STRATEGY RESEARCH PROJECT

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THE STRATEGIC LEADER AND DESPAIR

BY

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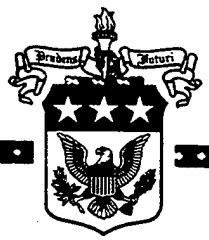

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ABSTRACT

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While many threats confront strategic leaders, none is more lethal than the internal threat of despair that leads to suicide. Future leaders need an in-depth understanding of the complexity of suicide. The seeds of suicide are: First, personality development in which the child experiences a psychological "woundedness"; Second, the inability to deal with the nature of loss resulting in "loss of self"; Third, the subsequent isolation that prevents one from obtaining help. This study suggests that hope is a powerful counterforce to despair and suicide. One source of hope lies in the assurance of God's faithful promises of the future. Thus strategic leaders must, above all, be people of hope in the face of despair.

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Now the Philistines fought against Israel: and the men of Israel fled before the Philistines, and fell down slain in Mount Gilboa. And the Philistines followed hard upon Saul and his sons; and the Philistines slew Jonathan, and Abinadab, and Melchi-shua, Saul's sons. And the battle went sore against Saul, and the archers hit him; and he was sore wounded of the archers. Then said Saul unto his armor-bearer , Draw thy sword, and thrust me through therewith; lest these uncircumcised come and thrust me through, and abuse me. But his armor-bearer would not; for he was sore afraid. Therefore Saul took a sword, and fell upon it. And when his armor-bearer saw that Saul was dead, he fell likewise upon his sword, and died with him. So Saul died, and his three sons, and his armor-bearer, and all his men, that same day together.[1]

I Samuel 31: 1-6

King Saul's suicide was inevitable, not because he was a coward, but because he had reached the pit of despair. The wounds inflicted upon him by the Philistine archers served as an apt metaphor of the "woundedness" he had borne all his life. His life's story was one of depression and interpersonal stress. He had experienced many significant losses. His three sons were now dead, his army defeated, and his leadership had failed. Now all alone on the top of Mount Gilboa, he felt the painful isolation of being cut off from all sources of hope, and in despair he fell upon his sword seeking some sense of peace.

This ancient story reveals that despair is a significant threat to those who lead. The downward spiral into the pit of despair is the culmination of three categories of experience. First, there is the "woundedness" from one's family of origin; second, the experience of overwhelming significant "loss;" and

second, the experience of overwhelming significant "loss;" and lastly, there is "isolation" from all sources of support. Specifically, the strategic leader's despair and potential for suicide increase when "woundedness, loss, and isolation" come together in such a way that life is interpreted as hopeless.

When high-ranking officials, people of substantial reputation, commit suicide, an overwhelming grief affects not only individuals but institutions. Even "our national spirit is drained of idealism."[2] Recently, the entire military community was shocked and deeply saddened to learn of the suicide of Admiral Michael Boorda, Chief of Naval Operations, who took his life in May of 1996. In the wake of Admiral Boorda's death, Robert McFarlane, once President Reagan's National Security Advisor, reflected upon his own failed suicide attempt. He reported how astonished he was to learn that many other leaders in Washington had experienced the same overwhelming sense of despair. A number of Senators, Representatives, and other high-level officials confided in him their temptation to end their own lives when the burdens had become too great to bear. McFarlane added, "Severe clinical depression is a fairly common occurrence in Washington."[3] Consequently, despair

among our nation's leadership may be more prevalent than one would imagine.

In view of this growing threat, strategic leaders need a deeper understanding of the nature of despair. To understand despair requires a reflective courage to know something about one's life story. Specifically, a leader needs a deep understanding of his "woundedness, loss and isolation."

WOUNDEDNESS AND DESPAIR

Each year approximately twelve persons per one hundred thousand people take their lives by self-destruction. The French philosopher, Albert Camus, captured the elusive nature of this problem when he said, "[Suicide is] ... prepared within the silence of the heart."[4] One of every seven persons suffering from major depression seeks desperately to find peace by this method. Depression shows no mercy as it strips its victims of hope.[5]

