A theoretical alternative to the present sanity-insanity dichotomy: supersanity, from a multidisciplinary perspective.

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A THEORETICAL ALTERNATIVE TO THE PRESENT SANITY-INSANITY DICHTOMY:
SUPERSANITY, FROM A MULTIDISCIPLINARY PERSPECTIVE

A Dissertation Presented
By
Joyce A. Hinckley

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A THEORETICAL ALTERNATIVE TO THE PRESENT SANITY-INSANITY DICHOTOMY:
SUPERSANITY, FROM A MULTI-DISCIPLINARY PERSPECTIVE

A Dissertation

By

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AUGUST, 1973
DEDICATION

To my grandfather, Arthur T. Alexion
"Choose life, it's all you'll get."

To my lover, Bruce M. Hinckley
"Drink in deep of my compassion"

To my most puzzling self
"If you can't convince them, confuse them"
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This dissertation is the culmination of many years of thought and experience. It has been the most painful thing I have ever written. There have been many individuals, real and imaginary, who have helped get me through the process. Especially sympathetic during this time have been Bruce M. Hinckley who acted as my perspective when I couldn't see beyond the typewriter; Richard Bradley, who provided me with a real-world perspective; and Veda Ross, who kept the four of us in high spirits and the dissertation down to earth.

My committee, Gloria Joseph, Tom Clark and Emma Cappelluzzo, have also been encouraging and understanding of my intellectual deviance. It has been especially valuable to me that they have all treated me as a professional colleague during this process.

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Finally, I would like to thank those real/not real people who have made this all possible. Jack Gureny, 14th Earl of Gurney; The Countess Aurelia, Captain Yossarian, Gandalf, Frodo, Quasimodo, McMurphy, The King of Hearts, Pooh, Piglet, and the Wizard of Oz are all important for their contributions to this work.
A Theoretical Alternative To The Present Sanity-Insanity Dichotomy:
Supersanity, From A Multi-Disciplinary Perspective
(August, 1973)

Joyce A. Hinckley, B.A., Iowa Wesleyan College
Directed by: Dr. F. Thomas Clark

ABSTRACT

This paper presents a theoretical alternative to the present sanity-insanity dichotomy. That alternative is labelled Supersanity and it is presented within a multi-disciplinary approach. This multi-disciplinary approach includes the traditional academic fields of philosophy, theology, literature, and psychology.

The theory of Supersanity is initially developed within a philosophical perspective. The philosophical foundations of current descriptions of sanity-insanity are examined and found to be primarily epistemological. This is felt to be inadequate; therefore, a philosophical foundation which is ontological, epistemological, and teleological is developed for the theory of Supersanity.

Next, the theory of Supersanity is developed within a theological perspective. Discussion of current descriptions of sanity-insanity in terms of Apollonian or Dionysian behavior is presented, and these descriptions are considered in theological, anthropological and psychological frameworks. Argument is made for the superiority of the
Dionysian perspective and Supersane behavior is described in Dionysian terms.

The paper next moves to a consideration of myth, appearance and reality in descriptions of sanity-insanity. Again, current descriptions of sanity-insanity are outlined and seen to reject the positive value of personal myth, and to rely on perception of appearances. Argument is made for Supersanity and possession of personal myth and apprehension of reality.

Finally, the paper summarizes the theory of Supersanity and outlines implications of the theory for education and counseling methodologies.
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You have everything Boss,
Except one thing—
Madness!
A man needs a little madness,
Else he dares never cut the rope
And be really free.

Zorba the Greek
PROLOGUE

The soul selects her own society.

Emily Dickinson

Because the various ideas contained within the theory of Supersanity are highly colored by my values, morals, beliefs, etc., the theory of Supersanity is presented in an extremely academic and objective form. This is done in an attempt to counter-balance the subjective material contributing to the theory. However, it is also possible that the academic form of the dissertation may mask the subjective elements; therefore, an attempt will be made to delineate them here.

It must be noted that the theory of Supersanity developed initially from subjective rather than objective material. Observations of behavior began when only the subjective base existed and to some extent academic materials were included which offered an objective validation of the subjective material. Since this is the customary procedure in the development of psychological theory, I feel no need to justify the practice. Rather, I feel it important to outline the subjective biases with which I began so that they may be kept in mind when reading the dissertation.

The most obvious of my subjective biases, values, beliefs, etc. is insistence on finite and non-finite dimensions to reality and man's experience of that reality. This is a foundation for the theory of Supersanity and is necessary to the development of the various points in the theory. My insistence of finite and non-finite dimensions to
reality and man's experience is part of my belief structure. That is, I view my own experience as, at times, passing the bounds of the finite; and I also believe that the world consists of more than what is apparent to the senses. Also, in accord with human nature, I generalize my experience to all men; and since recognition of finite and non-finite dimensions is a recurring human experience, I am comfortable in my generalization.

Another subjective bias with which I began the observations which lead to the theory of Supersanity is that man has the ability to become more than he is and that human growth, by itself, will be positive. This belief is reflected both in my own struggle for personal growth and in the ways in which I view others engaged in similar processes. This view, perhaps, also colors the discussion of positive teleology in Chapter II. Assertion of a positive teleology is consistent with my view of human growth, although expanded to include universal becoming.

Other items of personal conviction may also be found in the various chapters of the dissertation. Thus, my belief that our society often forces individuals to act in ways that are not good can be seen in discussion of social norms. Or my belief that there is a higher good than that presented by the social norms can be found in these discussions.

In fact, in the dissertation, discussion of any type of normative behavior may reflect my personal beliefs and political convictions in this regard. On a political level, I view norms--or laws, customs, etc.--as a process whereby individual human behavior may be controlled or kept within certain boundaries. I believe that society disapproves of, and seeks to eliminate, any extreme type of human behavior. Thus,
the retardate and the genius, the sinner and the saint, the extremely sick and the exceptionally healthy are all outside of, and contradictory to, societal norms. I do not feel society asks, "Are these things best for the individual or the society?" but instead asks, "How do we control these things?" Once this question is asked, the answer that it is easiest to control things or persons which are similar becomes clear. And control, I believe, is political. This belief, most probably, is reflected in various ways in the dissertation.

There are, however, portions of the theory of Supersanity which have contradicted some of my personal values, beliefs, morals, etc. The Dionysian dissolution of individuality, for example, initially conflicted with my view that man is a discreet individual uniquely responsible for his actions. It was extremely difficult to reconcile this with the Dionysian view of "unity with the universe." However, my subjective values were in conflict with the theory I was developing. One or the other had to change, or the theory had to be developed in a way that no longer reflected my personal views. It was a difficult decision, but my subjective values were reorganized to accommodate the obvious dictates of the theory. I now believe that man is responsible for his actions and, if Dionysian, they reflect the positive teleology of the universe.

However, the situation is not totally resolved. The choice was made in favor of the unity of the theory of Supersanity. This, I believe, demonstrates that the theory of Supersanity is other than a mere reflection of my personal beliefs and values. Although these have played a part in the development of the theory, the theory of Supersanity has maintained its unity and consistence in instances where conflicts arose.
Of course, the academic or objective material also reflects my personal values, beliefs, etc. Thus, when a question arose over which author to cite in reference to a point in the theory, preference was always given to "old friends." Sometimes special effort was made to include these "old friends" in the dissertation. Those individuals cited in the body of the document who have special meaning to me include: Plato, Pascal, Jung, Zeno of Elea, and Gilbert Murray.

This discussion should highlight the subjective elements in the dissertation for the reader. If he keeps them in mind, the paper's value should be enhanced. Also, I would like to define a few terms which are used repeatedly in the text and which have slightly different meanings for me than the common connotative or denotative ones.

Most important of these is the word myth. Within the body of the text, myth is used in an extremely positive fashion. It connotes expression of man's apprehension of non-finite reality or of ultimate truth. It should not be viewed as containing falsity or fantasy. Although it may not embody historical, scientific, or apparent fact, it does embody man's accurate perception of finite and non-finite reality.

Another word which should also be defined for the reader is non-finite reality. This is used to connote the spiritual dimension of man's existence. It includes those aspects of knowing and being which are not evident through sense perception but are apprehended none the less. Non-finite reality is the foundation for finite reality and provides man with his ability to transcend the finite.

It is, of course, artificial to separate reality into finite and non-finite components. Both comprise Reality which encompasses all
dimensions of being and knowing as well as the positive teleology of the universe.

Also, it should be noted that the terms Apollonian and Dionysian are given new values in this text. Unlike the common usage, Apollonian is given negative connotations and Dionysian is given positive connotations. This should be carefully noted by the reader.

Finally, I would like to discuss the limitations of the theory of Supersanity. At present, it is just a hypothetical construct without experimental validation. However, it does have the weight of considerable academic documentation to add to its value. Also, it was developed along the lines that most scientific or psychological theories develop. Observations in accord with the author's subjective view of the world were made. There appeared to be direction or unity to these observations, and thus a theory developed. This is the manner in which Freud and Einstein developed their theories. And these theories were used to predict behavior of individuals or of matter long before experimental validation was possible. In fact, with Freud's theories, the only validation that may be possible is the similar observations of others.

Thus, I would suggest that readers use the theory of Supersanity as an alternative to the current view of sanity-insanity. If their observations confirm the theory of Supersanity, they may wish to begin to consider the implications of this confirmation. If their observations conflict with the theory, they do not necessarily have to give the theory more thought.

However, I would caution those who find their observations confirming the theory of Supersanity not to discard their previously held
beliefs regarding sanity and insanity. Instead, I would ask them to proceed cautiously with continued observation and to act in accord with the theory of Supersanity only as parts of it become more and more confirmed in the reader's mind.
Chapter I

The Sanity-Insanity Dichotomy
And the Theory of Supersanity

'T is education forms the common mind
Just as the twig is bent, the tree's inclined

A. Pope

Society has, at present, two ways of describing or categorizing
behavior: they are sane/normal/adaptive or insane/abnormal/mal-adaptive.
In describing this dichotomy, Ruth Benedict (1934a) stated, "Abnormality
is culturally defined. It is primarily a term for that (behavior) that
a particular civilization does not use." More recently, Thomas Szasz
stated, "Whenever we try to give a definition of what mental health is,
we simply state our preference for a certain type of cultural, social
and ethical order (1956)."

However, regardless of how culturally biased or scientifically
unfounded the concept of sane/normal/adaptive behavior may be, it is a
concept employed by society in the socialization process (Secord and
Backman, 1964) and by the schools as major contributors to that process
adaptive behavior used in the socialization process is the social norm
which may be defined as "a standard or behavioral expectation which is
shared by group members against which the validity of perception and the

1 For further discussion of this point, see Kisker, 1964, Chapter 1. Five theoretical models of normality: the subjective, normative,
cultural, statistical, and clinical are outlined along with a discussion of the strengths and weaknesses of each.
appropriateness of feelings and behavior is evaluated (Secord and Backman, 1964)." Social norms include perceptual, cognitive and affective behavior in addition to overt types of behavior. Thus, they become the measure of correctness for the way an individual perceives, understands and feels in any situation (Thibaut and Kelley, 1959).

That these social norms need not conform with what is considered physical reality has been demonstrated by the well-known work of Sherif (1935, 1948) and Asch (1956). These experiments deal with group pressure versus individual perception. In these experiments, a group is asked to estimate the length, height, etc. of some object. The majority of the subjects are in the confidence of the experimenter and purposely misjudge the length, height, etc. of the object. The naive subjects in the group gradually conform to group opinion, disregarding their perception of reality. Furthermore, it has been demonstrated that individuals who have formed an experimental group opinion or "social norm" will respond in terms of that norm when tested alone (Secord and Backman, 1964).

In addition, it has also been demonstrated (Thibaut and Kelley, 1959) that social norms developed outside the laboratory in society itself do so "in a situation where individuals would not ordinarily adopt the behavior in question." This may be interpreted to mean that a particular type of behavior is established as a social norm only when individuals would not adopt it innately or as a matter of course. Monogamy, for example, has become a social norm for mating behavior because individuals do not automatically act monogamously. Also, negative normative behaviors, such as racism, can be seen as imposed on or developed in individuals by a process of societal pressure and modeling. There is nothing in the
behavior patterns designated monogamy or racism which are other than societally determined, and these behavior patterns may vary from society to society, or from group to group. Speaking to this point, Peter L. Berger and Thomas Luckmann write in *The Social Construction of Reality* (1967, p. 49):

"Every culture has a distinctive sexual configuration, with its own specialized patterns of sexual conduct and its own "anthropological" assumptions in the sexual area. The empirical relativity of these configurations, their immense variety and luxurious inventiveness, indicate that they are the product of man's own socio-cultural formations rather than of a biologically fixed human nature.

Just as what is considered a "social norm" is not biologically innate, so what is considered to be sane/normal/adaptive is limited to a particular society at a particular time. Columbus and W. H. Seward, for example, are among the numerous individuals whose actions were judged by a particular society at a particular time to be insane. Columbus' assertion that the world was round and that you could reach the East by sailing West, and Seward's purchase of what was seen as barren, uninhabitable Alaska violated the prevailing norms of their eras. However, later societal standards were able to justify the actions of these men as sane and adaptive.

Thus, it may be seen that sane/normal/adaptive behavior, as interpreted by societies in the social norm, is culturally determined (Benedict, 1934a; Szasz, 1956); does not necessarily conform with physical reality (Sherif, 1935, 1948; Asch, 1956); is not the result of any but sociologically established behavior patterns (Thibaut and Kelley, 1959; Berger and Luckmann, 1967); and is temporally limited.

Of course, although we have dealt with some of the problems of defining the sane/normal/adaptive, the same difficulties exist in
identifying the insane/abnormal/maladaptive. Furthermore, in spite of the existence of an either/or situation in which behavior is either sane or insane, either normal or abnormal, either adaptive or maladaptive; and despite the problems inherent in arriving at a satisfactory description of either sane/normaladaptive or insane/abnormal/maladaptive behavior, educational institutions promote the continuance of this system: therapeutic programs are designed according to this system; and individuals are judged or classed according to this system.

These criticisms are, of course, limited to psychological or sociological descriptions of human behavior. However, similar criticisms apply to a philosophical view of the problem of describing human behavior in terms of sane/normal/adaptive or insane/abnormal/maladaptive.

Philosophy may be partially defined as the study of the nature of man and his thought, and on an epistemological level, judgements, opinions or norms concerning sanity/normality/adaptivity belong to that class of thought considered as δοξα (doxos) by Plato (Copleston, Volume 1, 1962). This is the lowest level of knowing in his epistemological simile of the line (Republic, 509d-511e) and is not considered knowledge but prejudice (Nettelship, 1898).

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2 For further discussion of this point, see Kisker, Op. cit. Six approaches to defining abnormality: the historical, descriptive, etiological, diagnostic, therapeutic, and experimental are outlined along with a discussion of the strengths and weaknesses of each.

3 δοξα means opinion in a literal translation. However, it connotes opinion in the sense of prejudice or of seeing a particular object without having a concept of the class to which it belongs (e.g., seeing only John and not that John is a man, or of seeing only a novel and not that it is fiction).
Therefore, in order to avoid prejudice in one's views of the sane/normal/adaptive, it is necessary to provide an alternative to society's current limitations in describing behavior. Thus, this paper proposes a specific alternative to the present sanity-insanity dichotomy.

The Alternative: Supersanity

The proposed alternative to the problem created by the existing sanity-insanity dichotomy is a theoretical construct which I have come to call Supersanity. Supersanity is, on one level, an observable pattern of behavior: this segment of the construct evolved through several clinical experiences.

I first became aware of the pattern of behaviors involved in this construct while employed at the Brattleboro Retreat, a private mental hospital in Vermont. A few of the patients with whom I worked were diagnosed as "insane" or "abnormal" but exhibited behaviors much different from individuals who I then saw as "crazy." There was a type of awareness, a kind of responsibility in their behavior which did not fit with being "crazy." These individuals were cognizant of the loss of dignity and responsibility that accompanies the label "insane." Furthermore, they did not allow others to treat them without respect or consideration as most of the patients did, nor did they ever learn to be "good patients" and to do as they were told. Instead they seemed to act in accord with an internal set of values. Needless to say, the hospital staff saw these individuals as hostile or trouble-makers and attempted to help them "adjust to reality." After electroconvulsive therapy, psychoterapeutic drugs, seclusion and the like, some made the adjustment, but it was a long and bitter struggle.
I took the memory of those "not-crazy crazy people" with me when I left the Retreat, but never gave any shape or structure to it. This memory remained a sequence of disturbing but unexplained events until I chanced to see the movie version of Catch 22. Projected on the screen, in the character of Yossarian, were those "not-crazy crazy" patterns again. I became aware of the fact that if the society in which he were depicted were to define Yossarian's actions, they would be forced to see him as insane because his actions were out of concert with the accepted social norms. But by being outside the society and free from its norms, I could see that Yossarian was the only sane individual in the situation. And perhaps he was neither sane nor insane but something else; perhaps there was another way to describe his behavior.

This was one spring for the theory of Supersanity and accounts for those portions of the construct which deal with observable behavior patterns. Included in this pattern is the ability to act consistently with an internal value system. This is similar to the possession of an "internal locus of evaluation" postulated by Carl Rogers (in Anderson, 1959) and to the "sense of I as the originator of my acts" described by Eric Fromm (in Anderson, 1959). Supersane individuals, unlike those who participated in Sherif's (1935, 1948) and Asch's (1956) experiments, will tend to give primary consideration to their personal perception of reality and will act consistently with their perceptions regardless of group or societal pressure.

