send our pets for the development of their minds or spirits is obedience school. Yet it is possible for us to desire that other humans develop a "will of their own"; indeed, it is this desire for the differentiation of the other that is one of the characteristics of genuine love. Finally, in our relationship with pets we seek to foster their dependency. We do not want them to grow up and leave home. We want them to stay put, to lie dependably near the hearth. It is their attachment to us rather than their independence from us that we value in our pets.

This matter of the "love" of pets is of immense import because many, many people are capable of "loving" *only* pets and incapable of genuinely loving other human beings. Large numbers of American soldiers had idyllic marriages to German, Italian or Japanese "war brides" with whom they could not verbally communicate. But when their brides learned English, the marriages began to fall apart. The servicemen could then no longer project upon their wives their own thoughts, feelings, desires and goals and feel the same sense of closeness one feels with a pet. Instead, as their wives learned English, the men began to realize that these women had ideas, opinions and aims different from their own. As this happened, love began to grow for some; for most, perhaps, it ceased. The liberated woman is right to beware of the man who affectionately calls her his "pet." He may indeed be an individual whose affection is dependent upon her being a pet, who lacks the capacity to respect her strength, independence and individuality. Probably the most saddening example of this phenomenon is the very large number of women who are capable of "loving" their children only as infants. Such women can be found everywhere. They may be ideal mothers until their children reach the age of two—infinitely tender, joyously breast-feeding, cuddling and playing with their babies, consistently affectionate, totally dedicated to their nurture, and blissfully happy in their motherhood. Then, almost overnight, the picture changes. As soon as a child begins to assert its own will—to disobey, to whine, to refuse to play, to oc-

at the right time was more compassionate than giving at the wrong time, and that fostering independence was more loving than taking care of people who could otherwise take care of themselves. He even had to learn that expressing his own needs, anger, resentments and expectations was every bit as necessary to the mental health of his family as his self-sacrifice, and therefore that love must be manifested in confrontation as much as in beatific acceptance.

Gradually coming to realize how he infantilized his family, he began to make changes. He stopped picking up after everyone and became openly angry when his sons did not adequately participate in the care of the home. He refused to continue paying for the insurance on his sons' cars, telling them that if they wanted to drive they would have to pay for it themselves. He suggested that his wife should go alone to the opera in New York. In making these changes he had to risk appearing to be the "bad guy" and had to give up the omnipotence of his former role as provider for all the needs of the family. But even though his previous behavior had been motivated primarily by a need to maintain an image of himself as a loving person, he had at his core a capacity for genuine love, and because of this capacity he was able to accomplish these alterations in himself. Both his wife and his sons reacted to these changes initially with anger. But soon one son went back to college, and the other found a more demanding job and got an apartment for himself. His wife began to enjoy her new independence and to grow in ways of her own. The man found himself becoming more effective as a minister and at the same time his life became more enjoyable.

The minister's misguided love bordered on the more serious perversion of love that is masochism. Laymen tend to associate sadism and masochism with purely sexual activity, thinking of them as the sexual enjoyment derived from inflicting or receiving physical pain. Actually, true sexual sadomasochism is a relatively uncommon form of psychopathology. Much, much more common, and ultimately more serious, is the phenomenon of social sadomasochism, in which people uncon-

sciously desire to hurt and be hurt by each other through their nonsexual interpersonal relations. Prototypically a woman will seek psychiatric attention for depression in response to desertion by her husband. She will regale the psychiatrist with an endless tale of repeated mistreatment by her husband: he paid her no attention, he had a string of mistresses, he gambled away the food money, he went away for days at a time whenever he pleased, he came home drunk and beat her, and now, finally, he's deserted her and the children on Christmas Eve—Christmas Eve yet! The neophyte therapist tends to respond to this "poor woman" and her tale with instant sympathy, but it does not take long for the sympathy to evaporate in the light of further knowledge. First the therapist discovers that this pattern of mistreatment has existed for twenty years, and that while the poor woman divorced her brute of a husband twice, she also remarried him twice, and that innumerable separations were followed by innumerable reconciliations. Next, after working with her for a month or two to assist her in gaining independence, and when everything seemingly is going well and the woman appears to be enjoying the tranquillity of life apart from her husband, the therapist sees the cycle enacted all over again. The woman happily bounces into the office one day to announce, "Well, Henry's come back. He called up the other night saying he wanted to see me, so I did see him. He pleaded with me to come back, and he really seems changed, so I took him back." When the therapist points out that this seems to be but a repetition of a pattern they had agreed was destructive, the woman says, "But I love him. You can't deny love." If the therapist attempts to examine this "love" with any strenuousness, then the patient terminates therapy.

What is going on here? In trying to understand what has happened, the therapist recalls the obvious relish with which the woman had recounted the long history of her husband's brutality and mistreatment. Suddenly a strange idea begins to dawn; maybe this woman endures her husband's mistreat-

ment, and even seeks it out, for the very pleasure of talking about it. But what would be the nature of such pleasure? The therapist remembers the woman's self-righteousness. Could it be that the most important thing in the woman's life is to have a sense of moral superiority and that in order to maintain this sense she needs to be mistreated? The nature of the pattern now becomes clear. By allowing herself to be treated basely she can feel superior. Ultimately she can even have the sadistic pleasure of seeing her husband beg and plead to return, and momentarily acknowledge her superiority from his humbled position, while she decides whether or not to magnanimously take him back. And in this moment she achieves her revenge. When such women are examined it is generally found that they were particularly humiliated as children. As a result they seek revenge through their sense of moral superiority, which requires repeated humiliation and mistreatment. If the world is treating us well we have no need to avenge ourselves on it. If seeking revenge is our goal in life, we will have to see to it that the world treats us badly in order to justify our goal. Masochists look on their submission to mistreatment as love, whereas in fact it is a necessity in their never-ceasing search for revenge and is basically motivated by hatred.

The issue of masochism highlights still another very major misconception about love—that it is self-sacrifice. By virtue of this belief the prototypical masochist was enabled to see her tolerance of mistreatment as self-sacrifice and hence as love, and therefore did not have to acknowledge her hatred. The minister also saw his self-sacrificial behavior as love, although actually it was motivated not by the needs of his family but by his own need to maintain an image of himself. Early in his treatment he would continually talk about how he "did things for" his wife and his children, leading one to believe that he himself got nothing out of such acts. But he did. Whenever we think of ourselves as doing something *for* someone else, we are in some way denying our own responsibility.

Whatever we do is done because we choose to do it, and we make that choice because it is the one that satisfies us the most. Whatever we do for someone else we do because it fulfills a need we have. Parents who say to their children, "You should be grateful for all that we have done for you" are invariably parents who are lacking in love to a significant degree. Anyone who genuinely loves knows the pleasure of loving. When we genuinely love we do so because we *want* to love. We have children because we want to have children, and if we are loving parents, it is because we want to be loving parents. It is true that love involves a change in the self, but this is an extension of the self rather than a sacrifice of the self. As will be discussed again later, genuine love is a self-replenishing activity. Indeed, it is even more; it enlarges rather than diminishes the self; it fills the self rather than depleting it. In a real sense love is as selfish as nonlove. Here again there is a paradox in that love is both selfish and unselfish at the same time. It is not selfishness or unselfishness that distinguishes love from nonlove; it is the aim of the action. In the case of genuine love the aim is always spiritual growth. In the case of nonlove the aim is always something else.

Love Is Not a Feeling

I have said that love is an action, an activity. This leads to the final major misconception of love which needs to be addressed. Love is not a feeling. Many, many people possessing a feeling of love and even acting in response to that feeling act in all manner of unloving and destructive ways. On the other hand, a genuinely loving individual will often take loving and constructive action toward a person he or she consciously

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dislikes, actually feeling no love toward the person at the time and perhaps even finding the person repugnant in some way.

The feeling of love is the emotion that accompanies the experience of cathecting. Cathecting, it will be remembered, is the process by which an object becomes important to us. Once cathected, the object, commonly referred to as a "love object," is invested with our energy as if it were a part of ourselves, and this relationship between us and the invested object is called a cathexis. Since we may have many such relationships going on at the same time, we speak of our cathexes. The process of withdrawing our energy from a love object so that it loses its sense of importance for us is known as decathecting. The misconception that love is a feeling exists because we confuse cathecting with loving. This confusion is understandable since they are similar processes, but there are also striking differences. First of all, as has been pointed out, we may cathect any object, animate or inanimate, with or without a spirit. Thus a person may cathect the stock market or a piece of jewelry and may feel love for these things. Second, the fact that we have cathected another human being does not mean that we care a whit for that person's spiritual development. The dependent person, in fact, usually fears the spiritual development of a cathected spouse. The mother who insisted upon driving her adolescent son to and from school clearly cathected the boy; he was important to her—but his spiritual growth was not. Third, the intensity of our cathexes frequently has nothing to do with wisdom or commitment. Two strangers may meet in a bar and cathect each other in such a way that nothing—not previously scheduled appointments, promises made, or family stability—is more important for the moment than their sexual consummation. Finally, our cathexes may be fleeting and momentary. Immediately following their sexual consummation the just-mentioned couple may find each other unattractive and undesirable. We may decathect something almost as soon as we have cathected it.

Genuine love, on the other hand, implies commitment and

the exercise of wisdom. When we are concerned for someone's spiritual growth, we know that a lack of commitment is likely to be harmful and that commitment to that person is probably necessary for us to manifest our concern effectively. It is for this reason that commitment is the cornerstone of the psychotherapeutic relationship. It is almost impossible for a patient to experience significant personality growth without a "therapeutic alliance" with the therapist. In other words, before the patient can risk major change he or she must feel the strength and security that come from believing that the therapist is the patient's constant and stable ally. For this alliance to occur the therapist must demonstrate to the patient, usually over a considerable length of time, the consistent and steadfast caring that can arise only from a capacity for commitment. This does not mean that the therapist always *feels* like listening to the patient, like it or not. It is no different in a marriage. In a constructive marriage, just as in constructive therapy, the partners must regularly, routinely and predictably, attend to each other and their relationship no matter how they feel. As has been mentioned, couples sooner or later always fall out of love, and it is at the moment when the mating instinct has run its course that the opportunity for genuine love begins. It is when the spouses no longer feel like being in each other's company always, when they would rather be elsewhere some of the time, that their love begins to be tested and will be found to be present or absent.