If the pathway to suicide begins with depression, then where does depression begin? Some have argued for a chemical imbalance as the root cause. Most suicide victims have a low level of the chemical 5-hydroxyindoleacetic acid in their spinal fluid. But research is not yet conclusive

what changes our body chemistry. According to Dr. Michael Sheehy, the relationship between one's chemical balance and depression has not been established. He added, "Of course, it's still a little muddy,...We're changing all kinds of chemistry as we see and think and experience emotion."[6] Therefore, chemistry alone is not the cause of depression. As one psychiatrist said in attempting to sum up today's mental health problems: "Life is wounded."[7]

A psychodynamic perspective offers a deeper understanding of the etiology of depression. From this viewpoint, the structure of the personality contributes to depression. Everyone experiences depression as a part of life; these feelings are usually attributed to external events that are the common lot of humanity. Such depressive episodes are short-lived and one is able to adjust to life and maintain a psychological balance. However, the predisposition to suicidal depression, according to Margaret Mahler, takes place in the early developmental phases of life between mother and child. Mahler proposed three phases of infantile development: autistic, symbiotic and separation-individuation. Separation-individuation includes four subphases of differentiation: practicing,

rapprochement, and separation-individuation proper. Mahler's use of the word "separation" does not refer to physical separation but refers to the child's psychological awareness of his separateness. Given the optimal conditions of the nurture of the mother and the innate endowments of the infant, development continues on a normal path with the child achieving a sense of identity and a firm personality structure for continued maturation.[8]

Pathology for Mahler, is developmental failure. She believes that, "...a predisposition to depression is established in the rapprochement subphase of separation-individuation if the unattuned mother fails to respond to the needs of that subphase."[9] During this subphase (18-36 months), the child displays "approach" behavior toward the mother. Before this, the child gradually stepped away from mother and began to emerge as an individual. The child "practices" his autonomy with the increase of motor skills and with the beginnings of language skills. Even the mother enjoys the child's independence for she now has a break from the constant demands of an infant. However, in the rapprochement subphase, the child feels the need to return to mother for soothing and reassurance. Mahler warns,

"Maternal rebuff, in the rapprochement phase...can be so disappointing that it contains within it seeds for depression later in life."[10]

The consistency and dependability of the care-giver are critical in facilitating the child's construction of a mental image. The child internalizes these mental images and maintains a relationship to them just as he would to an external physical person. "The development of a lively sense of self depends on having an internal world of reliable images to which one is attached."[11] If the availability of a nurturing person is not there for attachment, then the child experiences a sense of loss, disorganization, and dissolution of the self.[12] As the child matures, the lack of consistent, reliable images of significant people from one's past prevents the formation of an important defense against feelings of complete discontinuity.[13] Each person internalizes the world in a highly personalized manner. Thus every person has a different capacity for responding to ambiguity as adults.

Current research on suicide indicates that a fragmented sense of self is one of the conditions leading to suicide. A person with a cohesive and solid sense of self feels

reasonably competent and capable of meeting life's demands. But the suicidally vulnerable person suffers various ego deficits due to his early development. Due to the child's internal fragmentation, he suffers from high self-expectations. Typically, his goals are beyond his actual capabilities and his self-ideal is perfectionistic. Thus he experiences low self-esteem and feels empty, frustrated, and full of rage.[14]

These high expectations are also present in interpersonal relationships. There is an unconscious and desperate need to be passively nurtured and gratified by others. Richman and Eyman state:

> These individuals seem to be searching for an all-powerful, perfectly attuned mother who would supply them with endless comfort and gratification, and who could help them recapture the pleasures of infancy and the feelings of completeness and oneness.[15]

Paradoxically, while at the same time they long for fusion with others, they fear that such union will bring loss of identity and self-disintegration. Thus they live a conflicted inner life both seeking and fearing nurture.[16]

While the psychodynamic perspective focuses upon the early developmental issues of the individual, family systems theory, on the other hand, emphasizes the processes

occurring within the family as a whole. Family systems theory seeks to understand the destructive forces at work within the family. A family system prone to suicide suffers an extraordinarily high degree of stress and wrestles with intense family conflicts. According to Richmond and Eyman, the characteristics of a suicidally prone family include:

> (1) separation and loss; (2) symbiosis; (3) primary attachments; (4) mourning; (5) a closed family structure; (6) role conflicts; (7) maladaptive interpersonal relationships; (8) affective disturbances; (9) communication disturbances, and (10) proneness to crises.[17]

While most families will display some of these dynamics during times of stress, the suicidally prone family possesses these characteristics at an intense level. Such a family may not display these characteristics all the time, but they are usually prominent at the height of the suicide episode.[18]