Supersane individuals will also tend to distinguish between the appearance and reality of a given situation. They seem to have the ability to look behind, under or around the apparent situation to find
"what's happening." In Yossarian's situation, they would be able to see that war is not fought for freedom and dignity but to satisfy the egotistical and materialistic desires of the elite. This ability to look behind appearance to the reality of a situation is similar to Neitzsche's description of the Dionysian experience (1956).

Supersane individuals, from my clinical experience, possess two other distinguishing characteristics. One is the ability to act responsibly and intentionally rather than allow aberration or circumstance to justify their actions. Like Sartre (1947b), they see "we have no excuse behind us and no justification before us." They are the originators of, and ultimately responsible for their actions. Supersane individuals also possess personal myths that allow them to define reality and work towards or in it. They seem able to say, "I am a good and kind person," or "I have been chosen to do X thing" and then to act in such a way that their personal myth becomes reality.

However, in addition to being an observable pattern of behavior, Supersanity is also an ontological-epistemological-teleological description of the nature of man and, as such, developed from another direction. As I became aware of the problems in an either/or definition of sane/insane, normal/abnormal, adaptive/maladaptive, I also became aware of the problems of describing human behavior from the perspective of any one academic discipline. A description of any facet of human behavior must, first of all, be multi-disciplinary. This was the second spring of the theory of Supersanity.

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4 Multi-disciplinary is used here instead of Inter-disciplinary to connote the drawing of material from a variety of often seemingly unrelated, academic disciplines. Inter-disciplinary connotes the drawing of materials from somewhat related academic fields such as psychology and anthropology.
The problems inherent in defining sane/normal/adaptive by the use of the social norm could perhaps be overcome if one were to deal with the axiological or ethical issues involved. In addition, I also became aware of the problems inherent in describing human behavior or the nature of man from an exclusively epistemological perspective. The who, the how and the why are dimensions which must be considered in describing human behavior or the nature of man. Sanity/insanity are extensions of Aristotelian categories and are, therefore, strictly epistemological constructs (Copelston, Volume 1, 1964). They deal with only the question of how man acts; man acts either in accord with or against the social norm! They do not deal with the nature of the actor--the who or ontological consideration--nor do they deal with the purpose of the action--they why or teleological consideration.

Thus, I concluded that any adequate attempt at describing human behavior must do so from a multi-disciplinary perspective and deal with ontological and teleological, as well as epistemological considerations. It must also free itself from strict adherence to the prevailing social norms and consider man from within the above philosophical guidelines.
CHAPTER II

PHILOSOPHICAL ASPECTS
OF THE THEORY OF SUPERSANITY

The heart has its reasons
Which reasons cannot know.

Pascal

Sanity or normality is, at present, viewed as being partially
defined as the logical functioning of the human mind. That is, for be-
havior to be viewed as sane/normal/adaptive, an individual must be able
to think in sequential, temporally-limited ways; to be able to move from
step 1 through steps 2, 3, 4, etc. to a warranted conclusion or solu-
tion.\(^5\) For example, to illustrate the inability of the psychotic to
think in logical ways, Kisker (1964, p. 337) presents the following
conversation:

Q: What day is it?
A: According to my brain, it is two weeks from tomorrow.
Q: What time of day is it?
A: It's sub-noon in Egypt.
Q: How old are you?
A: Diagram.
Q: What city is this?
A: I am out of my brain today. City in mind.
    You're not getting any more sense out of me than out of a turnip.

\(^5\)Many psychological tests define normality as the ability to
solve problems in logical ways. Prime examples of this type of test
are the WAIS and WISC (1948, 1953) which allow full score only for
logical answers on sub-tests such as comprehension or similies.
Rorschach (1942) also has a bias for logical answers as may be seen
in categories such as "organization of response" or "determinants of
response."
Kisker follows this example by saying, "The surprising flash of insight and rationality shown by the patient's last remark is not uncommon in the psychosis." What Kisker wishes to show as abnormal is the lack of the ability to demonstrate logical sequence in reaching conclusions or insights. His definition of abnormality in this case refers to the process by which the insight is reached and does not refer to the quality of the insight which is considered valid. The process by which the patient achieved insight into the fact that he was not "making sense" was not logical. However, the insight, in itself, was totally rational; that is, it seemed a valid statement in accord with both the patient's and the doctor's perception of reality. And since both the patient and the doctor agreed on the validity of the perception, we must conclude that it was an accurate description of the circumstances. But it is also evidence of psychosis because of its lack of logicalness.

Thus, a division between reason and logic can be seen to exist in current descriptions of man and sanity. This division focuses on the how of human knowing and forms part of the philosophical base for these descriptions. However, it is inadequate as a description of the nature of man and sanity in that it is primarily epistemological and limited to describing only those aspects of human behavior related to the process of knowing.

A more adequate philosophical base from which to develop a description of man and sanity begins with ontology. Ontology logically precedes epistemology; the nature of being must be defined before the limits of knowledge or the processes of knowing can be defined (Plato, 1942; Descartes, 1927). Thus, the theory of Supersanity will begin
with an ontological definition of man and moves from there to epistemological and teleological considerations.

**Ontological Considerations**

Ontology may be defined as "that branch of metaphysics which has to do with ultimate reality or being (Titus, 1959, p. 486)." Ontology has often been related to theology, and ultimate reality has often been defined as God or Supreme Being (Tillich, 1958).

However, in accord with Copelston's outline of the perennial concerns and diverging points of philosophical systems (1962, Volume 1), we will limit consideration of ontology to the who or being in relationship to man. Within this limit, man will be defined as a rational rather than a logical being, possessing both finite (bodily) and non-finite (spiritual) dimensions (Baker, 1947; Cassirer, 1953). Thus, the being of man is able to contact, if not necessarily interpret, both finite and non-finite dimensions of his environment (Sinnott, 1955; Neibuhr, 1941).

The rationality of man will be viewed in Platonic terms (Copelston, 1962, Volume 1). That is, it will be viewed in terms similar to those used by Plato in the Phaedo (1942) where reason is described as the highest function of the soul and destined to rule or govern the body. Plato sees reason as independent and immortal in its essential nature. According to this view (and it is mine), man is to be understood primarily from the nature and uniqueness of his rational powers. Mind is the unifying and organizing principle of human nature (Baker, 1947; Sinnott, 1955; Perry, 1956). The goal of human effort and progress is the harmonious development of all of man's functions and capabilities.
through the superiority and perfection of reason in man and in his society (Baker, 1947; Perry, 1956).

A more modern expression of this view of man is offered by Reinhold Neibuhr (1941, p. 270) who writes:

To the essential nature of man belong, on one hand, all his natural endowments and determinants, his physical and social impulses, his sexual and racial differentiation, in short, his character as a creature embedded in the natural order. On the other hand, his essential nature includes the freedom of his spirit, his transcendence over natural process, and finally his self-transcendence.

Thus, in the ontological foundation of the theory of Supersanity, man is seen as part of, and superior to, the natural order. He has the ability to use his rational powers to both order and transcend the natural. Also, there is something permanent in his experience of self in relationship to the world, and this permanence is linked with his rational abilities.

From this description of being in relationship to man, we proceed to a description of how man utilizes his rational powers.

**Epistemological Considerations**

Epistemology may be defined as "that branch of philosophy which studies the source, nature and validity of knowledge (Titus, 1959, p. 482)." There are numerous traditional problems and questions associated with this branch of philosophy (Montague, 1925), and because of the possible breadth of epistemological considerations, philosophers such as Charles Pierce and John Dewey (Konvitz and Kennedy, 1960) have held that epistemology is the only productive branch of philosophy.
However, for our purposes we will consider epistemology as following from the ontological considerations outlined above, or as knowledge defined and limited by the being who knows.

Thus, when considering the epistemological question of the sources of knowledge, we must consider the ability of man to experience in both finite and non-finite dimensions. Those current psychological theories which are Empirical and focus on sense-perception as the primary source of knowledge, or are Rationalistic and focus on thinking as the primary source of knowledge, or are a combination of sense perception and thinking are inadequate in that they limit the sources of knowledge and do not allow for knowledge from the non-finite area defined in our ontological foundation.

For the theory of Supersanity, the sources of knowledge will be held to include: (a) sense perception; (b) thinking processes; (c) insight and intuition (Montague, 1925), but it must be understood that

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6 Examples of this type of theory may be found among the adherents of the various "stimulus-response" theories. With Pavlovian conditioning (Pavlov, 1957), the connection between physical perceptions and learning/conditioning/knowledge is clear. In the less apparent connections of Skinnerian behaviorism (Skinner, 1953), the physical experience of food/approval/attention/etc. also results in learning/knowledge/conditioning.

7 Pure examples of the Rationalistic school are rare in psychology. However, Freud's conceptions of the primary process and Id (1916) and Adler's theories including the drive of aggression (1908) are examples of thinking process controlling behavior without necessary reference to sense perception.

8 The best example of a theory combining sense-perception and thinking process is Gestalt psychology (Koffka, 1935; Koheler, 1938). This theory uses sense data and mind as organizer to create knowledge/learning. Concepts such as the closure factor (Wertheimer, 1945) illustrate thought process altering and transforming sense perception.
these sources encompass both the finite and non-finite dimensions of human experience; are not necessarily "observable" in the scientific sense; but are capable of being ordered by man's rational powers (Rhine, 1937).

The sources of knowledge, of necessity, encompass more types of higher thought processes than mere logic. Plato, as mentioned above, uses the term reason to denote all of man's higher thought processes which result in knowledge (Republic, 1942). In addition to the sequential or syllogistic pattern called logic (Montague, 1925), there are various other thought or rational processes acceptable as sources of knowledge within the epistemological considerations of the theory of Supersanity. These include intuition or "the direct apprehension of knowing which is not necessarily the result of conscious reasoning or of immediate sense perception (Titus, 1959, p. 43)."

According to Henri Bergson (1911), intuition is inward and immediate, and can give us insight into the vital impulses of the world, the elan vital. He distinguishes this from intelligence (logic) which deals with matter and quantitative relations and which is incapable of dealing with the nature of life or its duration. Intelligence (logic) must describe living things in static terms, while intuition is free of relationships with matter or the finite and, thus, able to transcend both.

Also acceptable to the theory of Supersanity are such divergent forms of thinking as hypnogogic and hypnopompic imagery,\textsuperscript{9} a priori or

\textsuperscript{9}Hypnogogic and hypnopompic imagery occur just before sleep and just before waking. They are transition states between sleep and wakefulness and allow the individual to experience sub-conscious material directly rather than through the transformations of dream-work (McKellar, 1957).
knowledge not related to experience, and various other forms of thought such as dream-work or serial thinking (Brunner, 1957; McKellar, 1957). All of these have led to advances in science, psychology or literature. For example, the benzene ring was discovered as the result or dream-work; Wertheimer formulated the original Gestalt psychological position after having been partially hypnotized by listening to the monotonous sound of train wheels; and Coolerige wrote Kubla Kahn in a semi-dream state—once he was totally awake, he lost the poem and was never able to complete it (Koestler, 1964).

Any thought process capable of increasing the store of human art, knowledge or science is acceptable to the theory of Supersanity. Indeed, one of the characteristics of this behavior pattern may be the ability to use varied and divergent thought processes to transcend the limits imposed by logic.

Epistemological questions related to the nature of knowledge or of Appearance versus Reality (Titus, 1959) will be delayed until Chapter IV. However, epistemological considerations related to the validity of knowledge will be here considered.

Of the three traditional tests of truth—correspondence, consistency and utility (Murphy, 1943)—no one is acceptable as sufficient to the theory of Supersanity. Modifications are necessary for these traditional tests to be acceptable foundations for the epistemology of the theory of Supersanity.

For example, correspondence theory states that truth is "that which conforms to fact or agrees with the actual situation" or "is fidelity to objective reality (Titus, 1959, p. 64)." Correspondence
theory, in so far as it depends only on sense data for information concerning the finite, is inadequate because, as stated above, man is capable of both finite and non-finite awareness, and correspondence theory must, of necessity, deal with only one of these dimensions—the finite.

Coherence theory, as the second traditional test of truth, describes truth as that which is consistent with other judgements known or accepted as true. Coherence theory demands an inner or formal consistency within the systems under consideration and is separate from any interpretation of the universe as a whole (Murphy, 1943). Again, coherence theory is limited in that its emphasis on logic and formal consistency does not agree with insistence on, or acceptance of, reason and varied higher through processes within the process of knowing. It is, however, more adequate than correspondence theory in that it allows personal references to be used as determinants of truth and affords possibility for dealing with both finite and non-finite dimensions. Its chief defects are the limitations of logic, and that it deals with only some aspects of man's apprehension of the finite and non-finite universe.

The final test of truth to be considered is pragmatic theory. As stated by John Dewey (1920, pp. 156-157), an idea, theory or hypothesis is true: (1) if it can be experimentally verified as true; (2) if it satisfies the desires or purposes of men; and (3) if it aids in the biological struggle for existence.

Pragmatic theory, by itself, is inadequate as a test of truth for the theory of Supersanity in that it also is limited to the finite aspects of man's apprehension by insistence on scientific verification and enhancement of only the biological struggle. As Rhine (1937) has
demonstrated, there are dimensions of man's experience beyond the range of experimentation and biology but certainly not beyond truth.

As has been seen, the three traditional tests of truth are individually inadequate as epistemological foundations for the theory of Supersanity. However, aspects of each, in combination, are capable of providing this base. Thus, truth for the theory of Supersanity is that which corresponds to both finite and non-finite reality. This correspondence can not necessarily be determined by sense perception. Truth is also that which is consistent with individual patterns of belief and commitment whether or not those beliefs form a logical or consistent system. Truth, for the theory of Supersanity, is finally that which satisfies or enhances both the finite (bodily or biological) and the non-finite (spiritual) purposes of men.

From this description of the process of knowing and the limits of knowledge in relationship to the being who knows, we will proceed to a discussion of the teleological considerations within the theory of Supersanity.

Teleological Considerations

Teleology may be defined as "the theory of ends and purposes; the doctrine that there is a design or purpose operating through the structure of the universe (Titus, 1959, p. 490)." Teleology argues that the order and progress in the universe discloses an immanent intelligence and purpose. Like ontology, teleology and teleological purpose or design have been traditionally linked to a belief in God. However, in considering teleology, we will again focus on man, on his relationship
to the design and purpose of the universe; for Supersanity is a theory describing the nature of man and sanity.

The relationship of man to the design and purpose of the universe has been well described by Walter R. Matthews in The Purpose of God (1936, p. 127) where he writes:

When we dwell upon one aspect of the universe alone—the physical in abstraction from the mental and spiritual—man may appear dwarfed and insignificant in comparison with the stupendous frame of things; but when we refuse to be deceived by this abstraction and unite the two aspects, we are compelled, as I believe, to form a different estimate. Man, who knows and values and appreciates, is no alien in the universe. He is the revelation of its nature. In him, the universe discloses itself in its real inner being—not as dead system but as living Spirit.

For the theory of Supersanity, the nature of the universe in relationship to man is purposeful. This purpose or design is the completion and fulfillment of all of man's capabilities and functions in a positive manner.10 Within the theory of Supersanity, the fact that man has the potential for transcending nature and self (Neibuhr, 1941) is of utmost concern. Since the theory of Supersanity aims at a more adequate description of man and sanity, it must, of necessity, deal with a positive teleology. Thus, concepts such as the ability and drive to individuate and integrate various knowing processes (thinking, feeling, sensing, intuiting) described in the psychology of C. G. Jung (1933) is the type of teleological statement necessary for the theory of Supersanity.

10 It must be recognized that the psychological concepts such as the "death instinct (Freud, 1933)" are not teleological in that they deal not with fulfillment of the total being (physical and spiritual) but only with biological inevitability.
The teleological position of the theory of Supersanity is:

1. That the design of the universe in relationship to man is for physical and psychological health and wholeness (Rogers, 1961; Maslow, 1951).

2. That man contains within himself the ability to achieve this health and wholeness (Rogers, 1961; Jung, 1969; Neibuhr, 1941).

3. That individual abberations are not part of the universal design or purpose (Sinnott, 1955; Rogers, in Koch, 1959).

4. That the drive toward individual fulfillment of capabilities encompasses more than the biological level (Rhine, 1937; May, 1970; Maslow, 1951).

This teleological position implies that individual development is naturally proceeding toward the development of health and wholeness. Only external factors, such as the environment or other men or personal choice, prevent individuals from attaining wholeness of both body and spirit (Maslow, 1951). This position also implies that there is a universal force or tendency guiding all men to become whole. This force or tendency exists within all men and may be variously called "self-actualization" (Maslow, in Anderson, 1958), "individualization of the self" (Jung, 1933), or "unity with the universal" (Neitzsche, 1956). However, regardless of its name, man possesses this tendency to become a whole, healthy individual.

The teleological position of the theory of Supersanity is, further, that the universe as a whole is designed to promote the development of wholeness in men. Individual abberations occur either because man chooses to act in ways contradictory to this purpose or because man chooses to fulfill himself on only one of the finite or non-finite
levels. External factors may also circumvent the teleology of wholeness. Nonetheless, the theory of Supersanity holds that it is always present, guiding the individual toward itself, toward becoming whole and healthy in body and in mind.

