



The Neurotic Blind And The Neurotic Sighted, Twin Psychological Fallacies

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and it may be well to remind ourselves, on this anniversary, of the several dominant features of the Federation program with which we are today most actively and immediately concerned.

and education of the sighted parents, teachers, employers, and the community in terms of the several goals already mentioned. Seventh and last is the platform of adequate legislation, permanent safeguards based on rational and systematic evaluation of our needs and erasing once and for all the restrictive barriers of legal discrimination and institutionalized ignorance.

and in the field of rehabilitation, the objective is to improve the services of training and placement while retaining administration by those qualified to understand the distinct needs and problems of the sightless. On every level the accent varies; but when all parts work together in harmony under skilled direction, they express the underlying theme of Integration social, psychological, and economic. And the dominant note that emerges is one of hope; for if it is true that we are a long way still from equal partnership with the sighted in the continuing experiment of democracy, it is also true that by contrast with our status only eleven years ago we are a long way toward it.

that there is nothing inherent in their handicap, or invariable in their psychology, which renders them incapable of successful adjustment and adaptation to their society. And the corollary of this assumption is that there is nothing fixed or immutable about the obstacles encountered by the blind in their progress toward integration; that social attitudes and opinions are essentially on our side, and that where they appear otherwise they are based on ignorance and error and can be changed.

and they carry an immense responsibility. For upon them rests the entire structure of social programming and welfare services to which this organization is dedicated. But suppose, for a moment, that these assumptions are false. Suppose that the blind are not just ordinary people with a physical handicap, but psychological cripples; and suppose, further, that the complex of attitudes and beliefs about the blind entertained by the general public are at bottom completely hostile and immune to change. If these suppositions should somehow receive scientific sanction or even if they should become widely accepted among the public and among the blind it is easy to see that the consequences for programs of education, assistance, rehabilitation, and employment (to name only the most conspicuous) would be profoundly different from those we now pursue. The long campaign to integrate the blind into society on a basis of equality would have to be discarded as naive and utopian; the effort to enlighten public opinion



and to erase its gross discriminations would have to be abandoned as illusory and futile. The blind would become again, as they have been so often in the past, a caste apart, a pariah class; and our efforts on their behalf would be reduced to the administration of palliatives designed to make their social prison as comfortable as possible but not to help them escape.

that the weight of scientific and theoretical opinion is altogether on the other side. And so in fact it has appeared; as recently as last year's convention I should have agreed wholeheartedly with this belief. Today, however, I am compelled to announce that this confidence is no longer justified. For the suppositions I have outlined are precisely those avowed and put forward by two recent writings that lay serious claim to scientific status: one of which asserts that the conditions of blindness invariably impose a neurotic personality structure a psychological crippling; and the other of which declares that social attitudes toward the blind are fundamentally a sublimation (a deflection) of aggressive instinctual drives, carrying an inescapable undercurrent of hostility. The first of these may be called the thesis of the neurotic blind; the second, the thesis of the neurotic public.

but about the truth and value of their respective theories there can be and there is a very large question indeed.

rather he says what amounts to much the same thing, that the conditions imposed by blindness make such personality distortion inevitable. The blind person, we are told, comes to evaluate himself as society in its ignorance evaluates him; and as a result he soon feels inferior and alone. In his effort to regain both self-respect and social esteem, he reacts in either of two ways and two ways only the way of compulsive compensation, or the way of hysterical withdrawal. Both responses, according to Cutsforth, are fundamentally neurotic which means, among other things, that they hinder rather than assist the individual to adjust to his handicap and to society.

they are neurotic by definition. Most of us, however, would probably agree that the ostrich reaction of withdrawing from reality and retreating into infantile dependence is no solution to the problem of adjustment; but the author's attitude toward the familiar adjustive mechanism known as compensation is less easily accepted. We shall say more about compensation later on; for the moment it is enough to point out that even the psychoanalyst Alfred Adler, whose rigid theory of organ inferiority made neurosis a virtually inevitable accompaniment of physical handicap, nevertheless maintained that the defect could be overcome and complete adjustment achieved through compensatory activity.² Not so, however, Dr. Cutsforth. In following this pattern [of compensation], he asserts, the individual develops along the lines of the compulsive personality. Therapeutic or educational emphasis upon compulsive symptoms leads in the dangerous direction of creating lopsided personalities, monstrosities, or geniuses as the case may be compensations are as much evidence of personality pathology as the less approved and more baffling hysterical reactions.³

for it is obvious, says Cutsforth, that any therapeutic program for the adjustment of the blind personality that concerns itself only with the correction of either or both of these personality malformations is doomed to failure.⁴ Since these malformations are the only ones allowed, it is a bit difficult to know what else a therapeutic program might be concerned with. But it may be supposed that what the author has in mind is a broader program aimed at the modification of unsympathetic social attitudes, which are admitted to lie at the root of what he calls the neurosis involved in blindness. This is, however, very far from his purpose. Observing that until recently the blind and those interested in them have insisted that society revise and modify its attitude toward this specific group, he continues: Obviously, for many reasons, this is an impossibility, and effort spent on such a program is as futile as spitting into the wind.⁵

