

PRINCIPLES
OF
ABNORMAL PSYCHOLOGY

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To

HANFORD M. BURR

*teacher, mentor, friend to whom I owe so
much, as do all who have had the
privilege of sitting in his classes,
this book is most affection-
ately inscribed.*

PREFACE

This book was designed for my students and is the outgrowth of my many attempts to help them to a knowledge of the always fascinating field of the abnormal and its borderland in human behavior. It is designed for advanced undergraduate students in psychology, although it may not be without interest and possibilities of instruction to many others. A knowledge of the facts and the interpretations current in the conventional textbooks of general psychology is presupposed. In a sense this is an introductory text, as it is designed to introduce students to certain special fields of psychological investigation. No attempt has been made to produce an exhaustive manual. Such a comprehensive treatment would have resulted in a volume too large for the purpose in mind. Much literature has therefore been omitted and much more has been but briefly summarized. What has been included has been primarily selected because of its intrinsic significance, although the teaching problems involved in accessibility have not been out of mind particularly in the enumeration of reference titles.

So far as possible I have sought to hold to a detached attitude in the presentation of theories and interpretations. Where there is so much conflict of opinion it has seemed the better pedagogy to introduce the student to the main trends of interpretation held by the more prominent schools of theory. Criticisms of these are included, of one as freely and as willingly as of another. The student must not at the outset be prejudiced but must be shown what is being thought and the bases for the controversies which exist.

I have written as a psychologist for students of psychology. After introducing the student to certain in-

dispensable terms and interpretative concepts it is my practice to push the student rapidly into a consideration of the more extreme forms of abnormality. With his appetite for a knowledge of insanity thus somewhat appeased and with the training gained thereby he is much better prepared for the borderland phenomena. I deliberately postpone in my teaching, and have done so in this book, all discussion of hypnotism, spiritism, dreams, mental effects of drugs, feeble-mindedness and genius until after the student has been well trained in the phenomena of psychosis and psychoneurosis. He then looks upon hypnotism, spiritism, etc., as so much clinical material upon which he can bring to bear the knowledge he has previously acquired. I have tried many other arrangements but have found this to be far the best pedagogy.

My emphasis has been upon the psychology of abnormal behavior and not at all upon methods of treatment because my point of view is that of the scientist and not that of the medical practitioner. I think of the psychology of the abnormal as one of the basic sciences indispensable to the modern practice of medicine. This distinction between psychology and medical practice must be early impressed upon the student and not infrequently reëmphasized.

Only one who has written a book knows how deeply an author is indebted to others. It is impossible to enumerate the many who have helped by their instruction and by their generous criticism. The list is long. But the names of two must be mentioned, the first and the last. My interest in the abnormal and the borderland was first aroused many years ago in those clinics so masterfully conducted by Edward Cowles, who contributed much to the development of the functional study of the psychoses. In recent years I have been indebted most of all to Dr. L. F. Griffith of the Oregon State Hospital, for innumerable courtesies and for the privilege of seeing cases and theories illuminated by the critical insight which has come from his

long experience with the mentally diseased. Most of the cases used in the presentation of the psychoses were cordially provided by him and his associates. For the interpretations offered, however, they must in no wise be held responsible.

For the privilege of using other illustrative material I wish to thank the publishers of the *American Journal of Psychology*, the *American Journal of Insanity*, the *Psychological Review*, and the *Psychiatric Bulletin*. And to my colleague, Professor Horace G. Wyatt, I am indebted for many valuable suggestions as well as for his careful reading of the proof of this book.

E. S. C.

Eugene, Oregon,
April 15, 1927.

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PRINCIPLES
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ABNORMAL PSYCHOLOGY

CHAPTER I

INTRODUCTION: SOME PRINCIPLES OF PSYCHOLOGY, NORMAL AND ABNORMAL

Abnormal forms of human behavior are always to be thought of as distortions of normal behavior. These may be due to functional disturbances, to organic disturbances, or to both. It is consequently necessary to have and to keep in mind as clearly as possible the fundamental facts of normal psychology. Text books in general psychology are, as a rule, however, written without thought for their possible uses in connection with the study of abnormal psychology and so they often fail to present matters which, while of slight importance when only the normal mind is under consideration, are often of very great importance when the abnormal mind is to be interpreted. It is, therefore, indispensable at the outset to develop a fairly comprehensive concept of the nature of the normal mind. Then as the various forms of abnormality are considered they can be thought of the more clearly as deviations from the normal.