This concludes our discussion of the philosophical foundations of the theory of Supersanity. From here, we will move to a discussion of characteristics of Supersane individuals which are related to the above discussion.

The Implications of the Dichotomy Between Reason And Logic for the Theory of Supersanity

As discussed above, sanity is, at present, being partially defined and described as the ability to think in logical ways. And as pointed out by the example from Kisker's *The Disorganized Personality* (1964), insight or the correctness of a problem solution is not as important to current definitions of sanity as the process of achieving the solution. What makes a psychotic psychotic is not the inability to achieve insight or solve problems but the inability to do so in a logical fashion.

Historically, logic has been held in high regard, and as also previously discussed, forms part of the coherence theory of truth (Murphy, 1943). There have been, however, several well-known challenges to the validity of logic as a test of truth. Perhaps the earliest and most revealing of these challenges was that of Zeno of Elea to the mathematical and philosophical system of the Pythagoreans (Copelston, Volume I, 1962).
Zeno of Elea, born about 489 B.C., was a disciple of Paramenidies. Paramenidies taught that change and motion were illusion, and since change and motion are evident from sense perception, his position was ridiculed. Zeno endeavored to demonstrate that Paramenidies was by no means ridiculous by taking the Pythagorean theorems, and by the use of logic, carrying them to their absurd conclusions. For example, Zeno writes (Copelston, Volume 1, 1962, pp. 73-74):

Suppose a moving arrow. According to the Pythagorean theory, the arrow should occupy a given position in space. But to occupy a given position in space is to be at rest. Therefore, the flying arrow is a rest, which is a contradiction.

or,

Let us suppose that you want to cross a stadium or race-course. In order to do so, you would have to traverse an infinite number of points, . . . on the Pythagorean hypothesis. . . . You would have to travel the distance in finite time if you wanted to get to the other side at all. But how can you traverse an infinite number of points, and so an infinite distance, in a finite time? We must conclude that you cannot cross the stadium. . . . The same difficulty always recurs and all motion is consequently impossible.

In the first example, Zeno's use of syllogistic logic is clear. With minor changes in order, the second example can also be seen as a syllogism. It is also evident that there is no fault in the logic of either example; however, the conclusions are absurd, and it is the fact of obtaining absurd conclusions from correct logical processing that makes Zeno of Elea of interest to the theory of Supersanity.

While his aim was to demonstrate the absurdity of the Pythagorean philosophical system and to support that of Paramenidies, Zeno of Elea demonstrated for all time that using "correct" process does not necessarily lead to "correct" solutions. Indeed, solutions thus obtained are often absurd, and Zeno's method of attacking Pythagorean theory
demonstrates the necessity of considering both process and conclusion when evaluating the outcomes of man's thought processes.

For the theory of Supersanity, reason rather than logic is the accepted mode for thought process, and as stated above, all the various types of thought processes available to a man are encompassed by reason. One of the characteristics of the Supersane individual is the ability to move freely between the various thought processes available to him and to integrate reason and emotion in solving problems or acting in life situations. This means that the Supersane individual is not so tied to logical or conscious thought patterns that he must use them exclusively. He is able to utilize all the resources of his conscious and unconscious mind, to be illogical, or to be logical. This experience in Supersane individuals is similar to that of self-actualizing people described by Abraham Maslow (in Anderson, 1959). Maslow holds that self-actualizing individuals have greater access to subconscious material and are more able to use the primary process for acting in life situations. And, he further holds that self-actualizing individuals are also extremely healthy individuals.

The Supersane individual is also able to integrate reason and emotion in problem-solving or daily action. Speaking to this point, Kahlil Gilbran in The Prophet (1958) writes:

Your Reason and Passion  
Are the Rudder and Sails  
Of Your sea-faring Soul.  
If either your Sails or your Rudder  
Be broken,  
You can but toss and drift, or else  
Be held at a standstill  
In mid-seas.
The integration of reason and emotion in thought processes and problems solutions or conclusions may appear, to individuals tied to societal standards of judging behavior, as insane. However, when seen from the point of view of the individuals dealing with the problems these solutions or conclusions are entirely rational, if not logical. In *Catch 22* (Heller, 1970, p. 17), Yossarian illustrates this in an exchange with his comrades.

"You're crazy! . . . I'm not joking," Clevinger persisted.
"They're trying to kill me," Yossarian told him calmly.
"No one's trying to kill you," Clevinger cried.
"Then why are they shooting at me?" Yossarian asked.
"They're shooting at everyone," Clevinger answered.
"And what difference does that make?" . . .
"Who's they?" he (Clevinger) wanted to know. "Who specifically, do you think is trying to murder you?"
"Everyone of them," Yossarian told him.
"Everyone of whom?"
"Everyone of whom do you think?"
"I haven't any idea."
"Then how do you know they aren't?"

The above conversation can be judged in two ways; the first would be from the prevailing clinical perspective, and Yossarian would be seen as possessing classical symptoms of paranoia—feelings of persecution, refering all ideas or actions to the self, etc. (Maslow and Mittelmann, 1951)—; the second would be from the point of view of Supersanity where Yossarian's statements could be judged as contributing to his quest for survival—people were shooting at him—and, therefore, his statements are true on one level (Dewey, 1920). Also, seen in the context of the total situation, Yossarian's absurd statements, quoted above, are true and are born out by later events. Everyone—the Germans, his
friends, his officers, Natley's whore—is trying to kill or destroy him. So his seemingly insane response to Clevinger's questions may be seen as representing responses including his intuition of the total situation rather than only that portion of Yossarian's experience specifically being discussed with Clevinger. It is true that some of the events necessary for a view of the total situation are future occurrences, but as discussed above, man is capable of awareness of both finite and non-finite dimensions (Baker, 1947; Cassirer, 1953). If Yossarian's present apprehension of a situation corresponds to the future actuality is it not true or correct, if illogical? Also, if Yossarian reasons consistently with his emotional apprehension of a given situation is this not coherent and, thus, true?

As a Supersane individual, Yossarian is able to integrate his reason (which tells him that people die if they are shot at in planes for a long enough time) with his emotion (which tells him he does not want to die) to get himself out of flying any more missions. Judged by the norms of his society, Yossarian is a coward for doing this. He also displays behavior that some would consider as "out of touch with reality." And he is "out of touch" with the reality others around him exist in, but to Yossarian, the war is not being fought to save the world from Fascism but for the gain of a few. He sees himself as a pawn in situation where reality does not correspond to the appearance that everyone agrees upon. Yossarian acts upon his perception of reality, on what his reason and emotions convey to him. And he acts in a way that is neither sane nor insane but something else. He displays behavior characteristic of the Supersane.
Another example of a Supersane individual who integrates reason and emotion in solving problems or reaching conclusions about events surrounding her is The Countess Aurelia in Jean Giradoux's play, *The Madwoman of Chaillott* (1958). In this play, The Countess Aurelia is faced with reaching a decision about exterminating a group of men out to destroy Paris with their greed. And she exterminates these men with so little compassion and with so few misgivings once her decision is made that she appears also to be demented. She displays the "lack of emotional response, or sense of guilt" characteristic of the sociopathic personality (Maslow and Mittlemann, 1951). She acts "as if she did not sense that she was doing wrong."

In classifying The Countess as insane, current theory would not consider the fact that she was acting consistently with her beliefs. She would be considered insane because she violated societal standards which approve of greed and economic destruction of others. It would not help that The Countess was aiding in both the biological and moral struggle for existence. She would be insane!

But the theory of Supersanity has another way of describing her actions. The Countess believed the world to be a place where greed and insensitivity to the needs of others are out of place. Reasoning in accord with her emotional reactions to the situation threatening Paris, she is able to overcome the powerlessness felt by her friends and to eliminate the threat to her beloved city. To do so, it is necessary for her to integrate her reason and emotion. Alone, neither would suffice; reason alone would tell her she would be unable to overcome the power of The President and The Prospector. Emotion alone would have opened feelings of guilt and anger, but also of helplessness and
hopelessness. She would not have been able "to save The World." Characters such as Pierre and Irma, who are primarily reasonable, or Mmes. Constance and Josephine, who are only emotional, are unable to solve the problem. Only The Countess, with her ability to integrate reason and emotion, can develop a way to save Paris and The World.

Of course, The Countess does not destroy the individuals threatening Paris without compassion. She gives them a fair trial and then lets their own greed condemn them. She only allows this to happen. But it is the allowing of the event that saves the situation. And in her actions, the Madwoman saves the very things that society believes it is protecting. The Countess, like Yossarian, is neither sane nor insane; she is something else; she is Supersane.

The characteristic of including both reason and emotion in problem-solving or conclusion reaching gives the Supersane individual the power to transcend mere logic by allowing emotional apprehension of both finite and non-finite dimensions to be paired with various types of thought processes, thereby increasing the scope and force of any solution or conclusion by drawing on more aspects of man's being. The Supersane individual seems able to tap the varied thought processes and emotional experiences at his disposal. He is also able to free himself from the logical norms of society and use his reason and emotion as a guide for his actions. This combining of reason and emotion creates a new or different thought pattern than that found in the insane where emotion reigns, or in the sane where reason is the order of the day.
CHAPTER III

THE THEOLOGICAL IMPLICATIONS OF THE THEORY OF SUPERSANITY

"Understand your station as man; do as the Father tells you; and you will be safe tomorrow," says Apollo.

"Forget the difference, and you will find the identity, and you will be happy today," says Dionysus.

E. R. Dodds

Current psychological theories dealing with sanity and insanity make no claim to a theological base. The belief or non-belief in a deity or particular religious system is of no importance unless belief becomes a symptom of disorder, such as the paranoid schizophrenic who believes himself to be Jesus Christ.

There is, however, an aspect of theology (or theosophy, if you will) which is related to both current psychological theory and the theory of Supersanity and is necessary to an adequate description of the nature of man as well. This aspect concerns man's apprehension

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11 This does not, of course, wholly apply to the various schools of pastoral counseling, such as the "Personalism" of Peter Bertocci (1957), current in Protestant seminaries. However, while they are designed for use in religious settings, they draw heavily on other, traditional theories such as psychoanalysis, and cut across the conflicting dogmas of the various sects. Thus, their only theological base is the counselor who is usually a minister.
of his separateness from, or his unity with, the divine or non-finite aspects of his nature and being. Using the categories described by E. R. Dodds in *The Greeks and the Irrational* (1971), man's awareness of the distinction between himself and the divine or non-finite will be considered Apollonian, and man's awareness of his unity with the divine or non-finite will be considered Dionysian.

**Apollonian Considerations**

Within Dodd's framework, current psychological theories can be seen as Apollonian in their description of sane/normal/adaptive behavior. Apollonian forms of behavior are described by theology and anthropology as well as psychology. Each of these disciplinary descriptions of Apollonian behavior have relevance for the theory of Supersanity and will be considered in turn.

Descriptions of Apollonian behavior in these various disciplines include: "adhering to form," "being ordered," "rational," "emphasizing individuality," or "focusing the individual on himself or his place" (May, in Anderson, 1959; Dodds, 1971; Neitzsche, 1956; Benedict, 1934b). A discussion of how these various descriptions of Apollonian behavior apply to theology, anthropology, psychology, and the theory of Supersanity follows.

**Apollonian Aspects of Theology**

The Apollonian distinction between the individual and the divine forms an important aspect of various theologies. Here, however, discussion will be limited, for the most part, to Christian theology as illustrative of Apollonian definitions of man.
The distinction between the individual and the divine in Christian theology begins with the establishment of individuality, of separateness. The first step in this process is distinguishing man from God, of highlighting those things that are characteristic of God but not of man, and vice versa. Thus, discussing the characteristics of God in Christian theology, Etienne Gilson (1941, pp. 52-54) writes:

There are, therefore, some beings that are radically different from God at least in this that, unlike him, they might not have existed, and still may, at some time, cease to exist. Thus to be, or exist, is not at all to be, or exist, as God Himself is or exists. It is, therefore, not to be an inferior sort of god; rather it is not be a god at all. . . . Man finds himself therein excluded from the order of the divine. Between "Him who is" and ourselves, there is an infinite metaphysical chasm which separates the complete self-sufficiency of His own existence from the intrinsic lack of necessity for our own existence.

Christian theology at once distinguishes man from God and dwarfs man in the comparison. Man is "created" rather than "begotten." That is, his very existence is dependent upon an act of God, is received from God (Augustine, in Copleston, Volume 2, 1964). Without God, man is nothing. Man partakes not at all in the divine aspects of being in Apollonian Christian theology (Gilson, 1941).

Once the generic differences between God and man are thus established, Christian theology proceeds to lay the foundation for the separation of the individual man from the divine. This is accomplished by the Christian myth of the "sinner," of man "fallen" and thus cut-off from the grace of God (Ferre, 1967). While all of mankind is "fallen" because of Original Sin, each individual man is also "fallen" or separated from God by his own sin. Except for Original Sin, sin is always the result of individual action, and it is equally impossible for an individual not to sin or not to act (Edwards, 1841).
Thus, sin is what separates man from God or from the divine within himself, and grace is what unites him with the divine both within and without the self (Gilson, 1941). Grace, however, cannot be obtained by man at will (Neibuhr, 1951). God's grace is obtained by man through the observance of correct form.

Adherence to form in religious experience is, of course, another dimension of Apollonianism. Through observance of correct form, man can hope to establish contact with the divine and influence the divine in certain ways. However, in this process, it is always the form and not the individual that is powerful. H. Richard Neibuhr points to this in Radical Montheism and Western Culture (1943, p. 51) when he writes:

By means of social ritual, doctrine and tradition, it (faith) is organized and directed toward certain objects and events. In this process of organization, the form of faith is very influential.

From this discussion, it can be seen that Apollonianism isolates man from the divine or non-finite in both generic and individual terms, and in isolating him, it reduces the sources of power available to him. Either he is restricted in his personal action by the effects of sin upon his soul (Edwards, 1841) or he is dependent upon correct observance of form in order to influence the divine (Neibuhr, 1943). In either event, Apollonianism in theology limits man's experience by confining him either to his finite self or to certain prescribed forms of interaction with the divine or non-finite dimensions of his experience.

The outcome of adherence to form and emphasis on the discrete-ness of the individual is described by Gilber Murray in The Five Stages of Greek Religion (1955, p. 119) as follows:
It is hard to describe. It is... a sense of pessisism; a loss of self-confidence, of hope in this life and faith in normal human effort; a despair of patient inquiry, a cry for infallible revelation; an indifference to the welfare of the state... It is an atmosphere in which the aim of the good man is not so much to live justly, to help the society to which he belongs... but rather, by means of a burning faith, by contempt for the world... to be granted pardon for his unspeakable unworthiness, his immeasurable sins. There is an intensifying of certain spiritual emotions, an increase of sensitiveness, a failure of nerve.

As the individual becomes more and more isolated from the power of the divine or non-finite within himself, and becomes more and more dependent upon form to contact or influence that power, his ability to change and to become slows and ultimately stops. When this happens, Apollonianism becomes synonymous with the maintenance of form and individuality—the Apollonian status quo.

This is the "failure of nerve" Murray speaks to. It is the stagnation of theology and religion and individuals until the very inertia of the process demands that Apollonianism be destroyed in favor of dynamic experience and faith.

Apollonian Aspects of Anthropology

Within the field of anthropology, the concept of Apollonian and Dionysian cultures was developed by Ruth Benedict in Patterns of Culture (1934b), and discussion of these concepts in anthropology will be limited to Dr. Benedict's outline of them.

In discussing Apollonianism in cultures, Dr. Benedict points out that "adherence to form" is characteristic. As mentioned above in discussing Apollonianism in theology, form is used as a means of contacting and influencing the divine, and it is always the form and not the individual in which power resides. This agrees with Dr. Benedict's
discussion of the religious practices of the Zuni. She describes them as follows (1934b, p. 55f):

Zuni religious practices are believed to be supernaturally powerful in their own right. At every step of the way, if the procedure is correct, the costume of the masked god traditional to the last detail, the offerings unimpeachable, the words of hours long prayers letter perfect, the effect will follow to man's desires.

And, Dr. Benedict also points out, Apollonian cultures in general, and Zuni in particular, invest great amounts of societal energy in preserving form and ritual. In fact, ritual and ceremonial life may eclipse all other concerns in Apolonian culture. For example, again speaking of the Zuni, Dr. Benedict writes (1934b, pp. 54-55):

No field of activity competes with ritual for oremost place in their attention. . . . The ceremonial life not only demands their time, it preoccupies their attention. . . . If an impersonator wears a new feather on his mask, it eclipses all talk of sheep or gardens or marriage or divorce.

Great investment of societal energy in ritual is, of course, logical in an agricultural Apollonian society. For individuals are powerless to influence the gods of rain and fertility; only the precise observance of ceremony can do so. Therefore, powerless individuals join in ritual to influence the crop and corn gods (Frazer, 1951).

Another characteristic of Apollonian society, says Dr. Benedict, is lack of individualism. In Zuni, for example, there is no striving for personal power, no emphasis on personal excellence. Power resides in the ritual group or family to which one belongs, in particular, to the ceremonies and ritual possessions that the group or the family controls. However, when it is understood that the process of individuation in Apollonian terms begins with the drawing of distinctions between man
and god, we can better understand the lack of second-level individuality\textsuperscript{12} in Zuni.