One of the most significant characteristics concerning suicide is the family's struggle with separation and loss. When a suicidally prone family is threatened by separation and loss, it seeks to avoid it at all cost by clinging together.[19]

Bowen introduced the term "undifferentiated family ego mass," derived from psychoanalysis, to describe the idea of

families being emotionally stuck together. This intense closeness can be off balance to such a degree that family members know each other's feelings, thoughts, fantasies, and dreams. Bowen adds that this "overcloseness" becomes uncomfortable and leads to a phase of mutual rejection between family members.[20] As a result, the atmosphere of a suicidally vulnerable family is framed with separation anxiety, the threat of loss, and rage.

Often, suicidally prone families seem to pass along, almost genetically, the propensity toward suicide. A suicide occurring within a family system sets an example of how the family deals with intense stress. For example, the father of Ernest Hemingway committed suicide in 1928. At that time, Ernest Hemingway labeled his father's suicide as an act of cowardice. But later he would take his own life as would two of his own children. Numerous case histories present similar examples.[21] Hence the family history of a suicide victim quite often includes the story of a relative who ended his own existence by suicide.

Both the psychodynamic theory, focusing upon the developmental issues of the individual, and family systems theory, describing the characteristics of a suicidally prone

family, identify the complex themes of suicide. An understanding of the early developmental history and the dynamics experienced within one's family of origin promotes self-awareness and personal growth. Based upon these insights, a person is better informed in making the appropriate therapeutic changes. Consequently, the starting place for all personal growth is based upon one's self-awareness; particularly a depth consciousness of one's experience of loss.

LOSS AND DESPAIR

The Pulitzer prize-winning novelist William Styron writes in Darkness Visible that the seeds of suicide are planted in one's youth due to profound loss. He reasons, "If grieving is somehow thwarted, you drag into later years not only 'dammed-up sorrow' but also 'an insufferable burden of rage and guilt.'"[22] Thus an understanding of the nature of loss is a critical issue in understanding suicide.

Loss is a significant component of despair. It is a normal part of life. People usually associate loss with the death of loved ones, but there are many types of loss's people experience in the journey of life. Loss and the resulting emotional responses of grief are extremely painful. People do not

experience grief and loss in an orderly fashion. Each person reacts to loss in unique ways that reflects their individuality and history.

One of the most common forms of loss is material loss. People become attached to physical objects and invest in them a special sense of value. Grief is the resulting emotion when people lose something of value. Closely related to material lost is relational loss. "Relational loss is the ending of opportunities to relate oneself to, talk with, share experiences with, make love to, touch, settle issues with, fight with, and otherwise be in the emotional and/or physical presence of a particular other human being."[23] Relational loss is a continuos cycle of grief due to death, divorce, or separation by distance of important family members or close friends.[24]

A more complex form of loss is intrapsychic loss. "Intrapsychic loss is the experience of losing an emotional image of oneself."[25] This loss is an inward experience of "losing the possibility of what might have been..."[26] It is the loss of a secret dream or picture of the future that one has carried deep within the self. A person experiences intrapsychic loss in times of change or when one completes a special task. For example,

"Buzz" Aldrin, the astronaut, referred to his enormous sense of loss after setting foot on the moon.[27]

Another painful form of loss is the loss of muscular or neurological functions of the body.[28] Regardless of one's age, this form of loss provokes anxiety with the threat of further loss of autonomy. The person usually makes every attempt to replace a diminished function, but when this fails, grief follows with an overwhelming response.[29]

The deprivation of a specific social role or place within an organization results in loss. "The significance of role loss to the individual is directly related to the extent to which one's sense of identity is linked to the lost role."[30] Changes of social identity include retirement, being promoted, and even changing careers.

The last loss that is common to all persons is systemic loss. Humans live within interactive systems with established patterns of behavior. Persons depend on the system to perform certain functions. "When those functions disappear or are not performed, the system as a whole, as well as its individual members may experience systemic loss."[31] The grief of systemic loss follows any change in a system, such as a family, business, or military unit. One could be experiencing several forms of

loss and grief at the same time. To be human is to know the pain of loss and grief, but what is it about loss that leads to despair?

