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882ND ORDINARY GENERAL MEETING

HELD AT 12, QUEEN ANNE'S GATE, WESTMINSTER, S.W.1, ON
MONDAY, 11TH APRIL, 1949.

J. ARMSTRONG HARRIS, ESQ., M.B., B.Ch., IN THE CHAIR.

The Minutes of the previous meeting were read, confirmed and signed.

The following elections were announced :—R. J. C. Harris, Esq., A.R.C.S., B.Sc., Ph.D., A.R.I.C., Fellow ; Francis D. Bacon, Esq., Fellow ; P. T. Heath, Esq., Fellow ; R. A. Beckett, Esq., M.A., Member ; Rev. K. M. Holdaway, Member ; D. A. Penny, Esq. (on Transfer from Associate), Member.

The CHAIRMAN then called upon Ernest White, Esq., M.B., B.S., to read his paper on "Spiritual Factors in Mental Disorders."

SPIRITUAL FACTORS IN MENTAL DISORDERS.

BY ERNEST WHITE, M.B., B.S.

SYNOPSIS.

Mental disorders may be divided into three main groups—the Neuroses, Psychoses of psychogenic origin, and Psychoses due to physical or toxic causes. Discussion is limited to the neuroses.

Man includes a physical body related to his material environment, a mind related to his social environment, and a spirit related to the spiritual environment, which is God. In dealing with a sick person we have to consider his whole personality.

There are many causes of nervous breakdown, and spiritual maladjustment may play a part. Guilt is an important factor. Two illustrative cases are described.

Sound Christian training is an important factor in the production of mental stability.

BEFORE entering upon a discussion of this wide subject some attempt must be made to define and limit our terms, even though definitions are often unsatisfactory because of their incompleteness.

Mental disorders, like all the phenomena of the mind, may be studied from three aspects. First of all we may try to discover and analyse the inner experiences of the individual, to investigate the various emotional and instinctive forces working within his mind. Secondly we may study his behaviour as an individual, using the word behaviour in its widest sense to include the whole of his physical reactions. Thirdly we may observe him in relation to the society in which he moves.

All these three lines of investigation are necessary for the understanding of the personality, and all are concerned in any satisfactory assessment of mental disorder, and we find in fact that mental disorder affects a person in each of these three relationships.

On looking within, we find that his emotional instinctive life is disturbed, and it is there that the earliest signs of mental disorder show themselves. Sooner or later the body is affected in some way, and various physical symptoms appear. Finally the relations of the individual with the society in which he lives undergo alterations, and his inner conflicts become reflected in his outward conduct.

Taking this last factor as our criterion, we may define neurosis as failure of the individual to adapt himself to his environment.

Adler defined the neurotic person as one who failed to achieve success in one or more of the three main tasks in life, which he defined as earning a living, success in social relationships, and marriage. The neurotic breaks down in the effort to fulfil one, two, or all three of these tasks. Neurosis is maladjustment.

Insanity, technically named psychosis, goes further than neurosis. The insane person fails to achieve the normal tasks of life. In addition he creates within himself a world of phantasy and delusion into which he retreats from the harsh facts of external reality. He loses touch with the outer world, and living in an inner world of waking dreams, he becomes incapable of reacting normally to his environment.

For purposes of description we may divide mental disorders into three great groups. Firstly the neuroses, secondly the psychoses of psychogenic origin, and thirdly mental disorders resulting from physical diseases or from poisons circulating in the blood (*e.g.*, the delirium of fevers, alcoholic insanity). I have omitted sexual perversions and crime from this classification, but there are good reasons for including them in the general category of mental disorders.

In this paper I propose to limit the discussion to the neurotic person, and to consider the part played by spiritual factors in neurosis.

In common parlance, the neurotic is the nervous person, as distinguished from the psychotic, the insane person. In the neurotic the disorder is connected chiefly with the emotions and instincts, and usually the intellectual powers are not seriously affected. The psychotic undergoes a disintegration of his whole

personality, and his judgment and reasoning powers become seriously impaired.