Only two of the many reasons, evidently the most clinching, are vouchsafed to us. The first is that society has formulated its emotional attitudes not toward blindness itself, but toward the reaction pattern of the blind toward themselves and their own condition.⁶ But since the reaction of the blind to their own condition has already been defined as a reflection of social attitudes, this amounts to saying that the social attitudes are formed in terms of something which itself is formed by social attitudes a neat bit of circular reasoning which avoids coming out anywhere. The second reason advanced against this spitting



into the wind that is, trying to change social attitudes should be of particular interest to members of the National Federation of the Blind: it is extremely doubtful, claims Dr. Cutsforth, whether the degree of emotional maturity and social adaptability of the blind would long support and sustain any social change of attitude, if it were possible to achieve it.⁷ And finally, he declares: It is dodging the issue to place the responsibility on the unbelieving and non-receptive popular attitudes. The only true answer lies in the unfortunate circumstance that the blind share with other neurotics the nonaggressive personality and the inability to participate fully in society.⁸

and, even more specifically, in its emphasis on the immutability of social attitudes, it disparages all attempts to modify or revise them as futile and even dangerous. Indeed, Dr. Cutsforth labels as hypocritical distortions all efforts to, as he puts it, propagandize society with the rational concept that the blind are normal individuals without vision.⁹ If the blind are not normal, there is obviously little point in attempting to educate or prepare them for a normal life. If they are compulsive and hysterics, far from seeking equal treatment and full participation in society they should be content with the exiled status of the misfit and the deranged. There is no need to spell out in specific terms the numerous ways in which this verdict would operate to undermine the progress of the blind toward equality and integration. The only one of our programs which might in some sense survive its test is that of public assistance but it would be an assistance shorn of opportunity and bereft of dignity, an empty charity without faith and without hope. The Cutsforth thesis of the neurotic blind, in short, would seem to rule out any and all solutions to the problems of rehabilitation and adjustment other than that of prolonged psychotherapeutic treatment on the individual level and even here, as we have seen, it is not at all clear what there is to be treated.

but because he is the senior author and because his name is most widely associated with the ideas in the book, we shall refer to the formulation as Chevigny's.) Observing that the emotion which is most commonly encountered in attitudes toward the blind is that of pity, Chevigny subjects the pity concept to a psychoanalytic examination along the lines of classical Freudian theory, coming to the conclusion that pity derives from an original cruelty impulse through either sublimation or reaction formation.¹¹ This original impulse is variously and ambiguously defined as fear, guilt, and sadism; but the implication is plain throughout that expressions of pity always represent a deflection of deep-seated feelings of hostility. Chevigny next attempts to distinguish between pity and kindness, maintaining that kindness has a different origin in the psyche and represents beneficent rather than hostile feelings. Curiously, however, kindness itself is later conceded to be a sublimation of the aggression toward one another present in all children, [and] it may also be the end product of a less sound defense system against the same drives.¹² In short, kindness, like pity, is essentially a sublimation of aggressive drives; from which it would appear that the distinction between the two emotions, if any, is one of degree rather than kind. Far from distinguishing pity from kindness, Chevigny has succeeded only in making the point that all attitudes toward the blind, however apparently well-meaning, are founded on a subterranean rock of antipathy and aggression.

even the sense of justice, as Erich Fromm has pointed out, was traced by Freud to the envy of the child for any one who possesses more than he.¹⁴ Freud's psychological determinism does not consist however, as popular writers often suppose, in the reduction of all behavior to the sex drive, but rather in the conception of a dialectical struggle between the forces representative of life and death a struggle underlying all human history, individual and cultural. The tendency to aggression, he insisted, is an innate, independent, instinctual disposition in man and constitutes the most powerful obstacle to culture.¹⁵ But if the existence of culture depends on the suppression of natural instincts if, as Freud put it, the core of our being consists of wishes that are unattainable, yet cannot be checked¹⁶ then cultural equilibrium is at best precarious, if not foredoomed to destruction. Indeed Freud came to wonder whether civilization might not be leading to the extinction of mankind, since it encroaches on the sexual function in more than one way.¹⁷ As he saw it, observes a prominent modern psychoanalyst, man is doomed to dissatisfaction whichever way he turns. He cannot live out satisfactorily his primitive instinctual drives without wrecking himself and civilization. He cannot be happy alone or with others. He has but the alternative of suffering himself or making others suffer.¹⁸ Short of destruction of the species, then, the conflict of man and society must remain forever unresolved. Whenever the inhibiting social forces are for



