

*'A poor model for those in training':
The case of Thomas Szasz*

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...Szasz may be a poor model for those in training.
Hugh Hetherington (2002: 28)

I have never found that people go wrong from ignorance, but from want of consciousness. Even the ignorant are ignorant because they wish to be—an ignorant in bad faith.

Lord Acton (1988: 670)

Two papers in the July 2002 issue of this Journal contain critical remarks on the work of Professor Thomas Szasz. The authors also criticize those existential therapists and thinkers who have found value in Szasz's work. Thus, one of the authors, Darren Wolf, writes, of 'us existential therapists', that (2002: 299)

We have taken on board far too readily, in my opinion, the assumptions of Szasz and others around the whole area of mental illness...

The other author, Hugh Hetherington, noting (2002: 227) that Szasz is on the editorial board of *Existential Analysis* and that 'some existential thinkers laud his views', warns (2002: 228):

If our aim, in life, as well as in therapy, is to: 'attempt to remain as open as possible to whatever presents itself to our relational experience... to remain accessible' (Spinelli, 1997: 8) then Szasz may be a poor model for those in training.

This is an interesting situation, which deserves some consideration. No other member of this Journal's editorial board has been criticized in this way in its pages.

Professor Szasz is a long-standing member of the board. Even before being invited to join it, he had played an important part in the activities of the Society for Existential Analysis. He was one of the first people invited to address the Society after it was founded in July 1988, and the first issue of this Journal printed an article¹ by Szasz (1990a) related to his seminar. The seminar itself, in February 1989, was described in an article in the Society's Newsletter for 1989, which was reprinted in the *Hermeneutic Circular* on the occasion of Szasz's eightieth birthday (Ticktin 2000 [1989]). Szasz was invited again in December 1991, this time to give the main lecture at the Fourth Annual

Conference of the Society, which was devoted to discussing his views, as was the third issue of this Journal (July 1992), which carried the cover title, 'Thomas Szasz on the Therapeutic Dialogue'. He first appeared on the editorial board of the Journal in the fifth issue (July 1994).²

The present paper will examine what new insights are offered by Hetherington's and Wolf's discussion of the work of Thomas Szasz and its relation to existential analysis.

Our approach will be more phenomenological if we begin with a substantial quotation, as a precaution against quoting isolated phrases or sentences out of context.

Hetherington (2002: 227–228) writes about Szasz as follows:

While good doctors and therapists may aspire to be open, some are surprisingly prone to adopt positions based on convictions and conclusions.

Let us take Thomas Szasz and Ernesto Spinelli as examples. The former offers an example of ideological conviction that could get in the way of good therapy or philosophising. The latter offers a paradigm of a more apprehensive and less comprehensive approach. Of course, Szasz has never professed to be an existentialist; but this did not deter him from assuming that his views were 'in harmony and sympathy' with an existential audience in a speech delivered to the 4th SEA conference in December 1991. Dr. Szasz is also on the board of the Existential Analysis Journal and some existential thinkers laud his views. Buffon's saying 'le style est l'homme même' suggests that we can gauge a persona and world view from style as well as content. Spinelli's style in speech and writing tends to be careful, tentative, gently probing, philosophical, open. Szasz's style tends to be closed and might be seen as slightly bombastic. Conclusions have already been drawn – and here they are! Spinelli has a view, of course; but it emerges, lets itself be known, disclosing itself, almost in the manner of Being in Heideggerian thought. There is also a seemingly sense of the provisional, reminding us of temporality.

Here they are, each outlining his view of what constitutes therapy:

It always seemed obvious to me that the so-called therapy of neurotics consisted of...

(Szasz, 1995: 95)

Right from the womb, Szasz has had a view! Even more worryingly, he has nursed the same view, unexamined, to the present moment...

As I personally see it, then, therapy, at its most fundamental level, involves...

(Spinelli, 1997: 1)

The repeated parentheses and commas in some of Spinelli's writing may irritate some, but they reflect care and philosophical doubt rather than overblown conviction disguising anxious doubt; open concern and anxiety rather than an attempt to exclude these reflectors of Being.

Szasz is working via comprehension and has (surprisingly early in life) formed convictions. Spinelli is working, via apprehension, towards meaning. The latter approach resonates with the Heideggerian notion that things matter to us, already have meaning for us; that true knowing can be uncovered, got back to, as if for the first time, via un-knowing. Much of T. S. Eliot's poetry also touches on this. The recovery can never, of course, be complete.

If our aim, in life, as well as in therapy, is to: 'attempt to remain as open as possible to whatever presents itself to our relational experience... to remain accessible' (Spinelli, 1997: 8) then Szasz may be a poor model for those in training.

Furthermore, he is unashamedly dualistic in his thinking, proclaiming that illness 'can affect only the body' so that 'there can be no mental illness' (Szasz 1972: 275). A consequent resistance to 'treatment' of 'mentally' ill people (for example, by medication) is a harsh example of relinquishing our always possible obligation to others. It also defies the logic of existential analysis applied to clinical disturbances for, as Cohn points out, one cannot rule out the effectiveness of a physical remedy in the case of a psychological disturbance' (Cohn, 1997: 66). The reason is that we are in a total situation in which body and mind are simultaneously implicated.

The above passage consists of ten paragraphs.

In the first nine paragraphs, we are not told what Szasz's 'positions' or 'conclusions' are, or what his 'ideological conviction' is, though we are told that he *lacks* one kind of 'ideological conviction', namely, 'Szasz has never professed to be an existentialist'.

We are given what we are told is an example of 'each outlining his view of what constitutes therapy'. However, we do not learn what these views are. We are given the beginnings of two sentences, represented as quotations from Szasz and Spinelli, to exemplify their respectively 'closed' and 'open' styles. Each incomplete sentence promises to say something about 'therapy', but is broken off, in this passage, before it can keep its promise. We are urged to see, in each case, 'le style' as 'l'homme même'.

The tenth paragraph begins: 'Furthermore...'. This sounds as if it is going to continue the theme or themes of the first nine paragraphs, in confirmation perhaps of what they have said or shown about Szasz's style, or way of relating to an audience. It does so, in that it continues to characterise Szasz's 'thinking' and his mode of speaking or writing; but it also, for the first time, quotes two short, but complete, sentences of Szasz's. These sentences are introduced as follows:

Furthermore, he is unashamedly dualistic in his thinking, proclaiming that illness 'can affect only the body' so that 'there can be no mental illness'.

The reader is told, in advance, that Szasz's 'thinking' is 'dualistic', and that Szasz is not 'ashamed' of this, though by implication he should be. The reader is told, not that Szasz states, argues, or gives evidence for, his view on 'mental illness', but that he 'proclaims' it. More subtly, the linking word 'furthermore' suggests that Szasz's two short sentences, together with their *content*, are *themselves* merely further manifestations of his 'closed', 'slightly bombastic' style.

In what follows it will be important for us not to lose sight of the distinction between style and content, in so far as they can be kept distinct.

Let us start with style.

What evidence does the passage present for its assertions about Szasz's style? It cites two examples, one spoken and one written. In the first, Szasz speaks to his audience of 'harmony and sympathy'; in the second, he writes, 'It always seemed obvious to me...'

