

**A THEORETICAL CLASSIFICATION OF THE ORIGINS
OF SELF-CONSCIOUS BEHAVIOR**

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written in 1966

The Question of Mental Defect:

While the explanation of bizarre forms of behavior as illness did not begin with Freud, there is no doubt that his works provided tremendous impetus to the cooption of this area into medicine. Much of the present medical attitude toward behavior termed "sick" can be traced to theoretical orientations characteristic of the Freudian frame of reference. In the original Freudian position, man was seen as being born into the world with certain amorphous drives and needs which are at times frustrated by the circumstances of the world in which he finds himself. The mental apparatus, Freud said, was "a device for mastering excitations which would otherwise be felt as unpleasant or would have pathogenic effect."¹ Man is, thus, an animal who finds himself beset by drives and urges which must be satisfied in a world which is often unfriendly to them; he is a problem-solving creature. Even though Freud has often been thought of as the man who made a place for irrationality in the rationalistic 19th century world, the Freudian man is a highly rationalistic creature, acting always for some end, although the conscious part of that man may not always be aware of those ends. While the consciousness may not seem rational, the entire "mental apparatus," if all were seen, operates in a highly rational, goal-oriented manner. In the Freudian schema, mental illness is the pathological state of mind which results when conditions are such that satisfactory resolutions of the conflict inherent in the situation of the actor vis-a-vis his innate drives are not found.

Freud developed a highly elaborate system of psychological mechanisms by which the mind attempted to resolve these conflicts. Although Freud originally considered these mechanisms to be processes, perhaps in part

1. Sigmund Freud, "A Note on the Unconscious in Psychoanalysis," in Freud, General Psychological Theory, Ed. Philip Rieff, Collier Books, New York, 1963, p. 67.

to the persuasive force of his writings, they have in many cases come to be thought of as entities.² Thus, the Id, Ego and Superego, for example, are often thought of and spoken of as if they were things, or even pseudo-organs of the body. This reification of the mental processes suggests the analogous discussion of mental illness as if it were physical; as if one or more of these mental "organs" had become in some way defective. Actions called "sick," therefore, come to be classed as a different order of behavior from those not so called. When one conceives of a disorder of psychological mechanisms as productive of "ill" behavior, it becomes quite easy to consider deviant or undesirable actions indicative of some defect in the mind. Since, at about the time Freud's writings were first emerging, medicine was becoming committed to the idea of specific etiology of diseases,³ the idea that some specific disruption in mental processes was responsible for mental illness would be consistent with other medical belief. Further impetus toward the idea that "mental illness is a disease like any other disease" undoubtedly came from the marginal status of early investigators of the field of mental health. It is not unusual that these workers, in attempts to gain recognition from their own profession, would lay heavy stress on the fact that they were as medical as any of their colleagues.⁴

All of these factors likely have had a great effect on the way aberrant behaviors are characterized. Since aberrations of behavior

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2. Sigmund Freud, "Formulations Regarding the Two Principles in Mental Functioning," in op. cit., General Psychological Theory, pp. 22-23.
 3. Rene Dubos, Mirage of Health, Doubleday Anchor, 1961, p. 91.
 4. Joint Commission on Mental Illness and Health, Action for Mental Health, Basic Books, 1961, p. 64.

came to be considered a medical problem about the time medicine was pre-occupied with the idea that disease was specifically caused, these aberrations came to be classed as a different order of behavior than non-aberrant actions. While normal activities may be considered behavior in the ordinary sense, deviant actions are not really "behaviors" but rather symptoms. In the case of ordinary behaviors, the person himself is seen as the agent, while in the case of symptoms, disease is spoken of as if it were the agent. One consequence of this way of characterizing such behavior is that certain actions themselves become typed as pathological, and hence indicative of some breakdown in the mental apparatus. Since disease is considered the agent of a whole category of actions, the occurrence of any of these actions is considered evidence of the presence of disease. Perhaps the most important consequence of this view of deviant behaviors is the implicit denial of non-pathological explanations for such behavior.⁵ Thus the Joint Commission on Mental Illness and Health defines

