

The Practice of Medical Orgone Therapy in Anti-Authoritarian Society

Charles Konia, M.D.

Abstract

With the transformation of society from authoritarian to anti-authoritarian there has been a shift in the pattern of armor in the general population, with greater armor in the ocular segment at the expense of muscular armor. This shift has resulted in greater anxiety, impulsive behavior, a tendency to rely on street drugs and alcohol to self-medicate and greater unsatisfied behavior in the form of pornography (voyeurism) and secondary layer sexuality (sadism, masochism, polymorphous perversity, and so on). These behavioral changes have required changes in the therapeutic approach of the medical orgonomist although the goal of therapy remains unchanged.

The purpose of this article is to provide a much needed orientation for the medical and social orgonomist in their practice to the chaotic and troubled world we are living in. All healthy components of society are being threatened with destruction as the transformation of the social order from authoritarian to anti-authoritarian proceeds out of control. However, the degradation in the quality of medical orgone therapy need not happen. If the therapist remains aware of the changes that are taking place and the dynamics of the social processes involved, and does not become disoriented by the chaos, then the integrity of the medical and social orgonomist and the science of orgonomy can survive.

The first generation of therapists trained to become medical orgonomists included those physicians selected and trained by

Wilhelm Reich, M.D., with the assistance of Theodore P. Wolfe M.D. Of these individuals, Reich chose Elsworth Baker, M.D. as most qualified to carry on the training of the second generation of therapists. Baker was also responsible for founding the American College of Orgonomy (ACO). Some of those trained by Baker have continued Reich's mandate of training orgonomists to insure that the highest quality of therapy will survive for the benefit of future generations. The current members of the ACO's medical orgonomy training program represent the fourth generation of medical orgone therapists.

During this period of almost sixty years, enormous destructive changes have taken place which have not only altered the facade of people's character structure but also that of society. These changes were the result of the anti-authoritarian transformation of Western society. A manifestation of the emotional plague, it was accompanied by the triumph of mechanistic thinking and ways of living in every area of human life, including the practices of medicine and psychiatry. Traditional psychiatry, because of its failure to provide a natural scientific understanding and treatment of emotional disorders, was, without exaggeration, completely destroyed. This was evidenced by a slow erosion of the psychiatrist's role as the patient's primary caretaker. Instead, his function became restricted almost exclusively to the administration of medication to patients in mechanistic, cookbook fashion.¹ Having given up the responsibility for understanding and treating the patient's emotional problems, the psychiatrist, no longer considered the expert in such matters, allowed non-physician mental health professionals such as psychologists and social workers to take over responsibility for people's personal lives. Since there were no longer recognized authorities in psychiatry to provide this function, anyone could become an authority on any particular problem or personal matter—self-proclaimed experts appeared in all walks of life to tell other people how to be and feel better. This was also the time when the self-help movement exploded. People were led to believe

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that simply by reading a book they could solve each and every one of their personal problems.

In response to this situation, to the large population that needed help and to the insufficient number of qualified medical organomists to treat them, the College instituted a program in social organomy to train qualified psychologists and social workers with the purpose of providing them with the necessary therapeutic tools to perform this function.²

Through the mechanistic indoctrination of the public, the emotional plague continues its relentless campaign to undermine the core functions of human life. *This process is how the plague that killed Wilhelm Reich over 50 years ago is now threatening to destroy the American College of Organomy.*

What is Anti-Authoritarian Society?

It is commonly believed that anti-authoritarian society means the absence of authority. In fact, the exact opposite is true. In the new social order there is authority but it tends to be concentrated in the State under centralized control. The term anti-authoritarian, and its origin, must be understood in its historical context. It refers to people's *opposition to the traditional forms of authority* that existed prior to around 1960. Anti-authoritarianism is opposed to *individual* authority on the local level and this opposition results in *centralized* or *collective* authority. There is a corresponding decline in individual responsibility which is replaced by State responsibility represented by "Big Brother." Anti-authoritarianism is characterized by a marked shift to the Left of the political center. It must eventually lead to increased centralized power and some form of socialist state.

The structure of any society and the character structure of people living in it are interdependent. As any social order changes so does the character structure of the people in it. The converse is also true. With the rise of anti-authoritarian society, the authoritarian family that existed until around 1960 crumbled. As a result, the authoritarian

social order that was its foundation was systematically undermined. When the authoritarian order was intact, each parent had a specific function in maintaining it: the father was the enforcer of authority and the mother was the bearer of traditional values and the authoritarian moral code. This situation allowed for the maintenance of emotional contact in the family, which, although neurotic, was stable.

In contrast, in an anti-authoritarian household, even when the structure of the family appears intact as when both parents are living together in the same house, *there is little or no emotional contact between parents and children.* This qualitative change in the dynamics of the family produces profound changes in the character structure of these children.

Character Formation in Anti-Authoritarian Society

Unarmored life is based on the unrestricted, alternating pulsation of biological orgone energy between expansion and contraction. Character formation is the result of armor being imposed on infants and children from their environment. Armor results in rigidities in the psyche (character armor) and the soma (muscular armor). These rigidities are the result of the stoppage of the pulsation of biological orgone energy. Thus, in the armored state the organism's energy is blocked either in a state of chronic contraction or chronic expansion.

