Processes Of Integration in the Newborn and the Schizophrenic*

The problem is this and we shall try to understand it and to solve it if possible: In what way does the disturbance in the eyes hook up or connect with the formal disturbances of perception in schizophrenia? You understand that the schizophrenic process is distinguished from all other processes by a disturbance of perception, of the formal element in the bioenergetic functioning — not the contents, but the way the schizophrenic experiences the world. Now, how is that connected with the eyes? And how do the eyes connect with the formal disturbance?

Do you understand my problem, the question I am posing? I wonder! You see, in the schizophrenic we have two things. One is a formal disturbance of perception and integration. The other is the eye symptoms which are so pronounced. These two groups are hooked up in a certain way, historically and dynamically. The first is a disturbance of the total function. There is disintegration and dissociation of perception from the excitation. (We have already discussed that, the split, the block between perception and excitation. That's perfectly clear.) That's one symptom. And the other is the eye symptom, which is a somatic thing. Now how do they hook up. Can you guess? If you have worked with schizophrenics then it's easy; if you haven't, then it's hard.

I shall pose the problem once more, briefly. On the one hand, you have a general disturbance in schizophrenia that is specific for every schizophrenic type, whether hebephrenia, catatonia, or paranoid — in every case. You have this formal disintegration, disintegration of speech, personality, cohesion,

*Transcription of a lecture given by Reich to his physician students in 1949 or 1950.
and so on. We can reduce that to a split between the function of perception and the objective excitation. It means they don’t connect with each other somehow. And the other disturbance is a disturbance in the ocular segment which we think has something to do with the oral orgasm, with the facial orgasm in the infant. Is everybody clear about the problem as posed? Because that leads us right through to three things: first, to the schizophrenic process proper; second, to the development of the infant; and, third, to the orgastic disturbances in the end phase.

Now let me clarify this. When the infant is born what is its organismic status? What’s the state of the organism?

Student: Well, it’s very diffused.

Reich: Would you call it diffused? What do you mean?

Student: It’s not integrated.

Reich: It’s not integrated.

Student: That’s not the entire truth though. The schizophrenic never was integrated.

Reich: Now wait a minute. The schizophrenic was more integrated in any case than the infant, much more.

Student: But underneath something was still

Reich: Now wait a minute. What do you mean when you say “underneath?”

Student: In some way he was never fully integrated — as far as we know, as far as we can trace him back.

Reich: Good. I accept that. Now may I give you an example to illustrate it. In one case, you have together in a heap lumber and bricks and steel beams, and everything that makes a house. In the other case, you have a building which is in the process of disintegration. It has a crack, a deep crack through its structure. Now you wouldn’t say that’s the same, Doctor. In the one case, nothing has been integrated yet. In the other, there is a crack. It was predetermined by something that happened in childhood. Right? This crack comes from some phase back in childhood. And we
can assume that the crack or split in the structure which is at the core of the disintegration in the schizophrenic can be traced back to the phase in infancy where the integration took place. Is that clear?

Student: To go back to your example of the construction, something went wrong with the foundation.

Reich: “Something went wrong with the foundation.” That’s a very good expression for it. What we are doing here now is very important. Not only are we on the way to really understand the schizophrenic disintegration, but more than that, we shall learn something about the infant — what it means to integrate, to become a whole, one functioning whole. The infant is not a functioning whole. It’s a sum of parts. And each part functions separately; the hands here and the legs there and the stomach for itself. The brain doesn’t function very well at all yet, especially the grey matter. And the eyes — Let’s bring in the eyes, which play such a great role in the later schizophrenic. What is the eye situation in the newborn infant? That’s very important because if we go ahead with our infant research center,* with the preventive service center, then these things will play a central role in teaching mothers and nurses and social workers to understand what goes on in a child during the first two months. That’s about the time when integration of the total organism runs its course. Two, three months, maybe.

Are the premises clear? Any questions, please? Are there any questions? Nothing? There must be something.

Let’s go to the baby now. “Integration.” What is that? Give a very clear example of the process of integration in a newborn infant. Try to find your examples well. Pick your examples so they really illuminate a theoretical position. I want you to be clinical now. What do you see? Observe the infant and give me

Student: As the process of integration is going on, one day the infant will put its hand out and look at it and realize that it’s part of it.

