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A Psycho-Historical Analysis of Adolf Hitler: The Role of Personality, Psychopathology, and Development

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Abstract

The present paper presents a psycho-historical analysis of Adolf Hitler with reference to multiple psychological theories which attempts to briefly elucidate the contributing personality and psychosocial developmental factors that likely contributed to the development of severe psychopathology. It is argued that it is highly probable Adolf Hitler suffered from a multitude of severe psychological disorders including paranoid schizophrenia and narcissistic personality disorder. It is hoped that presenting such a profile of Adolf Hitler’s personality and psychopathology will be helpful in understanding what motivated his horrific acts.

Introduction

The name Adolf Hitler is associated with an image of madman in command; a man of incomprehensible “evil” who was directly responsible for the unimaginable suffering and death of millions upon millions of innocent people. The atrocities committed by the Third Reich, and the direct role of Adolf Hitler in the Final Solution, appear to be widely regarded as both the most important event, and most important person, respectively, in world history in modern times. A study conducted by Liu et al. (2005) of more than 2,000 participants from twelve culturally distinct nations found that World War II was reported to be the single most important historical event of the last 1,000 years in each of the twelve cultural samples, while eleven of the twelve samples regarded Adolf Hitler as the most influential figure in world history in the same time frame.

Although many scholars have devoted enormous efforts in an attempt to understand and explain the actions of Adolf Hitler and collectively the people who participated in the Final Solution, there is an established tradition that argues that pursuing such understandings can and should be considered futile, and moreover, obscene and immoral (see Rosenbaum, 1998 for a more detailed discussion on this issue). On the other hand, many scholars who have sought to provide an understanding of Hitler’s actions have retreated into the comforting and falsely consoling arms of describing Hitler as merely “evil”. As stated by Aaron T. Beck (1999) in his cognitive account of the atrocities of the Holocaust, “the assignment of the label “evil” to explain the actions of
the Nazis and their supporters does little to further the understanding of their thinking and behaviour” (p. 176). We fully agree with this statement and hope in this paper to provide a psychohistorical perspective of the character of Adolf Hitler drawing on multiple psychological theories (personality theories, psychopathological theories, and psychoanalytic theories) in the hopes not of excusing Hitler’s actions or of mitigating his responsibility, but rather to provide a cogent framework for understanding how the internal psychological processes could have led Hitler to commit the atrocities that he did.

As such, this article will not focus on any biographical account of Hitler’s life as to do so would be beyond the scope of this paper and many fine accounts of great detail have been published elsewhere, but instead this article shall focus on the psychological features of Adolf Hitler so that a more coherent understanding of what may have motivated Adolf Hitler can be ascertained.

A Psychoanalytic Approach

Psychoanalytic perspectives dominated the field of psychology in the 1930’s and 1940’s, particularly in mainland Europe, and unsurprisingly many influential figures in the development of psychoanalysis provided psychological accounts of Hitler’s character. Perhaps the first account of Hitler’s personality was developed by Carl Jung in 1939 (see McGuire & Hull, 1977). Jung had met Hitler in Berlin at a meeting where the Italian fascist dictator Mussolini was also present. Jung described Hitler as inhuman and sexless; a man who was driven so immensely with a singular purpose of establishing the Third Reich. Jung believed that Hitler was so driven in this pursuit in order to compensate for all of the perceived threats he felt existed to Germany, and the historical insults the German nation had endured in its history.

Utilizing available information up until 1943, Langer (1943/1972) believed Hitler to be a neurotic individual bordering on the psychotic. He argued that Hitler had a strong messiah complex, exhibited significant masochistic tendencies and sexual perversions, and was very likely a homosexual. Furthermore, Langer believed Hitler displayed many schizophrenic symptoms and proposed at that time that the most likely outcome would be suicide.

Continuing the psychoanalytic perspective, Fromm (1973) characterised Hitler as “a nonsexual necrophilous character and (a) malignant aggressor”. Fromm believed that Hitler possessed a dysfunctional “anal” character which gave rise to intense narcissism, destructiveness, and a profound inability to relate to others. Fromm believed these psychological tendencies developed in early infancy due to an unresolved stage of psychosexual development, however they were greatly exaggerated due to traumatic life events such as his relationship with his father. Of course, Fromm argued that Hitler would have possessed no conscious awareness of his personality deficiencies and therefore blamed many authority figures such as teachers, his father, and society for his early life failings. The central component of Fromm’s argument centred on Hitler failing to successfully resolve his Oedipal complex. Fromm’s thinking was that Hitler transferred his incestuous Oedipal desires and feeling for his mother onto the homeland of Germany, and his unconscious desire to eradicate his unloving father was transferred collectively to the Jews.
The psychoanalytic theories presented are extraordinarily problematic given the pseudoscientific nature of psychoanalysis therefore we turn our attention in the remainder of this paper to more scientific perspectives of Hitler’s personality.