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5. It is interesting to note in this regard that Walter Cronkite, during CBS Special Coverage of the assassination of President Kennedy, listed all those who had been known to attempt assassination of an American president in the history of the U.S. Every one was considered mentally defective. In cases where conspiracy was involved, as in the assassination of President Lincoln, every member of the conspiracies was considered similarly depraved, although in no instance quite so depraved as the actual assassin. Even those individuals from outside the continental U.S. who attempted assassination as a protest against what they considered harsh U.S. policy (e.g., the attempted assassination of President Truman) were considered mentally ill. Note that the term "Illness" seems to be applied here not on the basis of any perceived malfunction in the assassin's mind, but rather as a means of legitimizing the social system itself, viz. the system is characterized as such that no "normal" individual could attack it in such a way. Thus the action itself is the diagnostic agent; regardless of the rationality or emotional state of the assassin, the diagnosis would not change. In a real sense, the action is the illness.

various forms of mental illness in behavioral terms:

psychoneurosis was defined as a disorder chiefly characterized by "anxiety" expressed either directly or through various psychological defense mechanisms. Psychosis was defined as a disorder characterized by a varying degree of personality disintegration and failure to test and evaluate external reality correctly.⁶

Even more clear is the example provided by the definition of personality disorders: "Personality disorders... (are) a defect of behavior patterns with little sense of anxiety or distress..."⁷ Note especially in the latter example that certain behaviors themselves are indicative of some pathological state analogous to physical illness in the mind of the individual. This last statement is made clear by further arguments presented by the same commission:

Schizophrenia... might be said to be a kind of arthritis of the mind, crippling one part or another, attacking and retreating, but not usually progressing rapidly or with 100 percent certainty to an end point of total and permanent disability.⁸

It is apparent here that the disorder in the mind is inferred from the behavior, rather than known in its own right. There is really no direct evidence of disorder. The argument seems to be that the behaviors themselves are abnormal, thus the apparatus which produces them must be similarly abnormal. The possibility that the behaviors judged abnormal may be a normal adjustment to an abnormal situation seems to have been guessed, at least, by recent advocates of "community therapy" but does not really seem to have made any significant impression on psychiatry. The idea that the agent of the abnormal act must be defective seems the raison de etre' of a medically oriented psychiatry. Even the notion of

6. Ibid., p. 51. Emphasis supplied

7. Ibid., p. 50. Emphasis supplied

8. Ibid., p. 53.

abnormal situations as a predisposing factor to abnormal actions seems to be warped to the idea that abnormal situations cause defects in the mind, with consequent abnormal actions. All of this leads to a bifurcation of activities into two classifications: Those which can be performed by normal individuals, and those which are precipitated by the pathological state of the mind in those with mental illness. One of the consequences of this division of behaviors is a dilemma: either it now becomes necessary to posit two theories of behavior, one for pathological actions and one for normal, or to assume that all actions have some pathological component and can be accounted for in medical terms, as Freud seemed to do.⁹

The theoretical position of George Herbert Mead differs from that of Freud and the medical community in several significant ways. Mead thought of the mind as a process rather than a thing, and denied that as such, it could be located totally within the individual.¹⁰ Behaviors in a system such as this cannot be seen as preceding from motivations totally intra-individual, but rather from a combination of individual factors and social influences.

Since the mind is seen as a process, pathology, in fact, does not really apply to it except in an analogous sense. Although the entities on which a process depends, as the machinery in a factory, can indeed suffer from defects and breakdowns, the process either occurs or doesn't occur. Thus, in the Meadian system, deviant activities are not seen as

9. For example: "...a dream is itself a neurotic symptom and, moreover, possesses for us the incalculable advantage of occurring in all healthy people." Sigmund Freud, A General Introduction to Psycho-analysis, Liveright, New York, 1935, p. 75.