The Zuni are an agricultural people and believe themselves dependent upon their corn gods for survival, and the way to influence these gods is through correct observance of ritual. But in the Zuni pueblos, men are indeed seen as separate from the gods and made aware of the distinction between themselves and the divine. So they band together to observe ritual; they join with others, powerless as themselves, to protect and participate in the source of power.

Because of dependence upon group cooperation in carrying on ritual, the Zuni never develop second-level individuality as Christians do. That is, there is no process in Zuni to distinguish each individual man from the divine. The Zuni are without a concept of sin. However, the Zuni are also culturally bound to expend the major portion of their societal energy on the preservation of ritual. Thus, there is little change.

Again, this is similar to Murray's (1955) concept of the failure of nerve. Because Apollonian cultures give power to form, ritual and ceremony, maintenance of form uses up most of the society's energy. Thus, change and growth slows and ultimately stops. In extreme cases, Apollonian societies can preserve detailed forms for thousands of years. Witness Egyptian art which followed a prescribed form for nearly twenty-five hundred years (Janson, 1966). However, they cannot adjust to or

\textsuperscript{12}Second-level individuality is individuation of the individual. That is, separation of man from god in generic terms is first-level individuality. Separation of the individual from the divine is second-level individuality.
incorporate major changes. Thus, they must exist in isolation and stagnation or be absorbed by more dynamic societies (Muller, 1954).

**Apollonian Aspects of Psychology**

Within the field of psychology, form and individuality are crucial aspects of current theories dealing with sanity and insanity. As discussed in Chapter II, sanity in current theory is partially defined as the ability to think in logical or ordered ways; and the form which thought takes is considered more important in these theories than the outcome of the thought process (Kisker, 1964). This emphasis on form and order is clearly Apollonian, as is emphasis on the awareness of individuality.

Sane/normal/adaptive is also partially defined, in present theory, as the awareness of individuality (Erickson, 1959). In psychology, this awareness of individuality becomes a third-level distinction, the first-level of individuality is the separation of man from the divine in generic terms, and the second-level of individuality is the isolation of the individual from the divine. Then, the third-level of individuality is the separation of individual men from each other. This is the final Apollonian distinction of individuality. And in current psychological theory, only the insane/abnormal/maladapted individual is unaware of who he is. As Alexander Lowen states in the opening lines of the *Betrayal of the Body* (1967): "Normally, people don't ask themselves, Who am I? One's identity is taken for granted. Each person carries in his wallet papers that serve to identify him. ... Consciously, he knows who he is."
Sanity, in current psychological theory, means the boundaries between the self and others must be clear and distinct. Sane/normal/adaptive persons establish "identity" as individuals and in the roles they play (May, 1953; Erickson, 1950). For example, in speaking of personality development within the Freudian developmental model, Woodworth and Sheehan (1964, p. 293) state:

At adolescence, the normal individual's ego will integrate the assortment of identifications, aptitudes, and role experiences which have accumulated throughout earlier periods, and derive an identity which is distinctly his own, and which, he is confident, bears a reasonable resemblance to what others think of him. In contrast to this self-awareness and stability are the uncertainty and experimental quality of the transient identities tried out by the adolescent whose psycho-social odyssey has not been well guided, and who arrives at this stage of development with doubts about his place in society.

However, the view that a well-established identity is necessary for sanity is not limited to the Freudian view of sanity. It is prevalent in other theories also. In fact, psychology in general would agree that if a person confuses himself with another he is either infantile, like the neonate who is unable to distinguish between himself and his mother's breasts, or insane, like the schizophrenic who is unable to distinguish between appearance and reality or between himself and some famous personage (Bellack and Blaustein, 1958).

In fact, Apollonian aspects of current theory are carried so far that Lowen (1967) suggests that awareness of individuality must correspond to the form of one's body, and any discrepancy between bodily form and identity is insane/abnormal/maladaptive!

Thus, it can be seen that current psychological theories are Apollonian in their focus on individuality. Of course this means that individuality must follow a certain form, assume a certain mold which
will serve to distinguish one man from another. And once the form of individuality (or personality as it is more commonly expressed in psychology) is set, an individual's energies will go into preserving it (Edinger, 1972). Furthermore, as noted in the discussion on Apollonianism in theology and anthropology, once form, ritual or role become solidified, the process of change slows and may ultimately stop.

Therefore, it is possible as Erickson (1950) points out, for an individual to attain the final form of his personality at the close of adolescence. At this point, he permanently succeeds in distinguishing himself from other men. Of course, maintenance of this distinction will occupy his time and energy, and he will permit change in his identity only slowly and as the change is shown not to affect his individuality, his distinguishability. As an Apollonian individual, he will, like Apollonian culture, be unable to accommodate rapid or major change. Thus, in all probability, he will maintain the personality of another era in a rapidly changing society (Goldhamer and Marshall, 1953).

**Apollonianism in Relation to the Theory of Supersanity**

As discussed in Chapter II, the theory of Supersanity holds that man is capable of apprehension in both finite and non-finite dimensions. This assertion contrasts to Dodds (1971) description of Apollonianism as man's awareness of his separation from the divine or non-finite. Furthermore, Apollonianism, because of its focus on form, order and identity, keeps the individual within the sphere of finite awareness. That is, the focusing on individuality in relation to role and bodily function in psychology, and the centering on individuality in relation to man's separation from the divine or
non-finite in theology and anthropology, ties man to sense perception and the limits of time and space. Man can sense his separateness from other men; he can measure the amount of time it takes to complete some action; he can know his powerlessness to influence the world or to change himself. This limiting of man's apprehension is, therefore, in conflict with Supersanity's assertion that man is capable of apprehension of both finite and non-finite dimensions and that sense perception is not the only basis for knowledge (Rhine, 1937).

Also, because individuality is stressed in Apollonian theories in theology, anthropology and psychology, the individual must, of necessity, come to sense his separation from the universe as a whole; and as his sense of separateness increased, so must his awareness of his personal limitations. (The concept of sin in theology is just one example of personal limitations being defined by Apolonian theories.) In fact, the more Apollonian theories stress individuality (or the discreteness of the individual) the more they remove the individual from the sources of power within himself and outside of himself by promoting the distinction between the individual and the non-finite or divine aspects of being. Moreover, it can be seen that Apollonianism systematically isolates man from God (or the external divine and non-finite), from the divine or non-finite within himself, and from both the finite and non-finite in others. This is the purpose of the three levels of individuality; and Apollonianism, thus, make man powerless in his separateness from the varying parts of the universe.

However, as discussed in Chapter II, the theory of Supersanity asserts that man is part of the natural order of the universe (Neibuhr,
(1941). He is able to apprehend it in all its parts and has unity with its purpose. Furthermore, he is powerful in his ability to use his reason to apprehend, contact and shape the universe (Baker, 1947; Perry, 1956).

Thus, it can be seen that Apollonianism is inconsistent with the theory of Supersanctity and another perspective on man's relationship to the divine and the non-finite must be sought.

**Dionysian Considerations**

Dionysian aspects of being, in current psychological theory, are mainly limited to theories of creativity (May and Maslow, in Anderson, 1959; Neitzsche, 1956) or are used as descriptions of other than sane/normal/adaptive behavior (Braginsky, Braginsky and Ring, 1969). 13 Dionysian behavior has been variously described as "ecstasy," "letting go," "a union with the universe," and the "destruction of individuality" (May, in Anderson, 1959; Dodds, 1971; Neitzsche, 1956). Its important characteristics are the lack of form and order—being instead spontaneous and chaotic—and the lack of a sense of individuality and separateness—being instead a union between the individual and the universe.

These Dionysian descriptions of behavior also occur in theology, anthropology and psychology. A discussion of Dionysianism in these 13 The relationship of Dionysian characteristics with insane/abnormal/maladaptive behavior can be seen in descriptions of the psychotic as "deficient in discriminating reality, primitive...uncontrolled," or "unable to assume his own role" (Braginsky, Braginsky, and Ring, 1969).
disciplines and the relationship of Dionysianism to the theory of Super-
sanity follows.

Dionysian Aspects of Theology

Dionysianism in theology will be defined in Dodds (1971) terms as man's awareness of his unity with the divine or non-finite. Since Dionysianism is not part of main-stream Christian theology, discussion will include illustrations from other religious systems in addition to Christian theology.

Dionysian theology, of course, emphasizes man's unity with the divine both within and without the self. It promotes experience in which man apprehends this unity, and the experience of unity with the divine, like the Apollonian experience of separation from the divine, can occur on three levels. These are man's awareness of the divine within himself, his cognizance of the similarity between himself and the divine, and his comprehension and contact with the divine in others.

The level of man's awareness of the divine or non-finite within himself occurs in many religious systems, and where it occurs, it seems to have the effect of supressing or de-emphasizing individuality in favor of highlighting man's union with the universe. A capsule expression of this type of experience occurs in The Birth of Tragedy (1956, p. 447) where Neitzsche writes:

... (it) wishes to convince us of the eternal delight of existence, but it insists that we look for this delight not in the phenomena but behind them. ... It forces us to gaze into the horror of individual existence, yet without being turned to stone by the vision; a metaphysical solace momentarily lifts us above the whirl of shifting phenomena. For a brief moment, we become ourselves, the primal Being, and we experience its insatiable hunger for existence. Now we see the struggle, the pain, the
destruction of appearances, as necessary. . . . We become one with the immense lust for life and are made aware of the eternity and indestructibility of that lust. . . . We realize our great good fortune in having life—not as individuals, but as part of the life force with whose procreative lust we have become one.

Unlike Apollonian Christianity, Dionysianism does not contain the concept of sin separating man from the divine within himself. Instead, the divine or non-finite is always within his grasp; he need only let down the internal barriers between it and himself (Dodds, 1971).

Thus, Dionysianism, instead of limiting man to finite awareness of himself, expands the limits of the individual and allows him to draw upon the "life forces" which exist within, as well as without, the self (Neitzsche, 1956; Kaufman, 1956).

This concept of man having access to all the power of the divine or non-finite dimensions of the universe through contact with the self forms an important part of Eastern religious dogma, especially in Hinduism (Zimmer, 1956). For example, in discussing the process by which the divine becomes known in Hindu religious thought, Zimmer (1956, p. 12) writes:

The mythological creator, the Lord of the Universe, is no longer of interest. Only the introverted awareness bent deep and driven to the depth of the subject's own nature reaches that borderline where the transitory superimpositions meet their unchanging source. And such awareness can finally succeed even in bringing consciousness across the border to merge—perish and become therewith imperishable—in the omnipresent substratum of all substance. That is, the Self (atman), the ultimate, enduring, supporting source of being.

To fully understand Zimmer's statement, it is necessary to realize that atman means both self and soul in Sanskrit (Watts, 1959), and in its meaning as soul partakes of the divine essence of the One, the Only Soul, Brahmin (Zimmer, 1956).
Another way in which Dionysian theology unites man with God is in the sense of placing him in contact with or equating him with the external non-finite or the divine without himself. This contact or equation is established in several ways. The simplest and most common is by "a rite of passage" which strips man of his finite nature at the same time it exposes his divine attributes (Murray, 1955; Jung, 1969; Apuleius, 1962). Rites of passage\(^4\) were common in the mystery religions of the Ancient Near East and the Roman Empire (Muller, 1954). They were Dionysian and offered man salvation by showing him the way to join or become one with the gods (Parkes, 1959; Apuleius, 1962). In fact, after initiation, the Orphic devotee wore a golden scroll about his neck as a constant reminder of his unity with the divine. This scroll read, "I am the child of Earth and of the starry Heaven. I too am become God" (Murray, 1955, p. 142).

Dionysianism also proffered direct access to the divine and non-finite outside of man. Each man could be "his own priest" in a Dionysian religion (Cox, 1969). In discussing this aspect of Dionysian societies, Ruth Benedict notes that among the North American Indians the practice of obtaining supernatural power or an interview with some divinity was available to any member of the tribe who desired this experience. All one had to do was find emotional expression intense enough to overcome the pull of the common place (Benedict, 1934b).

\(^4\)While rites of passage and other ceremonies equating man with, or allowing him to contact the divine or non-finite, may follow specific forms in Dionysian religious ritual, these rituals are unlike Apollonian ritual. Power does not reside in the form of the Dionysian ritual but in the intense emotional experience of the participants (Frazer, 1951).
Before considering the role of intense emotionality in Dionysian religions and theologies, it is necessary to discuss man's ability to experience the divine or non-finite in other men. This means that unlike Apollonianism where men are isolated from each other in their own individualism, in the Dionysian experience of unity with the universe, man also experiences unity with others (Cox, 1969; Cassirer, 1953, Neitzsche, 1956). Dionysianism allows men to pool the power available to them; it makes the individual stronger by allowing him contact with others who are also powerful.

The principle manner in which Dionysianism contacts the divine within the self, in the external world, and in other men, is through intense emotional experience. In Dionysianism, intense emotional experience serves the same function as form in Apollonianism; it lifts man from the world of the common place to the realm of the divine (Parkes, 1959; Zimmer, 1956; Kaufman, 1956). However, in this experience, it is always the individual and not the rite or even the emotion being observed in whom power and divinity reside.

Underneath any Dionysian emotional experience is a sense of celebration, celebration of the power and divinity of being, celebration of man's participation in the unity of being (Neitzsche, 1956). One of the effects of this celebration of being is, as Neitzsche (1956) pointed out, the "destruction of individuality." In Dionysianism, man is not a discrete individual but partakes of the divine or non-finite within himself, without the self, and in others (May, 1969; Dodds, 1971). Dionysianism expands man's limits, emerses him in the being of the universe by blurring the boundaries of the self. The Dionysian loses the
self in his ecstasy, in his intense emotional experience. This opens
the finite and non-finite power of the universe to man, makes him part
of it; it also creates gods and individuals who are difficult to dis-
tinguish from one another.

Dionysian Aspects of Anthropology

As with the concept of Apollonian culture, the concept of
Dionysian culture was first introduced by Ruth Benedict in *Patterns of
Culture* (1934b), and discussion of Dionysian culture will be, in the
main, limited to Dr. Benedict's outline. However, since her description
of Dionysian culture is not as extensive as her description of Apollonian
culture, other relevant sources will also be considered.

Just as adherence to form is the outstanding characteristic of
Apollonian culture, intense emotional experience is characteristic of
Dionysian culture. In fact, little occurs in a Dionysian culture that
does not call for violent emotional expression. Thus, in discussing
the Kwaikiutl Indians of the Northwest Coast, Dr. Benedict (1934b)
catalogues the major events necessitating emotional release. These
range from birth, coming of age and marriage, to death, sickness or
accident. In fact, almost any event in Kwaikiutl calls forth passion-
ate outbursts. And emotions in this society can be powerful enough to
cause a man to "die of shame" or to commit suicide when events go con-
trary to his desires.

Dr. Benedict also notes that intense emotional experience is
the way in which man contacts or unites with the divine in Dionysian
society, and this experience of contact is open to anyone who so desires.
She further states that supernatural awareness gained by individuals in Dionysian societies carry, in theory at least, authority to change custom. Thus, it would have been possible for an American Plains Indian to bring about a major change in the custom of his tribe by claiming instruction to do so came from an interview with some deity.

From this, it can be seen that Dionysian cultures do not regard societal forms as sacred and to be preserved with great expenditure of societal energy (Parkes, 1959). Instead, Dionysian culture invests the major portion of its energy in emotional experience and allows new forms and customs to emerge in a dynamic manner.\textsuperscript{15}

It has been noted that Dionysian involvement in emotional experience and creation of new or emerging forms is characteristic of the lower classes in a stratified Apollonian society (Dodds, 1971; Cox, 1969). That is, when the upper classes of a society are Apollonian, the lower or oppressed classes will tend to be Dionysian and preserve the emotion- alism, celebratoriness, and creativity of Dionysianism (Parkes, 1959; Apulieus, 1962). And this undercurrent of Dionysianism will give the society creative energy and new cultural forms.

This concept is not difficult to understand if Black America is considered. The Dionysian sense of celebration still reigns in Black Churches, and new forms of art are constantly emerging from within Black Culture. As an example of this, of course, is gospel music and jazz which originated in the celebrations of the Black Church and spread to influence the Apollonian forms of our entire culture (Cox, 1969).

\textsuperscript{15} It must, however, be noted that such change is always slow. As Dr. Benedict stated (1934, p. 76), "Even given the freest scope by their institutions, men are never inventive enough to make more than minor changes."

The final aspect of Dionysian society to be considered is unity with others. Dr. Benedict (1934b) points out that the actions of Kwaikiutl are most often taken for individual aggrandizement. This seems in conflict with the Dionysian idea of unity with the universe and other men. However, when consideration is given to the fact that even in individual action Dionysian man remains part of his society and is integrated with the universe, it can be seen that even individual actions are group or universal actions. Thus, the glory attained by a Kwaikiutl chief is glory for his tribe; the shame of an individual is the shame of his family. Because the boundaries between individuals and between man and the gods are blurred in Dionysian societies, every action is part of the universal being. There is no way to separate man from others in Dionysian society for even in the most self-centered of actions he remains a part of his group, family and the community of being.

