

Bad Grades at School

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Abstract

This brief clinical report describes the treatment of a 10-year-old schoolboy who entered medical orgone therapy because of bad grades at school. The mother, a former patient of mine, was worried about her son's emotional state. In addition to performing poorly at school for the last two years, he was becoming progressively more isolated and no longer had any friends. Approximately one year of medical orgone therapy provided a complete resolution of his symptoms. Central to the effectiveness of this treatment is the biophysical character diagnosis and the release of emotional stasis, blocked, dammed-up energy, the source of his presenting symptoms.

Presentation and Treatment

At initial consultation, Paolo was a 10-year-old boy, tall, slim, and of pale complexion. His mother described him as a "solar kid" (happy and open) who had become shy and secluded during the past two years, which coincided with a drastic deterioration in his school performance. In fact, in seventh grade he had failed seven of eight subjects. His teacher described him as a quiet, well-mannered but totally inattentive child.

During first evaluation, Paolo appeared shy and inhibited. His face looked pale and mask-like, his mouth contracted. His chest was almost immobile with superficial respiratory movements and his pelvis appeared stiff and stolid, even heavy. When asked to kick and hit he did so with an unexpected vitality but was unable to vocalize. He coped with this difficulty by acting somewhat silly and awkward. My initial diagnostic impression was paranoid schizophrenic character.

In subsequent sessions I encouraged him to move and to vocalize, which he did with some pleasure but little enthusiasm. His attitude of

aloofness, however, was evident. He was polite and well-mannered and he did everything I asked of him. He kicked, yelled and hit, but he was emotionally absent, uninvolved and passive. The only way he could express himself was through a distant and superficial attitude of silliness. For example, when I tried to confront him with his incredibly poor school performance he responded with a smile and superficial comments such as, "I don't know, the teacher decided so, etc." I began to address his aloofness as well as his silliness and helped him to shout louder and hit harder. His spontaneous reaction was arching of his back.

By the end of the seventh grade I had seen him for twelve sessions. Although his unsatisfactory grades had continued, the school director decided to allow him to graduate to the eighth grade. As therapy progressed his emotional expression became more intense, his voice louder, his punching stronger, and while arching his back he shouted, "No, no, I decide what I want. No! No!" This type of discharge, marked by a constant progression in intensity and strength, continued for 21 sessions over a period of 14 months. By the 18th session improvement during treatment was obvious: he was more autonomous, emotionally more present and assertive. At the same time his mother reported a distinct amelioration of his attitude at home: he was more present and emotionally available, and participated in family activities, and so on. And for the first time there was some improvement at school. By the twenty-first session his eighth-grade teacher reported an astounding improvement in his grades—in all subjects he had satisfactory grades. Since then Paolo has continued in medical orgone therapy with progressive improvement in his emotional expression and school performance, much to the satisfaction of both himself and his mother.

Discussion

This case illustrates the importance of the character diagnosis in helping patients overcome their emotional as well as behavioral symptoms (Reich). At 10-years-of-age, Paolo, a paranoid schizophrenic character, already demonstrated a strong tendency to be aloof, distant

and emotionally uninvolved to the point that his work capacity was grossly inhibited, as evidenced by his bad grades at school. During therapy sessions his aloofness was continually pointed out to him and he was helped to counter it by physical as well as emotional expression. Slowly, this character attitude, a superficial manifestation of a deeper, unconscious, bioemotional withdrawal, diminished. Paolo became more aggressive, assertive and outspoken with an amelioration of his appearance. He was no longer pale, his face was more mobile and expressive, and his general attitude was less inhibited and shy. This was accompanied by an increase in his work capacity and a substantial improvement in his grades. From a bioenergetic perspective, Paolo was helped to gradually expand and maintain a progressively higher level of charge and functioning, both emotionally as well as socially.

References

Reich, W. 1933. *Character Analysis*. London: Vision Press, 1976.