

Beyond Schweitzer and the psychiatrists: Jesus as fictive personality

Donald Capps¹

Princeton Theological Seminary (USA)

Research Associate: University of Pretoria

Abstract

Albert Schweitzer and the psychiatric studies of Jesus that he critiqued in 1913 shared the belief that Jesus identified himself as the coming Messiah. Unlike the psychiatrists, however, Schweitzer did not therefore judge Jesus to have been delusional. This article concurs with Schweitzer on the grounds that “ideas of reference” were a common feature of the religious milieu in which Jesus lived. It introduces the psychoanalytic concept of the “fictive personality” as relevant to Jesus’ identification of himself as the coming Messiah. In contrast to delusional theories, this concept emphasizes the positive uses of such identifications, especially as a means of self-empowerment.

1. INTRODUCTION

In *Jesus: A psychological biography* (Capps 2000) I lamented the fact that the use of psychology in current research on the historical Jesus lags far behind the use of disciplines like sociology and anthropology. This is unfortunate, because many of the key questions now being raised about Jesus’ identity cannot be answered in sociological and anthropological terms alone, as they are fundamentally psychological. While the question of Jesus’ understanding of his

¹ Prof Dr Donald Capps is William Harte Felmeth Professor of Pastoral Psychology at Princeton Theological Seminary, Princeton, USA. Dr Capps is research associate for the research project “Theories of Practical Theology and Philosophical Hermeneutics”, directed by Prof Dr Yolanda Dreyer, Department of Practical Theology, University of Pretoria.

own identity requires consideration of the types of religious authority available to him – such as prophet, teacher, healer, messiah – there is also a psychological element involved in his self-identification with one or more of these types.

In this article, I will discuss Albert Schweitzer's *The psychiatric study of Jesus* (Schweitzer [1913] 1948), because his critique in this text of psychiatric studies of Jesus published in the first decade of the twentieth century discouraged others from making similar attempts. Over the decades that have followed, this critique has continued to cast a long shadow over the use of psychological theories and concepts in historical Jesus research. In my discussion, I will show that the fundamental disagreement between Schweitzer and the psychiatrists centered on the question whether or not Jesus was delusional. I will argue that the answer to this question hinges on whether “ideas of reference” can be held to be delusional when they are an integral feature of the religious culture in which Jesus lived. I contend that twentieth and twenty-first century psychiatrists cannot answer this question in the affirmative, but that Jesus' own contemporaries could do so on the basis of their own criteria. These criteria, however, would not be expected to be applied with scientific neutrality, but would instead reflect the sociopolitical biases of those who applied them. I suggest in conclusion that another psychological construct – the fictive personality – *is* applicable to Jesus, and because it does not involve the claim that Jesus was delusional, is a construct that we may apply to him despite the fact that we are not his contemporaries. In fact, it may be argued that the “fictive personality” concept articulates his own self-understanding as well as the understanding of him held by his disciples and supporters.

2. SCHWEITZER'S CRITIQUE OF THE PSYCHIATRIC STUDIES

Schweitzer's *The quest of the historical Jesus: A critical study of its progress from Reimarus to Wrede* ([1906] 1968), originally published in German in 1906, was followed seven years later by *The psychiatric study of Jesus*. In the seven year interval between the publication of these two books, Schweitzer had been studying medicine so that he would be trained for medical work in Africa. *The*

psychiatric study of Jesus was his thesis for the degree of Doctor of Medicine at the University of Strassburg.

As Wayne G Rollins (1999) points out, Schweitzer had criticized studies of Jesus that employed modern psychological theories in his earlier 1901 book, *A sketch of the life of Jesus*, noting that such efforts are a “patchwork of opinions” produced by “mediocre minds” who “with much else that is modern” have “transferred to [Jesus] our modern psychology, without always recognizing clearly that it is not applicable to him and necessarily belittles him” (Rollins 1999:62). Then, he “reinforced his attack” in 1913 with the publication of *The psychiatric study of Jesus*. According to Rollins (1999:63), Schweitzer “did not intend to condemn psychology as a whole, only ‘faulty’ and ‘amateurish’ instances of it.” But the effect of his critique on biblical scholars “was a virtual ban on things psychological ... for the better part of the century”. Rollins (1999:65-87) cites evidence of an “attitudinal change” beginning in the late 1960s toward the psychological interpretation of the Bible. But most of it applies to Paul, not to Jesus (Rollins 1999:127-130).

If Schweitzer’s book on the psychiatric study of Jesus had the effect of “a virtual ban on things psychological among professional biblical scholars for the better part of the century,” it makes sense that we return to this book to find out why it had this effect, whether intentional or not, and to try to determine whether this effect was justified.

As we enter into our discussion of Schweitzer’s text, we should keep in mind that this critique of the psychiatric studies was mounted by a scholar who had embraced historical-critical methods. But Schweitzer was highly critical of David E Strauss, the scholar who is typically viewed as the inspiration behind the first sustained scholarly quest for the historical Jesus. When Strauss’ ([1835] 1972) *The life of Jesus critically examined* first appeared, it was met with a storm of protest, resulting in his dismissal from his professorship in New Testament at the University of Zurich. Schweitzer was born in 1875, forty years after Strauss’ work was published. By this time, the historical-critical method had gained a solid foothold in German theological faculties, and Schweitzer was introduced to this

method during his theological studies in the early 1890s at the University of Strassburg in Alsace, which was then under German rule. Heinrich Julius Holtzmann was lecturing there on the Synoptic gospels. He was a proponent of the theory that Mark, not Matthew, is the earliest Gospel, a theory that continued to be contested throughout the 19th century, but is now almost universally accepted by biblical scholars.

Schweitzer did not dismiss the historical-critical method, but his independence of mind led him to question some of its fundamental conclusions about Jesus. In 1894, when he was serving his compulsory year of military service in the German army, he worked in preparation for an examination in the Synoptic gospels at the beginning of Winter Term. One day, while reading Matthew 10-11, he began to question Professor Holtzmann's view that this material was not historical but derived from the early church. Schweitzer concluded that this discourse in which Jesus sends his disciples out, telling them that they would be persecuted and that they "will not have gone through all the towns of Israel, before the Son of man comes" (10:23), was authentic. He based this judgment on the fact that the Messianic Kingdom did not appear before the end of their journey and the disciples were not persecuted. As the translator of *The psychiatric study of Jesus*, Charles R Joy, points out, "Schweitzer was sure that no later generation would ever have attributed to Jesus statements proved false by events" (Schweitzer 1948:20).

Schweitzer (1948:21) also concluded on the basis of Jesus' reply to John the Baptist's query, "Are you the one to come or should we look for another?," that Jesus was thinking of two different worlds, "the natural world in which they all lived, where John was the greatest of all, and the Messianic Kingdom that was to come soon, where the least of the supernatural beings who should people that world would be greater than John". When he reached home after military maneuvers, Schweitzer (1948:21) felt that "new horizons" had been opened up to him. He was certain "that Jesus had announced no kingdom that was to be founded and realized in the natural work by himself and the believers, but one

that was to be expected as coming with the almost immediate dawn of a supernatural age”.

Schweitzer (1948:22) concluded that the disciples’ return without having suffered any persecution caused Jesus to rethink his position, and that he came to believe that he himself must suffer death before the appearance of the kingdom, thereby atoning for the sins of the elect and saving them from the days of tribulation. The new conviction that he was to suffer death and then become the Messiah when God’s kingdom is ushered in was disclosed to the disciples at Caesarea Philippi, and when he left his retirement to join the band of pilgrims from Galilee en route to Jerusalem, only the disciples knew what he believed himself to be. Schweitzer’s subsequent reflections elaborated on his belief that Jesus was profoundly eschatological and that his eschatological understanding was deeply apocalyptic, anticipating the end of the world as we know it and the beginning of the reign of God.

Schweitzer knew that this conception of Jesus would be unpopular with his professors and the church leaders of his day, as they promoted a view of Jesus as envisioning a Kingdom of Heaven that was to be achieved gradually here on the earth. But, according to Joy, he was unprepared for the “superficial thinkers wearing the garb of psychology and psychiatry” who “would find in his eschatological picture of Jesus support and comfort for their contention that we have to do in this man of Nazareth with mental derangement, with hysteria perhaps, with paranoia certainly. This new school of psychopathology found here a man who suffered from hallucinations, from ideas of reference [i.e., claiming to be a person that he is not], from delusions of grandeur” (Schweitzer 1948:24). In the first decade of the 20th century, “books appeared that disturbed Schweitzer profoundly. They asked if Jesus was an ecstatic, they frankly pronounced him to be an insane man, they analyzed the Gospels for evidence of “psychopathic symptoms” (Schweitzer 1948:24). But “they were little qualified for their task. They had no critical understanding of the sources. They based their findings on historically discredited material. *Yet Schweitzer’s friends pointed out to him that*

his own studies were in part responsible for them" (Schweitzer 1948:25; my emphasis).

Joy suggests, therefore, that the writing of this book was, to Schweitzer, "an inescapable duty. He himself was sure that Jesus was completely sane. That Jesus shared the Messianic ideas of late Judaism, that he who was really a descendent of David had come to believe that in the world to come he was destined to be the Messiah, are in no rational sense evidences of mental disease" (Joy 1948:25). Thus, *The psychiatric study of Jesus* "came out of a deep inner compulsion. It had to be written" (Joy 1948:25).

