

## The Healing of Persons\*

PAUL TOURNIER

*Geneva, Switzerland*

A woman patient came to see me, bringing a letter from her own doctor, a tuberculosis specialist. He is well-known, and I have great esteem for him. He gave me a few details concerning the patient. He had known her for many years. She first suffered from pulmonary tuberculosis ten years ago, and then spent a fairly long time in a mountain sanatorium of which he was the director. She improved there sufficiently to be able to come down to the valley again; however, he continued to keep her under constant supervision. There were moments when her condition improved and she was able to live quite normally for several months. Then things got worse again. She would have a little treatment and, if that did not prove to be enough, he would send her up for three months to the mountains again.

In his letter he wrote, "It is the patient herself who asks to see you, and it is because of this that I recommend her to you, but I am not of the impression that psychological factors play any part in her case. She is a most charming woman. She is well-balanced. She has a husband who is also charming, and I don't think there is any problem so far as the couple is concerned. But it will do her good, no doubt, to see you all the same."

Then she began to tell me something of her life. She was a convinced Roman Catholic. She married a Catholic, and had two daughters by him. Very rapidly, however, this husband took to drinking. She told me at considerable length of her suffering as the wife of a man who had taken to drink and of all the efforts she made to save him. But

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little by little, he continued to slip downwards, and in the end he committed suicide. His suicide caused her great religious concern.

After a few years spent as a widow, she married again, this time to a man who was a Protestant, and who, in addition to this, had been divorced. He is the husband who was so delightful. But you can understand how this situation nonetheless confronted this woman with many problems. This second marriage cut her off from her Church. She could no longer receive Holy Communion, and she was considered by her Church to be living in adultery.

The problem had reached an acute stage when she came to see me, because her daughter was just reaching the age when she was about to receive her first Communion. The child asked her mother, "But why can you not receive the Communion with me?" From the start the mother had found this separation from the Church deeply painful. Not only did she feel that she was separated from the Church, but she also felt that she was cut off from God. Several times she repeated to me, "It's several years now that I've not been able to pray."

She also had grudges and resentments against her charming husband. He was a big industrialist, and big industrialists, just like doctors, are extremely busy men whose wives often have the feeling that they are neglected. In the evening, he frequently telephoned his wife saying there was some industrialist in town for a short time, and he had to take him out to dinner. She described the terrible evenings she

spent just waiting for her husband. The husband must have had a slightly uneasy conscience over this, and as a result, he built her a fine villa. The villa was in fact an expiatory villa. It was as if once she had a beautiful villa, she would have no more justification in complaining about him. She said to me, "This villa, I *hate* it."

There were after all some problems in her life! My colleague the specialist was perfectly right when he said she was not a psychologically ill person, unless we consider everybody psychologically ill. No, in the specific sense of the word, she was not psychologically ill, and I did not practice psychology in any specific sense in her case. I don't believe that we even analyzed any dreams. She was not suffering on the psychological level; she was suffering on the moral level. Sometimes a person who is not suffering from any nervous illness has to go to see a psychiatrist. This woman had no one to whom she could speak of her religious and moral problems. She could not discuss them with a Roman Catholic priest, because she was separated from her Church. Nor could she speak of them to a Protestant pastor, because she was not a member of his Church. Nor could she speak of them to the charming husband, for he did not make such dialogue possible, and in addition, he was only Protestant in name. He had deprived her of her own Church without giving her an alternative Church link in exchange.

Quite suddenly one day, she turned up in the consulting room with a radiant expression. I was so astonished by this that I said to her,

"But what has happened to you?" She replied, "Just think, yesterday evening my husband telephoned saying he was not coming home, and I was just getting ready to be very irritated with him for the entire evening. Then the idea suddenly came into my mind that I might try to recollect myself and be silent in prayer before God, as you say you do. In the silence before God, it seemed to me that God was saying to me, 'The empty time that you have this evening you could spend in prayer.'" She added, "I began to pray for my husband." Prayer took the place of irritation. A change of attitude!

