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THE EARTH PHASE

INTRODUCTION: EARTH YIN AND EARTH YANG

Earth yin is primarily concerned with bonding and the beginning of the formation of boundaries, while Earth yang is primarily concerned with the maturation of boundaries and separation. Each section is divided into natural functions of these organ energies and the pathologies associated with the distortion by life experience of these functions, first with deficiency and then with an excess of these energies.

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NATURAL FUNCTIONS OF THE EARTH YIN PHASE SYSTEM

The Formation of Bonds

BONDING

Whereas the Water phase is associated with the continuation of the species, with the survival of the individual from one generation to the next, the Earth phase dedicates its energies to the survival of the individual in this generation. From inception through its functions of digestion, absorption, and metabolism of all material substance and energy transformations, it is the life-giving earth mother.

Viewed from one scheme of the Five Phase system, the Earth phase occupies a central position during our lifespan ('later heaven').

The Five Phase concept arose, as far as we know, in a culture that oriented and adapted itself to the natural world, understanding itself as an integral part of the behavior of that world. Hunting and gathering preceded agriculture, and so the original orientation to the larger natural scheme was spatial. The points of the compass—east, west, north, and south—were

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probably the first abstractions of the universe upon which man projected his own place in the great scheme of things. The earth is, of course, the center, the source of earthly sustenance that feeds and nourishes the other phases during this earthbound lifespan. It is certain that an Earth phase that is unable to perform completely the vital function of providing food energy to its dependent organ systems would leave those organ systems, and the entire organism, in a weak and vulnerable state.

The Earth phase dominates the oral-bonding and first-separating phases of psycho-social development for both parent and child. As the source of all material substances, the Earth phase is the nourishing mother. The capacity of the earth mother for unconditional, minimally egocentric love during the in utero and early oral developmental eras is the endowment which will determine the quality or quantity of the 'bonding' between the earth mother and offspring, as well as the latter's bonding with itself and with the entire human race, as long as it endures here and beyond. The earth's gravity is a centripetal force that, by its fundamental nature, is the bonding energy of our existence.

The trust and self-worth ("I am worthy of such care") that ensues from relatively consistent positive initiative and response by the earth-mother to her offspring in those early encounters leaves an imprint that little less than a lifetime of new experience can alter, for better or worse. Indeed, it is in the context of this exchange that a new person will more or less identify himself as human, or wish to be identified with all humanity. The original potential for this identification rests in utero with Kidney yin and the potential becomes a reality through the bond with the mother (or surrogate). Children born without this potential do not respond to this bonding and are alluded to as 'autistic.'

From its position in the center of the Five Phases, or even from its place between Fire and Metal, the Earth phase feeds all other organ systems; and by its inherent correspondence to the emotion compassion, it also exercises, through the Ko or controlling cycle of the Five Phase system, a direct, mitigating influence over fear (with love) and, indirectly, over anger. This tender ambiance is requisite to the healthy assertion of 'being,' and at once softens, ameliorates, and balances the Wood phase's 'negative' aggressiveness.

Normally, the energies of the Earth phase contribute to the general equation of human affect a sense of quiet, peace, calm, and compassion. These energies balance, with serenity and thoughtful reflection, the more disquieting, aggressive, impulsive, and restricted energies of compromised becoming, such as those associated respectively with Wood (repressed emotion), Fire (excitement and apprehension), and Water (fear and anguish).

The Earth is the phase of evenness and easiness, the oil on troubled waters, the phase of grounding and centeredness.

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The ultimate goal of a healthy Earth phase is to reproduce itself through its offspring as a new and joyful provider of nourishment to ensuing strong and centered generations.

DISHARMONY OF EARTH YIN FUNCTION

Deficient Earth Energies: Problems in Bonding

Clinically, there are three (and possibly four) distinguishable diagnostic categories of emotional disabilities that are associated with major deficiency in the bonding and boundary capacity of the Earth energies. The first two occur due to intra-uterine and early post-partum lack of support for Earth energies. Most serious in terms of destruction to the life process and cycle of development is a type of 'schizophrenia.' A less severe problem, also originating at the same time of development, is the schizoid personality disorder. Deficiencies at the time of late infancy and early childhood (six months to two years) can result in the formation of an 'oral' character.

INTRA-UTERINE AND EARLY POST-PARTUM LACK OF SUPPORT FOR EARTH ENERGIES (TO SIX MONTHS)

This most debilitating failure of life-organizing energies occurs, I believe, primarily in utero, and, in my opinion, involves the Water phase as a genetic vulnerability. Inasmuch as the Water phase (yin essence) is responsible for sound genetics and the integrity of the development of the central nervous system before and after birth, the healthy evolution of Earth energies must rest, to a great extent, with the Water. It is a fundamental axiom of Chinese medicine that Kidney yang is the progenitor of all the yang of the body, and especially of Spleen yang, which is the heat energy that drives the digestive process. However, the soundness of the digestive-metabolic processes during the post-partum maturation of this system is a function of the Earth phase. Defects in the alimentary-metabolic pathway will impair the work of the Water phase and its central nervous system ('marrow') activities, which is the slowest system to develop to maturity. The two systems (Earth and Water) are thereby functionally reciprocal, so that a developmental affliction of the central nervous system may involve an impairment of one or both as etiologic factors in varying degrees. As a rule, I believe that the higher the function

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on the evolutionary scale and the closer to abstract thinking we come, the greater the involvement of the Earth energies (though all of the phases play a role in cognition, as we shall see). As the human central nervous system is infinitely complex, involving the integrity of trillions of cells, the failure of Earth and Water phase energies, at this stage, can cause an unlimited variety of congenital defects. Schizophrenia is only one. Which exact failure of Earth and Water energies leads to this and other defects is information that we do not yet have at our disposal. However, it is my clinical impression that rather than separate entities, there is a continuation from the least neurosis to the most disruptive psychosis based on my experience with the different degrees of 'phlegm misting the orifices.'

Once again we have with this disorder (schizophrenia) the familiar reality in medicine that human beings have a limited repertoire of restorative mechanisms, which we observe as symptoms. The same clinical picture may result from a plethora of causes. My impression of the disease is one of multiple origin, having its primary etiology in the intra-uterine environment, which is clearly a developmental era governed by Water energies. Culpability lies in part with the person's constitution and, increasingly, with this culture which has introduced artificial chemicals into food and air, artificial delivery systems, and the greatly increased use of 'recreational' drugs. Ingestion of such commonplace items as coffee and cigarettes has been 'scientifically' implicated as teratogenic to intra-uterine life. The remarkable bombardment of energies all across the electromagnetic spectrum, from high tension wires to computers, plays a role.

Schizophrenia, as distinguished from psychosis (out of touch with reality), was defined by Harry Stack Sullivan as the loss of control of consciousness, and by others as an issue of poorly delineated and highly unstable boundaries. The concepts are equivalent, if not exact. This 'loss' of 'consciousness' or 'boundaries' is highly labile and usually occurs concomitantly with some identifiable stress, which, if chronic, is also cumulative, so that the schizophrenic process is generally a combination of life's exigencies and a pre-delivery insult. There is no question that such an event can also occur without any genetic or intra-uterine predisposition. I have seen such a loss of control under conditions when people had no other way to cope with, or escape from, an impossible life situation. An acute schizophrenic episode generated primarily by a profound, chronic interpersonal failure can be a potential growth experience if handled correctly. More often, it is not correctly approached and degenerates into a way of life which we call 'chronic' schizophrenia. The propensity for such chronicity, I believe, is due to a breakdown of Water energies during the genetic-conception unfolding,

and of Earth energies after the birth process. Research into the etiology of this disorder should, I believe, be directed to all pre-parturient stages of development. The medical model and social values, however, play an extraordinary part in creating and perpetuating chronicity.

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SCHIZOPHRENIA

Let us examine some of the parameters of this deficiency, which we call schizophrenia, in the pre-delivery functions of the Earth phase. This is, in large part, descriptive material from DSM-III-R with which some of us are not only familiar, but by now largely disillusioned, in regard to its usefulness. It is briefly recounted with an emphasis on energy considerations.

Before embarking on this course, I wish to emphasize that the meaning of the phenomenon I am about to describe seems to be culturally, not scientifically, determined. We have yet to be entirely clear about the syntonicity of the acute schizophrenic experience in 'spirit'-oriented cultures, where it functions as a medium for induction into higher levels of spiritual and healing power rather than a mental hospital.