This is not to say that the partners in a stable, constructive relationship such as intensive psychotherapy or marriage do not cathet each other and the relationship itself in various ways; they do. What it does say is that genuine love transcends the matter of cathexes. When love exists it does so with or without cathexis and with or without a loving feeling. It is easier—indeed, it is fun—to love with cathexis and the feeling of love. But it is possible to love without cathexis and without loving feelings, and it is in the fulfillment of this possibility

fifth way, true listening, requiring from the parent a quantum leap of energy compared to the less effortful ways. The reader may naïvely suppose that I will recommend to parents that they should always follow the fifth way and always truly listen to their children. Hardly! First of all, the six-year-old's propensity to talk is so great that a parent who always truly listened would have negligible time left to accomplish anything else. Second, the effort required to truly listen is so great that the parent would be too exhausted to accomplish anything else. Finally, it would be unbelievably boring, because the fact of the matter is that the chatter of a six-year-old is generally boring. What is required, therefore, is a balance of all five ways. It is necessary at times to tell children simply to shut up—when, for instance, their talk may be distracting in situations that critically require attention elsewhere or when it may represent a rude interruption of others and an attempt to achieve hostile or unrealistic dominance. Frequently six-year-olds will chatter for the pure joy of chattering, and there is nothing to be served by giving them attention when they are not even requesting it and are quite clearly happy talking to themselves. There are other times when children are not content to talk to themselves but desire to interact with parents, and yet their need can be quite adequately met by pretend listening. At these times what children want from interaction is not communication but simply closeness, and pretend listening will suffice to provide them with the sense of "being with" that they want. Furthermore, children themselves often like to drift in and out of communication and will be understanding of their parents' selective listening, since they are only selectively communicating. They understand this to be the rule of the game. So it is only during a relatively small proportion of their total talking time that six-year-old children need or even desire a response of true and total listening. One of the many extremely complex tasks of parenting is to be able to strike a close to ideal balance of styles of listening and not listening, responding with the appropriate style to a child's varying needs.

Such a balance is frequently not struck because, even though the duration need not be long, many parents are unwilling or unable to expend the energy required for true listening. Perhaps most parents. They may think they are truly listening when all they are doing is pretend listening, or at best selective listening, but this is self-deception, designed to hide from themselves their laziness. For true listening, no matter how brief, requires tremendous effort. First of all, it requires total concentration. You cannot truly listen to anyone and do anything else at the same time. If a parent wants to truly listen to a child, the parent must put aside everything else. The time of true listening must be devoted solely to the child; it must be the child's time. If you are not willing to put aside everything, including your own worries and preoccupations for such a time, then you are not willing to truly listen. Second, the effort required for total concentration on the words of a six-year-old child is considerably greater than that required for listening to a great lecturer. The child's speech patterns are uneven—occasional rushes of words interspersed with pauses and repetitions—which makes concentration difficult. Then the child will usually be talking of matters that have no inherent interest for the adult, whereas the great lecturer's audience is specifically interested in the topic of his speech. In other words, it is dull to listen to a six-year-old, which makes it doubly difficult to keep concentration focused. Consequently truly listening to a child of this age is a real labor of love. Without love to motivate the parent it couldn't be done.

But why bother? Why exert all this effort to focus totally on the boring prattlings of a six-year-old? First, your willingness to do so is the best possible concrete evidence of your esteem you can give your child. If you give your child the same esteem you would give a great lecturer, then the child will know him- or herself to be valued and therefore will feel valuable. There is no better and ultimately no other way to teach your children that they are valuable people than by valuing them. Second, the more children feel valuable, the

more they will begin to say things of value. They will rise to your expectation of them. Third, the more you listen to your child, the more you will realize that in amongst the pauses, the stutterings, the seemingly innocent chatter, your child does indeed have valuable things to say. The dictum that great wisdom comes from "the mouths of babes" is recognized as an absolute fact by anyone who truly listens to children. Listen to your child enough and you will come to realize that he or she is quite an extraordinary individual. And the more extraordinary you realize your child to be, the more you will be willing to listen. And the more you will learn. Fourth, the more you know about your child, the more you will be able to teach. Know little about your children, and usually you will be teaching things that either they are not ready to learn or they already know and perhaps understand better than you. Finally, the more children know that you value them, that you consider them extraordinary people, the more willing they will be to listen to you and afford you the same esteem. And the more appropriate your teaching, based on your knowledge of them, the more eager your children will be to learn from you. And the more they learn, the more extraordinary they will become. If the reader senses the cyclical character of this process, he or she is quite correct and is appreciating the truth of the reciprocity of love. Instead of a vicious downward cycle, it is a creative upward cycle of evolution and growth. Value creates value. Love begets love. Parents and child together spin forward faster and faster in the *pas de deux* of love.

We have been talking with a six-year-old in mind. With younger or older children the proper balance of listening and nonlistening differs, but the process is basically the same. With younger children the communication is more and more nonverbal but still ideally requires periods of total concentration. You can't play patty-cake very well when your mind is elsewhere. And if you can only play patty-cake halfheartedly, you are running the risk of having a halfhearted child. Adolescent children require less total listening time from their

parents than a six-year-old but even more true listening time. They are much less likely to chatter aimlessly, but when they do talk, they want their parents' full attention even more than do the younger children.

The need for one's parents to listen is never outgrown. A thirty-year-old talented professional man in treatment for feelings of anxiety related to low self-esteem could recall numerous instances in which his parents, also professionals, had been unwilling to listen to what he had to say or had regarded what he had to say as being of little worth and consequence. But of all these memories the most vivid and painful was that of his twenty-second year, when he wrote a lengthy provocative thesis that earned his graduation from college with high honors. Being ambitious for him, his parents were absolutely delighted by the honors he had received. Yet despite the fact that for a whole year he left a copy of the thesis around in full view in the family living room and made frequent hints to his parents that "they might like to have a look at it," neither one of them ever took the time to read it. "I daresay they would have read it," he said toward the end of his therapy, "I daresay they would have even complimented me on it had I gone to them and asked them point-blank, 'Look, would you please, please read my thesis? I want you to know and appreciate the kinds of things I am thinking.' But that would have been begging them to listen to me, and I was damned if at twenty-two I was going to go around begging for their attention. Having to beg for it wouldn't have made me feel any more valuable."

True listening, total concentration on the other, is always a manifestation of love. An essential part of true listening is the discipline of bracketing, the temporary giving up or setting aside of one's own prejudices, frames of reference and desires so as to experience as far as possible the speaker's world from the inside, stepping inside his or her shoes. This unification of speaker and listener is actually an extension and enlargement of ourself, and new knowledge is always gained from this. Moreover, since true listening involves bracketing, a set-

ting aside of the self, it also temporarily involves a total acceptance of the other. Sensing this acceptance, the speaker will feel less and less vulnerable and more and more inclined to open up the inner recesses of his or her mind to the listener. As this happens, speaker and listener begin to appreciate each other more and more, and the duet dance of love is again begun. The energy required for the discipline of bracketing and the focusing of total attention is so great that it can be accomplished only by love, by the will to extend oneself for mutual growth. Most of the time we lack this energy. Even though we may feel in our business dealings or social relationships that we are listening very hard, what we are usually doing is listening selectively, with a preset agenda in mind, wondering as we listen how we can achieve certain desired results and get the conversation over with as quickly as possible or redirected in ways more satisfactory to us.

Since true listening is love in action, nowhere is it more appropriate than in marriage. Yet most couples never truly listen to each other. Consequently, when couples come to us for counseling or therapy, a major task we must accomplish if the process is to be successful is to teach them how to listen. Not infrequently we fail, the energy and discipline involved being more than they are willing to expend or submit themselves to. Couples are often surprised, even horrified, when we suggest to them that among the things they should do is talk to each other by appointment. It seems rigid and unromantic and uns spontaneous to them. Yet true listening can occur only when time is set aside for it and conditions are supportive of it. It cannot occur when people are driving, or cooking or tired and anxious to sleep or easily interrupted or in a hurry. Romantic "love" is effortless, and couples are frequently reluctant to shoulder the effort and discipline of true love and listening. But when and if they finally do, the results are superbly gratifying. Again and again we have the experience of hearing one spouse say to another with real joy, once the process of true listening has been started, "We've been

married twenty-nine years and I never knew that about you before." When this occurs we know that growth in the marriage has begun.

While it is true that one's capacity to truly listen may improve gradually with practice, it never becomes an effortless process. Perhaps the primary requisite for a good psychiatrist is a capacity to truly listen, yet half a dozen times during the average "fifty-minute hour" I will catch myself failing to truly listen to what my patient is saying. Sometimes I may lose the thread of my patient's associations entirely, and it is then necessary for me to say, "I'm sorry, but I allowed my mind to wander for a moment and I was not truly listening to you. Could you run over the past few sentences again?" Interestingly, patients are usually not resentful when this occurs. To the contrary, they seem to understand intuitively that a vital element of the capacity to truly listen is being on the alert for those lapses when one is not truly listening, and my acknowledgment that my attention has wandered actually reassures them that most of the time I am truly listening. This knowledge that one is being truly listened to is frequently in and of itself remarkably therapeutic. In approximately a quarter of our cases, whether patients are adults or children, considerable and even dramatic improvement is shown during the first few months of psychotherapy, before any of the roots of problems have been uncovered or significant interpretations have been made. There are several reasons for this phenomenon, but chief among them, I believe, is the patient's sense that he or she is being truly listened to, often for the first time in years, and perhaps for the first time ever.

While listening is by far the most important form of attention, other forms are also necessary in most loving relationships, particularly with children. The variety of such possible forms is great. One is game-playing. With the infant this will be patty-cake and peekaboo; with the six-year-old it will be magic tricks, go fish, or hide-and-seek; with the twelve-year-old it will be badminton and gin rummy; and so on. Reading

to young children is attention, as is helping older ones with their homework. Family activities are important: movies, picnics, drives, trips, fairs, carnivals. Some forms of attention are pure service to the child: sitting on the beach attending a four-year-old or the almost endless chauffeuring required by early adolescents. But what all these forms of attention have in common—and they have it in common with listening as well—is that they involve time spent with the child. Basically, to attend is to spend time with, and the quality of the attention is proportional to the intensity of concentration during that time. The time spent with children in these activities, if used well, gives parents countless opportunities to observe their children and come to know them better. Whether children are good losers or bad, how they do their homework and how they learn, what appeals to them and what doesn't, when they are courageous and when they are frightened in such activities—all are vital pieces of information for the loving parent. This time with the child in activity also gives the parents innumerable opportunities for the teaching of skills and the basic principles of discipline. The usefulness of activity for observing and teaching the child is of course the basic principle of play therapy, and experienced child therapists may become extremely adept at using the time spent with their child patients in play for making significant observations and therapeutic interventions.