This change of attitude was a major event for her, for she had had the feeling for a number of years that she could no longer pray, perhaps precisely because her heart had been filled with irritation. This event had had very considerable consequences. One could already see this in her face, and the beneficial results in regard to her illness followed extremely rapidly. A few weeks later, my colleague-specialist sent me a delightful letter to say that, clinically speaking, there had been a complete cure. He added with generosity, "And to think that I did not think there was any psychological factor in this case!" I then asked this woman why she had never spoken to her doctor about these factors in her life. She had great confidence and trust in him. She had been in his hands for over ten years, and known him almost as a friend. She replied, "But we never have the time! You know how consultations are! I arrive. He looks at the temperature chart. He listens to my heart; he thumps my chest. We

have an x-ray. He writes a prescription and, if things are not going satisfactorily, I just get sent up to the mountains again! One never has a moment to slip in a word on anything else!"

It is not only a question of time, but also a problem in regard to atmosphere. It is very difficult to shift from the doctor-patient situation to the human situation of contact between man and man. Doctors are, to some extent, victims of their own routine. When a doctor supposes that there is some psychological illness, he sends the patient to a psychiatrist who produces an admirable report. But there are many patients who do not stand in need of a psychiatrist's help, but who need to be able to give some expression to their feelings so that they can discover a human atmosphere which will help them to resolve their personal problems. Then it becomes possible for the doctor to see the links between the patient's illness and the history of his or her life. Many illnesses do not occur by chance, but are prepared by years and years of emotional difficulty. There are even patients who desire to fall ill, hoping it will provide them with a kind of way out, or solution, to a problem to which they can see no other issue. This the doctor cannot understand as long as he practices medicine in a purely technical manner, as long as he questions the patient instead of allowing the patient to open himself spontaneously.

There is a London doctor of whom you have perhaps heard, a Hungarian Freudian psychoanalyst, Dr. Balint. He has tried to initiate this form of contact between the

general practitioner and the patient. He forms little groups of general practitioners who discuss the patients they have under their care. He, as a psychiatrist, endeavors to enable them to see the link between the patient's illness and his life history. In other words, he attempts to make it possible for the doctor to see the significance of the illness in the context of the patient's life. Balint himself explains that it is necessary that a change should come about in the doctor. The doctor is accustomed to adopting an objective attitude. He examines the patient as an object, and as long as he does examine a patient this way, there is no human relationship in the specific sense of the term. If this human interaction is to be achieved, a change is necessary within the doctor himself. Balint tells them how to begin. He says to begin by listening. Just as long as you ask questions, you will only get answers to those questions. You must give your patient the chance of opening himself up spontaneously. All patients have secrets in their lives and they all have great resistances, which make it difficult for them to bring them into the daylight. For a patient to feel able and free to do this, there needs to be a special atmosphere and climate that will give him a feeling of trust and confidence.

When I read Balint, I was enthusiastic. I said to myself, "But that's what I have been doing for thirty years—making it possible for patients to open themselves up." It seems such a simple thing that one hesitates to mention it. It is thirty years ago now that I began to be interested in the personal problems

of people, because I myself had gone through this change of attitude of which Balint speaks. I was no longer interested exclusively in the illness in itself, but also in the person. It was then that my patients began to open up to me.

However, it seemed to me that this was no longer medicine! I would say to them, "Listen, we cannot allow this kind of thing to continue! We cannot go on in this way in a consultation. Come back this evening. Then we will talk in front of the fire, no longer as doctor to patient, but as two men who meet as two friends." In this way, over a number of years, I led two lives; classical medicine by day, like all my colleagues, with prescriptions, scalpel, and so on, and in the evening, talks in front of the fire. I thought that these were not medicine; but then, lo and behold, the evening talks became more and more interesting, while my daily business appeared less and less interesting. I began to see that the evening talks were also an important factor in cure and healing. When a patient feels that he is understood, a waking-up of vitality occurs within him, which can play a great role in his cure. As I myself had had spiritual experiences, in a certain sense I went further than Balint. In front of the fire, I also spoke of myself as a person so that there might be an attitude and atmosphere of reciprocity. That is not the technical attitude of the analyst. He always remains an objective doctor, whereas I was entering into more human relationships, more fraternal relationships. I saw how it became possible for patients to solve the problems in their lives

through this atmosphere. And frequently, when patients do solve their emotional problems, this can contribute to their healing. We cannot create Grace. Jesus Himself says, "The wind bloweth where it listeth." There are many patients to whom one would wish to be able to offer Grace on a tray; but neither doctors, nor pastors, nor Roman Catholic clergy can do this. However, we can create a favorable climate, and this climate comes into being when we ourselves become men again.