Reich: That’s right.

Student: Then another part of the body — a foot.

Reich: That’s right. Give another practical example. What would it do with the foot? What could it do?

Student: Put it in its mouth, or feel it, touch it.

Reich: That’s right. To begin with, the organs move senselessly around. The mouth moves here, the foot moves there, and the hand moves here, and the eyes move somewhere else. That means the eyes are not coordinated; they don’t focus. You know that.

Student: Yes.

Reich: Then one day these different functions, which are single functions — They are total, too, of course. But they are total only with respect to what? The hand motion, for instance. Of course the total hand moves. But it’s total only with respect to the hand, to the arm, to the organ. Just as the stomach moves as a stomach. Each eye moves for itself as a total organ. But what is not there? The synchronization.

Student: Should we not begin with the energy function first?

Reich: That is energy function, Doctor. What do you mean when you say, “Should we not begin with the energy function?”

Student: Let’s say there’s a reaching out with an eye, or with a mouth — reaching out, a field there. There’s an excitation in a definite organ.

*Reich refers to the Orgonomic Infant Research Center, a project he started in 1949 to study infant development. [Eds.]
Reich: Yes, of course. That's right. You are quite correct. You see, if we consider the different phases of development, then we must say that before such an integration after birth takes place something else has already gone on in the uterus. And that is the energy function, the orgone energy functions in the organism which form the embryo. Do you understand? What takes place first is an integration of what? In the uterus, prenatally.

Student: An integration of growth.

Reich: Yes. He is quite right. Integration of growth, an integration of somatic organs. That means a child couldn't live if its different organs wouldn't be integrated with each other. Now what is the difference between this integration before birth and the integration we've just talked about after birth, soon after birth?

Student: One is a growth integration.

Reich: That's right. It's integration which constitutes formation of the symmetric growth of the body. That's the point. The symmetric growth. If it were not integrated to begin with in the uterus, what would happen?

Student: As sometimes happens — malformation or death.

Reich: Malformations, malformations, yes. So that has taken place before. We are not speaking about this type of integration, with the problem of malformations in the physical realm, in the physical realm of growth. We are talking about something else. We have to distinguish different kinds of integrations in the growth of a baby. One is integration of growth (we can call it that way) until the organism is formed, though it's not quite completed because, for instance, the upper part of the organism is still much larger in the newborn baby than the lower part. But what we are talking about in connection with schizophrenia and the first disturbances of oral orgasm and the disposition for later schizophrenic breakdown has nothing whatsoever to do with the process of growth, with the coordination of growth. It has to do with coordination, with the process of coordination, but what kind? What would we call it? What does coordination there? Growth, or? Growth goes on of course, but it is coordinated already. The organism is on its way. What is not coordinated?

Student: I would say sensory function.

Reich: That's right. Sensory function. That's right. Only I would say it more completely: sensory-motor functioning. Sensory and motor functioning is not integrated. That means the organism as a physical unit is much farther ahead than the sensory-motor, and I would add to that, the function of perception. It means that an organism has constituents of growth, metabolism, energy, blood fluid, and so on. That's one thing. And the other thing is something quite different, a quite different quality, on a higher level, the function of — What would you call it? We called it sensory-motor function, but it's — Where does that lead? You see, the growth function stops at about eighteen or twenty years of age. Where does the other go? Where does it lead?

Student: It leads out into the world.

Reich: That's right. The other function goes into the relationship of the organism with the world, into the social field or biosocial field. Now, what is the coordination? How does it take place? You brought together the mouth and the foot or the toe, and the eye with the hand. Right? Then, there's the coordination between the two eyes. After two or three weeks, sometimes ten days, you see that some children's eyes begin to point, to fix. What has happened here?
Student: Something has synchronized.

Reich: What has synchronized, not “something.” What has synchronized?

Student: Well, the two eyes work together.

Reich: Work together. That’s right. Now, what has happened in the functional sphere? You know that the nerve — what do you call it? In German, it’s *scheiden*.

Student: The mylan sheaths.

Reich: Yes, that’s right. They’re not quite developed at birth. You know that.