Let us examine them in turn.

First, what did Szasz say about 'harmony and sympathy', and in what context?

On 14 December 1991, at the Fourth Annual Conference of the Society for Existential Analysis, Thomas Szasz gave a largely improvised lecture, 'Taking dialogue as therapy seriously: "Words are the essential tools of therapy"' (Szasz 1991a,b; Jonathon 1992; Stadlen 2000c).³

Szasz began his address with a warm compliment to his audience, saying, as Hans Cohn reported, that it was 'an unusual pleasure to speak to a group with which I can feel in harmony and sympathy even before I start' (Szasz 1991a,b; Cohn 1992: 24; Sabbadini 1992: 26).⁴ Cohn wrote (1992: 24) that it was 'not surprising' that Szasz felt this way,

...for he clearly shares many of the assumptions of an existentially orientated psychotherapy. His insistence on the equality of therapist and patient, his refusal of the power games which are so often the frame-work for the therapeutic enterprise, his denial of the possibility of predetermining the result of therapy – all this finds echoes in an existential conception. The aim of therapy is defined as making 'the patient more free to act in the world as he wants to act' – in other words, it is defined by the patient rather than the therapist, and this again corresponds to an existential approach.

Existentialists would also fully agree with Szasz's rejection of the medical model, at least in the form in which it has established itself at present.

Moreover, this was the second time Emmy van Deurzen had invited Szasz to address the Society. She had first met him at a conference in London in 1977, fourteen years earlier.⁵ She was moved by Szasz's passion for personal freedom and responsibility. She invited him to speak to the Society because she thought, and still thinks, he embodies the 'existential attitude' (van Deurzen 2003).

His first presentation to the Society was on 11 February 1989⁶ (Szasz 1989, 1990a; Van Artsdalen and Zanger 1990a,b; Ticktin 2000 [1989]). It was a spontaneous seminar, lasting three hours. A videotape (Szasz 1989) shows van Deurzen warmly introducing Szasz, who gives a short, pensive and passionate, account of the heart of his practice, and then invites questions, saying he prefers dialogue. At one point, Szasz describes himself, in his practice of psychotherapy, as an 'existential behaviourist', in that his primary concern is what people choose to do, not what is in their 'minds'.

On the evening of 13 December 1991, again at van Deurzen's invitation, Szasz, in his fine academic robes, had given the address at the Regent's College School of Psychotherapy and Counselling graduation ceremony. He had expressed his pleasure at the creative and original titles of the dissertations on psychotherapy and counselling for the degrees he was presenting. As he said, at 99% of university psychology departments such titles would be unthinkable. At the reception afterwards, he had had friendly

conversations with a number of people. Ernesto Spinelli describes his conversation with Szasz that evening in his book, *Demystifying Therapy* (Spinelli 1994: 62, n.; 2003). Spinelli had to return to Canada the next day, the day of the conference, and so could not attend it. He regretted this, as he, too, regarded Szasz as a very suitable person to address the conference. He saw Szasz as not following a specific existential philosophy, but as concerned to facilitate an open-ended descriptive-phenomenological exploration of the client's world (Spinelli 2003). However, many of the people with whom Szasz spoke at the reception that evening were in the audience at the Fourth Annual Conference of the Society the next morning, 14 December, in the same lecture hall where the graduation had taken place. Szasz had also, a few minutes before his talk to the conference that morning, noticed in the audience, and run down from the podium to greet with a warm and delighted embrace, his old friend Aaron Esterson, a man whom, Szasz has told me, he 'loved at sight'.

What happened next can be seen and heard, in greater detail than in Cohn's brief but accurate report, on the videotape of Szasz's speech (Szasz 1991b). Emmy van Deurzen introduces him: 'I feel extremely proud and honoured to be able to introduce to you today Professor Szasz...'. Szasz then says (my transcription):

Emmy, thank you again, thank you for your kind introduction, and for inviting me to come to London, and to speak at this conference also. I feel very pleased and honoured to be here and to speak to you. I feel a little bit like I'll be carrying coals to Newcastle. On the other hand, it's unusual...it's an unusual pleasure to speak to a group with which one...I can feel in harmony and sympathy even before I start, so I mean, so there isn't this sense of having to explain something which perhaps most people in the audience feel a priori antagonistic to or alienated from.

This, then, was the social context of Szasz's remark about feeling in harmony and sympathy with his audience.

The reader will, I hope, forgive me for repeating how Hetherington describes the occasion (2002: 227):

Of course, Szasz has never professed to be an existentialist; but this did not deter him from assuming that his views were 'in harmony and sympathy' with an existential audience...

This account, which gives no source, distorts what Szasz said. It changes Szasz's opening remark, that *he* felt 'in harmony and sympathy' with his audience, into an 'assum[ption]' that 'his views' were 'in harmony and sympathy' with *it*.

This curious English⁷ can only mean that Szasz was claiming to know that the audience was 'in harmony and sympathy' with Szasz's views.⁸

Hetherington's single word 'deter' reinforces the transformation of Szasz's courteous introductory comment into a narcissistic presumption, and represents the audience as 'existential' in name but unphenomenological, and indeed prejudiced, in practice. For what truly 'existential' audience would be so closed as to be swayed by the fact that the speaker did not 'profess to be an existentialist'?

As it happens, the conference was open to the public. A large audience heard Szasz. That it was an ‘existential audience’, whatever that would mean, is itself an assumption.

It is clear, however, that Szasz was *justified* in feeling supported by leading members of the Society. This does not mean they agreed with everything he said on all topics.

At the end of the conference that evening, Szasz remarked (1991b, my transcription):

I really can't recall any occasion when—in recent memory, or perhaps altogether—in which so much thoughtful attention has been given by so many nice people to really crucial issues, and I thank you all.

Hetherington had access to the correct version of Szasz’s ‘harmony and sympathy’ remark, as he refers to Cohn’s (1992) and Sabbadini’s (1992) articles where it is quoted.

As for Szasz’s remark, ‘It always seemed obvious to me...’, as we saw, Hetherington introduces, quotes, and comments on it, as follows (2002: 227–228):

Here they are, each outlining his view of what constitutes therapy:

It always seemed obvious to me that the so-called therapy of neurotics consisted of...

(Szasz, 1995: 95)

Right from the womb, Szasz has had a view! Even more worryingly, he has nursed the same view, unexamined, to the present moment...

Hetherington implies that, if Szasz is telling the truth in saying that something ‘always seemed obvious to him’, then ‘right from the womb, he has had a view’, and ‘has nursed the same view, unexamined, to the present moment’. Hence, if Szasz is telling the truth, he is infantile (‘womb’, ‘nursed’, ‘unexamined’). If, on the other hand, Szasz is not telling the truth, then he is both infantile and a liar, because he is making a false claim which, if true, would reveal him as infantile.

Hetherington’s words suggest that, whatever Szasz is, truthfully or untruthfully, saying ‘seemed obvious’ to him, by that token cannot be true. Hetherington does not tell the reader *what* Szasz says ‘always seemed obvious’ to him.

Nowhere does Hetherington allow for the possibility that, when Szasz says something ‘always seemed obvious’ to him, this might be both true and reasonable.