In dealing with a neurotic, we are dealing, not with a disease, but with a sick person. This distinction is important, because disease is an abstraction whilst a person is a concrete living reality. We have therefore to take into consideration not merely the symptoms of which the patient complains, but his whole personality. In our present state of knowledge we can perceive only dimly the immense depths of personality. Deep psychological analysis is revealing strange forces at work in the depths of the mind, forces but imperfectly understood. We stand on the threshold of a vast new world of being, the very existence of which was hardly suspected until the beginning of this century. The investigations of analytical psychologists are being supplemented by the discoveries of students engaged in psychical research. Such phenomena as telepathy, clairvoyance, and precognition can no longer be dismissed as unworthy of the attention of scientists.

Evidence is accumulating in support of the belief that man has a mysterious something in him transcending the limitations of time and space. Even the ordinary conscious mental processes seem to be outside space. We can conceive thought as occupying time, but we cannot measure it in terms of space. We can think of a dream as occupying a certain time, but we cannot measure it in inches or metres, or weigh it on any known material scale. In addition to mental processes which occupy time but not space, there are certain phenomena which appear to transcend both time and space. Certain phenomena recently studied give support to the theory that human personality is related not only to time and space, but has, in addition an eternal element, outside the space-time continuum. We must think of a man as containing body and mind related to the material world of time and space, and containing also a spirit existing in eternal relationships, not limited by time and space, or possibly existing in another dimension.

This theory of human personality was taught by Divine revelation thousands of years ago. God, the Eternal, made man in His Own Image. Such a statement implies that there is something of the eternal in man, and brings man into a peculiar relationship with God. It is this relationship which finds expression in man's moral and religious activities. The psychologist who ignores the spiritual aspect of man's nature, or who

assumes indifference or even hostility toward religion, thereby renders himself incapable of dealing with the total personality. He may be able to relieve or cure many mental symptoms, but he cannot hope to bring about a sound integration of personality. Many patients who undergo analysis find themselves at its conclusion like the man in our Lord's parable who found his house empty, swept and garnished—and we know his ultimate fate.

No one who has intimate dealings with men and women such as occur in psychological analysis can fail to discover the important part played by religious questions in the minds of those who consult him. Spiritual factors, that is, factors concerned with morals and religion, and ultimately with a man's relationship to God, must be taken into consideration if we are to deal adequately with any individual who is sick in mind.

A patient who consulted me some years ago had to undergo deep analysis with a Freudian psychoanalyst who was also an atheist, and waived aside or ignored all questions connected with religion. My patient had been relieved of many of his symptoms after treatment lasting over a period of five years, but he told me that he felt himself left high and dry, without any purpose or meaning in life. He felt the need for some religious basis for his life and was anxious to find it, but Freudian doctrine had nothing to offer him in that direction. Neurotic symptoms may be cured by analysis, but something more positive is needed to make a person whole.

How are we to distinguish spiritual from mental factors in dealing with the problem of the men or women who are mentally ill? It is by no means easy to draw the line between the mental and the spiritual realms.

As we have seen, the mind which the psychologist seeks to explore and to understand, has affinity with both worlds. It is related to the world of material things on one side, and to the deeper eternal world of spirit on the other. Man is a unity, but a unity in which are contained both material elements related to the time-space continuum, and eternal elements related to God. Our Lord clearly implied this when He quoted the words, "Man shall not live by bread alone, but by every word that proceedeth out of the mouth of God" (Matt. iv. 4). It follows from that, that when we come to deal with a neurotic, we are dealing not with some abstraction called a neurosis, but with a total human personality, and it becomes necessary to take into

consideration his bodily and spiritual symptoms if such are present, as well as to attempt to discover his mental state.

A good physician, whether he is primarily a physician of the body or of the soul, will seek to discover the seat of the disease and the causes which lie behind the manifest symptoms. It is at this point that divergences of opinion arise in estimating the emphasis to be placed on the various factors which contribute to the onset and continuance of a nervous or mental illness. At one extreme are the materialists who assert that all mental illness is due to changes in the body, occurring either in the glands of internal secretion or in the cells of the brain. If such changes are not found, they argue that with increasing knowledge of the structure and function of the nervous system and the functions of the glands, and with greater refinements of methods of examination, physical changes will be disclosed which are at present hidden from us. Mind is thereby reduced to a function or property of matter.

