

## POINTS OF VIEW

## CHARITY TOWARDS NEUROTICS

## I

DOM OSWALD SUMNER

IN THE issue of *THE LIFE OF THE SPIRIT* Nos 110-1 there is a letter requesting help and guidance on the very pertinent question of the responsibilities of a Christian who has to live in close proximity with neurotic personalities. This is obviously a very live issue to which careful thought must be given, for it is a question of integrating into Christian life the new knowledge of what may be considered a modern disease and the many very remarkable discoveries that have been made by those who have concerned themselves with its diagnosis, origin and cure.

While defining just what we are discussing when we here speak of a neurosis I propose to omit those aspects of the subject that are rather the particular business of the medical physician, as it is he who will diagnose the condition and suggest treatment. I will therefore leave aside conditions dealt with by psychosomatic medicine and also the functional diseases and try to give some idea of the third aspect of this question, i.e. disorders of the personality function which reveal to us that the person is neurotic. We will call this a personality or character neurosis. This 'may or may not have any physical symptoms, but there is always a far-reaching distortion of the character structure revealed in the difficult and abnormal attitudes of mind displayed. Suspiciousness, resentment, aggressiveness, callousness, or self-pity, a complaining attitude, an incipient demand for consideration and help from others, evasion of responsibility, chronic dependency, or else aloofness, lack of overt-feeling for, or interest in, others, solitariness; all these and other "neurotic character trends" are hall-marks of deep-seated neurosis'. (Guntrip. *Psychology for Ministers and Social Workers*, p. 56.) Such character neuroses are characterized by retardation in

the development of psychic life. The grown-up neurotic has an infantile psyche; he behaves like a child in adult life-situations.

A neurosis is not something to be ashamed of, nor is it a rare and strange complaint. In fact we common mortals are *all* neurotic somewhere, and not only we but it is also plain that the Saints also have their neurotic patches in life—a fact of which we should be warned lest our attempts to imitate the Saints lead us to copy their neurosis rather than their sanctity. This diseased state of humanity seems to be an effect of original sin which is clearly visible on all sides and is a common burden that we all share and that unites us all as sick and ailing members of one fallen race. Indignant rejection of this condition would perhaps show a lack of understanding of the far-reaching effects of original sin.

When once a man is able to accept the fact that men in general are neurotic and suffer in general from characteriological disturbances a great step towards the solution of our problem has been taken. The neurotic so frequently regards himself as an outcast; almost as one who has had a curse put on him; and in any case as a lonely and misunderstood soul, so it is well for him to understand that many round him also have their neurotic conflicts and difficulties, and realize that, though he may not have spotted them, others are suffering more or less from difficulties similar to his own. For the sake of the neurotic it is important that this should be thoroughly realized so that when he finds that a neurosis is not a disgrace and may even be the sign of a very sensitive character, with great, though so far unrealized, potentialities, his loneliness, isolation and despair will be broken down and he will realize that he is indeed largely as the rest of men.

It is most important that the neurotic should understand that the neurosis has a valuable contribution to make to life. This is not just a horrible disease that has grabbed him as a chance victim from the crowd, but the neurosis has a purpose, a reason—it is trying to achieve something, to make its victim pay attention to requirements of his character which he has utterly neglected. Psychologists hold that it is amply proved that men develop according to certain laws, through various well defined stages from infancy to maturity. But suppose a man does not make the grade, he is not thereby just allowed to go on with the rest of the form, trusting it will make no difference in the long run—no, he will move on, but part of his personality will have become arrested and will *not*

go on with him. Later on his development requires that this unsuccessful side of his personality be brought up to date also; and it is at this point that the neurosis steps in and *forces* him to give his attention to these infantile aspects. He may refuse to attend to the urgent demands of nature but then he will continue to suffer from the neurosis until he has fulfilled these requirements and of course all those about him will suffer also. *He is being faced with an urgent moral problem.* This is the positive purpose of neurosis—to *force us to develop to the stature that our nature requires of us individually.* A profound understanding of this truth has very frequently been the first step towards a solution of the problem of the neurosis—for when a thing has a purpose and an aim we gain the courage to face the problem and stop playing hide and seek with ourselves. Those acquainted with writings on the spiritual life will recognize the parallelism here with what spiritual writers call the 'retarded soul' and their advice on the treatment of this condition.