There is an important difference in the way character and muscular armor appears and is generally manifested in authoritarian and in anti-authoritarian society. In authoritarian society, armor occurs in the form of chronic contraction. In addition to the block in respiration, armor is manifested in chronic sympatheticotonia (excitation of the sympathetic nervous system=bioenergetic contraction) and hypertension of the skeletal musculature. In our current anti-authoritarian Western society, armor is manifested in chronic parasympatheticotonia (excitation of the parasympathetic nervous system=bioenergetic expansion). This occurs as the organism attempts to override the underlying sympathetic contraction by maintaining a chronic state of parasympathetic overexpansion. In

addition, there is muscular flaccidity. The energy not bound in the musculature is shifted upward and held in the brain (increased ocular armor). This condition is responsible for the wide range of behavior disorders seen in children and adults today including, in particular, psychopathic behavior. The following table compares the structure of human armor in authoritarian and anti-authoritarian societies.

Authoritarian Society	Anti-authoritarian Society
• Chronic respiratory block	Chronic respiratory block
• Chronic sympathetic excitation	Parasympathetic overriding sympathetic excitation
	Voluntary muscle hypotension

Although the factors determining character formation and armor are the same in authoritarian and anti-authoritarian family structures, they have a more destructive effect in infants and children raised in anti-authoritarian families for the following reasons:

- Because of the severe lack of emotional contact the extent and intensity of armor is greater.**
- The frustrated impulses of the child are mostly core impulses. Impulses from the destructive secondary layer are allowed greater expression through indiscriminate permissiveness.**
- There is more permissiveness than repression.**
- Because of severe contactlessness, the child's identification with either parent is weak. As a result, the psychic content of the beliefs that support the traditional social order is poorly defined.**
- The contradictions in the frustrations are more extreme.**

These differences result in greater ocular armor and contactlessness in children raised in anti-authoritarian families. Because of the effects of increased ocular armor children who are raised in an anti-authoritarian family will grow up to be more emotionally disturbed than those who grow up in an authoritarian household. The greater amount of ocular armor results not only in the shift of energy upward into the brain, and a decrease in muscular armor, but also accounts for the severe contactlessness of people seen today.

Therapy of Patients Who are the Products of Authoritarian and Anti- Authoritarian Families

Although there has been a transformation of society as a whole from authoritarian to anti-authoritarian there are still isolated pockets within society where the authoritarian family structure is the rule. In medical orgone therapy practice today one therefore sees patients who are the product of both social orders.

Authoritarian society was founded on the repression of sexuality. From society's standpoint, when repression was successful there was a sense of loyalty and respect for authority and authoritarian social institutions. This was a time when young adults were expected to live according to social expectations set down by tradition. For example, they tended to marry by a certain age and start a family of their own.

During the decades that immediately followed the breakdown of the authoritarian social order, medical orgone therapy was at the height of its popularity. More often than not the major reason for adult patients seeking the help of a medical orgone therapist related to the effects of armor resulting from their authoritarian upbringing. Many were able to see this way of life as a trap. They wanted something more. Since they had a fair amount of contact with their core, they had a sense of wanting to be free of their armored condition and to be healthier. Therefore, it was a simple matter for the therapist to gain the cooperation of the patient and armor removal was a relatively straightforward matter. Since sexual repression was the rule, the chief reason that most patients sought therapy was to become sexually

healthier. The neurotic patient typically had a well-defined, easily diagnosable character structure that was not blurred by severe ocular symptoms or by impulsive behavior, and the management of the patient was a relatively simple matter.

The so-called "sexual revolution" of the 1960s that accompanied the anti-authoritarian transformation was supposed to bring about sexual liberation. Instead, it resulted in the breakthrough of every kind of perverse impulse from the destructive secondary layer accompanied by social and sexual chaos. In contrast to the longing for sexual freedom that people had in the past authoritarian era, *people today have more freedom than they can handle or know what to do with.* Whatever contact people had with their biological core has been largely lost.

With today's decline in the authoritarian family structure, society is being torn apart and the individual is cast adrift and feels alienated. People, especially the young, are increasingly out of touch with their biological core and with the traditional values and practices that at one time held society together. The disintegration of the authoritarian family has brought about a sharp rise in the incidence of out-of-wedlock children and a corresponding increase of the welfare roles.³ Where the family structure still remains intact parents are increasingly unable to be *emotionally* responsible for the raising and care of their children. Workers in day care centers that operate under State regulation are now the ones responsible for the child's physical upbringing. Even before the legalization of same-sex marriage children are being adopted by homosexuals with no consideration being given to the destructive effects on the child's psychosexual development.

Many people entering therapy today are the children of baby boomers who were brought up during the turbulent 1960s. Their chief complaints are related not to the inhibiting effects of armor but to their confused upbringing, the result of the breakthrough of impulses from the secondary layer and the failure of muscular armor to contain

them. These factors are the reason for their increased ocular armor. Their problems, difficulties and pathology are not the consequence of authoritarian repression but of chronic anti-authoritarian permissiveness. Every kind of unsatisfied expansive symptom including homosexuality, an extension of the adolescent period into middle age and beyond, drug use and impulsive and criminal behavior are the common presenting symptoms that function to overcome their underlying anxiety.

