
Catharsis in human development

John Heron

1977, revised edition 1998

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Foreword

In the 1977 Foreword I wrote:

"This handbook offers a comprehensive theory of human catharsis. Its general purpose is to provide a rationale for the aware use of cathartic interventions in education for personal development in interpersonal skills training. Its more specific purpose is to provide a theoretical complement to my practical manual on co-counselling techniques. The ideas presented here do not, of course, constitute *the* theory of the human condition that underlies co-counselling, but simply *a* theory. In principle it is open to revision as a function of applying it in co-counselling experience and practice, or in any comparable situation that allows an experiential research paradigm to be applied. The Contents provide a convenient conceptual map for getting an overview of the theoretical structure and for picking out items for ready reference."

The manual referred to here is *Co-Counselling Manual*. John Heron, 3rd revised edition 1998

In this 1998 revision, I have made some textual changes, and I have rearranged the sequence of chapters, putting the first four chapters of the first edition at the end of this second edition, in order to make the whole thing more immediately accessible. These four chapters, Chapters 4 to 7 below, present a theory of human nature and the human condition which underpins the discussion of issues in the first three chapters.

The 1977 first edition already pointed beyond itself in the following brief statement: "The fact that the intrinsic stresses of the human condition are such that human behaviour can break down into distorted and perverted forms is itself a kind of meta-challenge - to transpersonal development, in my view. The first order challenge of the stresses is to personal and interpersonal development, but the continued vulnerability of **this** achievement is a second order challenge to cultivate the wider reaches of human awareness." The transpersonal, or spiritual, dimension of human experience is included in a variety of developmental settings in the following seven publications. The chapter on co-creating, in the sixth of these, most precisely articulates a theory of the transpersonal context of the human condition, to which *Catharsis in Human Development* points, and by which it is expanded.

1. Heron, J. and Reason, P. (1981) *Co-Counselling: An Experiential Inquiry 1*, Guildford, University of Surrey. A co-operative inquiry on client states and processes in co-counselling.
2. Heron, J. and Reason, P. (1982) *Co-Counselling: An Experiential Inquiry 2*, Guildford, University of Surrey. A co-operative inquiry on ways in which co-counsellors can handle restimulation in everyday life.
3. Heron, J. (1990) *Helping the Client: A Creative, Practical Guide*, London, Sage. Interpersonal skills training.

4. Heron, J. (1992) *Feeling and Personhood: Psychology in Another Key*, London, Sage. See Chapter 6: The affective mode: emotion. This chapter develops further the account of personal needs and distress emotions given below, and outlines criteria of emotional competence.
5. Heron, J. (1996) *Co-operative Inquiry: Research into the Human Condition*, London, Sage. Participative research.
6. Heron, J. (1998) *Sacred Science: Person-centred Inquiry into the Spiritual and the Subtle*, Ross-on-Wye, PCCS Books. See Chapter 19: Co-creating. This presents a theory of the transpersonal context of the human condition.
7. Heron, J. (1999) *The Complete Facilitator's Handbook*, London, Kogan Page. Facilitating human development in groups.

I am grateful to those with whom I have worked in basic co-counselling training workshops, advanced co-counselling workshops, co-counselling teacher training workshops, in co-counselling co-operative inquiries and in international workshops - in Belgium, England, France, Germany, Holland, Hungary, Ireland, Italy, New Zealand, Spain, and the USA - for providing the crucible of systematically shared experience within which the ideas presented in this paper - and their expansion in subsequent publications - have been developed.

See also my:

- Co-Counselling Manual
- Co-Counselling Teachers' Manual
- Co-Counselling Teacher Trainers' Manual
- Intensive Counselling
- Suggestions for Exercises

Chapter 1: The non-cathartic society

A. Human catharsis

By catharsis here is meant a complex set of psychosomatic processes by means of which the human being becomes purged of an overload of distress due to the cumulative frustration of basic human needs (Chapter 4: *Human needs and behaviour*). As defined it is thus a peculiarly human phenomenon, attributable to a somatic being with capacities for love, understanding and self-direction. The assumption is that the high vulnerability of such capacities active in a physical body and world, is compensated for by a restorative process which relieves the person of disabling tension. I shall use the terms "catharsis", "abreaction", and "emotional discharge" or simply "discharge" as cognitively synonymous.

That human beings are physiologically convulsive is obvious enough. Orgasm, childbirth, defecation, vomiting, digestion are but some of the milder or stronger periodic convulsions that bear witness to living process in the body. That the person, *qua* person, that is, *qua* total psychosomatic being, is also convulsive is a notion little understood in contemporary society. We extol the virtues of control of emotion, are embarrassed by much overt expression of positive emotion, and are grossly under-skilled in handling the convulsive release of distress emotions. But the educated person is surely one who can balance all three and be competent in control, in expression and in catharsis.

According to the theory advanced in Chapters 4 to 7, when human capacities are frustrated to a disabling degree, the result is acute psychosomatic tension, the mental component of which is grief, fear or anger corresponding, respectively, to the frustrated capacities for love, understanding and self-direction. The cathartic part of the theory holds that grief is purged from the system by tears and convulsive sobbing, fear by trembling and cold perspiration, anger by shouting and high frequency storming movements. These processes are **not** regarded as self-indulgence, as getting worse, as getting hysterical. They **are** regarded as processes that get rid of distress, that restore the person to non-distressed, flexible functioning again. They are processes whereby persons purge themselves of personal frustrations. They are not to be confused with animal processes: they only have a dramatic physical component because persons are deeply involved with bodies, and a stress to the person is also a stress to the body. And just as persons need educating to exercise skilfully their intellectual potential, so too they need educating to exercise skilfully the particular kind of emotional competence I call catharsis. Some catharsis will happen anyway in most people at some time. But as in all other human capacities, full and effective use requires training. This is where there is a vast gap in current educational practice.

It is not possible, therefore, to estimate its effectiveness in a culture where it is denigrated, mishandled and given very incomplete outlet. Hence the need for systematic personal and interpersonal experiential research in this area, a thorough personal schooling in the effects of catharsis on personal behaviour. But the experience is difficult to obtain: the culture hides catharsis (and very incomplete

catharsis at that) away in a small corner of the domain we call therapy, and the educational system is devoid at all levels of any training in how to handle effectively human distress emotions. One result is that all kinds of helping professionals (psychiatrists, GPs, clinical psychologists, social workers, probation officers, nurses, clergymen, etc., etc.) have a very imperfect idea of what to do about their often very pronounced psychological tensions.

Hence this chapter is a central one. It addresses itself to an issue of very great practical and **educational** moment in our culture. And it makes distinctions that are crucial for the effective introduction of cathartic competence into educational practice. The notion of an educated person as one who, *inter alia*, is skilled in controlling all kinds of emotions, when appropriate, is skilled in releasing distress emotion in an appropriate manner, time and place - this is a sophisticated notion that is far beyond our current educational ideologies.

B. The non-cathartic society

It is not too extreme to characterise our society as non-cathartic. Child-raising practices are largely anti-cathartic: from the earliest years children are conditioned to deal with their distress emotions of grief, fear and anger, by controlling and containing them, by holding them in. Little boys don't cry, little girls don't get angry; little boys and girls soon learn that social acceptance is only won by the complete hiding away and burying of their personal hurts.

The reason for this is not far to seek: a profound parental compulsion. The parent cannot tolerate in her child a release which she cannot tolerate in herself. Hence the vicious circle of repression rolls through the generations. The father who has spent 20 or 30 years maintaining defences against his distress, and who is very closely identified with his own child, cannot bear the outpouring of similar distress in that child: he is compelled to suppress the child's catharsis by persuasive "sympathy", by cajolery or by threat.

The younger the child the greater the tolerance of catharsis. But roughly speaking, any child of 8 years old is expected to know how to hold it all in. Girls are given rather more permission to cry than boys, boys a little more permission to be angry than girls, but the common repressions are much more weighty than the minor differential permissions. The cathartic release of fear is totally taboo at all times and for almost all ages. Laughter is the only form of culturally acceptable release of tension. And although tears among adults are accepted as an inevitable response to great traumas such as death and disaster of all kinds, the tearful one will often be seen trying hard to contain the tears that will insist on pouring out, while the sympathetic bystanders however supportive they are nevertheless expect that sooner or later these efforts at control should become soberly successful. Some people of both sexes have entirely lost the ability to discharge grief, even when the great traumas strike, and can be seen immobile, totally alienated from the depths of their own emotions. In the non-cathartic society, the hallmark of adulthood and "maturity" is the ability to repress distress emotions; and when such emotions do succeed in bursting out from behind the dam, social embarrassment, shame and guilt rapidly try to make good the breakage in the wall.

What the parents begin, the schools and colleges complete and hospitals cement. While all the great organisations and institutions of our society run on widely accepted tacit norms of emotional repression. The positive side of all this Apollonian control is that control of emotion is a necessary condition of effective fulfilment of the task, whatever the task may be: discipline of emotion is one of the great human skills that make great social, intellectual, technical and cultural achievement possible. The negative side is redundant control, repressive control, the inability to balance the claims of discipline and control at one time and place with systematic release of distress and tension at other appropriate times and places. Hence the repressive, alienated air of schoolroom, office, hospital ward: no provision is made for, no acceptance is given to, the very human need of human beings to restore themselves to the full vigour of their humanity by the complete discharge of the stressful consequences of their vulnerability. In the non-cathartic society, alienated humans repressively seek to hide their vulnerability under the appearance of strength, rather than find their true strength through the cathartic acceptance of their vulnerability.

The consequences of all this are that distorted behaviour in all forms is rampant. Violence, eruptive and overt, or institutional, abounds. Anomie, listlessness and ataraxia are the order of the psyche. Intimate relationships are smouldering or flaming realms of Lucifer. Psychogenic aetiology sweeps like a tide through the GPs' consulting rooms. Sensational distractions from the ache of buried distress mint fortunes for their practitioners. Technology and centralised bureaucracy combine to maintain the passive alienation of person from person in every neighbourhood. The nuclear family is a lethal breeding ground of distorted social practices especially repressive child-raising practices. Education alienates intellect from emotion. And so on and so on.

Meanwhile the number of professional helpers increases. The non-cathartic society abounds in helpers and helping agencies of every conceivable kind proliferating, throughout the medical services, the social services, the educational services, industry, commerce and government. This is the great helping distortion, by now very widely institutionalised throughout our society. I call it a helping distortion because its practitioners daily meet humans locked into distorted behaviour by repressed distress, yet do everything for those humans **except** train them to find ways of releasing the distorting distress. The result is, of course, that the practitioners themselves experience a subtle but profound sense of human impotence and frustration in their work, and their own level of distress rises accordingly. Yet their very adoption of the "expert" helping role maintains a defensive repression on this professionally induced distress. The result is a scandal of unacknowledged intrapsychic tension among the helping professionals of all kinds, about which a collusive silence is maintained, but to which the suicide figures bear eloquent testimony.

Diagnosis, labelling, interpretation, analysis, assessment - a kind of endless intellectual prodding and poking of the client - is the favoured device of the helper to keep both the client's distresses conveniently at bay and repressed, and above all to keep the helper's own distresses firmly battened down, so that at no time will the issue of the helper's cathartic competence be allowed to come to the fore. A diagnosis a day keeps distress at bay. Helper and client are locked into complementary distortions, and so sustain from without what was originally set up from within.

Of course, this account of our type of society is a caricature. It overlooks the abundance of intellectual skills, of technical and vocational skills, of political and organisational skills, of aesthetic and cultural skills. Yet if we just let our vision operate on the planes of emotional and interpersonal competence, then it becomes evident, I suggest, how universal "ill-affectiveness" (as the correlate of illiteracy) is, and probably more so among the highly literate.

C. Dogmas of the non-cathartic society

I suggest in Chapter 4 that the rigid society is the institutionalisation of distorted and perverted behaviour rooted in unresolved distress. I here look at this process rather in relation to our own society. The culture has a legacy from the past of tacitly accepted dogmas that are still very pervasive in our social and educational practices. These dogmas I see as the distorted ideology that is a function of occluded and unidentified distress, both primary and secondary.

1. **The dogma that intellect is the prime differentium of the human being**
This Aristotelian dogma holds that intellect is that capacity which above all, in its developed phases, distinguishes humans from animals. It is the assumption of our whole secondary and tertiary educational system. We have no concept of an educational system that would give equal significance to human capacities for love, understanding and free choice. The associated dogma is that intellect is to be used not only to control and regulate emotions, but also to repress and contain distress emotions. One result is that we have an educational **process** in which the exercise of intellect is alienated from human emotion and intelligent self-direction.
2. **The dogma that human nature is inherently bad.** Christianity developed the contradictory notion that the human will is free but at the same time has an innate internal tendency to go bad, to make nasty choices. The doctrine of innate nastiness survives in the Calvinistic rigours of psychoanalytic theory, in theories of innate aggression in humans, which unmasked are simply theories that people are inherently malicious. Anyone who works in any depth with human beings in our society will over and over again come across this deeply ingrained and compulsive recording, playing at almost unconscious levels of the system, which asserts in a hundred ways "I'm no good". Basically it acts as a control pattern that holds in a great deal of distress. The educational (and the therapeutic) process lacks any notion of the celebration of personal being, the conscious affirmation of authentic humanness. Adults are deeply embarrassed by the process of openly declaring their own worth.
3. **The dogma that virtue is self-punitive.** That what we ought to do necessarily involves a negation of what we want to do; that what is good for us, like education and training, is necessarily also rather painful, frustrating and unpleasant; that the aroma of deliciousness that surrounds "secret vices" can never have its equivalent in the probity of the good life. This is the dogma of moralistic oppression, so widely prevalent in child-raising and education, in which punitive "shoulds" and "oughts" and "musts" are set over against, and indeed used to frustrate, the fulfilment of basic human capacities. The educational process in home and school and college has not yet **in practice**

transvalued the concept of what I ought to do into the concept of what all relevant things rationally considered I deeply want to do. The oppressive quality of old-style moral acts needs to be replaced with the exhilarative quality of acts that celebrate the flourishing of human capacities in all concerned.

These three dogmas are all mutually interlocking and help to maintain each other. In my experience of working with people on their own growth and development, they are still very pervasive in our culture and echo in a multitude of ways throughout our child-raising and educational practices. When through cathartic and other processes, human beings climb out from underneath them, the dogmas are revealed for what they are: the ideological deposit of many centuries of unidentified and unresolved distress in humans.

Nor is the mechanism of this deposit difficult to understand. Once a human being gets caught in the trap of compulsively trying to occlude the dull ache of buried pain and distress, then the intellect will rapidly be harnessed to the task. To the unaware distressed human, the realm of human emotion presents itself as one of pain and distortion, resulting in behaviour that can be a grotesque caricature of animal life. The pure intellect, however, can become functionally autonomous for brief periods, giving temporary relief from the obscure ache of distress, entering a world of generality, clarity and logical connection - as distinct from the everyday existential world of particularity, obscurity and human connection. Logic, mathematics, scientific inference, conceptual analysis and synthesis, are on one rather partial interpretation, some of the most potent and refined anodynes for hurting psyches. Small wonder, then, that the intellect came to be regarded as the supreme distinguishing principle of human beings, and that for a certain type of human being intellectual activity has a curiously compelling, and frequently an entirely compulsive, appeal.

The compulsive intellect, keeping pain buried, will necessarily be unable to grasp the connection between human vulnerability and an overload of distress on the one hand, and distorted and perverted human behaviour on the other. Caught up in the mechanism of repression the intellect will acknowledge only the distorted behaviour and devise a repressive theory - that people are inherently nasty - a theory whose sole function is to keep out of consciousness the buried pain and thereby the positive potential that it occludes. If you insist that people identify their very selves, their given natures, with what is in fact an overload of distress distorting behaviour, then you guarantee by your theoretical prison that the underlying distress will never be released. The psychodynamics of certain parts of Christian theology will repay careful analysis.

Finally, the repressive intellect, identifying distorted behaviour with the intrinsic nastiness of people will produce repressive morality as a corollary. The expression of each inherent nastiness in people is to be controlled by the exercise of intellect and will: duty is a demand of reason or of God or of both set over against the domain of human inclination. Blind to and repressive of deep personal distress, each moral theory demands that people control distorted behaviour while occluding the only effective means of so doing - the release of hidden pain. Hence oppressive morality tends to be compulsively hypocritical, its protagonists lapsing in private into an array of secret distortions or "vices" that symbolically, act out their denied distress and frozen human needs.