Experience shows that it is also important for the neurotic to understand something of the difference between a neurosis and a psychosis, or lunacy. A neurosis is to be regarded as an effect of an unsolved emotional conflict within the personality, usually of a very complicated nature. Thus a woman may have a natural desire for marriage, while another set of emotions, connected with the mother, may, in the unconscious, echo her words that marriage is a deception and a snare and she trusts her daughter will never allow herself to be caught in *that* trap. The neurosis may then develop as a false attempt to solve this *emotional conflict.* In a psychosis, in madness, on the other hand the ego is entirely overthrown, contents of the unconscious overflow the conscious mind to such an extent that there is no 'I' to refer anything to, so there is no one there to speak to or contact. Psychotics, lunatics, are lost in the world of dreams. There is an infinity of difference between these two conditions and the neurotic needs to be assured that a neurosis does not mean that one is 'going out of one's mind'.

Thus far I have only suggested how the neurotic can be helped to see his disease as the constructive thing it is: to be frank with himself and admit his difficulties at least to himself without fearing that he is thereby condemning himself as a lunatic.

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Our questioner asks for guidance in personal relationships with neurotics, so I think I must make a distinction between the different kinds of relationships.

(1) You have to live in close contact with such a sick personality, and while desiring a Christian relationship wish to avoid contamination with the disease. For you an understanding of the disease and its purpose is most important. But your charity will not lead you to reject the use of 'antiseptics' to be mentioned later. You must not expect to cure the patient, but your love and compassion and understanding will begin to open up a way to recovery and growth and may even be a help to an eventual healing.

(2) Are you a person who feels it is your duty to devote yourself to the cure of the sick person? This situation is full of snags. Very frequently you will be an interfering busybody who feels that your vocation in life is to put everyone else right, making yourself into a monitor, guide and guardian of any victim who will submit to your power demands (disguised under the headings of 'love' and 'duty'). You can still do a great deal of good even in this case, provided you have the courage to undergo a thorough course of psychotherapeutic treatment yourself first.

(3) You have been approached by the sick person for help, and there being no trained psychotherapist available you have to see if you can manage to help in some way. Of course this will place a heavy burden on you and will require sacrifices of time and energy—but if you are very humble and charitable and take the trouble to make some study of this condition you will be able to help. The situation will be very hopeful because it means that the sick person realizes he is sick and, further, knows that his sickness is one that can be helped by personal relation with another.

To whichever of these classes you belong, remember that you *must* not only have a sympathetic comprehension of the emotional disturbances distressing the patient, but *you must also love him*. Without this love, all knowledge will be in vain. You must be like our Lord who had 'compassion on the multitude'.

Seeking now for suggestions how we can deal with neurotic people when we find them in our close vicinity—in the family, community, at work, etc. Perhaps the techniques of the psychotherapist can help us here—after all, he has to deal with such people for many hours each day and one could expect that he might therefore become very vulnerable to their behaviour and

emotions. The psychotherapist safeguards himself in several important ways:

(a) He only sees the patient for a specific time—usually an hour. When the time is up the patient leaves and another comes to take the next hour. This canalizes the patient—he knows that he has boundaries and cannot flow on and on for ever in every direction.

(b) The psychotherapist sees the patient on his own ground, i.e. at his consulting room. The patient has to *come* and when the visit is over he must *go*.

(c) The patient has to *pay* for his treatment. This means that he will not just fritter away his time but will try to get his money's worth as quickly as possible. He therefore *values* the time he takes and does his best to come to grips with his difficulties.

(d) The psychotherapist takes an objective view of the patient and his emotions and disturbances. To him the patient is like the body lying on the operating table—with the additional fact that it is also a personality he is dealing with. Should the surgeon be suddenly told that this is his wife he is operating on, a very disturbing emotional factor would be introduced with the knowledge of this very subjective relationship. The therapist to a considerable extent remains aloof from such a subjective relationship with the patient.

