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PSYCHIATRY IN A TROUBLED WORLD

YESTERDAY'S WAR AND TODAY'S CHALLENGE

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of the Army, 1943-1946.



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DEDICATION

This book is dedicated to three groups of people: to the many million GI's from whom we learned the lessons I have attempted to present; to my many colleagues in the field of psychiatry, both in and out of the Army, who carried on the work; and to those understanding military officers in every Division and Section of the War Department who helped those of us in psychiatry towards the accomplishment of our mission.

FOREWORD

THE SHOOTING WAR is over. Why should I write a book about it at this late date? First, I could not have written it before the facts were available and could be released; second, although the shooting is over, the chief implications of war-time psychiatric experience have to do with the postwar life; and third, the public interest in the problems of mental health and ill health and the challenge of that interest to professional psychiatry is at an all-time high, as a result of the war.

Or perhaps you might ask why I wrote a book at all. Anyone who attempts so colossal a job as writing a book must have a very strong urge. He is probably impelled to write for the purpose of satisfying an unrecognized inner need. The conscious motive undoubtedly varies widely with each author. He may want to create. He may want to save souls. He may want to vent his spleen. He may be a professional writer who has chosen that extremely difficult method of making a living. He may be one of the few who write for the love of it, if there are such people.

For the reader who is curious, my conscious purpose in writing this book was to record the evolution of psychiatric practice in the Army. Psychiatry struggled from the rear seat in the third balcony to finally arrive in the front row at the show. My responsibility to the Army, to psychiatry, and to the public who paid and suffered would be unfulfilled if I did not report that struggle. I also regard as an obligation the setting down of our experiences for whatever help this information might be in the event of another emergency. The first part of the book was, therefore, written chiefly for the record. It undoubtedly contains too many technical words, but probably the only person who will make psychiatry light reading will be a layman. In any case, an attempt has been made to make this book intelligible to any interested reader, lay or professional.

The second part of the book was written with the hope that it might be helpful to any person who has to get along with other people. For those who wish to use them, there were many lessons, learned painfully and at great cost, which can be applied in a postwar peaceful world. This part of the book is my view of the possible contributions of psychiatry to social experience. Or should I say my vision of the field that is open to research in applied and preventive psychiatry?

At the time of completion of the early drafts of each chapter, I was still in the Army. Each was submitted to the Bureau of Technical Information of the War Department, and, despite severe criticism of some Army methods, they were cleared for publication. The revisions since that time have not materially altered the original content. But this is not an official release; it presents my point of view and not that of the War Department.

Without the help of many friends and professional associates, this would never have seen the light of day, certainly not in its present form. I profited from the suggestions of at least twenty-five of my confreres, each of whom read two or three chapters in an early draft. Several were burdened with several chapters and responded with very helpful criticisms—my brother Karl, Dr. Eli Ginzberg, Mr. Tracy Voorhees, Dr. John Appel, Dr. Manfred Guttmacher. I “tried out” several of the chapters on my sons Roy, Phil, and Walt. Two of my friends have read the entire manuscript—Drs. Norman Brill and Margaret Craighill. To them I am especially grateful for many corrections and additional ideas.

Nor can I fail to acknowledge the immense investment of several stenographic assistants and librarians. I found this type of opus requires a near-endless amount of mechanical effort. Specially do I want to thank Aurelie Adams, Hazel Bruce, Leroy Bowen, Vesta Walker, and my personal secretary in the Surgeon General’s Office, Mary Frances Mills, and my two in the Menninger Foundation, Loraine Nuzman and Lena Forbes.

Finally, and most important, I want to express and acknowledge my gratitude to my wife, Cay. So far as time invested and effort expended are concerned, she is a coauthor. She has edited every paragraph in the book. She has checked references, looked up and reviewed articles, compiled the index. In addition she “protected” my evenings from social engagements, excused me to my friends, and forwent pleasures and entertainment throughout the eighteen months we worked together on the writing. It was she who really made the book a reality. Had it not been for her constant stimulus and encouragement, I would often have stopped. Had it not been for her help, it would be a far more imperfect result.

WCM

INTRODUCTION

"OH, MY ACHING BACK"—GI JOE

NO OTHER PHRASE in all Army lingo was better understood, more frequently spoken with feeling and reason, and so tersely symbolic of the soldier's job. It typified his burden, his stresses, and his inevitable reaction to them. Not only was it symbolic of his role in the service, but it is symbolic of the world at the present time—perhaps for some time to come in the future. The world—people—is evidencing in a thousand ways, in feeling, thought, and action, the "aching back" the war has given it.

What did the war do to people? To you and to me? To our communities and our families? To our nation? To the international situation? One book can't answer all of these questions. One person couldn't answer all of these questions. But all the books and all the people who talk around the subject at all would include in their discussions the load we must carry, the ache in the heart, the fear of uncertainty, the terrific waste, the unlimited destruction. The lives and fortunes of most of the individuals on this globe have been more or less drastically affected. Of much greater significance is the fact that they will be further influenced—their backs will continue to ache.