In the preface to the 1913 edition of *The psychiatric study of Jesus*, however, Schweitzer pointed out that his primary target was not the more recent psychiatric studies of Jesus. Rather, it was Strauss' (1972:27) conjecture in *The life of Jesus critically examined* that "the Jesus who lived in the world of ideas contained in the Book of Daniel and in the late Jewish apocalyptic literature and who considered himself the 'Son of Man' and the 'Messiah' soon to appear in supernatural glory, is to be adjudged in some fashion as psychopathic". Yet, in the text itself, Schweitzer indicates that Strauss actually tempered his position in his second *Life of Jesus* in 1864. In the first life of Jesus published in 1835, Strauss had declared that Jesus "lived with the quixotic idea that he was destined to appear in the near future in a blaze of supernatural glory, surrounded by angels, on the clouds of heaven, to judge the world as the expected Messiah and to establish the kingdom which was to follow" (Strauss 1835:34). Therefore, Jesus was "a fanatic." Strauss, however, tried "to explain that the Nazarene, even though the fanatical idea had gripped him, can be considered, nonetheless, as one in full possession of all his faculties, partly because of the fact that his expectation has its roots in the general conceptions of late Judaism" (Strauss 1835:35).

But when he wrote his second *Life of Jesus* in 1864, Strauss was "so vividly conscious of the fanatical in the thought of the second coming that ... he was inclined to consider the idea as very close to madness, and accordingly doubted whether the sayings that refer to this really originated with Jesus"

(Strauss 1864:35). Thus, by doubting that these sayings were authentic, he was able to preserve his conviction that Jesus was “in full possession of all his faculties.” However, his decision to let these sayings about the second coming “fall completely into the background in his portrayal of Jesus” was “reproached by various critics for apostasy from the better judgment he showed in 1835”. In effect, the price Strauss paid for his preservation of his conviction that Jesus was mentally sane was the loss of Jesus’ own anticipation of his second coming and his self-identification as the expected Messiah.

Schweitzer joins in this reproach, for “historical research has more and more clearly perceived that the expectation of the second coming of the Messiah is at the center of Jesus’ thought, and that it dominates his feeling, his will and his action far more rigorously than we had previously supposed” (Schweitzer 1948:35). Schweitzer does not make specific reference here to his own contribution to this perception, but he notes in the preface that in his *The quest of the historical Jesus* he “had brought out the apocalyptic and what in modern concepts is considered the visionary in the Nazarene’s thought world more vividly than any of the investigators who formerly worked in this field” (Schweitzer 1948:27). In the text itself, he acknowledges that these new developments have been reproached for having resurrected the earlier views of Strauss. By placing in the foreground what Strauss calls “the quixotic and the fanatical in the world of Jesus’ ideas,” the new perception of Jesus “pictures a personality with clearly revealed morbid traits” (Schweitzer 1948:35).

As authors of such reproaches, Schweitzer cites his own professor, Heinrich J. Holtzmann, Adolf Jülicher, and others who have “constantly reminded” him that “I have portrayed a Jesus whose object world looked like a structure of fantasies.” Moreover, they have made “warning allusions” on occasion “to the medical books which believed that the ‘paranoia’ of the Jewish Messiah had been proved” (Schweitzer 1948:27). In effect, Schweitzer was being accused of abetting those who consider Jesus to have been insane.

For Schweitzer, the discussion turns almost entirely on the degree to which such ideas attributed to Jesus may be considered authentic: “Indeed, a

series of attempts have been made which essentially represent the Messianic claims of Jesus and the expectation of his second coming as unhistoric. According to this hypothesis the Nazarene was a simple Jewish teacher, whose followers after his death elevated him to the rank of Messiah and then proceeded to place in his mouth allusions and expressions relating to it" (Schweitzer 1948:36). He cites William Wrede's *The messianic secret in the Gospels* as "the most ingenious attempt of this sort." Ingenious as these efforts may be, "this kind of distinction between authentic and unauthentic words in the sources cannot be maintained. It must, therefore, be admitted that Jesus considered himself to be the Messiah and expected his majestic return on the clouds of heaven" (Schweitzer 1948:36).

While Schweitzer clearly felt that this issue was hardly debatable, it has proven to be one of the most challenging and vexing issues in subsequent Jesus research. Almost a century later, it remains both controversial and divisive. What concerns us at this point, however, is that his view that Jesus *did* see himself as the coming Messiah left him open to the charge that he was providing support, however unintentionally, for the psychiatrists' view of Jesus as mentally insane. Thus, he had a great deal at stake in mounting his critique against the authors of the psychiatric studies of Jesus.

In the following discussion of Schweitzer's *The psychiatric study of Jesus*, I will focus mainly on the issue of Jesus' understanding of himself as the coming Messiah, on how this contributed to the psychiatrists' view of him as delusional, and on Schweitzer's view that Jesus could understand himself as the coming Messiah and yet be perfectly sane (i e, non-delusional).

2.1 The psychopathological method

Schweitzer begins with some general comments about the application of the psychopathological method to historical figures. This method, which involves the investigation of the mental aberrations of significant personalities in relation to their works, has "recently fallen into disrepute" (Schweitzer 1948:33). This is not the fault of the method itself, which "with proper limitations and in the hands of

professional investigators can produce and has produced valuable results,” but because “it has been faultily pursued by amateurs. The prerequisites which are essential for successful work in this field – exact source knowledge, adequate medical, and particularly psychiatric experience, both under the discipline of critical talents – are very seldom found together” (Schweitzer 1948:33.) Because most practitioners of this methodology lack one or another of these prerequisites and sometimes lack all of them, one often encounters in this field of study “misconceptions of the grossest kind” (Schweitzer 1948:33).

For example, forming a judgment about a person on the sole basis of his acts is contrary to all psychiatric practice and “has always something suspicious about it.” If this is true for the present age, “how much more restraint must be exercised when we are dealing with people from a very distant epoch and with imperfect and uncertain traditions!” (Schweitzer 1948:33). Most psychiatrists today are disinclined to use the method, partly because “they do not consider psychiatry so perfected and stabilized that they can find a useful criterion in it for all the acts of mankind,” and partly because “they know that every vital human activity must be understood within the conditions of its own age” (Schweitzer 1948:34).

In Schweitzer’s view, these caveats have even greater applicability to Jesus. As he intends to show, there are “special reasons” for not engaging in a psychopathological study of Jesus, and these “take on extraordinary emotional value when it is a question of dealing psychopathologically with the life of Jesus” (Schweitzer 1948:34). This is all the more reason for assuring ourselves that the practitioner has the prerequisites enumerated above. The objective of his book, therefore, is to examine the opinions advanced by the medical writers who have dealt with Jesus, and to do so from both the psychiatric and historical-critical point of view.

He discusses three texts: A German text by George de Loosten (1905), *Jesus Christ from the standpoint of the psychiatrist*, an English text by William Hirsch (1912), *Conclusions of a psychiatrist*, translated into German under the title, *Religion and civilization from the standpoint of the psychiatrist*, and a French

text by Charles Binet-Sanglé (1910-1912), *The dementia of Jesus*, published in three volumes. He also cites Emil Rasmussen's *Jesus: A comparative study in psychopathology*, a Danish text published in German translation in 1905.

Because Rasmussen was not a psychiatrist but a student of religion, he does not discuss this work in detail. He did, however, append a footnote on Rasmussen's views when the thesis was published, noting the difficulty of discussing Rasmussen's views in detail because of "the chaotic condition of the concept of psychiatry in his own mind" (Schweitzer 1948:74). As Rasmussen's views add little to those of the three psychiatrists, I will not discuss Schweitzer's critique of his views in this article.

2.2 Jesus as psychic degenerate

Schweitzer (1948:37) begins with De Loosten's view that Jesus was "evidently a hybrid, stained from birth by heredity, who even in his early youth as a born degenerate attracted attention by an extremely exaggerated self-consciousness combined with high intelligence and a very slightly developed sense of family His self-consciousness slowly unfolded until it rose to a fixed delusional system". Its peculiarities "were determined by the intensive religious tendencies of the time and by his one-sided preoccupation with the writings of the Old Testament" (Schweitzer 1948:37). For De Loosten, Jesus' psychopathology became fullblown when he came into contact with John the Baptist. Either directly encouraged by John or by the relationship he offered, Jesus "was moved to express his ideas" and "proceeding step by step" he finally arrived "at the point of relating to himself all the scriptural promises, which had become vital again through national misfortune, and on whose ultimate glorious fulfillment all hearts hoped" (Schweitzer 1948:37).

De Loosten concluded that "Jesus regarded himself as a completely supernatural being," for only in this way can we understand his behavior when he arrogated to himself divine rights like the forgiveness of sins. As for indications in the Gospels (Mt 9:2; Mk 2: 5-12; Lk 5:20; 7:48) that Jesus "kept the Messianic dignity which he claimed as much as possible to himself," he explains this

reticence psychologically on the grounds that “Jesus did not believe he had a large enough following at the time to enable him to realize his claims” (Schweitzer 1948:37).

From Jesus’ response to the young man who wanted to attend to the burial of his father, “Follow me and let the dead bury the dead” (Mt 8:22) and comparable sayings, De Loosten infers “that Jesus takes it for granted that the beginning of his divine Utopia was immediately imminent” and “that he was no longer conscious of his human nature” (Schweitzer 1948:38). Both are reflected in his journey to Jerusalem, which, was prompted by the “foolhardy idea of achieving by a certain stroke of violence his long cherished, and a thousand times expressed, claims” (Schweitzer 1948:38). Driving the money changers out of the temple was “a shocking act of violence” which led to his arrest. Before his arrest, Jesus was in “a highly nervous, excitable state. He knew what a risky game he played and suffered greatly under the weight of fears and ominous misgivings.” The completely senseless cursing of the fig tree was reflective of this mood. Taking out “his ill-humor on a defenseless tree” can only be explained “as the boiling over of severe spiritual excitement” (Schweitzer 1948:38-39). Also, feelings of persecution, apparently irrational, are evident in his accusation that the crowd around him was looking for an opportunity to kill him, to which they respond, astonished, “You have a demon! Who is trying to kill you?” (Jn 7:19-20).