Keeping one's eye on a four-year-old at the beach, concentrating on an interminable disjointed story told by a six-year-old, teaching an adolescent how to drive, truly listening to the tale of your spouse's day at the office or laundromat, and understanding his or her problems from the inside, attempting to be as consistently patient and bracketing as much as possible—all these are tasks that are often boring, frequently inconvenient and always energy-draining; they mean work. If we were lazier we would not do them at all. If we were less lazy we would do them more often or better. Since love is work, the essence of nonlove is laziness. The subject of lazi-

and before the minister can come out onto the steps to meet with his flock. Should you manage to accost her—which is unlikely—and invite her to the coffee social hour following the service, she would thank you politely, nervously looking away from you, but tell you that she has a pressing engagement, and would then dash away. Were you to follow her toward her pressing engagement you would find that she returns directly to her home, a little apartment where the blinds are always drawn, unlocks her door, enters, immediately locks the door behind her, and is not seen again that Sunday. If you could keep watch over her you might see that she has a job as a low ranking typist in a large office, where she accepts her assignments wordlessly, types them faultlessly, and returns her finished work without comment. She eats her lunch at her desk and has no friends. She walks home, stopping always at the same impersonal supermarket for a few provisions before she vanishes behind her door until she appears again for the next day's work. On Saturday afternoons she goes alone to a local movie theater that has a weekly change of shows. She has a TV set. She has no phone. She almost never receives mail. Were you somehow able to communicate with her and comment that her life seemed lonely, she would tell you that she rather enjoyed her loneliness. If you asked her if she didn't even have any pets, she would tell you that she had had a dog of whom she was very fond but that he had died eight years before and no other dog could take his place.

Who is this woman? We do not know the secrets of her heart. What we do know is that her whole life is devoted to avoiding risks and that in this endeavor, rather than enlarging her self, she has narrowed and diminished it almost to the point of nonexistence. She cathects no other living thing. Now, we have said that simple cathectis is not love, that love transcends cathectis. This is true, but love requires cathectis for a beginning. We can love only that which in one way or another has importance for us. But with cathectis there is always the risk of loss or rejection. If you move out to another human being, there is always the risk that that person will

move away from you, leaving you more painfully alone than you were before. Love anything that lives—a person, a pet, a plant—and it will die. Trust anybody and you may be hurt; depend on anyone and that one may let you down. The price of cathexis is pain. If someone is determined not to risk pain, then such a person must do without many things: having children, getting married, the ecstasy of sex, the hope of ambition, friendship—all that makes life alive, meaningful and significant. Move out or grow in any dimension and pain as well as joy will be your reward. A full life will be full of pain. But the only alternative is not to live fully or not to live at all.

The essence of life is change, a panoply of growth and decay. Elect life and growth, and you elect change and the prospect of death. A likely determinant for the isolated, narrow life of the woman described was an experience or series of experiences with death which she found so painful that she was determined never to experience death again, even at the cost of living. In avoiding the experience of death she had to avoid growth and change. She elected a life of sameness free from the new, the unexpected, a living death, without risk or challenge. I have said that the attempt to avoid legitimate suffering lies at the root of all emotional illness. Not surprisingly, most psychotherapy patients (and probably most non-patients, since neurosis is the norm rather than the exception) have a problem, whether they are young or old, in facing the reality of death squarely and clearly. What is surprising is that the psychiatric literature is only beginning to examine the significance of this phenomenon. If we can live with the knowledge that death is our constant companion, traveling on our "left shoulder," then death can become in the words of Don Juan, our "ally," still fearsome but continually a source of wise counsel.* With death's counsel, the constant awareness of the limit of our time to live and love, we can always

* See Carlos Casteneda's *The Teachings of Don Juan: A Yaqui Way of Knowledge*, *A Separate Reality*, *Journey to Ixtlan*, and *Tales of Power*. On a major level these are books about the psychotherapeutic process.

be guided to make the best use of our time and live life to the fullest. But if we are unwilling to fully face the fearsome presence of death on our left shoulder, we deprive ourselves of its counsel and cannot possibly live or love with clarity. When we shy away from death, the ever-changing nature of things, we inevitably shy away from life.

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Thus all life itself represents a risk, and the more lovingly we live our lives the more risks we take. Of the thousands, maybe even millions, of risks we can take in a lifetime the greatest is the risk of growing up. Growing up is the act of stepping from childhood into adulthood. Actually it is more of a fearful leap than a step, and it is a leap that many people never really take in their lifetimes. Though they may outwardly appear to be adults, even successful adults, perhaps the majority of "grown-ups" remain until their death psychological children who have never truly separated themselves from their parents and the power that their parents have over them. Perhaps because it was so poignantly personal to me, I feel I can best illustrate the essence of growing up and the enormity of the risk involved by describing the giant step I myself took into adulthood at the end of my fifteenth year—fortunately very early in life. Although this step was a conscious decision, let me preface my account of it by saying that I had no awareness whatsoever at the time that what I was doing was growing up. I only knew that I was leaping into the unknown.

At the age of thirteen I went away from home to Phillips

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Exeter Academy, a boy's preparatory school of the very highest reputation, to which my brother had gone before me. I knew that I was fortunate to be going there, because attendance at Exeter was part of a well-defined pattern that would lead me to one of the best Ivy League colleges and from there into the highest echelons of the Establishment, whose doors would be wide open to me on account of my educational background. I felt extremely lucky to have been born the child of well-to-do parents who could afford "the best education that money could buy," and I had a great sense of security which came from being a part of what was so obviously a proper pattern. The only problem was that almost immediately after starting Exeter I became miserably unhappy. The reasons for my unhappiness were totally obscure to me then and are still quite profoundly mysterious to me today. I just did not seem to fit. I didn't seem to fit with the faculty, the students, the courses, the architecture, the social life, the total environment. Yet there seemed nothing to do other than to try to make the best of it and try to mold my imperfections so that I could fit more comfortably into this pattern that had been laid out for me and that was so obviously the right pattern. And try I did for two and a half years. Yet daily my life appeared more meaningless and I felt more wretched. The last year I did little but sleep, for only in sleep could I find any comfort. In retrospect I think perhaps in my sleep I was resting and unconsciously preparing myself for the leap I was about to take. I took it when I returned home for spring vacation of my third year and announced that I was not going to return to school. My father said, "But you can't quit—it's the best education money can buy. Don't you realize what you'd be throwing away?"

"I know it's a good school," I replied, "but I'm not going back."

"Why can't you adjust to it, make another go of it?" my parents asked.

"I don't know," I answered, feeling totally inadequate. "I

don't even know why I hate it so. But I hate it and I'm not going back."

"Well, what are you going to do, then? Since you seem to want to play so loose with your future, just what is it you plan to do?"

Again I miserably replied, "I don't know. All I know is I'm not going back there."

My parents were understandably alarmed and took me forthwith to a psychiatrist, who stated that I was depressed and recommended a month's hospitalization, giving me a day to decide whether or not this was what I wanted. That night was the only time I ever considered suicide. Entering a psychiatric hospital seemed quite appropriate to me. I was, as the psychiatrist said, depressed. My brother had adjusted to Exeter; why couldn't I? I knew that my difficulty in adjusting was entirely my fault, and I felt totally inadequate, incompetent and worthless. Worse, I believed that I was probably insane. Had not my father said, "You must be crazy to throw away such a good education"? If I returned to Exeter I would be returning to all that was safe, secure, right, proper, constructive, proven and known. Yet it was not me. In the depths of my being I knew it was not my path. But what was my path? If I did not return, all that lay ahead was unknown, undetermined, unsafe, insecure, unsanctified, unpredictable. Anyone who would take such a path must be mad. I was terrified. But then, at the moment of my greatest despair, from my unconscious there came a sequence of words, like a strange disembodied oracle from a voice that was not mine: "The only real security in life lies in relishing life's insecurity." Even if it meant being crazy and out of step with all that seemed holy, I had decided to be me. I rested. In the morning I went to see the psychiatrist again and told him that I would never return to Exeter but that I was ready to enter his hospital. I had taken the leap into the unknown. I had taken my destiny into my own hands.

The process of growing up usually occurs very gradually,

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with multiple little leaps into the unknown, such as when an eight-year-old boy first takes the risk of riding his bike down to the country store all by himself or a fifteen-year-old goes out on his or her first date. If you doubt that these represent real risks, then you cannot remember the anxiety involved. If you observe even the healthiest of children you will see not only an eagerness to risk new and adult activities but also, side by side, a reluctance, a shrinking back, a clinging to the safe and familiar, a holding onto dependency and childhood. Moreover, on more or less subtle levels, you can find this same ambivalence in an adult, including yourself, with the elderly particularly tending to cling to the old, known and familiar. Almost daily at the age of forty I am presented with subtle opportunities to risk doing things differently, opportunities to grow. I am still growing up, and not as fast as I might. Among all the little leaps we might take, there are also some enormous ones, as when by leaving school I was also forsaking a whole pattern of life and values according to which I had been raised. Many never take any of these potential enormous leaps, and consequently many do not ever really grow up at all. Despite their outward appearances they remain psychologically still very much the children of their parents, living by hand-me-down values, motivated primarily by their parents' approval and disapproval (even when their parents are long dead and buried), never having dared to truly take their destiny into their own hands.

While such great leaps are most commonly made during adolescence, they can be made at any age. A thirty-five-year-old mother of three, married to a controlling, stultifying, inflexible, chauvinistic husband, gradually and painfully comes to realize that her dependency on him and their marriage is a living death. He blocks all her attempts to change the nature of their relationship. With incredible bravery she divorces him, sustaining the burden of his recriminations and the criticism of neighbors, and risks an unknown future alone with her children, but free for the first time in her life to be her

own person. Depressed following a heart attack, a fifty-two-year-old businessman looks back on a life of frantic ambition to constantly make more money and rise ever higher in the corporate hierarchy and finds it meaningless. After long reflection he realizes that he has been driven by a need for approval from a domineering, constantly critical mother; he has almost worked himself to death so as to be finally successful in her eyes. Risking and transcending her disapproval for the first time in his life, as well as braving the ire of his high-living wife and children, who are reluctant to give up their expensive life style, he moves to the country and opens up a little shop where he restores antique furniture. Such major changes, such leaps into independence and self-determination, are enormously painful at any age and require supreme courage, yet they are not infrequent results of psychotherapy. Indeed, because of the enormity of the risks involved, they often require psychotherapy for their accomplishment, not because therapy diminishes the risk but because it supports and teaches courage.