The normal mind should begin with a body whose anatomy is normal. It should not be conspicuously large or small. There should be no anatomical defects, such as deformed hands or arms or feet or legs, which will necessitate a peculiar and sometimes difficult adaptation to life. While the shape of the head is of little importance, if it be not so peculiar as to attract attention and make the possessor self-conscious, it should be neither too large nor too small. Extremes in either direction are usually associated with mental defect of some sort. The sense organs should be normal. Congenital blindness and deafness necessitate

an abnormal form of mental life, which, while it may not be diseased in any sense, is certain to differ markedly from that of those normally endowed. Any partial defect of sense, such as partial deafness which is sufficient to necessitate the individual's wearing of conspicuous hearing apparatus, or the attendance at a special school, or extreme near-sightedness or even far-sightedness, handicaps the child in its individual development and in its social relations. And in a more general fashion there should be a good physical inheritance. There should be a healthy diathesis. Children born of insane, feeble-minded, tuberculous, alcoholic, syphilitic, epileptic, or neurasthenic parents are at least at a disadvantage and in a vast majority of cases seem to have an inborn predisposition to abnormality, although that abnormality may not always be of the same nature as that of the parents. This is recognized by the practice, now very common, of speaking of the neurasthenic diathesis, the epileptic diathesis, the tuberculous diathesis, etc.

As the tendency now is to think of intelligence as a matter of native endowment it must be recognized that the normal mind should be endowed with a normal grade of intelligence. Just what this would be in terms of the intelligence quotient is still uncertain. If the intelligence be too low the individual is sadly handicapped in the struggle for social adjustment and personal achievement, which may in itself produce peculiarities of behavior of an abnormal degree. If the intelligence be very high the possessor may be pushed through school too rapidly and so be pushed into a social position for which he is otherwise unprepared, with consequent disturbances in adaptation. He may be treated as queer or freakish with unhappy consequences.

Normality is also undoubtedly conditioned by the number and relative responsiveness of the instincts. Unfortunately no one knows at present just how many instincts

there are nor just what each one is. It may be that there are a very great many or it may be that there are very few, perhaps even none at all in the old sense of innate patterns functioning in an apparently purposeful manner. Whether they be innate or not may be left for subsequent decision. It is important here merely to recognize that there are a considerable number of action patterns, such as fear, anger, sex, desire, etc., which are of profound significance to the mental health of the individual and which seem to be either innately determined or formed very early in infancy. For convenience these may still be termed instincts. If some of these instincts are too frequently stimulated they may not contribute their part to the general balance of function desirable for normality. If there be a considerable number of instincts, considered as inherently determined action patterns, then it is quite possible that from birth some may be more responsive to stimulation than others, that from birth there is a special individual pattern of degrees of responsiveness of these different instincts. If this be true, as so many have thought, then there may be patterns which predispose the individual to abnormality.

The growth experience for the production of a normal mind should not include serious nutritional or metabolic disturbances. Just how far or how frequently there may be departures from a continuous course of health is not known, but it is clear that prolonged disturbances of nutrition in childhood or youth produce periods of relative weakness which often deflect the course of mental development. While the more common diseases of childhood are usually of little psychological or psychopathological significance the effect of an acute infectious disease may be serious. Scarlet fever, typhoid fever, measles, tuberculosis and the like may leave behind them defects of sensory apparatus, of memory, or of intelligence. If the inherent diathesis of an individual be such as to predispose to some

form of abnormality, then the effect of the acute infectious disease may be that of bringing out the latent abnormality.

The social contacts of the growth period are now being wisely emphasized as of importance to mental normality. That the child is highly suggestible is a commonplace. Consequently the sources from which the suggestions come should be normal. Nervous parents make nervous children. And the same may be said of school teachers. Much association with timid adults develops timidity to an abnormal degree; and too frequent association with people of bad temper is prone to produce children with a similar lack of control. Expressed more technically, the pattern of instinct development is conditioned by the patterns of instinct development in their associates. The child's associations with adults should include adults of both sexes. It is becoming more and more evident that the characteristics of an individual may be largely conditioned by the parental relationship. Exclusive contact of a boy with his mother and exclusive domination by her often produces a man who cannot fit into society normally. The same may be said of the girl and of relationships with either parent. The normal child should have in its growth experience contact with adults of both sexes without the exclusive, or even the predominant, influence of one or the other. Very much the same should be said of the child's playmates. Association with neurotic children or with children who are in any way defective is not good hygiene. On the other hand children should not be kept from other children. The early socialization of the child's life is essential to normality. Being much alone is likely to give a peculiar slant to the course of development which may be decidedly unhappy in later life.

The school experience should be as regular as possible. This is assuming of course that the school equipment and personnel is sufficient, hygienic and competent. The child

should not for the sake of future normality be sent to school too early, so that it is looked upon by its associates as a freak, nor should it be delayed so as to lose the experiences of learning to work with others when others are learning the same thing. While delayed entrance may not in the long run be any detriment to the child's eventual intellectual accomplishment it may easily give the child for a time disturbingly intense feelings of inferiority. It is probably not necessary to add that the child's associates will not miss any chance to make it feel inferior. Forced precocity and inferiority may alike be contributory causes to subsequent disturbances. Progress through the grades should likewise be regular. Repeating grades or years as well as skipping grades may contribute to the production of abnormalities of social adjustment.