**Dionysian Aspects of Psychology**

Unlike the somewhat unified view of Apollonian psychology, there are two streams of Dionysianism in current psychology. The first equates Dionysian behavior with insane/abnormal/maladaptive behavior, and the second views Dionysian behavior as part of the specialized human activity of creativity. There are, of course, a few rare individuals such as Norman O. Brown (1959) who view Dionysian behavior as characteristic of healthy individuals. Discussion of these streams will begin with equation of Dionysianism with insanity/abnormality/maladaptivity and touch only briefly on creativity. Views on Dionysian behavior and health will be included in the section on Dionysianism and the theory of Supersanity.
The most obvious way in which insane/abnormal/maladaptive behavior is equated with Dionysian behavior is in the question of identity. As mentioned earlier, current psychological theories equate possession of a clearly formed and delineated personality with sanity or normality (Erickson, 1950; Lowen, 1967). In fact, Kisker (1964, p. 337) in discussing the symptoms of psychosis writes: "This symptom (disorientation) is one of the important signs indicating a break with reality. The patient who is disoriented does not know who he is."

Since Dionysianism emphasizes man's unity with the universe and the others in it instead of a discrete, separate identity, Dionysianism is in conflict with prevailing views of sanity. It would be very difficult for an individual who views identity in Dionysian terms to present this view to an Apollonian clinician and be viewed as sane. Identity within a group is not an alternative to a well-defined, third-level, personal individuality (Edignger, 1972).

Another source of conflict between Dionysianism and the prevailing Apollonian view of sanity/normality/adaptivity is Dionysian emphasis on intense emotional experience. Within Dionysian experience, intense emotional expression, whether of passion, grief, anger, or the like is acceptable, even sought after. However, within the Apollonianism of present-day psychology, this is not acceptable; intense emotional experience is labelled "acting out" behavior (Burton and Harris, 1955) or "emotional disturbance and unbalance" (Kisker, 1964). In fact, the Apollonianism of current psychology is so pervasive as to suggest a "golden mean" is the acceptable mode of emotional expression. Thus, in describing "emotional disturbance" among psychotics, Kisker (1964, p. 341) writes:
The psychotic patient frequently shows various forms of emotional disturbance. Some patients are emotionally impulsive, while others seem to have a complete lack of emotional responsiveness. . . . The emotionally impulsive patient is completely unpredictable. . . . Without apparent cause. . . such patients may act out in an aggressive or sexual way. . . . The complete absence of emotional responsiveness is also found in psychotic patients. Such patients neither laugh nor smile, nor do they appear depressed.

As can be seen from this example, it is unacceptable to current psychology to express too much or too little emotion—an even emotional keel is what is considered sane/normal/adaptive (Burton and Harris, 1955). But to accept or seek intense emotional experience and expression as Dionysianism does is completely unacceptable except within some few, specialized areas of human experience.

And in a few specialized areas of human experience, Dionysianism and intense emotional experience is seen as acceptable to current psychology. This is true of psychological theories of creativity. For example, Rollo May (in Anderson, 1959) outlines conditions for creativity in art and speaks of talent and encounter. Encounter is similar to, but not synonymous with, Dionysian intense emotional experience. Also, Abraham Maslow (in Anderson, 1959) discusses the "peak experience" in which an individual feels united within himself and with the world. This is similar to the Dionysian experience of "unity with the universe." However, the theories of both May and Maslow are limited to one aspect of human experience and do not offer a comprehensive, Dionysian description of human behavior.

No, it must be concluded that Dionysianism is in conflict with the prevailing psychological views of sanity/normality/adaptivity except in a few, limited instances.
Dionysianism in Relation to the Theory of Supersanity

As discussed above, Apollonianism is unacceptable to the theory of Supersanity. Supersanity holds that man is an inseparable part of the universe, capable of awareness and apprehension in both finite and non-finite dimensions. Apollonianism separates man from the divine or non-finite on varying levels and limits him to finite awareness. Thus, the theory of Supersanity must find another base from which to describe man's relationship to the divine and non-finite.

This base is, of course, Dionysianism. Dionysianism is consistent with the theory of Supersanity in its emphasizing of man's unity with the universe and its insistence that man is capable of contact with the divine or non-finite on varying levels.

Within Dionysian experience, man is also integrated and in contact with himself. This Dionysian experience of integration within the self and with the universe is similar to the "peak experience" Maslow (in Anderson, 1959) felt was characteristic of self-actualizing individuals. These were persons who were both creative and emotionally very healthy. Maslow describes the "peak experience" of this type of individual as follows (in Anderson, 1959, p. 89):

> an essential aspect of the peak-experience is integration within the person and therefore between the person and the world. In these state of being, the person becomes unified; for the time being, the splits, polarities and dissociations within him tend to be resolved; the civil war within... is transcended. In such a state, the person becomes far more open to experience and far more spontaneous and fully functioning.

Dionysianism also allows man "to look not at phenomena but behind them" (Neitzsche, 1956), to separate appearance from reality. Speaking to
this point, Norman O. Brown (1959, pp. 175-176) describes Dionysian experience in the following way:

Apollo rules over the fair world or appearance as a projection of the inner world of fantasy; and the limit which he must observe "that delicate boundary which the dream-picture must not overstep," is the boundary of repression separating the dream from instinctual reality.

Dionysus is not dream but drunkenness; not life kept at a distance and seen through a veil but life complete and immediate. . . . Dionysus is the image of the instinctual reality which psycho-analysis will find on the other side of the veil.

Brown and Maslow's view of Dionysianism (and it is in accord with the theory of Supersanity) holds that Dionysian experience, perhaps because of its intensity and immediacy, allows man a more real perspective of himself and the universe. This perspective is not colored by dichotomies within the person, or by societal insistence on adherence to a mean; it is, instead, perspective gained by direct experience.

Inherent in Dionysianism is recognition of man's ability to apprehend on both finite and non-finite levels. Dionysianism recognizes this ability, views man as powerful, and gives him ability to utilize this power within the universe (Brown, 1959; Parkes, 1959; Neitzsche, 1956).

Dionysian power and action according to Rollo May (1969, p. 164) has "its source. . . in those realms where the self is rooted in natural forces which go beyond the self. . . (it) arises from the ground of being rather than from the self as such." Dionysianism allows man to lose himself in instinctual action, to free himself from the social norm (Kaufman, 1956), to integrate or transcend the dichotomies within himself (Maslow, in Anderson, 1959), to act in ways other than self-censoring (Brown, 1959).
Because Dionysian actions come from man's ground of being, they are in perfect accord with man's nature, and it is thus difficult to speak of what is traditionally labelled Dionysian excess (Dodds, 1971). Within Dionysian action, man acts in accord with his nature; he is at one within himself and does not repress or sublimate, but acts out his feelings in the moment of their experience (Brown, 1959). Thus, Dionysianism does not limit man but instead allows him to be what he is, part of the universe, powerful and emotional, a unity within himself, a unity with the finite and non-finite nature of the universe, and with the essence of other men.

Dionysianism Exercised with Commitment and Responsibility within the Theory of Supersanity

The theory of Supersanity holds that Supersane individuals are Dionysian in their basic approach to life. They are aware of the divine, non-finite or power within themselves and are also aware of their unity with the world and with others. Supersane individuals do not filter emotional experience through societal norms so that their emotional expressions conform to acceptable standards. Their emotional experience is direct, intense, passionate, violent, etc.

However, Supersane individuals also exercise Dionysianism within a framework of commitment and responsibility. That is, Supersane individuals share in the Dionysian sense of celebration, of free expression of intense, emotional experience. However, they do so in ways that tend to affirm the purpose of life. This purpose, as noted in Chapter II, is positive and always towards health and wholeness (Rogers, 1969; Jung, 1969).
It may be possible to speak of Dionysian excess in individuals who are partaking in pseudo-Dionysian experience where violent, hostile or passionate emotions are given free play and destructive actions occur (Frazer, 1951). However, in true Dionysian experience, in Supersane experience, the individual has gone through a two-level process of integration; he is one within himself and with the external world. Thus, he can only act in concert with himself and the external world. And since it has been established that the teleology of both the individual and the universe is positive (Sinnott, 1955; Matthews, 1936), it must be concluded that actions taken after the Dionysian experience of internal and external integration are in accord with this positive teleology.

Thus, The Countess Aurelia (Giraudou, 1958), even in expressing violent emotions and destroying others in Dionysian spirit, does so within a framework of the purpose of the universe. Her actions are in accord with what would be considered health and wholeness. She destroys that which is insensitive to human need and is willing to sacrifice others for personal gain. The destruction of The President and The Prospector is in accord with the drive toward health and wholeness. And it is in perfect accord with Dionysianism that the celebration of the destruction of The President and The Prospector is done without remorse or guilt, but instead freely expressing the emotions The Countess is feeling. It is also Dionysian that The Countess hold a trial and include her comrades in her decision to eliminate the threat to Paris. It is also Dionysian that she acts in accord with her own sense of value and purpose. She acts in accord with her self-integration and her integration with others. And she acts in a way that the others around her are unable to.
The other Supersane individual whom we have thus far considered, Yossarian (Heller, 1970), is also acting in Dionysian ways, intensely expressing his emotions. He is at one moment a passionate coward, at the next a passionate lover, and then again a violent defender of his friends' rights. But whatever feelings he does express, he expresses them both in accord with his nature and feelings and for the purpose of furthering health and wholeness. That is, Yossarian is in perfect accord with himself and others when he finally decides not to accept the medal and go home a hero. He is acting on his perception of his unity within himself and his perception of the unity or purpose of the universe. He takes instead what is considered an insane course—rowing to Sweden in a liferaft—but a course that is consistent with his emotions, his internal integration of himself, and with the non-finite dimensions of experience which tell him he will get to Sweden.

Neither The Countess Aurelia nor Yossarian express their emotions in terms of the societally acceptable mean. Instead, they permit others to see their direct and often violent emotional experience. They do not appear to have learned to dissemble. This is also true of those hospitalized individuals who were discussed in Chapter I. They had not seemed to learn to express their emotions in the ways the hospital staff found acceptable. Instead, they expressed their emotions as they experienced them. Their Dionysian orientation was so great that the direct contact with reality overshadowed the pressure of the social norm.

However, there was something different in their expression of emotion than that of other patients. Those few individuals who were
Supersane never showed inappropriate emotions in given situations. Their emotions were always appropriate, if not acceptable, to a given situation. Thus, one of them was confined to seclusion for telling a doctor that he spent very little time with the patients. His statement was, of course, true and he was unjustly and unnecessarily confined. In this situation, this patient expressed his anger and his outrage in real terms. He did not sit quietly by and let the hospital situation dictate how his emotions should be expressed. He acted as he felt. And he did this in a situation where it was dangerous to do so. But he maintained his integration within himself and with his sense of unity with the universe.

The sense of unity with the universe gives to the Supersane individual the understanding that power is available to him if he chooses to use it. Thus, Yossarian, Aurelia and other Supersane individuals are often able to perform tasks that seem beyond the scope of a single individual. But the Supersane individual has at his disposal the non-finite power of himself and others. Thus, McMurphy in _One Flew Over the Cuckoo's Nest_ (Kesey, 1962) is able to make sweeping changes on Big Nurse's ward by tapping the power in others and uniting individuals in the battle. He is able to draw others to him, first by his own power, and then by recognizing the power in them.

Thus, it must be concluded that it is impossible for the Supersane individual not to act in Dionysian ways, but that these Dionysian actions are in accord with the purpose of the universe and his nature as man. In acting as a Dionysian, the Supersane individual is expressing his own power and the power of the "life force" of which he is a
part. It is the Supersane individual's awareness of his finite and non-finite bonds with the "life force" that allows him to act in Dionysian ways within the framework of commitment and responsibility, expressed by acting in accord with the teleological purpose of health and wholeness.
CHAPTER IV

MYTH, APPEARANCE AND REALITY
IN THE THEORY OF SUPERSANITY

Things aren't always as they seem
And who's to tell waking from the dream.

Olive Schreiner

As mentioned in Chapter I, characteristics of Supersane individuals include possession of personal myths and the ability to discriminate between appearance and reality. Because these characteristics are related in terms of their function in current theories of sanity-insanity and in Supersane individuals, they will be discussed in the same chapter, first myth and then appearance and reality.

Myth

Myth plays a dual role in current theories dealing with sanity-insanity or describing human behavior. It is either regarded as a symptom of disorder, as in the case of the psychotic who constructs myths to indicate that he is someone or something else (Lowen, 1967; Burton and Harris, 1955); or myth is seen as possessing positive direction for human growth as in the postulates of C. G. Jung (1938) and Thomas J. J. Altizer (1962).

However, before we consider the positive and negative views of the function of myth in human behavior, it is necessary to define myth.
Sir Maurice Bowra in *The Greek Experience* (1959, p. 115) describes myth in the following way:

Myth is a story which aims not at giving pleasure for its own sake but at alleviating perplexities which trouble man because his reason is not yet ready to grasp them. . . . The mythical explanation . . . is more emotional than rational and works not by describing cause and effect, but by associating one kind of experience with another and suggesting a connection or similarity between them. . . . (Myths) bring the unknown into relation with the known and help to break down the barriers between men and the intractable mass of phenomena which surround them.

As Bowra indicates, myths begin by association of experience, but also things, people and events with some unknown in order to make the unknown knowable. Mythopoeia often begins with creation of a sign (Sebba, 1962; Tillich, 1955). The sign has a conventional meaning which is precise and unequivocal; it is a short-hand representation of a more complicated message (Tillich). Thus, a red octagon with the word STOP actually means "Stop here before proceeding through the intersection." Early Christians drew a fish in the sand to indicate "I am a Christian." The meaning of the fish was fixed by convention to signify "I am a Christian" and nothing more; the fish was a sign as the red octagon is a sign.

Yet with the passage of time, the sign of the fish became associated with less precise meanings, acquired divergent associations—it represented Christian faith; the individuals who, past and present, held that faith; the feeding of five thousand with two fish; Jesus' calling disciples to be fishers of men; and so forth. The fish ceased to be short-hand for a simple message; it represented people's experience of their faith. It pointed beyond itself to a higher reality. Once this happened, the fish became a symbol. In describing symbols, Paul Tillich has said (1955, p. 109), "This is the great function of symbols,
to point beyond themselves in the power of that to which they point, to open up levels of reality which otherwise are closed, to open up levels of the human mind which we otherwise are not aware."

However, once the sign becomes a symbol, it does not lose its contact with immediate human experience. It, instead, brings immediate human experience into contact with higher reality. This process is described by Eliade and Kitagawa (1959, p. 246) as follows:

Symbols still keep their contact with the profound sources of life; they express, one might say, the "spirit as lived". . . . They reveal the modalities of the spirit and are at the same time manifestations of life, and consequently, they directly engage human existence. The symbol not only unveils a structure of reality or a dimension of existence; by the same stroke, it brings a meaning into human existence. This is why even symbols aiming at the ultimate reality conjointly constitute existential revelations.

In fact, by being included in the actions of daily living, symbols are transformed into myths (Sebba, 1962). That is, when a man puts his symbols into action in daily life, the symbol acquires the properties of myth; the individual experiences contact with a different reality, a relationship or similarity between the known and the unknown that allows him to act in new and more positive ways. The myth becomes a way for the individual to contact reality and possibly change it.

Also, once the symbol is transformed into myth by action, it also acquires personal meaning and power for the individual. That is, a group or societal myth can be changed by personal action into a personal myth; or individuals can choose to actualize symbols in their daily actions and create myth apart from the society or group to which they belong (Gotesky, 1952).
Negative Views of Myth in Psychology

This discussion and definition of myth is, thus far, true of those theories in which myth has positive value. The definition of myth in current psychological theory is, of course, different. Myth, in these theories, is considered "false belief" or "fantasy and fable" (Sebba, 1962). It is felt to exist in "the night of ignorance and the twilight of uncertainty" (Gotesky, 1952), or to be the product of "a disturbed mind creating fantasies without reference to reality" (Kisker, 1964). Myth in its negative aspects is equated with fantasy and delusion. A myth is viewed as something not at all real, as based wholly on an individual's inaccurate perception of reality. The fact that an individual might act or express himself in terms of a myth is confirmation of his insanity/abnormality/maladaptivity.

In its negative aspects in psychology, myth is seen as inconsistent with a rational (logical) society or individual (Gotesky, 1952). Myth is an inadequate way of explaining individual or societal experience (Altizer, 1962); it is "prescientific" and does not describe reality but superstition (Sebba, 1962).

Describing the characteristics of the psychosis, Kisker (1964, p. 337) speaks of the delusion which is often equated with negative views of myth in the following way:

A delusion, which is a belief contrary to reality, is another important symptom of psychotic thinking. Patients frequently hold ideas which are improbable or obviously untrue. While many people who are not mentally ill also cling to such ideas, they do not ordinarily continue to hold them in the face of clear evidence to the contrary. The psychotic patient, however, persists in his delusional ideas in spite of rational (logical) arguments, contradictory evidence, or sheer impossibility. . . .
In Cervantes novel *Don Quixote*, the hero develops the romantic delusion that windmills are giants, inns are castles, prostitutes are great ladies, galley slaves are oppressed gentlemen, and a flock of sheep is the army of the giant.

The possibility that ideas (myths) may be maintained in view of clear evidence to the contrary and be a sign of emotional health will be discussed in relationship to the function of myths within the theory of Supersanity. At present, only the negative view of myth in current psychological theory is being considered, and it seems appropriate to let Kisker's statement stand without further comment.