A woman once told me of her childhood history. She, too, suffered from tuberculosis. She was a very small girl, a kind of Cinderella. She was tormented by an aunt who was jealous of the child's parents. The child was so much persecuted that she ended by falling ill. A school doctor happened to discover suddenly that she was very seriously ill with tuberculosis. He sent her at once to the mountains. In spite of the shock that this illness constituted, she was almost happy because she was escaping from her cruel aunt. The moment she arrived at the hospital, she was examined by the head doctor. He gave her an x-ray, and he whispered in a very soft voice to his assistant, "There is a little girl who is lost." As she had very good hearing, she heard what the head doctor said. Doctors must be very careful, because patients often have far better hearing than their doctors think they have.

So, she came to spend her first night in the sanatorium. Her bed was facing the window. She could not sleep, and quite suddenly the full moon appeared in the center of her window almost like the Japa-

nese flag (only on the Japanese flag, of course, it's the sun). This situation was emotionally moving to her, and also moving to everything laid up and turning over in the heart and mind of this child. There, quite suddenly, she had the feeling of a Presence, an absolute certainty of the presence of God, a certainty of the love of God, and, at the same time, a feeling that God was saying to her, "You *will* be cured." She fell asleep.

The following morning she was eating her breakfast. (Breakfast is less abundant in Switzerland than in America.) The head doctor happened to pass by and saw that she was eating with fine appetite. For the first time for months now, she was eating with pleasure. He commented to her, "It's good to see you eating so well! That will be helpful for your treatment." She answered him, "I am eating because I want to be cured. I heard you yesterday, when you told your assistant that I was lost, but God told me last night that I would be cured!" The doctor took this very well. "If you do want to be cured," he said, "you must be obedient." Patients obey what the doctors tell them to do far less than doctors believe. Patients very rarely confess this to their own doctors, but as they are more honest with me than with their own doctors, they tell me. They often go to consult many doctors without obeying a single one of them.

To obey, it is necessary that there should be a certain inner attitude. There are countless patients who see a whole series of doctors, but who do not wish to be cured. We are touching here on a problem of man as a person. It is not a psychological

problem in the strictly scientific sense of the term. It is a spiritual problem. The problem is the attitude that we adopt in life. An attitude that is constructive plays a great part in healing. This is the question with which Jesus confronts someone who is ill. "Do you wish to be healed?" Many patients confess to us with truth that they do not wish to be healed, or that they are afraid of cure because to be cured means they will have to confront life, and life is hard. An illness can sometimes represent a species of armistice in the war with life.

I once received a letter from Moscow, from a Western diplomat who was working in Moscow. He wrote, "Would you have a remedy for me? I cannot sleep. There is so much noise in Moscow. I have been to see a doctor. He gave me a pill; it was very effective for a month and then it had no more effect at all. Then I went to see a second doctor. He gave me another pill. Things went very well in the beginning, and then, again in a little while, the pill didn't have any effect anymore. I saw still other doctors. Have you not some other kind of remedy than pills?"

I answered him with a very brief letter. I wrote, "It is not the noise that is disturbing your sleep, it is the irritation you feel towards the noise." A year later, he wrote that he had been furious with my answer. It had seemed to him that I was mocking him. He was a poor, sick man who was seeking help, and I was answering simply with a joke, and a poor joke at that. Then, little by little, a train of thought began in his heart. He realized he was in

fact extremely irritated by the noise. In reality this was an irritation against the Russian government, because the Russian government did not allow him to go to live in the country as he would have liked to do, to escape from the noise. He also came to realize that there were many other things in life that irritated him, and that all these irritations did damage to his health. He finished his letter by saying, "Now I sleep through the night, in the middle of the noise, without any pills." You see, there had been an evolution in his inner attitude. I would *not* advise you to practice in this way, by correspondence, because there is a certain lack of human warmth! There is, nonetheless, the lesson that can be drawn from a case of this kind, that our attitude to life can play a role in our health.