At the other extreme are those who hold the view that all disorders of mind, apart from those obviously caused by disease or poisoning of the body, are due to spiritual maladjustments. We are not concerned here to discuss the materialistic standpoint: much ink has flowed in the course of that controversy.

Is it true that nervous breakdown is always due to spiritual as distinguished from purely mental causes? Would it be right to claim, as some have claimed, that if a Christian man is healthy spiritually he will not suffer from any form of neurotic disorder, and that mental ill-health is the result of spiritual failure?

These are very large questions, and from the point of view of treatment, very important questions, for on the answers we give to them our judgment of causes and our method of treatment will largely depend.

Some leading psychologists have made statements which appear to support the view that neuroses result from spiritual causes. For example, Jung in his well-known book, *Modern Man in Search of a Soul* (p. 64), writes: "Among all my patients in the second half of life—that is to say over thirty-five—there has not been one whose problem in the last resort was not that of finding a religious outlook in life. It is safe to say that everyone of them fell ill because he had lost that which the living religions of every age have given to their followers, and none of them has been really healed who did not regain his religious outlook."

More recently Dr. William Brown, a leading medical psycho-

logist speaking of his own experience of deep analysis has written: "The ultimate result has been that I have become more convinced than ever that religion is the most important thing in life, and that it is essential to mental health."

These statements might be used to support the thesis that mental sicknesses are caused by spiritual or religious defects, and that all individuals who are irreligious or who have in some way departed from their faith are suffering from mental disorder. Furthermore, the treatment of mental disorders would resolve itself into an attempt to restore religious faith and psychotherapy would no longer be necessary. All treatment would have to begin and end on the spiritual level in the belief that mental health would follow automatically. Yet both Jung and Dr. Brown use prolonged deep analysis in their treatment of patients.

It seems to me that such conclusions are not justified by the facts which emerge in the course of analysis, neither are they based on sound theory.

Let us look first at the facts. A large proportion of the men who broke down under the strain of war conditions in the trenches during the 1914-18 war and suffered from acute anxiety neurosis or "shell shock" as it was wrongly called, had a bad family history of nervous or mental disease occurring in near relatives. More recent investigations made by means of the electroencephalograph which registers changes of electrical potential in the brain cells, have shown that many neurotics and psychotics exhibit characteristic variations from the normal. In a book published last year by Eysenck, *The Dimension of Personality*, the author records the results of studies made by a group of psychiatrists and psychologists working together at Maudsley hospital. It is claimed that a specific neurotic factor has been discovered in the mental make-up of a proportion of patients suffering from various forms of neurosis.

All these facts taken together suggest that heredity plays a large part in the genesis of mental disorder. Some people are born with a neurotic constitution which causes them to break down sooner or later under the strains and stresses of life.

In addition to heredity, we discover certain environmental conditions which appear to predispose to nervous breakdown. From my own observations I should place very high on the list of such conditions, lack of security in the home in early childhood due to quarrelling of the parents, separation, divorce, or the death of one or both parents. To this list may be added illegitimacy.

In the analysis of the mental life of nervous patients we find that these hereditary and environmental causes play a large part. There are cases however, where, in addition to these causes, spiritual factors are present, and if the patient is to achieve satisfactory recovery, these factors must be dealt with. Within the limitations of this paper, it is not possible to relate individual case histories in support of this. I have had patients under my care who have been cured of many of their symptoms after a deep analysis, but have found complete release only after some moral or spiritual evil has been dealt with, and there has been true repentance, and acceptance of forgiveness.

A sense of guilt plays a surprisingly large part in the mental life of many people suffering from mental ill-health. It ought to be said that a feeling of guilt has no quantitative relation to the amount or degree of wrong-doing. It depends rather on the degree of sensitiveness and development of the super-ego. It is here that the Christian message of forgiveness following on confession so often proves of great value in the completion of cure.

The problem of guilt has not been satisfactorily solved by modern psychology. Freud attributes it to the Oedipus complex and the conflicts arising therefrom, and associates its origin with the murder of the father by the sons in the primitive family communities. Even if this account of the origin of guilt were true—and it seems to be a far-fetched and improbable theory—it does not explain the intense feeling of guilt. Why should the hypothetical murderers feel guilt at all? It certainly does not explain the intense feeling of guilt so often present in both neurotic and psychotic conditions, nor does it account for the disintegrating effect of guilt on the personality.