Let it suffice to say that texts on abnormal psychology are full of accounts of delusions, varied and fablous, among psychotics. And these descriptions of delusions may be considered descriptions of current theory's view of myth.

It is possible to make this link between myth and delusion in current psychological theory because current psychological theory uses myth when referring to inaccurate perceptions or beliefs held by societies, and delusion when referring to inaccurate perceptions or beliefs held by individuals (Sebba, 1962; Gotesky, 1952). Both are described as differing degrees of the same abnormal or maladaptive tendency and felt to be out of place in rational (logical) man.

Finally, it is significant to note that even Thomas Szasz in describing the outmoded view of mental illness in our society has chosen to call his work *The Myth of Mental Illness* (1961) and to describe

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outmoded views as based on inaccurate perceptions of reality and irrational and unscientific views of mental illness. Thus, this demonstrates that the negative view of myth is so entrenched in current psychological theory that the severest critics of a psychological construct choose the word myth as the ultimate derogation.

Positive Views of Myth in Psychology

Positive views of myth in psychology hold that myths serve an affirmative function in individuals and societies; that is, myths are seen as contributing to social and individual development in necessary and healthy ways. Thus, speaking of the function of myth in society, Gotesky (1952, p. 530) writes:

Every culture will create and value its own myths, not because it may not be able to distinguish between truth and falsity, but because their function is to preserve a culture against disruption and destruction. They serve to keep men going against defeat, frustration, disappointment.

Myths in society, says Ralph Ross in Symbols and Civilization (1962), are important because they symbolize the relationship of man to society and to nature. They furnish the individual with a framework with which to view himself, his society, and the natural world. Myths lessen the fear of the individual facing vast amounts of unknown experience by associating the unknown with the known (Sebba, 1962).

A similar view of the function of myth for the individual exists in the analytic psychology of C. G. Jung and his disciples. Within Jungian psychology, myths are called by various names: archetypes, dominants, primordial images, imagos, and mythological images (Hall and Lindzey, 1967). While this plethora of terms is confusing, the
view of myth is consistent within Jungian psychology regardless of the term being used.

This view interprets myth as an accumulation of man's evolutionary, psychic experiences (Jung and Kerenyi, 1949). Myths are a permanent deposit, in the human psyche, of an experience which has been continuously repeated throughout human experience. Jung describes the process of the development of myth in terms similar to those used above in the discussion of the evolution of a sign into symbol into myth. Within Jungian psychology, a myth begins with a repeated human experience, for example, with man's experience with woman. From this experience develops symbols for woman--the mother, the wife, the temptress, etc. And finally the symbols are drawn together in the psychic constellation of the archetype. The archetype, thus, contains myths and symbols and response patterns appropriate to this experience of woman (anima) (Jung, 1969; Campbell, 1971).

The archetype forms part of the collective unconscious in Jung's theories (1959), and the collective unconscious is a common, racial inheritance of all men. It is unlike the personal unconscious in that "The contents of the collective unconscious have never been in consciousness, and therefore have never been individually acquired, but owe their existence exclusively to heredity" (Campbell, 1971, p. 60). The collective unconscious is, then, the collection of archetypes (myths) common to all men; it is the repository of not only repeated human experiences but repeated human explanations of personal and societal experience (Jung, 1959).
Within the archetypes (myths) of the collective unconscious, Jung postulates the existence of four main archetypes which constitute the personality of the individual; these are the persona, the anima, the animus, and the shadow. These four archetypes, says Jung (1939), are opposed or strive to dominate each other. But, he says, this struggle has a purpose, a positive teleology, which is development of the Self. The Self (which is an archetype or myth) is life's goal, and like all archetypes, it motivates man's behavior and causes him to search for wholeness. This search for wholeness is facilitated and directed by the myth.

Jung also states (1916) that man's personality is to be comprehended not by where it has been but by where it is going. He, of course, feels that the personality of man is moving towards reality and wholeness through the motivation and direction of myth in human experience (1939).

This last point, that of myth directing and motivating man to achieve wholeness and contact with reality, is a crucial one to both Jungian psychology and the theory of Supersanity.

**Myth in Relation to the Theory of Supersanity**

The theory of Supersanity is in accord with the Jungian postulate of myth-motivating and directing man to wholeness and reality. It views myth in this positive light and holds that possession of both archetypal and personal myth is characteristic of Supersane individuals.

Personal myths are necessary because too often, individuals have allowed others to define them. They accept others' definitions
of who they are and act in ways that confirm these definitions. They do not have the strength or the direction to hold out against the pressure of accepting this definition, of not conforming to the social norm. It is considered a sign of sane/normal/adaptive behavior when one's view of himself corresponds to others' definition of him (Erickson, 1950). However, it is possible for others' definitions of an individual to be damaging and destructive.  

Personal myths are necessary because they provide the individual with a base from which to act and afford a goal toward which to strive. If an individual has no goal toward which to strive, he remains always as he is. Once he has accepted others' definition of himself, he is complete. The lack of goals is remarkable in our society. Man is alienated, and Jung points to the fact that the contemporary feeling of alienation is due to a lack of personal myths. "In former times," he says (1969, p. 69), "men did not reflect upon their myths, they lived them." And, of course, Jung equates possession of personal myths with the sane/adaptive/normal functioning of the human being. The theory of Supersanity also equates possession of personal myths with what is whole and healthy in human behavior.

This possession of personal myth in a Supersane individual can be seen in The Countess Aurelia (Giraudou, 1958). The Countess, as mentioned above, believed the world to be a place in which love and gentleness and kindness were the order of the day. This was her myth; this gave her a base from which to act and a goal toward which to go.

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17 Refer to the case study in Appendix A for a description of the damaging effects to an individual accepting other's definition of the self and subsequently developing no personal myth.
She had succeeded in integrating her self to actualize this myth. Of course, there was a great deal of objective evidence to the contrary, the world could be shown to be a place where greed and cruelty and hate were more prevalent than the emotions embodied in The Countess myth. And by acting in accord with her myth, The Countess' behavior was not in accord with the societal norms which surrounded her. Yet, The Countess chose to disregard this and to continue acting on her myth and, of course, her myth proved to be the more powerful and the more real force in the play.

There are numerous other examples of literary characters who have also chosen to act upon their myths in defiance of social norms or evidence to the contrary. Thus, Don Quixote (Cervantes, 1937) accepted the myth of chivalry and interpreted the world in accord with it. While windmills may not be giants, is it not possible for prostitutes to be great ladies a la Madame Pompadour or for galley slaves to be great gentlemen a la Ben Hur? Don Quixote chose to act on this myth because it gave him a goal, a direction, support for his attempt to integrate the self, while also providing him with a framework with which to act in the present. He wanted to be the perfect knight, strove toward this goal while acting chivalrously in the present.

Or consider the case of Cyrano De Bergerac (Rostand, 1953). Cyrano believed in the immutable virtue of the individual, of maintaining dignity in the face of whatever odds. Society would have told him that this was impossible, that everyone is a little corrupt. But Cyrano held out, maintained his dignity and went to stand Judgement with his white plume "unblemished and unbent."
Yossarian also possessed personal myths. This is not as clear in his case as in the histories of the literary characters already cited. However, when he makes the decision not to accept the medal and pedal away to Sweden, he is acting on his myth. It is the myth on which he has been acting all along. It is the myth that the individual has the right to survive with dignity and respect regardless of what society demands of him. Yossarian, in his final action, makes final commitment to his myth and rushes into the sea confident that he will soon be with Orr in Sweden.

Another literary history in which personal myth plays a powerful role in the lives of the characters is *Lord of the Rings* by J. R. R. Tolkein (1965). This is a mythic history and thus myth acquires new dimensions in this work. But its function in the lives of the characters, Gandalf and Frodo, is the same as in the works cited above. It provides the Wizard and the Hobbit a base from which to act and a goal toward which to go. They act in accord with their perception of the way in which things should be in Middle Earth, and their perceptions are similar to those of The Countess Aruelia. They act to destroy the power of the One Ring. And throughout their action, despite insurmountable odds they succeed in actualizing their myth. In the novel *Gandalf*, the Wizard has already developed his myth and the story is, in part, about the development of a similar myth in the Hobbit, Frodo. Once the two characters have developed their myths, they have the power to overcome the One Ring. But the myth is necessary to do so.

In all these instances, personal myths seem to have the ability to withstand pressure to conform to social norms. They seem able to
keep the individual moving toward the goal of wholeness while providing a framework for being in the present. And, of course, possession of personal myth is not limited to Supersane literary characters. Historical individuals have also possessed and actualized personal myths against severest pressure to conform to social norms. In this sense, Supersane individuals seem to have "an internal locus of evaluation" which allows them to be the prime critic of their actions and to chose their evaluations over those of society. This is similar to the concept as postulated by Rogers (1958, in Anderson). In describing this phenomena, Rogers (p. 76) states: "If the person has the 'feel' of being 'me in action,' of being an actualization of potentialities in himself which heretofore have not existed are now emerging into existence, then it is satisfying and creative and no outside evaluation can change that." What this seems to imply for the theory of Supersanity is that personal myth serves as a basis from which to evaluate the events surrounding the individual, and that the individual seems more often than not to choose his own myth over that of the societal norm.

In cases of historical individuals, this can be clearly seen. For example, Jesus developed a myth that he was the Messiah, the king chosen to show men to way to God. He accepted and actualized this myth even though society told him he was a carpenter, uneducated, and from a poor and rural family (Graves, 1946). And he chose to die rather than act in ways not in accord with his personal myth. Or again, consider Malcolm X who developed the myth that Black was powerful. He lived this myth in the face of social norms and pressures to the contrary; he lived the myth in the face of clear, objective evidence to the
contrary. And, in the end, he died for his myth; but he never compro-
mised it; he actualized it. In fact, the case of Malcolm X clearly
shows the power of myth to change a reality. The reality of Malcolm's
myth would not be disputed now, but when it was created it was consid-
ered to be absurd. But because it gave Malcolm a framework for being
in the present, it also became a reality in the future. Today, Black is
powerful, and Malcolm's myth is the myth of many others. And the reality
that he alone experienced in 1960 is the reality of many in 1973.

As a final example of the role of personal myth in the lives of
actual individuals, consideration will be given to hospitalized individ-
uals who have demonstrated possession of personal myth. As pointed out
in Chapter I, Supersane individuals who have been wrongly labelled insane
do not conform to hospital expectations of a "good patient." Instead,
they seem to cling to some internally determined sense of what or who
they are. Many of these individuals also possess what may be considered
personal myths. Some of these myths are concerned with the dignity of
man, but others may resemble what some call delusions. Thus, one individ-
ual left a position as chief corporate attorney for Merril, Lynch to be-
come a chicken farmer in Vermont. He believed that a life close to the
earth was the natural way for a man to live, and he left his position
to actualize his newly developed myth. He was committed because of this
action and therapy centered on getting him to accept the foolishness of
his actions. But he maintained his myth, and he maintained it in the
face of electroconvulsive therapy, psychotherapeutic drugs, seclusion,
therapy, and the like. He remained unmovable in his conviction that he
must be a farmer. He rejected others' definition of him as a corporate
attorney. He also used the myth to act on in the present and to provide a goal toward which to go. The myth was his reality; he could not change it. He had become what his myth had said he was; and he too maintained it in the face of amazing odds.

It has been shown that one of the characteristics of the Supersane individual is the possession of personal myths and acting in accord with these myths in spite of pressure to conform to social norms. These personal myths give Supersane individuals a framework with which to view the present and a goal for the future. Personal myths also seem to allow Supersane individuals to change reality in the actualization of their myths. That is, by acting out the myth in the present, the myth becomes a reality in the future. Also, as has been noted, these myths seem to be in accord with a positive teleology, with the movement of the individual toward the development of the Self (Jung, 1938), or toward the goal of wholeness (Rogers, 1969).

Appearance and Reality

As mentioned above, a characteristic of the Supersane individual is the ability to distinguish between appearance and reality. This characteristic is related to the possession of personal myths which allow an individual to strive toward the creation of a new reality. However, before considering the ability to distinguish between appearance and reality in the theory of Supersanity, it is necessary to define terms and discuss the philosophical and psychological implications of appearance and reality.
Philosophical Implications of Appearance and Reality

In Chapter I, it was stated that questions related to the nature of knowledge or to appearance versus reality are epistemological and related to questions dealing with the sources and the validity of knowledge. The epistemological questions asked in dealing with the issue of appearance versus reality are: "Is there a real, objective world outside of the mind" and "What is its nature?" (Titus, 1959, p. 50). These questions are equally important to philosophy, psychology and the theory of Supersanity.

In philosophy, there are three traditional answers to the question of appearance versus reality and the nature of knowledge. They are naive realism, epistemological idealism and objectivism (Montague, 1925). Each of the three answers the question of appearance versus reality in a different way.

For example, naive realism assumes that the distinctions between thoughts and things, object and the knower of the object are fixed and common to all spectators (Martín, 1957; Montague, 1925). That is, a group of people observing an event will experience the same things because the events have an existence, a reality, of their own; and the data of the observers' sense organs will give each separate individual an objective, accurate and similar picture of this reality (Sinclair, 1951).

An important expression of this philosophical position occurs in the epistemological theories of Thomas Hobbs (1939), especially in the opening lines of *Levianthan* where he writes:
Concerning the thoughts of man... they are everyone a representation or appearance of some quality or other accident of a body without, which is commonly called an object. Which object worketh on the eyes, ears and other parts of a man's body, and by working produceth a diversity of appearances.

Hobbes felt that knowledge gained by the impression of the senses was real knowledge of an external reality. But is it?

There are, of course, many psychological experiments (Bruner, 1951; Allport and Pettigrew, 1957; Sherif, 1935) which indicate that sense perception gives differing information depending on the individual and the circumstances. These will be considered in the section on the relationship between psychology and appearance and reality. However, it is possible to apply a common-sense view to this theory and demonstrate its inadequacies (Titus, 1959). For example, in a community of the deaf it would have to be concluded that sound does not exist because no one in the community would have sense perceptions of it. And since knowledge of reality comes from sense perception, in naive realism, there can be no reality where there is no sense perception.

Thus, naive realism is inadequate as an epistemological base from which the theory of Supersanity can view the sources of knowledge. It is inadequate because sense perception is mutable and, in differing conditions, allows individuals to perceive in differing ways (Bruner, 1951). It is further inadequate in that sense perception limits man to apprehension of the finite, of that evident to the sense, and the theory of Supersanity holds that man can apprehend both finite and non-finite dimensions and that this apprehension is not limited to sense perception.

The second, traditional view of appearance versus reality is epistemological idealism. This theory states that "objects or the
quality of the world in which we perceive by our senses does not exist independently of a consciousness of them" (Titus, 1959, p. 53). That is, epistemological idealism feels that there is not external, objective reality but only a mind which perceives (Sinclair, 1951; Martin, 1957). The reality of the external world can be neither proven nor disproven because it can never be directly experienced (Berkeley, 1939).

Again, epistemological idealism is inadequate as a base for the theory of Supersanity's view of appearance versus reality. However, it is difficult to present logical arguments against the position of epistemological idealism. However, this is because they position reasons in a circular way and, if you accept their basic premise, the system is air tight (Titus, 1959). Nonetheless, it has been repeatedly stated that the theory of Supersanity holds man capable of finite and non-finite apprehension. Epistemological idealism not only holds that there is no reality, but it limits man to the confines of the self. It eliminates the possibility of any knowledge at all by transforming all experience into appearance, into an event in the perceiver's subjective consciousness (Montague, 1925).

The final description of appearance versus reality is objectivism which is a mid-point between the extremes of naive realism and epistemological idealism. Objectivism holds that there is an external reality, but that we do not perceive it directly; we perceive instead, sense data which results when our senses contact an external object; and this experience of contact is relayed through mental channels and transformed into our perception (Russell, 1912). Objectivism does not deny the reality of either the object or the perceiver. However, it
does distinguish between perception created with reference to an object (touch, taste, smell, etc.) and perception created without reference to an object (memories, dreams, hallucinations, etc.), and states that perception with reference to an object is more real than perception without reference to an object.

Objectivism, as currently interpreted, is the most adequate of the three traditional descriptions of appearance and reality. It acknowledges the existence of external and internal realities and considers both real. Its one deficiency is in giving preference to perception with reference to an object. The theory of Supersanity accepts objectivism as an epistemological view of appearance and reality, with the modification of preference to perception with object. The theory of Supersanity holds that there are times when perception without object exerts more power over the individual than perception with object. Consider, for example, the child who is daydreaming, falls and scrapes his knee, but does not notice the pain because the dream is more powerful.

With this one modification, objectivism provides a base for Supersanity's view of appearance and reality. It now states both object and perceiver are real, and in cases where a decision regarding the reality of a differing perception must be made, preference will be given to the perception exercising the most power over the individual. Of course, the perception may be of finite or non-finite dimensions, and it may not necessarily be in accord with societal norms; but it must correspond to the teleological purpose of health and wholeness.

This concludes discussion of appearance and reality in philosophy. Consideration will now be given to appearance and reality in psychology.
Psychological Implications of Appearance and Reality

The question of what is appearance and what is reality has been an important one for psychology. There have been varying answers, but on the whole, the answer has been, "Sense perception is real." And sense perception has been accepted as real even though psychology itself has demonstrated the mutability of sense perception (Allport and Pettigrew, 1957; Sherif, 1935; Asch, 1956).

