

the journal of Orgonomy



major articles

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In Seminar with Dr. Elsworth Baker _____

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Editor's Page

On the 30th anniversary of Reich's death, we dedicate this issue to the concept of genitality, as defined in the context of orgasmic functioning, which Reich himself signaled as his deepest and most momentous discovery.

Reich acknowledges his debt to Freud's energy-economic formulation of genital primacy: This implies that all the energy (libido) formerly tied up in neurotic mechanisms of defense (like money in escrow, unusable for good things) is now available to the ego for useful and gratifying investments. The technical hallmarks, e.g., dissolution of the Oedipus complex, capacity for heterosexual genital orgasm, including vaginal rather than clitoral in the female, etc., are well described in both the analytic and orgonomic literature. Reich's special contribution here is his delineation of the libido energy as real (rather than metaphysical) and the specific function of the genital orgasm as the prime regulator of the body's energy economy.

Genitality, therefore, embodies not only the clinical (psychological) hallmarks of non-neurotic functioning but the biophysical characteristics of freedom from armor, restoration of plasmatic pulsation, and the capacity for total surrender that transcends all words and images. This places man in the phylogenetic continuum of all living nature and unites him with his cosmic destiny. Superimposition is a cosmic event.

Like a terrified Pascal, contemplating the "silence of infinite space," armored man has reacted to Reich's discovery with fear and intolerable longing for a lost paradise. For many who have come after him, the orgasm reflex has proved elusive, and they discard the goal of genitality, retreating into a mystification of Reich's work or a mechanistic adherence to somatic manipulation.

That genitality is real and attainable, if rare, has been clinically documented by Reich, E. F. Baker, and more recent workers in the field. This journal offers two case studies of patients who reached and sustained genitality. The patients depicted are two totally different character types, and the course of their therapy, while similar in terms of gradual dissolution of resistance and increased capacity to tolerate charge, are entirely different in the details and thrust of treatment. This is as it should be for no two individuals are alike — even within the same diagnostic category — and every treatment must be geared to the patient. This is the art of therapy as opposed to the mechanistic application of "technique."

The perpetual question arises as to why it takes so long and why so