Student: Yes.

Reich: They’re not quite developed at birth. Now that would indicate that the function of perception, of nerve function, and so on, has something to do with this coordination. That is, the coordination which furthers these functions. Why should that not be developed? We don’t want to go into that. The main problem is what happens when a child fixes its eyes for the first time on its own finger. What happens there? Let’s analyze that. It’s very important. What happens? First, the two eyes coordinate in looking. Yes?

Student: I feel that I can answer the question of what happens when the child begins to see its finger, but I’m confused about what happens when the two eyes begin to function together. I feel that here, with the eyes able to function, there’s been contact between

Reich: That’s the answer. Perfect. Perfect. There was contact. Contact. Please keep that word. That’s very good. Contact. Why is that word so important in this connection?

Student: Because it’s the basis of all functioning, of all unitary functioning.

Reich: Of all later contact functioning. The schizophrenic disease is characterized by lack of contact, by split contact, by withdrawal from contact, and so on. So these first contacts between a function in the organism, the eyes and a moving finger, for instance, are critical. Now what’s made contact?

Student: Two fields.

Reich: Two energy fields. That’s right. Two energy fields make contact. We can also express it in a different way. And that is, two motions, two movements make contact. Two movements make contact. That moved, this moved. And then they met. And from now on, that will be the prototype of every later contact between eyes and motions.

Student: I would like to question this concept of two fields, two energy fields making contact.

Reich: Why?

Student: It’s one energy field, isn’t it? It’s the same field.

Reich: No. No. You see, here we are hitting a snag, or an apparent contradiction, in our understanding of the difference between the unity of an organism and its differentness, its inside differentness. We are a whole, and yet the liver is completely separated from the heart. Is that clear? The same thing with our mental activities. We are a whole; our perceptual activities function as one piece. Yet it’s different when I talk to you than when I talk to another student. That’s no contradiction. Therefore we say we have a multiplicity of things, of functions, within a unity. It doesn’t contradict. It’s one. (I wrote that up once.) The fact that there are one, two, three, distinctly separate built-in functions, like perception, excitation, and energy metabolism doesn’t contradict.

Student: They are variations of the same
Reich: They are variations of one thing. Here you have our functional scheme quite clearly expressed. So the child is a unity in its energy as a system. Yet that splits up into different functions. Now these functions, such as the eye and the hand movement, meet. And they make contact. I would suggest to keep the word “contact” very clearly in mind. The word “contact”. Just this word. “Making contact.”

Now what goes on? These two make contact. We see it. We can observe it. What happens to the child in that process? The child took a step. That’s clear. But a step toward what? What happened to the child, to the totality? We know what happened between the two movements. They made contact. What happened to the whole?

Student: They became an integral part of the whole.

Reich: Quite perfect. They became an integral part of the whole. That means, from now on, the eyes will follow every movement. A new function was born. Is that right? A new function! So in this contact between an eye movement and a hand movement a new function was born, namely, the function of fixing eyes on everything. Seeing. The function of seeing. But we still didn’t quite answer what happened to the total organism. Not quite. You answered a part of it. A new function was born in the whole organism which consists of the organic and the psychic function. Basically. From now on, seeing has set in. Seeing is a physiological, biological, biophysical function. Right? But something happened to the ego of that child. Before these two movements met, there was no awareness that such a thing exists or is possible. First the movement of the eye and the movement of the hand had to make contact with each other, and the new function of seeing had to be established before the ego of the child could make the next step. And that is being aware that it sees.

Student: There was perception in the first place, but this is an ego perception.

Reich: Of course, perception was there. But perception was on a low level. It was not connected with a function that didn’t exist yet. It couldn’t be. This new function of seeing, fixing your eyes on something and perceiving its form, shape, could not be there. This perception couldn’t be developed before that coordination in the body realm was performed. Is that clear? Now here, for the first time, in this example you have not only contact between eye movement and hand movement which is one part of the coordination. But that sets into motion a whole series of events. This contact between eye movement and hand movement influences the total organism. The total organism will, from now on, direct its eyes toward everything that moves. That’s the second coordination. Then the child must slowly become aware of the fact that it sees. Is there any doubt about that? Is there any gap here? There’s the coordination between the excitation of this unitary seeing and the awareness of it. Where are we driving now? Where are we going now?