There are, of course, extensive practical corollaries of these three pervasive and interrelated dogmas, and I will only enumerate a few of them here. In general, the culture maintains a sharp focus on verbal interaction and is stereotypic in and blind to non-verbal interaction. People tend to work compulsively at their set task, while remaining remarkably unaware of the complex array of interpersonal processes that accompany it and interact profoundly with it. Anxiety and insecurity are fended off by doing, but arise paroxysmally when it is just a matter of being and becoming. It is easier to analyse, generalise and intellectualise than relate in an aware, authentic, open, warm human way. Supportive confrontation is an unknown art, since buried anger distorts every attempt at it into anxious and non-supportive attack. So the constructive working through of interpersonal tension and conflict will tend to be avoided in favour of evasion, manipulation, wheeling and dealing, backstairs politics. Authoritative modes of intervention are compulsively used where facilitative ones would be more appropriate and life-enhancing. Nurturance needs are confused and conflated with sexual needs, physical contact and human warmth is confused with erotic contact and sexual desire, so the whole culture cheats itself of warm supportive human physical interaction. The culture is generally sex-negative, since there is no tradition of sex-positive theory and practice. Compulsive sexuality abounds: the pursuit of orgasm in a maladaptive attempt to alleviate the ache of buried distress, which can only adequately be released in other ways. People tend to have negative body images, and the celebration of the body, of movement, of sensory awareness is not part of general education and culture. And so on.

D. Catharsis in the non-cathartic society

However, no society can be totally devoid of cathartic outlets, for the result, on this theory, would be such an intolerable overload of tension that social behaviour would break down completely. Hence it is instructive to consider how tension is maintained below the threshold of total breakdown. Here are some possible outlets or partial outlets.

1. **Dreaming.** The kind of dreaming in sleep associated with rapid eye movements may well have a cathartic effect. Such dreaming involves a minor physiological storm or convulsion. When human subjects have enough sleep in terms of number of hours but are also deprived of such dreaming, their incidence of distorted and distressed behaviour increases. People may wake from nightmares sweating, trembling, crying out or sobbing. Small children appear to undergo some profound cathartic process in night terrors, when, wide eyed, they tremble and scream and sob. Alarming to the parent, this is probably a blessed safety valve to the child. Unresolved distress, one may hypothesise, can loom up in the form of disturbing dream imagery that can blow the closed circuits of repression and precipitate a general catharsis.
2. **Drama.** That drama has a cathartic and purging effect is an ancient doctrine. Before the advent of TV, large numbers of people went regularly to the movies, now an even larger number spend much more time in front of the TV set. On the big and on the little screen dramas proliferate: the viewer's own fear, anger and grief rise above the threshold into consciousness, safely projected onto the characters in the unfolding plot. Presumably there is some dawn of catharsis

here, which may be given freer reign as tears roll discreetly down the cheek. But usually what the drama fruitfully starts off in the psyche of the viewer, her repressive mechanism quickly shuts off, as the credits roll or the lights go up. Hence the viewer is in a repetitive double-bind: the drama pulls toward personal catharsis, but the conditioning says it is only a story and cuts the personal release off. Hence the viewing of screen dramas can itself become a kind of compulsive pseudo-release. If you are moved by a drama, try following up the associations to your own life, after it is over, and let the purging go on freely. The novel, the short story, the play read rather than viewed, may have a similar effect.

3. **Music and poetry.** For many people the aesthetic emotions aroused by music and song may have an intermittent, incidental, cathartic effect in an overflow of tears. The same applies to poetry. Conversely some music may be used as a decibel laden anodyne temporarily to blot out the obscure ache in the gut.
4. **Competitive sport, vigorous bodily activity, dancing.** Some top layers of fear and of anger may be superficially eased by these activities, and by vociferous spectators of them too.
5. **Response to nature.** I know people who are moved to tears by trees and flowers, by sudden vistas of mountain and valley, by oceans, seas and rivers, by dawns and sunsets, stars and moon.
6. **Post-orgiastic catharsis.** In my informal surveys some people report that, on a relatively small number of occasions, orgasm will be unaccountably followed by trembling, sobbing, laughing. This is usually in the context of a deeply intimate and loving relationship.
7. **Permissive intimacy** in the family, between friends and lovers. In such intimate settings, a greater or lesser degree of catharsis will be tolerated, accepted, or even actively supported and encouraged.
8. **Transpersonal activities.** For some people, prayer, worship, praise, meditation may have incidental cathartic effects.
9. **Laughter.** This is probably the primary source of cathartic relief in our society, discharging the light fears and angers of social embarrassment. But notice the significant pall when the laughter dies, the comedy ends: as though there is a brief glimpse of the deeper layers of distress temporarily uncovered by the release of laughter - but there is no facility to deal with them, so on with the show, on with life.

Chapter 2: Human catharsis

A. Catharsis as such

The following account is based on intensive work done in co-counselling over many years. The focus throughout is on the discharge of what I have called personal as distinct from physical distress.

4. **The discharge of grief** occurs through crying and sobbing. The repressed client will permit the tears but restrain the sobbing, yet the deeper layers of pain are released in uninhibited convulsive sobbing. Aware physical support, holding, embracing may be needed by the client for her to feel secure enough to allow this convulsion to occur. As the physiological process occurs, the pain of separation, of love frustrated pours into consciousness and is fully experienced.
5. **The discharge of fear** occurs through trembling and cold perspiration. The limbs, hands, head and neck and trunk, jaw are caught up in a high frequency trembling, while the person experiences the fear of the unknown, the unfamiliar, the psychological invasion or threat, of lack of comprehension. The fear discharged may be a fear of unfamiliar positives such as love, ecstasy, orgasm, pleasure, as well as unfamiliar negatives. Fear especially seems to lock and block automatically in the system, and it can be a revelation to the withdrawn, dogmatic, isolated person to experience the dissolution of that rigidity in the release of fear.
6. **The discharge of anger** occurs through an uninhibited high-frequency burst of sound and storming movements. It is righteous indignation mobilising the breath, the voice and the whole musculature, arms, legs and pelvis: the protest "How dare you!" released somatically. Repressive controls inhibit sound and movement through muscular contraction: and the client will often need training and encouragement to remove these blocks. The associated experience is that of extreme, fiery indignation and protest.
 - Anger at the level of personal frustration, when human autonomy is interrupted and interfered with, is a kind of spiritual anger. In my view its discharge is only effective when it is entirely harmless, that is, when it is released onto old cushions, mattresses or into the air. The discharge of anger needs to be carefully distinguished from aggressive attack, which I see as a distortion resulting from undischarged fear and anger. There is all the difference in the world between the tone of "How dare you!" and the tone of "Take that! And that!" The theory holds that destructive, aggressive behaviour in humans will decrease as a function of its underlying repressed fear and anger being harmlessly discharged. This distinction is quite crucial when it comes to the effective education of those who are acting out in very destructive ways. When a person is breaking up property, other people or herself, her attention is displaced away from and is avoiding experience of the full force of deep inward fiery

outrage and protest: it is a maladaptive attempt to deal with the buried anger. Aggression grapples with the opponent to avoid experiencing the pain of outrage. This notion of a spiritual, human anger and its need for a consuming, intensive but harmless release is very little understood in the culture. But the need for education here is enormous, for repressed anger is acted out in a great deal of physical and verbal battering

- **The discharge of embarrassment** occurs through full, uninhibited laughter. The top layer of embarrassment appears to be a light social fear of what other people will think, say or do about one's appearance or behaviour. A slightly deeper layer is that of light indignation at such intimidation. The combination releases as laughter. A person who is open to the release of distress will find that laughter may pass over suddenly into the trembling release of fear or the storming release of anger, deeper tensions which the release of surface embarrassment uncovers. As the laughter of embarrassment rolls off, the experience is that of the break up of the previously unidentified rigid fear of the opinion of others.
 - Embarrassment presents itself congealed in repressive solemnity, sobriety, seriousness, which has a rigid, inflexible quality, trapping the lightness, the brightness, the flexible awareness of the true human beneath it. As the laughter rolls, the flexible human beams out, and the solemn mask falls temporarily away. There is no more delightful sight than seeing a person beaming with laughter, a full release of embarrassment for the first time, the old controls trying to slip the mask on again but failing since a fresh burst of laughter sends the mask once more clattering to the floor. Embarrassment is clearly a very substantial part of human distress at the personal level.
 - The human spirit or person, I believe, is innately and spontaneously light and joyful. The roots of embarrassment lie in the social intimidation or repression of this innate spontaneity. The growing child quickly gets the message that the abundance of her spontaneous joy is not socially acceptable, indeed is intolerable to the distressed adults around. Fundamentally, what embarrassment represses is the easy, elegant joy of the child - but not simply of the child but of the authentic adult too - hence the laughter that discharges embarrassment is very close to and often continuous with the laughter that expresses delight and joy in being human. Human development groups that never sparkle with richly human laughter still labour under a weight of unidentified and unresolved embarrassment.
7. **The discharge of guilt and shame.** Guilt or remorse is to be distinguished from shame. Guilt is the distress emotion that can arise with the realisation that one has hurt another person, whereas shame is the distress emotion associated with the realisation that one's behaviour has been inadequate, has let the side down, has fallen short of expected standards, even though nothing hurtful has been done.

- Furthermore there is a crucial distinction between redundant guilt and shame, and genuine guilt and shame. The former arise in a person indoctrinated with false and inauthentic values: a person feeling both guilt and shame about sex within a loving marriage; a man feeling shame at sobbing when someone he loves dies; a person still feeling guilty about wanting to reject what she can clearly see to be false and unjust authority, whether religious, political or domestic; and so on. Genuine guilt arises when a person has insight into the hurtful effects on another caused by her behaviour, where such effects were avoidable and served no wider constructive purpose. Genuine shame can arise when a person through some lapse or oversight or compulsive irresponsibility falls short of a valid social standard: defaulting on an important appointment, producing sub-standard work.
- Redundant or false guilt and shame are really chronic forms of embarrassment and will usually discharge off as laughter together with some release of fear and anger through trembling and storming. Genuine guilt is like self-generated grief: the special kind of grief that follows from knowing that I have rejected the need of the one I have hurt to be loved, and that I have frustrated my own need to love that person. The primary discharge of such guilt is through tears and sobbing where the pain of guilt is intense. There may well be some associated anger too - frustration at the particular set of circumstances that interrupted my capacity to take intelligent choices in the situation. Finally, laughter will resolve any penumbra of false guilt that may have gathered around the genuine guilt.
- Genuine guilt is often a higher order or reflexive distress: I distress myself still further because my already distress-distorted behaviour hurts another person. Genuine guilt often gets taken over by the already existing repressive controls, so that a person entertains compulsive guilt rather than release and experience in full the pain of the underlying self-generated grief.
- Genuine shame, where others have been disappointed rather than hurt, is an altogether lighter form of distress. It is, if you like, genuine embarrassment, and as such it will discharge in laughter; although of course there is the deeper issue of what led to the sub-standard performance in the first place. What I have called embarrassment in the previous subsection is really redundant, false shame, but of a continuously present, socially pervasive kind, whereby the person's authentic self-expression is intimidated by false values programmed into the psyche, a programme which is triggered to play in almost every social situation.

8. **The discharge of disgust.** Disgust is a distress emotion closely associated to physical nausea, hence part of the discharge may be a genuine vomit reflex or a symbolic or pseudo vomit reflex. Disgust, as a personal distress, as distinct from the purely physical disgust reaction to an unpleasant smell or other noxious stimulus, is a distress emotion that may arise in response to chronically

distorted behaviour in oneself or in others. Apart from the actual or symbolic vomit reflex the discharge of disgust largely reduces to the discharge of fear through trembling, since in my view the core of personal disgust is fear at the invasion of the psyche or of relationships by blind, irrational, distorting energies, with associated grief at the interruption of shared loving thus induced.

- Compulsive and distorted sexual interaction may result in a combination of personal and physical disgust in which nausea, fear and anger will be interwoven components.

9. **The discharge of boredom.** Boredom, like guilt, shame and disgust, can be a reflexive distress. Behaviour already shut-down and distorted, so that genuine options and possibilities are internally restricted, the person feels bored. It can also be a genuine frustration induced by an uninteresting meeting or encounter. The underlying core distress appears to me to be anger, and is discharged accordingly.

10. **The discharge of physical fatigue** and tension as such. All catharsis of personal distress involves a release of somatic as well as emotional tension. But there are clearly physical tensions *sui generis*, such as fatigue and muscle tension that cannot be reduced back to psychogenic factors. The discharge of these appears to involve deep, repetitive yawning and stretching.

B. Components of cathartic release

Catharsis is much more than mere emoting, A comprehensive account includes, in my experience. the following:

10. **Balance of attention.** The person is aware of, in touch with, the distress emotions, but also has some awareness focused outside the distress - on the supportive presence of another person, on some thoughts, words that contradict (but do not repress) the pain of the distress. When attention is balanced in this way between the distress and what is outside it, a psychodynamic leverage is maintained that tips the distress emotions into discharge. Buried pain, when strongly activated just below the threshold of experience of it, soaks up awareness and attention: the client is in a heavy, down, immobile, depressed emotional state and is either heavily resistant to catharsis or cannot elicit it if she wants to. When a person is sunk or swamped by heavy distress in this way, then she needs to take some attention away from distress emotions (without repressing them) in order to liberate enough conscious slack in the system to free the discharge. If I go away from distress emotions but remain open to them, then by the play of opposites they are ineluctably drawn upward from their buried place toward discharge, If the whole psychosomatic system is absorbed in and tight with tension, release of tension cannot get started. The person needs consciously to dis-identify a little from the taut system - then the liberating discharge can commence.

- There are actually two complementary principles involved in this disidentification: the initial loosening of the system, and the drawing power of contradictory assertions - that is, thoughts and words that

contradict or are quite outside the gloom generated by the hidden distress have the effect of drawing that distress out into discharge. This notion of contradicting or moving away from the inner gloom in order to bring its underlying buried pain into discharge is an elegant principle of unflinching practical potency.

- In general, balance of attention means that the client always has some attention outside the discharge process, so she is not swept away by a cathartic upheaval that is oblivious to time, place, other persons and even the self. She is poised between the involuntary somatic upheaval and the arena of voluntary attention maintained outside this, an arena from which she can facilitate and guide the release, going deeper or shallower, coming to a close, as available time and the inner dynamic require. I have in mind here, of course, a skilled client who is managing her own catharsis with the supportive presence of another person, as in co-counselling.
- Balance of attention also means that in practice the client will only work with levels of distress that are readily available, "on top of the pile", which she can progressively discharge in a relatively unobstructive way, so that the daily management of life is enhanced rather than disturbed. By working from a zone of free attention outside the distress, the skilled client guarantees that the deeper distresses will surface slowly in their own good time, reaching discharge point only when the person can effectively handle them.

11. The release. From the zone of free attention, the person takes off the inhibitory control and lets the somatic convulsions - the sobbing, the trembling, the storming, the laughing - occur, while experiencing, opening consciousness to, the previously occluded pain of grief, fear, anger, shame. The distress convulses body and mind, but is in turn consumed by this acceptance. The experienced client will avoid premature closure which cuts off the discharge before all available distress at that working level is cleared.

12. Spontaneous insight. Catharsis generates spontaneous insight, and the insight is just as important and valuable as the release of distress emotions. To return to the record theory, stress inhibits flexible, discriminating appraisal so that distress situations are recorded in the psychosomatic system in rigid, stereotypic way. Congealed distress is like wax on which a series of stereotypic oppressor-victim situations are recorded. The mind contracts under stress, so to speak, so that it has only a restricted grasp of the stress situation - "he oppressor; me victim; no escape; pain and panic, but cut it off and play possum". Elaborated by replays this record can become a chronic distorted construct in the way a person sees and reacts to her world. Discharge of distress has the effect of breaking up the distorted construct, liberating the mind to make a truly discriminating appraisal of what was really going on in the early critical incidents and in subsequent replays.

- The person's intelligence, previously occluded and inhibited by emotional tension, will, as the tension discharges off, spontaneously re-evaluate the tension inducing situations and their subsequent effects. The basic insight here is a dynamic one: the person sees clearly what it was she as an authentic person really needed, sees how this need, interrupted and frozen, has together with the associated pain been the hidden motive force behind an elaborate set of distorted behaviours. Associated insights liberate other figures in the early drama from oppressor stereotypes so that they are seen in the round, as humans with all their facets.
- The idea that a therapist or counsellor should give the client her own interpretations, insights, analyses, categorisations of the client's past and its relation with the present is ludicrous to anyone who has seen the flood of post-cathartic insight in the deeply discharged person. Interpreting to the client is a repressive process for both client and counsellor. For the counsellor, systematic interpretation applied to others is a form of double treason: it manipulates the client in order to keep at bay post-cathartic insight in the counsellor herself.