In ordinary English, ‘It always seemed obvious to me...’ does not mean that the speaker is claiming that ‘right from the womb’ he ‘has had a view’. It means that, as far as he can remember, from the time when he first began to consider the matter, something seemed plain to see, though not necessarily as plain as it seems now.

What Szasz actually wrote was the following sentence (1992: 2):

It always seemed obvious to me that the so-called hospital treatment of psychotics rested on the psychiatrist's power to imprison his patient; that the so-called psychotherapy of neurotics consisted of talking, listening, and observing certain

rules about the interaction between therapist and patient; and that neither of these interventions is, strictly speaking, medical in character.

What Hetherington represents as a quotation from Szasz is, therefore, not a quotation at all. Hetherington leaves out a sequence of seventeen-and-a-half words, but does not indicate to the reader, with ellipses or an author's note, that he has done so. This neglects elementary rules of scholarship. It again distorts what Szasz is saying. How could such a distortion illustrate Szasz's style?

Szasz provides some of the evidence for what he is saying in his most recent book, *Liberation by Oppression: A Comparative Study of Slavery and Psychiatry* (2002a), published when he was eighty-two. In it, he describes (2002a: 13–14) how, as a child and adolescent in Budapest, he made certain observations:

One of my most vivid childhood memories is being forced, when I was six, to go to school. I wanted to stay home. Why did I have to go to school? Because, I was told, all children my age went to school, and because it was good for me. It didn't feel that way.

This was the beginning of a lifetime's questioning. In due course, he learned that

...people who did bad things were locked up in bad places; that there were two kinds of bad people—criminals and crazies; and two kinds of places where they were locked up—prisons and mental hospitals.

Continuing his investigations, he reflected:

Adults who are labeled 'mentally ill' are not children. Most of them have not been convicted of a crime. Mental illnesses, whatever they are, are not contagious. Why, then, are persons with psychiatric diagnoses deprived of liberty? According to the authorities, mental patients are ill and dangerous; they need to be institutionalized for their own welfare and for the protection of society. This explanation never made sense to me.

And so:

By the time I was an adolescent, I concluded that people declared to be crazy are incarcerated because they embarrass their family; that removing them to insane asylums serves the interests of their relatives and other members of society; and, most importantly, that inquiring into the justification for locking up mad people is taboo. Crazy people belong in madhouses. Only a crazy person would ask, why?

Szasz has told me (2002b) how deep an impression Mark Twain's *Huckleberry Finn* (n.d. [1885]) made upon him when, as a boy, he read it in Hungarian, and, as a man, in English. Szasz was moved that Tom Sawyer, 'an ignorant child', could recognise the 'evil of slavery', although the adults could not. Szasz later drew detailed, telling

comparisons between slavery and involuntary psychiatry, in 'The sane slave' (1971b), *Psychiatric Slavery* (1977b), and *Liberation by Oppression* (2002a) itself.

His childhood and adolescent observations were confirmed when he became a physician and psychiatrist in the United States:

...the involuntary legal status of the mental hospital patient became, for me, the defining characteristic of psychiatry as a medical discipline...

We can now see what Hetherington has done in offering a purported example of Szasz's style. By omitting the crucial first clause, about the involuntary 'treatment' of 'psychotics' as imprisonment, he has destroyed the subtly articulated complexity of Szasz's sentence. This is unphenomenological, to say the least.

Hetherington has cut the moral heart out of the sentence, without telling the reader.

It is important to note that Hetherington does not indicate whether Szasz's 'view' on 'therapy' is an empirical one, which could be true or false, or an ethical one, or both.

Szasz's writings provide ample testimony that, far from 'nurs[ing]' his views 'unexamined', he deeply examines and questions even what seems obvious to him. He has devoted his life to testing what seems 'obvious' or 'self-evident', whether to himself or to others, by taking it as an hypothesis and exposing it to the possibility of contradiction in the light of argument and evidence.

The official records of the court stenographer in the case of 'Mr Louis Perroni' heard on 12 April 1962 in the 'Onondaga' County Court, in Szasz's book *Psychiatric Justice*, report that Thomas S. Szasz was 'called and duly sworn' (Szasz 1965a: 123). He testified (1965a: 128) that, in his view, 'Mr Perroni' was competent to stand trial. He was asked, by 'Jerome Gross, Esq.', acting for the defendant, 'Is there the slightest doubt in your mind, Doctor, about your conclusion?' Szasz replied: 'No more doubt than about anything else I have in my mind. I always have doubt.'

At the same time, on moral questions, there is an urgency in Szasz's writing, a passionate commitment, a responsibility to his fellow human beings, which is absolute. This writing, whatever Szasz has or has not 'professed to be', is in the authentic existential tradition, from the Bible through Kierkegaard to Levinas and beyond.

Hetherington (2002: 227) cites Szasz as an example of 'ideological conviction that could get in the way of good therapy or philosophising'. It is not clear whether, in Hetherington's view, having 'convictions' differs from having principles. Hetherington invokes Kierkegaard to support his case against 'convictions' (Hetherington 2002: 229), but appears unaware that Kierkegaard (1978: 340) wrote in his diary that he had 'had a polemic view of all existence since childhood'.

One of Szasz's favourite authors, Lord Acton, wrote (1988: 652): 'A convinced man differs from a prejudiced man as an honest man from a liar.' And (1988: 655): 'Prejudice to conviction as pride to dignity.'

Szasz has written in his book, *Karl Kraus and the Soul-Doctors* (1977a [1976b]; 1990b [1976b]), about character assassination, and about rhetoric, noble and base. He has argued, in *The Myth of Psychotherapy* (1979b [1978b]: 208) and in this Journal (1992: 7–8), that 'psychotherapy' itself should be *iatrologic*, 'a branch of rhetoric and logic'. He has criticized the base rhetoric of writing on psychiatry and psychotherapy that purports to be 'value-free'.

Szasz's own first paper was published fifty-six years ago (Szasz and Elgart 1947). In 1975, he wrote a new preface (1975a) for the second edition of his first book, *Pain and Pleasure* (1975c [1957]). In it, he explained (1975a: viii):

I was then not only trying to understand this subject but was also trying to establish my professional identity. As a result, and perhaps because this was the only way I was then comfortable writing, I wrote largely in what I now regard as the professional jargon of psychiatry and psychoanalysis...

...I have added, preceding the complete reprinting of the original edition, a new chapter which expresses my present views, in my present style, on the subject.

The new chapter (Szasz 1975b) makes a striking contrast with the rest of the book. Since then, a further twenty-eight years have passed. Szasz's style has continued to evolve. How could one do justice to it with part of one sentence, and not a real one at that?

It has been necessary to discuss the above two examples in rather lengthy detail. It is easy to smear, but less easy to reveal the smearing.

Hetherington's discussion of Szasz's style is inextricably tangled with his insinuations about content, even when he fails to tell the reader what the content is. But he and Wolf do make some direct criticisms of what Szasz says. What are they?