Student: We’re driving toward the disturbance of this unitary functioning.

Reich: That’s right. But before we arrive at the disturbance of this unitary functioning between different movements coordinated into one and the awareness of this coordination, you must understand that the child has a quite different feeling of itself when it sees things and when it doesn’t see things. It’s a different self. How would that self compare with the self before it coordinated these movements? How would the self feel or be? Yes. Go ahead.

Student: Discoordinated.
Reich: Discoordinated. Why do you say discoordinated? It's still discoordinated in other respects. But the ego is more coordinated. It is a bigger self, it comprises more.

Student: More powerful, too.

Reich: That makes it more powerful. Its unity is greater. Now, let's get it all together. When it is born the child is one organic unity, but the functions, the single functions within this unity, are unconnected. Right? Each goes on its own. Now the coordination of movements begins. They make contact. Then the perception of these contacts, or the awareness of it, develops. And with that the whole organism becomes a more complete unity. The total organism becomes stronger in that it expands, not only physically in its growth, but in its awareness of what growth? Consciousness growth. Awareness. Consciousness of the self. Before, when these functions were separate and not coordinated, there was no awareness of the borderline between the self and the outer world, and the world streamed right into it. The mother's breast, the mother's warmth - it was all one. Now, the more this child, this newborn baby, begins to integrate its own self, what happens inevitably in its relations with the world?

Student: It feels a difference between itself.

Reich: That's it. The difference, or the awareness of the difference, between the self and the world grows to the same extent to which the self integrates. Is that clear? Quite clear? That means, all later schizophrenic projections, the loss of the borderline, the merging with the world, the hallucinations, whatever there is, cannot be understood unless we understand the way in which an organism integrates itself more and more, slowly, into a whole, and demarcates its own existence from that of the outer world. Right?

Student: How about memory?

Reich: I must be frank. I know nothing about it. We wouldn't know yet. You see, you must deduce such functions logically out of things you know. And we know nothing yet about memory. That was one of the great shortcomings in the Freudian psychology which Freud felt himself — that the main material was memories. They spoke about memories engraved in the system, etc. I don't know if you know the theory of Semon. He was a very famous man.

Student: Wundt?

Reich: No, Wundt was a mechanist. But Semon — There were many people, Semon, for instance, and others, who tried to approach the whole problem, not mech-
anistically, from the chemico-physical standpoint, but from a functional standpoint.

Student: Semon had the engrams.

Reich: The engrams. That's right. And the evocation of the engrams, and all those things. He played a very great role in European psychiatry, and he was very important. He influenced my thought very strongly. I have to appreciate that.

Student: Wasn't he mechanical in his approach?

Reich: Yes. He had engrams, engrams from the plasm, like imprints, which were then delivered again in memory.

Student: Nobody could prove there was any such thing.

Reich: That's right. That's right.

Now we have an approach to this problem. But let's go slow. Don't let's jump here. Besides, the memory in the schizophrenic is not usually or typically disturbed. It's disturbed in organic psychosis mostly. But the schizophrenic has a too good memory. Is that clear? So if you take this point in here, then memory doesn't quite fit yet. It will fit. It will fit. For instance, in connection with the contact function, I would like to bring in a very important field of functioning, realm of functioning. And that is scientific insight. What do we do here, right here, as living organisms? What do we do right now, for more than a half hour?

Student: We're integrating.

Reich: We're integrating. We are integrating different functions. We are integrating the function of the schizophrenic breakdown with the function of the growth of self-awareness in the infant. We are integrating two things which apparently have nothing to do with each other. That is scientific knowledge, organic sci-
entific knowledge. If you study or do searching, do research, what do you do? You integrate and unite different facts into an understandable unit. You do the same thing that your organism did in infancy with your organs or with your perception. It's only a continuation of that. The better integrated an organism is, the better it will function as an integrating organism. Is that clear?