McDougall has called attention to what he calls the development of sentiments in the course of the development of each individual. While there is yet debate as to the nature of these and even as to the validity of McDougall's concept, still it seems to be at least a first approximation to facts, although we have at present no experimental knowledge concerning this. These sentiments grow out of the much and complex functioning of the instinct-emotion patterns and are centered about objects or concepts. It is highly important that these sentiments be such that they neither in any way prevent the individual's success in life nor stand in the way of his happiness. Nor should there be what is called a perverted development of any instinct pattern. Such perversion or exaggeration distorts the individual and makes for abnormality. Not only should the absence of perversion be emphasized, but there should also be recognition of the complementary concept, the proper development of reductives. Some instincts operate in a relatively opposite manner to each other, for example McDougall's self-assertion and self-submission instincts. If one of these is not properly developed the other may seem

to be abnormally or pervertedly developed. So it is important for every normal individual that the reductive tendencies be cultivated as well as that perversions be avoided.

In the ideal course of development puberty is not precociously early nor greatly delayed. And whenever it comes there should be an adequate amount of wholesome sex instruction. Ignorance here leads to a great variety of possible disturbances. In fact for normality the whole course of adolescence requires the most careful guidance. It is a period of marked instability and rapid growth, hence disturbances, perversions, and repressions of many kinds are easily produced and perhaps as readily prevented. Certainly for subsequent mental health the period of adolescence cannot receive too careful hygiene so that the youth shall come through into the organization and stability of a normal maturity. A valuable feature for mental normality is the possession in adolescence of some friend of mature years who may be treated as a confidant. The importance of telling one's troubles in assured confidence has been clearly demonstrated in recent psychopathic studies. Without it innumerable disturbing worries arise which are unnecessary and undesirable.

No consideration of the normal mind, especially from its growth aspect, would be complete without mention of the religious life. It is as essential that the individual's religious experience be healthy and free from disturbing features as any other part of his emotional development. There needs must be, however, a very thorough consideration of the psychological peculiarities of youth so as to avoid the danger of attempting to force youth into the religious experience of maturity. It is true that the studies of conversion show a greater frequency of the phenomenon in adolescence than in other years. This merely indicates, along with the facts about the frequency of hysteria and those concerning juvenile delinquency, that youth is a

period of marked instability. While a healthy religious experience is without doubt indispensable to the making of a whole man or woman, and while it has a decidedly ethical value as well, nevertheless, because of the instability of youth religious traits can be perverted quite as easily as any other, with quite as damaging consequences. For normality this is to be avoided. Intense emotional disturbances as the consequence of the reconstruction of religious concepts are also to be prevented so far as possible. Of course the ideal here is a system of religious education so skillfully designed and executed as to prevent the necessity of the individual ever reconstructing his notions of religious doctrines.

The emotional life of the normal mind should have had as wide and inclusive a range as possible. And this should include painful as well as pleasurable experience. The individual who has not had experience of fear, anger, disgust, hope, love, hate, joy, sorrow, wonder, elation, depression, who has not felt the thrill of achievement and the sting of failure, who has not responded to the lure of the wilderness, the ocean, the open fire, the stars, who has not experienced all these and something of the thousand and more variations of human emotions, is, by so much as he has failed to experience them, an incomplete personality. Range of emotional experience is satisfying, preventive of perversion, and tends to the development of reductives. So too should the motor life be comprehensive. Some training in a wide range of manual and industrial arts, athletic and sporting activities, has long been recognized as a stabilizing influence. It is not only educational but productive of a more healthy organization. The same emphasis should be placed upon an expansive range of intellectual experience. Ignorance is a common contributory factor to abnormality. The wider the range of knowledge, provided it is not achieved at the expense of other features mentioned, the safer for the person. Breadth of

emotional, motor, and intellectual education is a preventive of future breakdown which can scarcely be overestimated.

The development of one of the common concepts of life deserves special mention. That is the concept of the self, the empirical ego, as it is sometimes termed. What the individual thinks of himself conditions much of his behavior. The great curse of adolescence is the ever recurrent notion of inferiority, with all its consequent emotional reaction, its influence upon behavior, ideals, ambitions, and efforts to achieve. While the opposite, the extravagant notion of personal worth and importance, is doubtless unhealthy, it is much less often found to be a contributing factor to mental disturbance than is the notion of inferiority.

A further word should be said about the avoidance of many bad habits of thought other than that of inferiority. Just what in a given individual is to be considered a bad habit of thought depends entirely upon the degree and nature of his development. Examples of some usually bad and unhealthy distortions of thought are thinking of one's self as persecuted or that "all the world is down on one," taking the little events of life too personally and seriously, excessive day dreaming, finding satisfaction in day dreaming rather than in activity. Avoidance of domination by such habits is essential to normality.

A life conforming to all that has been advocated above for normality probably never existed. And yet there are many normal persons. That is because we have a very inclusive concept of normality and because it is quite possible for one to experience dangerous tendencies and unfortunate environments and not succumb to their sinister possibilities. One may even be born with defects and still achieve normality. Defects of heredity, bad habits of thought, emotional disturbances of youth, ill health and many other undesirable features of life may be faced and