Thus, current psychological theories view sense perception as direct experience of reality in a manner similar to naive realism. Sense perception is felt to be the basis from which man acquires his knowledge, even that used in dreams, memories, etc. (Ruch, 1963). And there is a discrepancy between experimental studies of sense perception and theoretical works on the psychological nature of appearance and reality.

Theoretical works, on the whole, have held to sense perception as the psychological base from which to determine what is real. In this category fall the major schools of psychology including both behaviorism and analytic psychology (Woodworth and Sheehan, 1964). Behaviorism begins with sense perception; that is, it is necessary for there to be a stimulus to the senses before there can be a response to the stimulus (Ferster and Skinner, 1964). Analytic psychology begins in the same place with sense perception. Although Freud postulated the primary process which does not have reference to the external world, he made it subject to the operation of the secondary process or "reality principle" which is the ego's sense perceptions of the external world (1911).
Yet while theoretical works focus on sense perception as the way to distinguish appearance from reality, experimental psychology is busily demonstrating the unreliability of sense perception.

Thus, Allport and Pettigrew (1957) demonstrated that perception of geometrical shapes depends on cultural experience with those shapes. In a culture where a particular geometrical shape does not occur, perception of that shape in an experimental setting is unlikely. Or Asch (1956) has shown that perception of length, height, etc. will depend upon group norms, and that individuals will perceive in accord with those norms. Or again, Bruner, Postman and Rodrigues (1951) demonstrated that individuals will judge color based on past experience with varying shapes so that a lobster claw will be seen as more red when compared with a lemon even if both are the same hue.

While discussion of psychological experiments demonstrating the mutability of perception could be carried on indefinitely, these examples sufficiently demonstrate that fact for this paper. The question of what is real and what is appearance has not been adequately answered by psychology.

Nonetheless, current views of sane/normal/adaptive behavior and insane/abnormal/maladaptive behavior function as if the question were decided in favor of reality being sense perception. Therefore, when describing another characteristic of the psychosis, hallucination, Kisker (1964, p. 338) reports: "The hallucination... is one of the key symptoms of the psychosis. A patient is said to be hallucinated when he perceives objects and events without an appropriate external stimulus."

This means that sane/normal/adaptive behavior must occur only in reference to appropriate external stimuli. It also means that these external
stimuli should be perceived in similar ways among sane/normal/adaptive individuals. If perception of external stimuli differs too greatly from the norm, then this also is a sign of insane/abnormal/maladaptive behavior (Braginsky, Braginsky and Ring, 1969).

Thus, in considering the case of Don Quixote (Cervantes, 1937), Kisker (1964) sees him as psychotic not because he experienced giants or armies or castles, etc. without sense perception, but because his sense perception did not conform to the norm.

The most explicit view, in current psychological theory, of reality as sense perception is that of Alexander Lowen. In The Betrayal of the Body (1967, pp. 3-4), Lowen discusses questions related to what is insane/abnormal/maladaptive and what is real, and states:

The schizoid disturbance creates a dissociation of the image from reality. The term "image" refers to symbols as opposed to the reality of the physical experience. . . . The discrepancy between image and reality is most clearly seen in the delusional schizophrenics. . . . On the other hand, "mental health" refers to the condition where image and reality coincide. A health person has an image of himself that agrees with the way his body feels.

What Lowen is, in fact, stating is that mental health or sanity/normality/adaptivity can only occur when a person's image of himself corresponds to his physical appearance, his sense perceptions. That the very base on which he judges sane/normal/adaptive behavior is not stable but instead may vary from individual to individual and from circumstance to circumstance, does not alter his position. Nor does this alter the position of the current psychological perspective of appearance and reality. However, because of the conflicts between theoretical and experimental psychology, sense perception as a base from which to judge appearance and reality is not an acceptable position for the theory of Supersanity.
Appearance and Reality in Relationship to the Theory of Supersanity

What is appearance and what is reality is a crucial question for the theory of Supersanity. As discussed above, there are conflicts in the current psychological view of this question, yet even with conflicts, current psychological theory applies sense perception as reality to its views of the sane/normal/adaptive.

There is, however, another view of psychological reality that is in accord with the theory of Supersanity. This is the view presented by Berger and Luckmann in *The Social Construction of Reality* (1967). In this they state (pp. 50-51):

Mans' experience of himself always hovers in a balance between being and having a body. . . . This eccentricity of man's experience of his own body has certain consequences for the analysis of human behavior in the material environment and as externalizations of subjective meanings.

Because of mans both being and having a body, Berger and Luckmann reject the idea of sense perception as the only reality. It may be the reality of the body but is not necessarily the reality of the being who has a body. This being so, they feel, that being has the ability to perceive in ways not directly related to sense perception and is capable of perceiving the reality behind the appearance of sense perception. They further postulate that external reality as expressed in the social norm is not necessarily reality at all, but instead a social construction of a group or society.

This view reduces the conflicts of other current views of appearance and reality in psychology. It is also, in accord with the theory of Supersanity which will attempt also to present a view of appearance and reality that will not continue the conflict of most current views.
This can be done by adopting an objectivist view of the nature of knowledge or of appearance versus reality. This view states that there is reality in both object and perceiver, and that sense perception in itself is not direct experience of reality because it is interpreted by the perceiver, who experiences sense perception as a result of internal process (Montague, 1925; Russell, 1912).

The theory of Supersanity further states that it is possible to experience reality both with and without an external object of perception. Given a decision to be made between what is or is not real, the decision will depend upon which perception has more power over the individual, allows for perception of both finite and non-finite dimensions, and is in accord with the teleology of health and wholeness.

Within Supersane individuals, reality will, thus, be perceived in accord with the personal myths which guide the individual toward health and no health or wholeness. Supersane individuals, on the other hand, will act in accord with their myths and their perceptions of reality despite social norms to the contrary. They will act to actualize their myths and to create a new reality.

Let us consider again the case of The Countess Aurelia in The Madwoman of Chaillot (Giradou, 1958). Within the context of prevailing social norms, The Countess appears to be insane/abnormal/maladapted; she has all the classic symptoms of psychosis; she hallucinates, has delusions, emotional disturbances, etc. But are her hallucinations, delusions, etc. unreal?

18 Again, refer to the case study in Appendix A for further discussion of this point.
Her delusions consist of apprehending the world as a place of kindness, goodness and love. This perspective is based not on sense perception which might tell her that the finite world is not as she perceives it. But she is able to see these sense perceptions not as reality but as an appearance created by social norms. The world is only greedy, insensitive and cruel because the social norm has made it that way.

Also, The Countess' delusions exert more force, have more power in her life than sense perceptions. And finally, her perceptions of the world as a place of goodness, kindness and love are in accord with the teleology of health and wholeness. The Countess, by acting on her myth, is able to create a new reality, a reality where the world is good, kind and loving. This new reality will be able to be verified by sense perception and internal consciousness. Therefore, we must conclude that The Countess perceives what is reality from the outset.

Yossarian in Catch 22 (Heller, 1970), likewise, would appear as insane in current views of sanity/insanity/abnormality and within the context of prevailing social norms. He too had delusions, emotional disturbances, etc. But upon examining his delusions, etc., it can be seen that some were confirmed even by sense perception. This is especially clear in the case of his delusion that people were trying to kill him. Everytime he went on a bombing run, his senses confirmed the fact that people were trying to kill him; he heard the bombs, saw the flack, smelled the explosives; also, he felt the knife enter his body when Natley's whore stabbed him. Thus, was not this delusion real?
And what of Yossarian's myth of the right of the individual to survive with dignity and respect. This myth exerted greater power in his life than the societal norms which pressured him into giving up either his life or his dignity. And, of course, this myth is in accord with the teleological goal of health and wholeness. Finally, Yossarian turned this myth into a reality when he chose to have both life and dignity. Thus, we must conclude that Yossarian perceived reality, else he could not have created it.

Furthermore, these characteristics are also displayed by McMurphy in One Flew Over the Cuckoo's Nest (Kesey, 1962). That is, McMurphy perceived the reality of Big Nurse's ward despite conflicting sense impressions and social norms. One set of sense perceptions and social norms indicated that the reality of the ward was helping individuals to lead productive, individual lives. The other set of sense perceptions and norms indicated that the reality of the ward was the destruction of individuals, to make them controllable. Of course, McMurphy was able to perceive that the latter was the reality—destruction and controllability. He was then able to act upon his myth in combatting this. McMurphy did not believe that individuals were controllable. He felt that "having a good time" was important. He was able to hold on to this myth despite social pressure to the contrary, and although he did not succeed in creating a new reality for himself, he did succeed in doing so for others. Even though McMurphy was destroyed by the ward, he succeeded in creating a new reality for others through his myth. With this in mind, must not his perceptions of reality be considered valid?

Finally, in the case of historical Supersane individuals, these characteristics can also be seen to operate. In the case of Malcolm X,
did he not perceive reality when he said that Black is powerful? It is true that his sense perceptions would have told him that the myth of Black Power was only appearance, that the world was a place in which Blacks were oppressed and powerless. But he did not rely on his sense perceptions, nor did he conform to societal norms. His perception of reality was the more powerful and he acted in accord with it and with the teleology of health and wholeness. For a time, his myth became a reality for him; and when he died, it was already a reality for others. Must we not then assume that he perceived reality from the beginning, and that the social norms and sense perceptions conflicting with his myth were only appearances?

Of course, hospitalized individuals also have the ability to distinguish between appearance and reality, and to choose their myth and perception of reality over the prevailing social norms. The individual who believed himself to be a farmer is an excellent example of this. In a hospital where appearances were aimed at creating an environment where individuals felt valued, free to make choices, and on an equal level with the staff, he perceived another reality. He perceived that he would be constantly evaluated, seen as less than normal, and felt to be not capable of making choices for himself. The day that he was staffed, he greeted the assembled doctors and psychologists with, "Do I say Hi or Heil?" This remark was construed as confirmation of his insanity/abnormality/maladaptivity. But it was a description of the reality of the staffing procedure—the staff would operate in totalitarian ways, making all decisions for him, and allowing him no personal freedom. He pointed out this reality for everyone present. He
was able to do this because his perception of the situation was more powerful for him than the social norm. Also, he was able to do this because he perceived what was the teleological purpose.

It has, thus, been demonstrated that Supersane individuals have the ability to distinguish between appearance and reality. This is done because Supersane individuals do not rely exclusively on sense perception of the finite to make this distinction. They are able to utilize apprehension of teleological wholeness and personal myths to both describe and create reality. Often, their perceptions are in conflict with prevailing social norms, but their perceptions have more power in their lives than the social norms and thus they are more able to discard them and seek the reality behind them.
Summary of the Theory of Supersanity

Madmen and lovers have such seethings brains,  
Such shapting fantasies, that apprehend  
More than cool reason ever comprehends.  
The lunitic, the lover, and the poet  
Are of imagination all compact.  

Shakespeare

Thus far, the prevailing view of sane/normal/adaptive behavior has been compared with the theory of Supersanity. However, no attempt has been made to relate the characteristics of Supersane individuals to each other or to show that Supersanity is a discrete and observable pattern of behavior. This will be the task of this chapter. First, however, it is necessary to give a brief discussion of the differences between the theory of Supersanity and the view of sane/normal/adaptive behavior current in psychology.

Comparison of Supersanity and Current Views of Sanity

There has been extensive discussion of the differences between current views of sane/normal/adaptive behavior and the theory of Supersanity. Perhaps the easiest way to summarize these differences is in terms of a chart. The following chart capsulizes these differences in terms of seven major points of contention.
Present Psychological Descriptions of Sanity

<table>
<thead>
<tr>
<th>Present Psychological Descriptions of Sanity</th>
<th>The Theory of Supersanity</th>
</tr>
</thead>
<tbody>
<tr>
<td>epistemological logic as the basis for problem solving</td>
<td>ontological, teleological and epistemological reason as the basis for problem solving</td>
</tr>
<tr>
<td>Apollonian individuality as a sign of mental health</td>
<td>Dionysian awareness of being part of a larger order than just the self</td>
</tr>
<tr>
<td>adherence to form and a golden mean</td>
<td>creation of intense emotional experience</td>
</tr>
<tr>
<td>free from delusions</td>
<td>possesses personal myths</td>
</tr>
<tr>
<td>reality as correspondence with sense perception</td>
<td>able to distinguish between appearance and reality by not relying exclusively on sense perception</td>
</tr>
</tbody>
</table>

These seven points include major points of conflict between current descriptions of sane/normal/adaptive behavior and the theory of Supersanity. However, since justification for diverging from the accepted points of view was given above, it will not be repeated here. The chart should be sufficient to refresh the reader, and also to present an overview of the differences between the way in which sanity is currently described and the alternative being presented here.

The Relationship Between the Various Characteristics of Supersanity

Five characteristics of Supersane behavior have been, thus far, discussed. They are:

1. The ability to integrate reason and emotion in solving problems.
2. Dionysian action within a framework of commitment and responsibility.
3. The possession of personal myths.
4. The ability to distinguish between appearance and reality.
5. Action in accord with a positive teleology despite societal disapproval.

The Philosophical Foundation of Supersanity

These five characteristics of Supersane behavior must, first, be considered within the philosophical foundation of the theory of Supersanity. This foundation began on an ontological level, and it stated that man was a rational being, possessing both finite and non-finite dimensions (Clay, 1947; Cassirer, 1953). It also stated that man was both part of and superior to the natural order (Neibuhr, 1941), and able to use his reason to interpret both finite and non-finite dimensions of reality or experience.

An epistemological base for the theory of Supersanity was next presented. This stated that the sources of knowledge available to men include sense perception, thinking processes, unconscious mental processes, and intuition (Montague, 1925). The nature of knowledge, or of appearance and reality, was also considered and an objectivist position adopted. This stated that both object and perceiver are real, but that sense perception is not direct experience of reality because these perceptions are transformed by consciousness (Russell, 1912). Also, it was stated that reality is that perception which has the most power in an individual's life and is in accord with the teleology of wholeness (Rogers, 1961). Finally, the question of the validity of knowledge was discussed. The traditional tests of truth—correspondence,
consistency and pragmatic—were seen, in themselves, as inadequate; and they were, instead, melded into a composite view which states that truth is that which corresponds to finite and non-finite reality, is consistent with individual patterns of belief and commitment, and aids in both the biological and spiritual struggle for survival (Murphy, 1943).

Finally, truth is also that which corresponds to the teleological purpose of health and wholeness.

The characteristics of Supersane behavior must be understood within the context of this philosophical framework. Once this is done, it is possible to consider them singly and together.

Supersanity and Dionysianism

The postulate that Supersane behavior occurs within a Dionysian orientation but with commitment and responsibility is, perhaps, the most sweeping concept of the theory of Supersanity. A Dionysian orientation means that the Supersane individual is aware of the divine or non-finite within himself, in the external world and in others (Dodds, 1971). It allows him to be integrated within himself and with the universe as a whole (Maslow, in Anderson, 1958; Neitzsche, 1956). It also allows him to utilize the power within himself and in others (Brown, 1959). A Dionysian orientation allows man to act in accord with the teleological purpose of health and wholeness because it places man with, and makes him an integral part of, the universal direction toward health and wholeness (Brown, 1959). It also gives the Supersane individual direct access to intense emotional experience which allows him to contact both the power and purpose of the universe (Neitzsche, 1956; Kaufman, 1956).
Supersanity and Reality

The theory of Supersanity also postulates that Supersane individuals have the ability to distinguish between appearance and reality. This means that Supersane individuals will recognize the reality of both object and perceiver, but will not depend exclusively on sense perception for this (Russell, 1912). It also means that their perceptions of reality will have more power in their lives than the social norm. Their perceptions of reality will also be in accord with the teleology of wholeness.

Supersanity and Personal Myth

Another characteristic of the Supersane individual is the possession of personal myths. This implies that the Supersane individual has not accepted others' definitions of him but has, instead, developed a personal myth of who he is. This myth allows the Supersane individual to have a base from which to act in the present and a goal toward which to go in the future (Jung, 1938). The action on personal myth in the present seems to allow the Supersane individual to create the reality of the future, a reality in accord with the teleology of wholeness.

Supersanity and Reason Integrated With Emotion

The theory of Supersanity also states that Supersane individuals seem able to use all the varied mental processes at their disposal. They are able to call into play both conscious and unconscious mental process and to use these with their emotions in problem-solving
(Cassirer, 1953). Also, Supersane individuals are able to apprehend both finite and non-finite dimensions of experience (Matthews, 1936) and to use this apprehension in problem-solving.

Supersanity and Action in Accord With Positive Teleology

The final characteristic of the Supersane individual is the ability to act consistently with a positive teleology despite societal disapproval. This implies that the Supersane individual is able to perceive the positive teleology and to act in accord with it despite social norms and pressure to conform to them when these norms are contrary to the positive teleology. This seems to be so because the Supersane individual perceives reality and this perception of reality is more powerful for him than societal pressure.

This concludes discussion of the characteristics of Supersane behavior. It is time to consider if this is, in fact, an observable and discrete pattern of behavior.

Supersanity as an Observable Pattern of Behavior

The question of whether or not Supersanity is an observable and discrete pattern of behavior is, of course, a crucial one. If it is not a discrete pattern of behavior, then it is not an alternative to the present sanity-insanity dichotomy. It is, instead, a description of one or the other.