But what has this business of growing up to do with love, apart from the fact that the extension of the self involved in loving is an enlargement of the self into new dimensions? First of all, the examples of the changes described and all other such major changes are acts of self-love. It is precisely because I valued myself that I was unwilling to remain miserable in a school and whole social environment that did not fit my needs. It is because the housewife had regard for herself that she refused to tolerate any longer a marriage that so totally limited her freedom and repressed her personality. It is because the businessman cared for himself that he was no longer willing to nearly kill himself in order to meet the expectations of his mother. Second, not only does love for oneself provide the motive for such major changes; it also is the basis for the courage to risk them. It is only because my parents had clearly loved and valued me as a young child that I felt sufficiently secure in myself to defy their expectations and radically depart from the pattern they had laid out for me. Although I

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felt inadequate and worthless and possibly crazy in doing what I did, I was able to tolerate these feelings only because at the same time, on an even deeper level, I sensed myself to be a good person no matter how different I might be. In daring to be different, even if it meant to be crazy, I was responding to earlier loving messages from my parents, hundreds of them, which said, "You are a beautiful and beloved individual. It is good to be you. We will love you no matter what you do, as long as you are you." Without that security of my parents' love reflected in my own self-love, I would have chosen the known instead of the unknown and continued to follow my parents' preferred pattern at the extreme cost of my self's basic uniqueness. Finally, it is only when one has taken the leap into the unknown of total self-hood, psychological independence and unique individuality that one is free to proceed along still higher paths of spiritual growth and free to manifest love in its greatest dimensions. As long as one marries, enters a career or has children to satisfy one's parents or the expectations of anyone else, including society as a whole, the commitment by its very nature will be a shallow one. As long as one loves one's children primarily because one is expected to behave in a loving manner toward them, then the parent will be insensitive to the more subtle needs of the children and unable to express love in the more subtle, yet often most important ways. The highest forms of love are inevitably totally free choices and not acts of conformity.

The Risk of Commitment

Whether it be shallow or not, commitment is the foundation, the bedrock of any genuinely loving relationship. Deep commitment does not guarantee the success of the relationship but does help more than any other factor to assure it. Initially shallow commitments may grow deep with time; if not, the relationship will likely crumble or else be inevitably sickly or chronically frail. Frequently we are not consciously aware of the immensity of the risk involved in making a deep commitment. I have already suggested that one of the functions served by the instinctual phenomenon of falling in love is to provide the participants with a magic cloak of omnipotence which blissfully blinds them to the riskiness of what they are doing when they undertake marriage. For my own part, I was reasonably calm until the very moment that my wife joined me before the altar, when my whole body began to tremble. I then became so frightened that I can remember almost nothing of the ceremony or the reception following. In any case, it is our sense of commitment after the wedding which makes possible the transition from falling in love to genuine love. And it is our commitment after conception which transforms us from biological into psychological parents.* Commitment is inherent in any genuinely loving relationship. Anyone who is truly concerned for the spiritual growth of another knows, consciously or instinctively, that he or she can significantly

* The importance of the distinction between biological and psychological parenting is elegantly elaborated and concretized in Goldstein, Freud and Solnit, *Beyond the Best Interests of the Child* (Macmillan, 1973).

foster that growth only through a relationship of constancy. Children cannot grow to psychological maturity in an atmosphere of unpredictability, haunted by the specter of abandonment. Couples cannot resolve in any healthy way the universal issues of marriage—dependency and independency, dominance and submission, freedom and fidelity, for example—without the security of knowing that the act of struggling over these issues will not itself destroy the relationship.

Problems of commitment are a major, inherent part of most psychiatric disorders, and issues of commitment are crucial in the course of psychotherapy. Character-disordered individuals tend to form only shallow commitments, and when their disorders are severe these individuals seem to lack totally the capacity to form commitments at all. It is not so much that they fear the risk of committing themselves as that they basically do not understand what commitment is all about. Because their parents failed to commit themselves to them as children in any meaningful way, they grew up without experience of commitment. Commitment for them represents an abstract beyond their ken, a phenomenon of which they cannot fully conceive. Neurotics, on the other hand, are generally aware of the nature of commitment but are frequently paralyzed by the fear of it. Usually their experience of early childhood was one in which their parents were sufficiently committed to them for them to form a commitment to their parents in return. Subsequently, however, a cessation of parental love through death, abandonment or chronic rejection, has the effect of making the child's unrequited commitment an experience of intolerable pain. New commitments, then, are naturally dreaded. Such injuries can be healed only if it is possible for the person to have a basic and more satisfying experience with commitment at a later date. It is for this reason, among others, that commitment is the cornerstone of the psychotherapeutic relationship. There are times when I shudder at the enormity of what I am doing when I accept another patient for long-term therapy. For basic healing to take place it is necessary for the psychotherapist to bring to

his or her relationship with a new patient the same high sense and degree of commitment that genuinely loving parents bring to their children. The therapist's sense of commitment and constancy of concern will usually be tested and inevitably made manifest to the patient in myriad ways over the course of months or years of therapy.

Rachel, a cold and distantly proper young woman of twenty-seven, came to see me at the end of a brief marriage. Her husband, Mark, had left her because of her frigidity. "I know I'm frigid," Rachel acknowledged. "I thought I would warm up to Mark in time, but it never happened. I don't think it's just Mark. I've never enjoyed sex with anyone. And, to tell you the truth, I'm not sure I want to. One part of me wants to, because I'd like to have a happy marriage someday, and I'd like to be normal—normal people seem to find something wonderful in sex. But another part of me is quite content to stay the way I am. Mark always said, 'Relax and let go.' Well, maybe I don't want to relax and let go even if I could."

In the third month of our work together I pointed out to Rachel that she always said "Thank you" to me at least twice before she even sat down to begin a session—first when I met her in the waiting room and again as she passed through the door into my office. "What's wrong with being polite?" she asked.

"Nothing *per se*," I replied. "But in this particular case it seems so unnecessary. You are acting as if you were a guest in here and not even sure of your welcome."

"But I am a guest in here. It's your house."

"True," I said. "But it's also true that you're paying me forty dollars an hour for your time in here. You have purchased this time and this office space, and because you've purchased it, you have a right to it. You're not a guest. This office, this waiting room, and our time together are your right. It's yours. You've paid me for this right, so why thank me for what is yours?"

"I can't believe you really feel that way," Rachel exclaimed.

when you want to do it. I may push you, but I have no power over you. I will never fire you. You're here for as long as you want to be."

One of the problems that people commonly have in their adult relationships if they have never received a firm commitment from their parents is the "I'll desert you before you desert me" syndrome. This syndrome will take many forms or disguises. One form was Rachel's frigidity. Although it was never on a conscious level, what Rachel's frigidity was expressing to her husband and previous boyfriends was, "I'm not going to give myself to you when I know damn well that you're going to dump me one of these days." For Rachel, "letting go," sexually or otherwise, represented a commitment of herself, and she was unwilling to make a commitment when the map of her past experience made it seem certain she would not receive any commitment in return.

The "I'll desert you before you desert me" syndrome becomes more and more powerful the closer such a person as Rachel comes to another. After a year of therapy on a twice-a-week basis Rachel announced to me that she could no longer afford eighty dollars a week. Since her divorce, she said, she was having a difficult time making ends meet, and she would simply have to stop seeing me or cut back to once a week. On a realistic level this was ridiculous. I knew that Rachel had an inheritance of fifty thousand dollars in addition to the modest salary she earned at her job, and in the community she was known to be a member of an old and wealthy family. Ordinarily I would have confronted her vigorously with the fact that she could afford my services more easily than many patients and was clearly using the issue of money spuriously to flee from an increasing closeness to me. On the other hand, I also knew that her inheritance represented something more for Rachel than just money; it was hers, something that would not desert her, a bulwark of security in an uncommitted world. Although it was quite reasonable for me to ask her to dip into her inheritance to pay my standard fee, I guessed that

relief and joy when this point is reached, for then he or she knows that the patient has assumed the risk of commitment to getting well and that therefore therapy will succeed.

The risk of commitment to therapy is not only the risk of commitment itself but also the risk of self-confrontation and change. In the previous section, in the discussion of the discipline of dedication to the truth, I elaborated on the difficulties of changing one's map of reality, world views and transferences. Yet changed they must be if one is to lead a life of loving involving frequent extensions of oneself into new dimensions and territories of involvement. There come many points on one's journey of spiritual growth, whether one is alone or has a psychotherapist as guide, when one must take new and unfamiliar actions in consonance with one's new world view. The taking of such new action—behaving differently from the way one has always behaved before—may represent an extraordinary personal risk. The passively homosexual young man for the first time summons the initiative to ask a girl for a date; the person who has never trusted anyone lies down for the first time on the analyst's couch allowing the analyst to be hidden from his view; the previously dependent housewife announces to her controlling husband that she is obtaining a job whether he likes it or not, that she has her own life to live; the fifty-year-old mama's boy tells his mother to stop addressing him by his infantile nickname; the emotionally distant, seemingly self-sufficient "strong" man first allows himself to weep in public; or Rachel "lets go" and cries for the first time in my office: these actions, and many more, involve a risk more personal and therefore frequently more fearsome and frightening than that of any soldier entering battle. The soldier cannot run because the gun is pointed at his back as well as his front. But the individual trying to grow can always retreat into the easy and familiar patterns of a more limited past.

It has been said that the successful psychotherapist must bring to the psychotherapeutic relationship the same courage and the same sense of commitment as the patient. The thera-

self-centeredness. She finally saw that he had done nothing to protect her from her mother's evil and nothing, in fact, to confront evil, leaving her no option but to incorporate her mother's bitter manipulativeness along with his pseudohumility as role models. To fail to confront when confrontation is required for the nurture of spiritual growth represents a failure to love equally as does thoughtless criticism or condemnation and other forms of active deprivation of caring. If they love their children parents must, sparingly and carefully perhaps but nonetheless actively, confront and criticize them from time to time, just as they must allow their children to confront and criticize themselves in turn. Similarly, loving spouses must repeatedly confront each other if the marriage relationship is to serve the function of promoting the spiritual growth of the partners. No marriage can be judged truly successful unless husband and wife are each other's best critics. The same holds true for friendship. There is a traditional concept that friendship should be a conflict-free relationship, a "you scratch my back, I'll scratch yours" arrangement, relying solely on a mutual exchange of favors and compliments as prescribed by good manners. Such relationships are superficial and intimacy-avoiding and do not deserve the name of friendship which is so commonly applied to them. Fortunately, there are signs that our concept of friendship is beginning to deepen. Mutual loving confrontation is a significant part of all successful and meaningful human relationships. Without it the relationship is either unsuccessful or shallow.