10. George Herbert Mead, "The Process of Mind in Nature," in Anselm Strauss, The Social Psychology of George Herbert Mead, Phoenix Books, Chicago, Ill., 1956, p. 84.

signals of pathology, but rather as the consequence of the normal operation of the process of mind in situations which differ from those productive of normal behavior. Behaviors are considered analytically the same regardless of the content they may have. Thus the delusions of the paranoid individual, in the Meadian structure, would not be considered evidence that the mind is not functioning properly, but rather an example of what the normal process of mind will produce under certain conditions to which the individual has been exposed. There is no division of behavior into normal and pathological, and hence all behavior, deviant or normal, can be accounted for by the same theory.

For Mead, man is a normative being. Man is not impelled to action by drives which are innate, but rather acts in the way he perceives as appropriate to himself in the situation as he sees it.¹¹ The child who conceives of himself as afraid of the dark will react with fear when placed in the dark, assuming that nothing else enters the situation to change his definition or perception of it. Action which will be taken is determined for the agent by his definition of his relationship to the situation in which he finds himself. The elements of action, therefore, are the actor's conception of himself and his perception of the situation.

It is on the basis of this information that the individual acts in various situations, much in the same way as the judicial system relies upon the decisions of similar tribunals in similar situations. The danger involved in characterizing human behavior in these terms is the tendency to overrationalize the process; to think of it as a highly contemplative situation in which the individual consciously examines the pertinent information of his life, scrutinizes the situation and attempts to fit behaviors

11. Mead, op. cit., p. 86 and following.

into the resultant schema. While this certainly can be the case under certain circumstances, most often it is not. Most situations the individual encounters are so similar to most others that the actions appropriate in them are habituated.¹² Another important distinction to be made here deals with the nature of this normative activity. Normative, in this context, is not meant to connote any ethical suasion; the individual does not necessarily act the way he thinks he ought to act or should act, but rather the way he perceives he will act, because he is a specific type of person who always does act a certain way under given circumstances, regardless of whether or not he thinks he should act that way.¹³

Thus, in contrast to the rational Freudian model, Mead's man is a normative creature, not impelled by drives or rationally overcoming obstacles to satisfaction, but rather performing actions he deems appropriate to himself in situations as he perceives them. Since man's action, for Mead, is determined for him by his perception of what the situation is, and what action is appropriate to him in that situation, then the problem of explaining differential action becomes one of determining: 1) how the conception of what is appropriate to the individual comes to be engendered in him, and 2) how he comes to perceive situations as he does.

Mead's assumptions, however, provide a framework for viewing social phenomena rather than a theory. The purpose of this paper is to modify that framework into a theoretical classification which can be used to account for the variations observed in human behavior.

12. See John Dewey, How We Think, New York, D. C. Heath, 1910.

13. Fragmentary evidence in support of this position can be found in Joseph Woelfel, Experimental Formation of Attitudes, Unpublished Master's Thesis, U. of Wis., 1963. See also Tamotsu Shibutani, Society and Personality, Prentice-Hall, Englewood Cliffs, N. J., 1961, p. 214 and following.

One of the theories which has attempted to account for the actions of the "mentally ill" within the Meadian framework is that proposed by Edwin Lemert.¹⁴ Lemert's theoretical position holds that deviant behaviors which persist in the individual are socially defined roles. These social roles, notwithstanding their desirability or moral approbation by the society, are considered roles just as the more conventional, sanctioned roles. If this is true, then it follows that the same dynamics which produce non-deviant roles in an individual are also responsible for the analytically undifferentiable deviant role. Men come to learn deviant roles in the same way in which they learn sanctioned roles.¹⁵

The cornerstone of this theoretical position is the reaction of society to the deviant individual. Lemert is concerned primarily with what happens when significant others note that an individual is performing deviant actions. The reaction of these others to that behavior is considered to lead the individual to characterize himself as deviant.