Hetherington alleges (2002: 228) that Szasz is 'unashamedly dualistic in his thinking, proclaiming that "illness can affect only the body" so that "there can be no mental illness"'. Wolf quotes Szasz (2002: 299): 'Strictly speaking, disease or illness can affect only the body; hence, there can be no mental illness.' And: 'Mental illness is a metaphor.' The quotations are from a Summary that Szasz added to the second, revised edition of *The Myth of Mental Illness* (1974a [1961]: 267–268).

Let us first clarify what Szasz means by 'affect'. Students sometimes argue that he is saying bodily illness cannot affect mind or mood, which would of course be absurd. Nobody who had read the book, rather than just the Summary, could think he means that. The context makes his meaning clear. I recently asked him, however, if he could substitute another word for 'affect', to preclude such misunderstanding. He responded immediately (Szasz 2003): 'Disease can *predicate* only the body (not mind).'

Hetherington (2002: 222, 228) implies that Szasz's 'thinking' is self-evidently 'dualistic', since 'existential thinking posits a connectedness which transcends' such notions as 'mind/body' and 'subject/object'. However, Hetherington, while warning against 'conclusions', seems himself to be falling yet again into what Flaubert, quoted by Binswanger in his 1945 lecture, 'On the daseinsanalytic research direction in psychiatry' (1947 [1946]: 192; 1958a [1946]: 192; my translation of title), called 'la rage de vouloir conclure'.

On the next page, Binswanger called the 'subject-object-split' the 'cancerous evil of all psychology' (see Stadlen 2003b, in this issue of this Journal). But, in 'Madness as life-historical phenomenon and as mental illness: The case of Ilse', also published in 1945, Binswanger (1957a [1945]: 54; 1958b [1945]: 235–236; my translation of title and text) wrote how close to him was the thinking of his friend, the philosopher Paul Häberlin, who

...by strictly logico-ontological deduction shows that 'the psyche' can never be ill, that no man can be ill 'in his psyche'.

Häberlin had indeed written (1941: 94; my translation and brackets):

Illness is thus in the end always unruliness [Unbotmäßigkeit] of the body. The psyche [Seele] itself is never ill. ... No man is ill in his psyche.

'Seele' can, of course, be translated as 'psyche', 'soul', or 'mind'.

Is Binswanger, then, a 'dualist'? Heidegger (1994 [1987]: 286; 2001 [1994]: 227; Stadlen 2003b) criticized Binswanger's proposals for overcoming the 'subject-object-split' as based on a misunderstanding of Heidegger, but did not criticize Binswanger's disbelief in 'mental illness'. Indeed, Eckart Wiesenhütter wrote (1979: 158, my translation) about Heidegger:

Once he said frankly that he was not convinced of the correctness of the exclusively medical interpretation of schizophrenia as illness. Could it not even simply be a question of an 'other' kind of thinking?

(See Stadlen 2003a: 173–175; Stadlen and Stadlen 2004.)

Moreover, Sartre wrote, in his Foreword (1964 [1963]) to Laing and Cooper's *Reason and Violence: A Decade of Sartre's Philosophy* (1964: 7):

...je tiens—comme vous, je crois—la maladie mentale comme l'issue que le libre organisme, dans son unité totale, invente pour pouvoir vivre une situation invivable.

In my translation:

...I—like you, I think—regard mental illness as the way out that the free organism, in its total unity, contrives in order to be able to live an unliveable situation.

Binswanger, Häberlin, Heidegger, and Sartre are thus all saying something rather close to what Szasz is saying. This does not prove that any of them is right. It does, however, suggest that what Szasz says cannot be simply disposed of by a vague invoking of 'existential thinking'.

Just what Hetherington means by 'existential thinking' is left undefined, and appears somewhat eclectic and ill-thought-out. For example, he remarks (2002: 222):

Existential thinking proposes that we are 'thrown' into a world-with-others. Intersubjectivity is a given, ab initio. There is always therefore a social dimension to existence.

The first sentence is consistent with Heidegger's position, but the second two are not. Heidegger writes of 'being-with' and 'thou-thou relationships' (1994 [1987]: 145, 263; 2001 [1994]: 111, 210). He does not write of 'intersubjectivity', which presupposes a

relationship between ‘subjects’. As Heidegger says (1986 [1927]: 118; 1962 [1927]: 155; 1996 [1927]: 112; my translation and brackets): ‘The world of Da-sein is *with-world* [*Mitwelt*]. Being in the world with others is not one ‘dimension’ of being human. It is what being human *is*.

The amateurishness of Hetherington’s ideas on ‘existential thinking’ is further shown by his remark (2002: 222) that ‘the “body” was constantly pushed into the background in philosophical discourse until Merleau-Ponty decisively reinstated it’. So much for Bergson, Marcel, Sartre.⁹

The accusation of ‘dualism’ is particularly inept, since Szasz has specifically addressed the so-called ‘mind-body’ problem, and so-called ‘Cartesian dualism’, in several books, from his first, *Pain and Pleasure* (1975c [1957]), through *The Myth of Mental Illness* (1962 [1961]; 1974a [1961]), to his recent *The Meaning of Mind* (1996).

Szasz argues in *The Meaning of Mind* that the word ‘mind’ was originally a verb and only became reified as a noun in the sixteenth century. He argues that there is no such *thing* as the ‘mind’. In this, he is in accord with Heidegger’s *Being and Time* (1962 [1927]; 1986 [1927]; 1996 [1927]) and *Zollikon Seminars* (1994 [1987]; 2001 [1994]), and with Sartre’s *The Transcendence of the Ego* (1957 [1936–1937]), *Being and Nothingness* (1966 [1943]), and *Critique of Dialectical Reason* (1976 [1960b]). Szasz suggests in *The Meaning of Mind* (1996: ix) that ‘the mind’ is a ‘potentially infinite variety of self-conversations’. Here he is again in tune with Heidegger, who, in his 1936 essay, ‘Hölderlin and the essence of poetry’ (2000a [1936]: 56), finds essential meaning in Hölderlin’s line, ‘Since we have been a conversation’, from a draft to his unfinished poem, ‘Versöhnender, der du nimmer geglaubt...’.¹⁰

What evidence does Hetherington adduce that Szasz is wrong to say ‘there can be no mental illness’?

He argues (2002: 228) from what he alleges is a *consequence* of Szasz’s argument, namely, ‘a consequent resistance to “treatment” of “mentally” ill people (for example by medication)’. Hetherington calls this ‘a harsh example of relinquishing our *always* possible obligation to others’.

But who is ‘resist[ing]’ whose ‘treatment’ of whom? Szasz has repeatedly stated that he has no objection to the ‘treatment’ of adults, whether or not they regard themselves, or somebody else regards them, as ‘mentally ill’, by medication or by any other means, if they have given their informed consent. He objects only to force and fraud.

Hetherington is, therefore, logically and empirically mistaken in asserting that a ‘resistance’ to such ‘treatment’ is a ‘consequence’ of a disbelief in ‘mental illness’.

Hetherington goes on:

It also defies the logic of existential analysis applied to clinical disturbance for, as Cohn points out, ‘one cannot rule out the effectiveness of a physical remedy in the case of a psychological disturbance’.