To confront or criticize is a form of exercising leadership or power. The exercise of power is nothing more and nothing less than an attempt to influence the course of events, human or otherwise, by one's actions in a consciously or unconsciously predetermined manner. When we confront or criticize someone it is because we want to change the course of the person's life. It is obvious that there are many other, often superior, ways to influence the course of events than by confrontation or criticism: by example, suggestion, parable, reward and punishment, questioning, prohibition or permis-

sion, creation of experiences, organizing with others, and so on. Volumes can be written about the art of exercising power. For our purposes, however, suffice it to say that loving individuals must concern themselves with this art, for if one desires to nurture another's spiritual growth, then one must concern oneself with the most effective way to accomplish this in any given instance. Loving parents, for example, must first examine themselves and their values stringently before determining accurately that they know what is best for their child. Then, having made this determination, they also have to give greater thought to the child's character and capacities before deciding whether the child would be more likely to respond favorably to confrontation than to praise or increased attention or storytelling or some other form of influence. To confront someone with something he or she cannot handle will at best be a waste of time, and likely will have a deleterious effect. If we want to be heard we must speak in a language the listener can understand and on a level at which the listener is capable of operating. If we are to love we must extend ourselves to adjust our communication to the capacities of our beloved.

It is clear that exercising power with love requires a great deal of work, but what is this about the risk involved? The problem is that the more loving one is, the more humble one is; yet the more humble one is, the more one is awed by the potential for arrogance in exercising power. Who am I to influence the course of human events? By what authority am I entitled to decide what is best for my child, spouse, my country or the human race? Who gives me the right to dare to believe in my own understanding and then to presume to exert my will upon the world? Who am I to play God? *That* is the risk. For whenever we exercise power we are attempting to influence the course of the world, of humanity, and we are thereby playing God. Most parents, teachers, leaders—most of us who exercise power—have no cognizance of this. In the arrogance of exercising power without the total self-awareness demanded by love, we are blissfully but destructively igno-

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rant of the fact that we are playing God. But those who truly love, and therefore work for the wisdom that love requires, know that to act is to play God. Yet they also know that there is no alternative except inaction and impotence. Love compels us to play God with full consciousness of the enormity of the fact that that is just what we are doing. With this consciousness the loving person assumes the responsibility of attempting to be God and not to carelessly play God, to fulfill God's will without mistake. We arrive, then, at yet another paradox: only out of the humility of love can humans dare to be God.

Love Is Disciplined

I have indicated that the energy for the work of self-discipline derives from love, which is a form of will. It follows, then, not only that self-discipline is usually love, translated into action, but also that any genuine lover behaves with self-discipline and any genuinely loving relationship is a disciplined relationship. If I truly love another, I will obviously order my behavior in such a way as to contribute the utmost to his or her spiritual growth. A young, intelligent, artistic and "bohemian" couple with whom I once attempted to work had a four-year marriage marked by almost daily screaming, dish-throwing and face-clawing quarrels, along with weekly casual infidelity and monthly separations. Shortly after we began our work they each correctly perceived that therapy would lead them toward increasing self-discipline, and consequently to a less disorderly relationship. "But you want to take the passion out of our relationship," they said. "Your notions of love and marriage leave no room for passion." Almost immediately thereafter they quit therapy, and it has

been reported to me that three years later, after several bouts with other therapists, their daily screaming matches and the chaotic pattern of their marriage continue unchanged, as well as the unproductivity of their individual lives. There is no doubt that their union is, in a certain sense, a highly colorful one. But it is like the primary colors in the paintings of children, splashed on the paper with abandon, occasionally not without charm, but generally demonstrating the sameness that characterizes the art of young children. In the muted, controlled hues of Rembrandt one can find the color, yet infinitely more richness, uniqueness and meaning. Passion is feeling of great depth. The fact that a feeling is uncontrolled is no indication whatsoever that it is any deeper than a feeling that is disciplined. To the contrary, psychiatrists know well the truth of the old proverbs "Shallow brooks are noisy" and "Still waters run deep." We must not assume that someone whose feelings are modulated and controlled is not a passionate person.

While one should not be a slave to one's feelings, self-discipline does not mean the squashing of one's feelings into non-existence. I frequently tell my patients that their feelings are *their slaves* and that the art of self-discipline is like the art of slave-owning. First of all, one's feelings are the source of one's energy; they provide the horsepower, or slave power, that makes it possible for us to accomplish the tasks of living. Since they work for us, we should treat them with respect. There are two common mistakes that slave-owners can make which represent opposite and extreme forms of executive leadership. One type of slave-owner does not discipline his slaves, gives them no structure, sets them no limits, provides them with no direction and does not make it clear who is the boss. What happens, of course, is that in due time his slaves stop working and begin moving into the mansion, raiding the liquor cabinet and breaking the furniture, and soon the slave-owner finds that he is the slave of his slaves, living in the same kind of chaos as the aforementioned character-disordered "bohemian" couple.

Love Is Disciplined

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Yet the opposite style of leadership, which the guilt-ridden neurotic so often exerts over his feelings, is equally self-destructive. In this style the slave-owner is so obsessed with the fear that his slaves (feelings) might get out of control and so determined that they should cause him no trouble that he routinely beats them into submission and punishes them severely at the first sign of any potency. The result of this style is that in relatively short order the slaves become less and less productive as their will is sapped by the harsh treatment they receive. Or else their will turns more and more toward covert rebellion. If the process is carried out long enough, one night the owner's prediction finally comes true and the slaves rise up and burn down the mansion, frequently with the owner inside. Such is the genesis of certain psychoses and overwhelming neuroses. The proper management of one's feelings clearly lies along a complex (and therefore not simple or easy) balanced middle path, requiring constant judgment and continuing adjustment. Here the owner treats his feelings (slaves) with respect, nurturing them with good food, shelter and medical care, listening and responding to their voices, encouraging them, inquiring as to their health, yet also organizing them, limiting them, deciding clearly between them, redirecting them and teaching them, all the while leaving no doubt as to who is the boss. This is the path of healthy self-discipline.

Among the feelings that must be so disciplined is the feeling of love. As I have indicated, this is not in itself genuine love but the feeling associated with cathexis. It is to be very much respected and nurtured for the creative energy it brings, but if it is allowed to run rampant, the result will not be genuine love but confusion and unproductivity. Because genuine love involves an extension of oneself, vast amounts of energy are required and, like it or not, the store of our energy is as limited as the hours of our day. We simply cannot love everyone. True, we may have a feeling of love for mankind, and this feeling may also be useful in providing us with enough energy to manifest genuine love for a few specific individuals. But genuine love for a relatively few individuals is all that is within

one has built genuinely loving relationships with a spouse and children, then one has already succeeded in accomplishing more than most people accomplish in a lifetime. There is frequently something pathetic about the individual who has failed to build his family into a loving unit, yet restlessly searches for loving relationships outside the family. The first obligation of a genuinely loving person will always be to his or her marital and parental relationships. Nonetheless, there are some whose capacity to love is great enough for them to build loving relationships successfully within the family and still have energy left for additional relationships. For these the myth of exclusivity is not only patently false, but also represents an unnecessary limitation upon their capacity to give of themselves to others outside their family. It is possible for this limitation to be overcome, but great self-discipline is required in the extension of oneself in order to avoid "spreading oneself too thin." It was to this extraordinarily complex issue (here touched only in passing) that Joseph Fletcher, the Episcopalian theologian and author of *The New Morality*, was addressing himself when he reportedly said to a friend of mine, "Free love is an ideal. Unfortunately, it is an ideal of which very few of us are capable." What he meant was that very few of us have a capacity for self-discipline great enough to maintain constructive relationships that are genuinely loving both inside and outside the family. Freedom and discipline are indeed handmaidens; without the discipline of genuine love, freedom is invariably nonloving and destructive.

By this time some readers may feel saturated by the concept of discipline and conclude that I am advocating a style of life of Calvinistic dreariness. Constant self-discipline! Constant self-examination! Duty! Responsibility! Neopuritanism, they might call it. Call it what you will, genuine love, with all the discipline that it requires, is the only path in this life to substantial joy. Take another path and you may find rare moments of ecstatic joy, but they will be fleeting and progressively more elusive. When I genuinely love I am extending myself, and when I am extending myself I am grow-

ing. The more I love, the longer I love, the larger I become. Genuine love is self-replenishing. The more I nurture the spiritual growth of others, the more my own spiritual growth is nurtured. I am a totally selfish human being. I never do something for somebody else but that I do it for myself. And as I grow through love, so grows my joy, ever more present, ever more constant. Neopuritan perhaps I am. I am also a joy freak. As John Denver sings:

*Love is everywhere, I see it.
You are all that you can be, go on and be it.
Life is perfect, I believe it.
Come and play the game with me.**

Love Is Separateness

Although the act of nurturing another's spiritual growth has the effect of nurturing one's own, a major characteristic of genuine love is that the distinction between oneself and the other is always maintained and preserved. The genuine lover always perceives the beloved as someone who has a totally separate identity. Moreover, the genuine lover always respects and even encourages this separateness and the unique individuality of the beloved. Failure to perceive and respect this separateness is extremely common, however, and the cause of much mental illness and unnecessary suffering.

* "Love Is Everywhere," by John Denver, Joe Henry, Steve Weisberg and John Martin Sommers, copyright © 1975 Cherry Lane Music Co. Used by permission.

In its most extreme form the failure to perceive the separateness of the other is called narcissism. Frankly narcissistic individuals are actually unable to perceive their children, spouses or friends as being separate from themselves on an emotional level. The first time I began to understand what narcissism is all about was during an interview with the parents of a schizophrenic patient whom I will call Susan X. Susan at the time was thirty-one. Since the age of eighteen she had made a number of serious suicide attempts, and had had to be hospitalized almost continually in a variety of hospitals and sanatoria for the previous thirteen years. However, largely because of superior psychiatric care that she had received from other psychiatrists during these years she was finally beginning to improve. For some months during our work together she had demonstrated an increasing capacity to trust trustworthy people, to distinguish between trustworthy and untrustworthy people, to accept the fact that she had a schizophrenic illness and would need to exert a great deal of self-discipline for the rest of her life to deal with this illness, to respect herself, and to do what was necessary to care for herself without having to rely on others to continually nurture her. Because of this great progress I felt the moment was soon at hand when Susan would be able to leave the hospital and for the first time in her life lead and maintain a successful independent existence. It was at this point that I met with her parents, an attractive, wealthy couple in their mid-fifties. I was very happy to describe to them Susan's enormous progress and explain in detail the reasons for my optimism. But much to my surprise, soon after I began to do this, Susan's mother started to cry silently and continued to cry as I went on with my hopeful message. At first I thought perhaps her tears were tears of joy, but it was clear from her expression that she was indeed feeling sad. Finally I said, "I'm puzzled, Mrs. X. I've been telling you things today that are most hopeful, yet you seem to be feeling sad."