If one's major focus of attention is to be on society's reaction to the deviant individual, however, certain factors which ought to be of concern to the investigator of the phenomenon called "mental illness" must necessarily be omitted. One of these, of course, is the genesis of the original deviance to which the society is reacting. Lemert explicitly acknowledges this fact, and terms this original deviance "primary," and is willing to accept its existence as a given.¹⁶

There are several other difficulties which arise from this focus on societal reaction as it affects the individual. Perhaps the greatest of

14. Edwin Lemert, Social Pathology, New York, McGraw-Hill, 1951.

15. Ibid., especially pp. 3-98.

16. Lemert, op. cit., especially pp. 425-428.

these is the fact that societal reaction to an individual is not the only means by which a role can be instilled in an individual, deviant or otherwise. If we are to consider mental illness a role which some individuals play, then any means through which roles may be taken ought to be effective in engendering behaviors termed "ill."

One other problem arises in this connection. Not all behaviors termed sick are frequent enough nor pervasive enough to be called roles in the normal sense, nor, in fact, may they be frequent enough to cause much of a societal reaction. If we are to account for these forms of aberrant behavior, it would be best to consider them both as single behaviors and as parts of organized roles. The contention here will be that the processes through which an individual incorporates a role into his self-conception is analytically the same as those by which single behaviors are incorporated. The task of this paper, therefore, is to account for the mechanisms whereby behaviors, whether alone or organized into roles, are incorporated into the individual self conception. Assuming that deviant behaviors are not to be differentiated from other behaviors except by content, the question becomes the fundamental one: How do men come to perform some actions rather than others? The problem of mental illness may be viewed as one of selective activity.

The Self:

It is important at the outset to avoid confusing the self with the individual. The self consists in the individual's ideas of what he is and what he is like. The individual is not directly able to observe that part of himself which is the agency of his actions, since it is itself a subjective phenomenon: a process. Information about this agency (or, for lack of a better description, what the individual means when he says "I")

can only be gained by inference. The individual observes his actions and, on the basis of what he sees these actions to be, infers things about their author. This body of inferred information about the individual is what is referred to as the self.¹⁷

Since information about the self is always gathered by inference from actions, it follows that the information which an actor can assemble about himself is always relational.¹⁸ This is because any action is necessarily toward or about some thing, and is thus itself a relationship. Because man does not exist outside a situational context, knowledge inferred about him is, therefore, necessarily couched in terms of his relation to those situations. If a man refers to himself as a chemist, he is characterizing himself in terms of his relationship to a whole body of situations and objects in the world. He understands that he stands in a different relationship to test tubes, flasks, chemicals, chemical journals, etc., than does the non-chemist. The self, then, consists of the total body of information which the individual has assembled about his relationship to other objects.¹⁹

Since the self contains only relational information, it follows that not only information about the individual is contained in it but also information concerning all the objects and situations which originally formed the relationships defining the individual. To a large extent,

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17. It is important to understand that these inferences need not be made by the individual himself, but may be made for him by others. Nor, for purposes of the individual's actions later, does it make any difference whether or not the inferences are accurate, so long as the individual thinks they are. It is also true that the scientist is in no better position than anyone else; his information about individuals must also be inferred from their actions.
 18. Ibid., pp. 81 and 243.
 19. See Leonard S. Cottrell, Jr., "The Analysis of Situational Fields in Social Psychology," in P. Hare, E. Borgatta, R. Bales, Small Groups, New York, Knopf, 1962, p. 66.

therefore, objects and situations confronted by the individual in the present are defined by information from the self, which, in turn, has been formed out of actions of the individual in situations in the past. The self, therefore, can be seen to be a repository of information about the individual and his relationship to social objects and situations which determines how future situations will be perceived and how the individual will act in them. In order to account for the adoption of behaviors, whether organized into roles or not, into the individual, it becomes necessary to understand the processes by which the self emerges.