13. Celebration. The liberation of distress from the human system is simply a prelude to the celebration that follows it. This is a celebration of human identity, of the re-emergence of specifically human capacities, of being fully present to oneself and others. The post-cathartic person needs space, both verbally and non-verbally, for this expressive delight in her authentic humanness. This is the phase of emergence from the shadow, of reclaiming the heritage of a warm heart, a flexible intelligence, an adventurous will. This is also a phase of sharing, of reaching out to others, of reciprocal delight.

- On the practical side, celebration may also mean action-planning and goal-setting, the re-organisation of personal and professional life, in details or in substance, in order to give systematic expression to the values of emergent capacities.
- Amidst the heavy repressions of the non-cathartic society celebration of self will often present itself, initially, to the uninitiated adult as inconceivable, an embarrassing and deluded fantasy. In my experience this attitude invariably boils down to a deeply embedded programme that reiterates the person's innate nastiness - and this programme invariably has a strongly repressive function. It takes courage and clarity to take the needle off the old record and sing a very different song.
- Affirmation of the values of personal being can become a conscious meta-programme, an intentional way of living in which a person celebrates in attitude and behaviour, herself, others and the given world.

C. The effects of catharsis

Two immediate effects have already been covered in the previous section. I will reiterate them briefly here, then move on to longer term effects,

1. **Spontaneous insight.** This includes re-evaluation of the past traumatic event - insight into what was really going on, together with insight into connection between such an event and subsequent behaviour.
2. **Celebration of personal being.** The beaming human person, as distinct from the shadowy distressed person, emerges through the cathartic release.
3. **Break-up of distorted behaviour.** As old frozen human needs are identified by spontaneous insight, and the pain and tension that buried them is discharged, the person now has the inner freedom and flexibility to bring those needs awarely to fulfilment in present time. It is thus open to the person to cease living compulsively and to choose to live intentionally - to make conscious choices that relate fundamental needs to present realities. Catharsis does not automatically regenerate behaviour, but it liberates a person from distorting compulsions so that she can freely choose new behaviour. But the conscious act of choice has to be made.
 - Nor should, in my view, a crude hydraulic model be used. Such a model might argue that first of all you have to drain off the total pool of distress in which paralytic distorted behaviour lurks, before that behaviour is rendered impotent and new behaviour can begin. A preferable model is that as soon as discharge of distress liberates enough insight into the dynamic of the distorted behaviour, then a person can start to live intentionally. The old distortions may still have some energy in them, may still tend to leap out of the bushes when the situation that provokes them occurs, but now that the person understands what makes them leap, she can choose to replace them with alternative and more adaptive, effective behaviours. In other words, catharsis can reduce the charge on distorted behaviour tendencies to the point at which the person has enough attention outside them, in their provoking situations, to choose to keep them out of behaviour and to create new and self-fulfilling responses.
4. **Living in abundant time.** Sustained catharsis generates a great deal of free attention - attention that has been liberated from the constraints of past distress. The result is a much greater awareness of present time reality, of what is here and now occurring in the given world, with a greater capacity to respond appropriately and flexibly to it. For many people this is an altered state of consciousness, for ordinary consciousness so often has a charge of anxiety on the memory of past events, which restricts the ability to notice in a thoroughly aware way what is going on now. Distress emotion hooked on to the past puts both very severe blinkers and a distorting lens on perception of the present.
 - But living in abundant time is more than living in present time. It is possible to be very here and now in terms of immediate sensory awareness yet to be also dissociated from past and future. Living in abundant time means being aware of what is present, with an openness to and a sense of the re-evaluated past, and with an openness to and a sense of the emergent possibilities of the future that are pouring into the present.

- To be very present is also to be alive to what is about to become and to what by choice can be brought into being. Choice is very much shaped by the creative impact of the future on the present, dynamic possibilities elected by the will; but the freedom to make such choices presupposes an aware liberation from and re-evaluation of the constraints of the past. The present lived out of the future through a restructuring insight into the past - some such aphorism as this comes close to the concept of living in abundant time.

5. **Synchronous events.** This is the controversial notion of a greater correspondence between events without and development within. The assumption is that as my own degrees of freedom increase internally through the break-up of old rigidities, external opportunities present themselves that correlate with the new-found liberty to explore new possibilities. Such an assumption rests on a far-reaching metaphysical theory that the traditional notion of efficient causality conceived in terms of sequential cause and effect needs to be related to an entirely different notion of causality conceived in terms of simultaneous resonance.

D. Processes that complement catharsis

It would be absurd to argue that catharsis is in and by itself a sufficient condition of human development. I do not for a moment believe that it is anything more than a necessary condition, needing to be complemented by other necessary conditions before anything like a sufficient account of human development comes into view. Some of these complementary necessary conditions seem to me to be:

1. **Creative thinking.** A person needs to think out what kind of a world she wants, what her values and priorities are, what are rational means to rational ends given the current state of play in society and nature. Catharsis may liberate consciousness to think more relevantly and humanly, to apply intelligence in non-evasive, non-compulsive ways. But creative thinking is an independent act of clarification that has to be chosen in its own right. People do not think by catharting; they only think by deciding to think.
2. **Creative choosing.** Goal-setting, action-planning, conscious risk-taking, intentional living, fully self-directed and purposive behaviour: again catharsis may liberate a person from the tensions that inhibit these processes, but the challenge of the new inner freedom and insight still has to be met by choosing - to re-structure the outer circumstances of life to accord more with the values emerging within, to take initiative that enhance human flourishing in the domestic, the social, the professional and the political domains. The point about such choosing is that it represents the values that have emerged by inner growth, rather than values imposed by an ideology rooted in repressed and distorted emotion.
3. **Expansion of consciousness.** Catharsis functions at a relatively crude level of psychosomatic energy, involving gross somatic convulsions. Transpersonal techniques shift consciousness onto subtler levels of awareness and give access

to a wide range of refining and cohering energies. I have presented a typology of such transmutative techniques in *Helping the Client* (Heron, 1990) together with a discussion of the relation between the cathartic and the transpersonal. The important point, I believe, is that the two types of process, the cathartic and the subtle contemplative-transmutative, are complementary. Misused, either can become a systematic defence against entering fully the domain of the other. Appropriately used, each can balance and enhance in a life-affirmative way the other. And each may produce the other as a by-product. Thus sustained practice of some meditation methods may lead incidentally to the phenomenon of unstressing, when the meditator finds herself unaccountably crying, trembling or laughing. Sustained catharsis brings the person very fully into present time, giving acutely enhanced perception of phenomena and taking consciousness to the very threshold of access to subtle levels of awareness. Finally, there is an interaction of the two approaches which is central in resolving the constraining effects of what I have called primary distress recordings. For details of this see the section on transpersonal direction-holding in my *Co-Counselling Manual* (Heron, 1998). And for a theory that sets the whole of human distress within a transpersonal context, see Chapter 19: Co-creating, in *Sacred Science* (Heron, 1998).

- When catharsis is misused, its practice is invariably built around with rigid, authoritarian and inflexible theorising. Such dogma is itself a distortion rooted in unresolved and unidentified fear of the unknown to which transpersonal methods give access. When meditation is misused, its practice is harnessed to repressive mechanisms so that the whole elaborate edifice of mind-expansion buries early, perhaps chronic, distress, without resolving it. Such distress in my view continues to have significant and clearly detectable distorting effects on behaviour: spiritual authoritarianism, inability of the guru to relate on a peer basis, dogmatic intuitionism, rejection of the body, messianic delusions, compulsive proselytising, uncritical and indiscriminating guru-worship, and so on.
- It is useful in this respect to postulate a very general principle to the effect that everything has to be dealt with at its own level in a manner appropriate to that level. Somatic humans have to deal with their very human tensions at a somatic level. Trying to deal with them entirely by transpersonal work simply leaves a lot of unacknowledged and unfinished business lying around - and for those with eyes to see it shows in all kinds of systematically deluded responses and behaviours. But Reich and some other pioneers of radical catharsis have made the complementary error: they have rejected all mysticism and meditation as an aberration, seeing only its repressive use, and refusing to acknowledge its liberating use. Then they propound the somatic myth: the delusion of human development conceived exclusively in terms of psychosomatic liberation - the free flow of emotion in and with and through the body. They should study the literature on out-of-the-body experiences.

4. **Culture of the body.** Sensory awareness, conscious breathing, diet, dynamic yoga, dance, movement and relaxation methods: all these, and others, are ways of organising and cohering physical processes, with a significant effect on mental processes. They can be seen as an affirmation and celebration - non-verbally - of human identity, apart from their purely physical beneficial effects.
5. **Art.** There is a close relationship between the aesthetic and the cathartic. I have already alluded in Chapter 1 to how various forms of art may have a cathartic effect. On the other hand, art, whether as creation, interpretation or appreciation, may have an effect complementary to that of explicit catharsis. It provides a way of organising, refining and transmuting emotion through the development of and response to symbolic forms. It purges by transmutation as well as by explicit release. While at the same time it offers a mode of knowing irreducible to any other.

E. Cognition and catharsis

It is entirely illusory to suppose that catharsis can be separated from cognitive processes. Here are some of the ways in which they interact.

1. **Theory framework.** A psychodynamic theory that provides a sound rationale for cathartic behaviour is in my view a necessary precursor to initiating it in others. The theory itself can predispose a person to remove repressive and redundant controls. And it provides a secure cognitive framework for descent into the well of emotional discharge. In co-counselling training I always start with a theory and discussion session, and only invite those present to get into the practical work on themselves when they find the theory a sufficiently persuasive basis for doing so. Sound theory provides guidelines for responsible, aware release of distress emotions. And to return periodically to review and refine the concepts that clarify to human understanding the cathartic process, is an important part of sustaining that process in growth-promoting ways.
2. **Theory revision.** If catharsis is one of the necessary processes whereby human beings liberate their distress-occluded intelligence, as well as their capacities for love and creative will, then that process surely comes of age when the liberated intelligence reviews the theoretical assumptions in terms of which it has been liberated. The cognitive and the experiential circle round each other, ideally, in mutually enhancing ways. What I call experiential research, and co-operative inquiry (Heron, 1996), involves two or more persons systematically in a three stage process, which may be repeated cyclically several times:
 - They agree intellectually on a plausible psychodynamic theory.
 - They cash it out experientially on their own growth and behaviour, using some form of reciprocal support, and for a significant period of time.
 - They review the original theory in the light of their experience of systematically living through its practical implications.

3. **Pre-cathartic open association.** Following the chain of spontaneous associations, the thoughts and images that arise unbidden - if there is sufficient attention outside the distress - to start off a working session.
4. **Pre-cathartic intention.** A person may start a co-counselling session, for example, with a clear notion of what she wants to work on. The unresolved area of distress has been conceptually identified. This is a kind of directed or focussed pre-cathartic association: the spontaneous associations are invited to arise around an intentional focus. Or, more elaborately, a personal cognitive map of the distorted psyche may be made as a basis for subsequent working: this, in fact, has already been done in broad outline by anyone who accepts the theory framework in 1. above.
5. **Pre-cathartic disidentification.** This means dis-identifying from distress recordings with their restricted deficiency view of the self and the world: generating a focus of attention outside the distress as a necessary prelude to discharging it. This means a cognitive shift: talking about positive experiences outside the distress; reconstruing the distress experience in a comprehensive way in order to contradict the restrictive concepts in which it is bound.
6. **Pre-cathartic cognitive reversal.** This is closely related to the previous method. It is a way of defining the cognitive shift made in disidentification from distress: a person reverses her perspective on the distress-experience instead of seeing it compulsively in the deficiency concepts in which it is bound, she chooses to construe it from a wider more inclusive and abundant perspective.
7. **Cathartic insight.** The discharge process itself may be launched by the sudden identification within one's being of the buried voice of pain or frozen need.
8. **Post-cathartic insight.** The spontaneous flow of dynamic insight following catharsis, as described in previous sections.
9. **Disidentification and cognitive reversals in daily life.** Already alluded to above (C. The effects of catharsis 3). When old distress-distorted behaviour tendencies have lost some of their distorting charge through emotional discharge, then the person can effectively dis-identify from them when they are provoked by the old stimuli, and reconstrue the provoking situation in abundance rather than deficiency terms. See my account of the reversal cycle in *Feeling and Personhood* (Heron, 1992, 214-215). A classic reversal in terms of the theory presented in this work would be to replace seeing and responding to difficult people as nasty and unpleasant, by seeing them and responding to them as potentially abundant humans trapped by their buried pain in distorted behaviour: the former construct generates a limited, limiting and inflexible repertoire of response, whereas the latter construct can generate a wide range of flexible alternative behaviours - based on the crucial distinction between the person and the distortion.

A central theoretical question is whether it is possible effectively to resolve distorted behaviour by cognitive means alone, by first of all understanding the dynamic of distorted behaviour, and then by defusing in daily life and in contemplation distorted

attitudes and tendencies as they arise. Such defusing would mean seeing the attitudes and tendencies for what they are, and dismantling their energy by removing the cognitive distortions built into them. This involves both witnessing the dynamic contents of consciousness and reconstruing them in the light of some general psychodynamic theory. The resolution of this question is for experiential research. My belief is that both the capacity to witness and to reconstruct can be greatly aided by the discharge process.

F. Transmutation and catharsis

What I have referred to just above as disidentification and cognitive reversals in daily life is a basic kind of transmutation, made possible by previous catharsis, but not itself involving further catharsis. The distorted behaviour tendency still has an energy charge within it, but this charge is transmuted into constructive responses that follow from reconstruing the situation. How we appraise a situation, how we see it, largely determines our emotional and behavioural response to it. Congealed distress compels us to see situations in deficiency terms - as situations that limit, deprive, oppress, restrict - and so we respond as victims. After some measure of cathartic competence is attained, a person can start to choose to see situations in abundance terms, - as situations that provide new opportunities - and so respond creatively and intentionally.

From this point on emotional and behavioural transmutation becomes a complement to the cathartic process. If transmutation is used exclusively without catharsis, there is some danger, in my view, of the process becoming too cool and dissociated, with repressive distortions creeping in under the guise of transcendental attitudes and aspirations. Or human warmth, the capacity for open, spontaneous, reciprocal loving may diminish or never appear. If catharsis is used exclusively and the person waits to clear the pools of distress before restructuring behaviour, then emotional release becomes too much an end in itself, and, I believe, a deluded one, leaving the person a growth victim.

Where the two processes are used to complement each other, then rechannelling can take over what catharsis started off: the person is liberated from the crude hydraulic model of emptying all the pools of distress. But this complementarity principle needs to be applied with great awareness, to avoid denial of or premature closure on distress material. When the balance is right, **release** of distress energy aids **redirection** of distress energy into authentic behaviour, and vice versa - with a total reduction in the amount of each in favour of spontaneously creative behaviour. Or such, at any rate, is my working hypothesis.

Transpersonal techniques are types of transmutation and their discussion above (D. Processes that complement catharsis 3) relates closely to this section. The same applies to artistic activity (D. Processes that complement catharsis 5). For a more comprehensive account of this section see Chapter 8: Catharsis and transmutation, in *Helping the Client* (Heron., 1990)

G. Catharsis, external displacement and dramatisation

By external displacement I mean the unaware acting out - against other people or the environment - of repressed distress and of a frozen, interrupted human need. The resultant distorted behaviour has conventional and socially tolerated forms, and socially disruptive forms such as hysterical shouting, uncontrolled verbal aggression, physical assault on persons or property, physical self-destruction. The point has already been made above (A. Catharsis as such 3) that behaviour of this sort is not catharsis, but a displacement and evasion of the pain of the denied feelings. However, *some* people who are acting out in these ways may be nearer genuine cathartic release than those whose distorted behaviour is of a severely controlled, withdrawn and repressive kind. So it is possible to train them, if the trainer's interventions are sufficiently authoritative, to flip from external displacement into genuine discharge of a potent but harmless kind.

Thus persons acting out destructively in, for example, a therapeutic community, are re-enacting in an exaggerated and symbolic form the psychological and/or physical violence done to them, in their early lives. Given the setting, the possibility for a genuine fear and anger discharge is not, in principle, far away. Persons who act out in this way, are not simply a danger, a threat and a nuisance, but are ripe for interventions of the skilled cathartic counsellor. An enlightened psychiatrist in a psychiatric unit for disturbed adolescents, north of London in the UK, found that such destructive behaviour significantly reduced after residents acquired intentional cathartic skills.

External displacement in everyday life needs sooner or later to be interrupted, in order to enable the person concerned to accept, experience and get some insight into the psychological pain that is being avoided by and displaced into the distorted behaviour. The ulterior transactions or games analysed in transactional analysis are good examples of the kind of the widespread displacements that occur in conventional social life.

Unresolved distress in children is rapidly displaced into distorted behaviour: they transfer their pain into compulsive clinging, demanding, destructive behaviour, spitefulness and malice, stubborn refusal, and in many other ways. The skilled parent finds some supportive way of interrupting the distorted behaviour, not just to put an end to it, but in order to facilitate discharge of the emotional pain which underlies it.

