

## **ON THE TEACHING OF PSYCHO-ANALYSIS IN UNIVERSITIES - (1919)**

The question of the advisability of teaching psycho-analysis in Universities may be considered from two points of view: that of psycho-analysis and that of the University.

(1) The inclusion of psycho-analysis in the University curriculum would no doubt be regarded with satisfaction by every psycho-analyst. At the same time it is clear that the psycho-analyst can dispense entirely with the University without any loss to himself. For what he needs in the matter of theory can be obtained from the literature of the subject and, going more deeply, at the scientific meetings of the psycho-analytic societies as well as by personal contact with their more experienced members. As regards practical experience, apart from what he gains from his own personal analysis, he can acquire it by carrying out treatments, provided that he can get supervision and guidance from recognized psycho-analysts.

The fact that an organization of this kind exists is actually due to the exclusion of psycho-analysis from Universities. And it is therefore evident that these arrangements will continue to perform an effective function so long as this exclusion persists.

(2) So far as the Universities are concerned, the question depends on their deciding whether they are willing to attribute any value at all to psycho-analysis in the training of physicians and scientists. If so, the further problem remains of how it is to be incorporated into the regular educational framework.

The importance of psycho-analysis for the whole of medical and academic training is based on the following facts:

(a) This training has been quite rightly criticized during the last few decades for the one-sided way in which it directs the student into the fields of anatomy, physics and chemistry, while failing, on the other hand, to make plain to him the significance of mental factors in the different vital functions as well as in illnesses and their treatment. This short-coming in medical education makes itself felt later as a flagrant blind spot in the physician. This will not only show itself in his lack of interest in the most absorbing problems of human life, whether healthy or diseased, but will also render him unskilful in his treatment of patients, so that even quacks and 'healers' will have a greater effect on them than he does.<sup>9</sup>

This obvious deficiency led some time ago to the inclusion in the University curriculum of courses of lectures on medical psychology. But so long as these lectures were based on academic psychology or on experimental psychology (which deals only with questions of detail), they were unable to meet the requirements of the student's training; nor could they bring him any nearer to the problems of life in general or to those of his profession. For these reasons the place occupied by this kind of medical psychology in the curriculum proved insecure.

A course of lectures on psycho-analysis, on the other hand, would certainly answer these requirements. Before coming to psycho-analysis proper, an introductory course would be needed, which would deal in detail with the relations between mental and physical life - the basis of all kinds of psychotherapy -, would describe the various kinds of suggestive procedures, and would finally show how psycho-analysis constitutes the outcome and culmination of all the earlier methods of mental treatment. Psycho-analysis, in fact, more than any other system, is fitted for teaching psychology to the medical student.

(b) Another of the functions of psycho-analysis should be to afford a preparation for the study of psychiatry. This, in its present shape, is exclusively descriptive in character; it merely teaches the student to recognize a series of pathological entities, enabling him to distinguish which are incurable and which are dangerous to the community. Its sole connection with the other branches of medical science lies in organic aetiology - that is, in its anatomical findings; but it offers not the slightest understanding of the facts observed. Such an understanding can be furnished only by a depth-psychology.

In America, according to the best of my information, it has already been recognized that psycho-analysts (the first attempt at a depth-psychology) has made successful inroads into this unexplored region of psychiatry. Many medical schools in that country, accordingly, have already organized courses of psycho-analysis as an introduction to psychiatry.

The teaching of psycho-analysis would have to proceed in two stages: an elementary course, designed for all medical students, and a course of specialized lectures for psychiatrists.

(c) In the investigation of mental processes and intellectual functions, psycho-analysis pursues a specific method of its own. The application of this method is by no means confined to the field of psychological disorders, but extends also to the solution of problems in art, philosophy and religion. In this direction it has already yielded several new points of view and thrown valuable light on such subjects as the history of literature, on mythology, on the history of civilizations and on the philosophy of religion. Thus the general psycho-analytic course should be thrown open to the students of these branches of learning as well. The fertilizing effects of psycho-analytic thought on these other disciplines would certainly contribute greatly towards forging a closer link, in the sense of a *universitas literarum*, between medical science and the branches of learning which lie within the sphere of philosophy and the arts.

To sum up, it may be asserted that a University stands only to gain by the inclusion in its curriculum of the teaching of psycho-analysis. That teaching, it is true, can only be given in a dogmatic and critical manner, by means of theoretical lectures; for these lectures will allow only a very restricted opportunity for carrying out experiments or for practical demonstrations. For the purposes of research, it should be sufficient for teachers of psycho-analysis to have access to an out-patient department for the supply of the necessary material in the form of 'neurotic'

patients. For psycho-analytic psychiatry, a mental in-patient department would also have to be available.

Consideration, lastly, must be given to the objection that, along these lines, the medical student will never learn psycho-analysis proper. This is indeed true, if we have in mind the actual practice of psycho-analysis. But for the purposes we have in view it will be enough if he learns something about psycho-analysis and something from it. After all, University training does not equip the medical student to be a skilled surgeon; and no one who chooses surgery as a profession can avoid further training in the form of several years of work in a surgical department of a hospital.