

Adlerian Point of View on Health Insurance¹

V. LOUIS, M.D., *Zurich*

The practitioner of insurance medicine encounters a great variety of irrational attitudes. One of his most frequent diagnoses is *neurosis*, either directly psychogenic or in a psychosomatic disguise as found in every syndrome of illness.

Under certain circumstances the flight into pathological symptomatology is encouraged by an existing sickness or accident insurance which functions as a temptation. Looking only at that mechanism one might fail to properly evaluate the problem of the insured neurotic. To the Individual Psychologically trained observer it is quite clear that the financial angle cannot be the only cause for the so-called "insurance neurosis." As we know, it is a goal established elsewhere which provides the basis for being tempted to develop an insurance neurosis. The regulations of an insurance company in general consider only to a very small extent the premise upon which such a neurosis has developed. They only take into account the factual conditions as far as the administrative, legal and economical circumstances are concerned. With respect to these circumstances we are asked again and again whether or not an unrealistic neurotic attitude is based upon conscious intentions and, should this not be altogether the case, to what extent, legally, the existence of fraud could be established. There is, however, no bad intention behind this questioning. From the point of view of the modern insurance policies it is perfectly legitimate. Yet how to answer to that inquiry? Malaise would still remain even if one could answer in the negative on principle, as in the case of a fully developed neurosis without any signs of malingering. The malaise has its roots in the realization that in the end it is impossible to take sides in a dispute between individual and society. In case we sit in judgment, we can do so only in the arbitrary assumption of the existence of a free will, which assumption might suffice as far as legal considerations are concerned, but cannot stand up when we are confronted with a dispute about essential considerations.

True, the neurotic with his erroneous goals which are in contradiction to reality, and thus constantly in conflict with his fellow-man, is

¹ Presented to the International Congress of Individual Psychology, Zurich, July 26-29, 1954.

not right. But on the other hand, is society right if it has created the premise for his error? To ask this question in relation to the existing insurance institutions is even more appropriate than in connection with any other social structure. Thus the following considerations are dedicated to that problem.

Besides the unrealistic attitude which characterizes the individual neurotic, those engaged in insurance medicine will notice another form of unrealistic attitude, different from the first. It is not a characteristic trait of the individual neurotic and cannot be understood as resulting from his individual goal, but it is to a certain extent characteristic for every person insured. As such, it is more conscious, less disguised; it is collective and takes its justification from the ubiquity which makes it almost appear logical. It manifests itself in a desire for increased protection as it assumes the appearance of a demand for social progress. It is very frequently defended by people who are above suspicion of being neurotic. They are using arguments perfectly understandable and politically opportune.

The existence of institutions for insurance is the result of the need for security. As an instrument serving the instinct for survival of the individual as well as the species, it is quite legitimate. Insurance is based upon the principle of placing upon the collective the burden of risks which cannot be carried by an individual. From a business point of view, insurance is an institution which sells security. That business might be carried out by private economy, corporation, or by the State. The method of transaction is of no concern to our studies and the fact that such transactions are being carried out would not provide any reason for psychological considerations.

However, the need for insurance is a subjective entity. Everyone has a personal way of feeling insecure. Yet insurance institutions are only set up for the sale of standardized merchandise, the sale of security of a generalized kind. In those cases where the feeling of insecurity is well founded, the security thus offered seems to suffice. However, if the personal feeling of insecurity is based upon an erroneous goal, the possibilities for insurance offered prove in each case to be insufficient. Those who have an unrealistic striving for security are likely to ask from the insurance company more protection than it could provide.

In attempting to translate these thoughts into the field of sociology we have to keep in mind that the striving for security presents a very important factor in the formation of society. From the field of animal psychology we are familiar with the formation of groups by individuals

in order to obtain mutual and, consequently, overall protection. The hypothetically assumed head of a clan who first demanded more security for himself than was necessary for the interest of the whole clan probably created what is now known as an unrealistic tendency for security and, in so doing, created the striving for power and recognition. Although in reality we do not know anything about it, we encounter throughout history the same mechanism leading to a concentration of power. Today's structure of society is the result of a complicated and entangled interplay of such factors as objective strivings for security and unrealistic strivings for power and recognition. Insurance as an important factor of our culture can be expected to be permeated with similar traits of partly objective and partly subjective origins. 1883 can be considered as the year of the birth of the modern form of cooperative insurance. In that year Bismark created the social security law in Germany which, to a greater or lesser degree, serves as a model for the majority of the contemporary systems of that nature. The problem at that time was to remove actually existing adverse conditions, to provide protection against illness and accidents for the families of the low income group; in other words, a planned amelioration of defects in the evolution of the social structure and, in so doing, to assure peace within labor and management. Since that time a tremendous social equalization has taken place. The distribution of the risks became a matter of course. Consequently, the demands are extended, and beyond those who are objectively in need of protection, all those who consider themselves as insecure for subjective and irrational reasons turn towards the insurance companies for protection. These demands were taken over by politics for the sake of electioneering amongst the little man and thus we find these two forms of neuroses in the field of insurance medicine; the individual one, based upon the individual and his personal goal which has no connection with the fact of being insured, and the other, the collective one, originating from the interrelation between general irrational strivings for security and its influence upon the insurance companies. In the second form of neurosis, however, the concept of the collective is not to be understood in the meaning of the Jungian archetype. The collective neurosis is the product of time and culture and not of the constitution of a personality and it is demographically and sociologically traceable without the need to refer for its explanation to a collective unconscious in the concept of Jung. Thus, social security is to a certain extent the neurotic symptom of our times; not because of its aims, but because of its partly collective

structure based on its redirected goal.

It is not easy to talk about a collective feeling of inferiority within the field of sociology, for the sum total of all individual feelings of inferiority does not result in a collective feeling of inferiority. Therefore, it is debatable if such a collective feeling of inferiority exists at all. However, there can be no doubt that there is a collective feeling of insecurity which manifests itself geographically and historically again and again.

The cause of the particular pertinacity of that symptom of our times is the fact that the expenses created by that symptom literally are carried collectively so that the individual appears to be hardly interested in them.

The conclusions resulting from these deliberations are not directed against those who carry insurance, but against the irrational components resulting from a hasty formation of our social structure and from today's insecurity, leading to a falsification of the goal. For our society as well as for the future it is hardly possible to be without the institutions of social insurance.

The demographs are telling us that daily five thousand more people are born than the earth is capable of nourishing under the distribution of yesterday. That we are not fighting each other for food is solely because our system of distribution is continuously adjusted to the increasing population. Since space on earth grows smaller and smaller, an inevitable tightening of organizations and a growing of collectives takes place. A race is taking place between the haphazard lumping together within the collective and the spirit of a true community. As the individual becomes a personality merely through the spirit, so the collective becomes a unit only through the spirit. At the present time it looks as if the collective has a head-start over the true spirit of group living. A great spiritual effort is needed if the community formation is to offset that advantage. To insure also means to plan. Insurance medicine includes health-planning as an integrate part of its work. Yet according to the definition of the World Health Organization, health is the maximum result of physical, psychological and social well-being. Such a definition is derived from a concept of wholeness; a concept with which we Individual Psychologists are quite familiar. Thus we can recognize the need for bringing about within insurance medicine not only a reconciliation between the neurotic and the demands of society, but also, the growth of the collective into a real community.