The two following cases illustrate the importance of guilt in maintaining neurotic symptoms, and the relief and cure which followed when the cause of the emotion was faced and dealt with.

A business man came for treatment because of a number of symptoms, chiefly phobias, which led to breakdown and inability to continue in business. After some months of analysis he improved, but was not cured. He had lost most of his fears, but was still seized with panic if he travelled in a train. As his circumstances demanded train travelling each day, this phobia was a serious item in preventing his return to work. He was a man with Christian principles and high ideals, and in an earlier

interview he had referred, almost casually, to a serious moral lapse which had occurred three or four years previously. On thinking over his history, I thought it possible that there might be an unresolved conflict associated with this moral lapse. I therefore tackled him directly about the subject, and asked him to think it well over before the next interview. He took it very well, and during the next interview he fully confessed his wrong, and admitted that he had tried to forget that period of his life, and had never really repented. He repented and found the relief of the knowledge of forgiveness. Within a few weeks his symptoms completely disappeared, and he was able to make long journeys by train without discomfort. Several months later he wrote to say that he had remained well.

A professional man in the early thirties became ill with numerous fears and psycho-somatic symptoms, including abdominal pains, headaches, fear of appendicitis, and fear of becoming insane. When I first saw him he had been away from his work for three months, and was obviously very ill. After three months' treatment he was well enough to resume his occupation, but he was far from well and continued with treatment for a further six months. At the end of nine months' analysis he declared himself 75 per cent. fit. By this time we had covered a good deal of ground, and I decided to take a risk with him. At the beginning of the next interview I said to him: "You have told me that as a young man you professed to be a Christian. You were brought up in a Christian home, and took part in Christian service. For several years you have turned your back upon God and denied your earlier beliefs. Perhaps what you need to do, if you would be cured, is to repent and turn back to the God of your youth." He became very angry, and after saying that he had not come to a psychologist to be told things like that, he walked out without making any further appointment. I thought that probably I should not see him again. About a fortnight later he telephoned to me at my home address saying that he must see me at once as he was in great trouble. He came along about nine o'clock, and, with much emotional display, he told me he knew what I had said was true. He then poured out a long story which he had concealed from me during the nine months of analysis, a sad story of wrong doing and guilt. We talked on until nearly midnight, and he turned to God and found forgiveness that night. After three further interviews he declared himself completely well.

Two years later he telephoned to me to say that he was moving to another part of the country, and, before going, he wanted to tell me that the last two years of his life he had been happier and healthier than ever before. He had also been given an important promotion in his profession.

Another important way in which the Christian Gospel may prove of great assistance is that it provides a meaning and a goal to life. So many men and women feel a sense of insecurity and bewilderment because they can find no meaning or purpose in life. They drift on like ships without chart or compass. To such, the Christian message brings a new vision, a new motive, and a new hope, and in this manner it becomes a powerful aid to the re-integration of a divided personality.

On theoretical grounds it seems reasonable to believe that illness may be due to causes affecting primarily one or other of the levels of our being. It may unfold itself on the physical level, as in most of the bodily diseases with which we are familiar, *e.g.*, pneumonia and tuberculosis of the lungs. Secondly, illness may begin primarily on the mental level, as we see in many of the mental disorders included under the headings of neurosis and psychosis. Thirdly, an individual may become ill because of maladjustment taking place primarily on the spiritual level. Such maladjustment is related to the spiritual environment, which is God.

Because we are one being and not three, illness beginning primarily in one layer of our personality is likely to affect the others. For example, mental life may be seriously disorganised by such physical disease as encephalitis, which destroys many of the nerve cells in the brain.

In the reverse direction we see innumerable physical symptoms produced by the various forms of mental disease. The spiritual side of man's nature is affected often by both bodily and mental illness. It is equally true that body and mind are often affected by spiritual states. In dealing with individual men and women an attempt should be made to discover where the trouble primarily resides, so that appropriate measures of healing may be put into operation. It is necessary to bear in mind at the same time that, in every illness, we are dealing not with a disease in the abstract but with a total living personality.