Now, let's pass over to the schizophrenic crack, or split, which we mentioned in the beginning. How could such a crack in this structure occur? We have said before that when the schizophrenic breaks down he doesn't break down anew. He had a crack there right from the beginning, somewhere. It's like a building that has deep cracks through the foundation, and then it collapses. And that's the difference between a building which was already constructed and a building which has not been constructed where the materials are all still separated.

Student: Talking about the schizophrenic — His contacts have been limited. His consciousness

Reich: Wait a minute. You say "limited." What is limited?

Student: There's been a lack of contact.

Reich: Somewhere was a lack of contact. Yes. I will accept that. Yes.

Student: One could say that the cement between the bricks was defective in some way.

Reich: That's right.

Student: We were saying the greater the amount of contact the greater the consciousness, the greater the consciousness the greater the integrating forces. And here you have in the schizophrenic a lack of contact.

Reich: Before the breakdown?
Student: Yes.

Reich: It's not lack of contact. No, before he breaks down he has great contact. What has he? He has a weak spot.

Student: He's poorly integrated.

Reich: He's poorly integrated. I would say more definitely still — not only poorly integrated. The way you said it before, Doctor, was better.

Student: Things holding together are defective.

Reich: That's right. That means the cohesion between the different functions is weak. Now can you deduce the crack in the schizophrenic to a concrete defective development in the integration of the newborn baby?

Student: Deduce to what?

Reich: Deduce the crack, the weak cohesion between the functions in the schizophrenic, in the grown-up schizophrenic, who cracks wide open in the breakdown, to the infant, to the process of integration in the infant. Take a very concrete example. Where is the schizophrenic split preformed? Under what circumstances could that happen? Give me concrete examples. You can invent one, if you invent well. Fantasize. Go ahead.

Student: I would begin again with the functions of the energy. A withdrawal of energy in this segment.

Reich: Which segment?

Student: In the eye segment.

Reich: We are not in the eyes. We have to have the general before we have the special. We have to have the general. In infancy something must have gone wrong in the process of the separation of the self from the world. So that the borderlines are blurred. There is a doubt, like a question mark, in the inner self. Where do I end and where does the world begin? The newborn baby really goes through such a phase, actually. Now can you imagine that such a thing could happen if a child of two or three weeks, just in the process of integration, is beaten very severely? You give another example. Go ahead.

Student: I've experienced terrific longing, physical longing in my oral segment. The longing was so strong that I thought that a frustration at that moment would be just unbearable.

Reich: That's right. That's very good and I think a very pertinent example. Schizophrenia is expressed in the face mostly, eyes, mouth, the whole face. And I haven't seen a schizophrenic yet who didn't have a severe traumatic experience in the development of his oral longing. Not a single one, not a single one. Just as you describe it, Doctor. The schizophrenic is energetically stronger than any other type. There's a very strong push of energy outward. If that meets nothing outside, just nothing. There's no contact. Right?

Student: I thought to myself that the child would either crack, or he could attempt to armor in some way.

Reich: Can't armor yet. Can't armor. It could develop rage, screaming rage. And then it's being beaten, and so on.

Now with the eyes, with the eyes — They come in here. And we come to the crux of the matter. If there is such a lack of the melding together of the different functions, a weakness, and the eyes begin to twitch in an oral orgasm, a facial orgasm, in childhood, (And we can imagine that in these cases it occurs not only often but very strongly.) then the connection between the twitching and a severe traumatic experience in the development of oral longing...
is carried over into the later total orgasmic experience in puberty when the total organism should function, total convulsions. Let me repeat it now. Schizophrenia occurs mostly in puberty. You know that. Mostly in puberty. There’s a great upsurge when the orgastic function sets in. Why just in puberty? And on what ground? There’s a tremendous shock, or fear, or terror connected with eyes and mouth and twitching from early childhood, from babyhood. Then a breakdown can occur in puberty when the total organism begins to go into orgasmic contractions. Is that clearer now? I saw it in schizophrenics particularly. I would say in every single case, that the eyes are very much involved, very much involved. Not only in the disease, but especially in the end phases when the orgastic functions set in. Then something happens to the eyes. The eyes don’t go with it. The organism refuses, so to speak, to take the eyes into the total function, as if terror were connected with it. And there is terror in the eyes. A terror sets in in the eyes that prevents and contradicts the total function of the convulsions which should be pleasurable. And that seems to be specific for the schizoid character.