Personality

Affect is generally blunted, flat, inappropriate, or silly. Eyes are expressionless and "see but do not look." There is a deterioration of work, social relations, and self-care, as well as increasing social isolation engendered by terror of annihilation. Peculiar and bizarre behavior, both private and public, is often founded on delusions. Speech is digressive, vague, over-elaborate, circumstantial, and metaphorical. Eye contact is often extremely difficult. The person's attention seems to be remote or fixed. Catatonia, including bizarre posturing, and hebephrenia characterized by inappropriate laughter, are often encountered.

The enduring methods of coping with reality by schizophrenics are:

1. General avoidance of interpersonal stress through withdrawal from both emotional and physical contact with other people, especially from those outside a very small circle of long acquaintance. Often these consist of only one or two people within the family circle.
2. Denial of any reality that constitutes a potential threat.
3. A disorganization of the ego when denial fails, with loss of internal and external boundaries.

Symptomatology such as depersonalization, catatonia, paranoia, and hebephrenia depend, in my opinion, upon several factors in addition to the underlying intra-uterine insult. The degree of the insult and the integrity of

the other phase energies, as determined by constitution and post-uterine interpersonal experiences, will play a part in the degree of organization, albeit maladaptive, that the schizophrenic can bring to bear to the massive disorder with which he or she is burdened. The paranoid person is the most highly organized, and the hebephrenic the least able to give order to psychic anarchy. In the more chronic, burned-out stages of schizophrenia, one encounters a severe narrowing of focus as a way of coping with the anarchy.

The principal bioenergetic feature of the schizophrenic is the loss of balance between the inner energies of the body and the external mechanisms that normally control these energies and keep them within the boundaries of the body integument, or at least within a short distance of that integument (the skin). This accounts for the loss of ego boundaries and the tremendous confusion between what is inside and what is outside, the source of much of the terror for people so afflicted. The loss of identity without integument leads to this fluid ego state and to conditions of depersonalization. In Chinese medicine these outer layers are energetically referred to as the *wei* and *qi* levels, or, in another system, as Tai Yang, which Dr. John Shen also calls the 'nervous system.' The integument includes the musculo-tendon system, which on a psycho-biological level is a necessary survival mechanism for offense and defense, for standing to fight or running to hide. The person who has lost clear and secure knowledge of all these resources is indeed in terror and at risk.

A second striking bioenergetic finding is the blocking of energy at all the key transfer points of the body, i.e., the joints of the extremities, the base of the skull, and in the pelvis where the lumbar and sacral vertebrae meet. Chinese medicine teaches that we are part of a gigantic universal energy system. When the energy of the universe moves, our energy also moves. If there are obstacles to this movement, problems develop which may take many forms.

Bioenergetically, the schizophrenic is blocked at all of the above-mentioned segmental joining points of the body, in which case he (or she) becomes energetically disjointed and disconnected within himself. This leaves the schizophrenic with a lack of internal coordination and with confusion that reflects itself in his thought processes, which likewise become uncoordinated and disjointed. (The *shen*, or spirit, is confused.) At the same time, the schizophrenic is unable to allow the energetic forces in the world to flow smoothly through his being, and at once he loses synchronicity with those forces and experiences them as adding to the burden of his confusion. Even the energy system of another person, especially a strong one, can be an increased, unmanageable load and considerable source of such confu-

sion. This is one reason why the schizophrenic feels more comfortable in a state of withdrawal. And since the energetic forces are quieter at night, many schizophrenics feel more at ease wandering the nights and staying quiescent during the great, dynamic yang hours of the day.

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Cognitive Disturbances

The most serious forms of cognitive disturbance occur with disturbance of the energies of the Fire, Water, and Earth phases. The Water phase energies account for the material parenchymal form and substance of the 'brain.' The other phases are more involved with what we refer to as 'mind.' The Spleen-Pancreas organ system controls the ingestion, digestion, absorption, and metabolism of food. Analogously, it controls the ingestion, digestion, absorption, and metabolism, i.e., the alimentation of thought, and the Fire phase of all of the higher ego functions of the cerebral cortex. Dr. John Shen, in Chapter 14 of this book, adds another dimension to the etiology of psychosis in the qi, food, and phlegm ('misting of the orifices') stages of stagnation in the digestive system.

What are these functions? The Earth and Water phases are responsible for the order inherent in maintaining the boundaries between the conscious and unconscious, the inner and outer world, and for the reliable reality testing that is requisite to successful earthly perpetuity. When the Earth phase fails and internal pathways become fragmented, there is a loss of contact and cohesion between levels of abstraction. The schizophrenic, despite his (or her) brilliance, may consequently be debilitated by this interference with abstract thinking. The result is concrete thinking, which is defined as relating "to a specific or particular item or thing as a whole, a tendency to react to the immediately-given object or situation without considering its relationships or classifications," the opposite of abstract thinking, wherein a person can generalize from a specific.

Internal fragmentation, which is a singular characteristic of schizophrenia, precludes movement from the specific to the general. This fact by itself accounts for the massive confusion that attends all contacts a schizophrenic has with reality. The autism, hallucinations, delusions, illusions, and body distortions follow from this fragmentation and loss of boundaries. The functions of attention, concentration, memory, the accumulation or organization of knowledge and reality are all consequently compromised.

The cognitive clinical picture may include one or more of the following: bizarre delusions and thoughts being controlled by outside forces; persecutory delusions; somatic delusions; grandiose delusions, sometimes religious or nihilistic; auditory hallucinations, usually defamatory in character,

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though sometimes threatening or suggesting violence; incoherence; marked loosening of associations; illogical thinking; poverty of speech and ideas, or fixed ideation; unusual perceptual experiences of a visual nature; feelings of clairvoyance, telepathy, and 'ideas of reference.'

The organization of ideas into logical, communicable language is the function of the Fire phase. The disorders of language one finds in the schizophrenic process are the result of the Earth phase feeding the Fire phase with energy fragments that were never fully 'digested,' 'assimilated,' or 'transformed' into usable units of 'mental energy.' (Recall that the Earth is the center, storing the 'tastes' and feeding all the other phases.) The Fire phase does not receive qualitatively serviceable energy for performance of its tasks, the consequences of which are the myriad remarkable language disturbances of schizophrenia.

Energy Logistics

According to Simon Mills, the herbalist, the Earth and the Fire have a special relationship in that the 'sweet' flavor associated with the Earth disperses excess tension/activity in the Heart function, possibly working to encourage stability and quiet to an overly-charged situation.

Furthermore, the boundary problems of severely deficient Earth energies complicate even further the quandary of the schizophrenic and the observer in terms of when and whether the person is talking to some part of himself or to others. The hebephrenic phenomenon of sudden, inappropriate laughter may be a confusion of coordination within the Fire phase between its mediation of the emotion joy (the spirit scatters) and its communication function. This would imply weakness of the Water phase (unable to control the Fire), which is compatible with the idea that the Earth phase in schizophrenia has been severely compromised before birth, either in utero or genetically, by a functionally-compromised Water phase. The catatonic process is apparently an attempt by the Fire phase to find safety through silence, and by the Metal controlling Wood to achieve immobility for the same purpose. These energy logistics may all occur as 'phases within a phase,' all characteristics of the other phases as they function within the Earth phase.

Dreams and Anxiety

The dreams of schizophrenics are, most accurately, waking dreams or night terrors. A night terror is defined as "a nightmare from which the dreamer awakes but the terror continues." These night terrors reflect the loss of boundaries between conscious and unconscious—between outside and inside—and the subsequent loss of control which leads from anxiety to

terror. One source states that people with problems in the Earth phase, especially Spleen, will not sleep peacefully or be able to sleep on their back.

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The anxiety of the schizophrenic is the terror of annihilation. Its source is the loss of boundaries, as previously described, leading to massive confusion of orientation to self and others. The disorganized sub- and unconscious 'other reality,' the organized mental functions, and the body are indistinguishable from each other and from the environment. Terrifying distortions of one's own body image ensue, as well as disorientation in a world that has lost its familiar perceptual navigational guideposts. For this reason, and because of the inability to cope with the energy of other human systems as previously described, the threats of annihilation come from all directions and often they only seem more ominous coming from the outside world. Inasmuch as the schizophrenic has no control over the internal disarray, he tries to focus anxiety outwardly in the direction where, through retreat or attack, he feels a slightly greater chance of mastery and stability. The attempt at restoration is, therefore, to project. In its least organized form, the configuration is called hebephrenia.

The catatonic is the next least well-organized restorative mechanism, which generally carries with it a better prognosis than the hebephrenic. Again, we can say that the Earth energies, necessary to maintain the ego-functions of internal and external boundaries, are greater here than in the hebephrenic.