It is necessary to explore every part of his being. Bodily conditions of ill-health may affect the mind and contribute to a nervous breakdown. It is wise to avoid generalisation, and to

examine the problems of each individual as they arise. Each human being is different from all his fellows, and each has problems peculiar to himself. Present knowledge of the causes lying behind mental disorders is very limited. The exploration of the mind is only just beginning. As far as we know at present, neurotic illness is primarily a disease arising on the mental plane, but both physical and spiritual states of ill-health may be contributory elements in its production.

Looked at from another angle, we may regard mental disorder as a social phenomenon. We may consider the individual from the point of view of his social environment, and enquire into social conditions which may bring about mental disorders. It is sometimes said that neurotic and psychotic diseases are increasing. It is not easy to substantiate this statement in the absence of reliable statistics, and it would be difficult to obtain satisfactory data. Some light is thrown on the subject by the number of people under treatment in mental hospitals, and by a study of the number of suicides occurring in successive years. Such investigations, however, would present a very imperfect picture for two reasons. Firstly because there are numbers of "borderline" cases which do not find their way into mental hospitals, and secondly because it would be difficult to form an accurate distinction of the percentage of the population suffering from neurosis, most of whom do not receive hospital treatment.

Another line of research having a direct bearing on the subject of this paper would be an enquiry directed toward discovering whether the proportion of neurotic breakdowns occurring among professing Christians is higher or lower than the proportion of such breakdowns in the general population. Here again there is room for investigation.

In the absence of such definite investigations there are certain general considerations worth noting.

There can be little doubt that a well-established Christian faith is a stabilising influence in mental life. Such faith brings a sense of security, and forms a basis upon which personality may be integrated. Even in the presence of adverse hereditary factors and difficult environment, Christian faith with its reliance upon God, and its belief in the overruling providence of God in the life of the individual believer, is a great aid towards enabling the individual to cope with the difficulties of life. The man of strong faith is better armed to meet with adversity and with the strains and stresses of life than the man who has no such faith.

In these days when industrial and economic conditions impose a continual strain upon the inhabitants of our great towns, and when the political uncertainty and the fear of war continually oppress the minds of us all, we are exposed to mental strain unknown to earlier generations. With all this there is, in addition, departure from the faith, and a state of uncertainty and bewilderment militating against mental health and preparing the way for mental breakdown. Beside the sense of insecurity in which the present generation is passing its days, there is the additional insecurity due to the lack of religious faith. The road which leads back to God is the road which makes for sanity in the fullest meaning of the term. The love and peace and confidence to be found in a truly Christian home play a large part in the development of a stable personality. The child brought up in such a home has the advantage of experiencing security in a loving atmosphere and reaps the further advantage of the security which comes from faith in God.

I believe that herein lies the prevention of much mental and emotional disorder in later life. The child brought up in a Godless home is deprived of one of the most potent influences making for integration of personality. I should place a sound Christian upbringing very high on the list of means of prevention of mental disorder.

To sum up my conclusions. There are various causes leading to neurosis, some hereditary, and some due to the stress of the environment. In many cases these causes are sufficient to explain the onset of nervous breakdown, and such ill-health is due rather to mental than to spiritual factors. In other cases, spiritual factors play a part in the causation and continuance of mental disorder. It is not right to generalise, but to consider carefully the problems of each individual, and to seek to estimate the part played by various factors in each case. When we go on to consider the prevention of mental disorders, it is highly probable that Christian faith is a powerful stabilising influence in mental life, and that a child brought up in a Christian home is better equipped than others not so trained, to hold his own against the strain of modern conditions of life.

DISCUSSION.

The CHAIRMAN (Dr. J. ARMSTRONG HARRIS) said: I agree with Dr. White's paper, and compliment him most heartily on its completeness and thought-provoking qualities.

The recent researches in Analytical Psychology tend to stress the importance of identification, introjection and incorporation of the parents as good internal objects. As physically the child takes its milk from the mother, so it takes in the parents mentally and makes them part of himself.

These mechanisms could be readily understood by those familiar with the Christian faith, where the indwelling of the Holy Spirit and the inner consciousness of God are felt and accepted as psychic realities.