Student: I thought of something else in connection with this split. In terms of motion. You see, the body’s somewhat limited in its functions. The eye has the power to move.

Reich: Excellent, Doctor, excellent. That’s good thinking. Very good. What did you do now biophysically or bioenergetically? What happened to you now, Doctor? What happens to me all the time when I talk? The contact of two or three functions, the hook-up, the integration of two or three functions to the whole, into a unit, creates something new. Is that clear? Just as it goes on in growth and just as it goes on in integrated functioning in early childhood. That’s creation. That’s creation. The creative mind works that way by lucidity. What is lucidity? Lucidity is oneness or complete integration of different functions. The more functions you integrate, the more functions you have in one piece together hooked up with the common functioning principle, as we call it, the more complete is your understanding. That means knowledge, understanding, and so on, depend on these functions. And here the schizophrenic comes in again. He’s excellent in integrating. He’s intelligent. He knows so much. He integrates well. And just that is his danger. (I’ve tried to describe that in my case “The Schizophrenic Split.”*) His great intelligence, his high energy functioning which will call for a complete orgasmic involvement. Just that constitutes the danger. On what basis? On what ground? What constitutes the danger right there?

Student: He’s overwhelmed by it.

Reich: Yes, but what happens when he should go out and function with his whole brain fully? The eyes don’t go with it. The base of the brain doesn’t go with it. That means he’s dragged back, pulled back, like on a chain. And this contradiction between a very high energetic position, strong energetic charge, a high intelligence, a very strong ability to coordinate, to unite things (The schizophrenic’s mind can easily unite cosmic functions with religious questions, or mystical, or scientific - very easy for them.) and then, at the same time there is terror. In reaching out, he meets nothing. There is a crack. That’s underneath. So to conclude and to have it all together, we must say that the schizophrenic split or crack is centered in the head, especially two regions. One is the eyes connected with the base of the brain and the other is the mouth. Both, especially the eyes, go back apparently to the first two weeks or three weeks of

life when the newborn baby grasps the world, and begins to integrate the world, and to separate from the world. And the mouth, of course, because there's no doubt that in strong children you have these convulsions that occur three times, four times, or more often, during the first few weeks.

You can recognize the schizophrenic by his reluctance to let his eyes and the whole upper region swing within the rest of the total functioning. And technically there's one conclusion to be drawn from that. That's quite clear. Don't let them function fully in the pelvis unless the eyes are clear. Stick with the eyes. There are certain technical measures to that. Rolling the eyes, turning the eyes upward, showing fright. I don't know whether you can corroborate that, especially this here. I don't know why - this motion here. I feel half schizophrenic myself. [Laughter] Yes. Do it. Try it. Try it. Go ahead. Try it right now. Just go ahead and tell me that you don't feel schizophrenic. Go ahead, Doctor, go ahead. Do it.

Student: I've already tried it.

Reich.: Do you feel it now?

Student: Certainly. It's awful.

Reich: It's awful. It's terror. That means the sensation of terror is somehow connected with this here. Why? We don't know. We don't have to know all these things.

Now the difference between a schizophrenic structure in the head and a simple neurotic, a compulsion neurotic — A compulsion neurotic is dull. Dull eyes. No expression at all. Nothing is burning there, whereas in the schizoid character the eyes are burning. It's very alive. But there are weak spots. He can't turn them in some ways. He can't sometimes, in certain situations, focus quite clearly. Why? What happens then? I don't know whether you know that. Murder comes in his eyes, murder. He may have quite clear eyes and then suddenly murder pours into them, or terror.

Well I think we've exhausted that subject now. We have it all nice and rounded up. Are there any questions, please?
Projeto Arte Org
Redescobrindo e reinterpreando W. Reich

Caro Leitor
Infelizmente, no que se refere a orgonomia, seguir os passos de Wilhelm Reich e de sua equipe de investigadores é uma questão bastante difícil, polêmica e contraditória, cheia de diferentes interpretações que mais confundem do que ajudam.
Por isto, nós decidimos trabalhar com o material bibliográfico presente nos microfilmes (Wilhelm Reich Collected Works Microfilms) em forma de PDF, disponibilizados por Eva Reich que já se encontra circulado pela internet, e que abarca o desenvolvimento da orgonomia de 1941 a 1957.