Cohn says this in his book, *Existential Thought and Therapeutic Practice* (1997: 66). Hetherington writes as if Cohn is saying this in criticism of Szasz, but Cohn nowhere mentions Szasz in this book.¹¹ Hetherington is arguing, however, that what Cohn says here proves that Szasz is illogical.

But does Hetherington imagine Szasz *does* ‘rule out the effectiveness of a physical remedy in the case of a psychological disturbance’? This would be absurd. Many physical ‘remedies’, for example, a glass of water or whisky, herbal teas, Prozac, heroin, Tai Chi, osteopathy, football, dancing, making love or war, may make a person, who feels or is felt by others to be ‘disturbed’, feel or be felt by others to be less ‘disturbed’. But how does this prove that the person was ‘mentally ill’?

Hetherington’s ‘logic’ involves *petitio principii*. It starts from what should be his conclusion. It assumes what has to be proved, namely, that a ‘psychological disturbance’ is a ‘clinical disturbance’, a ‘mental illness’.

Hetherington states (2002: 231):

‘Psychotically’ disturbed human beings have become ill – ill in their way of being...

Again, this is a mere assertion. The “‘psychotically’ disturbed human beings’, whoever they are, and whatever this means, do not become ‘ill’ merely because Hetherington pronounces them so.

Here is another sample of Hetherington’s writing vaguely directed against Szasz (2002: 231):

Those who follow too simplistically the notion that pathology is a misnomer (the ‘we are all pathological really’ line) are choosing to ignore the existential possibility that attunement may be healthy or pathological referred to by Boss (1979: 50). The question of intervention or non-intervention and what constitutes ‘voluntary’ or ‘involuntary’ is too broad to be discussed here; but it is clear that intervention may be equally justified for pathology not manifested purely somatically. Someone whose sight has become impaired early in life and who has a chance of a sight-enhancing intervention, whether conceived as ‘physical’ or ‘psychological’ should have that treatment available. Any debate thereafter may involve ethics and temporality; the paradox of resistance and desire; the nuances of persuasion and coercion.

But who says ‘pathology is a misnomer’? It is an indispensable concept in scientific medicine. And, if anyone *were* to say it is a ‘misnomer’, how could they simultaneously take the ‘line’ that ‘we are all pathological really’? Szasz thinks it a misnomer when used of the ‘psyche’. It is certain people who believe it is *not* a misnomer when used of the psyche, such as Freud in *The Psychopathology of Everyday Life* (1960 [1901]), who could be said to be saying ‘we are all [psycho]pathological really’.

Hetherington refers to an alleged allusion by Boss in *Existential Foundations of Medicine and Psychology* (1979 [1975]: 50) to ‘the existential possibility that attunement may be healthy or pathological’. In fact, although the English text does mention ‘pathological attunement’ at this point, this is a mistranslation from Boss’s *Grundriss der Medizin und Psychologie* (1975 [1971]: 173), which attributes ‘*Verstimmung*’ to his patient, Regula Zürcher. ‘*Verstimmung*’ is an everyday word, meaning here ‘out-of-tuneness’ or ‘mistunement’ (as of a piano); it can also mean ‘disgruntlement’, ‘ill-feeling’, or ‘ill-will’. Boss does not here say that this ‘mistunement’ is ‘pathological’, though he does

elsewhere in the book (1975 [1971]: 406; 1979 [1975]: 175). But his concept of phenomenological or daseinsanalytic ‘pathology’ begs all the questions raised by Szasz.

Why is ‘the question of intervention or non-intervention and what constitutes “voluntary” or “involuntary”...too broad to be discussed here’? Does Hetherington suppose there is some mystery about ‘what constitutes “voluntary” or “involuntary”’?

It is *not* ‘clear that intervention may be equally justified for pathology not manifested purely somatically’, if that intervention is involuntary. If pathology is ‘manifested purely somatically’, the patient has the legal right to refuse treatment. Szasz argues that the same principle should apply if what is claimed to be ‘pathology’ is *not* ‘manifested purely somatically’. Hetherington ignores Szasz’s argument, and simply asserts the opposite.

It is unclear what Hetherington is talking about in his curious sentence: ‘Someone whose sight has become impaired early in life and who has a chance of a sight-enhancing intervention, whether conceived as ‘physical’ or ‘psychological’ should have that treatment available [*sic*].’ What is a ‘psychological’ ‘sight-enhancing intervention’? Whatever it is, he implies someone is opposed to it. But why should anyone oppose it, provided it is voluntary?

His final sentence is sinister in its smooth equivocation: ‘Any debate thereafter may involve ethics and temporality; the paradox of resistance and desire; the nuances of persuasion and coercion.’ Why should there be any question of ‘coercion’ if someone has a chance of a ‘sight-enhancing intervention’, whether this be ophthalmological, for a sight defect, or ‘psychological’ or daseinsanalytic, for a difficulty in phenomenological ‘seeing’? What happens if the person does not want the intervention? And what does ‘thereafter’ mean? After the ‘intervention’ has already happened?

Hetherington writes (2002: 232):

The shock or fall into ill-being is not metaphorical as argued by Szasz ... but real ...

But the opposite of ‘metaphorical’ is ‘literal’, not ‘real’. Szasz says that the phenomena described, as he argues, *metaphorically* as ‘mental illnesses’, are not *literally* illnesses. He does not say that they are not *real*.

Szasz has explained this so many times in the last half century that there is a wealth of quotations to illustrate it. It is puzzling that Hetherington does not take account of this. Does he not believe Szasz means what he says? Hetherington (2002: 228) says that ‘Andrea Sabbadini [1992: 28] may be getting to the heart of it in suspecting that Szasz possibly does not believe half of what he is saying’.

Perhaps, to have a greater chance of convincing Hetherington and Sabbadini that he believes what he is saying, Szasz should speak under oath? The case of ‘Louis Perroni’, mentioned above, provides just such an occasion. On 12 April 1962, Szasz was cross-examined by ‘Robert Jordan, Esq.’, Assistant District Attorney, acting for the people, as follows (Szasz 1965a: 129–130):

Q. Now, Doctor, you call it The Myth of Mental Illness. In my layman’s terms would that mean that mental illness doesn’t exist?

A. You could put it that way.

Q. So you are of the belief, Doctor, that there is no such thing as mental illness, is that correct?

A. That is fairly correct. Only fairly.

Q. Only fairly? Well, Doctor, I want to be fair. You tell me what it is.

A. I will be glad to. It means that the phenomena—the human behaviors which some people call mental illnesses—do indeed exist. But I think that calling them mental illnesses is about as accurate as to call them witchcraft, which they used to be called.

Almost everything Hetherington writes about what he supposes Szasz to be saying is as confused as the above examples. There is not space to document it all here, but if the reader can find anything Hetherington says about Szasz that makes sense, I should be grateful if he or she would let me know.

Perhaps Wolf's arguments are more substantial? He writes (2002: 299):

We have taken on board far too readily, in my opinion, the assumptions of Szasz and others around the whole area of mental illness, and in doing so we have been careless in overlooking the far more philosophically rigorous, and indeed more phenomenologically informed, approach to pathology and health which Nietzsche has to offer.