"Of course I'm sad," she replied. "I just can't help crying when I think of all poor Susan has to suffer."

I then went into a lengthy explanation to the effect that while it was quite true Susan had suffered a good deal in the course of her illness, she had also clearly learned a good deal from this suffering, had come out on top of it and, in my estimation, was unlikely to suffer any more in the future than any other adult. Indeed, she might suffer considerably less than any of us because of the wisdom she had gained from her battle with schizophrenia. Mrs. X. continued to weep silently.

"Frankly, I'm still puzzled, Mrs. X.," I said. "Over the past thirteen years you must have participated in at least a dozen conferences like this with Susan's psychiatrists, and from what I know, none of them was as optimistic as this one. Don't you feel gladness as well as sadness?"

"I can only think of how difficult life is for Susan," Mrs. X. replied tearfully.

"Look, Mrs. X.," I said, "is there anything I could say to you about Susan that would make you feel encouraged and happy about her?"

"Poor Susan's life is so full of pain," Mrs. X. whimpered.

Suddenly I realized that Mrs. X. was not crying for Susan but for herself. She was crying for her own pain and suffering. Yet the conference was about Susan, not about her, and she was doing her crying in Susan's name. How could she do this, I wondered. And then I realized that Mrs. X. was actually not able to distinguish between Susan and herself. What she felt, Susan must feel. She was using Susan as a vehicle to express her own needs. She was not doing this consciously or maliciously; on an emotional level she could not, in fact, perceive Susan as having an identity separate from her own. Susan was she. In her mind Susan as a unique, different individual with a unique, different path in life simply did not exist—nor, probably, did anyone else. Intellectually Mrs. X. could recognize other people as being different from herself. But on a more basic level other people did not exist for her. In the depths of her mind the entirety of the world was she, Mrs. X., she alone.

of a child, "He's a chip off the old block" or to a child, "You're just like your Uncle Jim," as if their children are some genetic copy of themselves or the family, when the facts of genetic combinations are such that all children genetically are extremely different from either of their parents and all of their forebears. Athletic fathers push their scholarly sons into football and scholarly fathers push their athletic sons into books, causing the sons much unnecessary guilt and turmoil. A general's wife complains about her seventeen-year-old daughter: "When she's home, Sally sits in her room all the time writing sad poetry. It's morbid, Doctor. And she absolutely refuses to have a coming-out party. I'm afraid that she's seriously ill." After interviewing Sally, a charming and vivacious young woman who is on the honor roll at school and has lots of friends, I tell her parents that I think Sally is perfectly healthy and suggest that perhaps they should lessen their pressure on her to be a carbon copy of themselves. They leave to look for another psychiatrist, one who might be willing to pronounce Sally's differences deviancies.

Adolescents frequently complain that they are disciplined not out of genuine concern but because of parental fear that they will give their parents a bad image. "My parents are continually after me to cut my hair," adolescent boys used to say a few years ago. "They can't explain why long hair is bad for me. They just don't want other people to see they've got long-haired kids. They don't really give a shit about me. All they are really caring about is their own image." Such adolescent resentment is usually justified. Their parents generally do in fact fail to appreciate the unique individuality of their children, and instead regard their children as extensions of themselves, in much the same way as their fine clothes and their neatly manicured lawns and their polished cars are extensions of themselves which represent their status to the world. It is to these milder but nonetheless destructive common forms of parental narcissism that Kahlil Gibran addresses himself in what are perhaps the finest words ever written about child-raising:

Love Is Separateness

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*Your children are not your children.
 They are the sons and daughters of Life's longing for
 itself.
 They come through you but not from you,
 And though they are with you they belong not to you.*

*You may give them your love but not your thoughts,
 For they have their own thoughts.
 You may house their bodies but not their souls,
 For their souls dwell in the house of tomorrow. which you
 cannot visit, not even in your dreams.
 You may strive to be like them, but seek not to make
 them like you.
 For life goes not backward nor tarries with yesterday.
 You are the bow from which your children as living
 arrows are sent forth.
 The archer sees the mark upon the path of the infinite,
 and He bends you with His might that His arrow may
 go swift and far.
 Let your bending in the archer's hand be for gladness;
 For even as He loves the arrow that flies, so He loves also
 the bow that is stable.**

The difficulty that humans so generally seem to have in fully appreciating the separateness of those who they are close to interferes not only with their parenting but with all their intimate relationships, including marriage. Not too long ago in a couples group I heard one of the members state that the "purpose and function" of his wife was to keep their house neat and him well fed. I was aghast at what seemed to me his painfully blatant male chauvinism. I thought I might demonstrate this to him by asking the other members of the group to state how they perceived the purpose and function of their spouses. To my horror the six others, male and female alike, gave very similar answers. All of them defined the purpose and function of their husbands or wives in reference to them-

* *The Prophet* (New York: Alfred A. Knopf, 1951), pp. 17-18.

selves; all of them failed to perceive that their own mates might have an existence basically separate from their own or any kind of destiny apart from their marriage. "Good grief," I exclaimed, "it's no wonder that you are all having difficulties in your marriages, and you'll continue to have difficulties until you come to recognize that each of you has your own separate destiny to fulfill." The group felt not only chastised but profoundly confused by my pronouncement. Somewhat belligerently they asked me to define the purpose and function of my wife. "The purpose and function of Lily," I responded, "is to grow to be the most of which she is capable, not for my benefit but for her own and to the glory of God." The concept remained alien to them for some time, however.

The problem of separateness in close relationships has bedeviled mankind through the ages. However, it has received more attention from a political standpoint than from a marital one. Pure communism, for instance, expresses a philosophy not unlike that of the aforementioned couples—namely, that the purpose and function of the individual is to serve the relationship, the group, the collective, the society. Only the destiny of the state is considered; the destiny of the individual is believed to be of no consequence. Pure capitalism, on the other hand, espouses the destiny of the individual even when it is at the expense of the relationship, the group, the collective, the society. Widows and orphans may starve, but this should not prevent the individual entrepreneur from enjoying all the fruits of his or her individual initiative. It should be obvious to any discerning mind that neither of these pure solutions to the problem of separateness within relationships will be successful. The individual's health depends upon the health of the society; the health of the society depends upon the health of its individuals. When dealing with couples my wife and I draw the analogy between marriage and a base camp for mountain climbing. If one wants to climb mountains one must have a good base camp, a place where there are shelters and provisions, where one may receive nurture and rest before one ventures forth again to seek another summit.

"If ever two were one, then we."* As I have grown, however, I have come to realize that it is the separateness of the partners that enriches the union. Great marriages cannot be constructed by individuals who are terrified by their basic loneliness, as so commonly is the case, and seek a merging in marriage. Genuine love not only respects the individuality of the other but actually seeks to cultivate it, even at the risk of separation or loss. The ultimate goal of life remains the spiritual growth of the individual, the solitary journey to peaks that can be climbed only alone. Significant journeys cannot be accomplished without the nurture provided by a successful marriage or a successful society. Marriage and society exist for the basic purpose of nurturing such individual journeys. But, as is the case with all genuine love, "sacrifices" on behalf of the growth of the other result in equal or greater growth of the self. It is the return of the individual to the nurturing marriage or society from the peaks he or she has traveled alone which serves to elevate that marriage or that society to new heights. In this way individual growth and societal growth are interdependent, but it is always and inevitably lonely out on the growing edge. It is from the loneliness of his wisdom that once again the prophet of Kahlil Gibran speaks to us concerning marriage:

*But let there be spaces in your togetherness,
And let the winds of the heavens dance between you*

*Love one another, but make not a bond of love:
Let it rather be a moving sea between the shores
of your souls.
Fill each other's cup but drink not from one cup.
Give one another of your bread but eat not from the
same loaf*

* "To My Dear and Loving Husband," 1678, contained in *The Literature of the United States*, Walter Blair et al., eds. (Glenview, Ill.: Scott, Foresman, 1953), p. 159.

Love and Psychotherapy

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*Sing and dance together and be joyous, but let
each one of you be alone,
Even as the strings of a lute are alone though they
quiver with the same music.*

*Give your hearts, but not into each other's keeping.
For only the hand of Life can contain your hearts.
And stand together yet not too near together:
For the pillars of the temple stand apart,
And the oak tree and the cypress grow not in
each other's shadow.**

Love and Psychotherapy

It is hard for me to recapture now the motivation and understanding with which I entered the field of psychiatry fifteen years ago. Certainly I wanted to "help" people. The process of helping people in the other branches of medicine involved technology with which I was uncomfortable and which in other ways seemed too mechanical to suit my tastes. I also found talking to people more fun than poking and prodding them, and the quirks of the human mind seemed inherently more interesting to me than the quirks of the body or the germs infesting it. I had no idea how psychiatrists helped people, except for the fantasy that psychiatrists were the possessors of magical words and magical techniques of interacting with patients which would magically unscramble the knots of the psyche. Perhaps I wanted to be a magician. I had very little notion that the work involved would have something to do with the spiritual growth of patients, and certainly I had

* *The Prophet*, pp. 15-16.

gested or recommended in my training; the very fact that it had not been mentioned indicated to me that it was an interaction that was disapproved of, a situation that any reputable psychiatrist would not allow himself to fall into. How to act? With my heart pounding I went out on what seemed to be a very shaky limb indeed. "Marcia," I said, "you have been seeing me now for over a year. During this long period of time things have not gone smoothly for us. Much of the time we have been struggling, and the struggle has often been boring or nerve-wracking or angry for both of us. Yet despite this you have continued to come back to see me at considerable effort and inconvenience to you, session after session, week after week, month after month. You wouldn't have been able to do this unless you were the kind of person who is determined to grow and willing to work very hard at making yourself a better person. I do not think I would feel that someone who works as hard on herself as you do is a bit of a shit. So the answer is, No, I do not think you are a bit of a shit. In fact, I admire you a great deal."

From among her dozens of lovers Marcia immediately picked one and established a meaningful relationship with him which eventually led to a highly successful and satisfying marriage. She was never again promiscuous. She immediately began to speak about the good things in herself. The sense of unproductive struggle between us instantly vanished, and our work became fluent and joyful, with incredibly rapid progress. Strangely, my going out on a limb by revealing my genuinely positive feelings for her—something I felt I was really not supposed to do—rather than seeming to hurt her, apparently was of great therapeutic benefit and clearly represented the turning point in our work together.

What does this mean? Does it mean that all we have to do to practice successful psychotherapy is to tell our patients that we think well of them? Hardly. First of all, it is necessary to be honest in therapy at all times. I honestly did admire and like Marcia. Second, my admiration and liking was of real significance to her precisely because of the length of time I

had known her and the depth of our experiences in therapy. In fact, the essence of this turning point did not even have to do with my liking and admiration; it had to do with the nature of our relationship.