Dividimos este “material” de acordo com as revistas publicadas pelo instituto de orgonomia do qual o Reich era o diretor.
01- International Journal of Sex Economy and Orgone Research (1942-1945).
02- Orgone Energy Bulletin (1949-1953)
03- CORE Cosmic Orgone Engineering (1954-1956)

E logo dividimos estas revistas de acordo com seus artigos, apresentando-os de forma separada (em PDF), o que facilita a organiza-los por assunto ou temas.
Assim, cada qual pode seguir o rumo de suas leituras de acordo com os temas de seu interesse.
Todo o material estará disponível em inglês na nuvem e poderá ser acessado a partir de nossas páginas Web.

Sendo que nosso intuito aqui é simplesmente divulgar a orgonomia, e as questões que a ela se refere, de acordo com o próprio Reich e seus colaboradores diretos relativos e restritos ao tempo e momento do próprio Reich.
Quanto ao caminho e as postulações de cada um destes colaboradores depois da morte de Reich, já é uma questão que extrapola nossas possibilidades e nossos interesses. Sendo que aqui somente podemos ser responsáveis por nós mesmos e com muitas restrições.

Alguns destes artigos, de acordo com nossas possibilidades e interesse, já estamos traduzindo.
Não somos tradutores especializados e, portanto, pedimos a sua compreensão para possíveis erros que venham a encontrar.

Em nome da comunidade Arte Org.
Textos da área do funcionalismo orgonômico

Texts from the area of Orgonomic Functionalism.

-------------------------------
International Journal of Sex Economy and Orgone Research

-------------------------------

Orgonomic Functionalism

-------------------------------

01 Theodore P. Wofe. The Sex-Economic Concept of Psychosomatic Indentity and Antithesis 1942
International Journal of Sex Economy and Orgone Research Volume 1 Number 1 1942
Interval 38-59 Pag. 33-54

02 Wilhelm Reich. Biophysical Functionalismo and Mechanistic Natural Science 1941
International Journal of Sex Economy and Orgone Research Volume 1 Number 2 1942
Interval 1-11 Pag. 97-107

03 Wilhelm Reich. Orgonotic Pulsation I 1944
International Journal of Sex Economy and Orgone Research Volume 3 Numbers 2 3 1944
Interval 1-54 Pag. 97-150

04 Wilhelm Reich. The Living Productive Power, Working Power of Karl Marx (1936) 1944
International Journal of Sex Economy and Orgone Research Volume 3 Numbers 2 3 1944
Interval 55-68 Pag. 151-164

05 R. H. Attkin. Mechanistic Thinking as the Original Sin 1947
McF 207 Annals of the Orgone Institute, Number 1. 1947
Interval 51-54 Pag. 95-101---------------------------

-------------------------------
Orgone Energy Bulletin

----------------------------------------

Orgonomic Functionalism

----------------------------------------

01 Wilhelm Reich Cosmic Energy and Ether 1949
Interval 3-11 Pag. 143-159

02 Notes Editorial. Basic Natural-Scientific Research 1949
Interval 24-24 Pag. 184-185

03 Wilhelm Reich Orgonomic Functionalism Parte II A 1947
Interval 3-10 Pag. 1-15

04 Wilhelm Reich Orgonomic Functionalism Parte II B 1947
Interval 3-10 Pag. 49-62

05 Communications. Psychology and Natural Science 1950
Interval 23-24 Pag. 88-90

06 Wilhelm Reich Orgonomic Functionalism Parte II C 1947
Interval 4-17 Pag. 99-123

07 Wilhelm Reich Orgonometrie Equations I A. General Form 1949
Interval 5-16 Pag. 161-183

08 Wilhelm Reich Orgonometrie Equations I B. Complete 1950
Interval 4-7 Pag. 65-71
05 Wilhelm Reich Functional Thinking 1950
Wilhelm Reich-Orgonomic Functionalism - Vol I. I
Interval 56-62 Pag. 100-112