Paranoia

Paranoia is classically referable to the Water phase. In paranoid schizophrenia, both the Earth phase and the Water phase are involved. The boundaries between internal and external worlds are more highly structured. According to most thoughts on the subject of paranoia, independent of other considerations of degree or content, there seems to be general agreement that the boundaries are maintained but that internal and external are reversed. What is actually inside is experienced as outside, crossing the boundary from that direction. Paranoia could be a confusion within the Earth phase of yin and yang, so that what is inside (yin) is projected outward, and what is outside (yang) is 'introjected.'

The paranoid mechanism of the Water phase provides the boundaries (albeit in retroversion) which the weak Earth energies alone cannot erect. The results are less than perfect. The Water phase cannot truly replace the Earth phase as boundary-maker. Since Water energy is now siphoned to functions which are restorative and unnatural, its own developmental mission is, perforce, diverted and subverted.

Food Allergies

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Theron Randolph has demonstrated that schizophrenic symptoms may be caused directly by food allergies, which come from an immune reaction to incompletely digested proteins.¹ The body reacts to these proteins as if they were a foreign substance, for instance, very much as it would react to a virus. Indeed, these incompletely digested proteins are often quite large, the size of virus molecules. Much of the schizophrenic thought disorder, as well as other symptomatology, is postulated to be the result of the effects of these large molecules on receptors and on circulation in the brain. I have treated a schizophrenic with severe food allergies in some depth. As with many patients with pervasive allergies, this person was better for a short period of time when placed on an allergy-free regime. The proliferation of sensitivities outstrips the attempts to adapt to them. In this person, the fundamental defect was in the Water phase, profoundly affecting her entire constitution, and, most especially, her psychological functions from early childhood. The increased demands made on her mother by her extraordinary neediness were not met, and she experienced rejection and incomplete bonding. The failure to be accepted and to bond, so crucial to the 'evolution of being,' predisposed all other systems to inadequacy. The massive food allergies arose from the incompetence of the Earth (Spleen), and the overwhelming inhalant allergies from defects in the Metal (Lung) phases. (Experience shows that the detoxifying functions of the Liver are also a factor in all allergies.) Clinical ecology is a sound and valuable discipline; however, it is dealing with symptoms and mechanisms, not the fundamental energetic disharmonies. In this case, therapeutic concentration on the energy, rather than the allergy, produced excellent results.

A Case of Schizophrenia

A 30-year-old mother of one child was referred to me by her own mother, because the younger woman was hallucinating. Since early childhood, R. had had difficulty relating to other children, though she was very intelligent and functioned well academically. She attended but did not complete college, where she met her husband. The marriage lasted only long enough to produce one child. There were many other men along the way and frequent moves and changes of job as she followed these men. There were also periodic hospitalizations for episodes of hallucinations, delusions, and confusion, which began during her late teens when her mother would rescue her from whatever improbable situations she was in at the time of her 'breakdown.' At these times mother would take control, drawing her in to herself while at the same

time pushing her out into paths that were totally unrealistic. With this patchwork pattern of living, little of substance was ever accomplished.

Somehow through all this R. had raised her child to the age of 11, when the child began to assert her desire to live with her father. It was during one of her many life transitions that I met her, at which time she was actively hallucinating that an ex-boyfriend was controlling her through voices that were mediated through a computer. These voices accused her of being evil and harmful, curiously, in fact, of being very much the way I experienced her mother to be. R. was searching at this point for some way to help herself without hospitalization and without the use of medications, both of which she found debilitating.

Despite endless interference by her mother, whose prescriptions for her daughter were totally mindless of her defects, we managed, with the use of psychotherapy, acupuncture, nutritional supplements, and some herbs, to eliminate the disabling voices without the need for drugs, except every few months. At these times we would introduce one medication in large amounts for a few days, quickly reducing dosages as the acute disorganization subsided. We then continued with the above regime. R. was able to get a job and begin to put her life into some kind of order. She made plans to escape from her mother and began to learn self-assertion without fragmenting anxiety. When last we spoke, she had begun her life again somewhat more realistically and was searching for someone to continue our work in the area in which she now lived.

SCHIZOID PERSONALITY DISORDER

Another less life-disorganizing outcome of a deficiency in Earth and Water energies during the intra-uterine to first six months of life period is the personality disorder called 'schizoid.' Here the primary issue is existence, "to be or not to be," in its most concrete sense. The event leading to this dilemma is one or more life-threatening experiences either before birth or during the first few months of life. Borrowing from the DSM-III, this personality disorder shows the following characteristics: "This person shows an emotional coldness and aloofness, an absence of warm, tender feelings for others. There is an indifference to praise or criticism or the feelings of others. Close friendships are limited to no more than one or two persons, including family members." The need for what has been described as such 'splendid isolation' is the clear sense that destruction is imminent.

A Case of Abandonment

J.'s mother had attempted prenatal abortion of him. His parents

had succeeded in aborting a child one year previously, but the knitting needles did not work this time. Clearly unwanted, he was neglected during his early infancy when his mother, to spite his father with whom she had had an argument, would leave him alone in the house. She would call the father's place of business to let him know what she had done, and he would call his mother to go and care for the baby. At the age of six months the child had pneumonia, and his lungs were weak from then on. The ambiance was always physically and verbally violent, and he was beaten by both parents, especially his mother, who was also sexually seductive and sexually exploitive. Later, he became an accomplished street fighter when attacked.

Throughout childhood he stayed to himself and in his own fantasy world, though he was always able to function and distinguish it from reality. He was always treated as the caretaker in the family and acted that role from his earliest years. For this reason he managed after puberty to succeed in school, in the service, and in his work, but he always remained aloof except toward a few friends. When he was 24 he entered therapy with an old woman. Up to that time he could not bear to have anyone touch him. It was literally physically painful, and sometimes, if touched in the street by accident, he would strike out automatically as if attacked. One day this old lady walked over to him as he lay on her couch and placed her large, warm, and worn hand on his chest. J. had a convulsion and then began his long road back to a humanity, including his own, which he long before ceased to experience as anything but deadly. In later years he came to realize that his existence had been tolerated only as long as he was useful.

INFANCY AND EARLY CHILDHOOD LACK OF SUPPORT FOR EARTH ENERGIES (SIX MONTHS TO TWO YEARS)

Deficiencies in the energies of the Earth phase that occur after birth affect the growing child differently than do those which occur genetically or in utero. Life is far too complex to fit neatly into our scheme, and the overlap that accounts for the borderline states is considerable. The necessity to schematize should not be allowed to overshadow the limitations of such schematization. There are many people who have suffered from combinations and permutations of all these insults, schizophrenia, schizoid, oral, symbiotic, and narcissistic. The scheme does help us in sorting out the issues and, one hopes, in improving the prognosis of a management plan.

THE ORAL CHARACTER

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The problem of orality stems from significant failures in early mothering. Both child and parent may contribute to this, since some children are born with weak sucking reflexes or buccal musculature, or with allergies to mother's and other kinds of milk. Some children are unable to accept other forms of nurture, such as physical contact, and there is a wide spectrum of autistic states with which children are born that limit contact and communication, from the non-verbal to the verbal.

On the other hand, there are many, perhaps most, children who are born with excellent capabilities to receive nurture in all forms who do not receive it because mothers are, for a variety of reasons, unable to provide it. Some mothers can give it in a form that, for some reason, is unacceptable to the child. There are mothers who can hold but not breast-feed a child. Others are more verbal and can sing to their children but prefer not to have physical contact.

During my years as a child psychiatrist, I occasionally treated children who had been so infantilized by their parents that they never had the opportunity to develop the skills that they needed to survive on their own. Some of these children had initial defects, to which the mother naturally responded with overprotection, and then carried it on inappropriately. Other severely disturbed mothers with profoundly undeveloped ego-boundaries projected their own need for support and protection onto the child and treated the child as if it were themselves. Most of these mothers were psychotic, and the fathers inadequate or absent.

The possibilities for failure at this stage of development are therefore obviously manifold. Naturally, the burden for correctional behavior at such an impasse between mother and child lies with the adult, who alone, in the early phases of the relationship, has the potential resources for adaptation and change. We read about parents who succeed with the most autistic children, but more often about children and adults whose parents were too egocentric or inadequate to effect any accommodation that might lead to some fulfillment of the needs of their children during this 'oral' phase of development. The result is a deficiency in the energies of the Earth phase, which we refer to as the 'oral character.'