However, the characteristics of Supersane individuals have been shown to be consistent at least in those literary or historical individuals considered. There is also a sense that there is something different
in the behavior of these individuals than that what is currently labelled as sane or insane.

Unfortunately, the only conclusive evidence, other than that presented here, would be research on the characteristics of Supersanity which is beyond the scope of this paper.
Since brevity is the soul of wit  
I will be brief.  
Shakespeare

There are, of course, numerous implications for education posed by the theory of Supersanity. The most obvious is for education to have a clearly defined philosophical base from which to describe human behavior and learning. This means that education must develop a clearly defined ontological and teleological perspective in addition to the epistemological perspective which it already possesses (Plato, 1942; Descartes, 1927).

The theory of Supersanity also implies that education must begin to view human behavior in terms different from those implied by social norms. It has been shown that social norms are arbitrary and do not necessarily reflect innate behavior (Thibaut and Kelley, 1959). They are, in fact, social constructions which vary from society to society and from group to group (Benedict, 1934a; Berger and Luckmann, 1967). To force individuals to conform to the norms of a dominant group does disservice to both teacher and student.

Also, the theory of Supersanity implicitly states that the natural course of human development is toward health and wholeness
(Rogers, 1961). This implies a certain integrity and directedness in human behavior which education seems to disregard in its insistence on basic skills and required course, and the like.

Perhaps the most important implication of the theory of Super-sanity for education and counseling is the necessity to stop defining others and let them develop personal myths as to who they are and will be. It is common practice for both education and counseling to decide what is correct for an individual. The therapist decides what is healthy behavior, and the teacher decides what individuals will be when they grow up. However, one need only consider the case study in the Appendix to see the damage done by this type of definition.

Because personal myths give an individual a goal toward which to strive (Jung, 1938), they also allow him to create new realities for himself. This is important to both—in education where there are problems with achievement and motivation because students are defined by others, and to counseling where there is difficulty in producing any change at all in sick individuals (Kisker, 1964). If both education and counseling worked on the development of personal myths, individuals would be more apt to be motivated by their own goals.

Also, development of personal myths could become a new therapeutic technique for those who have let others define them and are consequently without goals. This therapeutic technique would begin with the discarding of the definitions of the individual developed by others. As demonstrated in the case study in the Appendix, this is a difficult therapeutic process and must bring to bear all the skill of a therapist without his developing new definitions for the client. Within the therapeutic technique of developing personal myths, the therapist would
be allowed to regard the individual as capable of developing personal myths and expecting him to become a whole and healthy individual. Beyond this, his expectations of and his demands on the client should not interfere with the development of personal myths by the client.

The therapists' function in this instance would be to guide the client through the phases of sign, symbol and myth outlined by Sebba (1962) as the process of mythopoeia. Unfortunately, this process cannot be easily demonstrated. It is partially begun in the case study in the Appendix. Events such as Sam's taking of cigarettes without apology become signs of his growing independence. Unfortunately, this particular therapeutic process ended before these signs could be turned into symbols and from there, into myths. However, the theory of Supersanity implies that this is possible. Exploration of this particular aspect of the theory would be valuable.

The theory of Supersanity also suggests that both education and counseling should stop enforcing adherence to the Apollonian mean of emotional expression and allow individuals to express their emotions in the moment of their experience. This would put individuals in touch with realities outside of themselves as seen in discussion of Dionysian contact with the non-finite through intense emotional experience (Benedict, 1934b). It would also eliminate much repression current in the classroom and counseling center and put individuals more in touch with themselves and with each other. Such an occurrence could only be beneficial to the classroom and the counseling center.

Finally, the theory of Supersanity implies that research is necessary to conclusively identify the pattern of behaviors that the theory
postulates. This research should begin with each of the sub-patterns
of behavior discussed within the theory. These are: integration of
reason and emotions, Dionysian action within a framework of commitment
and responsibility, possession of personal myths, ability to distinguish
between appearance and reality, and action in accord with a positive
teleology despite societal disapproval. Each sub-pattern of the theory
of Supersanity should be studied to determine if it is an extant pattern
of behaviors or if it occurs only in combination with the other sub-
patterns. If found to occur only in combination or if the five sub-
patterns are found to occur together in an observable pattern of behavior,
then this pattern may be labelled Supersanity and its existence given ex-
perimental validity.

It would also be important to begin research on the cultural
implications of the theory. It may be, for example, that particular
cultures or sub-cultures display the behavior characteristic of the Super-
sane more frequently than members of other cultures. If this is so, it
would be important to analyze these cultures in terms of their psychology,
philosophy and economics to see what can be learned.

- Again, it would be important to research or observe individuals
who possess the characteristics of the Supersane. What is their impact
on the society in which they live? Do they transmit Supersane behavior
to those around them, e.g. their children, their wives? Is it possible
for them to be integrated into their societies or sub-groups? Are they
usually "marginal" men at best only on the societal fringes?

There are other important questions raised by the theory of
Supersanity. For example, how do you identify the Supersane individual
when he is not involved in a conflict situation? Thus far, each Super-
sane individual discussed in presenting the theory of Supersanity has
been involved in a definite conflict situation. This was true of
Malcolm X, Jesus, Yossarian, Countess Aurelia, Frodo, Gandalf, and the
hospitalized farmer. Does Supersanity exist in non-conflict situations?

Also, if it is agreed that Supersanity is a desirable pattern of
behavior, can it be developed in the way sanity is now? Or because it
includes the ability to act outside of prevailing social norms, are
social norms ineffectual in developing it? In fact, does Supersanity
occur by accident?

This is, of course, only a brief discussion of the possible areas
in which there are research possibilities for the theory of Supersanity.
Most crucial to answer quickly are: Does it exist? Is it a better way
to act? What does it imply for society? Once these questions are an-
swered, the others will become only a matter of time.

Of course, answering all of these questions is beyond the scope
of this paper which was designed to make initial presentation of the
theory of Supersanity. However, because there is only, at present, a
postulation of a pattern of behavior without experimental validation
does not mean that the theory of Supersanity is unusable. It does pro-
vide an alternative to the present sanity-insanity dichotomy. As an
alternative, it can provide new perspective from which to observe human
behavior and it can also provide new guidelines from which to judge
human behavior. But, in its present form, it does not force or require
the individual to agree with these perspectives or guidelines. Instead,
it allows the individual to choose which of the descriptions is most in
accord with his beliefs. This ability to choose is totally consistent
with the Theory of Supersanity.
APPENDIX

Case Study from Position Paper

The following outline of the eleven meetings Sam and I shared is taken from my notes on the audiotape recordings of these meetings. The typescript is taken verbatim from the last meeting.

Session 1: I did not read Sam's case history before the initial interview. I wanted to respond to him as a person I was meeting for the first time instead of attempting to understand him as a patient being seen for the initial interview.

The encounter began with introductions and an explanation of who I was. Sam followed with a half hour or so monologue about his various physical ailments. "If I had the money, I'd go to the Mayo Clinic and get the right operation or pills."

I listened because I had observed Sam at a ward meeting. He orated to the empty space in the center of the group. No one listened.

My first interruption of the monologue was to say that I was having difficulty understanding him. Could he talk slower. He tried. Then said he couldn't. We shared a relaxation exercise and then Sam decided to go. I asked if he would like to talk again. He said yes.

Session 2: Sam started talking about his "symptoms of epilepsy" without even greeting me. I interrupted and told him I found it hard to care about what he was saying when he didn't acknowledge that I was there.

Sam talked about my clothes for a bit and then returned to his discourse on his epilepsy. I got pissed. He got upset. I apologized. He talked on. I got pissed. He got upset and left. I felt guilty.

Session 3: Sam remembered last week's argument. He greeted me before talking about being retarded. I got pissed. He stopped. We talked about what was happening. "I'm a hopeless case. I'll get you upset." "I'm a person. When you act like I'm not here, I get hurt."
Sam talked about school, his learning problems, his mother, the teacher. He blamed everyone else for his problems but himself. He also used what his mother said about him as justification for the way he felt about himself. I outlawed talk about the past. We sat in silence for ages until Sam asked for a cigarette. He told me he liked me when he left. I liked him too.

Session 4: Sam brought me a drawing to pay for the cigarette he borrowed. I asked him for a story about the drawing. He talked about a car ride but left out the "good part" so I wouldn't be upset. I told him I had parked in cars before so what was the surprise. Sam has prostrate trouble and can't have an erection. I was surprised!

Sam's brothers have children. They have been to college. He is retarded but it isn't his fault. I called bullshit here for the first time. No more talk about the past if it's going to be bullshit. Sam said he thought he was going to have a seizure. I said I didn't have a stick but would take out my wallet to use just in case. He left to get water.

Session 5: Sam started with the bullshit again. I said I wouldn't listen. He had a fit (literally). I went to get coffee because I told him, "I'd rather have coffee than watch you. Will ten minutes be enough? I'll be back then."

Sam was sitting up when I got back. He wanted to know if he had to go to his room now. No, I said, did he want coffee. Yes, he did. We left for the canteen.

Session 6: Sam talked about how other people reacted to his seizures. He wasn't responsible because he was "prenatal." I didn't know what prenatal meant. Sam's explanation was that prenatal was what your parents do to make babies. He wasn't to blame.

No one asks to be born. But we are so why not make the best of it? Sam tries to make more excuses, says he is a hopeless case. I ask if that is what he wants to be. No, it isn't. We spent the next ten or fifteen minutes saying "I don't want to be a hopeless case. I won't be a hopeless case, I am not a hopeless case." Sam announced these facts to the doctor as he left.

Session 7: Sam has been using the communications skills learned in the group. He evidently has been calling his mother everyday for the past week asking to go home. She thinks he understands better if he sees her answer in writing. Sam brought
her answer for me to read. He can't come home; she is too old to have to look after him; by the way, dear Sam, I have to end now so I can take Mrs. ______ to the wist party in Xville (only sixty miles away).

Sam talks about his mother for a while, trying to put his words into here and now feelings. All he can remember is the bad things she told him. He believes them. He hates her.

Sam gives himself some Gestalt appreciation. It's hard for him not to say I like myself because... but... We try to make a list, put it in writing, of all the good things about Sam. Sam doesn't want to believe what I have to say that's nice so we ask the staff for one good thing about Sam. If it's something on the list already, we get another so that every response is something different. Sam put the list in the envelope with his mother's letter when he left.

Session 8: Sam says he is nervous about being President of the ward. The guys call him that when he talks to no one in particular. We talk about why he does this. He is afraid to ask for attention, afraid people will ignore him. So he gets it over with first.

Sam gets his list at my request. He reads it aloud. He picked three good things about himself to think about when he got nervous.

He talked about being nervous in school. He wasn't to blame but he had seizures when he got nervous. Lucky coincidence. Sam felt a seizure coming on. I thought he was putting me on. We laughed all the way to the canteen.

Session 9: I tell Sam that I have to leave in two weeks. He says he knew I would get upset. He goes back to being a hopeless case again. We play the "Oh you're not" game... We talk about what's happening. Sam has two defenses: seizures and being a hopeless case. One or the other usually works.

I ask if he doesn't want to be a hopeless case, what does he want to be. There is no positive response; all Sam can say is what he would like to be if this or that problem didn't get in the way. This is what Sam's mother used to tell him.

Session 10: Sam says he wants to go to a back ward. He has learned a new defense. No, it's a variation of the hopeless case routine. We sing "I'm a hopeless case" to I've Been Working
on the Railroad. Another patient joins our song from outside the office. Sam is indignant. He gets up and tells the person he is not a hopeless case.

Why will Sam let people close to him say things about him he doesn't like when he won't let a stranger? If Sam lets people near him say he is sick, or dumb, or epileptic, then they have to be responsible for him.

Session 11: Sam: You'd better not waste your time with me, dear. Better find someone more interesting. I should be sent to 7. Will you ask the doctor for me?

Me: What are you asking for, Sam? Do you want me to say I'm not wasting time with you?

Sam: (reaching for my pack of cigarettes) Can I have one until payday. . . tomorrow? . . . I shouldn't take these from you. I belong on a back ward. They elected me president here but no one listens to me. (He starts to cry and continues talking for several minutes. I can't make out what he is saying.)

Me: I want to listen but can't understand what you're saying. Do you want me to listen? . . . He nods. . . okay then. Take a deep breath. Relax. . . pause while he does this, lights a cigarette and stops crying. . . . What do you want to tell me?

Sam: I have no comprehension in reading. Don't remember names. They won't let me talk in the meeting unless I know the names. I have seizures and can't be president. Oh. . . it's too bad. You don't want me around, dear. Better send me to seven.

Me: Why do you want to go to seven? Will it be easier to remember names there?

Sam: Strict medical supervision. The nurses notice when I have seizures. I can't remember to write them down. It's not my fault one single bit.

Me: Back to the bullshit again. Now you're wasting my time.

Sam: But I had a seizure and can't be president. It's not my fault. I should be on a back ward.

Me: You had a seizure this morning. No one was paying attention to you because what you were saying had nothing to do with what Wes was talking about. Terry told you to shut up and. . .
Sam: But it's not my fault one single bit. I got...
Me: I know... "symptoms of epilepsy."
Sam: That's right and...
Me: and you managed to have seizures at the right times. You... (pause)... Sam, do you know what's happening? I'm arguing with you to make you agree with me. And... ah... you're enjoying it, telling me more bullshit... waiting to see me get upset.
Sam: (grins) You'd better find someone else dear. It's no use... I can't help it. Ask my mother... gives her name and address... she can tell you all about it.
Me: Do you know what I think? I think you're either treating me the way your mother treats you or doing... the way you get her upset. Which is it?
Sam: When I was bad, my mother always sent me to my room. "Go to your room, Sam; company is coming." My brothers got to stay and... and have interesting conversations. They are talkers, had comprehension in reading. But I'm a hopeless case.
Me: Are you being bad now? Is that why you want to go to your room?
Sam: Go to my room?
Me: Sure, a back ward... seven... where you can be away from people. No one will get upset... or embarrassed if you have seizures.
Sam: And the nurses give strict medical supervision. Make sure you get the medicines. And all the patients are... crazy and... (sigh)... It's for the best my dear.
Me: (get up and go and crouch in a corner) Yes mother, you know best. After all, I have symptoms of epilepsy and don't remember peoples' names. I haven't got comprehension and reading. And can't do anything you want me to.
Sam: That's right. When I was home the last time, I was carrying groceries on my bike. I had a seizure and... it was right on the six lane highway. The bags went all over the road. The ambulance took me to the Hospital and called mother.
Me: And she was embarrassed because everyone knew about the seizure. I had to go to my room as soon as I got back from the hospital.

Sam: And they forgot about supper because she had to go to Mrs. ______'s bridge game.

Me: And I was alone in my room, and afraid... and hungry... didn't anybody care?

Sam: She's a good woman. It's for the best. The priest asked me not to come to mass.

Me: (standing up) Even God didn't care. But I'm Sam Jones and I'm a person. I don't have to go to my room just because my mother wants me to. People who like me want me around even if I'm sick... even if I embarrass them.

Even if I have seizures. I'm a person. I don't have to go to my room because I'm Sam. I'm a person.

Sam: I don't have to go to my room?... (sigh)... I don't have to. I'm not a hopeless case. My mother can't send me there.

Me: No, she can't. She's not here unless you want her to be... unless you act like her... tell yourself to go to your room.

Sam: Don't want her here. I want to... (pause)... 

Me: What do you want to do with your mother?

Sam: Beat her... (pause)... and other things.

Me: Beat her and other things? At the same time?

Sam: Yes, she's been screwing me for a long time.

Me: Could a seventy-year-old woman take it?

Sam: No.

Me: Well?

Sam: She did it to me.

Me: And you couldn't take it. You got sick and she blamed you for being sick. Pretty soon you even blamed yourself. Are you still blaming yourself?
Sam: I don't have to go to my room. Can I have another cigarette?
Me: Sure. That's what they're there for, for you to help yourself.
Sam: God helps those who help themselves.
Me: Well, we all have to help ourselves.
Sam: That's hard; besides, I. . . (pause)... I, I. . . it's hard. I can't go away. I'll stay here.
Me: Yes, it's hard to help yourself. You have to stay here and try while I have to go and try at school. But we can both do it.
Sam: Even without comprehension and reading.
Me: Yup, even without comprehension and reading.
Sam: I'm taking some cigarettes for this afternoon.

Rather than go into detailed analogies between my view of myth, appearance and reality and what happened between Sam and me I will draw a few conclusions and save the rest for the exam.

Sam had no myth, no structure for his reality. He took the system of appearances set up for him by his mother and brothers. This appearance became so real to him that it was all he could see.

When confronted by reality, Sam had to retreat to appearances. Both his seizures and his "hopeless caseness" were put-ons, pure appearance. These appearances kept Sam from being responsible, from having a goal toward which to strive. These appearances also gave Sam an easy way out, made being possible.

I blew it with Sam because I succeeded in making him aware of the futility of his appearance-actions but never succeeded in helping
him develop a myth which would allow him to deal with the threatening, frightening nature of reality. Sam appears to progress, to "get it together." But he is no better off because he was shown the way out of the cave when for him, the door was barred. We shouldn't have to learn from our mistakes when the mistakes are people.