In Gethsemane, he experienced a moment of depression, and then his “psychosis” erupted in all its old strength when the police came to arrest him. His “mental disorder” was revealed during the examination before the high council when he suggested to the high priest that his judges will see him sitting at the right hand of God as the Son of Man and coming on the clouds of heaven (Schweitzer 1948:38).

Thus, Jesus’ temperament was extremely variable, and he was prone “to strange and apparently groundless moods of depression.” John 12:27 (“Now, my soul is troubled ...”) supports this claim. He also suffered from hallucinations, such as the occurrences at his baptism, “a vision which obviously exercised a decisive influence upon Jesus’ later decisions” (Schweitzer 1948:39). In this

particular case, the hallucination was both visual and auditory and therefore reveals “a greatly excited mind” (Schweitzer 1948:39). While acknowledging that we do not know how frequently Jesus had these hallucinations, De Loosten “considers it probable that Jesus depends upon them for his decisions and that similar visions like those at the baptism occurred later” (Schweitzer 1948:39). It is also highly probable that Jesus suffered from voices which seemed to him to come out of his own body, as though he had a spirit residing inside of him that determined what he should and should not do, and which he obeyed. Also, on the basis of Mark’s account (5: 25-34) of Jesus’ perception that power had gone out of him and into the woman who suffered from a hemorrhage, he conjectures that Jesus “had felt some kind of abnormal peripheral sensation, perhaps of the skin, and that he was trying to find an explanation for it” (Schweitzer 1948:39). Schweitzer specifically disputes this conjecture, noting that Jesus merely asserts that someone had touched his clothes, adding that it was “a naive conjecture of the Evangelist that he said this because of a feeling that power had gone out of him” (Schweitzer 1948:39).

Finally, De Loosten believes that Jesus’ own “lack of sex-consciousness” is proven by his reference to persons who are eunuchs by choice for the sake of the kingdom of heaven (Mt 19:12). Tying this lack of sex-consciousness together with his lack of family loyalty, he considers this a sure sign of “psychic degeneration *par excellence*” (Schweitzer 1948:40).

Unlike today’s readers, Schweitzer’s original readers would have known what De Loosten meant by “psychic degeneration.” The degeneration theory was formulated in the 1850s by the French psychiatrist, Benedict Morel, who used it to explain all forms of chronic mental illness. He believed that mental deterioration was inherited, and that the characteristics of the degenerate were passed from one generation to the next in a progressive diminution of the family lineage until it became extinct. Physicians should therefore inquire into the pathological heredity of the parents rather than search for organic causes of mental illness. Because it provided an all-inclusive explanation for every mental disorder, Morel’s idea took hold and dominated French psychiatry in the 1880s,

then came into vogue throughout Europe, in England, and to a lesser extent in America.

De Loosten attributed Jesus' alleged degeneracy to his "hybrid" heredity. In his discussion of the psychiatrists' use of spurious sources, Schweitzer notes De Loosten's view that Jesus' father was a Roman soldier. De Loosten's picture of Jesus' lack of sexual consciousness, of family loyalty, and his erratic behavior and emotional volatility are also consistent with the degeneracy theory, which held that degenerates are likely to become subject to "impulses and obsessive ideas" and experience "anxiety and dread if the idea is not obeyed," for otherwise "harm will follow" (Taylor 1984:133, 139). Thus, degeneracy was presumed to have a special relationship to paranoia.

2.3 Jesus as paranoid psychotic

According to Schweitzer (1948:40) William Hirsch makes a flat out diagnosis of paranoia. In his view, Jesus' delusional system can be traced to his boyhood. Jesus was "a boy with unusual mental talents" who was "predisposed to psychic disturbances," leading to the gradual formation of delusions. He spent "his whole leisure in the study of the Holy Scriptures, the reading of which certainly contributed to his mental illness. When at the age of thirty he first made a public appearance, his paranoia was completely established". His paranoia was apparently one of those cases where sudden and formless psychotic ideas are present, but where some external shock and strong emotion are needed for a systematic structure of paranoia to form. This shock was provided by another paranoid, John the Baptist, whom Jesus went out to join when he heard of this "forerunner of the Messiah."

When he was baptized by John, "The aberration which had so long filled the mind of Jesus, that he was the Son of God and that God had ordained him to be the Savior of mankind, was from now on converted into visual and auditory hallucinations" (Schweitzer 1948:42). Besides his hallucinations at his baptism, he "must have been in a state of continual hallucination" during the following forty days in the wilderness (Schweitzer 1948:42). All of his utterances claiming direct

inspiration from God were “spoken with reference to preceding auditory hallucinations” (Schweitzer 1948:42). The transfiguration story (Mark 9: 2-8) was also a hallucinatory experience, for, when others heard thunder, he heard a voice from heaven proclaiming his coming glorification (Jn 12:28-30).

Jesus’ forty day sojourn in the wilderness solidified his paranoia. Up to that time, his delusions were isolated and unrelated to one another. From that time forward, they “merged into a great systemic structure of delusions; doubtless Jesus had at that time repeated conversations with God the Father who had commissioned him and whose doctrine he preached. Such a development of his illness, a transition from the latent to the active stage of paranoia, is quite characteristic of this psychosis” (Schweitzer 1948:40-41). In the three years following his wilderness experience, a ceaseless megalomania “formed the center around which everything else turned,” and “no textbook on mental disease could provide a more typical description of a gradually but ceaselessly mounting megalomania than that afforded by the life of Jesus” (Schweitzer 1948:41).

Hirsch supports his diagnosis of megalomania by means of an exposition of several “I” statements in the Gospel of John, and by various “ideas of reference,” or instances where Jesus ascribes to himself the predictions of prophets, especially regarding the king who should rule over the world. Hence, he “manifests one of the actual peculiarities of paranoids, who apply to themselves everything possible that they see or read.” His claim to be of the family of David is typical of youthful paranoids who “substitute for their real descent a highly colored fanciful one” (Schweitzer 1948:41). His cursing of the fig tree is also typical of a paranoid.

2.4 Jesus as religious paranoid

While Hirsch viewed Jesus as a typical paranoid, Binet-Sanglé advanced the diagnosis of “*religious* paranoia,” distinguishing three stages in its formation: the period of conception and of systematization; the hallucinatory period; and the period of personality change. To the extent possible, he treats the delusions and hallucinations separately. In his view, “the primary delusion (the primordial fixed

idea) appears *ex abrupto*, without previous reflection. The further development of the delusion is apparently coherent, and though proceeding from a false hypothesis is thoroughly logical in its consequences. It develops by the progressive extension of the primary idea but without undergoing any transformation and without losing its original stamp" (Schweitzer 1948:42-43). How did it happen? Various incidents and factors brought it about, including John the Baptist, his own miraculous cures, the amazement of those who were healed of their diseases, and the enthusiasm of the disciples. By these means, Jesus was brought "to the point of believing himself to be the Messiah, the king of the Jews, the Son of God, God's interpreter, God's witness, and finally of identifying himself with God" (Schweitzer 1948:43). The threats of the fanatical Pharisees and Scribes "also awakened in him the notion that he was the sacrificial lamb which by its death was to take away the sins of Israel" and the idea "that after his resurrection he would ascend into the heavens, there to be revealed in his complete glory" (Schweitzer 1948:43).

Like De Loosten and Hirsch, Binet-Sanglé emphasized Jesus' hallucinations, beginning with his baptism. This particular hallucination demonstrates a typical characteristic of religious paranoia, namely that "the object of the visual hallucination almost always appears to have a certain exalted character" (Schweitzer 1948:43). In Jesus' case, the hallucination comes from above and is of an encouraging nature: "You are my Son, the Beloved; with you I am well pleased" (Mk 1:11). Also, Jesus' flight into the wilderness after his baptism was a period in which he experienced a series of hallucinations: "Here, under the influence of protracted abstinence and loneliness, of the quiet and monotony of the wilderness which placed him at the mercy of all his obsessions, perhaps also under the added influence of weariness and heat, multifarious mental disturbances took form" (Schweitzer 1948:43). Binet-Sanglé identifies seven hallucinations in the account, two purely visual and five which are described as both visual and auditory-verbal. None were wholly verbal, which is consistent with religious forms of paranoia, where "it is very rare for verbal hallucinations to appear alone without the conjunction of visual hallucinations"

(Schweitzer 1948:43-44). Also, their content always refers to religious objects, especially the devil. They may be separated into the fearsome and the comforting, with the comforting ones being visual. At the baptism a dove appears, in the wilderness the angel of God appears, and in Gethsemane he is strengthened by an angel (Lk 22:43).

Binet-Sanglé doubts that the recorded hallucinations were the only ones that Jesus experienced, for “insane mystics almost always suffer from hallucinations of muscle-sense” (Schweitzer 1948:44). Thus, in later periods, secondary psychomotor symptoms develop, “constituting a kind of theomantic possession.” As examples, he cites “sensory hallucinations” in which Jesus says that the Father speaks through him.

Like De Loosten, Binet-Sanglé focuses on Jesus’ desire to keep his Messianic claims secret, viewing this as typical of the secretiveness of the paranoid. Thus, he was “brought to admit his system of delusions only under the stress of emotion, as, for example, in the proceedings at the trial” (Schweitzer 1948:44).