(e) The psychotherapist is trained to have an understanding of the psyche and the neuroses and so has a sympathetic comprehension of the emotional disturbances distressing his patient.

I am suggesting that, *mutatis mutandis*, we can all learn something from this technique which would go a long way towards solving the problems raised by your correspondent.

(a) Do not let the neurotic have unlimited access to you. It is most important, if possible, to build some sort of wall round oneself and *time* is very important here. If you are in a position of authority, e.g. a matron in charge of nurses, a mother superior, etc., then only allow a strict, known, ration of time to the neurotic. When this is over say you have work to attend to and dismiss them. However, circumstances may make this more difficult, e.g. a neurotic woman nagging her husband of an evening by the fireside. If he listens by the hour he will become 'infected', so he must find a way of bringing the thing to an end, of withdrawing to attend to his own affairs: his books, hobbies, sport; he will often enough in practice take himself off to the 'local'.

(b) Unlike the therapist, we have to meet the patient on our own ground. And it is here that I suggest that we need a sacred spot that is our own which the patient must keep off. This could be our own chair, our own corner, desk, room, etc. In many monasteries the monks are not allowed to go into the cells of others save on special specified types of business. This has a most important psychological function—it keeps the monks disinfected from these contaminations. I know a person who was being battered very considerably by a neurotic and who, as a protection, arranged a symbolic ‘magic circle’ in the form of a circular carpet in her room. She found that as long as she sat in this protective circle the patient was unable to infect her. If unable to procure a magic circle of this type one could certainly solemnly draw a circle round one’s chair which would have the desired effect. Lest this proceeding be thoughtlessly dismissed as not even worth consideration, I beg the reader to refresh his memory of the meaning and purpose of the symbol. Though the world at large has largely lost an appreciation of the value and meaning of the symbol as an outward sign of an inward condition, we as Catholics should have preserved ourselves from this loss. We must remember that symbols are not only to be found in sacraments, sacramentals and religious rites, but that man is a symbol-producing creature and that each one of us is a living fountain of symbols which are born, live and die in us throughout our lives. We must put aside our prejudices and realize that a great many external religious acts—use of holy water, genuflections, processions, circumambulations, anointings, blessed bread, etc.—have a symbolic and therefore psychological signification and produce in the psyche the effect they imitate or signify outwardly. A living appreciation of this would greatly enrich our religious practices and also give us some insight into psychological methods that can be used to help us in daily experiences. Thus *rites d’entré* should often be used to canalize psychic energy so that positive work can be achieved and, though so-called ‘will power’ can often bring about the same ends, this is often at the cost of great, unnecessary expenditure of vital energy.

(c) If you only allow a limited access by the neurotic you are in some sense forcing him to pay—for he can only have a limited quantity of your time and attention. But you could and should go further and demand some payment in kind for services rendered, i.e. for love and patience given. You could make it a *sine qua non*

that some service be done in return. We do not appreciate what we do not pay for, and if the neurotic sucks up your energy then the least he can do is to give some return. It occurs to me that such payment could well take the form of prayers to be said for one or other of your intentions, or alms to some charity in which you are specially interested. However the payment is made, it should not be for some good work of general interest but for one of importance to *you*.

(d) Already these precautions will enable you to take a more detached attitude to the patient and preserve yourself to a large extent from 'infection'. You will certainly become infected if you live in a continuous state of emotion owing to the neurotic disturbances in your vicinity. But you can actually practise symbolic acts of disinfection, e.g. sprinkling the room with holy water before the person comes and after he leaves; washing your hands before and after as a ceremonial cleansing; even a positive use of a disinfectant, or smoking a special cigarette would symbolize the same separation from contagion.

