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## RELIGIOUS EXPERIENCE AND PSYCHOLOGICAL CONFLICT

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I SHALL center my attention upon the constructive aspects of the profounder variety of psychological conflict to which we give the name of "schizophrenia." I shall submit and defend the proposition that psychological conflict, even in its schizophrenic manifestations, has religious significance. It is due to the operations of

conscience and is the price we pay for being men and having the power of choice and the capacity for growth.

The price is indeed a heavy one. No one who deals with mental patients can fail to recognize that fact. What we see in many of our patients is adaptations to defeat and failure which have been

made and accepted. There are reactions of escape, of self-deception, of delusional defense building. No one can call such reactions constructive. They result in social isolation. In many cases they result in progressive disintegration of the personality. And in so far as there is no fighting spirit, no will to get well, the outlook for recovery is poor. In such cases the end is likely to be destruction.

But there are forms of mental illness which are manifestations of healing power analogous to fever or inflammation of the body. These are the forms of mental disorder in which, as chaplain in a mental hospital, I have been especially interested. It is to these that I ask your attention. They are periods in the development of the personality in which the individual feels himself face to face with ultimate Reality, periods in which fate hangs in the balance and destiny is in large measure determined. In such periods religious concern is much in evidence and the creative forces are exceptionally active. So also are the forces of destruction. They are periods of seething emotion which tend either to make or break. As such they are closely related to the dramatic conversion experience which has been so prominent in the history of the christian church since the days of Saul of Tarsus.

Here is such a case. The patient in question was a man of 38 years who was brought to the hospital in a severely agitated condition. He thought he had committed the unpardonable sin and that something terrible was going to happen to his wife and children. He would not, therefore, let them out of his sight. He thought a world war was impending; and, when asked what part he was to have in this war, he replied: "A little child shall lead them." Obviously, he was the little child.

The record of his life was that of a well-meaning, friendly, likeable person who before his marriage, and even afterward, had been sexually promiscuous. What troubled him most was an affair with a woman some ten years older than himself, clearly a mother substitute. There had been two abortions, for which he was responsible. She had died of carcinoma. He blamed himself for her death, and the disturbance began shortly thereafter.

The first symptom was heavy drinking. This continued until he lost his job. Following this, he suffered a depression and stopped drinking. Then he developed the idea that the Odd Fellows were out to get him because he had violated the oath he took

when he joined them. For several months he was obsessed with ideas of persecution. He reached the point where he went to the police with a request for a permit to carry a gun in order to protect himself from his enemies. He became finally so disturbed that he confessed to his wife, telling her of his sexual transgressions.

This confession she took in good spirit, but in spite of that fact he became more and more agitated. The idea came that something was going to happen to her and that he had to carry the weight of the world on his small shoulders. Commitment then became necessary.

In the hospital he showed intense anxiety. He was sure of only one thing: that things were not what they seemed. He was also deeply aroused religiously. It is not necessary for our purpose to recount his subsequent history beyond reporting that within a couple of months he made an excellent recovery and now, after nearly 30 years, there has been no further trouble. He is at present a successful contractor, and his family is prosperous and happy.

Here, then, is an acute crisis experience, the culmination of a severe inner conflict. In intensity it reached the point of psychosis, but the outcome was constructive. It may thus be looked upon as a problem-solving experience which had genuine religious value, and it exemplifies the type of experience with which I am here concerned.

Notice in the first place that this man had reason to worry. Although outwardly successful and well-liked, he had made a mess of his relations with significant persons in his life—a woman who had been for him a mother-substitute, the woman he had married, and two unborn children whose lives he had helped to snuff out. The fact that he was a well-meaning, socially sensitive person, brought up in the protestant christian tradition, caused this disloyalty to weigh heavily upon him, especially following the death of his mistress. It may be said that he felt himself recreant in all his biologically significant relationships—as son, as husband, and as father.

Notice, furthermore, that the devices he employed in attempting to deal with the resulting sense of failure and guilt were at first of the definitely malignant type. He sought relief in strong drink. He tried to forget, to escape. This meant a way of life which usually terminates in progressive disintegra-

tion. Fortunately, however, the loss of a job brought him to his senses, and he gave up drinking. But the uneasy conscience from which he had been fleeing came back at him in the form of accusing voices and persecutory ideas. The Odd Fellows were after him. Enemies were out to destroy him. He finally became so uneasy that he went to the police, seeking permission to carry a gun. When the permit was refused, he became desperate.

His next step was in the right direction. Instead of trying to forget and to repress, he went to his wife and confessed his transgressions; and the wife took the confession in good part. Inasmuch as confession and forgiveness are of the very essence of psychotherapy, we might expect that he would now find peace of mind. But such was not the case. Instead, he became increasingly agitated and developed all sorts of irrational ideas. He was doomed to die. His wife and children were in danger. A great war was impending in which he was to have an important part. He became so deranged that there was no alternative but commitment.

Why now the increased agitation following the confession to his wife? Such a question is in order. The answer is clear. The emotional disturbance was not the result but the *precondition* of the confession. In his normal state of mind confession would have been impossible. But the profound emotion forced the confession, just as nature's healing power produces a boil or an abscess and then lets the poison matter out. In this case, as in others of the type, the disturbance brought about a certain degree of socialization. It got rid of pretense and hypocrisy and put the sufferer in position to be accepted for what he really was. And if it took some time for the powerful emotion to subside, that is hardly to be wondered at.

This case I present as an example of severe mental disorder in its more constructive manifestations. It is, of course, not often that we find the outcome of a schizophrenic episode so definitely favorable or its distinctive features so clearly apparent. But such experiments of nature serve to throw light upon cases in which the dynamic factors are not so clear. Studies of my own indicate that at least one in ten of our newly admitted schizophrenics are clearly of the acute type. Harry Stack Sullivan used to insist that an acute, anxiety laden phase

would be found in the onset of most cases of schizophrenia, if only our information were adequate.

What now can we learn from this case and from the group it represents regarding the interrelationship of religious experience and psychological conflict? The answer derived from the studies which I have made may be summed up as follows:

1. Functional mental disorder is best understood as an attempt to deal with an intolerable sense of personal failure and guilt. This attempt may take a number of forms, three of which are included under the concept of "schizophrenia": (a) drifting, withdrawal, throwing in the sponge; (b) delusional defense building, transfer of blame; (c) desperate attempt at reorganization.

2. Of these three reactions, the first is characterized by absence of religious concern and a tendency toward progressive disintegration; the second, by deviant religious concern and a tendency toward stabilization on an unsatisfactory basis; the third, by enormously accentuated religious concern and a relatively high recovery rate.

3. Schizophrenic episodes are likely to begin with intense preoccupation regarding one's own role. Such states of mind are favorable to creativity but not to balanced judgment. Strange ideas come surging in so vividly that they may be ascribed to a superhuman source. Ideas of death, of world disaster, of cosmic identification, and of previous incarnation together with a sense of urgency and mission form a constellation which is pathognomonic of the severer cases.

4. Other things being equal, the outcome of an acute schizophrenic episode is likely to be constructive insofar as it represents an honest attempt on the part of the patient to grapple with his real difficulties. It is likely to be unfavorable insofar as it is associated with the reactions of wishful thinking, concealment, and transfer of blame.

5. Cases similar to the one presented form a continuum with those of certain men of outstanding religious genius who also have passed thru searching experiences which have had definite schizophrenic features. Among these we may think of George Fox, Emmanuel Swedenborg, Saul of Tarsus, and the prophets Jeremiah and Ezekiel.

6. In order to understand either mental disorder or religious experience, the one should be studied in the light of the other.