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Artificial living breeds frustration and aggravates insanity, says eminent authority

Cradles of Insanity

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NO MATTER where one turns in the modern world, no matter what facts about modern society we examine, we are driven to the conclusion that modern man is on the road to insanity. Almost everywhere throughout the world man has spread what is called "white man's civilization"—factory technology, industrial supremacy and great metropolitan cities—in blithe disregard of what those "white ways" have done to man in the megalopolitan industrial centers in which he is wont to confine himself.

Authorities now claim that "the nearer an individual lives to the center of a large city, the more likely he is to go insane." A map of Chicago, on which known cases of insanity are plotted by residential location, shows that the rate of insanity at the center of population is roughly twice as great as in the suburban areas.

The first census of the insane in the United States was taken in 1850, but since the figure given was only 67.3 per 100,000 population, this census is not considered reliable. By 1880 the rate had risen to 183.3; by 1936 it



had reached 335.3, and in 1941, the high figure of 452.2.

The most accurate long-time records in the nation are those of New York State, where institution cases numbered 260.4 per 100,000 population in 1889; 493.4 in 1935; and 637.6 in 1940. This means that in 1940 one out of every 157 persons in New York was classed as insane. But it also signifies—considering the rate of increase from year to year—an average yearly increase of four cases per 100,000 population up to 1935, and then an annual gain of 24 cases through 1940. Judging the future by past records, the percentage of insanity in New York State by 1960 would reach 1,093 per 100,000 population, or one in every 90 people.

If this rate held for the nation as a whole, it would mean that by 1960 our asylums would have to care for at least 1,469,000 insane patients, or a population equal to that of Los Angeles.

All these figures refer only to those who are insane enough to need hospitalization. The more dreadful fact

is that these figures are indicative of the general mental health of modern man—the same conditions in modern life which are rendering so many completely insane are making many times that many people partly insane.

Fortunately, however, the rest of the United States is not as highly industrialized and urbanized as New York State. Using the figures for the entire United States, it is apparent that in rural regions and places of less than 2,500 inhabitants, the rate of insanity in 1927 was only 41.1 as against 92.5 for cities of 100,000 or more. Applying this rural rate to the entire nation, the total insanity in the rural areas—which comprise roughly 30,000,000 people—is only 12,330 individuals. In other words, 99.2 per cent of our insane come from the more congested sections of the nation.

But there is little indication that the rate of increase in insanity will remain even at these alarming figures. All the major factors contributing to this rising tide of insanity are being steadily intensified. More and more of the population is still drifting to the metropolitan areas; fewer and fewer families are dependent upon the working of land for a livelihood; the proportion of single, widowed and divorced persons is constantly rising; and finally, there is a large decrease in the proportion of persons in the younger age brackets. Unless there is a radical change in the way of life of the American people, we shall have not only one insane person in every 90 but perhaps—before the end of the

century—one in every twenty may spend part of his life in an insane asylum.

SOCIAL RESEARCH shows that urban insanity is not simply a manifestation of economic misfortune or under-privilege. During the depression of the '30's, the insanity rate in the United States changed very little. Poverty and insecurity may have some influence upon the development of insanity, but there are other more determinate factors. Proof of this is found in the fact that all poverty-stricken areas do not produce the same types of insanity. Marked differences in the living habits of people play a part in determining the type of abnormality manifested.

For instance, rooming-house districts in large cities are apt to encourage paranoid schizophrenia—the split personality complex which is conducive to delusions of grandeur, of persecution, to hallucination and indifference to environment. In areas where the foreign-born predominate, catatonic schizophrenia—personalities given to either stupor or excitement and to impulsive or confused actions—is aggravated. In Negro districts, dementia paralytica is apt to dominate the unbalanced mind. And all forms of schizophrenia are remarkably frequent in areas where different races live in close proximity with one another.

City districts having the lowest percentage of home-owners are especially characterized by senile psychoses, with

failing memory and delusions of persecution. High rent areas, on the other hand, are typified by cases of manic-depressive psychoses—alternate periods of elation and morbid gloom. The explanation probably is that the incipient manic - depressive person often has a quickened "drive" which carries him for a while into the higher-income groups and hence into the better residential areas.

WHAT actually causes insanity, and precisely what is it in modern city life that intensifies this abnormality? Basically, insanity is of two types: (1) functional, where no organic mental derangement is involved; (2) organic, where there is actual disintegration of the nerve and brain tissues. The primary cause of functional insanity is frustration. Whenever human desires greatly exceed any possibility of fulfillment, or where environment and experience stimulate the human being (occupationally, sexually, etc.) beyond his capacity, that individual is likely to break under the strain and become obsessively despondent, aggressive or escapist. During the time of the Crusades in the Middle Ages, individual and mass insanity existed because the current religious beliefs demanded behavior far beyond attainment by the normal human being. Today, industrialism, urbanism and materialism are placing a strain on people which makes frustration almost inescapable.

The primary cause of such modern insanity, according to Schroeder, Faris

and Shaw, is frustration due to social disorganization of city life. Dr. Elton Mayo of Harvard University, in *Human Problems of An Industrial Society*, says: "A small society lives in an ordered manner, such that the interests of its members are subordinated to the interest of the group." An individual born to a community can anticipate the function he will ultimately fulfill in that community. This expectation influences his thought and actions through his developing years and culminates in a sense of belonging in the community. And throughout his life he is "solidaire" with a particular group.