...as philosophical therapists, we have a much larger concept of the human body than Szasz allows for. The human body includes all of the organs which constitute it, including mind and soul. Phenomenologically speaking, the mind is as much a part of what constitutes my embodied existence in the world as is my leg, my heart or my liver. When Nietzsche talks about health in the context of philosophy he is not using a mere metaphor.

But Szasz already 'allow[ed] for', and criticized, Wolf's 'much larger concept of the human body' more than forty years ago. In *The Myth of Mental Illness*, Szasz wrote (1962 [1961]: 218; 1974a [1961]: 195) of the then fashionable 'scientism':

Finally, having a healthy 'mind' has been added to this value-scheme by regarding the 'mind' as though it were simply another part of the human organism. According to this view, the human being is endowed with a skeletal system, digestive system, circulatory system, nervous system, etc.—and a 'mind'.

Wolf says he is speaking 'phenomenologically'. If he says that he experiences his 'mind' and 'soul' as 'organs' of his 'body', then we must, of course, accept this. But is it phenomenological of him to attribute his own experience to the rest of us?

Is it not Wolf and Hetherington, rather than Szasz, who are 'dualists', in the sense that they try to treat the 'mind' as a kind of 'double' of the body? It seems implicit in their thinking that if anything can be said of the body it must be possible to say it of the 'mind' as well.

The logic of this position is that, if each member of a football team has a red shirt, then the team spirit should have a red shirt too.

Wolf's assertion that '[w]hen Nietzsche talks about health in the context of philosophy he is not using a *mere* metaphor' (my emphasis) suggests that he, like Hetherington, takes the opposite of 'metaphorical' to be 'real', rather than 'literal'.

In *Human, All Too Human*, Nietzsche refers to the following as 'diseases': the 'will to free will' (1994 [1878]: 6–7); the 'kind of pity' which results from 'compassion and concern for another' (48); the 'male's...self-contempt' (196); 'annoyance' (237).

In *The Gay Science*, Nietzsche calls 'severe suspicion' an 'illness' (2001 [1887]: 7). He also writes (177):

I have named my pain and call it 'dog' – it's just as faithful, just as obtrusive and shameless, just as entertaining, just as clever as every other dog – and I can scold it and take my bad moods out on it the way others do with their dogs, servants, and wives.

If these allusions are not metaphors, what are they? Does Wolf believe that this 'dog' is actually a dog?

Nietzsche uses the metaphor of 'sickness' to characterise his *initial* (and, so to speak, initiatory) experience of the 'death of God'.¹² The 'convalescence' leads to the '*great health*' of the 'free spirit' (1994 [1878]: 7–8), a 'health' without God.

But Nietzsche's is only one among many such existential explorations. Jean Paul, Kierkegaard, and T. S. Eliot, for example, have used the metaphor of 'illness' and 'health' in ways that radically contradict Nietzsche's, in that they move from the experience of the 'death' or 'absence' of God to the reaffirmation of God.¹³

These explorations of human existence in terms of conflicting metaphors of 'health' and 'sickness' are indeed an important field of study for existential psychotherapists. Szasz, similarly, uses the metaphoric language of the 'cure of souls' and 'healing words' to describe 'psychotherapy'.

But is it not a logical *non sequitur* for Wolf to try to make such metaphoric language the basis of a *literal* 'pathology' of psychotherapy clients?

Wolf's discussion of 'pathology' culminates in the following passage (2002: 303):

Szasz denounces psychotherapy and psychiatry because these professions pathologise particular ways of being or behaving. In other words, he designates the use of the terms psychopathology and mental illness as pathological, as wrong, as empty of all positive values and associated with all negative values instead. At the very point where pathology is termed pathological, it is clear that Szasz's liberal-humanism simply seeks to replace one set of criteria for another in defining what constitutes pathology. Essentially he is arguing that he, and not therapists or doctors, should have the power to decide what will be designated as wrong, sick, pathological. The debate around psychopathology in therapy is revealed as a battle to assert which value system will prevail in policing what is acceptable in therapeutic and philosophical discourse and what is not.

This whole passage is so absurd that it is embarrassing to have to spell out what is wrong with it.

Szasz argues that the ‘myth of mental illness’ is wrong. He does not say it is ‘pathological’.

The very heart of what Szasz is saying is that it is wrong to use the word ‘pathological’ to mean ‘wrong’.

Wolf is alleging, without evidence, that Szasz is doing just this. If Wolf were right, then Szasz would be a hypocrite.

But can Wolf cite one place in Szasz’s more than seven hundred publications over the last fifty-six years where ‘he designates the use of the terms psychopathology and mental illness as *pathological*’?

In fact, it is *Wolf* who is replacing Szasz’s argument that these terms are *wrong* with the idea, attributed by Wolf to Szasz, that they are *pathological*.

Szasz does not ‘seek to replace one set of criteria for another in defining what constitutes pathology’. On the contrary, he argues for retaining the existing scientific medical criteria, as established by Virchow in the nineteenth century, for pathology (see, for example, Szasz 2001: 12–17). He criticizes psychiatrists and psychotherapists for ‘seek[ing] to replace’ these criteria.

Wolf confuses medicine with morals, and attributes his own confusion to Szasz.

Wolf’s attempt to apply the words ‘power’ and ‘policing’ to Szasz is, to say the least, misplaced. Szasz is criticizing the actual power of psychiatrists, backed by the actual power of the actual police, to imprison their so-called ‘patients’ on behalf of the state, and to ‘treat’ them forcibly, under the pretext that they have ‘an illness like any other’. If, of course, the patients did have ‘any other’ illness, they would have the right to refuse treatment.

This Journal has shown, by publishing Hetherington’s and Wolf’s papers, that it is willing to publish criticism of Szasz’s work. This is to be welcomed, as serious criticism, based on serious study of Szasz’s writings over fifty-six years, could sharpen discussion of his ideas.¹⁴

I hope I have demonstrated that Hetherington’s and Wolf’s ‘criticisms’ are not serious. They are ill-read, ill-informed, and illogical. They repeat ‘arguments’ that have been brought against Szasz repeatedly for nearly half a century. When Szasz patiently explains the fallacies in these ‘arguments’, he is accused of repeating himself.

Very few of the contributors to this Journal who have mentioned Szasz (see note 2 below) give any sign of recognising the profundity, the originality, or the historical importance of his work, or how privileged the Society and the Journal are that he should support their activities.

Is the Society for Existential Analysis really not able to produce anything better than this about Szasz?

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Notes

¹ The Editors' Note says that the published essay is an 'extract from the preface to his book *The Ethics of Psychoanalysis*'. It is, in fact, the whole new preface (1988 [1965b]: ix–xiii) to the then just published Syracuse edition of that book, save for the omission of a few words where Szasz explains that he wrote the book in six weeks.

² The reader may find the following list of references to Szasz in this Journal useful.