To help people change their attitude toward life does not demand much scientific knowledge of psychology. Naturally, for some patients, it is necessary that there be psychiatrists with technical knowledge. But to help reach this attitude toward life, everyone of us can contribute if we have a real interest in the patient; if we understand that each patient has problems in his life and that the vast majority of patients are deeply alone with their problems. This can often be true also of people who go to church or who are members of countless societies, Rotary Clubs, or whatever group it may be. They may have an extremely full social life, and still be radically and absolutely alone with their deep inner suffering. Men need someone to and with whom they can express themselves, and

from whom they will find a certain sympathy, or empathy as is said in America, so that they may come to find the climate and atmosphere in which it will be possible for them to find spiritual solutions.

It is this that we define as "the medicine of men as persons." One must be as capable and knowledgeable a doctor as one can be from the scientific viewpoint. Whether one is a surgeon or internist or some other specialist, one must be a good doctor who knows his medical work through and through; but one must also not forget that men also stand in need of something else. This other thing, this human contact, also plays a role in health and in healing. For this it is not necessary that we should have technical psychological training, but rather, as Balint says, that we should go through a certain change within ourselves. Because personal contact with another man frightens them, patients are afraid of it and flee from it. But we also, on our side, are afraid of it. We are afraid of not being able to provide the answers.

Think of my tuberculous woman patient. She confronted me with religious problems to which I could not find any solution. I am a Protestant, and it was not my business to mix myself up in the attitude of the Catholic church to her remarriage, and I gave her no answer to this. But through communion with me, she did receive help to find communion again with God, and that is not something specific to any one Church. That is a universal thing. All men are seeking this contact with the Sovereign of the world. Either consciously they are seeking

it, or unconsciously. Each man is trying to find a way out of his solitude. All are afraid of opening themselves up, but find an amazing liberation when they do. We do not need to be very scientific and erudite psychiatrists in order to be able to give this to our patients. One can, perhaps, even be a psychiatrist who is exclusively a technician or a psychiatrist who is human, without going in for any psychological specialization. The patient *feels* what the *attitude* of his doctor is.

The patient senses very well whether he is simply a case in the eyes of his doctor, or whether the doctor sees that there is in him a human being who is suffering, who is thirsty for human communion. First, a patient needs to be able to give expression to his secrets. He desires to become himself through expressing himself, and wishes to express that which he has never dared to express before in his life. My patient, who had all sorts of resentments against her husband, found it particularly difficult to give expression to them, since her husband also happened to be charming. But, to find love, we need first to be able to give expression to our hatred. We must first bring out our aggression, if we are to be able to find afterwards authentic forgiveness. So we must see that there are two phases; and first, a phase that is human and psychological, where men must be able to express their feelings. It is frequently Christians who find it most difficult to give expression to their feelings because they wish to give the impression of being very nice people. They hide their hatred in

the depths of their hearts, and that produces an "ecclesiogenic neurosis." But after we have given expression to everything that is negative within us, we can then find a religion that is far more authentic, a forgiveness that is far more true, a love that is far more true, that love which every man is seeking. This is what we must help our patients find.

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*When one reads Dr. Tournier's contribution on the "Healing of Persons," one is first impressed by his simple, direct presentation of many matters which on the surface seem obvious. However, through this simplicity one senses more and more a profound appreciation of the human being in troubled circumstances.*

*Dr. Tournier offers an introduction to the concepts and practices of a movement in European psychiatry which has in recent years attracted attention in American psychiatric circles. This psychiatric development has been influenced by existential philosophic thought, especially that of Kierkegaard, Nietzsche, Dostoevski, Sartre, Heidegger and Jaspers. In Switzerland and other countries of Central Europe, under the leadership of such men as Binswanger and Strauss, this approach in psychiatry is referred to as "Daseinanalyse." The existential analysts have not discarded classical psychoanalytic concepts, but have redirected their attention to personality functions not stressed by the Freudians. They have focussed on such matters as the person in his immediate life situation here and now, the continuing evolving of*

*personality at all stages of life, the subjective experience of individuality, the patient's responsibility for committing himself to his own decisions, that personality to a large extent results from one's own critical decisions and choices, and that mental health derives from whole-hearted commitment to one's life and to one's responsibility for that life.*

*In this paper, Dr. Tournier gives an enlightening sample of such an approach to the matter of "The Healing of Persons."*

Henry D. Lederer, M.D.  
Professor and Chairman  
Department of Psychiatry  
Medical College of Virginia