The Genesis of the Self:

Since the self consists of the individual's perception of how he is related to social objects, the question of how the self is formed can be rephrased as the question of how the individual can come to perceive himself as related to social objects. The case of the individual defining relationships for himself is called by Mead the "self-reflexive act."²⁰ When the relationship between individual and object is formed solely by the action of the individual, the action is termed self-reflective. In this case, the individual perceives himself acting with regard to some object (relating himself to some object) and thus perceives that a relationship between himself and the object exists. The original impulse toward action may be biologically determined, but the action itself does not become a self conscious one until the individual perceives that it exists. Once the relationship has been perceived, it becomes information used in forming the self-conception. In the particular situation in which the relationship emerges, the individual defines himself by the relationship. He identifies himself as one who acts in a certain way in that

20. Mead, op. cit., p. 79.

situation. When similar situations arise, this information is instrumental in determining how he will act again.

Obviously, information about the self can be attained in other ways than by self-reflection. Probably the predominant way in which the individual gains information about himself is from other people.²¹ This is simply the case in which others tell the individual something about himself. This, in fact, can be seen to be the totality of the argument presented by Lemert in his discussion of assignment of deviant roles.²²

Not only is it clear that relationships between the individual and objects can be determined either by the individual acting by himself, or by others imputing relationships to the individual, but it can also be seen that, within either form of self-image formation, variations are possible. Either the self-reflective act or definition by others can focus itself on either term of the relationship. Thus the individual, presupposing a well-defined conception of his own identity, can focus his definition on the object of the relationship rather than on himself; the individual who has a firm conception of himself as good can define another individual with whom he has had an argument as bad, since anything (or anyone) that fails to relate favorably to a good individual must be bad. Similarly, other persons can tell the individual that certain objects are good or bad without specific reference to the individual, just as they can label the individual good or bad without specific reference to some social object. In either case, both the individual and the object are defined by the relationship established, but there is a different focus of the attempt.²³ Thus we can see that there are, essentially, four primary

21. Shibusaki, op. cit., p. 79.

22. Lemert, op. cit.

23. Woelfel, op. cit., pp. 6 and 8.

categories of self-image formation: 1) Self-assignment with focus on the definition of the self; 2) Self-assignment with focus on the definition of the object; 3) Assignment by others with focus on the definition of the self; 4) Assignment by others with focus on the definition of the object.

Indirect Formation of the Self-Conception:

In all previous cases of self-conception formation, either the self or the object can be seen to be directly defined. In the case of the self-reflective act, the individual perceives himself acting toward some specific object. In that action, the self and the object are directly defined with regard to one another. Similarly, up to this point, only those cases in which others impute relationships between individuals and specific objects directly have been considered. There is also another very important way in which relationships can be formed.

In some cases, the definition either of the individual or the object of the relationship is not direct, but rather proceeds through an intervening step. This indirect definition of the self occurs when either the self or the object is not directly encountered or defined by others, but rather takes on its definition as a result of being placed in a category of persons or objects which have previously been defined. Either individuals or objects may be categorized.

The case of objects is the easiest to see. Objects are classified into categories on the basis of similarities one to another. Once a category of objects has been set up, individual objects can be defined merely by assignment to that category. Since persons, too, may be social objects to which the individual may relate himself, they too may be classified into categories. Persons, then, can also be defined as objects to be responded to by assigning them into categories. An anti-Semite, therefore,

can form a relationship with a man he has never met merely on the information that the man is a Jew, just as another individual might form a relationship with another man on the knowledge that that man is a doctor. This ability of man to categorize objects on the basis of similarities is what makes it possible for men to relate themselves to objects and persons they have never met.