1. Van Artsdalen and Zanger 1990a.
2. Van Artsdalen and Zanger 1990b.
3. Szasz 1990a.
4. Lemma and Spinelli 1992.
5. Szasz 1992.
6. Jonathon 1992.
7. van Deurzen-Smith 1992.
8. Cohn 1992.
9. Sabbadini 1992.
10. Lemma 1992: 136.
11. Du Plock 1993: 91, 107.
12. Burston 1993: 136.
13. Spinelli 1993: 154.
14. Young 1995: 97.
15. Moja-Strasser 1995: 106–107.
16. Du Plock 1995: 116.
17. Hoeller 1996: 55.
18. Davis 1996: 85, 89.
19. Cohn 1997: 186.
20. Cohn 1998: 135.
21. Milton 1999: 134.
22. Stadlen A. 2000a: 67.
23. Stadlen A. 2000b: 157, 159.
24. Hetherington 2001: 151.
25. Madison 2002: 10–11, 14–17, 21, 24, 27–28, 30.
26. Groth 2002: 158.
27. Hetherington 2002: 227–228, 236.
28. Wolf 2002: 299, 303, 307–308.
29. Stadlen N. 2002: 335–336.
30. Stadlen A. 2003a: 170–171.

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- ³ The editors, Alessandra Lemma and Ernesto Spinelli, wrote in this Journal (Lemma and Spinelli 1992: 1):

...the editors are pleased to be able to provide the Journal readership with the written version of Thomas Szasz's provocative paper on therapeutic dialogue delivered at the Fourth Annual Conference of the Society for Existential Analysis. The editors are not only greatly indebted to Thomas Szasz for his willingness to have the paper published by us, but also for the additional time and effort he took to revise his paper for a written text, rather than for oral presentation. That he was able to achieve this task in time for this issue's publication says a great deal, we believe, for his keen interest in and continuing support for the Society.

The final section of Szasz's paper (1992: 7–8) develops the final section of his book, *The Myth of Psychotherapy* (1979b [1978b]: 208).

- ⁴ This compliment does not appear either in Szasz's (1992) written paper or in Jonathon's (1992) detailed account of Szasz's talk. It is found in a transcript (Szasz 1991a) from an audiotape, and in a videotape (Szasz 1991b). The transcript was available for other speakers at the conference, who were invited to respond in this Journal. Van Deurzen, Cohn and Sabbadini responded; Esterson and I did not.
- ⁵ The other speakers at the conference were Hans Keller and Anthony Clare. Emmy van Deurzen and I discovered, on comparing notes recently, that we were both in the audience that day (van Deurzen 2003). It was the first time either of us had seen Szasz in person. I can understand why van Deurzen was so impressed.
- ⁶ The Editorial by Carole Van Artsdalen and Elena Lea Zanger (1990a: 1) gives the date of Szasz's presentation as 'February 1989', but their Editors' Note (1990b: 63) says it was 'in autumn 1988'. Tickin's report (2000 [1989]: 14) and the videotape (Szasz 1989) both give the date as 11 February 1989.
- ⁷ The odd phrasing alone would suggest, even if we did not have the accurate account of Szasz's words, that this is a distortion. His sensitive mastery of the English language (of which he knew not one word until he was an adult) is such that he would be unlikely to use such phrasing.
- ⁸ Sabbadini (1992: 26), in his response to Szasz, reports Szasz's statement about feeling in harmony and sympathy, but calls it a 'wishful assumption'. He writes: '...I hoped I could have belonged to such a harmonious and sympathetic audience'. Thus he prepares the ground for Hetherington's distortion. Sabbadini also writes (1992: 28): 'Things about the human enterprise, Szasz shamelessly states, can be "true or false", "right or wrong", "good or bad".' This sentence appears to be self-contradictory, for why should Szasz feel ashamed if there is no 'right or wrong'?

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- ⁹ For the relevant works and passages of Bergson, Marcel, Sartre see Zaner 1964.
- ¹⁰ Szasz refers explicitly to existential writings in many of his books. In the first (but not the revised) edition of *The Myth of Mental Illness* (1962 [1961]: 95–96), he discusses critically Binswanger’s existential analysis as a school of European psychiatry. In *The Ethics of Psychoanalysis* (1988 [1965b]: 112), he criticizes Boss for encouraging, in his book, *Psychoanalysis and Daseinsanalysis* (1963 [1957]), ‘the idea that the therapist must have a limitless dedication to the patient’s welfare’. ‘This posture,’ says Szasz, ‘is a sham.’ In *Psychiatric Justice* (1965a), published the same year as the *Ethics*, Szasz uses no fewer than eleven epigraphs from Camus: three from *The Rebel* (1956) and eight from *Resistance, Rebellion, Death* (1961). In *The Manufacture of Madness* (1971 [1970a]), he refers to Kierkegaard’s *Journals* (1959) and *The Last Years* (1965), and to Sartre’s *Anti-Semite and Jew* (1965 [1946]), *Intimacy and Other Stories* (1960a [1948]), *Saint Genet* (1964b [1952]), and Sartre’s preface (1967 [1961]) to Fanon’s *The Wretched of the Earth*. Szasz acknowledges, in Chapter 12 (1971 [1970]: 233, n.), his indebtedness to Laing’s application of Sartre’s ideas in Chapter 4 of *The Politics of Experience* (1967); these ideas derive, of course, from Sartre’s *Critique of Dialectical Reason* (1976 [1960b]). In *Ideology and Insanity* (1973 [1970b]: 197, 202, 213–215), Szasz praises Sartre’s *The Words* (1964c), the section ‘Existential psychoanalysis’ from *Being and Nothingness* (1966 [1943]), and Sartre’s refusal of the Nobel prize. In *Ceremonial Chemistry*, Szasz quotes (1974b: 29) Nietzsche’s saying (2001 [1887]: 129) that alcohol and Christianity are the ‘European narcotics’, and he refers again (Szasz 1974b: 90) to Sartre’s *Saint Genet*, calling it ‘magnificent’. In his new chapter for the 1975 edition of *Pain and Pleasure*, he makes various references (1975b [1957]: xv, xxiii) to Sartre’s *Sketch for a Theory of the Emotions* (1962 [1939]), citing it and Ryle’s *The Concept of Mind* (1949) against Descartes. In *The New Review* (Szasz 1976a), and subsequently in *Schizophrenia* (1979a [1976c]: 45–83), Szasz offers a critique of Laing, Cooper, and ‘anti-psychiatry’; Aaron Esterson (1976: 70) described Szasz’s critique as ‘devastating in its accuracy and quite extraordinarily comprehensive’. In *The Spectator* (Szasz 1978a), and subsequently in *The Therapeutic State* (1984: 42–45), Szasz trenchantly reviews Cooper’s *The Language of Madness* (1978) and Laing’s *Conversations with Children* (1978). In *The Myth of Psychotherapy* (1979b [1978b]: 205), Szasz quotes, without comment, the hideous boast of Viktor Frankl (1969: 56) that he has ‘carried out transorbital lobotomy’ in such a way that ‘the human dignity of our patients is not violated’. In *Insanity* (1987: 195), Szasz quotes Sartre’s remark in *Being and Nothingness* (1966 [1943]: 92) that ‘psychoanalysis substitutes for the notion of bad faith, the idea of a lie without a liar’. Szasz comments that this ‘aphoristic observation’ is, ‘of course, couched in figurative language’: Sartre, says Szasz, ‘knew perfectly well’ that psychoanalysis cannot lie; ‘only a person can do that’. In a footnote in *Insanity* (1987: 231–232, n.), Szasz remarks: ‘To my knowledge, not a single will psychologist or existential psychiatrist has criticized the cognitive-ethical absurdities of the insanity defense or has urged its abolition, raising doubts about the sincerity or seriousness of their belief that persons conventionally regarded as insane possess free will and are therefore responsible for their behavior.’ In the new preface to the 1990 Syracuse edition of *Karl Kraus and*

the Soul-Doctors (now titled *Anti-Freud*), Szasz quotes (1990b [1976b]: xv) George Steiner's (1982) reference to a 'small constellation' comprising Kraus, Wittgenstein, Heidegger, and Canetti: 'it may be,' Szasz quotes Steiner as saying, 'these "refusers" of Freud who will prove lasting'. In *Fatal Freedom* (2001: 134–136), Szasz discusses Nietzsche's views on suicide. And see Stadlen 2000c.