There are a number of conditions that fall between and around the schizophrenic process and the oral personality that we need not refer to in detail. These include the personality disorders, 'borderline' and 'narcissistic,' described in DSM-III-R, earlier alluded to by DSM-II as the 'unstable,' 'immature,' and 'inadequate personalities.' Developmental schemata for this period vary from one 'expert' to another. The one that appeals to me states

that the 'oral' personality has been separated from nourishment too early; the symbiotic personality fails to distinguish his identity from the personality of others; the narcissistic personality, whom we will discuss, is one trying to cope with problems of too little or too inflated self-esteem; the masochistic personality, whom we have already discussed in Chapter 9, is dealing with issues of control and the humiliation associated with submission, which, though there is some overlap, is in my opinion more a problem of the Wood energies and the assertion of 'being.' With the partial exception of the latter, all of these conditions are rooted in failures of the basic issues of nurturance and separation during the era of infancy and early childhood. These are all 'borderline personalities,' which I consider to extend in a continuum from psychosis to neurosis and not as a separate psychological category. I simply wish to indicate that by describing the 'oral' personality we are also including these other life adaptations that have similar etiologic and characteristic roots.

The Oral Personality

The 'oral' personality is dependent upon others, exceeding the usual parameters for that otherwise natural state of affairs, both in degree and kind. Such persons feel inadequate to care for themselves, and at the same time feel that this care should be provided by others. Interpersonal relations are sticky and clinging, marked by demands for succor of all kinds, including financial support. In contrast to the schizophrenic, they are capable of perceiving reality with some accuracy; however, they cannot face it alone, feeling totally inadequate to the task. Avoidance thereof often leads to a variety of real-life disasters, frequently financial and marital. They have no aim in life except to be cared for, and apart from this, do not know what they want. Work records are generally extremely poor, with frequent changes in employment. The deep feelings of inadequacy tend to make them very egocentric, self-centered, and generally unfeeling toward others, whose needs they cannot imagine to be as great as, or taking precedence over, theirs. They are envious of others who are seemingly more competent and are bitter toward those whom they see as stronger and who do not give them enough. The demands are endless, the satisfaction short-lived, and the resentment quickly evoked. In the past they have been classified as 'inadequate' or 'immature' personalities.² More modern classifications are personality disorders of which the 'borderline personality' is characterized by impulsivity, instability, and chaotic relationships swinging from hate to love. Life is experienced in extremes, all good or bad, and as a victim of circumstances rather than due to one's own actions. The central issue, as with the 'oral' character, is above

all concern with abandonment, real or imagined. (The 'narcissistic personality' is discussed below.)

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The activities of the 'obsessional neurosis' are the restorative measures often found in the borderline personality between the 'oral' character and schizophrenic. This compulsive behavior, which often becomes outwardly quite bizarre, involving, for example, the constant rearranging of objects into a certain inexplicable order, is the preamble to a 'decompensation' of the 'oral' and 'schizoid' character into the schizophrenic condition.

Affect is often flat with little expression, except that of emptiness. Surrounding the 'oral' character is a sense of loneliness, which will often lead them into relationships with people who need to be helping, caring, mothering figures. There are mood swings of euphoria (inflation), when someone appears in their life who seems willing to assume that role; and dysphoria (deflation), when that helping person also has needs and is not the perfect mother. (Cyclothymic in DSM-III-R; also see Fire phase).

The oral character may go into deeper depressions when the mothering figure actually abandons them. This depression resembles the anaclitic depression (despair), so well described by Winnicott in infants who lose their mother somewhere between six months and one-and-one-half years.³ (Anaclisis is defined as "dependence on another or others for support, especially for emotional support.") In contrast to the endogenous depression (Recurrent Major Depressive Episodes in DSM-III-R) related to the Water phase, or the Dysthymic Disorder related to the Wood phase, this depression will lift eventually, when a new, promising mother figure appears on the scene, though I have found the event to be registered energetically on the pulse. Recently, while teaching about the pulse, I took that of a young man whose Lung pulse was Flat, indicating that he had suffered a deep disappointment early in life. Examination of his ear placed the date in the first two years of life. He told us then that at that time he had been separated from his mother, when he was put in a hospital for an operation. The apparent depression lifts, but the residue is physiologically and psychologically significant. As long as that Lung wave is Flat, difficulties with receiving and moving the qi and consequent tendency to sadness and respiratory problems will persist. He reported that for as long as he could recall he had been unable to take a deep breath.

Falling Dreams

The recurrent dreams of the 'oral' personality are those of falling. They vary widely in the exact content, and generally there is fear, qualifying the dream as nightmare. They seem, of course, quite real; but they are not the

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living dreams of the schizophrenic, the night terrors. The 'oral' personality usually awakens before hitting the ground, though I have worked with some people who have dreamt that they actually had been killed. Upon waking, there is a sense of relief and a recovery from the fear. In those who did reach the ground and died, I have known a few who were actually suicidal. These were the 'oral' characters who had been through the inflation-deflation cycle too many times, or those who were deeply into anaclitic depression and had given up hope. The gestures lack conviction but do sometimes inadvertently succeed.

The 'oral,' Earth energy deficient person may also have recurrent dreams of hunger or thirst. This may depend upon which aspect of the Earth phase is deficient, since the Spleen-Pancreas prefers dry (food), and the Stomach prefers wet (beverages). The craving may, of course, be for both. Classical Chinese medicine also reports recurrent dreams of storms and the construction of houses and walls in Earth energy deficient people. I have had occasion to record a few patients reporting this.

Bioenergetic Assessment

The 'oral' character is distinguished bioenergetically by a lack of energy, easy fatigue, and a general lack of aggressiveness. Physically, the chest is deflated and often the sternum is depressed. Spleen energies, which normally rise, are too weak. The arms and legs feel weak, and the person will tell the doctor how weak, impotent, and ineffective they are. The legs are thin, and they stand with knees in a locked position. This makes it necessary for the spine to carry all of the body weight, ultimately weakening the back. The neck and head are forward, the belly protruding, and the pelvis back. The forward extension of head and neck will lead to extreme neck tension and headaches. The neck may be quite long.

Problems with Cognition

The person whose Earth energies have failed at this stage of development has difficulty with the digestion of thought. Information is overwhelming because the 'oral' character is unable to break it down into its component parts so that it may be more easily and usefully absorbed. The thinking of the 'oral' character may seem unfocused and scattered, confused and unorganized because he cannot digest information into usable, recognizable (by the brain) thought building blocks. These people often develop food allergies, because they absorb incompletely digested proteins and are the ones who most often have a craving, dependent, addictive relationship to food. They are also those who most often are subject to what is described by the clinical ecologists as 'brain allergies,'⁴ especially those marked by con-

fusion and overwhelming anxiety. They are often 'hypoglycemic,' which has more recently been seen as a function of the food sensitive person and has similar symptoms. The patient described as Kidney yang deficient whose Kidney yang could not support the Earth energies (Spleen yang) exhibited all of the above symptoms.

Another characteristic of the thought processes of the 'oral' personality is the presence of obsessive worry as a maladaptive maneuver to manage anxiety. In contrast to the Metal personality, who is an obsessive, compulsive perfectionist with marked rigidity, the 'oral' character is relatively unstructured; the obsession stays within the mind in the form of constant, free-floating worry. During psychotic regressions under stress, bizarre compulsions will appear as a restorative measure in those decompensating toward schizophrenia, along with many of the other symptoms of that condition described above. A characteristic that distinguishes between the decompensated 'oral' and the person suffering from earlier, more pervasive damage is the former's relatively rapid recovery in a protected environment.

Another quality of thought processes in the 'oral' character is concreteness. While they are more capable of abstract thinking than the schizophrenic because boundaries are more firmly established between conscious and unconscious processes, the immediacy of their need for emotional and financial support (food, clothing, and shelter) directly influences their thought processes toward concrete concerns. The capacity for abstract thinking is present, but preoccupation with the concrete precludes its maturation.

The person who tends, on the other hand, to do much of his thinking while he or she is eating will often develop serious digestive problems, depending on the extensiveness of this habit and, of course, the constitutional status of the gastro-intestinal tract. Again, the kind of disorder that will result depends upon the nature of the thinking and of vulnerability of the organ or area.⁵ The worrier will have incomplete digestion (the Earth phase); the person with angry thoughts will develop Liver difficulties with sour regurgitation; and people with decisions on their mind while they eat may have Gallbladder problems. In Chinese medicine, the Lungs, which digest (dispersing function) 'mucus,' are part of the digestive system.⁶ Should mealtime be chronically marked by rigid repressive practices (no talking, strict discipline, and little gaiety) or by thoughts of grief, excess mucus may appear, as well as problems with elimination. Excessive joy is not often a chronic habit. In states of excessive joy, which we would call mania, people are often too hyperactive to eat. Emotional shock while eating will affect

both the Heart nerves and general circulation, and also the nervous innervation and circulation of the gastro-intestinal system. Problems with digestion on many levels will ensue.