a moment relaxed, we see men as savage beasts to whom the thought of sparing their own kind is alien.¹⁹ But on the other hand, whenever the inhibitions become too severe, or the frustrated instincts pile up against the blocks as periodically they must then, says Freud, the organized explosion known as war becomes inevitable. A period of general unleashing of man's animal nature must appear, wear itself out, and peace is once more restored.²⁰

and second, that the submerged hostile feelings toward the blind must periodically erupt over the barriers in outbreaks of persecution and aggression. It would seem evident that this thesis the thesis of the neurotic public affords little hope of any rational and sustained progress in the social welfare of the blind; at least until such time as the general population may be induced to undergo extended psychoanalytic therapy. In the face of universal hostility, however well-disguised, there can be no serious thought of achieving recognition and integration; and the solution to the problems of the blind must perforce be sought in the reinforcement, rather than the removal, of the medieval barriers of isolation and segregation.

It may however be flatly stated that the Cheigny thesis of the neurotic public is not widely entertained by serious students. The validity of its Freudian assumptions has been sharply and effectively challenged by major developments over the past ten years within psychology and the social sciences most notably, perhaps, in the sphere of the cultural anthropologists. An impressive number of psychiatrists and psychoanalysts as well, concluding that man's biological nature need not condemn him to conflict with society, declare that in fact anxiety and conflict are largely the product of institutions which, being manmade, are subject to alteration. In the words of Harry Stack Sullivan, the present social order operates destructively on human beings, not only as it sets limits within which the patient's interpersonal relations may succeed, but as the source from which spring his problems, which are themselves signs of difficulties in the social order.²¹ The relevant conclusion for our purpose is that the personality problems of the blind may not be placed at the door of their defect or even of their personal frustration, but rather have their focus in the arena of social relations and institutions. Again, in rejecting the theory of innate aggressive propensities, these post-Freudian social scientists interpret attitudes of genuine affection, sympathy, and compassion as the healthy expressions of natural human attributes. It may be suggested that, according to this modern formulation, the concept of adjustment as extended to the blind would signify not their conformity to immutable outer circumstance but rather the adjustment and arrangement of social conditions and attitudes in closer harmony with the established physical needs of the blind.

and, in direct refutation of Dr. Cutsforth, she concluded that the most satisfactory was that of compensation. The cases, she writes, support the belief of many psychologists that compensation is the most healthful form of adjustment, frequently resulting in superior forms of accomplishment.²⁴ This conclusion coincides with the conviction of those psychologists influenced by the teachings of Adler, who himself maintained that by courage and training, disabilities may be so compensated that they even become great abilities. When correctly encountered a disability becomes a stimulus that impels toward a higher achievement.²⁵ A recent survey of research in the field of disability has reported that the Adlerians find that both compensatory behavior and inferior attitudes do occur in physically disabled persons, but that they are by no means of universal occurrence. Some investigators, the report continues, question whether these symptoms are any more frequent than in the general population.²⁶ From all of this it may be concluded, in reference to the Cutsforth thesis, not only that there appear many other responses to blindness than those of compensation and withdrawal, but that compensation itself an ambiguous and little-understood phenomenon has generally the appearance of a positive and adjustive, rather than a neurotic, form of behavior.

As to the claim that the conditions imposed by blindness necessarily lead to personality disturbance, the available evidence points strongly in the opposite direction. One European psychologist who has devoted particular attention to the problem of physical impairment declares that even the most serious physical disability does not necessarily result in a distorted personality. Although there are often factors in the environment of the crippled person which tend to produce distortion, other factors operate at the same time to lessen the probability of its occurrence.²⁷ Again, a wartime study based on the neuropsychiatric examination of 150 blinded soldiers found that emotional disturbances do not always or



necessarily occur and that the soldier of sound personality structure, free from pre-existing neurotic or psychopathic traits, is fully capable of making an adequate emotional adjustment to his disability providing adequate orientation and rehabilitation facilities are available. The authors further conclude that blindness, as a mental stress, does not appear to be capable, by itself, of producing abnormal mental or emotional reactions.²⁸