2.5 Schweitzer’s rejoinder

In his rejoinder to the psychiatrists’ profiles of Jesus, Schweitzer makes two strategic moves. The first is to show how their lack of knowledge about the methods and findings of historical-critical research on the Gospels led them to make assertions and to develop interpretations that are simply untenable. The second is to meet them on their own ground, and to contend that they misuse psychiatric diagnoses, especially relating to paranoia, in their applications to Jesus. The first plays a much more prominent role in his rejoinder, as it is designed to demonstrate that no one should make assertions about Jesus, especially ones that question his emotional stability and soundness of mind, if they have not taken the trouble to familiarize themselves with the work of scholars in historical Jesus research. The second, however, is also important, as it issues a very strong warning to psychiatrists that they risk dishonoring themselves and their profession when they apply their diagnostic categories to

historical figures. This second prong of his attack has the effect, whether intentional or not, of marginalizing the psychiatric study of historical figures in the field of psychiatry itself. This is because the available evidence will never be sufficient to enable one to achieve the same level of confidence in the accuracy of one's diagnosis expected in clinical work with living patients.

2.5.1 The problem of sources

In the opening sentence of his rejoinder, Schweitzer (1948:45) indicates that his fundamental problem with the psychiatric portraits of Jesus is that none of the three authors is familiar with what has been going on in historical Jesus studies for several decades: "De Loosten, Hirsch and Binet-Sanglé busy themselves with the psychopathology of Jesus without being familiar with the study of the historical Jesus. They are completely uncritical not only in the choice but also in the use of sources". Thus, "before we can enter into a psychiatric discussion of their studies, we must recall what they neglected." Schweitzer (1948:45) devotes the next eight pages of his forty-page text to a summation of "the results achieved by the criticism of sources and by the scientific study of the life of Jesus".

Beginning with the issue of sources, he notes that the Talmud and the noncanonical gospels should not be considered at all. And yet, De Loosten is indebted to the statements handed down in Talmudic and pagan tradition, through Celsus in the 2nd century, for the belief that Jesus was the natural son of Mary and the Roman legionary Panthera. This was the basis for his conclusion that Jesus was a "hybrid" and a "born degenerate." Schweitzer (1948:45) notes that Binet-Sanglé is even more uncritical than De Loosten in his choice of sources, using documents, such as the so-called "Judgment of Pilate," that were long ago proved spurious.

Schweitzer (1948:45) also notes their uncritical use of the canonical sources. For example, the Gospel of John must be omitted if one's purpose is to reconstruct the life of the historical Jesus. This is because "the Jesus painted there, as critical investigation since Strauss has more and more recognized, is in

the main a freely imagined personality who is designed to improve and supplement the Jesus appearing in the first three Gospels". This "imagined personality" of Jesus is inherently enigmatic, and therefore there is much in this image that is "peculiar, unnatural, and studied." Thus, the psychiatrists were taken in by this inherently enigmatic portrait, as their ascriptions of mental illness to Jesus are largely based on citations from John: "Three-quarters of the matter studied by De Loosten, Binet-Sanglé and Hirsch come from the Fourth Gospel" (Schweitzer 1948:46).

The Gospel of Luke is also essentially expendable, as it "agrees in the main with the Gospels of Mark and Matthew" and "whenever it goes beyond them it makes us a doubtful contribution, which moreover is without any great significance for the criticism of Jesus and so can be left out of consideration" (Schweitzer 1948:46). For example, the story of the twelve-year-old Jesus in the temple (Lk 2:41-52) "cannot be considered historical for a variety of reasons." As the "stories of the birth and childhood in Matthew (Mt 1 and 2) also belong to legend, not to history" (Schweitzer 1948:46), a similar caveat applies to the infancy narrative in Luke 1-2.

What remain, then, as useful sources, are the Gospels of Mark and of Matthew (with the clear exception of Chs 1-2). These two Gospels "agree with one another in their construction," though Matthew goes beyond Mark in a series of valuable discourses which he alone has handed down to posterity. In addition, both Gospels date from between 70-90 CE. While both go back to still older sources, their reports are in general trustworthy, and "even though here and there later misunderstandings and cloudy traditions are to be observed, the exact similarity of certain details is startling" (Schweitzer 1948:46).

This is not the place to comment on Schweitzer's own assumptions about the canonical Gospels, especially the Synoptics. But it is worth noting that he places Matthew on at least a par with Mark, thus departing from his professor H J Holtzmann's view that Jesus' life and teaching could best be understood from the gospel of Mark, since Mark was the oldest of the gospels and was the foundation on which Matthew and Luke had built (Schweitzer 1948:20). In contrast,

Schweitzer (1948:48) refers to Matthew and Mark as “the two oldest Gospels”, implying that they were contemporaneous documents, and makes no reference to Matthew’s dependence on Mark. An obvious reason for making Matthew contemporaneous with, and seemingly independent of Mark, is that it was his reading of Matthew 10-11 while on military manoeuvres that led to his “discovery” that Jesus understood himself to be the coming Messiah.

2.5.2 Life and self-understanding

He next moves to what can be said about Jesus on the basis of “the scientific study of the life of Jesus.” Of Jesus’ early life, little is known: “He came from a carpenter’s family in Nazareth and himself plied that trade” (Schweitzer 1948:46). He appears not to have engaged in studies leading to his role as a teacher, for when he returned to his home town in the role of a prophet, the townspeople wondered at the wisdom displayed by a man they knew only as a carpenter (Mk 6:1-5). His knowledge of the Scriptures, however, could have been acquired from listening to the Sabbath readings as he was growing up. Also, prior to this public appearance he had possibly spent a longer period of time elsewhere, where, presumably, he gained the knowledge that he was presenting on this occasion.

Four brothers and several sisters are mentioned (Mk 6:3; 3:31), but there is no mention as to where his age placed him among the children. That he was descended on his father’s side from David “may be considered assured.” But there is nothing especially extraordinary about this, as various prophetic texts indicate that members of the royal family were well represented among the returnees from the Babylonian captivity under Cyrus. His descent from David is attested in Mark 10:47-48 and Matthew 21:9; and accords with the witness of Paul in Romans 1:3. We know nothing about his physical appearance or the state of his health.

The fact that neither Matthew nor Mark mention other journeys to the Passover Feast in Jerusalem during the course of his public ministry besides the one that led to his death supports the assumption that his ministry lasted a year or less. How long he spent among the followers of John is not known, but when

John was taken prisoner, Jesus returned to Galilee and preached the same message that John had proclaimed by the Jordan River, "The Kingdom of God is at hand." This proclamation remained the centerpiece of his message from the beginning to the end of his ministry, and the phrase "The Kingdom of God" is synonymous with the "Messianic Kingdom." The proclamation of its nearness signified that the end of the world is near (Schweitzer 1948:48).

Schweitzer (1948:49) provides a brief description of the concept and image of "Kingdom of God," emphasizing that a supernatural period of time was expected to occur after the natural order has ended. But he notes that Jesus would not have needed to describe this future in any detail, and that his hearers would have known what it was all about as soon as the statement, "The Kingdom of God is at hand," was spoken, its details having been well established from the books of the prophets and the apocalypses. He specifically cites the book of Enoch, which dates from the beginning of the last century BCE; and the book of Daniel, 165 BCE, as influences upon "the idea world in which Jesus lived". His listeners would have understood that the last days in the course of the natural world would be filled with terrible wars and unprecedented miseries. Thus, the content of the gospel that he preached was the nearness of the Kingdom, the judgment that would come in its wake, and the fact that he must himself endure great disgrace and persecution. He implores his followers not to be led astray at that time but to remain loyal to him (Mk 8:34-9:1).

In effect, Jesus reconciled two traditions, the older prophetic way of looking at things and the newer apocalyptic way. The older view asserted that the Messiah would come from the royal family of David. The newer view, as presented in Daniel and Enoch, recognized that without a reigning family, no ruler could be raised up to the position of Messiah; therefore, God would confer this status in the coming world to an angelic being who has human form and looks like "the son of man" (Dan 7:13-14). What Jesus did was to claim that, while he as a normal man is not in his lifetime the Messiah, he was ordained to this dignity and would be revealed as the Messiah at the end of the world and the beginning of the Kingdom of God. Thus, Jesus endorsed both the older view that the

Messiah would be a descendent of David, and the newer view that “the son of man,” an angelic being having human form, would be the highest power in the kingdom which is to come. Jesus did not think of himself as Messiah or “Son of Man” in his natural lifetime, as he was “a normal man.” But he believed that he was destined to be the coming Messiah when the kingdom of God itself became a reality: “In the natural era of the world the Messiah can be no more present than the Kingdom of God itself” (Schweitzer 1948:51).

For Schweitzer, “one of the most certain results of modern critical research” is that Jesus did not permit the conviction that he was destined to be the Messiah to play a part in his message. He avoided any such pronouncement or self-display by referring to the “Son of Man” in the third person. Since he was not yet this “Son of Man” this was literally accurate. So, to the general public he was “the prophet of Nazareth,” nothing more. Even those who opposed him had no suspicion of his claims. If he had made such claims public, the High Priest should have been able to summon a witness at his trial to testify to this effect, but he failed to do so.

But his disciples knew it. Yet even they knew of it only a few weeks before his death, when he set about going to Jerusalem (Mk 8:27-30). Judas betrayed this confidence to the High Council and Jesus was arrested on the basis of this disclosure. According to Jewish law, the High Priest required two witnesses for the accusation, and had only Judas’. Therefore, everything depended on whether Jesus admitted his guilt. While he could have saved himself by saying nothing, he had come to Jerusalem with the settled purpose of dying. His death was to be an atonement, exempting humankind from the general misery which is to precede the Messianic Kingdom. Then, either at the moment of his death or three days later, he would enter into the supernatural life, achieve the Messianic honor, and usher in the end of the world (Schweitzer 1948:52).