Modern city life has brought an end—so Durkheim claims—to the satisfaction of individual functioning within a group. Our city population lives under a condition he calls "anomie"—and planlessness in living is therefore becoming typical. City children, city men and city women live restlessly and aimlessly. Their very method of living defeats their best purposes; achievement, as a criterion of life's value, becomes impossible. And happiness lies always beyond any reasonable accomplishment. Defeat then results in disillusion—a disgust with the "futility of endless pursuit."

UNDER CONDITIONS of social disorganization, the white collar worker in a rooming-house district is isolated and lonely amid impersonal surroundings. Sorokin says that psycho-social loneliness is a primary factor in egotistic suicide. The number of unmarried

men, socially and biologically at loose ends, increases toward the city's center, and as urbanization develops, the influence of community and family control steadily decreases. Standards of group and personal behavior break down when the anonymous big city dweller lacks the opportunity of satisfying perfectly natural desires in normal fashion, so he turns to the unconventional substitutes which so frequently lead to insanity.

Specialization of work in modern industry is another significant cause of frustration and neuroses. In demonstrating how far the ravages of social disruption have carried, Dr. Mayo (*Human Problems of An Industrial Society*) quotes Dr. J. S. Plant: "The individual and the family live in temporary quarters; the populations of the industrial and the better residential areas change constantly. In the higher class residential districts, 70 per cent of the married men have their work so far removed that it means at least two hours traveling each day. . . . The rapid inroads of apartments are serving to restrict . . . what we have previously considered the real aspects of the family. Each five years finds slightly over 78 per cent of this population in a new address. The relationship to each other of various working groups cannot attain either definition or actuality in a situation where one perhaps lives and moves but certainly has no being.

Today a high percentage of human beings are required to overspecialize and spend their lives in repetitive work

which exhausts the nervous system because it frustrates the normal use of imagination and decision. Research by the Harvard School of Business Administration at the Hawthorne Plant of Western Electric, Chicago, revealed that modern industrial work predisposes the laborer to "obsessive response." And Dr. Mayo, commenting on this research, says: "It is significant for students of industrial relations, of psycho-neurosis and of education."

Using the word *education* in its broad sense—as the whole of the influences which tend to shape the ideas and activities of people—it is obvious that an environment that predisposes the masses to obsessive response to the problems of living is an environment which mis-educates them.

One of these environmental factors is national advertising and salesmanship, the purpose of which is to standardize tastes and create demand for standardized commodities. Mass-production and mass-advertising work hand-in-hand to destroy local and regional differences in tastes and merchandise. To make possible the mass-production of a certain type of garment, people must be taught to want and wear uniform types of clothing, and to change from one fashion to another on a regimented basis. Moreover, every institution in modern society—the school, the cinema, the radio, the church, the store and the state—has been persuaded to join in this standardization and to follow the leadership furnished it by national advertis-

ers. Thus an environment is created from which modern man can hardly escape and in which he feels that it is perfectly right for him to sacrifice his personality, his local and regional individuality in order to make industrialism—and what is called progress—possible.

Excessive advertising and salesmanship tend to stimulate people's desires for things far beyond their ability to obtain them. The drive to keep up with the Joneses in clothes, furniture, cars and entertainment, and the unquestioning acceptance of urban habits contribute to the creation of wants that cannot—and often should not—be satisfied. Substitution of these insatiable desires and abnormal ways of living for a pattern of normal work, of family life, of uplifting community relationships, results in a tendency to indulge in escapist recreation, entertainment and literature.

MODERN LIFE, therefore, of itself produces an alarming measure of frustration. The effort to fill the void created by this frustration leads to over-stimulation and indulgence. These factors, in turn, disturb the body chemistry—aggravating many forms of organic disease and increasing the prevalence of functional insanity.

Many cases of mental degeneracy could be avoided if the national influences contributing to abnormal living were counterbalanced by forces tending to persuade people to live normally. Among these forces should be better understanding of the principles of nu-

trition. One-third of the nation is underfed, largely because we are so generally uninformed as to real food values. Dr. W. A. Price, in *Nutrition and Physical Degeneration*, declares that "wherever people have accepted the 'white man's diet'—principally white flour and white sugar—there has been rapid and outstanding degeneration, including that of the brain." G. T. Wrench, in *The Wheel of Health*, ascribes the healthful state of the modern Hunzas in the Himalayas to proper soil nurture. There men of seventy, as burden carriers, walk forty to sixty miles a day over the mountains, without undue fatigue. Moreover, these people are said to retain their mental vigor to ripe old age.

Granting the existence of a certain minimum of insanity and other emotional abnormalities in any society, the fact remains that the present appalling rise of insanity must be due to methods of living peculiar to modern society. Living conditions are far worse in the congested areas of large cities, and these districts are proving to be the cradles of insanity.

Without decentralization — decentralization of the population, of business, of education, of industries and of government—insanity must increase. But along with such decentralization must come a system of education that will teach proper methods of living. And the concept of such living must include development of the human personality in harmony with its real nature and possibilities.