A similarly dramatic turning point came in the therapy of a young woman I will call Helen, whom I had been seeing twice weekly for nine months with a noticeable lack of success and for whom I did not yet have much positive feeling. Indeed, after all that time I did not even have much of a feeling of who Helen was at all. I had never before seen a patient for such a length of time without having gained some idea of who the individual was and the nature of the problem to be resolved. I was totally confused by her and had spent the better part of several nights attempting without any success whatsoever to make some sense out of the case. About all that was clear to me was that Helen did not trust me. She was vociferous in her complaints that I did not genuinely care for her in any way, shape or form and was interested only in her money. She was talking in this fashion during one session, after nine months of therapy: "You cannot imagine, Dr. Peck, how frustrating it is for me to attempt to communicate with you when you are so uninterested in me and therefore so oblivious to my feelings."

"Helen," I replied, "it seems to be frustrating for both of us. I don't know how this will make you feel, but you are the single most frustrating case I have ever had in a decade of practicing psychotherapy. I have never met anyone with whom I have made less headway in so long a time. Perhaps you are right in believing that I am not the right person to work with you. I don't know. I don't want to give up, but I sure as hell am puzzled about you, and I wonder until I'm almost crazy as to what the hell is wrong in our work together."

A glowing smile came over Helen's face. "You really do care for me after all," she said.

"Huh?" I asked.

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"If you didn't really care for me you wouldn't feel so frustrated," she replied, as if it were all perfectly obvious.

At the very next session Helen began to tell me things that she had previously either withheld or actually lied about, and within a week I had a clear understanding of her basic problem, could make a diagnosis, and knew generally how the therapy should proceed.

Again, my reaction to Helen was meaningful and significant to her precisely because of the depth of my involvement with her and the intensity of our struggle together. We are now able to see the essential ingredient that makes psychotherapy effective and successful. It is not "unconditional positive regard," nor is it magical words, techniques or postures; it is human involvement and struggle. It is the willingness of the therapist to extend himself or herself for the purpose of nurturing the patient's growth—willingness to go out on a limb, to truly involve oneself at an emotional level in the relationship, to actually struggle with the patient and with oneself. In short, the essential ingredient of successful deep and meaningful psychotherapy is love.

It is remarkable, almost incredible, that the voluminous professional literature in the West on the subject of psychotherapy ignores the issue of love. Hindu gurus frequently make no bones about the fact that their love is the source of their power.* But the closest Western literature comes to the issue are those articles that attempt to analyze differences between successful and unsuccessful psychotherapists and usually end up mentioning such characteristics of successful psychotherapists as "warmth" and "empathy." Basically, we seem to be embarrassed by the subject of love. There are a number of reasons for this state of affairs. One is the confusion between genuine love and romantic love which so pervades our culture, as well as the other confusions that have

* See Peter Brent, *The God Men of India* (New York: Quadrangle Books, 1972).

been dealt with in this section. Another is our bias toward the rational, the tangible and the measurable in "scientific medicine," and it is largely out of "scientific medicine" that the profession of psychotherapy evolved. Since love is an intangible, incompletely measurable and suprarational phenomenon, it has not lent itself to scientific analysis.

Another reason is the strength of the psychoanalytic tradition in psychiatry of the aloof and detached analyst, a tradition for which Freud's followers more than Freud himself seem to be responsible. In this same tradition, any feelings of love that the patient has for the therapist are generally labeled "transference" and any feelings of love that the therapist has for the patient "countertransference," with the implication that such feelings are abnormal, a part of the problem rather than its solution, and are to be avoided. This is all quite absurd. Transference, as mentioned in the previous section, refers to *inappropriate* feelings, perceptions and responses. There is nothing inappropriate about patients coming to love a therapist who truly listens to them hour after hour in a nonjudgmental way, who truly accepts them as they probably have never been accepted before, who totally refrains from using them and who has been helpful in alleviating their suffering. Indeed, the essence of the transference in many cases is that which prevents the patient from developing a loving relationship with the therapist, and the cure consists of working through the transference so that the patient can experience a successful love relationship, often for the first time. Similarly, there is nothing at all inappropriate in the feelings of love that a therapist develops for his or her patient when the patient submits to the discipline of psychotherapy, cooperates in the treatment, is willing to learn from the therapist, and successfully begins to grow through the relationship. Intensive psychotherapy in many ways is a process of reparenting. It is no more inappropriate for a psychotherapist to have feelings of love for a patient than it is for a good parent to have feelings of love for a child. To the contrary, it is essential for the therapist to love a patient for the therapy to be successful,

and if the therapy does become successful, then the therapeutic relationship will become a mutually loving one. It is inevitable that the therapist will experience loving feelings coincidental with the genuine love he or she has demonstrated toward the patient.

For the most part, mental illness is caused by an absence of or defect in the love that a particular child required from its particular parents for successful maturation and spiritual growth. It is obvious, then, that in order to be healed through psychotherapy the patient must receive from the psychotherapist at least a portion of the genuine love of which the patient was deprived. If the psychotherapist cannot genuinely love a patient, genuine healing will not occur. No matter how well credentialed and trained psychotherapists may be, if they cannot extend themselves through love to their patients, the results of their psychotherapeutic practice will be generally unsuccessful. Conversely, a totally uncredentialed and minimally trained lay therapist who exercises a great capacity to love will achieve psychotherapeutic results that equal those of the very best psychiatrists.

Since love and sex are so closely related and interconnected, it is appropriate to mention here briefly the issue of sexual relationships between psychotherapists and their patients, an issue that is currently receiving a good deal of attention in the press. Because of the necessarily loving and intimate nature of the psychotherapeutic relationship, it is inevitable that both patients and therapists routinely develop strong or extremely strong sexual attractions to each other. The pressures to sexually consummate such attractions may be enormous. I suspect that some of those in the profession of psychotherapy who cast stones at a therapist who has related sexually with a patient may not themselves be loving therapists and may not therefore have any real understanding of the enormity of the pressures involved. Moreover, were I ever to have a case in which I concluded after careful and judicious consideration that my patient's spiritual growth would be substantially furthered by our having sexual relations, I would proceed to have

them. In fifteen years of practice, however, I have not yet had such a case, and I find it difficult to imagine that such a case could really exist. First of all, as I have mentioned, the role of the good therapist is primarily that of the good parent, and good parents do not consummate sexual relationships with their children for several very compelling reasons. The job of a parent is to be of use to a child and not to use the child for personal satisfaction. The job of a therapist is to be of use to a patient and not to use the patient to serve the therapist's own needs. The job of a parent is to encourage a child along the path toward independence, and the job of a therapist with a patient is the same. It is difficult to see how a therapist who related sexually with a patient would not be using the patient to satisfy his or her own needs or how the therapist would be encouraging the patient's independence thereby.

Many patients, particularly those likely to be most seductive, have sexualized attachments to their parents which clearly impede their freedom and growth. Both theory and the scant bit of evidence available strongly suggest that a sexual relationship between a therapist and such a patient is far more likely to cement the patient's immature attachments than to loosen them. Even if the relationship is not sexually consummated, it is detrimental for the therapist to "fall in love" with the patient, since, as we have seen, falling in love involves a collapse of ego boundaries and a diminution of the normal sense of separation that exists between individuals.

The therapist who falls in love with a patient cannot possibly be objective about the patient's needs or separate those needs from his or her own. It is out of love for their patients that therapists do not allow themselves the indulgence of falling in love with them. Since genuine love demands respect for the separate identity of the beloved, the genuinely loving therapist will recognize and accept that the patient's path in life is and should be separate from that of the therapist. For some therapists this means that their own and the patient's paths should never cross outside of the therapeutic hour. While I respect this position, for myself I find it unnecessarily rigid.

Although I have had one experience in which my relating to an ex-patient seemed to be definitely detrimental to her, I have had several other experiences in which social relationships with ex-patients seemed clearly beneficial to them as well as to myself. I have also been fortunate enough to successfully analyze several very close friends. Nonetheless, social contact with the patient outside of the therapeutic hour, even after therapy has been formally terminated, is something that should be entered into only with great caution and stringent self-examination as to whether the therapist's needs are being met by the contact to the detriment of the patient's.

We have been examining the fact that psychotherapy should be (must be, if successful) a process of genuine love, a somewhat heretical notion in traditional psychiatric circles. The other side of the same coin is at least equally heretical: if psychotherapy is genuinely loving, should love always be psychotherapeutic? If we genuinely love our spouse, our parents, our children, our friends, if we extend ourselves to nurture their spiritual growth, should we be practicing psychotherapy with them? My answer is: *Certainly*. From time to time at cocktail parties someone will say to me, "It must be difficult for you, Dr. Peck, to separate your social life from your professional life. After all, one can't go around analyzing one's family and friends, can one?" Usually the speaker is only making idle conversation and is neither interested in nor ready to assimilate a serious reply. Occasionally, however, the situation gives me the opportunity to teach or practice psychotherapy there and then, on the spot, explaining just why I do not even attempt, or would want to attempt to separate my professional and my personal lives. If I perceive my wife or my children or my parents or my friends suffering from an illusion, a falsehood, an ignorance or an unnecessary impediment, I have every bit as much obligation to extend myself to them to correct the situation insofar as possible, as I do to my patients, who pay me for my services. Am I to withhold my services, my wisdom and my love from my family and my friends because they have not specifically contracted and paid

me for my attention to their psychological needs? Hardly. How can I be a good friend, father, husband or son unless I take the opportunities that are available to attempt, with whatever artistry I can command, to teach my beloved what I know and give whatever assistance is in my power to give to his or her personal journeys of spiritual growth? Moreover, I expect the same services from my friends and family to the limits of their ability. Although their criticism of me may be unnecessarily blunt at times and their teaching may not be as thoughtful as an adult's, I learn much to help me from my children. My wife guides me as much as I guide her. I would not call my friends friends were they to withhold from me the honesty of their disapproval and their loving concern as to the wisdom and safety of the directions of my own journey. Can I not grow more rapidly with their help than without it? Any genuinely loving relationship is one of mutual psychotherapy.