The peculiar property of the self, as mentioned before, is that it is that objective information about the individual which he can observe directly. Insofar as the individual can perceive the information about himself, it is an object to him, and, as such, can be categorized just as any other object. He can conceive of himself as a Jew or a Democrat or a Catholic or a lover or a mentally ill person. The essential difference between classification of the self and classification of other objects is that the self is classified not as something to be responded to or related to, but rather as a responder; a relator. Insofar as the individual perceives himself to be in a category of similar relators, relationships of these other individuals to certain objects are perceived as appropriate to the individual. The case of classification of the individual as a subject rather than an object will be termed, in this paper, identification and the person with whom the individual identifies, significant others. This identification of the self with other selves, whether caused by the immediate perception of the individual or by the definitions provided by others, is an extremely important category of self-image formation. The impact of identification on self-image formation becomes clear when it is seen that the individual can, through identification, assume information about himself into the self conception without directly confronting the object of the new relationship himself. Insofar as the individual has identified himself with another, actions performed by or toward that other have essentially the

same effect on the individual as they would had they been performed by or toward him. It is this effect which accounts for the anger of the son when someone strikes his father, or the dismay of the college student when his school is defeated in an athletic contest. The student is injured by the team's loss although he personally did not lose because he has identified with the athletes on the basis of a set of attitudes toward the school vis-a-vis other schools.

In the same way as the individual can come to feel the same emotion as another with whom he has identified when that other is affected, so too can he assimilate behaviors performed by that other toward the object(s) on which the identification is based. If an individual identifies himself with another on the basis of attitudes toward political actions, for example, then political actions performed by that other are perceived as appropriate to the individual as well.

All this necessarily follows from the original Meadian premises; the individual acts in the manner he considers appropriate to him in the situation in which he finds himself. By identifying with another, the individual is saying, in effect, that what is appropriate to that other is appropriate to him as well.

Insofar as any self-conception is inherently situational, identification itself is a situational phenomenon. Just as the individual knows that he is what he is insofar as he is related in certain ways to certain objects, so too he knows that he is like someone else insofar as both he and that other are related in the same way to the same object or set of objects.

From this it follows further that identifications based on perception of similarity toward diffuse objects will tend to lead to incorporation of a wider range of behaviors from one individual by another than those based

on perceived similarity toward specific objects. Thus the son who sees himself as "just like my father" will assimilate more behaviors from his father than the student who sees himself as feeling the same as his girl friend about what constitutes a good date will assimilate from that girl.

The essential point about identification is the fact that whatever is seen as appropriate to the other with whom the individual identifies is, by definition, seen as appropriate to the individual. (With the stipulation, of course, that the action is pertinent to the object(s) toward which the identification is formed.) Thus any attribute predicated of the other must necessarily be predicable of the individual himself. When the psychiatrist tells the boy "Your father has schizophrenia," and the boy has already formed a diffuse identification with his father ("I'm just like my father"), the statement of the psychiatrist defines the son as well as the father. Assuming this is true, it follows from the Lemertian frame of reference that one can form a deviant self-conception on the basis of societal reaction to someone else (with whom he has identified.)

The means by which the self conception can be formed, therefore, are many. Self-images can be formed by the individual himself in the self-reflexive act, or they can be imputed to him by others through societal definition. The focus of the definition can be the individual or the object of the relationship, and qualities can be attributed to the subject or object either directly or indirectly by categorization. Combining all these methods, the following diagram emerges:

Table 1. Representation of the means of self-Image Formation and their Combinations

FOCUS OF DEFINITION AGENT OF DEFINITION	METHOD OF DEFINITION	A		B				
		DIRECT	INDIRECT	DIRECT	INDIRECT			
	SELF	OBJECT	SELF	OBJECT				
SELF	Individual sees himself recoil from a snake; infers "I am afraid of this snake."	Individual sees himself recoil from a snake; infers "Snakes are fearsome creatures."	Individual perceives that he acts just like another in regard to X; infers "I am just like that other in regard to X."	Individual perceives that he acts in the same way to X, Y and Z; infers "X, Y and Z are all alike and to be avoided by me."	Ia	IIa	Ib	IIb
	Another sees individual recoil from snake; tells individual "You are afraid of snakes."	Another tells individual "Snakes are fearsome creatures."	Another tells individual he is just like a third person in regard to X.	Another tells individual certain objects are all related to him in the same way.	IIIa	IVa	IIIb	IVb

(Columns represent the means by which the self-image is formed, rows represent the person or agent that forms the relation. Column subclasses represent the focus of the definition; i.e., whether the individual or the object is defined. Cell Ia, therefore, represents the case of an individual perceiving himself relating to an object, and making inferences about himself on the basis of that relationship.)