The cost of World War II in money is a figure which is incomprehensible to most of us who think in terms of our annual incomes or the cost of our homes. The fact that the United States spent six and a half million dollars every hour, or more than one hundred and fifty-seven million dollars per day between July 1, 1940, and September 30, 1945, leaves us indifferent and uncomprehending. Yet the total sum, amounting to three hundred and thirty-five billion dollars¹ is more than twice the assessed value of all property in the United States.² It is more than twice the amount of all the life insurance in force in 1944 in this country.³ Some other comparisons are equally startling. These amounts which

¹ Figures and dates provided by Martin L. Moore, U.S. Treasury Department. By permission of *The Evening Standard* (London), we reproduce from that paper of June 5, 1947, the following facts: "Lest we forget: Britain paid £34,423,000,000 [\$138,724,690,000] to win the war. That is £765 [\$3,083] a head for every person in Britain. The United States paid £82,500,000,000 [\$332,475,000,000] or £580 [\$2,337] a head. Canada paid £5,063,966,499 [\$20,407,784,991] or £422 [\$1,700] a head. Cash outlay is only a part of the British burden, for this country alone among the Western Allies suffered devastation. Three out of every ten houses were destroyed." (Computation of conversion to dollars made by the author on the basis of \$4.05 per pound, quotation as of August 12, 1947.)

² *World Almanac*, 1946, New York *World Telegram*, New York, p. 35.

³ *Ibid.*, p. 666.

were spent in constructive and cultural pursuits seem like pin money when contrasted with the huge expenditures for the destruction of war.

	<i>Amount</i>	<i>Would Pay Cost of War for</i>
Local and national budgets of the Boy Scouts of America in 1944	\$ 11,119,920 ⁴	1½ hours
Estimated minimum expenditure for medical research in 1944	54,650,000 ⁵	8½ hours
Total disbursements for soldier and dependent pensions in 1945	739,581,651 ⁶	4½ days
Endowments of public trusts and foundation	750,685,559 ⁷	5 days
Expenditures for public schools in 1943	2,308,098,338 ⁸	15 days
Total amount of permanent endowment funds held by 1,440 institutions of higher learning in 1940, plus the property of all sorts held by these same institutions in 1940	1,686,282,767 ⁹ 4,518,383,918 ⁸ }	5 weeks

Figures of money spent on the war effort do not include the concomitant emotional and economic costs which cannot be computed. The individual families paid dearly for dislocation, higher prices, and fewer satisfactions; business and industry faced a legion of economic and human problems in readjustment; international affairs were and are full of touchy relationships.

Millions of people endured separation, deprivation, loss, pain, sorrow. Millions were left maimed. Millions more were killed. The physical separation of us in America from personal contact with those who were greatest hurt allowed us to be preoccupied with our individual interests. It is impossible for us to realize the awful tragedy of the lives of more than sixty million persons¹⁰ who were cruelly displaced as a result of this conflict. No one can fully grasp the extent of the emotional cost of the war, nor can anyone conceive of the

⁴ Information received from F. S. Pease, Boy Scouts of America.

⁵ Information received from Dr. Lewis H. Weed, National Research Council.

⁶ *World Almanac*, 1946, *New York World Telegram*, New York, p. 291.

⁷ *Ibid.*, p. 526.

⁸ *Ibid.*, p. 580.

⁹ *Biennial Surveys of Education in the United States: Statistics of Higher Education 1939-40 and 1941-42*, Vol. II, Federal Security Agency, U.S. Office of Education, Washington, D. C., 1944, Chap. IV, p. 31.

¹⁰ Hoehler, F. K., *Europe's Homeless Millions*, Headline Series No. 54, Nov.-Dec., 1945, Foreign Policy Association, New York, p. 9.

possibilities if the same man power which was invested in destruction had been utilized for construction.

Can anything good come out of such war, other than the temporary destruction of some of the Nazi-Fascist governments and Japanese domination? Terrible as the war was, it directly initiated some constructive activities and hastened the development of others. Great advances were made in many fields of human activity. Conspicuous were the gains in physics and chemistry, in communication and transportation, in business and industry. Dramatic were the achievements in medical treatment with such therapeutic agents as plasma, penicillin, and the sulfonamides. Notable were malaria control and the use of DDT in the prevention of disease. Surgical procedures were perfected beyond prewar practice.

Great, though not as spectacular, strides were made in the prevention and cure of mental illness. Basic to these were the wider acceptance and better understanding of psychiatry. Millions of people became really aware, for the first time, of the effect of environmental stresses on the personality. They learned that such stresses could interfere with or partially wreck an individual's efficiency and his satisfaction with life. The universality of neurotic reactions became evident to the layman. Many discovered that failure in adjustment was not a disgrace and often could be avoided when an individual, finding himself in a blind alley, sought well-qualified help.

But psychiatry is a young and undeveloped science, with much yet to be learned. The war increased our understanding of ways in which its present body of knowledge can be helpfully applied to most, if not all, human activities. The war also emphasized the fact that its potentialities for usefulness cannot be fully realized until three further steps are taken: Research activities in the field of psychiatry must be increased and intensified many times over those now being carried on; the present desperate need for psychiatrists must be filled; psychiatry must gain for itself an even wider acceptance and a more intelligent understanding by the public.