(e) It would seem to be impossible to assist any neurotic if he does not most urgently feel the need of assistance. If he is blind to his condition, or attached to it, refusing to take any steps to free himself from it, in other words refusing in reality to grow up, to become adult, mature, then no one can help him at all. For this reason there is a world of difference for the psychotherapist when the patient comes on his own, seeking release, and when the patient comes just to please relatives while being convinced there is really nothing at all wrong with him. So *insight* on the part of the neurotic is quite essential. If there is none, then it is a waste of time trying to give positive help. Charity to yourself requires that, if you are forced to live in close contact with such a neurotic, you keep as free as possible from entanglement in the neurosis. This means that a certain distance be kept between the healthy and the sick person for a close relationship will certainly involve both parties. 'If the blind lead the blind they will both fall into the ditch.' In so far as the neurosis denotes an infantile, undeveloped condition it is not possible to relate to that side of the personality for one is talking to a querulous child at that point. It is only if the more developed side of the person is willing to introduce you to this child that you can really be of use. Therefore when there is no insight it is essential to keep your distance, not to get involved in

neurotic discussions and as far as possible remove all 'hooks' within oneself on which the neurotic can hang his projections.

So we now reach the most important point that it is necessary to have some understanding of neurosis yourself if you have to come into close contact with neurotics. And this for two reasons:

(1) That we may have some insight into the processes at work in the neurosis. Without this we just talk a lot of nonsense; tell the patient to pull himself together, realize this is all imagination, that a little will-power will overcome difficulties of this nature, that he is only being self-willed, obstinate, etc. Unless we realize that when we talk in this way we are talking absolute nonsense we had better keep as far away from neurotics as possible, in the name of charity. Fairly simple books are available that will to a large extent give us the insight we need and with insight comes a growth in charity and compassion for the sufferer (e.g. the book by Guntrip quoted above).

(2) Most important of all—we *must have some understanding of our own neurosis before we can help another*. For this reason analysts take a long course of analysis before they are able to act as psychotherapists to others. So before you can do much to help others you must have taken a considerable amount of trouble with your own psyche and character. If we do not do so we may well have an intellectual understanding of the neurosis of another and its effects on the life of those about him, but we will not see that from a slightly different angle we are also performing the same antics though completely blind to them. If we know nothing of our own neurosis we will just project it on the neighbour and try to correct in him troubles that are really in ourselves. If it is true that when the blind lead the blind they will both fall into the ditch, this will be less true if both know how blind they are. Then their very company will keep them from falling into the ditch, for each can advance more cautiously and warn the other of dangers which he has discovered lying ahead. It is better still if the lame or halt lead the blind, if each knows his own disease, for between them they may make one whole man.

No one can really set out to help a neurotic from any superior position. If anyone can see the mote in his neighbour's eye but has not begun to detect that he has a beam in his own, then he just *cannot* help. Let him steer clear in the name of charity. A profound humility is required in this matter, and not now a theoretical,

notional humility, learned from one's spiritual reading books, but an actual experience of poverty and wretchedness. This will enable us to see that if we are not obviously, overtly, neurotic it is only by a great grace of God; and also to realize that many of the things we see and perhaps criticize in our neighbour are indeed somehow and somewhere in ourselves also.

A few final words on your letter. 'If anyone demands your coat, give him your cloak too. If he compels you to go a mile—go two'. These hyperbolic statements cannot be applied when it would cause considerable harm both to the neurotic and yourself if you acceded to his every demand for time and attention, or even if it harmed them at all. Charity demands that we should help our neighbour, a help that is often best given by keeping the proper framework of life, in the form of a fairly flexible order in such things as time of rising and sleeping, times for meals and work, grace at meals and regular times for prayer.

I think it could be maintained that in our Lord's day neurotics were probably less prevalent than now, but this is a speculation it would be outside the scope of this paper to develop.

It should not be too difficult to spot obvious neurotics who seem really to be the object of this discussion. If you have already spent a good deal of time in their company, so many projections and counter-projections will have been made that the only course seems to be to disinfect yourself as far as possible and leave outsiders to try and effect a cure. In the meantime take steps to deal with your own problems.

I find the suggestion that those who aim at Christian perfection should be willing to forego self-protection, and act supernaturally, is most distressing. How could you know you are acting supernaturally in such a case? How could you know that this idea is not a neurotic reaction to neurosis masking itself under the title of supernatural? This is indeed the blind leading the blind. A good antidote to such an outlook is to be found in Fr Goldbrunner's little book *Holiness is Wholeness* which I can strongly recommend to those faced, not only with their own personal problem of growth in holiness, but also those who have to come in contact with neurotics.