At this point, Schweitzer (Schweitzer 1948:53) advances his theory that Jesus changed his views as a consequence of his disciples’ return from their successful journey to the districts of Israel, preaching that the kingdom was at hand. As they were not persecuted and the great distress that was to occur

before the Kingdom became a reality did not happen, Jesus reconsidered his position and came to the view that he, as the coming Messiah, was called upon to suffer and die for others, “thus accounting for the nonarrival of the period of trouble and of the Kingdom of God”. Schweitzer (1948:53) believes that the two most decisive influences in his formulation of this thought were the death of John the Baptist “which occurred after the sending out of the disciples” and the 53rd chapter of the book of Isaiah, “which speaks of the servant of God who suffers for the guilt of the people”. Between his disciples’ return and his departure for Jerusalem – that is, during the autumn and winter seasons – Jesus remained secluded in “heathen territory, in the neighborhood of Tyre and Sidon and Caesara Philippi, without preaching and intent only on remaining unknown”. Schweitzer’s position in *The psychiatric study of Jesus* is therefore identical to the view he formulated when on military maneuvers nearly two decades earlier.

2.5.3 Critique of the three psychiatrists

Schweitzer asks: Is possible from the foregoing sketch of the life and self-understanding of Jesus, as well as many details that he could not take into consideration, to draw the sorts of conclusions that the three psychiatrists had reached? His answer, of course, is no. His introductory critique of the psychopathological method as applied to significant historical figures, and his comments on the psychiatrists’ naivete regarding sources, has already given reasons why we should be “highly skeptical” of these studies. But he proposes to go into the substance of these writings “in order to form a clear opinion” (Schweitzer 1948:53).

2.5.3.1 Source problems

He begins this critique by noting that the psychiatrists’ deductions from Jesus’ childhood and youth concerning his predispositions and development have no validity whatsoever. Luke’s story (2:41-51) of the behavior of the twelve-year-old Jesus in the temple is a case in point. All three psychiatrists focused on this incident, and Binet-Sanglé was inclined to find in it “the account of a hepephrenic

crisis” (Schweitzer 1948:53). (Hebephrenia is a form of schizophrenia characterized by childish or silly behavior, disorganized thinking, delusions, and hallucinations, usually beginning in adolescence.) Also, the Gospel of John must be completely discarded. Yet, it has allowed the psychiatrists to assume that we can follow Jesus’ mental development through the course of three years when, in fact, his public appearance was somewhat less than a year. With this three year time span, they could “draw a personality continually occupied with his ego, placing it in the foreground of his discourses, asserting his divine origins and demanding of his hearers a corresponding faith” (Schweitzer 1948:54). By amalgamating the portrait of Jesus in John with those of the older Gospels, in which Jesus does not speak of himself or of his dignity, the psychiatrists came to the conclusion that Jesus sometimes proclaimed himself the Messiah, and sometimes refrained from doing so, interpreting this conduct in terms analogous to those which are appropriately applied to paranoids. Also, whatever claims De Loosten and Binet-Sanglé make concerning Jesus’ ideas of persecution and inexplicable moods of depression, these are derived exclusively from the Gospel of John. So is Hirsch’s example of auditory hallucination (Jn 12:28-30) when Jesus hears a voice from heaven. The affected and unnatural manner of speaking to which Binet-Sanglé alludes, and which is frequently found in paranoid schizophrenia, is also peculiar to the Gospel of John (Schweitzer 1948:54).

In regard to the psychiatrists’ claims based on reliable texts – Matthew and Mark – both De Loosten and Binet-Sanglé emphasize the statements of Jesus’ own contemporaries that he was out of his mind, citing the effort of family members to restrain him because the people were saying that “he has gone out of his mind” (Mk 3:21) and the statement by the scribes from Jerusalem who claimed that he was demon possessed (Mk 3:22). The only inference we may draw from these verses is that the scribes wanted to discredit Jesus with the people, and that family members “perceive a change in him and are not able to explain to their satisfaction how it comes about that he sets himself up as a teacher and a prophet” (Schweitzer 1948:54-55). In addition, no one declares

that Jesus is beside himself because he considers himself to be the Messiah. After all, they know nothing whatsoever about this claim which he has kept to himself and only revealed to his disciples when he announced his intention to go down to Jerusalem.

All three psychiatrists emphasize Jesus' forty days in the wilderness, to which Mark 1:12-13 briefly alludes but Matthew 4:1-11 and Luke 4:1-13 greatly elaborate upon. Yet, "even if we assume the historicity of the sojourn in the wilderness," the claim that Jesus experienced "numerous hallucinations" is "a wholly vague hypothesis" that "allows them to affirm a hallucinatory phase in the development of his psychosis" (Schweitzer 1948:55). Furthermore, to call these historical utterances of Jesus hallucinations is arbitrary, and the psychological explanation that Binet-Sanglé advances to explain the origin of these alleged hallucinations is wholly artificial. Schweitzer (1948:44) has reference here to Binet-Sanglé's view that the hallucinations were caused by Jesus' excitability, which was exacerbated by the night, his solitude, and his abstinence from food and drink. "To offer with assurance such a mechanical explanation of the appearance of hallucinations even in a living patient with mental disease, a many-sided and comprehensive analysis of the individual would be necessary" (Schweitzer 1948:56). This is hardly possible on the basis of the wilderness account in Matthew. Since Schweitzer doubts the very historicity of the sojourn in the wilderness accounts, his critique of Binet-Sanglé's interpretation of the wilderness story is meant for readers who believe it occurred.

2.5.3.2 The diagnosis of paranoia

Schweitzer (1948:56) next takes up all three psychiatrists' contention, but strongest in Hirsch and Binet-Sanglé, that Jesus suffered from paranoia. He notes that the question of paranoia is one of the most difficult problems in modern psychiatry, and is still very far from solution. Controversies over the nature of paranoia are "in no small degree also a controversy over words". On the other hand, "A considerable number of the kinds of paranoia are sufficiently well known in the way they progress to permit a profitable discussion of

differential diagnosis among those who are concerned not with the words but with the facts”.

In addressing the application of paranoia to Jesus, Schweitzer makes a disclaimer. The purpose of his study is not “to express an opinion for or against the existence of any particular form of mental disease in Jesus, or to discuss a clinical diagnosis.” Rather, its purpose is “merely to test the elementary symptoms which the three authors have used to support their diagnosis for their historic authenticity, and in case this is established, for their clinical value” (Schweitzer 1948:56). The alleged symptoms are (1) delusions; (2) hallucinations; (3) emotional attitude; and (4) other characteristics. Each, he says, will be treated separately.

Before proceeding, however, he addresses the psychiatrists’ claims concerning the origins of Jesus’ paranoia. De Loosten’s view that it has a hereditary basis has “very little probability,” as his source for his claim that Jesus was a “hybrid” (Jewish mother, Roman father) is a second-century document of dubious value. Hirsch’s view that it may be traced to Jesus’ boyhood – suggesting that his unusual mental talents caused him to spend his leisure in the study of the Holy Scriptures, which contributed to his mental illness – has no reliable textual support either. It is unlikely that Jesus read the Torah as a boy, though he probably listened to it being read on Sabbath day. Binet-Sanglé’s citation of a large number of clinical observations of sick people who have suffered from religious paranoia is equally irrelevant. Such cases tend to be “hospitalized soon after the onset of the illness” and “these forms of mental disease are exactly the type which do not win supporters and disciples and found sects” (Schweitzer 1948:57). Their numerous hallucinations, catatonic symptoms, and the effects of dissociation also make them incapable of consecutive activity. Conversely, persons who suffer from delusions of persecution, as Jesus is alleged to have suffered, tend not to become dysfunctional and they very seldom draw the practical conclusion from their hallucinations and delusions of persecution that they should defend themselves, either legally or illegally, from their persecutors. If, in some fleeting moment, they do defend themselves, it

happens because of some state of excitement and not from conscious or logical inferences from the delusions themselves. Schweitzer wants his reader to keep these well supported clinical facts in mind as he considers the first, and most serious contention of the psychiatrists, that Jesus suffered from delusions.

- **The question of delusions**

Schweitzer (1948:59) begins this discussion of Jesus' alleged delusions by taking up the psychiatrists' views on how his paranoia developed once it was formed. While De Loosten speaks of a continually mounting progression of the illness, Binet-Sanglé and Hirsch regard the forty days in the wilderness as a dormant period and propose a later development to which it was connected. No one speaks of a period filled with ideas of injury and persecution. This is very striking, for clinical experience with paranoid patients indicates that these are characteristics of the first phase of this psychosis. What the psychiatrists present instead is a paranoia comprised largely of megalomania, centered around Jesus' view of himself as the Messiah. But such a one-sided form of paranoia is very infrequent, as delusions of grandeur are characteristically accompanied by corresponding feelings of persecution. Furthermore, the psychiatrists' view of either a mounting progression (De Loosten) or of successive stages (Hirsch, Binet-Sanglé) of the illness is not supported by the clinical evidence. While delusions of grandeur may persist for long periods of time, there is no progression as such. Thus, Binet-Sanglé's view that Jesus' delusions of grandeur progressed from belief that he was the Messiah-king, to the Son of God, to the Agent of God, and then to God Himself lacks clinical support.

If we set aside the progression claim, are there grounds for saying that his words and actions, those authenticated by historical criticism, indicate a "pathological distortion of the content of consciousness"? (Schweitzer 1948:60). Schweitzer says no, for "the ideas of religion which Jesus shares with his contemporaries and which he has accepted from tradition may not be considered as diseased, even when they appear to our modern view entirely strange and incomprehensible. De Loosten, Hirsch and Binet-Sanglé repeatedly transgress

this fundamental rule". Because they consider Jesus' understanding of himself as the future Messiah to be central to his delusional system, Schweitzer (1948:61) focuses on this aspect of Jewish religion, noting that "the Messianic expectations belong to the stock of late Jewish dogmas". Not all Jews believed that these events were imminent, but this conviction was widespread within the specifically Jewish movement that originated with John the Baptist. In Jesus' time, there were various views concerning the details of Messianic ideas. For example, it was not clearly attested in the apocalyptic and rabbinical sources that the Messiah must suffer. But this idea becomes more plausible when, as some believed, the Messiah would experience an anonymous life on earth before his period in glory. In that case, he would have to suffer with the chosen the misery that preceded the Messiah.