Anxiety

The anxiety of the 'oral' character is most specifically related to deprivation. The issue is survival, and terror is aroused by the ever-present, ubiquitous expectation of the loss of sustenance. Although it is largely a matter of being deprived of love, the oral character experiences this in very concrete terms, since he often has great difficulty establishing himself in the real world of work and financial stability. Survival is a question of having someone who is committed to his physical survival first, and spiritual survival secondarily. The possible loss of this commitment is a constant source of anxiety. It is aggravated by his egocentricity and lack of concern for the needs and wants of the other person, whose inevitable ambivalence will sustain the expectation of abandonment and concomitant anxiety.

Another source of anxiety is the compensatory state of the Spleen-Pancreas, which is referred to as 'hypoglycemia.' In this condition there are wide fluctuations of blood sugar which, when elevated, leads to lethargy, a decrease in concentration, and exhaustion; and when low, to anxiety, dizziness, and extreme weakness. Other organ systems are involved, including the Liver and Kidney (adrenal), but the principal defect lies with a Spleen-Pancreas overburdened by the heavy sugar intake of those whose oral needs were sufficiently deprived to sustain a lifelong craving for the sweetness they missed. In varying degrees we are most of us thus afflicted.

A Case of Dependency

E. was 29-years old, a rather disheveled but attractive woman at the time she was referred by her sister. At the time, she was unable to cope with the care of her husband and one child and appeared in a state of tortured confusion and severe agitation. She was the eldest of five children. Her parents operated a bar and she was raised in this atmosphere, as one child after another arrived, the second only one year after she was born. E. was pushed out of the nest almost immediately and was used to raise the other children.

She left home at the age of 17 and married a bi-sexual man who was a pimp, and for whom she was a high-class prostitute, until he absconded with their child. In 16 years she has not been able to trace either of them. She continued to lead a marginal, impulsive, and highly unstable life until she married a carpenter with whom she has wandered from place to place, finally moving into her sister's house, and

forcing the latter out.

E. was extremely dependent on her husband for almost everything. She was afraid to learn to drive; she could come to therapy only at the whim of her husband who opposed her treatment. Her dependencies included drugs, both prescribed and recreational, which she used when she could not get what she needed from people. She had many obsessions. In order to allay her anxiety, everything had to be in a particular place and be done at a particular time and in a particular way. If it was not, she would withdraw, go to sleep, stay in bed, and not function. She personalized most of what occurred around or was communicated to her, leading to considerable distortion and conflict.

There were frequent changes of mood directly varying with whether she felt cared for or not. She said "All I want is to be loved unconditionally" and was in a rage if she was not. Though she said that she was afraid of being made a fool, of giving without getting, she had no resistance to anyone who appeared to be willing to take care of her, and no judgment about the people who made these promises. The venom that followed their defections was monumental, though short-lived. Her everlasting hope was that "something will happen that will make everything nice." She responded well to the needles and some talk, and presently, eight years later, she is doing well. She is independent, with a career, and has raised her son to be a fairly well-adjusted adolescent.

Permissive Parents

Changes in parental attitudes since World War I, and especially since World War II, toward a more permissive environment for children have been misconstrued by some people to mean the setting of absolutely no limits and have led to a new form of the oral dependent person. All of the pathogenic outcomes of child development have become, consequently, marked by greater confusion and disorganization. This unstructured and untrained, inadequate person has been with us throughout history and is now here in new and more virulent forms since the loosening of parental disciplines.

When little is expected, there is little chance of developing a feeling of adequacy or self-esteem. Whereas in the past the parent paid a great deal of attention to the child's development, often excessively, recently the child goes his own way relatively unguided. These people do not have the organizational ability to enslave others to their needs in a series of intense relationships, because they never experienced such intensity in their original relationships. Instead, they themselves become enslaved to their lack of preparation for the pain and frustration of daily life. So painful and in-

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tolerable is reality to them that escape, especially through readily available drugs, is irresistible. As one recovering drug addict told me in the 1960s, "Man, I need a human tranquilizer." He lived his life in a wealthy ambiance of total emotional neglect. Another told me that he had the "Long Island syndrome," meaning that "no one ever expected anything from me." Most of these young people report having been told by their progressive parents, while longing and begging for guidance, that indeed these parents had every confidence in them that they could and should be able to guide themselves, that their counsel was not necessary, or even desirable. The absence of models from which to learn and authority against which they could test and build their own strength has left a scarred generation. Many other factors have contributed to the pain-phobic drug culture. Not the least, I believe, is this new wrinkle in the distortion of Earth-bonding energies.

A Case of Formlessness

C. was a 20-year-old college junior who was extremely agitated. He stated that he felt nothing, was completely apathetic, withdrawn from any interest in or caring about anybody or anything in life. He likened himself to his older brother who was in even worse shape, and to his father who was a salesman and was totally passive, with no interests. His mother, who came from a wealthy family, stated that "happiness equals money and that is all I know." He felt that his problem centered in the fact that he was never expected to do anything or assume any responsibility even for himself. No one paid the slightest attention to his obligations in school or had the slightest curiosity about how he was doing. On matters of utmost urgency with regard to his development in the real world it was assumed that he could figure it out by himself. At home his care was total, and in fact, even until the age of 16 his mother would wipe his behind for him after defecating, so that he would not have to do it himself.

His feeling was one of amorphousness, and formlessness, having no 'definition' to himself and his life, and no limits. He simply did not know where he was or where the rest of life was and he had an almost total disorientation to the essential issues of existence. He deplored his lack of education, having done nothing in school up to this point. It left him feeling that he was inferior because "I don't have the tools to expand on thoughts." However, seeing his brother in the same place, but five years older, he was gripped by the fear of that deadness, which he sensed in himself. This fear was a spark of his life that could be fanned into a flame of being.

THE MATURATION AND TRANSFORMATION OF BONDS

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Trust in mother is, paradoxically, the condition that allows human beings to believe that it is safe to expand this bond to others and thus fulfill their developmental destiny as adults. This earth-trust is the fertile soil for all natural separations in the 'evolution of being,' the first of which is the gradual emergence into the newborn consciousness of awareness of another being, necessary and helpful, and yet with their own needs.

Bonding, and especially the process by which bonds mature, is the enduring symbol of the energies of the Earth phase. In the early era, it establishes the human bond (yin function), and in the later era of early childhood, it creates the conditions for the expansion (yang function) of that bond to other phenomena, both human and otherwise, which occupy this space with us. Though not entirely individuated from the primary bond, the child begins, with the help of the trust these energies engender (and with Metal phase energies which serve transformation and expansion), to identify, not only with the immediate, but with the larger world of people and things. The existential family begins to become included as part of one's self ('being'). The Earth is the glue that bonds, and trust, its child, the solvent that separates, always at once in the same process.

Even failure to bond well with the original caretakers can be remedied to a reasonable extent by the formation and expansion of bonds with surrogate caretakers. This is especially important to health care practitioners such as Chinese medical practitioners who are surrogates in the same continuum of bonding.

A Case of the Extended Family and Surrogate Caretakers

A young woman was born into a family with a very immature, impulsive, and violent mother and a largely absent father working very long hours. Their marriage was forced against the father's will due to her pregnancy at the age of sixteen. The child was not welcome and the mother beat the child whenever she was emotionally stressed.

Shortly after her birth the mother began to drink and the infant and child were largely neglected except for the nearby presence of her paternal grandparents and paternal aunt and uncle, who also became involved in her care.

The child was fearful and exceedingly cautious in her early years but gradually came more and more in contact with friends of the family as well as other relatives that seemed to increase her courage. Counselors in summer camp, teachers, special attention by significant family friends, and finally friends her own age and older played a greater and

greater part in her maturation into an independent person who left home early. Later, psychotherapy and other healing modalities that she pursued built upon the strength she gained from her surrogate caretakers and friends, allowing her to create a successful personal and professional life.

DISHARMONY OF THE TRANSFORMATION AND MATURATION OF BONDS

Wherever the original bond is dysfunctional, the maturation and transformation of bonds is determined by the extent to which the infant is genetically unable to participate in the original bonding process (autistic), the degree to which the caretaker is unable or unwilling to allow this maturation, the unavailability of surrogates, and a deficit in Metal transformational function, or some combination of the above.

The result, as illustrated below, is a person damaged socially and interpersonally as well as often neurologically. While a wastebasket diagnosis, the description of Asperger's Syndrome is illustrative of many of the permutations and combinations of the insults mentioned above. Some of the symptoms are: lack of social skills; dislikes changes in routine; appears to lack empathy; unable to discern subtle cues in others' behavior, facial expressions, and tone of voice; avoids eye contact and has unusual facial expressions; restricted and unusual interests; awkward motor development; easily over-stimulated.