By dramatisation I mean a form of pseudo-catharsis. It often occurs in the early days when a client in co-counselling is building up skills in self-directed cathartic release. Thus a client, within the limits of her session, may yell or scream or shout or bang the cushion with a low frequency thud, but in a way that lacks the high frequency spontaneous fiery discharge of genuine anger. She is really dramatising the external oppressor's end of her distress recording - symbolically re-enacting the violence done to her - as a prelude to discharging the fear, grief and the anger trapped at her own end, the victim's end of the recording. After the screaming, the inexperienced client, with the deft intervention of a skilled counsellor, may be able to tolerate and release a genuine discharge. Thus loud and pseudo-angry dramatisations in the client can be an effective prelude to the true release of fear, grief and genuine anger.

H. Catharsis and internal displacement

External displacement is the socially evident distortion of behaviour by repressed pain. The correlate of this acting out is internal displacement, a chronic "acting in" against oneself that takes the form of repressive control. The child can receive a double or treble invalidation:

- Her basic human capacities may be rejected by parents and others.
- The resultant distress may be rejected.
- The resultant distorted behaviour may be rejected.

As a condition of social survival, the child learns to internalise these invalidations. The resultant repressive programmes within the psyche become functionally independent of their external sources. This is the control pattern: an ingrained, chronic attitude of self-deprecation. It continually says "I'm no good, my basic human impulses are no good, my distress emotions are no good, my behaviour is no good: I should be something other than I am". It is a burden of redundant or false guilt and shame, which serves to sustain repression of the distress emotions and the underlying positive potential.

To attain cathartic competence, a person needs to dis-identify from this very negative self-image, and see it for what it is - an imposed programme that represses distress and occludes true capacities for creativity and joy. Many people identify very strongly and unawarely with the imposed negative self-image, so that they totally confuse their own identity with it. The process of disidentification, accompanied by bursts of emotional discharge, can seem very unfamiliar, uncomfortable and alarmingly liberating. In the early stages of co-counselling a person may, with much support and encouragement, step out of the control pattern for a brief experience of the unfamiliar liberation, only to be seen a moment later scurrying back into the familiar confines of the straightjacket. In the later stages, the person acquires increasing confidence in stepping out of the control pattern for longer periods, with the result of sustained discharge in a co-counselling session, and creative, joyful behaviour in everyday life.

Chapter 3: Catharsis and human interaction

A. The management of catharsis

There is a mistaken assumption in our society that cathartic release in the client should be under the direction of the "therapist". This strategy has only a restricted though important application. There are other strategies of much wider educational relevance.

1. **One-way direction by another.** The counsellor initiates, directs and manages the client's cathartic release. Technical competence lies almost exclusively with the practitioner. This is the traditional model of psychotherapy. It is relevant in my view only to those who have chronically disabling degrees of distress such that they cannot initially take charge of the process themselves, or engage effectively in some form of co-counselling.
 - This is the therapy model of personal development and is still applied to many people who could, from the point of view of their own growth, more usefully engage in self-directed release on a basis of reciprocal support with their peers. Adult education, extended to include the cultivation of emotional and interpersonal skills, will progressively take over, I believe, a lot of the old domain of psychotherapy.
2. **Two-way direction by each other.** Two trained people work on a reciprocal basis and take it in turns to direct and facilitate the discharge process in each other. This is equivalent to non-permissive counselling, the "intensive contract", in co-counselling. This is particularly valuable at a later stage for trained co-counsellors, when the client's deep-seated systematic evasions and defences are to be interrupted and broached. The counsellor supportively but persistently encourages the client to "hold a direction" against chronic distress, where the client tends to ease away from it, and avoid it.
3. **Two-way self-direction.** Two trained co-counsellors work on a reciprocal basis, each taking a turn as both counsellor and client. The client is fundamentally self-directed applying cathartic techniques to herself, with the sustained, supportive aware attention of the counsellor. Technical competence is in the hands of the client and applied by the client to herself. This is the "free attention" or "attention only" contract in co-counselling.
 - It may be modified by a contract which invites the counsellor to make suggestions only when the client has lost her way, has shut down, is blocking: but it is still the client's privilege to reject these suggestions if she judges that they are inappropriate. This is an "occasional intervention" or "normal" contract.
 - These two contracts constitute permissive co-counselling: permissive in

the sense that the client has freedom and space to learn how to make the techniques effective on herself. It is essential in the start of co-counselling: it breaks up dependency and creates a relation of interdependence between co-counsellors in which the creative skill of the client in working on herself is paramount. It enables a person, *qua* self-directing client, to acquire a high degree of emotional competence, to take charge of and become self-reliant in the discharge of her distress emotions. Skill in self-directed cathartic release needs to be well established before frequent non-permissive co-counselling is developed.

4. **Solitary self-direction.** A trained Co-Counsellor works alone, using her skills to elicit her own cathartic release. She may use a mirror, thus combining client and counsellor roles simultaneously.
5. **Combinations.** The above four types of management can be combined in all kinds of ways, sequentially and concurrently. Two important sequences are:
 - The heavily distressed and disoriented or deluded client starts off with one-way directive counselling from another, until she has discharged sufficiently to have a stable focus of attention outside her distress. She may then move on to co-counselling - two-way self-direction - and start to take charge of her own development.
 - Permissive co-counselling, in which persons are building up their skills as self-directing clients, may after a period lead over into non-permissive co-counselling. The self-directing client can be effective in dissolving a wide range of distorted behaviours through the discharge process, yet may thereby come to see chronic distortions that need additional intervention from outside - from a very sharp, insightful, persistent but supportive counsellor.

B. Techniques of catharsis

It is not my purpose here to give detailed account of cathartic techniques. A survey of the range of cathartic interventions is given in *Co-Counselling Manual*, (John Heron, 3rd revised edition 1998) and in *Helping the Client* (Heron, 1990). I will indicate here four basic categories of technique. See also my *Intensive Counselling*.

1. **Witnessing cathartic release in others.** There is a powerful phenomenon of triggering in cathartic groups. One person attains cathartic release together with the disclosure of past drama and trauma, assisted by the group facilitator in front of the rest of the group. The revealed drama together with strong emotional discharge will often precipitate the discharge of related material in other persons in the group. This is simply catharsis induced in the audience of a drama: here the drama is that of the client working out past hurts from her real life; those who identify most strongly because of similar incidents in their own past lives will tend toward their own discharge. This route to catharsis I call **external ideational**. The imagination of the audience is fired by a story line with a strong emotional charge, and the emotions of the audience respond accordingly.

2. **Internal ideation.** The client works with spontaneously generated associations ideas and memories, using a simple array of techniques to follow the associations through to a point at which emotional discharge of distress emotions is available. The techniques include:

- Relaxation and reverie (as, for example, in autogenic therapy).
- Active imagination, guided fantasy, conscious dreaming, the spontaneous development of archetypal symbols.
- Literal, evocative description of traumatic incidents.
- Conscious exaggeration of unconsciously held posture, gesture and facial expression.
- Repetition of emotionally charged words and phrases.
- Contradiction of defeatist and self-deprecatory statements, tones of voice, facial expressions, postures and gestures.
- Re-enactment of past traumas, giving full expression now to emotions that were repressed at the time.
- Celebration and appreciation of the truly human self.

All the while the client is picking up the sudden thoughts and memories precipitated into consciousness by any of these simple techniques. By using these methods to generate discharge from the first available distress material, from the tension that is "on top", such discharge leads to the spontaneous emergence of further material, and so on, until the client settles down to the main working area for the session. A review of this approach is given in my *Co-Counselling Manual* (Heron J, 1998). This approach may, of course, be under the control either of the client as in permissive co-counselling, or under the control of the counsellor as in non-permissive co-counselling.

3. **External mobilisation of body energy.** This is the external somatic approach, in which the therapist or counsellor or helper makes direct contact with the body of the client in order to release physical tension and restriction of energy as a means of precipitating emotional discharge. Such contact may involve:

- Manipulation of the limbs.
- Various forms of light massage.
- Deep pressure nerve manipulation.
- Deep friction or pressure on tense musculature.
- Pressure on acupuncture points and other trigger points.
- Pressure on the chest to stimulate and regulate breathing.

And so on. All these physical contacts may be supplemented by verbal instructions to the client to do this or that with bodily movement or breathing or vocalisation, and to disclose and discharge any emotional distress material that is made available by the physical procedures. The work of Reich, of L.E. Eeman, and of other body therapists, has by now well established the power of body methods in precipitating powerful discharge of early infantile distress, and in loosening up memories that may be worked on by methods of internal ideation.

4. **Self-directed mobilisation of body energy.** The client engages in a variety of vigorous bodily movements and breathing rhythms and vocalisations, on a purely voluntary and self-directed basis, as in bio-energetics, without any external physical interventions, in order to precipitate emotional discharge or loosen up memories for working on by other methods.
5. **Combinations.** The above may all be combined in a variety of sequences. And they are all compatible with the client being self-directed (as in permissive co-counselling): this applies to the external somatic approach also, so long as the client decides when, where, in what manner and for how long the counsellor applies physical contact. In short, all these four methods can be used separately or in various sequences by any of the four different ways of managing catharsis mentioned above (A. The Management of Catharsis). Even in solitary self-direction, a person can use externally applied physical pressure on herself, although of course this can only be done to a limited degree. See also the comment on physiological correlates of distress (Chapter 7, B. Disabling personal distress in the child 5). All the above methods go for emotional discharge intentionally. Complementary to all of them, and perhaps more important and basic than any of them is:
6. **Building the human centre.** This is the process of decaathesis, of disidentification from distress and discharge, in order to affirm, actualise and celebrate the capacities of the authentic human. This process is undertaken for its own sake, as an end in itself: the affirmation and creation of the values of the self-determining human being in a relation of mutual aid with other self-determining humans. Its secondary and incidental effect is that by taking attention away from distress without repressing it, it makes such distress more available for discharge at other times, see: Balance of attention (Chapter 2, B. Components of cathartic release 1). Methods of building the human centre have been mentioned in several of the preceding sections of this chapter. They include:
 - In co-counselling sessions or in group work:
 - Verbal celebration of self and others.
 - Non-verbal celebration of self in various forms of movement and dynamic yoga.
 - Transpersonal techniques and exercises.
 - In daily life: creative thinking and choosing - intentionally stepping out of distress-bound, compulsive, distorted behaviour. This, in turn, leads over into new forms of community action.

C. Catharsis and community

A cathartic society would, in my view, represent a very mature phase in human development. Its members would be sophisticated humans in the best sense, combining four skills. They would be able to:

6. Control all kinds of emotions when appropriate.
7. Express positive emotions when appropriate.
8. Discharge distress emotions when appropriate.
9. Transmute distress emotions when appropriate.

Some features of such a society may be:

1. From the earliest years children are encouraged to take charge of their emotions: their human capacities are given unqualified validation, support and facilitation; their distorted behaviour patterns are interrupted, but in a supportive way; their need for catharsis is fully accepted and supported with skilled interventions, while they are also trained to manage the process themselves and to accept and support it in others - with a due sense of appropriate time and place. And this applies in the school as much as in the home.
2. Where people start to take charge of their emotions, can distinguish between compulsive distorted behaviour (in its many subtle guises) and intentional human behaviour, and can understand their distresses and discharge them, then they also start to take charge of their lives, to be responsibly self-determining. Authoritarian social structures become irrelevant and intolerable. The leader moves in the direction of facilitator of decision-making in a community of peers. In organisational processes, there is greater emphasis on delegation, open communication, genuine consultation, participation in decision-making, and consensus.
3. The educational process abandons the exclusive pre-eminence given to intellectual and technical competence, finds ways of giving space for the acquisition of emotional and interpersonal competence, and facilitates self-assessment and self-direction as central to learning. The process of learning - in its intellectual, affective and elective domains, relating self and peers - is as important if not more important than the product. Education and community action and involvement are more closely interwoven. Affective education replaces old-style psychotherapy.
4. The helping professions start to deprofessionalise themselves in the sense that their function becomes increasingly that of training a whole range of peer self-help groups in the community, from co-counselling to mutual technical and social aid of various kinds.
5. The dramatisation of distress through ideological stereotyping and scapegoating of political and economic opponents is seen for what it is, so that increasingly

rational roles and values can overlap in the same person: thus the same person, through social re-organisation, may combine in different ways at different times and with different weightings, the roles of worker, manager, owner; or with respect to different political issues the values of the radical and of the conservative.

6. Nuclear families dissolve more into communal interaction. Neighbourhoods become dynamic communities involved in social, aesthetic and political action.
7. Gender rigidities are dissolved, so that men are liberated from the straightjacket of the masculine stereotype, and women from the feminine stereotype - with much greater reciprocity and equivalence of role and function.
8. Sex-positive attitudes abound. With the weight of repression lifted, sex is seen for what it is, the imaginative and loving celebration of human life, its only regulative norm being the minimisation of personal distress and the maximisation of human flourishing.

In general, those who on a basis of reciprocal support accept catharsis as a necessary (though not sufficient) means of liberating their distress-occluded potential, will also need to find new ways of living, working and creating together in community, new forms of social and political action - in order to give that potential adequate expression.

Two distortions can occur.

1. A person may turn to personal growth as a way of avoiding the issues of social, political and economic change: we then have a warm, loving, open, authentic person, who is in some way parasitic on a repressive social system which she is in no way committed to change. She gives no thought to the big structures, to the issues involved in changing them, or to plans to change any social structures big or small.
2. On the other hand, a person may turn to political radicalism in part as a defence against dealing with repressed distress emotions: in this case revolutionary fervour may to a significant degree be the acting out of denied emotions, the chronic fears and angers of childhood interference. When such a revolutionary comes to power, we may expect to see the repression acted out in the classic form of an oppressive dictatorship on behalf of the masses.

The complementary poles of personal growth and social change both need independent attention: neither one can be a substitute for the other, nor, I believe, does either one have any necessary precedence over the other - rather they are correlative and mutually supporting activities.

The discharge of anger is sometimes objected to by social radicals on the grounds that it defuses social action, takes the mainspring out of its motivation. I believe this is a delusion. The problem for most people is to get in touch with the anger that is denied by the repressive social system of which they are a part. To start to discharge such anger is, in my view, to start a momentum **toward** effective social action. Once the discharge process begins and some insight into the repressive social structure is

gained, then the person can start intentionally to re-channel some of the energy into relevant action. If there is no catharsis at all, there is the much more real danger that repressed anger from many sources, personal and social, if it does not lead to depressive alienation from all social effort, may lead to compulsive social action that is ill-judged, misplaced and relatively ineffective, or simply destructive.

D. Catharsis and orgasm

Reich thought that the repression of sexual emotions lay at the root of rigid, inhuman and oppressive social systems. This is too exclusively a somatic approach and is only part of the story in my view: it is the whole range of distinctively human capacities as such that are occluded by distress, and the resultant distortion includes a distortion of the sexual function. I would like to suggest here both an authentic sex-negative theory (as against old style and repressive sex-negative theories) and a sex-positive theory.

1. **The authentic sex-negative theory** The orgasm cycle is quite distinct from the cathartic cycle, in the sense that orgasm as such does not unload fear, anger, grief, embarrassment, from the psychosomatic system, whereas catharsis does. The number of orgasms a person has, appears to have no effect on the reduction of distress-distorted behaviour, whereas I believe that the number of cathartic sessions a person has, does effect such a reduction. An orgasm is occasionally followed in some people by a spontaneous cathartic release of tears, or laughter or trembling; but in most people most of the time I do not think it does. So it cannot be argued that orgasm is a reliable prelude to catharsis.
 - A person in whom the cathartic function is denied, and distress emotions repressed, is likely to undergo a distortion of the sexual function. The repressed distress displaces into compulsive sexuality. Nor is the displacement difficult to understand: the purely somatic release of orgasm temporarily diverts attention from the ache of buried distress, but without reducing or unloading that distress - hence the need to have another orgasm soon. The result is a compulsive, repetitive use of sexual release as a maladaptive anodyne.
 - The corollary, of course, is that the level of sexual tension and arousal may be falsely inflated by the displacement of repressed feeling into the sexual function, so that the person is seeking and obtaining sexual release to a degree that has no relation to her real physical needs, but bears blind witness to early interrupted personal needs and the distress that surrounds them.
 - The compulsive sexual behaviour itself will show symbolic maladjustment: the person blindly acts out in the present unfinished emotional business from the past. Thus the petty or emotional rapist blindly acts out against a succession of women, his repressed anger against his mother and the frustrated longing she imposed upon him. An older woman has a series of disruptive affairs with younger men as she blindly acts out the grief and anger and interrupted love at the death of her eight year old son. And so on. The sexual longing is but the leading edge of an unidentified distress and frozen need that give the longing its direction and much of its motive power.