Also, the oldest Messianic tradition held that the Messiah was to be a member of the royal family of David. As the "oldest traditions" affirm that Jesus was a descendent of David, it is perfectly understandable that he might come to believe that he was destined to become the future Messiah, especially if he belonged to the community that believed the Messianic Kingdom was imminent. Furthermore, when the Messiah is called the Son of God, this has nothing to do with descent from God in any metaphysical sense, as occurs in subsequent Christian theology: "The Son of God is only a title that indicates that his place of honor originates in God. In this sense the Jewish kings were already the Sons of God" (Schweitzer 1948:62).

Thus, when Jesus' view of himself as the coming Messiah is seen in context, the claim that it was delusional has no basis. His so-called "delusions of grandeur" and "paranoid ideas of persecution" are perfectly understandable within the context of ideas to which he, as a member of John the Baptist's community, would have subscribed. Of course, his view that, of all living descendants of David, he was the coming Messiah was certainly "a striking thing." But what makes it striking is not that a carpenter's son would believe that he is the future Messiah, for the apocalyptic view explicitly required that the future Messiah would be a nonentity in this life: "He who was to occupy the highest

place in the future world should here in the natural course of the world belong to the despised and common people. Therefore, only a descendant of David living in lowly poverty could be considered as the possible future Messiah” (Schweitzer 1948:63). Moreover, “If the end of the world were thought of as being very near, then it must be that this man had already been born and had to be sought within the generation which was to experience the end of the era” (Schweitzer 1948:63). An already born lowly carpenter who was a descendent of David fit the Messianic portrait. How many others met all three criteria is impossible to determine, but they were a finite number. So, it was not unreasonable for Jesus to become persuaded that he was, in fact, the coming Messiah.

Still, it *is* remarkable that he applied the messianic prophecies to himself. Why he did so is largely inaccessible to us from the available sources. Schweitzer chooses not to speculate on this. But what the sources *do* tell us is that paranoid ideas of injury and persecution never arose, for the conviction that he was to suffer derived from his belief that the coming Messiah must suffer along with the chosen when the apocalyptic era began. The change in his views in this regard was “conditioned by outward circumstances” – his disciples’ return, the death of John the Baptist – and represents “completely logical consequences in harmony with the total picture” (Schweitzer 1948:64). The change is one in “the notion of suffering.” Jesus no longer assumes that “he is to suffer the ‘woes of the Messiah’ together with the chosen ones (his supernatural character already evident). Instead, he believes by virtue of his suffering the others will be spared the suffering they were to have gone through” (Schweitzer 1948:64). There is nothing inherently paranoid in either view. Moreover, the change in his views from believing that all the chosen will suffer, including himself, to the view that through his suffering the others would be spared, is no indication of a “progression” in his alleged paranoia. In fact, this “modification of his views presupposes a susceptibility to influence which does not accord with the forms of paranoia which develop in accordance with a firmly established type” (Schweitzer 1948:64). That is, it is typical of paranoia that external circumstances have no appreciable effect on the delusional system.

Moreover, there is no overt antagonism toward others, which is a common feature of paranoia. Of course, Jesus had enemies and opponents because he spoke out against the narrow-minded and external piety of the Pharisees. But in relation to these opponents, who are real and not imaginary, he conducts himself in a fashion diametrically opposite to the conduct of a sick man with a persecutory trend (Schweitzer 1948:65). Unlike sick persons who believe themselves to be persecuted, he does not remain inactive and limit himself to a defensive attitude. Instead, he seeks by actions which have a provocative character, such as driving the lenders and money changers from the forecourt of the temple and the discourses against the Pharisees, to bring on a conflict with the authorities, thus forcing them to take steps against him, until “in the end he brings the high council to the decision to get rid of him even before the festival” (Schweitzer 1948:65). Schweitzer rejects the view that this effort to achieve his own death is a “morbid self-sacrifice” reflecting a diseased mind, for “this sacrificial death represents a necessary constituent part in the Messianic thought and action of Jesus” (Schweitzer 1948:65).

- **The question of hallucinations**

Schweitzer (1948:65) next takes up the question of hallucinations. Once again, he focuses on the source issue, noting the degree to which the psychiatrists depend on the Gospel of John, “doing great violence [even] to this material”. He also challenges Binet-Sanglé’s detailed discussion of the auditory hallucination in Gethsemane, contending that “we are dealing here with a legendary elaboration of the scene which precedes the arrest” (Schweitzer 1948:66). Of greater importance to the hallucinatory theory, however, is the forty day sojourn in the wilderness. But this, too, must be set aside as these accounts are also unhistorical, belonging “to the prehistoric legend,” as Strauss “has already rightly remarked” (Schweitzer 1948:66).

What about the accounts of Jesus’ baptism? These are also of doubtful historical validity. Jesus emerged into the light of history for the first time on the day that he appeared as a preacher in Galilee, and “everything that comes before

that belongs to dark and uncertain tradition” (Schweitzer 1948:67). The voice from heaven sounds remarkably like Psalm 2:7 – “You are my son; today I have begotten you” – which is usually interpreted in a Messianic sense. Yet when he discloses his messiahship to his disciples (Mk 8:27-30), Jesus makes no mention of his baptism. Also, the story of the transfiguration (Mk 9:2-8) does not point to a hallucination of Jesus’. Instead, the earliest tradition of the scene points to Peter, who also “has the first vision of Jesus after his death” (Schweitzer 1948:67). Of course, by thus shifting the focus from Jesus to Peter, Schweitzer implies that Jesus associated with men who had hallucinatory experiences.

If we were to assume that the baptism hallucination is authentic – Schweitzer (1948:67) thinks it cannot be categorically ruled out – even Binet-Sanglé recognizes that emotionally colored hallucinations “are not to be found only in the mentally diseased.” They also occur “in individuals who are very excitable emotionally, but who nevertheless can still be considered as fitting entirely within the category of healthy people”. We should also keep in mind “the great excitement which rose with the expectation of the immediate coming of the end of the world” and its role in facilitating “the rise of hallucinations in individuals predisposed to them” (Schweitzer 1948:68).

- **Emotional instability and other symptoms**

Schweitzer (Schweitzer 1948:68) next takes up the view of both De Loosten and Binet-Sanglé that Jesus’ alleged emotional instability was “of a morbid kind.” The first question is whether emotional instability can be substantiated at all.

Admittedly, as presented in the Gospels of Matthew and Mark, there appears to be “no consistent ordered activity” in Jesus’ public ministry. It seems to dissolve “into a rather disordered running to and fro, in which he now appears on the east bank and now returns to the west bank, until in the end he takes himself off to the solitude of the north”. This disorderly itinerary and alternation between public activity and quest for solitude is sufficiently puzzling that one might be tempted to confuse it with emotional instability. But the explanation is quite simple. For reasons that are still in part perceptible on the basis of surviving sources, Jesus

sought to avoid gatherings of people. One of the principle reasons for this “is that he wished to shun the people because they brought the possessed and the sick from all sides in order that he might heal them. The encounter with the former especially was extremely distasteful to him as appears from significant details in Mark’s account” (Mk 1:34; 3:12). Schweitzer does not speculate as why this would be, but he would obviously reject the idea that the “possessed” were distasteful to Jesus because they reminded him of his own mental disease.

The only other “evidence” of morbid emotional symptoms that Binet-Sanglé and De Loosten put forward center on Jesus’ attitude toward his family and his seeming lack of sexual consciousness. As for absence of family loyalty, this can be explained by the fact that they want to take him home and obstruct his public ministry (Mk 3:21). Moreover, when he declares that the bonds knit between those who share a common faith in the imminence of the Kingdom of God are holier than blood ties, this is not accounted for psychopathologically. Instead, it is a “special point of view to be explained by perceptions contemporarily conditioned,” relating to the belief that in the Kingdom the usual claims of privilege based on blood lines will not be honored. As for the striking statements he made regarding eunuchs, this has nothing whatever to do with “morbid sexual feeling,” for shortly before this (Mt 19:3-9) he had “spoken about marriage in a very natural and affirmative way” (Schweitzer 1948:69). Moreover, the key to this “much discussed and much misunderstood saying” is provided by passages in the Old Testament and later Jewish writings. If Deuteronomy 23:1 rules that eunuchs are excluded from the religious community, the later, post-exilic prophetic writings (Is 56:3-5; Wisdom of Solomon 3:14) take a more accepting attitude toward eunuchs, promising them that “in compensation for their lack of posterity [they] will not only be made equal to the others in the expected future but will even be set above them” (Schweitzer 1948:70).

Jesus’ own opinions move in the same direction. He sees in the eunuchs “the despised ones who like the children are destined to honor in the Kingdom of God because formerly they had been among the rejected ones,” and makes the rather “mysterious surmise that men have placed themselves in the class of

these despised ones in order to participate in that special future honor” (Schweitzer 1948:70). But this has nothing whatever to do with Jesus himself, as he expects a high position in the Kingdom of God through his descent from David. He does not personally identify with voluntary or involuntary eunuchs, and his words about them “have nothing to do with sex feeling but are to be explained by the ideas found to be present in late Judaism” (Schweitzer 1948:70).