Any of the categories of disharmony given under Earth yin deficiency and excess can also be examples of a deficit in the transformation and maturation of bonds.

A Case of the Failure of Spleen Yin

A young 32-year-old man was interviewed who had become massively depressed when the only girlfriend he had ever had ended their relationship. He was hospitalized, given drugs and shock therapy, but his depression became greater, including a steady withdrawal from society, and even from his own family. Sensory deprivation therapy was followed by an ongoing delusion and even hallucination about distant family members who were going to disenfranchise him when his parents died. At times this involved smashing walls and furniture when he felt threatened, though never against another person.

His history included his mother's previous miscarriage, toxemia of pregnancy, her abandonment of him as an infant for eight months, and two inguinal hernias at the age of three. Parents are self-described as

perfectionistic and demanding; he could never defend himself against them.

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He was extremely sensitive as a child, with considerable difficulty with peers, and withdrew into a world of fantasy involving Camelot and all of the adventures associated with the Knights of the Round Table. He has stayed in that world ever since, and despite an IQ of 158, he did not do well in school.

In college he discovered that if he took enormous amounts of coffee, caffeine tablets, and Dexedrine he could think clearly and perform outstandingly such that he earned a Masters Degree and acceptance into a prestigious doctoral program. Here at last, with the rejection by his girlfriend, he fell into the massive depression mentioned above.

A central and ongoing feature of his problem is his experience of himself as totally unable to think and a complete sense of unworthiness. Any compliment is experienced as mockery. He feels that his brain has been damaged and that he is autistic. A neurologist recently made a diagnosis of Asperger's Syndrome, a form of adult autism. He avoids people, closes his eyes when he talks to them and continues to use caffeine stimulants in order to participate even in a limited way in society. My experience with chronic users of amphetamines and high caffeine stimulants is brain damage, often irreversible.

Here we have a combination of almost all of the insults listed above to make the maturing and transferring of bonds unlikely. Evidence of in utero damage and Kidney essence deficiency are the 'toxemia of pregnancy', placenta previa, the double inguinal hernia at age three, extreme sensitivity, and the prolonged flight into fantasy life as a young child. Abandonment by his mother during the first year of his life did not provide him with the Earth nurture that could have created the bond that would have permitted a maturation of that bond and transfer to others. The pressure to succeed forced him into an addiction that I believe created a realistic brain deficit with the consequent downward spiral that included damaging medical intervention.

**EXCESSIVE EARTH YIN ENERGIES:
PROBLEMS IN TRANSFORMING BONDS**

Increasingly in recent years, the problems have moved toward difficulties in breaking bonds rather than in forming them. I would argue from clinical experience that the therapeutic task is easier for both the patient and the therapist when the bonding is deficient and the patient is an 'oral' character or a schizophrenic, rather than the situation where the bonding has been

too strong. Where, in Chinese terms, the Earth energies have been excessive in bonding, the person thus afflicted has been equipped with a sophisticated apparatus to manipulate the world to their way, in contrast to those whose Earth energies have been deficient in bonding. Again, for the sake of discussion, we are oversimplifying a truly complex situation that, in reality, is usually a mixture of excesses in some areas and deficiencies in others, in any one person's life. The ideal is balance, in which a good parent gives and withholds when it is most in the interest of the healthy development of the child. Inborn patterns or tendencies toward patterns of behavior have been extensively studied by Chess and Thomas,⁷ showing that the child is not a 'tabula rasa'⁸ and has a significant input to the odyssey of his or her own development. The challenge to mature parents is to cope with their own egocentricity and to adapt their energies for bonding and separation to the individual child.

I refer here primarily to the character structure of the person in whose development the Earth energies involved with bonding have been excessive, such as the narcissistic personality.

NARCISSISM

When a child has been made to feel that he or she is the center of the parents' universe, beyond the developmental period in which this is reasonable and in the child's best interests, the general features of narcissism are likely to emerge. This more often occurs in only children, though it is not confined to them. There are, for example, situations in which a child has been the only one, and excessively the center of the parental-family universe for a considerable period of time, until another child comes along, supplanting the former. Other life situations may also interrupt this exclusive relationship, such as death of a parent, and may alter the classical narcissistic personality. We are speaking, therefore, of a theoretical average.

From the child's point of view, he is living in a paradise in which he is the central concern in all relevant matters and is all-powerful in the decision-making process. He does not realize that, in fact, he is actually quite powerless and that the someone else who is in power has, for their own reasons, been willing to allow the child to feel omnipotent. The problems begin to arise when the child, in the normal course of events, must deal with people who do not wish to concede such extraordinary power to him. This is, of course, inevitable and, depending on the degree to which these bonding energies have been in excess, one has relative disaster.

The clinical picture depends upon the exact point in this history that one looks in upon the person. This is the spoiled child, whose behavior is

endlessly demanding, whose frustrations are marked by uniquely intemperate tantrums, who may go through life, until and unless correctional action is taken, expecting everyone with whom they come in contact to subsume their own needs and defer to them, immediately and at all times. They are experienced by others as self-centered and egocentric, which characterizes their thinking processes in childhood, adolescence, and adulthood. Cognition is based on the premise that they are the focus of all concern, and they often develop 'ideas of reference' at some point in life, even by the age of four or five.

The characterological consequence of such false omnipotence is a life of endless frustration and confusion. These people feel that they know everything; and yet, since they have been expected to do little for themselves or others, they are actually inadequate. Though they cannot function, they feel that their opinions are superior and should hold sway. The ever-growing awareness of the disparity between the fantasy and the reality of their abilities and their ever-increasing failure to dominate the world creates enormous anxiety, endless feelings of inadequacy, and brings into action every imaginable maneuver to manipulate other people, so they may again feel powerful. Any responsibility will evoke this anxiety and, concomitantly, all the tedious and difficult interpersonal machinations that are available to escape it. These are among the most difficult people in the world with whom to live. As the years progress into adulthood, they will seem, to those who get caught in their net, as not only inadequate and impossible, but also extremely immature. They rarely cease to attempt to invoke extreme guilt in anyone who does not accede to putting their needs before all others. They develop a clinging quality, which is best described as sticky; and sooner or later, they become extremely vengeful to all who fail to show absolute obeisance. Throughout their reign of terror, they are, out of their own inadequacy, extraordinary worriers, who burden everyone with their projected concerns, most of which usually are highly exaggerated. Everyone so unfortunate as to be susceptible to their 'guilt trap' will be obligated to either dedicate themselves to these worries, to the exclusion of their own problems, or suffer the consequences of retribution. Indeed, when these people look at life they see only themselves.

A Case of Helplessness

T. was born to a middle class family which had known very hard times in the country from which they had come. Mother was one of many children, relatively neglected, with no opportunity for an education or advancement until she met her husband. He was very bright and

won scholarships and other academic honors until, with her aggressive support, they achieved financial security. When she had a child, she wanted it to have everything she never had. The little girl became the center of her life and that world did revolve around her. Every wish was gratified, everything she did was greeted with unrealistic praise, and any dissent was ignored and discarded. T's father was pressed into this mold, and since he was a thinker and a dreamer, he accommodated his wife and was glad to be left to himself.

When she was five years old, a brother was born. Mother dropped T. in favor of the son, a much greater prize in that culture, and T., at the same time, had to begin school and thus to face a world for which she was unprepared. She formed no friends there and was lonely both at home and away. As she grew, the relationship with her mother increased in ugliness and deteriorated at the same time into a symbiotic mess. T. could barely function in school, but she was physically attractive, a good dancer, and married quite young. Her husband, who was expected to restore her to her previous exalted state, found himself performing not only his own duties in life, but all of hers as well. Despite her helplessness, she insisted that she alone was capable of decisions and expected total and immediate compliance with her determinations.

The world, including her husband, did not give her the homage she demanded. She seemed to have no residual shred of hope that she could leave her narcissistic world and become an adequate person and turned instead to using her considerable basic intelligence to manipulate and connive what she could not command. Gradually the marriage failed, and while not abandoned financially, she was left to fend for herself interpersonally. Over and over she alienated people, especially men, by insisting they abide by her superior judgment and allow themselves to be swallowed up into serving her narcissism. Therapy was another demand on her part for an appreciative and yielding audience and was not a resounding success. Sadly, she died suddenly and young.

NATURAL FUNCTIONS OF THE EARTH YANG PHASE SYSTEM

Ego Development and Boundaries

The rational, orderly, and compassionate use of the mother's Earth energies during the pre- and post-partum eras is the foundation for sound ego devel-

opment. Cognition is a major contribution of Earth energies to 'being.' The Earth phase energies are responsible as much for the ingestion, digestion, absorption, metabolism, and, to some extent, excretion of thought as they are of food. Metabolism of thought involves the organization of information necessary to meet the demands of survival and is necessary to the enhancement of what we call 'ego.'