I have not always seen it this way. In years past I was more appreciative of my wife's admiration than of her criticism, and did as much to foster her dependency as I did her power. My self-image as a husband and father was that of provider; my responsibility ended with bringing home the bacon. Home I wanted to be a place of comfort, not challenge. At that time I would have agreed with the proposition that it would be dangerous and unethical and destructive for a psychotherapist to practice his art upon his friends and family. But my agreement was motivated as much by laziness as it was by fear of misusing my profession. For psychotherapy, like love, is work, and it's easier to work eight hours a day than it is to work sixteen. It's also easier to love a person who seeks out your wisdom, who travels to your territory to obtain it, who pays you for your attention and whose demands upon you are strictly limited to fifty minutes at a time than it is to love someone who regards your attention as a right, whose demands may not be limited, who does not perceive you as an authority figure and who does not solicit your teaching. Conducting psychotherapy at home or with one's friends requires the same intensity of effort and self-discipline as it does

in the office but under much less ideal conditions, which is to say that at home it requires even more effort and love. I hope, therefore, that other psychotherapists will not take these words as an exhortation to immediately begin practicing psychotherapy with their mates and children. If one remains on a journey of spiritual growth, one's capacity to love grows and grows. But it is always limited, and one clearly should not attempt psychotherapy beyond one's capacity to love, since psychotherapy without love will be unsuccessful and even harmful. If you can love six hours a day, be content with that for the moment, for your capacity is already far greater than most; the journey is a long one and it requires time for your capacity to grow. To practice psychotherapy with one's friends and family, to love one another full time, is an ideal, a goal to be striven toward but not instantly achieved.

Since, as I have indicated, laymen can practice successful psychotherapy without great training as long as they are genuinely loving human beings, the remarks I have made concerning the practice of psychotherapy on one's friends and family do not apply solely to professional therapists; they apply to everyone. Occasionally when patients ask me when they will be ready to terminate their therapy, I will reply, "When you yourself are able to be a good therapist." This reply is often most usefully made in group therapy, where patients of course do practice psychotherapy on each other and where their failures to successfully assume the role of psychotherapist can be pointed out to them. Many patients do not like this reply, and some will actually say, "That's too much work. To do that means that I would have to think all the time in my relationships with people. I don't want to think that much. I don't want to work that hard. I just want to enjoy myself." Patients often respond similarly when I point out to them that all human interactions are opportunities either to learn or to teach (to give or receive therapy), and when they neither learn nor teach in an interaction they are passing up an opportunity. Most people are quite correct when they say they do not want to achieve such a lofty goal

ers, fail partially or totally to respond to psychotherapeutic treatment by even the most wise and loving therapist?

An attempt will be made to answer this set of questions in the final section, on grace. The attempt will not meet with anyone's complete satisfaction, including my own. I hope, however, what I write will bring some enlightenment.

There is another set of questions having to do with matters deliberately omitted or glossed over in the discussion of love. When my beloved first stands before me naked, all open to my sight, there is a feeling throughout the whole of me: awe. Why? If sex is no more than an instinct, why don't I just feel "horny" or hungry? Such simple hunger would be quite sufficient to insure the propagation of the species. Why awe? Why should sex be complicated with reverence? And for that matter, what is it that determines beauty? I have said the object of genuine love must be a person, since only people have spirits capable of growth. But what about the finest creation by a master woodworker? Or the best sculptures of medieval madonnas? Or the bronze statue of the Greek charioteer at Delphi? Were these inanimate objects not loved by their creators and is not their beauty somehow related to their creators' love? What about the beauty of nature—nature, to which we sometimes give the name "creation"? And why in the presence of beauty or joy do we so often have the strange, paradoxical reaction of sadness or tears? How is it that certain bars of music played or sung in certain ways can move us so? And why do I become wet-eyed when my six-year-old son, still ill on his first night home from the hospital after a tonsillectomy, suddenly comes over to where I am lying, tired, on the floor and begins to rub my back gently?

Clearly there are dimensions of love that have not been discussed and are most difficult to understand. I do not think questions about these aspects (and many more) will be answered by sociobiology. Ordinary psychology with its knowledge of ego boundaries may be of a little help—but only a little. The people who know the most about such things are those among the religious who are students of Mystery. It is

Afterword

In the time since its initial publication, I have been fortunate enough to receive many letters from readers of *The Road Less Traveled*. They have been extraordinary letters. Intelligent and articulate without exception, they have also been extremely loving. As well as expressing appreciation, most of them have contained additional gifts: appropriate poetry, useful quotes from other authors, nuggets of wisdom and tales of personal experience. These letters have enriched my life. It has become clear to me that there is a whole network—far more vast than I had dared to believe—of people across the country who have quietly been proceeding for long distances along the less traveled road of spiritual growth. They have thanked me for diminishing their sense of aloneness on the journey. I thank them for the same service.

A few readers have questioned my faith in the efficacy of psychotherapy. I did suggest that the quality of psychotherapists varies widely. And I continue to believe that most of those who fail to benefit from work with a competent therapist do so because they lack the taste and will for the rigors of that work. However I did neglect to specify that a small minority of people—perhaps five percent—have psychiatric problems of a nature that does not respond to psychotherapy and that may even be made worse by the deep introspection involved.

Anyone who has succeeded in thoroughly reading and understanding this book is highly unlikely to belong to that five

percent. And in any case, it is the responsibility of a competent therapist to carefully and sometimes gradually discern those few patients who should not be led into psychoanalytic work and to lead them instead toward other forms of treatment that can be quite beneficial.

But who is a competent psychotherapist? Several readers of *The Road Less Traveled* who moved in the direction of seeking psychotherapy have written to inquire how one should go about choosing the right therapist, distinguishing between the competent and the incompetent. My first piece of advice is to take the choice seriously. It is one of the most important decisions you can make in your lifetime. Psychotherapy is a major investment, not only of your money but even more of your valuable time and energy. It is what stockbrokers would call a high-risk investment. If the choice is right, it will pay off handsomely in spiritual dividends you could not even have dreamed of. While it is not likely you will be actually harmed if you make the wrong choice, you will, however, waste most of the valuable money, time and energy you have put into it.

So don't hesitate to shop around. And don't hesitate to trust your feelings or intuition. Usually on the basis of a single interview with a therapist, you will be able to pick up either good or bad "vibes." If the vibes are bad, pay your single fee and move on to another. Such feelings are usually intangible, but they may emanate from small tangible clues. At the time I entered therapy in 1966, I was very concerned and critical about the morality of America's involvement in the Vietnam War. In his waiting room my therapist had copies of *Ramparts* and the *New York Review of Books*, both liberal journals with antiwar editorial policies. I had begun to pick up good vibes before I had ever set eyes on him.

But more important than your therapist's political leanings, age or sex is whether he or she is a genuinely caring person. This too you can often sense quickly, although the therapist should not fall all over you with kindly reassurances and snap commitments. If therapists are caring, they will also be cautious, disciplined and usually reserved, but it should be pos-

sible for you to intuit whether the reserve cloaks warmth or coldness.

Since therapists will be interviewing you to see whether they want you for a patient, it is wholly appropriate for you to be interviewing them in return. If it is relevant to you, don't hold back from asking what the therapist's feelings are about such issues as women's liberation or homosexuality or religion. You are entitled to honest, open and careful answers. In regard to other types of questions—such as how long therapy might last or whether your skin rash is psychosomatic—you are usually well off to trust a therapist who says that he or she does not know. In fact, educated and successful people in any profession who admit ignorance are generally the most expert and trustworthy.

A therapist's ability bears very little relationship to any credentials he or she might have. Love and courage and wisdom cannot be certified by academic degrees. For instance, "board-certified" psychiatrists, the therapists with the most credentials, undergo sufficiently rigorous training so that one can be relatively certain of not falling into the hands of a charlatan. But a psychiatrist is not necessarily any better a therapist than a psychologist, a social worker or a minister—or even as good. Indeed two of the very greatest therapists I know have never even graduated from college.

Word of mouth is often the best way to get started on your search for a psychotherapist. If you have some friend you respect who has been pleased with the services of a particular therapist, why not begin on that recommendation? Another way, particularly advisable if your symptoms are severe or you have physical difficulties as well, would be to start with a psychiatrist. By virtue of their medical training, psychiatrists are usually the most expensive therapists, but they are also in the best position to understand all the angles of your situation. At the end of the hour, after the psychiatrist has had a chance to learn the dimensions of your problem, you can ask him or her to refer you to a less expensive nonmedical therapist if appropriate. The best psychiatrists will usually be quite will-

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ing to tell you which lay practitioners in the community are particularly competent. Of course, if the doctor gives you good vibes and is willing to take you on as a patient, you can stick with him or her.

If you are financially strapped and have no medical insurance coverage for outpatient psychotherapy, your only option may be to seek assistance at a government- or hospital-supported psychiatric or mental health clinic. There a fee will be set according to your means, and you can rest pretty well assured that you will not fall into the hands of a quack. On the other hand, psychotherapy at clinics has a tendency to be superficial, and your capacity to choose your own therapist may be quite limited. Nonetheless, it often works out very well.

These brief guidelines have perhaps not been as specific as readers might like. But the central message is that since psychotherapy requires an intense and psychologically intimate relationship between two human beings, nothing can relieve you of the responsibility for personally choosing the particular human being whom you can trust to be your guide. The best therapist for one person may not be the best for another. Each person, therapist and patient, is unique, and you must rely on your own unique intuitive judgment. Because there is some risk involved, I wish you luck. And because the act of entering psychotherapy with all that it involves is an act of courage, you have my admiration.

M. Scott Peck
Bliss Road
New Preston, Conn. 06777

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About the Author

SCOTT PECK's publishing history reflects his own evolution as a writer, thinker, psychiatrist, and influential spiritual guide. Since *The Road Less Traveled* was first published in 1978, his insatiable intellectual curiosity has taken him in new directions with each book, most notably the subject of healing human evil in *People of the Lie* (1983); dimensions of Christian thought in *What Return Can I Make?* (coauthored with Marilyn von Waldener and Patricia Kay, 1985); the creative experience of community in *The Different Drum* (1987); a fictional exploration of spiritual themes in a powerful and inspirational novel, *A Bed by the Window* (1990); a children's book of faith, love, and family, *The Friendly Snowflake* (illustrated by his son, Christopher, 1992); the role of civility in personal relationships and society in *A World Waiting to Be Born* (1993); the crucial dilemmas of the nineties as the age of anxiety in *The Road Less Traveled and Beyond* (1997); and the personal story of his own journey of self-discovery while on a three-week spiritual quest with his wife in *In Search of Stones* (1996). A graduate of both Harvard University and Case Western Reserve, Dr. Peck served in the Army Medical Corps from 1963 to 1972 and had a private practice in psychiatry from 1972 until 1983. Since then, he has devoted much of his time and financial resources to the work of the Foundation for Community Encouragement, a nonprofit organization which he and his wife, Lily, helped found in 1984. Dr. Peck lives in Connecticut.