Finally, Schweitzer addresses the apparently senseless act of cursing the fig tree. This is a reflection of late Jewish apocalyptic expectations that even the natural world would participate in the transformation and become capable of a wonderful fertility. Thus, the Apocalypse of Baruch tries to imagine the future yield of a single grapevine. Schweitzer believes that the historical kernel of this story is a judgment against a tree that, by means of its rich foliage, deceived the future Messiah in his hunger. His judgment against it is therefore an anticipation of his future power over the natural order, similar to his decision in advance to appoint the twelve disciples who will have jurisdiction over the twelve tribes of Israel (Mt 19:28): “In these and similar words we have to do with promises and judgments which he thinks to carry out as soon as he is established in his Messianic power” (Schweitzer 1948:71). The cursing of the fig tree is merely one of a whole series of such utterances, and the “more they strike us as remarkable, the more understandable they are from the point of view of Jesus’ late Jewish ideas” (Schweitzer 1948:71).

2.5.4 Four basic conclusions

Schweitzer concludes his study with a very brief itemization of the results of his critique of the psychiatric studies of Jesus. It consists of four basic conclusions:

- The material [in the Gospels] which is in agreement with these books is for the most part unhistorical.
- From material which is certainly historical, a number of Jesus’ acts and utterances impress the authors as pathological because they are too little acquainted with the contemporary thought of the time to be able to do

justice to it. A series of wrong deductions also springs from the fact that they lack any understanding of the peculiar problems inherent in the course of his public ministry.

- From these false preconceptions and with the help of entirely hypothetical symptoms, they construct pictures of sickness that are themselves artifacts which, moreover, do not conform exactly with the clinical forms of sickness diagnosed by the authors.
- The only symptoms that may be accepted as historical and, thus, possibly be discussed from the psychiatric point of view – the high estimate that Jesus has of himself and perhaps also the baptism hallucination – fall short of proving the existence of mental illness.

These conclusions indicate Schweitzer's confidence that he has effectively distanced his own picture of Jesus, as that Jesus sees himself as the coming Messiah, from the psychopathological pictures formulated by the three psychiatrists. The first two conclusions focus on their lack of knowledge about historical matters, especially relating to sources and the late Jewish context within which Jesus' own views were formed. The third relates to the psychiatrists' own field, particularly their application of their own diagnostic categories in imprecise and invalid ways. But the fourth conclusion leaves the door open, if ever so slightly, for future psychiatric approaches to Jesus. It notes that Jesus' high estimate of himself and possibly the baptismal hallucinatory experience are discussable from the psychiatric point of view, not, however, as evidence of mental illness.

3. A RELIGION OF REFERENTIAL IDEAS

Of the two small openings that Schweitzer specifically mentions, I believe that Jesus' "high estimate of himself" is the most promising, as it has direct bearing on the question of whether he was delusional (i.e., reflecting an alternation of megalomaniac and paranoid ideation). The best way to approach this subject, however, is to focus on what psychiatrists then and now have called "ideas of

reference” or “referential ideas.” As noted earlier, Hirsch cited instances in the Gospel of John where Jesus is said to have ascribed to himself the predictions of prophets. In so doing, he “manifests one of the central peculiarities of paranoids, who apply to themselves everything possible that they see or read” (Schweitzer 1948:41).

Contemporary psychiatric diagnostic protocols for paranoid type of schizophrenia and for delusional disorder include ideas of reference or “referential delusions.” As *The Diagnostic and Statistical Manual of Mental Disorders* (1994:275) published by the American Psychiatric Association notes, such ideas of reference may involve the belief that certain gestures, passages from books, newspapers, song lyrics, or other environmental cues are specifically directed at oneself, or that random events are of special significance, and the interpretation of these events is usually consistent with the individual’s delusional beliefs.

What makes Jesus’ case different from contemporary diagnoses of paranoid schizophrenia and delusional disorder, however, is that ideas of reference were prevalent in Jesus’ sociocultural milieu. If the sociocultural milieu itself promoted ideas of reference, what effect does this have on the psychiatrists’ claim that Jesus was delusional because he believed that he was the coming Messiah referred to by the prophets? In effect, this is the nub of Schweitzer’s (1948:72) argument that the psychiatrists “are too little acquainted with the contemporary thought of the time to be able to do justice to it”. Significantly, *The Diagnostic and Statistical of Mental Disorders* (1994:281) agrees. As its description of paranoid schizophrenia notes, “Ideas that may appear to be delusional in one culture (e g, sorcery and witchcraft) may be commonly held in another. In some cultures, visual or auditory hallucinations with a religious content may be a normal part of religious experience (e g, seeing the Virgin Mary or hearing God’s voice)”.

This suggests that the psychiatrists’ claim Jesus was delusional because he held ideas of reference about himself would need to be set aside on the grounds that only Jesus’ own contemporaries would be in a position to judge

whether or not such ideas are delusional. In fact, if we assume that there was general agreement among those who cared about this matter in his own day that the Messiah had not already come, then there is nothing in principle to preclude someone then living from believing that he was the Messiah. It would be an entirely different matter if Jesus had claimed to be the Roman Emperor. On the other hand, given the great importance the society ascribed to this belief in the coming Messiah, it would be perfectly understandable if the question of whether Jesus is delusional would become a matter of controversy among his own contemporaries. The controversy would not be whether “ideas of reference” are inherently delusional, but whether Jesus is self-deluded when he ascribes the Messianic prophecies to himself. Significantly, Schweitzer believes that suspicions Jesus may have been mentally ill had nothing to do with “ideas of reference.” Rather, his family’s suspicions concerned their perception of a change in him that they could not explain, and the scribes’ allegations were politically motivated. While the issue of who he believed himself to be came up at the trial, the allegation that he claimed to be the coming Messiah did not result in the official judgment that he was mentally insane (i e, self-deluded).

In *The historical figure of Jesus*, E P Sanders (1993:267) cites an episode which occurred about thirty years after Jesus was executed in which another Jesus, the son of Ananias, went to the temple during the Feast of Booths (Tabernacles) and proclaimed the destruction of Jerusalem and the sanctuary. This action led to his being interrogated and flogged, first by the Jewish authorities, then by the Romans. He answered questions by reiterating his dirge over the city, and was finally released as a maniac. This indicates that Jesus’ own contemporaries had their own methods and criteria for judging a person sane or insane, and the very fact that Jesus was executed suggests that he, unlike Jesus, the son of Ananias, was considered sane, that is, not suffering from delusions. Instead, the authorities evidently believed that he was exploiting the tradition of referential ideas for his own political self-aggrandizement.

In a sociocultural milieu in which ideas of reference were not considered inherently delusional, their use would need to be judged on a case-by-case basis,

and it is very unlikely that there could be any consensus as to the validity of an individual's expression of them (e.g., attribution of prophetic writings to himself). Those who believed Jesus was not the coming Messiah might say that he was deluded because there were things that were true about him that disqualified him from possible consideration as the coming Messiah. Others, however, might contend that he was not deluded because the belief that someone else was the coming Messiah was itself an error, or that the evidence presented to disqualify Jesus was itself erroneous or even lent support to the claim that he was the coming Messiah. The very fact that the issue could be debated, however, indicates that ideas of reference were not held to be inherently delusional, as would be the case if one of our contemporaries were to assert that he is Napoleon.

To someone who did not believe in the Messiah idea, such debates would seem rather pointless. But for someone who took the idea with great seriousness, such debates were hardly nonsensical or inconsequential. This is precisely the sociocultural context that the Gospels manifest. When Jesus is reported to have asked his disciples who the people claim the Son of Man, evidently a reference to himself, to be, they answer, "Some say John the Baptist, others say Elijah, and others Jeremiah or one of the prophets" (Mt 16:14). No one says, "He is the carpenter from Nazareth." Instead, the question is with which of these predecessors is Jesus to be identified, and are any of these attributions valid or true?

In short, if Schweitzer (1948:72) emphasized that Jesus' views were based on "the contemporary thought of the time", ideas of reference were an integral part of Jesus' own world view and figured prominently in his own self-understanding. Such ideas of reference were implicated, for example, in Schweitzer's contention that Jesus viewed the death of John the Baptist as signaling the imminence of the Kingdom of God, for in John "Jesus had recognized the Elijah who had been promised for the last days" (Schweitzer 1948:53). As Malachi 4:5 puts it, "Lo, I will send you the prophet Elijah before the great and terrible day of the Lord comes." Another belief was that an ordinary

person might be a supernatural being incognito. This is suggested in Schweitzer's (1948:63) view that Jesus "regarded himself as the man who would enter upon the supernatural inheritance of the family of David".

Schweitzer (1948:63-64) claims that a "psychological analysis of this attitude" on Jesus' part "is not possible for reasons already discussed," namely, that Jesus based this view of himself on the apocalyptic view of late Judaism. The most that can be said is that "the exaggeration of an idea does not in itself justify our considering it the manifestation of a psychosis". If by "psychological" Schweitzer means viewing this attitude of Jesus' as a sign of mental illness, I would certainly agree. This does not, however, rule out "psychological analysis" altogether. If it did, one need only claim that an idea or habit of thought is already present in the culture and thereby checkmate any effort to gain a psychological understanding of this idea or of the person who holds it. Gaining such understanding might begin with an imaginative projection of ourselves into Jesus' own religio-cultural milieu. If we ourselves lived in a social context in which there was widespread belief that someone known to us might be the reincarnation of a historical personage or a supernatural being incognito, this would create the very ambiguity and intrigue that the Gospels manifest. This intrigue is due largely to the fact that nothing is quite as it seems. John the Baptist *might* simply be a prophet in his own right. On the other hand, he *might* be Elijah and, if so, the prophecy of Malachi 4:5 applies directly and immediately to him. Similarly, Jesus *could* simply be another prophet in his own right. Then again, he *could* be the coming Messiah.

In other words, an individual may be the person he is known to be--the carpenter from Nazareth – and nothing more; or he might be this person and someone else as well. He might wonder if he actually is this other "person" and ask for evidence from God one way or the other. Or others might say that he is this other "person" and ask him for confirmation of their belief. If he says that he believes he is this other "person," he is likely to be challenged to prove it or be accused of being an imposter, guilty of false self-representation. In either case, it is not the fact that he is "the carpenter from Nazareth" that is being challenged

(as may happen, for example, when someone falsely claims that he has had medical training and performs surgeries on the basis of this false claim) but the fact that he is this “mysterious other.”