- ¹¹ Hetherington (2002: 228) writes that Cohn 'accurately pinpointed inconsistencies in Szasz's thinking...just after Szasz's address to the SEA'. What are these 'inconsistencies'?

One alleged 'inconsistency' was based on a trivial misunderstanding about the use of the couch in psychoanalysis. Cohn (1992: 25) mistakenly thought that, when Szasz quoted the words, 'I hold to the plan of getting the patient to lie on the sofa while I sit behind him out of sight', he was reporting his own practice. But this is a recognisable quotation (with one word, 'his', before 'sight', missing) from Strachey's Standard Edition translation of Freud's paper, 'On beginning the treatment' (Freud 1958 [1913]: 133). Szasz went on to argue that psychoanalysts, by *insisting* on the use of the couch, foster their patients' dependency. Cohn mistakenly thought Szasz was arguing that *any* use of the couch did so. It therefore seemed contradictory to Cohn that Szasz had written, in *The Ethics of Psychoanalysis* (1988 [1965b]: 170),

I invite the patient to assume whichever position he prefers. If the patient asks me which position I prefer, I tell him that it makes little difference to me but that if it does not matter to him I prefer his lying down.

There is, of course, no contradiction.

Cohn also (1992: 25) 'found [his] initial consent shaken' because Szasz said that, on occasion, he would become 'extremely moralistic'. But Szasz was simply stating that he would say, if necessary, that he was not prepared to work with a client whose central project seemed, to Szasz, immoral.

In addition, Cohn (1992: 24) expressed 'unease about what strikes me as a tendency towards a kind of dualism in Szasz's thinking'. He concluded (1992: 25):

...in order to assess his work, we need to remember that he has chosen to remain within the orbit of a Cartesian universe, with its split between subject and world, where the therapeutic interaction is defined as a 'contract' rather than the specific modification of the intersubjective field in which we all find ourselves from the very beginning.

I have dealt with Szasz's alleged 'dualism' and 'Cartesian[ism]' above. I recently asked Hans Cohn what he meant by the rest of this passage. He said (Cohn 2003) that he had written this whole piece hastily; that he no longer uses the term 'intersubjective' (for reasons similar to those I stated above in connection with Hetherington's use of the term); and that he himself makes contracts with clients and has no criticism of Szasz for doing so.

¹² Nietzsche also characterises Christianity itself as a ‘debilitating malady’ (Hayman 1995 [1980]: 356).

¹³ Bearn, in his book, *Waking to Wonder: Wittgenstein’s Existential Investigations*, discusses (1997: 1–14) Nietzsche’s prefaces of 1886. He outlines (1997: 4) how Nietzsche’s ‘anatomy of convalescence is presented as a genealogy of the free spirit’. Bearn gives evidence (1997: 7) that Nietzsche’s ‘sickness’ is the ‘thought that God is dead, that we are wandering through an infinite nothing’. The ‘convalescence’ from such nihilism leads, Nietzsche says (1994 [1878]: 7–8),

to that excess of vivid healing, reproducing, reviving powers, the very sign of great health, an excess that gives the free spirit the dangerous privilege of being permitted to live experimentally and to offer himself to adventure: the privilege of the master free spirit!

It means coming to terms with the ‘death of God’ (1994 [1878]: 8):

The free spirit again approaches life... It grows warmer around him again... He almost feels as if his eyes were only now open to what is near.

As Bearn says (1997: 9), ‘The metaphors work well enough.’ That Nietzsche suffered actual physical illness while philosophizing does not make his metaphors of ‘sickness’ and ‘health’ any the less metaphors.

Other writers have found ways of ‘healing’ the experience of the ‘death of God’ that radically contradict Nietzsche’s. For example, at the heart of Jean Paul Richter’s 1796 novel, *Flower, Fruit and Thorn Pieces: Or the Married Life, Death, and Wedding of the Advocate of the Poor, Firmian Stanislaus Siebenkäs*, is the ‘speech of Christ, after death, from the universe, that there is no God’ (Richter 1845 [1796], First Series: 332–340). This ‘dream’ of Jean Paul’s set the tone for the nineteenth century. In a footnote, he writes (332, n.):

If ever my heart were so unhappy and withered, that all the feelings which assert the existence of God should be destroyed, I would terrify myself by this my essay, and it would heal me, and give me my feelings back again.

Thus, his vision of the ‘death of God’ would ‘heal’ him because, in contrast to Nietzsche’s later vision, it would renew Jean Paul’s experience of God’s existence.

In Kierkegaard’s *The Sickness unto Death* (1980 [1849]), despair is called ‘the sickness unto death’. But, as ‘Anti-Climacus’, Kierkegaard’s pseudonymous ‘author’, writes (1980 [1849]: 24–25):

The common view also overlooks that despair is dialectically different from what is usually termed a sickness, because it is a sickness of the spirit... Not being in despair is not similar to not being sick, for not being sick cannot be the same as being sick, whereas not being in despair can be the very same as being in despair. It is not with despair as with a sickness, where feeling

indisposed is the sickness. By no means. Here again the indisposition is dialectical. Never to have sensed this indisposition is precisely to be in despair.

And (1980 [1849]: 14):

The formula that describes the state of the self when despair is completely rooted out is this: in relating itself to itself and in willing to be itself, the self rests transparently in the power that established it.

The overcoming of the ‘sickness’ is again quite different from Nietzsche’s. The ‘power that established it’ is, of course, God. Again, T. S. Eliot, in *East Coker*, writes (1959 [1943]: 29):

*Our only health is the disease
If we obey the dying nurse
Whose constant care is not to please
But to remind of our, and Adam’s curse,
And that, to be restored, our sickness must grow worse.*

All these existential explorations of the metaphor of ‘health’ and ‘sickness’, some of them mutually conflicting, are important for existential psychotherapists. But they can in no way legitimate Wolf’s claim to find literal ‘pathology’ in his clients.

- ¹⁴ Madison (2002) argues, against Szasz, that not only ‘mental illness’, but also ‘physical illness’, is a social construction. This is not a new idea; nor does Madison take into account Szasz’s recent book, *Pharmacracy* (2001), which answers many of the specific arguments Madison employs. But Madison, unlike Hetherington and Wolf, does at least show some understanding of what Szasz’s position is.

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