Ocular repression of the sexual impulse was the rule in authoritarian society. As a result, the symptom of voyeurism, the result of an ocular unsatisfied block, was not a common symptom in the population. With the lifting of sexual repression, however, there has been a dramatic increase in unsatisfied behavior of all kinds, including ocular dissatisfaction in the form of visual pornography⁴ and vicarious interest in acts of violence. This breakthrough of voyeurism has intensified pre-existing levels of ocular armor. Because of increased ocular armor and decreased muscular armor, people have more energy than they can possibly handle. Consequently, they feel more anxious and are less in touch with their biological core and with core feelings than they were in the past. Some attempt to deal with this emotional/bioenergetic state by employing depressive mechanisms.

As a result of the shift in their pattern of armor, people often seek help today for reasons far different than in the past. Whether or not they are in touch with anxiety, many with insufficient muscular armor need relief. This need leads them to self-medicate with street drugs or to abuse alcohol or to take anxiety-relieving medication prescribed mechanistically by the physician. This complicates the clinical situation by causing patients to be even more out of touch with themselves. Their lack of contact is reinforced by the psychiatrist's rationale for treating patients' emotional illnesses as if they are nothing but the exclusive result of biochemical abnormalities in the brain. In turn, patients expect to be treated by the therapist in this mechanical fashion by being given the "proper" medication for their

condition. The underlying bioemotional basis of psychiatric disorders has been successfully and completely obfuscated.

As a result of high levels of anxiety the process of therapy of patients entering into medical orgone therapy today is entirely different than in the past. Also, because patients are unable to hold greater levels of bioenergetic charge, the progress of therapy is much slower. The individual needs to develop muscular armor to bind energy instead of its being held in the brain.

People who are the product of an anti-authoritarian family structure are not so much driven by their own inner forces as their character attitudes are a reaction to the bombardment of contradictory social forces impinging on them from their environment. They can easily fall prey to the ideologies of the political Left or the religious Right. This situation is similar to the chaotic situation induced in patients who have been mismanaged by rogue body therapists. Out of touch with the anxiety that drives their unfocused and destructive behavior, they displace their emotions onto the external and often behaviorally resemble the impulsive character. If not politically active, they become involved in social causes of every kind, such as the environmental movement, as a way of alleviating personal guilt and discharging excess energy.

Typical patients entering medical orgone therapy who were raised in an anti-authoritarian family often tend to overcome anxieties and insecurities—*based on an underlying biophysical contraction*—by maintaining a chronically overexpanded state in any way possible through substitute activities. They often present with a "laid back," unconcerned attitude about anything that may be troubling them. *Ocular armor is pronounced* and they require more education and perspective as part of the therapeutic process than others. The anti-authoritarian upbringing has left the patient with little or no genuine respect for any form of authority, even rational authority, including that of the therapist. Because of their greater ocular armor it can be difficult to establish a therapeutic alliance. They are poorly motivated

to change in a healthy direction and, as a rule, are not good candidates for therapy.

If the identified patient is an adolescent or young child of an anti- authoritarian family, it is more difficult to gain the cooperation of the parents. Because of their poor contact it takes much more patience and a greater expenditure of energy on the part of the therapist compared to dealing with parents in authoritarian families. This is because in anti-authoritarian families, the parents, much more so than the child, are a greater part of the problem. As a manifestation of their obliviousness, anti-authoritarian parents often behave inappropriately as if they are on a par professionally with the therapist, knowing what is best for their child, what the child's diagnosis is, what medications should be given to correct the problem, and so on. At the same time, they are more dependent and have a greater need to be taken care of and have a greater sense of entitlement than those raised in an authoritarian family.

As a result of the anti-authoritarian disintegration of society the medical and social organomist must adapt their skills to current social conditions without changing the principles and goal of therapy. Their services are needed now more than ever. The anti-authoritarian transformation and disintegration of personal and social life that accompanies today's social order requires a different orientation of the medical organomist to the patient than that which he had in the past authoritarian society. Because of their severe disturbance in contact, it is often necessary to find new and innovative ways of meeting people where they are. Although his primary therapeutic task is the same, that of armor removal, it is now necessary to focus on the many layers of the patient's ocular armor.

Also, many come for treatment having previously been given multiple psychotropic medications because of symptoms resulting from insufficient muscular armor. Eliminating dependency on pharmacological drugs requires a great deal of preparatory biophysical work to allow the patient to tolerate the resultant increase in energy level in his organism. Dependency on alcohol and street

drugs must be discouraged. Substitute activities that are so prevalent in anti-authoritarian society such as acting-out behavior, pornography, pathological gambling, and so on must also be curbed.

The necessary first step is to bring the patient into better contact with himself and with others. At the same time, when treating these patients, one must not lose sight of how much farther from emotional health are many of those who have been or are being raised in an anti-authoritarian society compared to those brought up in the past authoritarian era.