I doubt that we can fully appreciate the full psychological impact of the fact that “ideas of reference” were integral to the religious culture in which Jesus lived. In our culture, we assume that someone who believes that he is someone else is mentally ill. We have difficulty imagining a criminal trial in which a person is asked if he believes he is someone else. Should this occur, we would assume that its purpose is to establish that this person is mentally incompetent to stand trial. Yet, this is precisely what the Gospel writers claim happened to Jesus before he was taken out to be executed.

Conceivably, everyone knew that when they entertained ideas of reference, they were not speaking literally but metaphorically, that John the Baptist is not literally Elijah come back from the dead but that John is reminiscent of Elijah or that Elijah’s spirit lives in John. It appears, however, that the line between metaphor and identity is a fuzzy one in this religious context, and there is little difference between Jesus asking the disciples to “compare me to someone and tell me whom I am like” (Th 13) and the query at Caesarea Philippi, “Who do people say that the Son of Man is?” and “But who do you say that I am?” (Mt 16:13-17).

Then, there is the added element of secrecy. Whether this element goes back to Jesus himself or originated with the Gospel writers, the idea that an ordinary man is a supernatural being incognito is itself a remarkable notion. But the idea that he was aware of having this other “identity” while keeping it to himself adds another level of ambiguity and intrigue. The Gospels create a picture in which there is not only praise for those who are able to “see” what others cannot see, but also suspicion, distrust, errors in discernment, and even disillusionment. Individuals were continually in danger of being perceived as imposters, false claimants, opportunists, and dupes.

What does all this mean for a psychological perspective on Jesus himself? As Schweitzer convincingly argued, the view that Jesus was delusional fails to

take the sociocultural context into consideration. Nonetheless, there is something quite odd, at least from our own vantage point, about a religious environment in which “ideas of reference” play such a prominent role. It is quite appropriate to ask what it may have been like to live in a religious culture in which “ideas of reference” were encouraged and even rewarded. How does it affect the individual who believes that he has an identity other than his socially ascribed identity? And, if it is not a delusion, what would we call the psychological process involved? A useful key to answering these questions is precisely the ambiguity noted above between a *metaphorical* self-reference and one that claims an *identity* that is not one’s socially ascribed identity. It is the “fuzzy line” between these two that the concept of “the fictive personality” takes into account and the “delusional” concept does not.

4. THE FICTIVE PERSONALITY, OR, ON NOT BEING WHO THEY SAY YOU ARE

If the assumption that Jesus’ self-identification with the coming Messiah is *ipso facto* evidence of mental illness needs to be set aside, is there another psychological concept or theory that is applicable to this self-identification? Schweitzer’s (1948:45) view that Jesus had a “high estimate of himself” is suggestive in this regard, especially if it is linked to his observation that the Gospel of John paints a portrait of Jesus that is “in the main *a freely imagined personality* who is designed to improve and supplement the Jesus appearing in the first three Gospels” (my emphasis). If we shift the focus from the author of John’s gospel to Jesus himself, might we not say that Jesus himself may have been the author of “a freely imagined personality,” one that accorded with his “high estimate of himself”? If so, the psychoanalytic concept of the “fictive personality” then becomes relevant to the historical Jesus and, specifically, to the role that referential ideas played in his own self-understanding.

Jay Martin (1988) explores this phenomenon of the fictive personality in the writings of psychoanalytic thinkers from Alfred Adler to Heinz Kohut, and cites the cases of several of his patients who lived fictive lives. One patient operated

on the theory “that the world had three shapes, corresponding to her three favorite books – *Little women*, *Gone with the wind*, and *The wizard of Oz*. One had only to select the appropriate book and passage to interpret whatever aspect of the world a problem brought to hand, and the way of dealing with it would become evident” (Martin 1988:74). The difficulty with her theory was that her way of dealing with the problem often did not work, yet she insisted that “the ‘key’ remained right, though the world might be wrong” (Martin 1988:74). The situation began to change, however, as she continued in psychoanalysis. Formerly, she “had treated the world as *if* it were real; now, in psychoanalysis, she began to come from behind the veil and live in the world’s reality” (Martin 1988:76). A complaint she often voiced was that psychoanalysis “had robbed her of the ability to live her other fantasy lives” (Martin 1988:76). Yet, interestingly enough, she did not entirely abandon fictions but instead began to use them differently. She learned to make a “crucial distinction between fantasies that supplant reality and fantasies of power that helpfully release anxiety” (Martin 1988:76). This is also the crucial distinction between a delusional person – whose delusion supplants reality – and one who has formed a “fictive personality,” one that is inherently empowering in one’s dealings with the world.

In *Jesus: A psychological biography* (Capps 2000:165-217), I argued that Jesus’ healing ministry was based on the “disabling” of the anxiety that disabled the person who was diseased or incapacitated. In a similar way, Martin suggests that these “fantasies of power ... helpfully release anxiety.” When one adopts a delusional system, there is no such “release of anxiety.” In fact, the delusional system *increases* one’s sense of anxiety. In psychiatric terms, one becomes paranoid. This is not what appears to have happened in Jesus’ case. Whether the “coming Messiah” for which Schweitzer contends, or the “Son of Abba” for which I contend in *Jesus: A psychological biography*, his “fictional personality” enabled him to live “beyond anxiety” (Erikson 1950:403-424). Thus, his “fictive personality” was of a piece with his healing ministry.

In addition to the release of anxiety, however, a “fictive personality” may also empower one to challenge the ability of one’s socially ascribed identity to

determine one's fate in life (Van Aarde 1997; 2001:119-127). In *Jesus: A psychological biography*, I cited Erik Erikson's (1959) case in *Identity and the life cycle* of a young woman of middle European descent who assumed a fictive Scottish identity. When Erikson (1959:41) asked her how she managed to marshal all the details of her early "life" in Scotland, she replied, "Bless you, sir, I needed a past". In affording her a past different from the one she had actually lived, her "fictive" identity gave her the necessary leverage she required to change her fate (Erikson 1964:183). Thus, it promised a different future as well.

Delusional systems tend to paralyze or render impotent those who have them. Persons are under their delusions' control. In contrast, a fictive personality may take the form of a fantasy of power that makes a real difference in how this person engages the world's reality. Schweitzer's (1948:65) view of Jesus as active and as exercising control over events is relevant in this regard:

In relation to these opponents, not imaginary but genuine, Jesus conducts himself in a fashion diametrically opposite to the conduct of a sick man with a persecutory trend. He does not remain inactive and does not limit himself to a defensive attitude like so many of the sick who believe themselves possessed, but rather seeks by actions which have a provocative character ... to bring on a conflict with the authorities and to force them to take steps against him, until in the end he brings the high council to the decision to get rid of him before the festival.

Jesus' own contemporaries could still, if they chose, decide that he was delusional. In the terms of their cultural worldview, he might be viewed in that case as demon possessed (a religious assessment) or as a false claimant (a political assessment). The psychoanalyst may, however, view his self-proclaimed identity as the coming Messiah or as the Son of Abba as a fictive personality, one based not on fantasies that supplant reality but on fantasies of power that helpfully release anxiety and alter one's fate. Such fantasies of power, especially if used to empower others, may be dangerous, even as a delusional person with a "persecutory trend" may be dangerous to others. But Jesus' response to John the Baptist's emissaries who had relayed his question whether he was the one to

come or should he wait for another – “Go and tell John what you hear and see: the blind receive their sight, the lame walk, the lepers are cleansed, the deaf hear, the dead are raised, and the poor have good news brought to them” – indicates that his fictive personality mainly posed dangers for the powers that be.

Works consulted

- American Psychiatric Association 1994. *Diagnostic and statistical manual of mental disorders*, 4th ed. Washington, DC: American Psychiatric Association.
- Capps, D 2000. *Jesus: A psychological biography*. St. Louis: Chalice.
- Erikson, E H 1950. *Childhood and society*. New York: W W Norton.
- Erikson, E H 1959. *Identity and the life cycle*. New York: W W Norton.
- Erikson, E H 1964. *Insight and responsibility*. New York: W W Norton.
- Joy, C R 1948. Introduction: Schweitzer's conception of Jesus, in Schweitzer, A, *The psychiatric study of Jesus: Exposition and criticism*, translated and with an introduction by C R Joy, and a foreword by W Overholser. Boston, MA: The Beacon Press.
- Martin, J 1988. *Who am I this time? Uncovering the fictive personality*. New York: W W Norton.
- Rollins, W G 1999. *Soul and psyche: The Bible in psychological perspective*. Minneapolis, MN: Fortress.
- Sanders, E P 1993. *The historical figure of Jesus*. London: Penguin.
- Schweitzer, A [1913] 1948. *The psychiatric study of Jesus: Exposition and critique*, translated and with an introduction by C R Joy, and a foreword by W Overholser. Boston: Beacon.
- Schweitzer, A [1906] 1968. *The quest of the historical Jesus: A critical study of its progress from Reimarus to Wrede*, tr by W Montgomery. New York: Macmillan.
- Strauss, D [1835] 1972. *The life of Jesus critically examined*, edited by P Hodgson, and tr by G Eliot. Minneapolis, MN: Augsburg Fortress.
- Taylor, E 1984. *William James on exceptional mental states*. Amherst, MA: The University of Massachusetts.
- Van Aarde, A 1997. Social identity, status envy and Jesus' *Abba*. *Pastoral Psychology* 45, 451-472.
- Van Aarde, A 2001. *Fatherless in Galilee: Jesus as child of God*. Harrisburg, PA: Trinity Press International.