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The capacity to engage successfully in these activities is determined in utero, increasing exponentially with the formation and growth of the placenta (Water phase). The opportunity to do so occurs after birth. At either point the process may be compromised. Generally, the earlier the insult, the more profound the unfortunate consequences. For those whose intrauterine development is incomplete, the dependency on a symbolic 'placenta' and 'umbilical cord,' expressed as an inappropriate need for ego-organization from the outside, will be a determining influence on their life. A quantitatively sufficient insult to cognitive development after birth can mimic the dire consequences to ego development of damage occurring in utero. We have indicated that though the two consequences may seem identical, the latter individual will be at a higher level of maturation when the insult occurs and has, therefore, the greater organizational capacity for recovery.

In adversity, should the Earth energies partially fail in their critical function of digesting, absorbing, metabolizing, and excreting, the normal serenity is distorted into listlessness, thoughtful reflection into obsessive worry, compassion into an excessively sweet and clinging over-concern, and quiet calmness into catatonia. These are the restorative functions of the human organism when its timely needs in the Earth phase are significantly unfulfilled.

While obsessive worry has been classically associated with the activity of the Earth phase, I find it to be more of a function of the Fire phase, and especially of the Pericardium yin maladaptations to stay in 'contact,' to stay 'intact.' My own findings suggest that obsessive worrying is a function of a lack of trust, a deficiency in parenting at a basic level in dealing with the unknown and its associated fear. However, while over-concern and inordinate compassion for others is linked to a deficiency in Earth energies, I find that excessive compassion is the result of a defect in boundary formation.

Capacity for boundary formation begins in utero (Water phase) as a consequence of many factors. The integrity of the placenta plays a particularly significant role in clearly delineating parent from child. A defective placenta that allows an abnormal exchange between mother and fetus may be responsible for a variety of physical problems, including those with Rh factor. We know that brain damage to the fetus, to varying extents, is a con-

sequence of such a breakdown in boundaries. The danger to the mother is equally well documented.

These mental-physical disorders are intermixed pathologically. The physical breakdown of these boundaries has a profound effect on mental function. Any damage to mental function of the newborn, or to the physical well-being of the mother, will compromise the normal evolution of that relationship from bonding to separation. The bonding will become stickier for obvious reasons if the child is defective, and more tenuous if the mother's health is compromised.

The normal development of boundaries is the foundation on which that bond can safely expand to include others in the process of separation from mother and is a function of Earth yang. Should the boundaries be less than optimal, that expansion and separation will be fraught with difficulty.

At the other end of the scale from the development of bonding, the earth-mother's energy role in child development is to encourage, with the strength and guidance of Metal energies, the transformation of that bond and the expansion of being to an identification with peers and new surrogate parents. The bond to mother should not at this point be broken. Rather, it should be encouraged and allowed to expand and stretch to new interpersonal horizons, while the old bonds are quietly but continually nourished in the background. If the Earth energies for separation are excessively strong, the resulting separation process is carried out too rapidly, too abruptly, or even brutally. On the other hand is the situation in which the process is prolonged inappropriately or, in fact, never truly begun. Like fruit on the vine there is a point of maturity when it is time for the fruit to fall, before which it is too green, and after which it is overripe. We shall consider each possibility in its turn.

DISHARMONY OF EARTH YANG FUNCTION

Deficient Earth Yang Energies: Problems in Separation

There are significant similarities between the personality outcomes for those whose bonding has been excessive and those in which energy for separation has been deficient. In the latter instance, we are considering a situation in which a child may have been sheltered from socialization with peers and adults until the time society demands this socialization at the age of mandatory school attendance. These children are not, as with the narcissistic children, necessarily overindulged. Their sense of inadequacy arises from lack of experience rather than from either the psychological vote of no confidence that comes from a lack of expectation or the sense of inadequacy that

comes when one's false omniscience is exposed. These children, in whom the expansion of the mothering bond is under-energized, cling from fear of the unknown. Affect may be flat, from lack of contact, broken by spells of tearfulness in situations in which they feel out of place. The most obvious behavior problem is school phobia, and the anxiety in this symbiotic situation is that of separation. Frequently these people will, if strong enough, develop obsessions and phobias as a way of controlling the anxiety, school phobia being the earliest and most noticeable. If the bonding energies of Earth are poor and the energies of the other phases, especially Water, are severely compromised, a schizophrenic outcome could occur. Often, these people do become 'schizoid,' remaining detached and avoiding others.

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A Case of Missed Opportunities

I am reminded of a young man, G., whom I met when he was about 17, prior to the Vietnam war. Both of his parents were deaf, and he had emerged in early childhood as their caretaker, a role in which he performed splendidly. His life revolved around them almost exclusively, and as he entered each of the developmental stages, he missed the growth opportunities that existed for others. He was completely lost in the larger world, a ship without a rudder. Therapy, we both agreed, was not sufficient to replace what he had missed, and we finally hit upon the army as one place where he could find an organized authoritative regime that would provide him with the structure he lacked, and out of which he might develop a social self. In the beginning of his military career he was actively suicidal. His commanding officer stayed in close touch with me, and his sergeant took him under his wing. Within three months his life began to turn around. He found a template on which to build a self, models and facilitators to provide roles and direction. Within a year and a half he had a German girl friend and traveled with her through Europe and the United States on his leaves. We stayed in touch for several years during which he found himself and built a real life. All he lacked and all he needed was the experience and the right environment in which to use it. The adequacy was always there, in contrast to the lack of it in the narcissistic child from whom nothing had been expected.

Symbiosis

The symbiotic relationship is another separation aspect of bonding with apparent deficient Earth yang. Here there a pact between parent (usually, but not always, the mother) in which separation is not an object since

each is serving a vital function for the other. These relationships often occur with only children, though sometimes one child and one parent make the decision to make a life together forever that is special even in a large family. While in those special ways others are excluded, in other ways they may relate functionally, parents to other children and child to other siblings, as in the case history given below.

I observed a few of these arrangements during my years working with children, adolescents, and families. The symbiotic relationship is apart from the commonly acknowledged patterns observed in family therapy: that each member of the family, especially the children, is given a role. One is the caretaker, another the troublemaker, another the victim, and still another the helpless one. In this context, Mommy and Daddy each usually has at least one ally. These kinds of relationships are unstable and eventually succumb conflictually to the inherent need of a child to become an individuated adult with a new life and family.

In my parents' day, among immigrant families, one child would be mysteriously chosen as the one who would never marry and would stay to care for the parents in their old age. This arrangement has been the source of plays and books and is found in many cultures. In many families I observed, the overprotected child is often instinctively identified by the mother as defective, even at birth, and in need of special care and protection.

The symbiotic partnership is different. It seems mutually chosen by often substantially competent participants and is satisfying to all concerned. The bond is special, enduring, benefiting both, and transcending all other relationships.

Father and Daughter

A young woman, the second of three children, was born into an immigrant family in which the marriage between the 16-year-old mother and 26-year-old father was arranged against the mother's will while still in Europe. The father came first to this country, followed three years later by the mother, who for her entire life despised her husband. After she arrived in this country, she apparently conceived her first child and then traveled back across the Atlantic Ocean to Eastern Europe to give birth. She then returned to the U.S. with her entire family of origin, including parents and ten siblings. She then had two more children. The paternity of the first was in doubt.

The father was dedicated to his wife and children but essen-

tially had no true wife or partner, since the mother, upon arriving in this country the second time, asserted her independence and lived a separate life except for basic duties. The second child, a daughter, took her role when she was very young as 'wife' and companion to her very hard-working father. She became his secretary and bookkeeper even at an early age, and though she married, she lived with or close to her father until he died, caring for him through 70 strokes in the course of six years, even while working. Her admiration of and devotion to him was quietly observed and acknowledged by the family, but never mentioned. The father even took her husband, who failed at his own profession, into his own and trained him.

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Excessive Earth Yang Energies: Problems in Separation

HARDEN OR PERISH

People who are evicted from the nest before their time either perish quickly or become hardened. The outcome depends so much, of course, on what took place before the eviction. Those whose first two-and-a-half years were relatively good, whose Water, Earth, and Wood phases of energetic development were complete, and who were rejected between the ages of two-and-a-half and five years, are strong enough to harden their hearts against the loss of love and survive. While the early Fire energies cannot have their first flowering in the 'Oedipal' drama, while rapture and joy will not sing in their hearts, they do become the bioenergetically armored people whose primary restoration against further rejection and hurt is the acquisition of enormous power. This quest for power may take legitimate or illegitimate forms. One is a socially acceptable exploiter of his fellow man, the business tycoon; and the other is called criminal and is considered socially unacceptable. The unfolding, in one direction or the other, is not always, but often a function of environment and opportunity. Those who come from the middle or upper class are more likely to operate within the law (not always); and those from the poorer classes who are evicted too early are more likely to operate outside the law (again, not always).