- The underlying distress may be early repressed personal distress due to the negation of sexuality in childhood: the child's need to share love and joy playfully through the whole of its body including the genitals, may have been grossly interrupted by parents or siblings. Hence a hidden incest compulsion: the interrupted need for love, together with grief and anger at its interruption, genitally fixated and oriented to a member of the family - this whole constellation being repressed and denied, while at the same time being repetitively projected in a blind manner, and with disastrous results, into the adult social world.

A more general displacement occurs from frustrated nurturance into sexuality. Nurturance I define as the expression and sharing of the human capacity for loving and being loved through the body by touching, holding, embracing, stroking, caressing, where sexual arousal is absent, minimal or entirely secondary and marginal. Human beings of all ages have strong nurturance needs I believe, and they are distinct from sexual needs. Nurturance needs and sexual needs may be fulfilled in relative independence of each other: nurturance without sex, or sex without nurturance. Or the fulfilment of one may lead over into the fulfilment of the other. Or both may be fulfilled simultaneously, as when sex becomes the celebration of tenderness and love.

- In the non-cathartic society there is a strong taboo on the expression of nurturance needs, and a general tendency to conflate physical contact with eroticism. The resultant frustration and repression of needs for warm, human, non-erotic contact between men and men, men and women, women and women, is displaced into compulsive sexuality - which further tends to confirm the false assumption that sustains it. Thus both men (especially) and women may have a compulsion to be sexually successful and active, without any competence in the physical celebration of mutual tenderness as such of which sexual interaction may or may not be the eventual expression.

In co-counselling, where sexual attraction arises in the context of what was initially a co-counselling relationship, I always suggest that the attraction is made explicit, is acknowledged and then worked on by cathartic techniques to see whether it is the presenting indication of some unidentified early material. What appears as sexual attraction may resolve into a frozen need for nurturance and tenderness for and from someone earlier in life, into incest fixations, or into other unfinished emotional business. Once these things are dealt with, and their underlying tensions reduced, then the sexual attraction diminishes, and the idea of acting on it becomes irrelevant.

If the sexual attraction is acted on without intensive counselling on it to find out whether it is distress driven, then the result can be a psychological and interpersonal mess. The sexual relation that results can be a collusive, self-perpetuating avoidance of unidentified distress, which, however, continually distorts the relation emotionally from behind the scenes. The couple thus become compulsively locked, as it were, in a series of emotionally defensive and distorted embraces; and are mystified to know why they cannot relate in a rational, loving and aware way.

The sexually wise person appears to be one who, in her encounters in life, can distinguish between sexual interest, in herself and in the other, that is rooted in hidden distress; and sexual interest the expression of which is a true celebration of human values.

There appear to be three different types of sexual encounter:

- Compulsive attraction rooted in distress: it is wise not to act on it, but this is difficult if the distress is entirely repressed and undischarged.
- Genuine attraction rooted in human values, where the total circumstances are such that it is appropriate to celebrate these values by consummating the attraction.
- Genuine attraction rooted in human values, where the circumstances are such that, while it is always appropriate to enjoy the sexual emotions as such, it is inappropriate to act on them. Those concerned choose to acknowledge and appreciate the emotions, but not to consummate them.

2. **The sex-positive theory** In the realm of authentic human encounter and intimacy, sexual activity is a celebration of many things singly or in any variety of combinations, serial or simultaneous.

- The celebration and sharing of friendship.
- The celebration of mutual tenderness, love, affection, nurturance.
- The celebration of life, energy, vitality.
- The celebration of the aesthetic: sexual interaction as one of the great dynamic plastic arts - two human forms interwoven in elegant and dramatic variations of mobile intimacy; celebration of the beauty of the body.
- The celebration of human joy and delight in being, the sharing of personhood.
- The celebration of the playful.
- The celebration of the comic and the absurd.
- The celebration of passion, desire, lust.
- Celebration of the dynamic ease of the animal.
- Celebration of the transpersonal and sacramental: sexual interaction as a means of attunement to wider realities, to archetypal principles of being, to the divine - as in Tantric yoga.
- Celebration of parenthood, of the procreative process, of the generation of new life.

In the non-cathartic, repressive society, either by condemnation or pursuit, sex is given a kind of weighting it does not deserve. There is a remorseless, a lack of freedom and lightness, of being at ease, both in the proscription and in the permissiveness. In the emotionally open society, sex may be seen as one of the many delights open to humans, one of many possible ways persons can share and celebrate their human identity - and so it becomes an elegant option, related to a physical need but not bound by it.

The human body can be seen, for consciousness, as five life rhythms, overlapping continuously in time: the heartbeat, breathing, eating and excreting, waking activity and sleeping, sexual arousal and sexual quiescence. The five rhythms increase, from first to last, their time cycle: or, to put it in other words, they decrease their frequency - the heart beats very fast compared to the slow rhythm of waking and sleeping. The five are also, roughly speaking, in an ascending order of flexibility or amenability to voluntary control and variation. Nowadays by biofeedback methods people can learn directly to influence the rate of the heartbeat. But these voluntarily induced variations are small compared to the variations a person can induce in the breathing cycle, which again are small compared to the ways in which a person can choose to alter the times between eating. The greatest flexibility attaches to the sexual function: a person can vary enormously the times between its satisfaction, without causing any physical dysfunction. Each of the other four cycles has an outer time limit: to attempt to extend the cycle beyond that limit leads to physical dysfunction or death.

The very great flexibility of the sexual function, combined with its ecstatic, convulsive consummation, has probably produced in human beings throughout history a purely internal anxiety about its management. The primary external constraint has been that of childbirth, apart from venereal disease. Put the internal anxiety and the external constraint together and, with displaced distress of other kinds, we get the genesis of most of the restrictive norms, taboos and shibboleths that have constrained human sexuality in the past.

Today with theories such as those proposed in this work we can understand and resolve the internal anxiety and the displaced distress. Childbirth is now entirely under voluntary control. Venereal disease is eliminable. Perhaps for the first time in history, human beings can claim fully the heritage of the flexible ecstasy of their bodies. In a society where human beings take charge of their emotions, take responsibility for their lives, and act very awarely in relation to others, we may expect that this claim will be taken up in all kinds of sensitive, exciting and imaginative ways.

Chapter 4: Human needs and behaviour

This chapter and the remaining chapters present a theory of human nature and the human condition which underpins the discussion of issues in the first three chapters.

A. Physical needs

The human being has needs, related to the structure and processes of the physical organism, for food, drink, sex, sleep, warmth and shelter, activity, sensory stimulation. For all practical purposes, there is virtually no genetic programming of behaviour to meet these needs, apart from minimal reflexes such as a sucking reflex in the neonate. Behaviour that satisfies physical needs is almost entirely learned through the process of socialisation: social norms prescribe the relevant behaviour.

B. Personal needs

These appear to be *sui generis*, discontinuous with physical needs and not reducible to them in any way, however inter-related the respective satisfactions of human and physical needs may be. By their very nature they would seem to belong to a different order of reality. Their satisfaction cannot be defined in purely physical terms, and any culturally determined and defined limit of their satisfaction begs basic questions: Why suppose that this culture more than any other has arrived at valid defining limits? But in any case can any defining limit rationally be given? Personal needs, on this model, are needs to fulfil, realise distinctively human capacities or potentialities; and the depth, range, variety, form and intensity of such fulfilment is virtually unlimited.

1. **The need to love and be loved.** The capacity here is the capacity to care and be cared for, to be concerned for the other for the other's sake and to be the conscious recipient of such concern, to wish the flourishing of another and to flourish in response to a reciprocal wish. The need is satisfied in mutual loving - a shared celebration of individual strengths and differences; and in all those situations in which persons seek co-operatively to provide conditions in which they and others can in liberty determine and fulfil their true needs and interests. It seems logically odd to suppose there can be any final limit to the fulfilment of a person's capacity for loving. If love can be regarded, in part at any rate, as concern for the other *qua* other, then the only (variable) limit put upon loving would seem to be the number of others known to exist and expected to exist.
2. **The need to understand and be understood.** This presupposes the capacity of intelligence - to entertain sets of concepts that render experience intelligible and to be an intelligible experience for others. The need is satisfied in mutual communication - giving and receiving sets of symbols that give meaning to or find meaning in the world/others/self. The symbols may be discursive as in language or non-discursive as in all forms of non-verbal art and non-verbal

interaction. Again it is logically odd to argue that there are absolute limits to knowledge, to fulfilment of our capacity for understanding, for we are then faced with a strange assertion that we know there is an unknowable. There appear to be no logically discernible limits to this fulfilment.

3. **The need to be self-directing and to be freely engaged with the directions of a greater whole.** This need presupposes the capacity for choice and for being chosen. To be self-directing is to make autonomous choices - choices rationally made on the basis of relevant factual considerations and in the light of values of one's own. It means taking charge of one's life, bringing more and more (and potentially unlimited) areas of it under the direction of explicit intention, of conscious experimentation and risk-taking. The need is satisfied in associations in which individual autonomy is exercised in the context of those with shared beliefs and aspirations who also exercise their autonomy. The person takes responsibility and engages with a social system for significant parts of which others have taken responsibility. She is self-directing while being voluntarily subject to the directions which others have taken on her behalf.

Some general conjectural points may now be made about these supposed three basic personal needs:

1. The behaviour that satisfies them would seem to be entirely learned. But there are at least three overlapping phases in the learning process:
 - Spontaneous exploration and play.
 - Uncritical adaptation to prevailing norms of behaviour.
 - Autonomous growth in which the person revises all norms and values unreflectively acquired in the socialisation process and seeks an authentic personal way of meeting these needs.
2. Each of the three needs was expressed above in both an active and a passive form. It seems reasonable to argue, from considerable evidence now available, that adequate fulfilment of the passive form of the need is a necessary precondition of, or at any rate greatly facilitates, effective fulfilment of the active form of the need. To be loved enables loving, to be understood enables understanding, to be subject to facilitating directions of others enables self-direction. Humans need to receive before they can impart, to be nourished before they can exercise.
3. The three needs are interdependent and mutually supporting. Effective communication presupposes mutual concern and co-operative exercise of autonomy. Fulfilment of any one presupposes some measure of fulfilment of each of the other two.
4. As suggested above, they are distinct in kind from physical needs, potentially unlimited in the extent of their fulfilment, and yet the physical organism with its needs is their primary medium.

5. When dealing with the effects of psychological and social oppression or deprivation, then satisfying personal needs can be seen as meeting a lack, making up a deficit, even healing a psychological wound. But in social circumstances where human beings enable and facilitate each other, satisfying these needs can better be seen as the pursuit of human flourishing, of abundant living, of variety, novelty and challenge. They are concerned with the innovative, not merely the conservative, side of life. And when they subsume and include the satisfactions of physical need, then the latter too take on this quality of flourishing above and beyond purely homeostatic maintenance.
6. A further suggestion can be tentatively made. These needs seem to seek fulfilment in two polar but complementary modes. On the one hand, there is the tendency to self-expression, to greater distinctness, differentiation and richness of individual being. On the other hand, there is the tendency to self-transcendence, to greater unity, fusion and identity of being. In both the active and passive modes, personal needs, it is conjectured, complement the thrust of diversity with the thrust of unity, and vice versa.
The basic residual question is whether the full range of human behaviour - from the distorted and perverse to the loving and enlightened - can be explained in terms of relations between the total environment of human beings, the organism and two sets of needs, physical and personal, the behaviour to satisfy which has to be acquired through experience and is not innately programmed in the organism.

C. Human behaviour

The range of behaviour to be explained is something like the following:

1. **Distinctively human behaviour.** When personal needs are fulfilled in a relatively unimpaired way, then we have the three phases or types of behaviour indicated earlier:
 - **Playful:** spontaneous, improvisatory, joyful, fun-filled, creative
 - **Conventional:** accepting prevailing rational norms and values
 - **Autonomous:** aware of, in charge of and not run by, social and psychological processes. The sort of epithets that cluster round the notion of autonomous behaviour are: purposive, intentional, decisive, responsible, resourceful, innovative, risk-taking, adventurous, challenging, confronting, responsive, attuned, accepting, flowing, going with, co-operative, conciliatory, affiliative, communicative, corporate, political, organisational, intimate, caring, sharing, nurturing, protective, delighted, passionate, knowing, believing, enquiring, reflecting, problem-solving, imaginative, inventive, creative, contemplative, insightful, expressive, elegant, rhythmic, harmonious, humorous ...

Autonomous behaviour is not other-directed but self-directed and self-creating, with norms and values rationally adopted.

2. **Distorted human behaviour.** When personal needs have been interfered with or suspended in some way and their proper fulfilment occluded and suppressed, then behaviour is distorted into half-conscious, quasi-mechanical, repetitive and maladaptive forms. Humans become the confused victims of disrupted psychological processes that play themselves out in behaviour in a relatively unaware and uncontrolled way. The point about distorted behaviour is that it is not deliberately malicious, but is blind, repetitive, unproductive, dissatisfying to the person who is not in charge of it. This is the arena of the defence mechanisms in Freudian analysis, of games and ulterior transactions in transactional analysis, of intermittent and chronic patterns in re-evaluation counselling, of struggle and symbolic behaviour in primal therapy. Distorted behaviour is above all compulsive. It appears to be very widespread throughout the culture. Some common forms are:

- **Invalidation:** compulsive and irrational deprecation of self and/or others, putting self or others down, falsely blaming self or others.
- **Irrational claims:** compulsive behaviour in which, overtly or covertly, there are claims, demands and expectations which bear no rational relation to the human realities of the situation in oneself or in others. Being inappropriately driven in adult situations by the hidden pain, the unfulfilled frozen needs and the imposed programmes of childhood. Emotional manipulation.
- **Rigid belief:** compulsive adherence to beliefs, about oneself or others or anything, that are not supported by the available evidence, that are ill-conceived, incoherent, rationally unjustified. The verbal insistence on such beliefs and the inflexible behaviour that follows from them. Prejudice.

The general theory here, to be developed more thoroughly below, is that this sort of behaviour both contains (is a defence against the release of), and is distorted by, unresolved and undischarged distress resulting from cumulative early interference with personal needs. The person is only an apparent victim of the compulsions, has some awareness of their counter-productive repetitive nature and has the power, with appropriate training, to release the distress, dissolve the distortions and gain insight into their genesis. There appear to be three degrees of such behaviour:

- **The defensive:** the distortions are accommodated within social structures and may in turn distort such structures, such as the three forms given just above
- **The defensive and the disabling:** the distortions make the person unable to observe normal social behaviour, but she knows the distortion is a distortion, such as chronic phobias.
- **The defensive, the disabling and the deluded:** the distortions not only disrupt social processes, but the person can have great difficulty in seeing them as distortions, such as paranoid delusions. In this case, the person's own concept of what is distorted needs to be worked with first.

3. **Perverved human behaviour.** This is behaviour that is deliberately malicious, that intentionally seeks the harm of self or others, and seeks that harm primarily for its own sake, as an end in itself, even when rationalised as a means to some spurious good, and even when justified as a means to some genuine good. Such behaviour can include the use of force, threat, torture, duress; giving lies and false information, defaming, slandering; destructive psychological attack; brainwashing and stress-induced change; malicious seduction in the sexual and the wider sense; supporting someone independently bent on destructive behaviour, persistent self-destruction or self-neglect.

- **Spasmodic:** There is the sudden, impulsive, uncontrolled outburst of destructive behaviour, a breakdown into wife bashing or child battering, into malevolent psychological attack, into smashing of property, and so on.
- **Chronic:** The destructive perversion is repeated regularly and practised regularly, maybe with careful premeditation and planning.
- **Institutionalised:** Armies, Gestapo, the secret police, old-style schools - destructive behaviour is applied as part of routine official procedure. For centuries the family was another example: acceptable child-raising practices included systematically destructive behaviour towards children.

In some instances perverted behaviour may simply be learned, adopted on the basis of instruction by some supposed authority; in other instances it may have the same genesis as distorted behaviour, only more so; or more probably both explanations apply. However, compared to simple defensive distorted behaviour, there appears to be an additional factor: intentionality has taken over the distortions and vice versa. The chronic internal distress is systematically, deliberately being projected onto others by means of malicious intent. Ordinary run-of-the-mill distorted behaviour produces a psychological mess and creates much dissatisfaction and unhappiness, but it is free of this kind of intentional malignity. It often has pseudo-intentionality: the compulsive behaviour is dressed up with spurious legitimating reasons. Perverved behaviour involves a much more far-reaching distortion of intentionality itself: it wills harm.

