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ISSUE NO. 5.
PSYCHOTHERAPY AND ITS
RELATION TO RELIGION**

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Psychotherapy and Its Relation to Religion

1. *Definitions.*

I THINK one should apologize for using such a jaw-breaking word as psychotherapeutics. Why does anyone use such a word? Etymologically it is nothing but the Greek for "mind-cure." Why, then, so ponderous a term?

First, because psychotherapy is a neutral word and involves no entangling alliances. It does not suggest any alliance with "faith-cure" or the Christian Science movement or any special set of mental healers. It means to include all legitimate means of helping the sick through mental, moral and spiritual methods.

An additional reason for using this very long word—psychotherapy—is that it allies those of us who use it with that large and increasing body of French and German scientific literature which has existed for ten years unread in this country, and which we have just begun to wake up to and profit from. In France and Germany, psychotherapy is wholly in the hands of the physicians. There is no lay movement; there is no consid-

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erable lay interest; it is entirely a scientific movement, entirely a medical movement, and it is there called psychotherapeutics. One allies himself then with that great body of solid scientific work when he uses this word.

2. *Limits.*

It is very difficult to make an accurate statement as to the limits of psychotherapeutics. No scientific man ever uses the word "possible" or "impossible;" no scientific man knows in the least what is possible or impossible. All he can say is what has happened so far and what has been accomplished up to this point so far as he can ascertain.

A great deal of the difference of opinion between different bodies of persons as to what has or has not been accomplished for disease by mental, moral and spiritual methods—a great deal of this difference of opinion has its root in the fact that different bodies of people are thinking of different groups of cases. Very remarkable processes of natural selection go on in this matter. To the Christian Scientist go, of their own accord, a certain group of cases. To the hospitals and hospital physicians go, of their own accord, another group of cases. To those who

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are in charge of such a movement as the Emmanuel Movement, go a third group of cases. To the Osteopaths go another group. A leader in any one of these movements is apt to say what has been done by his method for "disease" and what cannot be done by any other method for "disease." But if he were accurate he would speak of "that portion of disease which has come within my observation;" and that portion is very far from being the whole.

To the Christian Scientists go largely what we physicians call cases of "functional" disease. To the hospitals and hospital physicians go largely what we call cases of "organic" disease. When a person, speaking from his own experience, tells what he knows and then applies it (wrongly I think) to the whole field of disease, it results in a mass of inexact and mutually contradictory statements.

The osteopath will tell you that he cures or helps every disease that comes to him. And what he tells you may be true; but that he can cure *any disease* is an entirely different matter. He undoubtedly helps a large proportion of the people who come to him; but, owing to natural selection, he is dealing with a special group.

The physician who is dealing with hospital

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cases may tell you that "disease" is not to be helped much by mental methods, because *disease as he sees it in the hospitals* is not to be helped much by mental methods.

The Christian Scientist or "New-thoughter" will tell you that "disease" is to be helped and helped very much by mental methods, meaning again that portion of disease which he sees in his field of work.

Now, I think it is most important to bear in mind that the people who make these apparently contradictory statements are often right as far as their observation goes; their statements need not necessarily contradict. No one is telling lies; no one need be accused of error except the failure to look over the whole field, and the resulting supposition that the cases which he sees constitute the whole field.

Now, without trying to limit the field precisely, I should say that the diseases which are essentially mental or moral or spiritual in their origin should be treated (in part at least) by mental, moral and spiritual agencies. Cases of this type constitute in my experience about two-fifths of all the cases that come to an ordinary physician who does not confine himself to any one specialty or single out any one group. But, furthermore,

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even in the most obvious organic diseases, mental treatment has a certain place. I treated recently a case of tuberculosis in a woman not seriously diseased, a case of the incipient type of that trouble, but with a persistent insomnia due to persistent worry and a spiritual struggle. She does not sleep, and since she does not sleep she is not properly nourished and cannot resist the disease. That woman's body is trying to get well. The physicians are doing all they can from the physical side, but if their treatment could be combined with mental treatment, she could be helped much more than she is now. In some cases, then, of obvious organic disease, mental treatment may be of great value in the way in which I have just suggested.

Now, when one says that so far as one knows organic disease as such (that is, the morbid anatomical change in organs) is not affected by mental means, one says nothing about what is possible or impossible. One means simply that, so far as can be ascertained, diseases such as cancer, Bright's disease and meningitis are not cured by mental means.

3. Historical Types of Psychotherapy.

As I have said, the word psychotherapeutic is a neutral word; it allows us to mean, when we use

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it, any legitimate type of mental, moral or spiritual treatment; and I think I cannot properly discuss the subject without saying something of the historic forms in which this movement of which we now hear so much has grown up.

a. Unconscious Practice.

If you speak to any doctor about psychotherapy, the first thing he will tell you will be, "I have been doing that all my life. That is just what any physician who has a successful practice is always doing. He could not succeed if he did not." There is truth in that statement, although not quite so much truth as some physicians hold. It is true in the same sense that Molière's *M. Jourdain* had been all his life talking prose. He had always been talking prose, but still he could learn to talk better prose if he took a little trouble to train himself. So the physicians who have been using psychotherapeutics effectively all their lives can use it more effectively if they will take some account of the modern scientific psychotherapeutics that has grown up in the last ten or fifteen years, especially in France and Germany.

Aside, then, from the unconscious practice of mental healing which is inherent in the voice, the eye, the hand,—all that goes to make up the per-