In Charles Gerkin's theological definition of crisis experience, he underscores that it is the "loss of self" that leads to despair and the potential for suicide. According to Gerkin, the heart of crisis experience is the awareness of one's finitude and vulnerability. The pressures and processes that take place within one's experience of the finite boundaries vary for a given person. Gerkin states that the self within a complex field of forces shapes crisis experience. This complex network of interacting dynamic influences includes the self, family, and community. Crisis usually begins with the person, family, or community experiencing a disruption of their equilibrium or vital balance.[32]

The person experiencing this "boundary-line" of despair perceives their human condition as a loss of the self's sense of "liveliness." There is no way out, no sense of the future, no hope of coping with the present impossible condition. Gerkin identifies some of the dynamic forces that create despair. He begins with the idea that, "The

sense of life or liveliness (as opposed to deadliness or desperation) is dependent on a certain lively sense of integration of the self within itself and in relation to the significant others of the self's social situation."[33] An individual maintains a healthy sense of vital balance in life as long as one sustains this sense of liveliness in the midst of change. Experience is continuously being reevaluated. Also, one's future life expectations are being prestructured and preimagined. This process requires this sense of liveliness of the self with itself and its social surroundings.[34]

Experience requires a continuous process of interpretation and evaluation of events. In this process of interpretation, one either sustains a response of hopefulness in life and self or either despair threatens to be the only alternative. In the daily course of living, most persons are able to integrate the discrepancies of experience with an interpretation that is hopeful about life. Despair increases as one is unable to manage such discrepancies. One despairs over the possibility of maintaining authentic selfhood and a hopeful outlook. At

this point the person feels the loss of self, authenticity, and the competence to cope with life.[35]

A person expresses the experience of despair in various themes. Gerkin differentiated several qualities concerning the loss of self in despair. First, there is the "loss of trust" in one's self. The individual no longer trusts their ability to carry their burdens of life nor do they trust that anyone else really understands the pain they bear. In this "loss of trust" the person feels isolated and cut off from sources of acceptance, trust, and nurture. The person turns even more to depend on their already depleted resources, which only increases their sense of loss of self and self esteem.[36]

Second, there is the "loss of integrity" of the self, in which one feels unable to handle life. There is a sense of depletion of the self, an inability to take responsible action for life. Thus a sense of guilt follows as one feels incompetent to set things right.[37]

Third, there is the "loss of mutuality" between the significant persons of life. Mutual caring that provides emotional support is not available. Often this "loss of mutuality" is suggestive of a family of origin that lacked

this quality of mutual care. Therefore, the resources for nurture and warmth are not available now in the experience of despair.[38]

Fourth, there is the "loss of fulfillment or opportunity for self-realization." Gerkin defines this loss as a hopeless treadmill. One feels the loss of important avenues of self-expression. The self cannot experience self-actualization. Thus there is no sense of fulfillment, only hopelessness.[39]

Lastly, there is the "loss of future." One experiences life as having no purpose, no future, and no end. Meaning is absent. The person interprets their life as a dead end.[40]

According to Paul Tillich, despair is the threat of loss of self, loss of meaning, and loss of fulfilling one's destiny. He describes the threat of loss in terms of anxiety. Tillich identifies three kinds of anxiety. First, there is ontic anxiety that is anxiety about fate and death. The anxiety of fate and death threatens the very being of the person with the loss of the self. One cannot escape this universal anxiety. A person tries to deal with anxiety by projecting it onto an object to fear. Yet a person

cannot totally accomplish this because it is not the objects with which humankind struggles, but the anxiety of the human situation itself.[41]

Second, there is the anxiety of emptiness and meaninglessness. Tillich states:

> The anxiety of meaninglessness is anxiety about loss of an ultimate concern, of a meaning which gives meaning to all meanings. This anxiety is aroused by the loss of a spiritual center, of an answer, however symbolic and indirect, to the question of the meaning to existence.[42]

Meaninglessness threatens one's ability to understand and shape his world and himself according to meanings and value. This anxiety has to do with the loss of an ultimate meaning that shaped one's life and provided a sense of direction that served as a compass for living.