Anxiety is evoked by closeness, tenderness, and warmth, and depression is a rare response to a setback in thrust for might. Thought processes are obsessional, with power being a common preoccupation. Love is fundamentally an exploitative means to the same end and sex is without tenderness. Affect is hard, and behavior in all relationships is marked by ruthlessness. Other people can make an impression on them primarily by strength,

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which they enjoy as a challenge, though for those who are helpless and are no threat, they may show the compassion which intact Earth energies allow them to keep in reserve. They may, once their power is established, become the philanthropic godfathers in whatever sector of society they dominate. They do not, as with the power-driven people with Water energy disharmony, necessarily need to lead and bend the will of masses of people. Whether businessman or criminal, these are professionals. Often they are brilliant. Few can withstand the intense heat of their burning drive for personal power. They are tough.

I speak of these matters from personal experience, having been raised from age six to 16 in an area of New York City dominated by lower middle class Irish and Italian first and second generation families. Both groups had many children. It was the Irish mothers who seemed to relate only to infants and very small children. After the age of approximately two-and-a-half, their children were in the streets, and their primary allegiance was to the gang that raised them. In this culture, as I understood it, with a difficult birth where there was a choice between saving the life of either the mother or child. The decision, according to the priests, was that the mothers tended to die, so some children never knew their real mothers and were raised by older siblings until the gang could take them.

The Italians, on the other hand, remained within the family of origin and fought other families for dominance in the streets. By the time I left home at the age of 16-and-a-half, one half of the Irish, and a few of the Italian, children I knew were in some kind of juvenile detention, having become the prime front line troops of the Greenpoint Gang, a subsidiary of Murder, Inc. These were the socially unacceptable, some of whom later became powerful in crime circles.

The socially acceptable ‘criminals’ I came to know only later in my life, after the age of 40, when I became acquainted with the modern day robber barons. As Mack-the-Knife reflected at the end of the German movie version of the *Threepenny Opera*, “It is certainly more profitable to start a bank than rob one.”⁹ Let me give you a concrete example of this thesis, not from my professional files, for these people do not seek therapy, but from personal experience.

A Modern Robin Hood

P. was raised in two of the most significant ghettos of his home city, in extreme poverty. His mother had a proclivity for petty crime, and though he was well cared for during his first three years, he was pushed out into the streets to fend for himself at this time. Several

years later he was joined by his younger brother who survived childhood with only one eye. P. went to work as a shoe-shine boy when he was about nine years old. He also ran numbers for the older racketeers. Though he never attended school, he had a photographic memory and a natural talent in mathematics. By the time he was in his early 20s he controlled all of the shoe-shine parlors of the largest ghetto and, along with them, all of the numbers racket. His brother was the finger man, the one with the gun. By the time he was in his mid-30s, P. was the head of all the rackets in the state in which he lived. Most of his day was spent in bed taking phone calls from all parts of the state, recording in his mind thousands of bets and all of the odds.

P. entered legitimate business and made a fortune when he sold this business to the government at the beginning of World War II. It was at this point that a famous prosecutor, later governor of the state, made his reputation by pursuing and eventually forcing P. out of the state. By this time he had many other businesses and rackets in other states, and lived in opulence.

P. was always generous to people less fortunate than himself who did not stand in his way. He supported his in-laws and always gave when asked. He was a modern, rough-and-ready Robin Hood, with a good sense of humor, not personally violent, yet not capable of showing overt affection. The end of his odyssey came at the hands of the two people against whom he never took proper precautions, his own mother and brother, who robbed him of all his empire. There may be honor among thieves, but not in the same family.

No Sense of Self

For those whose first few years are not adequate, premature separation will of course result in disaster. Depending on the endless variables, it will produce results all along the line, from death through the extreme psychotic states to which we have referred above, to at best the 'oral' personality that we have already described under insufficient bonding. Most of those whom I have known who were separated at a very early age from their families were raised in institutions. When I worked on the adolescent girls' ward of Bellevue Hospital in New York, I admitted and worked with many girls from the Catholic orphanages, which abound up and down the Hudson Valley and in Staten Island. We saw the ones who 'acted out,' who broke windows and otherwise refused to become the automatons for which they were being programmed. The problem was so great that a social worker nun was assigned as a liaison with the hospital and all these institutions. She realized

what was happening and was endlessly frustrated by her own people, whose repertoire of contact with these girls was a rigid, detached, punishing coldness. A study made during the mid-1950s to which I can no longer directly refer showed that a large majority of the women coming from these homes became prostitutes. They expressed almost no sense of self and were grateful to have some place and purpose in life, whatever the cost. Existence was the only issue.

A Case of Detachment

N. was adopted at the age of 19 months, at which time he was in poor physical condition, suffering somewhat from malnutrition and lagging in all areas of development, including speech and contact with people. He also had a heart murmur. He did not, after being adopted, become close to his mother, but seemed more at ease with his father. He was unable to accept tenderness or affection of a physical nature and apparently was unable to tolerate any strong emotion, which his mother tended to show more than his father. N. was seven years old when his father, the one person to whom he could allow some closeness, died. At that time it was noted that he showed little or no emotion at the news of his father's death. Within a few years his mother married a widower who had been a friend of the family, and who had known N. since his adoption. N. again felt closer to him than to his mother, although he feared him a great deal.

N. had difficulty in school with both reading and speech and had remedial training in both. He had always been very popular but not particularly close to anyone, and his parents felt that N. did not get involved and committed because he was afraid to fail. He set very high standards for himself and was unable to tolerate the smallest deviation from them. He solved the problem of commitment by running away from it. Connected to this issue was his need to feel 'independent,' which meant that he could not ever acknowledge to himself that he depended on his fellow man for anything.

N.'s school experience, especially in high school, was filled with delinquent behavior and a negative attitude toward learning. After leaving school he changed jobs frequently. He was, however, reported to be a good worker, his restlessness notwithstanding. N. joined the army, spent three years in the service, part of which time he served in Vietnam where he saw a great deal of action and was wounded. His negative attitude toward learning prevailed in the army where he lost several chances to get training in the specialty schools.

N. expressed his fear of intimate relationships in terms of being tied down, being hurt, and not being good enough to be loved. With regard to the latter he felt like a colossal failure. His original failure was as an infant in an institution where he was unable to get the warm empathetic response of a caring person that an infant usually finds in a mother. As with all infants who fail to get this response and must protect themselves in order to survive, he ceased crying for the things he needed. By the time a meaningful, consistent, sufficient human reaction was available, at the age of 19 months, it was too late. The barriers had already been erected. N.'s inability to respond at that time led to his being labeled as a 'cold' child, which turned off the people around him, perpetuating the emptiness that had existed from the beginning.

His father's death at the age of seven was another failure, for at that age he could only have interpreted it to mean "If I had been better, he wouldn't have gone away." He responded by becoming more detached and unresponsive, and in order to altogether avoid the pain associated with love and attachment, he chose a line of behavior that aroused disapproval, this being more tolerable to him than affection. The first real break in this barrier occurred during the war, when N. saw men whom he knew die, and when he read their letters to their dear ones, in preparing to send their belongings home.

The second break was the stimulus for his referral by a local priest. At that time N. had returned from the service to enter college. He described himself as a "loner," a "smooth operator," and a "manipulator," especially with women. For a short time prior to the first interview he had lost all ambition, was depressed, extremely nervous, and shaky to the point of trembling. N. recognized that these feelings centered around a struggle within himself concerning a young woman whom he had met in college and with whom he had fallen in love. N. did not welcome that feeling, with which he was unfamiliar, and from the beginning tried to resolve the conflict by cutting off his feelings and erecting an emotional wall. In the course of time, his constantly fluctuating position began to drive him and the girl to distraction. Despite the internal struggle, these feelings of love inspired him to do well in school for the first time. The conflict became overwhelming; he withdrew from school and sought help from the priest, when he found that his anxiety was not assuaged by the distance from this girl whom he still loved.

N. had placed the battle outside himself and tried to resolve it by getting the girl to reject him. He found that the conflict was his own and that he would have to settle it himself. The barrier had been

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breached, and in the course of therapy, N. decided, for better or worse, to join the human race and to commit himself to the things he cared about, despite the possibilities of rejection, failure, and pain.