and, unlike Dr. Cutsforth, the data uniformly indicate the practicability, as well as the need, of changing the attitudes of parents, teachers, employers, and the community generally. Some students, such as Roger Barker, emphasize the similarity between the minority status of the blind and that of racial and religious subgroups, and suggest that the solutions found to problems of prejudice in general through such means as education, psychology, propaganda, learning, and politics may be equally applicable to the physically handicapped.³⁰ An opinion area of primary importance, of course, is the home environment. Sommers, among others, asserts that parental attitudes and actions constitute the most significant factors in setting the fundamental habit patterns of the blind child; but, since parents themselves reflect the attitudes of the community, she concludes that our main concern in dealing with the problems of personality development in such an individual must be an effort to shape the reactions of his environment. The training of the handicapped and the education of those with whom he is most closely associated and of society at large must take place simultaneously.³¹ Her concluding words are especially worthy of quotation: The ultimate results will depend on the extent to which the home, the school, the community, and society at large coordinate and direct their efforts toward giving [the blind child] sympathetic understanding but not undue pity, encouraging independence and initiative, and helping him to achieve success and happiness as a contributing member of the family group and as an adult member of society.³²

and along with it the erasure of false stereotypes and the establishment of our normality. The various specific programs of education and legislation, of rehabilitation and social security, are similarly supported by these findings as indispensable means toward achievement of the ends we have set for ourselves the ends of full equality, of unlimited opportunity and of total integration.

for it asserts that there is nothing in the psychology of the blind which miscasts them for the role of equal partners with the sighted and that there is nothing in the psychology of the sighted which prevents their recognition of this demand. It would of course be premature as in scientific matters it is always premature to claim either that present knowledge is complete or that the achievement of integration will follow automatically from its publication. But it is not too much or too soon to declare, with all the conviction at our command, that the blind are capable of fulfilling the equalitarian destiny they have assigned themselves and that society is capable of welcoming them.

FOOTNOTES

1. Paul A. Zahl, ed., *Blindness: Modern Approaches to the Unseen Environment* (Princeton University Press, 1950).
2. See Rudolf A. Dreikurs, *The Social- Psychological Dynamics of Physical Disability*. *Journal of Social Issues*, Vol. 4, No. 4 (1948), p. 42.
3. Op. cit. supra note 1, pp. 176-177.
4. Id. at p. 176.
5. Id. at p. 179.
6. Ibid.
7. Ibid.



8. Id. at p. 183.
9. Id. at p. 179.
10. Hector Chevigny and Sydell Braverman, *The Adjustment of the Blind* (New Haven: Yale University Press, 1950).
11. Id. at p. 148.
12. Id. at p. 149.
13. Quoted in Joseph Jastrow, *Freud: His Dream and Sex Theories* (Cleveland: World Publishing Co., 1932), p. 290.
14. Erich Fromm, *Escape from Freedom* (New York Norton Co., 1941), p. 294.
15. Sigmund Freud, *Civilization and Its Discontents* (London: Hogarth Press, 1946), p. 102.
16. Quoted in Jastrow, op. cit. supra note 13, p. 290.
17. Quoted in Franz Alexander, *Fundamentals of Psychoanalysis* (New York: Norton Co., 1948) p. 323.
18. Karen Horney, *Neurosis and Human Growth* (New York: Norton Co., 1950), p. 377.
19. Freud, op. cit. supra note 15, p. 86.
20. Clara Thompson, *Psychoanalysis: Its Evolution and Development* (New York: Hermitage, 1950), p. 140.
21. H. S. Sullivan, *Conceptions of Modern Psychiatry* (Washington, D.C.: William Alanson White Psychiatric Foundation, 1947), p. 87.
22. Hans von Hentig, *Physical Disability, Mental Conflict and Social Crisis*, *Journal of Social Issues*, Vol. 4, No. 4 (1948), p. 27.
23. Vita Stein Sommers, *The Influence of Parental Attitudes And Social Environment on the Personality Development of The Adolescent Blind* (New York: American Foundation for the Blind, 1944), p. 65.
24. Ibid.
25. Alfred Adler, *Problems of Neurosis* (New York: Cosmopolitan Book Company, 1930), p. 44.
26. R. G. Barker, Beatrice A. Wright, and Mollie Gonick, *Adjustment to Physical Handicap and Illness* (New York: Social Science Research Council, Bulletin 55, 1946), p. 84.
27. Id. at p. 85.
28. B. L. Diamond and A. Ross, *Emotional Adjustment of Newly Blinded Soldiers*, *American Journal of Psychiatry*, (1945), vol. 102, pp. 367-371.
29. Lee Myerson, *Physical Disability as a Social Psychological Problem*, *Journal of Social Issues*, Vol. 4, No. 4, (1948), p. 6.
30. Roger G. Barker, *The Social Psychology of Physical Disability*, Id. at p. 31.



31. Sommers, op. cit. supra note 23 p. 104. See also Stella E. Plants, Blind People are Individuals, The Family, Vol. 24, No. 1 (March, 1943), pp. 8, 16.

32. Sommers, Id. at p. 106.

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