Another way of restating the whole of this section is to say that human behaviour can degenerate according to an inverted Y shape:

Authentic-intention
Pseudo-intention
Malicious-intention Deluded-intention

There is authentic intention, where personal needs are meaningfully fulfilled; there is pseudo-intention, which rationalises compulsive behaviour rooted in minor distortions of personal needs; then there is either malicious intention or deluded intention, rooted in major distortions of personal needs.

4. **The rigid society.** Distorted and perverted behaviour seems to become systematically congealed in social structures, creating the rigid society. Some of its features are:

- **Steep status hierarchy** - with power of decision-making vested firmly at the top, with little genuine consultation with lower levels, with poor downward communication about major issues
- **Rigid rules** - defining lower level responsibilities but with extraneous competition for status, power and influence among different "departments"
- **Systematic psychological oppression** - of the masses on the lowest levels, combined with political oppression and economic exploitation.

In many ways such a social system looks like the product of double distress (see following section): distress at the physical level about food, territory, etc., leads to an animal-like dominance hierarchy, but cumulative additional distress at the level of personal needs distorts such a dominance hierarchy into forms of intentional oppression unknown among animals.

Chapter 5: Human vulnerability

A primary relation between the human being and the environment is that of vulnerability. Vulnerability and its sequelae provide a major set of concepts for explaining human behaviour in all its forms. To say that a human is vulnerable is to say that her needs can be frustrated and interfered with, the result being the experience of distress and its associated behaviours.

A. Physical vulnerability

Physical needs can be frustrated by physical privations or traumas leading to acute distress experiences such as hunger, thirst, cold, fatigue, the pain of disease or accident or attack, sexual tension. In the animal realm there appear to be something like emotional distress experiences involved with some, at any rate, of the physical ones. Thus there is anger vented in defensive or offensive aggression when the issues concern mating, territory or food. There is fear leading to immobility or flight when under attack, as an alternative to counter-aggression. There is grief in some species exhibited in wailing and mourning when there is separation from parent or offspring or mate. Human beings, it is reasonable to suppose, function in similar ways, with emotional distresses of anger, fear and grief and their behaviours, tied in with physical frustrations.

In animals of the same species, anger with its associated aggressive threat or fight behaviour appears to have adaptive functions: it leads to social cohesion and leadership by maintaining dominance hierarchies; it makes for an effective use of available territory (and food) by separating groups out over it; it benefits progeny by selecting out the best parents; it protects the young. Nor, in natural habitats, is it necessarily highly destructive: the norm is often threat behaviour or token fights rather than serious wounding and killing, although the latter does occur. Intra-specific aggression among animals seems more harnessed to the preservation of life than to its destruction.

Among monkeys and apes, intra-specific aggression is stronger in baboons, weaker in gorillas and chimpanzees, but in the wild it is almost entirely reduced to threat displays with very little overt fighting. In unusual environmental circumstances however, as in captivity where there may be crowding and/or sudden disturbances, unfamiliar irritations, then all these species can be violently aggressive to their own kind.

We do not know the sort of aggression that occurred among early hominids, but it does seem reasonable to suppose that the human organism, physically comparable as it is to the primates, has tendencies toward the adaptive aggression shown among primates and, when under physical duress such as overcrowding, to the more violently destructive aggression also exhibited under such conditions by primates.

B. Personal vulnerability

But the organism is not only the locus of physical needs, it is also the medium for the fulfilment of what I have called personal needs rooted in capacities for love, understanding and choice, where these capacities have a potential reach far beyond the confines of physical survival needs. Thus any interference with physical needs, any threat to the integrity of the organism, is at the same time some kind of interference with or threat to the fulfilment of personal needs. Why, for example, do human infants and children have a grief-like crying and sobbing response to minor physical hurts? Is it because the physical pain and shock is also experienced as an immediate interruption of their need to love and be loved?

Thus to understand fully human response to physical privations and trauma, we must take into account, I suggest, not only the fear, anger and grief tied in with organismic frustration but also a different order of fear, anger and grief that is tied in with the frustration of personal needs as defined. (The reverse may also be the case: frustration at the purely human level may of itself lead to distress at the physical level - fatigue, insomnia, pain, wasting.) Interrupt and restrict a child physically, then the simple angry fight response of the impeded organism can be enormously fuelled by the angry, righteous indignation of a being whose need to be self-directing in her exploration of the world has been suspended. There is often this double loading of distress to take into account.

But the two sorts of frustration can be relatively independent of each other. Thus the human adult at any rate can experience minor physical frustrations without distress at the level of personal needs; and conversely can have all physical needs fully satisfied while undergoing major frustrations of personal needs.

C. Primary sources of personal vulnerability

By primary sources I mean sources that are intrinsic to the human condition prior to human invention and intention. They are the inherent stresses of human existence, of the given system of persons in the world, stresses which can frustrate basic personal needs.

- 1. Tensions between physical needs for survival and personal needs for self-realisation and cultural achievement.** This is the great tension between life and mind, between the biocentric nature of the organism and the mental aspiration of the person, accentuated by a physical environment that can demand persistent, repetitive, arduous address to survival tasks. The relentless meeting of physical needs can significantly frustrate the meeting of personal needs - for shared loving, for knowledge, for varied cultural achievement - through lack of time, energy, resources, opportunity. Distress may thus accumulate at the personal level, without time or knowledge to resolve it.

1. If, as well as these effects of the persistent demands of survival, there is added actual frustration of physical needs as a result of drought or pests

or disease or any other natural cause, then we have the crucial area of double distress: the distress of physical frustration compounds the already cumulative distress of personal frustration.

2. The biocentric nature of the organism may set up another kind of stress at the mental level. Physical needs may spontaneously distort the untutored human imagination into fantasies of disproportionate physical fulfilment, especially when these needs are subjected to the stress of frustration. There can thus be a stress-induced artificial inflation of physical satisfactions that can of itself subvert a real fulfilment of the person: mental capacities are frustrated by being harnessed to the irrelevant pursuit of redundant bodily gratification.
 3. The postulated stress here is that of psychological gravity: the untutored capacities of the person are drawn into the orbit of physical needs, falsely illuminating and enlarging them, to the distortion of both.
2. **Tension between love needs and the universal phenomenon of separation.** Birth is a separation; death is a separation; disease, injury, congenital defect may involve separation; shorter or longer partings between those who love seem, to be inescapable components of living, working and surviving. Birth may be profoundly traumatic.
 3. **Tension between understanding needs and the relative inscrutability of phenomena.** The world has not yielded up its intelligibility lightly: knowledge has been laboriously won. The unknown surrounds humans on every side. The human psyche is even more inscrutable than the phenomenal world. Humans want to understand, but the veil is drawn thickly around them and within them.
 4. **Tension between self-direction needs and the resistant, refractory, elemental nature of the physical.** There is a great gap between aspiration and action, between the chosen possibility and its realisation in the world. Bodily skills have to be acquired, tools made, tough material worked. The world abounds with great frustrators of human effort, of the determination to take charge: fire, flood, deluge, drought, earthquake, avalanche, volcano, pests, vermin, animal marauders, disease, accident, deterioration, decay, and so on.
 5. **The inherent intrapsychic instability of, the internal tensions among, unprogrammed but potentially unlimited, human capacities, whose behavioural fulfilment is entirely acquired.** This instability is accentuated by an environment which abounds with examples of destructive ruthlessness both in the animal kingdom and in the natural elements. A human may be frustrated and disoriented simply by the excess of options available. And in this state of internal disarray, destructive examples in nature may inspire inappropriate choices. Alternatively, situations may arise where human needs frustrate each other, so that love fulfilled or knowledge gained or autonomy achieved may be at the expense of one another.

6. **Finally, of course, there is simply the presence of other members of the human race, all of whom are also subject to all the same sources of personal vulnerability, as well as the many sources of physical vulnerability.** There is thus an inherent social instability in the given system of things: social transactions have to occur among beings who are immersed in a given world that can cause in them as individuals great personal stresses and frustrations on top of purely physical stresses and frustrations. Interacting with other beings who are personally and/or physically distressed is yet another source of frustration of personal needs.

In one sense, all these interacting tensions can be seen as conditions of growth, the stresses that call human development into being. The human condition is inherently stressful, but in a human-affirmative or provocatively creative way. Up to a point, a tension or combination of interacting tensions, is a line of stress that provokes a growth-promoting and constructive burst of energy - affective, cognitive, conative - from the human being. Separation can intensify and clarify love; the inscrutability of the world provokes the mind into enquiry; the intractability of matter and its sudden cataclysms challenge achievement; the demands of survival arouse a technological and cultural development that transcends the purely biological; the inherent instability of human potential provokes self-knowledge and self-development; the inherent social instability that occurs in the given world is a spur to social creation, co-operation, collective achievement. The world provides a dramatic series of shocks and blocks that arouses the person slumbering in the organism, the society slumbering in nature.

However the human condition also appears to be such that these tensions can interact and occur at a rate resulting in an accumulated overload of distress that can lead to compulsive, distorted, destructive behaviour. I have a fantasy caricature of a negative possibility for the life of early humans: they are beset by separation anxiety through high infant mortality, sudden death by natural disaster or animal attack, by disease or accident; they are beset by fears rooted in ignorance; by mounting frustration at the sheer implacability of the material world; they are internally confused by the inchoate aspirations of a multifarious, untutored and unknown potential; they are externally confused by association with other humans exhibiting the same range of tensions. And all these **personal** distresses compound a continuous series of **physical** dangers and distresses - pain, hunger, cold, animal-like aggression (from animals and humans), and the fear and anger that go with them. Above all, because of the relentless need to pursue and maintain survival in a difficult environment, these compound distresses accumulate without respite - without time to recover from them or knowledge to resolve them - until a condition of overload is reached and behaviour breaks down into distorted and maladaptive forms **between people**.

The general thesis then is that the sources of physical vulnerability combined with the primary sources of personal vulnerability can have two different effects. Up to a certain level of intensity they provoke a truly human development: human capacities are exercised and fulfilled in meeting the challenge of physical existence. Beyond this level they overload the human system and behaviour starts to become distorted, especially behaviour between people. Distorted and perverted human behaviour is the secondary source of personal vulnerability.

The level of intensity will fluctuate as a function of the changing patterns of interaction of very many variables. The critical threshold of overload will be idiosyncratic for each individual: a parent whose children all die in infancy will be in a very different state of stress than one who loses none. But there may well be pervasive ecological factors that from time to time determine thresholds in a whole community.

In general it seems reasonable to suppose that, given varied individual thresholds in a society, we shall find the typically human phenomenon of genuine cultural achievement interfused with distorted and perverted behaviour some of which will be congealed in accepted social practices and institutions.

The fact that the intrinsic stresses of the human condition are such that human behaviour can break down into distorted and perverted forms is itself a kind of meta-challenge - to transpersonal development, in my view. The first order challenge of the stresses is to personal and interpersonal development, but the continued vulnerability of **this** achievement is a second order challenge to cultivate the wider reaches of human awareness. In the theory and method of co-creating (Chapter 19, *Sacred Science*, Heron, 1998), I develop the radical view that cosmic self-forgetting, an ongoing contraction of spiritual awareness and attunement, is that which ultimately sustains all distorted human behaviours.

D. Secondary sources of personal vulnerability

Basic personal needs are frustrated by the interfering actions of other humans. The most obvious and most vulnerable victims are children.

1. **Physical interference.** Bodily harm or the threat of bodily harm; a difficult birth; sexual interference; deprivation of contact, food, water, heat, sleep, sex. This can lead to compound distress, as I have suggested: the emotional effects of physical frustration combined with the emotional effects of personal frustration. The emotional perturbation at the personal level when physical needs are frustrated will be much greater, I suggest, when other humans are the intentional frustrators than when non-human conditions are. Children who are physically harmed and deprived by their parents can clearly suffer, as well as the physical distress and its concomitants, a great interference with their needs both for love and for self-direction.
2. **Psychological interference.** That is, interference with personal needs as such. Love needs can be frustrated by parting, separation, loss that is the result of human decision and intervention; by censure, criticism, reproof, mockery, invalidation whether verbal or non-verbal; by psychological neglect, withdrawal, disregard, alienation, rejection. Needs for understanding can be frustrated in children by failure of adults to respond to enquiry, to give needed and relevant information, to communicate freely and appropriately, to provide an environment full of mental stimulation and arousal at critical periods of response, to facilitate imagination, fantasy and mythapoeic thinking, to provide equipment and opportunity for practical skills and learning how, to provide reading and writing skills. Needs for self-direction in children can be frustrated

by adults' nagging, by endlessly imposed prescriptions, commands, demands, precepts, minatory "shoulds" and "oughts" and "musts" and their negatives, by taking over and doing everything for, by failing to provide time and place for self-directed play, exploration, activity, interaction. There is probably no such thing as exclusive frustration of one basic personal need. Love frustrated is also in some way understanding and self-direction distorted (and similarly with each of the latter two): the unloved child may in later life exercise her intellect in strange ways and compulsively reject others in a way that severely restricts her ability to take charge of her life.

3. **Social interference.** The personal needs of a great number of people can be systematically interfered with in rigid organisations and societies in which there is political oppression, economic exploitation, denial of human rights. Personal needs here may be almost totally negated, or their fulfilment may only be tolerated up to a point and in certain restricted social areas, or the needs may be tolerated only in distorted and warped forms of development. But whatever distortions are imposed on the oppressed, complementary distortions are found in the oppressors. Social interference with personal needs can be looked at in three categories, the third including within it the second, and the second the first:

- **Face-to-face interference.** The actual behaviour event where one or more persons interfere with the humanity of one or more persons.
- **Organisational interference.** A particular organisation - the household, the school, the company, the department - whose normative structure is oppressive in some or other respect to some degree.
- **Societal interference.** Cultural oppression - the oppressive features of the combined norms and values of a whole society, its political, economic, cultural, religious and domestic associations. Subcultural oppression would derive from the norms and values of a given social class, or ethnic group, or geographical community.

Organisation and societal interference can be seen as the institutionalisation of distorted and perverted human behaviour. Oppressive interaction face-to-face generalises into oppressive normative structures. The distorted society is the artefact of distorted individuals and tends to be self-perpetuating until riven apart by the extremity of its own distortion. While an oppressive normative structure will be maintained by oppressive face-to-face interactions that occur within it, the mere existence of an oppressive normative structure can of itself be a source of oppression independent of any particular act within it. Thus once a person is sensitised to the structure, she will conform behaviour to it without there necessarily being any intervention from anyone else.

Social interference with personal needs is not all of a piece. At the face-to-face level, these are some, at least, of the important distinctions to be made:

- Interference that follows from distorted or perverted behaviour as these are defined in earlier sections.

- Interference that follows from authentic good intention combined with ignorance. In the light of greater knowledge the interference would be seen to be both unnecessary and avoidable. The ignorance may have been avoidable or unavoidable: in the former case the good intention becomes somewhat tarnished.
- Interference that follows from a rational, humane and well informed decision. The interference here may be regarded as necessary and unavoidable in the circumstances.

There is unfortunately a blurred area between the first two of these and again between the last two. It may be unclear whether or not an ignorant good intention is but the masquerade of compulsive behaviour; or whether or not what appears to be a wise decision will be seen with the greater wisdom of hindsight to have been but ill-informed good intention.

E. Tertiary sources of personal vulnerability

A related and equally important distinction is that a social norm that has an interfering effect is not necessarily an obviously oppressive or unjust norm. In other words, I am postulating an area of unavoidable tension and conflict between personal needs and normative structures, however enlightened those structures may be. Persons can only be persons in relation. They can only realise their authentic personal needs in corporate systems of interdependence, in coherent and stable social structures, which by virtue of their nature tend to be conservative. At their best, such structures represent recently past levels of achievement in realising human capacities. But if, as I postulate, such capacities are potentially unlimited in their range of fulfilment, then tension can arise between the degree of fulfilment evident in prevailing social practices and the innovative thrust of these capacities toward new levels of achievement. So that is one area of unavoidable tension: between the innovative individual and the social conserve, whatever the nature of the conserve.

But apart from the drama of social change and innovation, there tends to be an unavoidable tension between individual needs and the corporate "needs" of the organisation or collective within which the individual seeks fulfilment. The social realities of the human condition being what they are, I postulate that even in the most enlightened organisational development, tension and conflict will arise on the interface between individual need and corporate purpose. What makes an organisation enlightened is that it has built-in procedures for acknowledging such conflict and working constructively with it.

The child faces this tension in a particularly acute form, since the younger she is, the less readily she can grasp that the family collective has a purpose or purposes which may at times legitimately constrain the immediate fulfilment of her human needs. Frustration tolerance, skills in the constructive handling of tension and conflict, all appear to be necessary and legitimate concepts at the level of personal needs. When the capacity to love is fulfilled, it includes, paradoxically, just this ability to accept a measure of personal frustration, to work through conflict to the fulfilment of wider social purposes.