While World War II served to decrease public prejudice against psychiatry, it has also placed psychiatry at a crossroad. One road leads to a continuation of its preoccupation with the end results of mental disease, i.e., concern about patients committed to state hospitals. The other road, however, invites psychiatry to discover how it can contribute to the problems of the average man and to the large social issues in which he is involved. Which road will psychiatry follow?

During the War, under the pressure of the job,¹¹ I often needed professional support, sometimes reassurance as to directions—"priorities," as we referred to them. At one of those moments I wrote to Dr. Alan Gregg, Director,

¹¹ Chief Consultant in Neuropsychiatry to the Surgeon General and Director of the Neuropsychiatry Consultants Division.

Division of Medical Services of the Rockefeller Foundation and an official consultant in neuropsychiatry to the Surgeon General. I asked: "What are the most important benefits psychiatry has to give?" His superb answer could well be a credo for every psychiatrist; certainly it describes the goals to which psychiatrists aspire.

First, psychiatry along with the other natural sciences leads to a life of reason. It explains what must otherwise excite fear, disgust, superstition, anxiety, or frustration. It breaks the clinches we otherwise get into with life and all the unnecessary, blind, infighting.

In the second place, by showing us the common rules, the uniform limitations, and liberties all human beings live under because they are human, psychiatry gives us a sort of oneness-with-others, a kind of exquisite communion with all humanity, past, present, and future. It is a kind of scientific humanism that frees us from dogma and the tyranny of the mind, a relief from the inhuman strait-jacket of rigid finality of thought.

Third, psychiatry makes possible a kind of sincere humility and naturalness I've never received from any other study or experience. Perhaps suffering accomplishes a similar miracle but too often suffering lessens one's delighted conviction in the liveableness of life—I don't know for I've not known much suffering yet. But I know that psychiatry provides the material for a quiet but extraordinarily tenacious kind of humility and a sympathy that is honest and eager.

And lastly, psychiatry makes it possible *to bring to others* these things I've mentioned: the light of reason, the oneness-with-others and an attitude of sympathetic humility, and understanding. Also it makes one able to receive these same gifts—and I would count him a poor physician who cannot receive as wisely and thankfully as he gives. So, in short, psychiatry makes possible by teaching and example the exchange of these things so desperately wanted by human beings and they are so healthy and happy when they get them and give them!

I am almost sure you will say 'But I don't mean that sort of thing! What specifically has psychiatry in the way of benefits?'

I didn't mention the rewards research offers to human curiosity. Nor the satisfaction of being of help to poor, battered, dependent, frightened people and the justice of giving them the breaks just for once. Nor the immense economy of patching lives to a point of meeting life's demands. Nor the hope that we may understand what disease connotes as well as what it denotes. Nor the possibility that through psychiatric understanding our successors may be able to govern human politics and relationships more sagely.

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Part I

IN WAR

1

PSYCHIATRY PRIOR TO WORLD WAR II

AN ACQUAINTANCE with certain developments in the long history of psychiatry is particularly pertinent as background for a better understanding of the psychiatric experience in World War II. A little over 100 years ago 13 superintendents of mental hospitals organized what proved to be the forerunner of the American Psychiatric Association, now the official professional organization of psychiatrists. Some 16 years after this, the Civil War focused attention on certain psychiatric problems. To these the neurologists¹ seemed the most alert: nostalgia, malingering, return of the psychotic soldiers to their homes, and the problems arising from the teen-age draft.²

During the succeeding 50 years only a handful of physicians manifested interest in learning how and why the minds of people became sick. Nearly all of these men worked in those isolated institutions that were looked upon as necessary evils—the insane asylums. By the early twentieth century a few leaders—Adolph Meyer, August Hoch, Elmer Southard, Charles Burr, George Kirby, Albert Barrett—had emerged to achieve recognition on the faculties of some medical schools. The early studies of Sigmund Freud were being championed in this country by A. A. Brill, James J. Putnam, William A. White, and Smith Ely Jelliffe.

Then came World War I. Fortune smiled upon the Army and upon psychiatry when Pearce Bailey was chosen to serve as a consultant in the Office of the Surgeon General and Thomas W. Salmon as the chief consultant in

¹ Neurology is the special field of medicine which is concerned with organic diseases and disorders of the nervous system, such as tumors, infections, injuries, degenerative processes. Neurology as a profession developed rapidly after the Civil War, chiefly among physicians in universities and those in private practice. By contrast, the psychiatrists in 1860-70 were limited in their practice almost completely to the mental institutions and were often referred to as "alienists." As time has passed, the two groups have become more and more distinct in their interests—neurologists in the organic disorders, psychiatrists in the functional disorders. In practice the two fields can never be entirely separate; many physicians carry on a practice in both specialties, though having a major interest and usually being more proficient in one. In the Army in World War II they were assigned to the same service, which was labeled with the hybrid term, "neuro-psychiatry."

² Deutsch, Albert, "Military Psychiatry: The Civil War 1861-1865," in *One Hundred Years of American Psychiatry*, ed. by Gregory Zilboorg, Columbia University Press, New York, 1944, pp. 374-377.