Lastly, Tillich describes the third type of anxiety as that of guilt and condemnation. Anxiety of guilt and condemnation threatens one's moral self affirmation. The self holds itself accountable for fulfilling its destiny. A profound ambiguity is present however, and the self does not always act responsible. This results in the feelings of guilt that are present as anxiety alongside the anxieties of fate and death; and emptiness and meaninglessness. Tillich states:

It is present in every moment of life of moral self-awareness and can drive us toward complete self-rejection, to the feelings of being condemned - not to an external punishment but to the despair of having lost our destiny.[43]

According to Tillich, despair is the fulfillment of these three types of anxiety being experienced in a specific situation. He states:

Despair is an ultimate or 'boundary-line' situation. One cannot go beyond it. Its nature is indicated in the etymology of the word despair: without hope. No way out into the future appears.[44]

Tillich reflects Sartre's idea of "No Exit" to illustrate the desperate and inescapable nature of despair.[45] At this point, one interprets life as completely hopeless.

The theological perspectives of Gerkin and Tillich provide an in-depth understanding of loss as it leads to despair. Gerkin's loss of self as expressed in the common themes of loss and Tillich's three types of anxiety broadens our understanding of the nature of loss in a significant way. Consequently, the decline into the pit of despair involves not only the wounded self, but also the loss of self.

ISOLATION AND DESPAIR

Woundedness and loss of the self culminate in the isolation of the person from all sources of hope. The forces at work emerging from one's wounded personality development seem to frustrate the person's attempts to achieve any meaningful attachments with others. Likewise, the family system refuses support both from within and from outside the family system. "The nature of loss" as well as the "loss of the self" are always experienced as isolation.

The downward spiral into the pit of despair has the potential for suicide. A person most often enters this pit of despair by interpreting events or series of events as events of judgment and condemnation of the self. The movement downward into the pit of despair will inevitably result in chronic despair or death by suicide. Gerkin states:

> This event may be an incident of failure that triggers guilt and shame, an event of interpersonal rejections that brings feelings of abandonment and loss of self worth, or an event that throws into radical question the whole matter of the viability of the future for the person, thus triggering anxiety and the question of hope or hopelessness.[46]

In Richman and Eyman's understanding of the conditions of suicide, they too underscore the significance of "an event that jeopardizes the individual's identity."[47]

Perhaps the stress over Admiral Michael Boorda's unauthorized combat decorations served as such an event that plunged this great leader into the pit of despair. In the most complete work done to date reflecting upon Admiral Boorda's suicide, Peter J. Boyer states, "of all the traumas that Boorda had experienced up to this point, perhaps none could have been more damaging than this discovery."[48] Consequently, this revelation carried all the forces of judgment, shame, and hopelessness for him. Then, as in the story of King Saul, "woundedness, loss, and isolation" thrust this senior officer into the pit of despair. How could such a tragedy be avoided?

HOPE AND DESPAIR

Maurice L. Farber, in his book Theory of Suicide, describes suicide as "the disease of hope."[49] Hope is the outcome of two factors: the person's personality and the person's situation. Farber calls the personal factor competence, by which he means the person's inner belief that the self has the resources and ability to cope with the stress of life. The situational factor is the "degree of threat leveled against the individual's being able to sustain a minimally acceptable existence."[50]

One's sense of competence is dependent upon the quality of nurture experienced during the early developmental phases of life. This sense of competence provides the strength to cope with the demands of living. However, hope, the great counterforce to suicide, is not simply a psychological possession of the individual. Gerkin states:

> [Hope] is a social phenomenon that to a greater or lesser degree pervades the atmosphere of a community or a society. It cannot be sustained by the individual alone, but depends upon the availability of succorance and hopefulness in the social situation in which the individual finds himself or herself.[51]

Farber's sociological perspective stresses that the potential for suicide in a given individual is in direct proportion to the following factors: First, the degree of injury experienced by the individual's sense of competence is critical. Secondly, the social environment places demands upon the person to exercise competence and interpersonal giving. Lastly, the degree of social tolerance of suicide as an "answer" to one's problems of living significantly impacts one's decision to end their life. On the other hand, the counterforce to these factors includes the availability of succorance to the person and the degree of hope that pervades society's perspective of the future.[52]

Farber's theory is important to this study because as a social scientist, he affirms that hope and expectation is the central thrust that sustains the individual in coping with life's battles. He also emphasizes the corporate social responsibility for supporting conditions that assist in developing a sense of competence for living. The norms established by the community either supports the individual's affirmation of hope or presses them toward despair. The primary counterforce that restores "a sense of competence and hope in despairing individuals...is the availability of a caring, succoring community that nurtures hope in the future time perspective."[53]