These individual-in-society tensions I call tertiary sources of personal vulnerability because I believe they are intrinsic to social structures as such, however enlightened those structures may be, and only occur in their pure or intrinsic form in organisations that have started to clean themselves up, that have become relatively free of the more obvious distortions and perversions. I see such tensions as a creative issue when human beings start to climb out of their long history of individual and social breakdown, rather than as a contributory factor to such breakdown.

The distresses to which these tensions may give rise will very much be self-generated by autonomous persons who will voluntarily undertake to undergo them as necessary part of personal growth and social change. This is the arena of voluntary, conscious, intentional "suffering": the stress-seeking behaviour of the self-actualising person.

Chapter 6: Human distress

I wish here to discuss in more detail the kinds of emotional distress and associated behaviours that result when needs, especially personal needs, are frustrated and interfered with.

A. Physical distress

I mean, of course, to discuss the emotional accompaniments of the pain, hunger, and so on that result from frustration of physical needs. As I have suggested earlier, emotional distress at the physical level is difficult to disentangle, in humans from the personal distress involved with it, especially in children. In animals of the same species, as we have seen, anger - arising when there is some perceived actual or possible interference with the animal's preoccupation with food, territory, mating, the young - may lead to threat displays, token or minimal fighting, or severe destructive attack. Fear - arising when the organism is approached by another seen to be dangerous and threatening - may lead to immobility and submission, or to flight, or to last ditch counter-attack. In highly frustrating situations set up in the laboratory, animals may exhibit not only direct and displaced aggression but also regression, resignation or apathy and, perhaps most interesting of all, compulsive fixated maladaptive responses. All this no doubt gives us some indication of the response tendencies inherent in the human *qua* animal organism, tendencies always to be taken into account when seeking to understand the distressed behaviour of humans.

Most important, however, is the point already made, that when humans are distressed through physical frustration, there can also be significant additional distress resulting from personal frustrations that may be a consequence of the physical.

B. Personal distress

My main theoretical suggestion is that in human beings there is not only the anger, fear and grief whose equivalents we find in animals suffering some physical interference or threat; there is also anger, fear and grief that is the result of personal needs being interfered with, and this in the human infant as well as in the adult.

1. **Love and grief.** When love needs are frustrated through loss of, or separation or parting from, through indifference or invalidation from or rejection by, other persons in the love relationship, then the resultant distress is experienced as sadness, sorrow, and in its more intense phases, grief. Natural, undistorted grief behaviour appears to involve tears and convulsive sobbing. The function of such behaviour I shall consider later.
 - Love needs are frequently (but not exclusively) very closely interrelated with physical needs that concern sex and parenthood/childhood. Hence many of the most intense human griefs seem to involve disruption of relationships between sexual intimates, between parent and children, between siblings. Although so closely interwoven, the biological can still be distinguished, in analysis at any rate, from the personal. Animal grief,

if present at all (and it often seems to be totally absent), is nowhere near so paroxysmal and soul-searching as human grief can be. But intense human grief can be experienced at the loss of loved persons with whom the mourner has no biological ties; nor can such grief be reasonably reduced in all cases to a mere projection of unacknowledged hidden grief at the loss of kinfolk. Love flows from person to person quite independently of any physical bonds, and its disruption can generate deep and very genuine grief.

- The biological underpinning of a central area of human loving, however, provides humans with a circumscribed powerful crucible for the traumas, exigencies and delights of developing love.
- The clinical and experiential evidence now available indicates that human infants in their earliest years need a rich, sustained, supportive flow of human loving that is intimate, authentic, elegant, imaginative. Without such love, the grief induced in the very small child is profound and seems, if it is left unresolved, to affect all subsequent ability for loving, whether biologically based or otherwise.
- Grieving attends a disruption of both the active and the passive modes of loving: a person grieves when her giving and receiving of love is suspended in a love relationship.

2. **Understanding and fear.** When understanding needs are frustrated through a lack of information or a set of concepts that could make the human situation in particular, or the human condition in general, intelligible and manageable, then the resultant distress is experienced as anxiety and in its more intense phases, fear. If not suppressed, such fear can appear in the body as cold perspiration and involuntary trembling.

- Personal fear of the unknown is often closely combined with the sort of physical fear that arises when the organism is under powerful threat, especially in unsophisticated societies where people need explanatory schemes for natural phenomena that threaten physical life and wellbeing. But there is, I believe, a purely personal or psychological fear that is not necessarily tied in with the sense of physical threat. This is the fear induced by a perceived threat to consciousness, when it is sensed that consciousness is going to be overcome, extinguished, influenced, invaded by impressions, sensations, thoughts, desires, powers and presences for which there is no adequate conceptual scheme available and which are therefore relatively unknown and unmanageable. This threat to consciousness as such may be seen as coming from other persons, the perceived world, something beyond the perceived world, from within the human being, or most generally from the future. The threat is to personal identity, psychological identity as distinct from a threat to the physical integrity of the organism.
- In humans, severe physical threat, where there is a possibility of death, involves also psychological threat, since physical death is an assault of

the unknown on consciousness. But severe psychological threat does not necessarily involve physical threat, although of course it may involve a **fantasised** physical threat. It is interesting that Reich postulated that character armour, the root of all distorted human behaviour in his theoretical scheme, first arose when hominids became self-conscious humans, became introspectively aware of their orgiastic sensations, and through fear of the amazing consciousness-consuming convulsions started to block and wall off their deeper physical sensations and emotions.

- I believe that small children, quite apart from being subject to obvious physical fears, can also be subject to deep personal fears about loss of their tenuous psychological identity when, for example, they are put in strange and unfamiliar situations without being given appropriate information which they can use to, or when they are too young to, orientate themselves conceptually and sustain their sense of identity. Irrational parental authority compulsively and arbitrarily imposed is another, for the child, unintelligible threat to her psychological identity: although this often carries overtones of physical threat also.
 - But as well as the fear involved in not knowing, there is also the corresponding fear in not being known. A person's psychological identity is threatened when she senses that the people who matter around her have no real grasp of the kind of being she is. Again, I believe that for small children this can be a deeply distressing, fearful experience - the sense that parents do not know who is in their midst.
 - A person will be fearful of communicating who she is, of communicating ideas that mark her out as a distinctive sort of person, if she thinks that the prospective listeners have no belief systems that enable them really to understand what she says and give it a sympathetic hearing. Similarly, children may be afraid to announce who they really are, to say things that imply the kind of beings they are, partly because the concepts they acquire with the language may be inadequate, but more probably because they feel or learn that such identity will be socially eliminated by the incomprehension of the audience.
3. **Self-direction and anger.** When the need to be self-directing is frustrated, by some meaningful self-initiated enterprise being thwarted, then the resultant distress is experienced as restlessness and tension, and in its more intense phases as anger. Uninhibited anger behaviour appears to involve high-frequency, vigorous storming movements of the limbs and corresponding loud protest sounds: a burst of verbal and non-verbal somatic righteous indignation, assertion of liberty, breaking the chains.
- Clearly self-direction, the exercise of intelligent choice, can be closely related to meeting physical needs, as when a person elects to move toward a goal that will satisfy a need for food or sex or rest or warmth or shelter. If this move is arbitrarily interrupted there can be a double anger: the anger of organismic need thwarted combined with the anger of

personal choice interrupted. But equally clearly personal anger can arise independently of any obvious physical need frustrated: classically when any organisation arbitrarily and unjustly restricts the range of social options open to persons within its jurisdiction. Those against whom unjust discrimination is exercised may have all their physical needs adequately met yet still experience intense anger. Social injustice and oppression where severe and unwarrantable restrictions are put on personal decision-making is a heavy hammer that ignites the spark of personal anger.

- Children can be angered by the intractability of the physical world, by the frustrating gap between mental intention and physical achievement, by the obstructionist property of objects
- The child's capacity for self-direction appears to be exercised in imaginative play, self-initiated exploration of the environment and of interaction with others, imitation of adults, voluntarily becoming more and more self-directed in managing self and environment. Any arbitrary and ill-considered interruption of these behaviours may lead the child to experience personal anger.
- But it is not only the imposition of the irrational parental authority interrupting the childish exercise of choice that may lay in anger. I believe that the failure of parents to take facilitating initiatives on behalf of the child, to provide conditions for discovery learning, to draw out childish self-direction, can induce deep angers, however defensively buried and occluded they may become.

4. **Interconnections of personal distress.** Only in conceptual analysis can one make such simple and elegant connections between love and grief, understanding and fear, self-direction and anger. Precisely because in reality the fulfillments of these needs are mutually involved in each other, the primary frustration of any one involves secondary frustration of the other two. Primary grief at the sudden loss of a loved person may also involve secondary anger at the sudden permanent restriction on valued and pleasant choices and secondary fear at the prospect of unknowns and uncertainties thrown up by the loss. Similarly with primary anger or primary fear: the other two distresses may be aroused in a secondary manner.

- Or all three distresses may be roughly co-equal, as when some social authority imposes with strong sanctions an unjust separation between persons who love each other: anger, grief and fear may arise in those persons in equivalent measure.
- The relative weighting of the three major distresses is likely to be highly idiosyncratic - a function of the particular persons and situations.

C. Hierarchy of distress

This concept has been reiterated throughout. I think it is important for education, therapy, personal and interpersonal development.

1. **Physical distress via natural causes:** the human animal's anger, fear due to frustration of, threat to, harm to, physical needs and the body caused by natural phenomena - animal attack, natural disasters, the elements, accidents, and so on. There may be little or no personal distress directly generated by the physical distress. But the greater the physical frustration or threat or harm, the more likely it is that there will be significant personal distress caused by it.
2. **Physical distress via human intervention:** the human animal's anger and fear due to bodily dangers, frustrations, pain, caused by the actions of other persons. At the crudest level, these actions may simply involve animal-like competition for food, territory, mates, or protection of the young. Or the actions may be beneficent as in painful medical attention. The actions may also be malicious, as when any kind of physical threat or duress is applied for social ends.
3. **Personal distress via primary sources of personal vulnerability:** grief through personal loss by death or separation from natural causes; fear at the inscrutable, not understood, psychologically menacing phenomena in the world and in the psyche; anger at human purposes thwarted by natural causes. Birth trauma effects.
4. **Personal distress via secondary sources of personal vulnerability:** grief when an interruption of receiving or giving love is the result of deliberate human intervention; fear when psychological identity is threatened by the menacing attitudes of other persons, their inability to understand, their failure to communicate relevant information; anger when the agent's choice and purposes are interfered with, constrained, by other persons. These secondary sources may be face-to-face, organisational or society-wide.
5. **Personal distress via tertiary sources of personal vulnerability:** grief when valid social well-being is voluntarily seen by a person to require a separation from someone she loves; fear when healthy risks having been voluntarily undertaken in the interests of creative social change and organisational development - present a menacing prospect of unknowns and uncertainties; anger when a person intentionally frustrates some significant purpose of her own because she chooses to uphold some wider social purpose incompatible with it. These distresses are all intentionally self-induced, the apparent paradox being that personal needs can be fulfilled by frustrating themselves. But since personal capacities are potentially unlimited in their scope, a present fulfilment may be voluntarily given up - but given up painfully - to realise a possibility of wider fulfilment.

In actual experience, distresses from two or more of these differing sources may occur simultaneously in any one of several possible combinations. The general explanatory thesis I have advanced is that 1, 2 and 3 distresses which I call primary distresses -

combine to produce, when they reach a critical threshold, distresses which I call secondary distresses. Primary distresses may be loosely called distresses of the human condition; while secondary ones, distresses of interpersonal distortion.

In their positive role, when they operate below the critical threshold as creative tensions, primary distresses generate cultural achievement and in turn are reduced by such achievement. Theoretical and applied knowledge in the natural and human sciences reduces fear of the unknown in the world and in the psyche, makes intractable nature more manageable and amenable to the human will, reduces time and energy spent on survival tasks, reduces infant mortality and enlarges the life span so that love is less ruthlessly disrupted by nature, and so on. As a result, cultural achievement becomes more and more self-generating, less and less a mere response to the stress of the given world. Culture responds to culture, idea to idea, personal capacities celebrate their own flourishing and fulfilment as an end in itself.

In their negative role, when they operate above the critical threshold, primary distresses generate interpersonal distortion which tends to become self-perpetuating through negative social practices and institutions handed on from generation to generation, particularly negative child-raising practices and the institutions that surround them. Hence interpersonal distortions can be culturally transmitted, and relatively independent of the particular pervasive set of primary distresses that generated them. If these distresses drop below the critical level and generate cultural achievement, this will occur in the transmitted distorted social institutions, and so we have the phenomenon of cultural distortion, of human knowledge and achievement applied to distorted and perverted ends.

This is a very crude presentation of what in reality must be an immensely complex dynamic system. The variables are so many and their interaction so intricate that what we may expect to see in human societies are enormously varied mixtures of adaptive and maladaptive knowledge and skills, adaptive and maladaptive social practices.

Chapter 7: Effects of distress

A. Degrees of distress

In this and the following section I shall try out a more detailed theoretical model of the way in which distress affects behaviour in humans. To begin with, I postulate three degrees of tension or distress.

1. **Enabling distress.** This is the degree of tension that facilitates behaviour. In animal-like distress of a bodily kind, fear energises effective flight or last-ditch defence, anger energises adaptive aggression as when a parent attacks a dog molesting a child. At the level of personal needs, the distress is such that it provokes personal and interpersonal fulfilment: sorrow at parting provokes loving preparation for the return; anxiety about what is unknown generates systematic enquiry; frustration with the material leads to redoubled effort and application.
2. **Neutral distress.** At both the bodily and the personal levels, the degree of distress is such, the individual is such, and the situation is such that behaviour is relatively unaffected, is neither enabled or disabled. And this refers to distress that is fully registered at a conscious level by the person, not to distress that is subliminally registered, cut off, occluded.
3. **Disabling distress.** This is the degree of distress that produces maladaptive and unfulfilling behaviour. In states of physical threat or attack, fear immobilises where flight is both possible and more effective; anger generates counter-productive berserk attack. When the person is distressed, grief may produce alienation, withdrawal and social incompetence; fear may produce rigid superstitious belief and practice; anger may generate severe depression or useless destructive attack.

It is this disabling degree of distress that I wish to consider in more detail. For a source of stress - a stressor - to be disabling, there must be some critical functional relation between the vulnerability of the subject, the intensity of the stressor and its frequency of repetition (if many stressors, then their combined intensities and frequencies), the available coping resources of the situation. When physical stressors are applied, such as electric shock, light, cold, noise, fatigue, physical danger (as in war), then the vulnerability of the subject is very much a matter of the toughness of the nervous system, to put it crudely. And this seems to apply not only to Pavlov's dogs but also to soldiers under combat conditions.

But personal stressors of a purely psychological and social kind or from primary sources, where there is no physical threat or pain involved, are a different matter. Here the vulnerability of the subject is very much a question of her cognitive appraisal of the situation, the sort of knowledge and coping skills she can bring to bear upon it, of the degree of insight into what is really going on. I postulate, therefore, that the greater the person's insight into the **reality** of the interpersonal stress situation, the less the tendency of the stress situation, the less the tendency of the stress to have a

disabling effect on behaviour. Conversely, the more deficient, inadequate, immature such insight, the greater the disabling effect. On this measure, human infants and small children are the most vulnerable since, however enormous their potential intelligence, their actual ability to understand what is going on is either virtually absent or very limited.

The younger the person, the more it is reasonable to estimate the intensity of the personal stressor in relative independence of the state of the subject; the older **and** more insightful the person (where insight is related to affective and interpersonal skills), the more the intensity of the stressor is determined by how it is appraised. In other words, the more a person's intelligence is functioning awarely in present time with discriminating appraisal, the more she determines what constitutes for her a source of personal distress that is disabling. Such present-time functioning however does presuppose the person is released from the disabling effects of past distress.

The child, then, through lack of cognitive appraisal of sufficient sophistication, is highly vulnerable to personal stressors. And if such a stressor is, say, the distorted behaviour of a parent, then it is both very intense and very frequent. Nor can the environment help, since whatever resources it contains, their effective use depends on the knowledge and skills of the adult or older child.

The younger the infant, the more physically dependent she is and the more intimately I assume her physical and personal needs are interfused, so that any frustration of her physical needs will *ipso facto* be a frustration of her personal needs, primarily her personal needs in their most vulnerable passive form - to be loved, to be understood, to be wisely managed, facilitated and enabled. Conversely, her earliest fulfilment of personal needs will be in terms of the satisfactions of physical need and physical contact.

Once some measure of independence is reached through crawling, exploring, walking and above all talking and comprehending speech, then the child's personal needs can increasingly seek personal fulfilment as such, and can increasingly be frustrated independent of any physical needs not being met.