Although the main purpose in compiling the above diagram is to illustrate graphically the various ways in which self-images can be formed, one other advantage is apparent: by inspection of the sub-classes within the diagram, it is possible to determine what kinds of self-images are likely to be formed by different types of self-image formation. Since all self images formed in Column A are formed directly (either by a direct definition of the individual or object), it follows that the relationships will in all cases be specific ones. The individual, that is, perceives that he is related to a certain object in a certain way. It follows from this that the behaviors resulting from this type of self-image formation will themselves be specific. These are the processes through which single behaviors are incorporated. Any primary deviance to which society can react will originate in these processes.

On the other hand, self-images formed in Column B are formed toward whole categories of objects, or by categorizing the individual with other individuals. Attitudes formed through these methods, therefore, can be seen to be complex, either because they refer to more than one object, or because they are incorporated through identification with other individuals, in which case all the attitudes and actions of the other relative to the object of the identification are appropriate to the individual, and tend to be incorporated in toto. These methods, then, are the ones through which roles tend to be incorporated into the self conception. In the case of Column A, for example, an individual may find himself recoiling from a snake. Through the self-reflexive act, the individual encounters himself specifically related to a certain object (a snake), and may come to characterize himself as one afraid of snakes (a specific attitude, resulting in specific actions) (Cell Ia). In the case of Column B, the individual's father, for example, having seen the above action, may indirectly impute

attributes to the individual toward a whole category of diffuse objects; ("You are just like your mother -- a coward.")(Cell IVa) Granting for a moment the gross oversimplification implied, if this set of characteristics should be incorporated into the self-conception, enormous numbers of behaviors become incorporated into the self-conception. All the behaviors of the mother relative to situations in which courage is an element may be potentially incorporated, as well as behaviors toward any objects which may be defined as related to courage. In this case, not one but many behaviors enter the repertoire of the individual.

It would seem that the classification presented can account for any form of self-conscious behavior which the individual is physically capable of performing. It is important to note, however, that the theoretical position presented in this paper can account only for self-conscious behavior; that is, behavior in which the self enters perception as an object. Actions which are not self-conscious must be accounted for in terms of other theories, such as Stimulus-Response, etc. The exclusion of non-self-conscious activities from consideration seems justified in view of the fact that self-conscious behavior is the distinguishing feature of the human animal. This paper does not direct itself toward all behavior, but that behavior which is peculiarly human. Insofar as man is animal as well as human, non-self-conscious activities are also a part of the human repertoire, and on that count alone deserve investigation. It is likely that these animal behaviors are the initial sources of activity which the individual perceives himself performing in the self-reflexive act early in life, when the self is not sufficiently developed to be a significant motivator of behavior. The infant may suck his thumb by inborn reflex, for example, but only when he perceives the fact that he is sucking his thumb does the action become a self-conscious one. The

individual, previously not self-conscious, now has made an inference about himself, even though rather elementary: "I am a thumbsucker." The first inference must be made before the term "I" has any meaning whatsoever. Such unconscious activities do not really deserve the classification "human actions," but ought rather to be thought of as things which happen to the person.

Insofar as behavior termed sick is self-conscious, its genesis can be accounted for in terms of the theory presented. Such behaviors as gross misperceptions of reality are easily dealt with, since perception of objects itself is largely determined by the pre-existing self conception. Similarly severe anxiety and fear, anger and aggressiveness as well as psychological pain can be accommodated insofar as they are self-conscious reactions to reality as it is perceived by the individual. Spatial limitations prohibit an exhaustive survey of the actions termed sick as they relate to the theoretical position presented, but the general thesis should be apparent:

Since the mind is seen as a process of relating the individual to the objects around him, it is not subject to pathology as long as the physical organs on which it depends are functioning normally.