06 Wilhelm Reich The Developmental History of Orgonomic Functionalism B 1946
Wilhelm Reich-Orgonomic Functionalism - Vol II. II
Interval 4-15 Pag. 1-23

07 Wilhelm Reich The Silente Observer B 1952
Wilhelm Reich-Orgonomic Functionalism - Vol II. II
Interval 16-20 Pag. 24-33

08 Wilhelm Reich Wrong Thinking Kills 1936
Wilhelm Reich-Orgonomic Functionalism - Vol II. II
Interval 21-25 Pag. 34-43

09 Wilhelm Reich On Using The Atomic Bomb 1945
Wilhelm Reich-Orgonomic Functionalism - Vol II. II
Interval 26-28 Pag. 44-49

10 Wilhelm Reich Mans Roots In Nature 1950
Wilhelm Reich-Orgonomic Functionalism - Vol II. II
Interval 29-41 Pag. 50-74

11 Wilhelm Reich The Developmental History of Orgonomic Functionalism C 1947
Wilhelm Reich-Orgonomic Functionalism - Vol III. III
Interval 4-13 Pag. 1-19

12 Wilhelm Reich Orgonotic Pulsation 1944 A
Wilhelm Reich-Orgonomic Functionalism - Vol III. III
Interval 14-35 Pag. 20-63

13 Wilhelm Reich The Evvasiveness of Homo Normalis 1947
Wilhelm Reich-Orgonomic Functionalism - Vol III. III
Interval 36-49 Pag. 64-91

14 Wilhelm Reich The Developmental History of Orgonomic Functionalism D 1947
Wilhelm Reich-Orgonomic Functionalism - Vol IV. IV
Interval 4-13 Pag. 1-18

15 Wilhelm Reich Orgonotic Pulsation 1944 B
Wilhelm Reich-Orgonomic Functionalism - Vol IV. IV
Interval 13-24 Pag. 19-40

16 Wilhelm Reich Orgone Functions in Weather Formation 1946
Wilhelm Reich-Orgonomic Functionalism - Vol IV. IV
Interval 24-29 Pag. 41-51

17 Wilhelm Reich The Attitude of Mechanistic Natural Science to the Life Problem 1941
Wilhelm Reich-Orgonomic Functionalism - Vol IV. IV
Interval 30-35 Pag. 52-63

18 Wilhelm Reich Orgonomic Functionalism in Non-Living Nature A 1947
Wilhelm Reich-Orgonomic Functionalism - Vol V. V
Interval 4-13 Pag. 1-19

19 Wilhelm Reich Orgonotic Pulsation 1944 C
Wilhelm Reich-Orgonomic Functionalism - Vol V. V
Interval 14-26 Pag. 20-44

20 Wilhelm Reich Parents as Educators 1926
Wilhelm Reich-Orgonomic Functionalism - Vol V. V
Interval 26-37 Pag. 45-66

21 Wilhelm Reich Open Season on Truth 1942
Wilhelm Reich-Orgonomic Functionalism - Vol V. V
Interval 37-48 Pag. 67-88

22 Wilhelm Reich The Fundamental Problem of Form 1935
Wilhelm Reich-Orgonomic Functionalism - Vol V. V
Interval 48-48 Pag. 89-89

23 Wilhelm Reich Orgonomic Functionalism in Non-Living Nature B 1947
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 4-14 Pag. 1-21
24 Wilhelm Reich Orgonotic Pulsation D 1944
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 15-21 Pag. 22-35

25 Wilhelm Reich Desert Development and Emotional Dedness 1953
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 22-29 Pag. 36-50

26 Wilhelm Reich Process Of Integration in the Newborn and the Schizophrenic 1950
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 29-39 Pag. 51-71

27 Wilhelm Reich The Meaning of Disposition to Disease 1944
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 40-41 Pag. 72-75

28 Wilhelm Reich The Difficulty 1948
Wilhelm Reich-Orgonomic Functionalism - Vol VI. VI
Interval 42-42 Pag. 76-76

-----------------

CORE.
-----------------

---------

Orgonomic Functionalism
---------

01 Robert A. McCullough. Rocky Road Toward Functionalism 1955
Interval 26-31 Pag. 144-154