Also Gerkin's theological perspective suggests that one of the key ingredients to deal successfully with life's crisis is faith in God's providence as trust in the future. He states:

> Our theological perspective has suggested to us that one of the key ingredients in the ability of persons to meet existential crisis successfully is the ability to grasp finite human life as open-ended, contingent, and sustained not by the promise of continuity of things as they have been, but by the promise of God's continuing activity in the very open-endedness and futurity of ongoing life.[54]

According to Gerkin, trust in the future of God's activity is the basis for faithful selfhood that overcomes

despair. Our own resources cannot serve as a bulwark against despair. Gerkin states:

> God's activity in human affairs in the ongoingness of time provides the solid basis for hopeful engagement of the problems of living in the human situations that threaten to engulf the self in absurdity, inauthenticity, and finally despair.[55]

Hope is the counterforce that can give a sense of competence to those in despair. The challenge is to confront the despairing style that has taken possession of the person's awareness by fostering experiences that include supportive relationships and healing processes that may speak of hope, self-affirmation, and authenticity.[56] Therefore, without hope, the aspects of "woundedness, loss, and isolation" lie in the silence of the heart waiting for the lethal "triggering event" to occur.

CONCLUSION

Volatility, uncertainty, complexity, and ambiguity characterize today's strategic environment. While many threats confront strategic leaders, none is more lethal than the internal threat of despair. Prepared in the silence of the heart, it evades detection--striking without warning. In order to combat this enemy, strategic leaders need a deeper understanding of the complexity of despair. The

discernment of "woundedness, loss, and isolation" as it contributes to despair and suicide underscores the depth nature of this issue.

Lastly, hope is the counterforce to despair. The assurance of God's faithful promises is the source of hope, not one's personality. Thus strategic leaders must, above all, be people of hope in the face of despair.

ENDNOTES

[1] I Samuel 31:1-6. KJV

[2]David Gergen, "Suicide in Washington," US News & World Report 20, No. 22, (1996): 68.

[3]Time, 147, Iss: 22 1996 ed., sv. "Robert McFarlane on Despair and the Public Good."

[4]Timothy Dumas, "Beyond Despair: The Anatomy of Suicide," Cosmopolitan 220 (1996): 230.

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[7]David Allen, Shattering the Gods Within (Chicago: Moody Press, 1994), 17.

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[11]Kenneth R. Mitchell and Herbert Anderson, All Our Losses, All Our Griefs (Philadelphia: The Westminster Press, 1983), 24.

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[15]Ibid., p. 142.

[16]Ibid.

[17]Ibid., p. 152.

[18]Ibid.

[19]Ibid., pp. 152-153.

[20]Irene and Herbert Goldenberg, Family Therapy: An Overview, (California: Brooks/Colde Publishing Company, 1985): 169.

[21]Dumas, 230.

[22]Ibid.

[23]Mitchel and Anderson, 36.

[24]Ibid., pp. 37-38.

[25]Ibid., p.40.

[26]Ibid.

[27]Ibid.

[28]Ibid., p. 41.

[29]Ibid., p. 42.

[30]Ibid.

[31]Ibid., pp. 44-45.

[32]Charles V. Gerkin, Crisis Experience in Modern Life, (Nashville: Abingdon, 1979): 33.

[33]Ibid., p. 171.

[34] Ibid.

[35]Ibid., p. 170.

[36]Ibid., p. 177.

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[38]Ibid., p. 178.

[39]Ibid.

[40]Ibid., pp. 177-179.

[41]Paul Tillich, The Courage To Be, (New Haven: Yale University Press, 1952): 36-45.

[42]Ibid., p. 47.

[43]Ibid., p. 52.

[44]Ibid., p. 54.

[45] Ibid.

[46]Gerkin, 183.

[47]Richman and Eyman, 139.

[48]Peter J.Boyer, "Admiral Boorda's War," The New Yorker, (September 1996): 84.

[49]Theory of Suicide, (New York: Funk and Wagnalls, 1968) quoted in Charles V. Gerkin, Crisis Experience in Modern Life, (Nashville: Abingdon, 1979), p. 165.

[50]Ibid.

[51]Gerkin, 166.

[52]Ibid., p. 167.

[53]Ibid., pp. 167-168.

[54]Ibid., p. 162.

[55]Ibid., p. 169.

[56]Ibid., p. 186.

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