However a basic principle I assume is that even when the distress is primarily personal, its impact is still psychobiologic; it has a physiological component or basis. This is because the body is the medium of personal needs, and their fulfilment includes distinctive kinds of verbal and non-verbal expressiveness. To frustrate a personal need is to impose a physical stress on the physical mechanisms involved in its fulfilment; this stress is the correlate of the latent or overt psychological distortions of the person.

On this model the human child, that has not been unduly interfered with, has an organism that is spontaneously active with, and expressive of, personal capacities seeking fulfilment in the given world. Any major suppression of this creative psychosomatic spontaneity of the young person is registered as psychosomatic distress, hence there will be a somatic component in the release and resolution of such distress.

B. Disabling personal distress in the child

From the clinical and experiential evidence now available, I postulate the following possible ways in which the human body-mind reacts to intense and/or frequent personal stressors.

1. **Encysting.** The distress is occluded, so that the pain - which would be too great for the child to experience and resolve - does not enter consciousness or (disrupt) distort behaviour but is still latent as a line of stress in the system. This is a strong form of automatic protective inhibition. The possibilities for encysted distress are:
 - It lies latent, never directly distorting behaviour into negative or disruptive forms. Even so, it may affect later behaviour radically by repeatedly inclining the person to do inoffensive or apparently positive things which serve to avoid it, and hence whole areas of potential activity which the person could have entered if the distress had been resolved are permanently shut off. Thus a person may go in for compulsive chastity and meditation as a way of keeping early personal traumas occluded. This is relatively benign but deeply systematic distortion.
 - It lies latent but erupts later in life strongly distorting behaviour when activated by stimuli that key in - in some important way, perhaps that of critical similarity - to the original stressor stimuli. Hence there could be a sudden acute breakdown of behaviour.
2. **Automatic distortion.** The distress is occluded automatically as a form of (weaker) protective inhibition since the pain would once again be too great for the child to experience and resolve. But while the experience of pain cannot fully enter consciousness, the child's behaviour is distorted where the distortion is:
 - A stereotypic and maladaptive attempt to avoid experience of the pain.
 - A stereotypic and maladaptive attempt to satisfy the personal need which the distress-experience frustrated.
 - A stereotypic and maladaptive attempt to draw attention to the child's genuine need for help in getting out of the psychological trap.

Distortion may be

- **Intermittent.** It only occurs periodically as a reaction to particular sorts of triggering situations. In the absence of such situations the distorted behaviour is not evident.
- **Chronic.** There is a persistent mode of being in the world involving attitude, belief and behaviour - that is distorted. The person may confuse her personal identity with such a chronically distorted way of being.

3. **Induced distortion.** The child's distress finds release through catharsis: sobbing, trembling, storming. Thus the child is able to experience and release the pain, but parents and/or other authority figures make persistent demands that the catharsis be shut off, demands which finally become internalised and autogenic. Behaviour then becomes distorted, and the analysis of the previous paragraph applied. Most children will have ample opportunity to engage in distorted behaviour; in distorted forms of play with other children, in the repetitive minor and major wranglings of intra-familial life. But there can be two degrees of **double** induction (both catharsis **and** the resultant distortion are suppressed):

- Parents and/or other authority figures demand that the child suppress some of the distorted behaviour itself, at any rate of the more grossly disruptive and inconvenient forms. In this case, the condemned behaviour may:
 - Undergo further distortion.
 - Become surreptitious and go underground, being practised in private or with underground peers.
- If distorted behaviour is widely and very heavily put down by parents or others, the result may be **induced encysting**: and distress and the distortion are thrust totally below the apparent veneer of conformist behaviour, only to erupt disastrously perhaps at a much later stage.

4. **Distortion hierarchy.** It may not be unreasonable to postulate also a distortion hierarchy. But it clearly should be taken lightly and flexibly, since personal distress is so idiosyncratic.

- Encysted distress, when it finally erupts, produces the greatest distortion of behaviour which has the highest resistance to resolution.
- Automatic distortion will be next in terms of degree of distortion and resistance to resolution, especially in its chronic forms.
- Induced distortion comes last, but only where there is a modest degree of double induction. If the double induction is heavy, then we go back to a.

A particular individual may combine all these three forms of distortion. Given child-raising practices throughout our society, I assume that everyone has some degree of induced distortion and double induction.

- The distortion hierarchy corresponds to three assumed degrees of psychosomatic tension. When the tension is very high, encysting follows; when it is medium automatic distortion results; when it is above the child's threshold of conscious tolerance, then induced distortion may occur where child-raising practices are ill-formed.
- The trauma of birth, of early infancy and childhood are obvious candidates for encysting and automatic distortion.

5. **Physiological correlates of distress** One model derives from the work of Pavlov and Penfield: there are relatively isolated and dissociated areas of cortical functioning, pathologically inert neural circuits, which may correspond psychically to memory images of traumatic events charged with distress-emotions, intact but occluded from consciousness and so producing compulsive distortions of experience and behaviour. The inert or isolated circuit is balanced by a pathological excitatory process elsewhere, this latter being the physical correlate of the distorted behaviour.

- The other model derives from the work of Reich: there is a systematic, relatively permanent, and unconscious contraction of bodily musculature which inhibits the free flow of bio-energy and is the repository of occluded painful emotion. The model extends to include pathologically inert contraction of organ tissue, and pathological hypotony as well as tension of muscle.
- The two models appear to be theoretically entirely compatible with each other, presenting two aspects of the somatic response to disabling distress. Clinically too, the evidence is that there are two complementary gateways to the opening up and dispersal of occluded distress: one is ideational, by the use of powerful provocative imagery by the therapist or others, and the progressive unfolding of associations and imagery within the client's psyche; the other is bodily, by the use of external physical pressure on tense muscles by the therapist and by vigorous mobilisation of body energy undertaken voluntarily by the client.
- These indeed appear to be the four major prongs of the re-integration process:
 - Emotionally provocative imagery from outside.
 - Progressive opening up of associations and images from within.
 - Physical pressure from outside.
 - Voluntary energisation of the body from within.

But more of this later.

6. **The complete distress history** If we look at the whole programme of disabling personal distress in the child, it contains the following factors:

- The external stressor and stress situation.
- The child's degree of discriminating insight and appraisal; its suspension and distortion under stress.
- The child's spontaneously active personal need that is frozen, suspended, interrupted, frustrated by the stressor.
- The child's resultant psychosomatic distress.

- The occlusion from consciousness of this pain, the occlusion being either automatic or parentally induced - both leading to self-regulating repression.
- Resultant distortion of behaviour, immediately or later in life, intermittent or chronic.
- Further surreptitious distortion that follows from some of the original distorted behaviour being parentally suppressed.
- The child's unreal, alienated conformist behaviour - itself a special sort of distortion demanded, and adopted, for social survival.

A child, then, may be interfered with in three successive waves of attack. First, the spontaneously active personal need may be suppressed; secondly, the attempt to discharge cathartically the resultant distress may be suppressed; thirdly, some of the distorted behaviour that follows from the first two suppressions may itself be suppressed. Indeed, a fourth wave of attack is possible, if further surreptitious distorted behaviour is found out and suppressed.

C. How does personal distress distort behaviour?

Various theories have been put forward. I do not propose to review them in detail but only to discuss the most plausible possibilities as I see them.

1. **The record theory.** The whole of the stress situation, including the child's state of being, is recorded in literal indiscriminating detail in the child's psychosomatic system. This is an imposed programme, not a selected programme, that is recorded:

- Because the child has only a primitive appraisal and selector ability and
- Because this ability is itself interrupted and suspended under the impact of the trauma.

Because the distress or pain charge on the programme recorded is occluded from consciousness (automatically or by constraint), we then have a relatively autonomous dynamic system powered by two frustrated energies - the energy of a frozen or suspended personal need, and the energy of undischarged distress emotions. In any future situation sufficiently similar in relevant respects to the original stress situation, there are two interrelated effects:

- The original record replays itself in experience and behaviour.
- Further distress is generated both by the new situation and by the counter-productive effects of the replay, so that the original recording becomes, as it were, more deeply grooved and ingrained with systematic elaboration of the early programme.

2. **The symbolic maladjustment theory.** Given that the undischarged emotional pain and the frozen personal need are occluded from conscious experience, then all subsequent distorted behaviour can be seen as a compulsive, stereotypic and maladaptive (self-defeating and self-punishing) attempt to alleviate the hidden pain and satisfy the frozen need. To use an energy model again, the trapped energies of the pain and the need circle round each distorting surface behaviour which unawaresly acts out the blocked pain, the blocked need, or both combined. Thus a child may act out hidden grief by becoming withdrawn, alienated, shutdown, with no available attention for others; or the same child may act out a frozen need for love by compulsive clinging and demanding behaviour; or may combine the two by lying or curling against her mother in a withdrawn and emotionally inaccessible state. In later life, all kinds of behaviour may be seen as a symbolic acting out of the pain, the need or their combination: adult development and opportunities are co-opted into the compulsive maladjustment. But in all instances, the distorted behaviours are symbolic of, and give a clue to, the pain and need occluded.

3. **"The way the world is" theory.** This is a theory which I have devised to clarify the human situation, but it is entirely compatible with the previous two theories as we shall see below. Given human beings with capacities for love, understanding and self-direction, in both active and passive or recipient forms; given that the world is such that the need to fulfil these capacities can be blocked through an overload of distress, and that the release of this distress can itself be blocked; then the blocked need and the blocked distress distort behaviour into certain characteristic forms - as follows:
 - **The need to love blocked:** compulsive possessiveness, irrational claims, demands and expectations, rigid helping and rescuing behaviour.
 - **The resultant grief blocked (that is, the grief that follows from the need to love being interrupted):** compulsive alienation, distancing, emotional withdrawal from others. This item and the previous item together produce the typical human phenomenon of possessive companionship combined with emotional sterility.
 - **The need to be loved blocked:** compulsive dependency, sympathism, attention-getting, clinging, huddling behaviour; trying-to-please behaviour.
 - **The resultant grief blocked (that is, the grief that follows from the need to be loved being interrupted):** compulsive self-pity, self-absorption, poor me. These two may combine so that the person typically clings but without reduction in anxious self-pity and self-absorption.
 - **The need to understand blocked:** compulsive dogmatism and authoritarian pronouncements of belief without appropriate supporting rationale.
 - **The resultant fear blocked (that is, the fear that follows from the need to understand being interrupted):** compulsive propitiatory

rituals, superstitious practices. In so many human cultures, these two combine as uncritical dogmatic theologies supported by propitiatory rituals.

- **The need to be understood blocked:** compulsive self-doubt and insecurity about one's own identity, extended into compulsive scepticism and cynicism.
- **The resultant fear blocked (that is, the fear that follows from the need to be understood being interrupted):** compulsive social isolation and social withdrawal, retreat into private obsessive ideation. These two typically combine in the self-doubting, insecure, obsessive social isolate.
- **The need to be self-directing blocked:** compulsive, unsolicited, inappropriate involvement in the choices, lives and affairs of others; self-defeating, stereotypic maladaptation to situations.
- **The resultant anger blocked (that is, anger that follows from the need to be self-directing being interrupted):** compulsive aggression, destructiveness, malice aimed at others directly or through things. These two typically combine in compulsively disruptive and destructive interference in one person's affairs by another; or the distortion may be reciprocal.
- **The need to be freely engaged with directions from a greater whole blocked:** compulsive allegiance to cults, causes, ideological movements; blind or stubborn fanaticism of membership.
- **The resultant anger blocked (that is, the anger that follows from the need above being interrupted):** despair, dismay, depression, compulsive self-destruction, suicide. The typical combination of these last two is that of the unhappy fanatic, the compulsively miserable convert, the actively participating member who gets no relief from internal despair.

As before, a scheme of this sort only separates out in analysis what is subtly and intricately interwoven in the real world. It is presented here not as a dogmatic typology but merely as a conjecture, a suggestion of certain typical kinds of distortion that may occur as a function of human needs and distresses being interrupted. And the scheme is conceived primarily in relation to personal stresses caused by human intervention. The distortions are all forms of symbolic acting-out behaviour, that is, the behaviour symbolises either a blocked need or blocked distress or both simultaneously. But the behaviour is also self-locking or self-defeating: it perpetuates its own maladaptation.

4. **The three theories combined.** Distorted behaviour as the elaborated replay of an old distress recording, as a symbolic, self-defeating acting out of blocked need and blocked pain, as typical forms that follow from general features of the human condition - all these are three compatible interpretations of the same

phenomenon. The somatic correlate of the record theory would be that the early stress experiences induce in the organism a chronic cortical malfunction (perhaps a rigid polarisation of inhibitory and excitatory cortical processes) and associated with this a chronic unconscious tension and hypotony of the muscles together with other physiological distortions. I will focus on the record theory.

5. **The personal distress record from human sources of distress.** This is the notion introduced in 1. above. If we consider an early imposed programme elaborated by repetitive replays, what are the main voices on the record and what are they saying?
- The external oppressor's voice: "Don't do this, don't do that; don't be this, don't be that." "You should/ought/must do/be other than you are doing/being." The person can replay this voice at others so she in turn becomes the moralistic oppressor of others.
 - The frozen need's voice: "But I need, I need, I need... (to love, to understand, to choose ... to be loved, to be understood, to be enabled)". As the record replays in similar situations, this hidden voice will compulsively act itself out in symbolic distortions of behaviour - self-defeating attempts to alleviate the need, to lift the needle off the cracked record.
 - The voice of suppressed distress: "I'm hurting." "I can't bear the pain." or "They won't accept my pain." This contained pain will also act itself out in symbolic but self-defeating distortions of behaviour - self-defeating in their maladaptive attempts to alleviate the pain.
 - The voice of suppressed distortion: "They won't catch this behaviour, I'll hide it." Distorted behaviour becomes surreptitious.
 - The conformist's voice: "I'm no good. I should be other than I am. I should and shall behave in ways that they demand and expect." This is the inner correlate of the external oppressor, so that the person becomes her own internal moralistic oppressor, putting herself down and thereby sustaining the suppression both of her deeper human needs and of the resultant distress. This, however, is in early years a very adaptive voice for, given the child's total situation, it is effectively the voice of social and personal survival.

Many modern radical therapies and growth methods tend to work almost exclusively in the area of this distress record, where the stressor is a human oppressor, typically the parent whose own behaviour is distorted. But there is another distress record, and in any comprehensive approach to personal growth this has to be taken into account and dealt with independently and in its own right. This is the following:

6. **The personal distress record from primary sources of distress.** These are sources of tension inherent in the *umwelt*, the given scheme of things, prior to human invention and intention. My general theory here, to remind the reader,

is that an overload of primary distresses rooted in the human condition can break behaviour down into interpersonal distortions so that secondary distresses of person hurting person can accumulate. I have already suggested there may be some degree of functional autonomy between primary and secondary sources of distress, in the sense that when a particular set of primary distresses drop below the critical threshold at which they break down, interpersonal distortions can be perpetuated by institutionalisation and cultural transmission. However, I also suggest that so long as secondary distresses abound on this planet, there is a highly general, unresolved primary distress recording which underlies and underpins the particular secondary distress recording a person is playing.

To clarify the nature of this record, we can look back to the six primary sources of distress given in Chapter 2 and speculate on the voice of minimal overload, the voice that keeps the tension bearable.

- The voice of the person distressed by survival tasks: "Let me give priority to physical survival and physical fulfilment. "
- The voice of love distressed by the universal phenomenon of separation: "Let me stay close together with the tribe."
- The voice of inquiry distressed by the inscrutability of the world: "Let me cling to what I already believe."
- The voice of free choice distressed by the restrictive obduracy of the world: "Let me repeat familiar routines."
- The voice of the person distressed by the instability of unprogrammed and unlimited potential: "Let me settle for minimal self-development."
- The voice of the person distressed by the presence of other persons similarly distressed: "Let me keep strangers out. "

No amount of work at the level of secondary distress, of the effects of parents' mismanagement and of rigid social practices, will of itself, I believe, break up these primary recordings. My point here is that simply participating in the human condition at all can, through cumulative tension, generate a set of mutually interlocking compulsive recordings that keep the person in a very minimal state of development. In one sense, these recordings have a psychological survival value since the person shuts down into a rigid and restrictive attitude before the level of primary stress becomes too much to handle. But in another and more radical sense, they are chronically maladaptive since they dam up a progressively mounting tide of personal frustration which eventually distorts behaviour into interpersonal strife. They call for a transpersonal, a spiritual, opening and awareness. See *Sacred Science* (Heron, 1998), Chapter 19: Co-creating, which presents a theory of the transpersonal context of the human condition.

References

See the list of titles in the Foreword.

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