



The *Jouissance* of the Rat and the Desire of the Hysteric as Symptoms of the Behaviourist

Gerard Pape

gerard.pape-ccmix@wanadoo.fr

Abstract: For the psychoanalyst, symptoms are not only a source of discomfort. By relieving the subject of his symptoms at all costs, the behaviourist also relieves him of his desire and of his freedom to choose who he is and what he wants. Psychoanalysis and politics share an ethics: not to give way on one's desire and not to give way on one's freedom

Key words: subject; symptoms; desire; freedom.

Resumen: Para el psicoanalista, los síntomas no son solo una fuente de malestar. Librando al sujeto de sus síntomas a cualquier precio, el conductista también lo libra de su deseo y de su libertad de elegir quien es él y qué es lo que quiere. El psicoanálisis y la política comparten una ética: no retroceder frente al deseo de cada uno y no retroceder frente a la libertad de cada uno.

Palabras clave : Sujeto; síntomas ; deseo ; libertad.

In 1973, when I was an undergraduate student at Columbia University in New York, I took a course which surveyed Experimental Psychology. During this course, the professor spoke about a rather unusual experiment which had become a source of difficulty and perplexity for behaviourist psychologists. In the experiment, a rat is given a choice between two "rewards", either it presses a bar to obtain food or it presses a bar to obtain a "jouissance" in the form of an electrical pulse sent directly to the part of its brain which is said to be for the perception of pleasure. The rats chose "jouissance" so systematically that they practically died of hunger. This choice of "jouissance" on the part of the rat posed a problem for the behaviourist Master. Why did the rat not choose food which would be, ordinarily, the "normal" choice ? Between satisfaction of its needs for survival and "jouissance", the rat clearly chose "beyond the pleasure principle". For the behaviourist, the rat's choice is enigmatic.

Albert Ellis, a behavioural psychologist, invented a form of cognitive behavioural therapy called "Rational Emotive Therapy". Mr Ellis invented this therapy so as to have a technique that would work with patients who resisted traditional behaviourist methods. Let us not forget that, for B.F. Skinner, the subject was a "black box". Skinner did not accept the possibility of questioning the subject about his behaviour through the use of language. Behaviour was only to be observed. The problem for behaviourist psychotherapists was that:

certain patients did not respond to the traditional behavioural methods of Skinner which consisted in rewarding desirable behaviours and the opposite for undesirable behaviours, without asking for the consent of the subject, without passing by the intermediary of the subject's language.

Therefore, when Ellis invented Rational Emotive Therapy, his new idea was to convince the patients who resisted traditional behaviourist methods to be "reasonable." Ellis believed that, if one could show the patient that his way of seeing things was not logical, the patient could then give up his "irrational" thoughts, which were the cause of his symptoms according to Ellis. It is said that Mr. Ellis and his disciples have obtained a certain "success" with this method. In France, this is what those who have written the report signed by the INSERM want us to believe, for example. As with hypnosis in the past, there are a certain number of subjects which seem ready to give up their freedom to the Master of suggestion.

Let us now talk about some subjects who did not say "yes" to Rational Emotive Therapy in the United States. In 1978, I worked for one year as a psychology intern in a Veteran's Administration Hospital. In this hospital, I had as my supervisors several different psychologists of various theoretical orientations. The head of the psychology department, who was a "cognitive behaviourist" therapist, complained of a certain type of very difficult patient called "borderline" in the United States. For Lacanians, these patients, frequently women, are most often diagnosed as hysterics. For the behavioural psychologist, who was head of the Psychology Department at this Veteran's Hospital in the USA, he felt that these patients were "resisting", that they did not want to cooperate with his Rational Emotional Therapy. He said that the problem was that these women patients insisted on speaking about sex. It was very difficult for this therapist to work with them. How could he manage to convince them to be reasonable when they only wanted to speak about very irrational subjects such as sex?

These hysterics called into question this Master of Rational Emotive Therapy by their sexual desires. They did not accept, fortunately, when the behaviourist said: "Be reasonable. Do as I say. Think as I tell you to. You have nothing to lose but your symptoms." These hysterics understood that the reasoning of this behaviourist was false. To give up speaking about one's subjective desire is to accept being deprived of a fundamental freedom. Symptoms are not only a source of discomfort. The symptom is linked with that which is most intimate in the subject. Through the fantasy, the symptom is linked with desire and with the objects of desire of the subject. If, finally, one cannot separate psychoanalysis from politics, it is because it is a duty not to give way on one's desire and not to give way on one's freedom in both cases. When the other of politics or the other of cognitive behavioural therapy says to us: "Be reasonable. Listen to me. Adapt to society. Give up your subjective desires which make you symptomatic. Give up your freedom to choose for the greater good of society ", it is necessary to say "No.". This "No" is a political and psychoanalytical act because it concerns ethics.

In a lesson of his seminar "Ou Pire", Lacan wrote on the blackboard this enigmatic phrase: "I ask you to refuse what I am offering you because it is not that." It is necessary to refuse what the behaviourist offers in order to safeguard subjective desire. If one accepts that the other of politics, or the other of psychology, can answer for us, can say to us: "I know what you must do. It is that which you must want. ", it is from then on that one really becomes a slave. The true slave is he that does not know what he wants and he who lets the other decide what he should do. This is truly what is at stake in the difference between psychoanalysis and cognitive behavioural therapy. By relieving the subject of his symptoms at all costs, one also relieves him of his subjectivity and of his freedom to choose who he is and what he wants.