

Of Psychiatrists, Politics and Aggression

To the Editor:

Dr. Arnold Hutschnecker's argument that political candidates should be certified by a board of psychiatrists (Op-Ed July 4) is insidious, because it rejects the basic principles of choice in a democratic polity, and naive, because he misunderstands the causes of a militarized foreign policy.

His proposal, though wrapped in liberal rhetoric, is fundamentally elitist and authoritarian. He would limit "consent of the governed," which he reveres in the first part of his essay, to choice among candidates who have "consent of the psychiatrists." But who would sit on Dr. Hutschnecker's board? Would it include conservative anti-Communists such as Ernest Van Den Haag or radicals such as R. D. Laing? Or would it be limited to pacific humanists such as Erich Fromm? And, obviously, *'Quis custodiet ipsos custodiet?'*

Should any psychiatrists be constitutionally entitled to prejudge the "health" of a candidate if certain policy views (aggressive and power-seeking goals) are assumed to indicate mental illness? For this is what is really implicit in Hutschnecker's prescription: the doctor's illusion is that what is really his own ideological disposition (in favor of non-interventionist and non-Machiavellian politics) is an objective value, dictated by scientific (psychiatric) expertise. But psychiatrists are no more "profes-

sionally" qualified to manage the selection of candidates in a democracy than are my own fellow political scientists, and I am sure Dr. Hutschnecker would not be willing to entrust the job to Henry Kissinger or McGeorge Bundy.

What would be the criteria for screening candidates? Would timid and chronically indecisive types be selected out along with the aggressive hip-shooters?

Senator Eagleton should probably not have been Vice President but what former leaders might we have been spared had the Hutschnecker board been in attendance? As Alexander and Juliet George's psycho-biography of Woodrow Wilson suggests, the very President whose idealistic and anti-militaristic liberal internationalism would most likely appeal to the Doctor evinced symptoms of neurotic behavior, father fixation, and paranoia. The doctor's recommendation that physical health should also be a criterion would have "saved" us from F.D.R.

The most relevant point, however, is that Dr. Hutschnecker's proposal is grounded in the fallacy that personality disorders are the prime causes of aggressive action in domestic and international politics. But with the partial exception of unusual cases such as Hitler, use of military force, for example, has been due not to leaders' neuroses, but to their ideologies and perceptions. The Munich Analogy and Domino Theory which have prompted American cold war interventions may be wrong or stupid, but this is a question of political and historical judgment, not evidence of psychiatric pathology.

Instead of simplistically and conveniently blaming aggressive policies on aggressive mentalities, our real task is more difficult: to reevaluate the realities of our "enemies'" intentions in international relations or to enforce the sanctions against illegal behavior in domestic politics. But none of this can be done by delegating the right to analyze and judge candidates to any board of doctors. Only the process itself of political competition and publicity can serve this purpose in a democracy.

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