The responsible, self-criticising, idealised part of the mind (super-ego), built up chiefly on the inner paternal image in the child's developing mind, appears, in the modern view, to develop at a much earlier age than was at one time thought possible. Five years was regarded as the usual age, but now it has been advanced to the first year of life when evidence of the developing super-ego is found. As this is the part of the mind which contains what we call the "conscience," the importance of early parental influences, of loving care, security and a good Christian home cannot be exaggerated.

I agree with Dr. White that the seeds of mental and spiritual disorder are frequently sown in early environment, and more care and attention must be directed than ever before to the formative years.

Dr. WAGLAND said: I have been very interested in Dr. White's paper. Would he kindly inform us whether some cases of neurosis are due to a faulty presentation of the Christian Gospel? Some presentations are often negative which, far from making life "more abundant," tend to dwarf and suppress individual development. Other presentations are incomplete, in that they tend to ignore the sex factor; much trouble and tragedy is caused in the lives of many Christians through ignorance and fear of or an unfortunate attitude towards the God-given function of sex. Is there not a need for the Christian message to be presented more positively? Do we not tend to occlude the underlying principles by over-emphasis of doctrinal and/or theological correctness? Should there not be more emphasis on bringing people into personal contact with our Lord? And are not many perversions, fears, complexes and homosexual tendencies due to past failure to present a complete Christian

Gospel and Message which **MUST** be linked with the Christian attitude towards sex, marriage, the family and home ?

Mr. C. E. A. TURNER said : As an educator I notice with appreciation Dr. White's emphasis on the importance of the spiritual factor in man. Without proper provision for this the child cannot but develop mentally and morally warped and twisted, becoming consequently dissatisfied, unhappy and even delinquent to an extent which perturbs responsible people to-day.

The setting aside of God's authority in the arrangements of the modern state, or home or individual life through the neglect of the Bible might well be the omission of the chief stabilising factor in the mental as well as in other spheres. As J. H. Newman said of the exclusion of theology from a university course, it is to take the spring from the year and unravel the thread. . . .

W. J. Thomas, in *The Unadjusted Girl*, suggests that the adolescent needs recognition, response and affection, security, new experience and adventure. We believe these can be found in the application of Christian truth.

The Christian knows that the fear of the Lord (the all wise) is the beginning of wisdom (Prov. ix, 10)—for mental health ; that there is forgiveness with Him that He may be feared or revered. God's love has in its perfection cast out fear or terror (1 John iv, 18). He has not given us the spirit of fear, but of power and of love and of a sound mind (2 Tim. i, 7). Paul's prayer states the Christian ideal : that spirit, soul and body—the whole organism and personality of which Dr. White has spoken—be preserved blameless unto the coming of our Lord Jesus Christ (1 Thes. v, 23). For this a God-conscious, a God-centred life, with God as life's end and good are needed.

Mr. T. K. SIMONS asked if there was any psychological explanation for the so-called "black sheep of the family." After instancing a case of which he had had personal knowledge, he wondered whether in addition to prayer, psychology could suggest a means of approach.

Mr. HUTCHINGS asked whether there were any figures showing the approximate percentage of mental disorders that were beyond all doubt brought about by spiritual factors.

Mr. TUCKER asked whether the author felt that there were cases where the human mind was invaded by external spiritual forces.

Dr. PHILP said: I possess medical qualifications, and during twenty years' work in Kenya I have seen a great deal of psychosis and neurosis. I am now working as a minister, with some medical work, in an industrial area on Tyneside.

The Old Testament teaching on sex is not given the place it should have. There is a tendency to ignore the dreadful passages dealing with sexual matters. If we teach the Bible, and not bits of it, we shall have a saner outlook.

Environment does play a part; especially can this be seen with people brought up in cities. I was delighted when in Kenya if a new member of my staff came from the country. Country born people find adjustment easier than those from a city environment.

There is also such a thing as atmosphere. There is an atmosphere which is an invasion from outside, if not from beneath. It can even be seen reflected on the countenances of those present.

With regard to psychical research and spiritism, I would plead for caution on these lines. I have seen breakdowns through spiritism. Character can be changed through spiritism, and there can be a breakdown in health. I have seen such a case which eventually recovered by the grace of God, though physically the person suffered very much.

With regard to denominations, and certain Christian teaching, we must be careful of too much introspection. This can lead to extreme cases of neurosis—almost psycho-neurosis.

Dr. OAKLEY JOHN said: Whilst very much appreciating Dr. White's analysis of the spiritual factor in mental disorders, it would appear to me that in this paper (and in papers on allied subjects) there must needs be an anthropocentric tendency which undervalues the position of God in His Universe. It would seem that parallel with eliminating (or pasteurising) infected milk in order to reduce the incidence of tuberculosis, it is now being suggested that in order to reduce the incidence of mental disorder due to the effects of the Godless home (where the child "is deprived of one of the most potent influences making for the integration of the personality"), we should introduce the Christian faith so that the child may

“hold his own against the strain of modern conditions of life.” That these facts are true I agree, but surely the emphasis is wrong. The spiritual factor is important in man because he is a trinity (body, mind and spirit), not merely body and mind. If we accept the fact of God and His desire to hold communion with us, then we are bound to be deformed (to a greater or lesser degree) if we ignore this part of our nature.

For medical men the problem arises acutely, both to those who hold the Christian faith and to those who do not. Lord Horder, during a teaching round at St. Bartholomew’s Hospital, is reputed to have put on the prescription sheet of a Jewish patient for whose ills no physical causes could be discovered :

R. Rabbi, one.

We need to emphasise that Christianity is not an additional means of therapy (which may be tried if radiant heat and massage fail), but the workings out of the obligations laid on us by Almighty God.

AUTHOR’S REPLY.

I agree with Mr. Turner in his emphasis upon the importance of moral and spiritual training in childhood and adolescence.

There can be little doubt that one of the causes of delinquency in early years is a lack of moral discipline and religious instruction in the home, and that a wise religious upbringing makes for mental stability in later years.

In reply to Mr. Hutchings’ question, I do not know of any figures showing the percentage of mental disorders brought about by spiritual factors. There is room for investigation along these lines.

Mr. Tucker has raised a very difficult question. I do not doubt that when he speaks of the human mind being invaded by external spiritual forces, he refers to demon possession. Some missionaries who have laboured in the Far East—in China and India—have reported cases of demon possession, but it is difficult to obtain reliable evidence. Some years ago Dr. Lomax wrote a book about conditions in mental hospitals in England, in which he states that some insane people appear to be devil possessed. This is a theory difficult either to prove or refute, and I am not in a position to give a positive opinion.

Dr. Wagland has raised two very important questions, the

presentation of the Christian Gospel, and the teaching of the facts of sex life. I agree with him that false ideas about God, and ignorance about sex matters often contribute to neurosis, especially to emotional disorders of the Anxiety type. A great amount of fear and guilt arises because of misunderstanding and ignorance, and it should be brought home to parents and to ministers of religion that it is their duty to instruct boys and girls in these important subjects. The Christian Gospel should be applied to every relationship in life, and its function is to set men free, not to bring them into bondage of fear and guilt.

What I have said partly answers Dr. Philp's questions. I agree entirely with Dr. Philp in what he says about Spiritism. I consider Spiritism a most dangerous practice, fraught with emotional strain, and often leading to evil consequences in the minds of its adherents. I agree also with the danger of too much introspection. Introspection may be healthy if it leads to further knowledge of self and the correction of wrong tendencies, but it may become morbid if it takes the form of wallowing in one's own emotions.

In reply to Dr. John's contribution, he misunderstands me if he thinks that I regard Christianity merely as an additional means of therapy, or as a means of enabling the child to hold his own against the strain of modern conditions of life. I assure him that I have no such narrow and negative conception of Christianity. In my paper I have dealt with only one aspect of Christianity, namely, that which impinged on my subject, spiritual factors in mental disorders. Christ healed men and women suffering from mental and physical disorders, but we agree that He did very much more than that, His healing was incidental to His main purpose of redemption, a means towards a great end.

Mr. Simons raises the problem of the black sheep of the family. Without further knowledge of the details of such a case, I am not in a position to answer his question whether psychology would help.