A Developmental Approach

In the first chapter of his autobiography Mein Kampf, written in prison in 1924 at the age of thirty-five, Hitler described his parents as models of traditional German values: "My father was a dutiful civil servant, my mother giving all her being to the household, and devoted above all to us children in eternal, loving care." Like so much of Mein Kampf, the portrait of his parents is a partial fabrication. He loved his mother deeply, but he feared his father. There is abundant evidence of his feelings towards his father. He told his secretary Christi Schroeder, "I didn't love my father, but I was all the more afraid of him. He had tantrums and immediately became physically violent. My poor mother would always be very scared for me.” (Haman, 1999: p. 18). This parental style was defined by Baumrind (1991) as an authoritarian style. Such a parenting style is characterized by rigidity, obedience without questions, and physical punishment. Research suggests that authoritarian parenting style is closely related to the development of aggressive personality and antisocial behaviour (Blitstein et al, 2005; Ruchkin, 2002) which can be clearly observed in Hitler’s later life. Hitler also told his lawyer Hans Frank about his father's heavy drinking: “Even as a ten-to-twelve year old, I had to take my father home from the bar. That was the most horrible shame I have ever felt. Oh Frank, what a devil alcohol is! It really was via my father - the most horrible enemy of my youth.” (Haman, 1999: p. 12).

His mother more than compensated for whatever affection the Hitler children missed in their father. According to the description given by her Jewish doctor, Eduard Bloch, Klara Hitler was a simple, modest, kindly woman. She was also submissive, retiring, and a pious Catholic. Her first three children all died in infancy within weeks of one another in 1878 and her fifth child Edmund died at age six in 1900. Her sorrows could only have been compounded by life with her irascible, unfeeling, and alcoholic husband. Young Adolf adored her. Dr. Bloch later wrote that his love for his mother was his most striking feature: “While he was not a ‘mother’s boy’ in the usual sense, I have never witnessed a closer attachment.” (Kershaw, 1999: p. 12). However, this statement is inconsistent with Bowlby’s (1969) attachment theory and additional research in psychology which suggests that individuals with a history of positive early attachments with mothers tend to have longer and more satisfying relationships (Mausour et al, 2008). Moreover, it could be suggested that (based on Hitler’s lack of any positive relationships) his avoidant and anxious attachment to his authoritarian father was the most significant and defining attachment relationship in development of his personality.

Hitler was described as a troubled adolescent who tended to find refuge in a world of fantasy. Historians refer to Hitler’s typical personality traits as impulsive, egocentric, cold, aggressive, unempathic, and tough-minded. This description tends to fit well into Eysenck’s (1977) theory of personality which postulates that such characteristics are indicative of a high level of Psychoticism. Eysenck’s theory states that when individuals with high levels of Psychoticism are put under great stress, the probability of developing a functional psychosis increases (Eysenck, 1997). In his more recent work, Eysenck (1998) suggests that psychoticism is also based on the cortical arousal level in the central nervous system, and subsequently is linked to conditionability and
conscience development. Impulsivity would be the crucial trait in the link between conditionability and personality. Therefore, highly psychotic individuals, just like extraverts, have a low level of cortical arousal, and are less easy to condition and more prone to developing antisocial personality disorders (Eysenck, 1998; Gudjonsson, 1997).

A Psychopathological Approach

Recently efforts have been made to understand Adolf Hitler’s psychopathology using an innovative empirical methodology. Coolidge, Davis, and Segal (2007) employed an “informant-rating” method of investigation whereby five experts on Adolf Hitler were asked to complete a informant-report assessment of personality, clinical psychopathology, and neurological disorders based upon criteria laid out in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV: American Psychiatric Association, 1994). Klonsky, Oltmanns, and Turkheimer (2002) carried out a meta-analysis of 17 informant-rating studies and their results demonstrated that there is a moderate degree of association between self-report and informant-report ratings. Moreover, informant-ratings display a high interrater reliability, as was the case with the study of Coolidge et al. (2007) (median r = .72). This methodology therefore seems to be both practical and useful in determining important personality and psychopathological features of individuals who for a variety of reasons cannot submit self-report assessments or undergo clinical interviews.

Findings from the Coolidge et al. (2007) study suggested that Hitler suffered from a multitude of Axis I and Axis II disorders. There was a consensus among the expert raters that Hitler reached the criterion threshold for a range of personality disorders including paranoid, antisocial, narcissistic, and sadistic personality disorders; the features of which are all consistent with detailed reports of his adult life. With regard to the Axis I disorders, the consensus profile revealed that Hitler probably suffered from Posttraumatic Stress Disorder (PTSD), Psychotic Thinking, and Schizophrenia-Paranoid Type. The DSM-IV (APA, 2000) symptom profile for Paranoid Schizophrenia seems to describe Hitler’s personality features extremely well. The DSM-IV lists symptoms such as a preoccupation with one or more persecutory or grandiose delusions which are generally centered on a single coherent theme. Additionally paranoid schizophrenia tends to be associated with anxiety, anger, aloofness, and argumentativeness. Furthermore, persecutory delusions in combination with delusions of grandiosity and feelings of anger predispose individuals to violence, while persecutory themes can leave an individual susceptible to suicidal behaviour. Individuals suffering from paranoid schizophrenia very often exhibit a patronizing and superior manner in interpersonal situations. The occurrence of paranoid schizophrenia does not disqualify the individual from successful functioning in daily life, as the DSM-IV indicates that paranoid schizophrenics can display few, if any, cognitive impairments and can function extremely well in independent living and in occupational settings.

A key feature for the diagnosis of paranoid schizophrenia is the occurrence of delusions or hallucinations. On November 10th 1918 an extremely important event in the development of Hitler’s political ideologies came about as he was hospitalized in Pasewalk following an incident in which Hitler was exposed to a mustard gas attack during World War I. In Mein Kampf (1925, p. 204-206), Hitler describes how a pastor came to the hospital where he was recuperating and informed him of Germany’s
capitulation which was sure to lead to “dire oppression”. Hitler reacted to the news with the belief that Germany’s shameful defeat must be blamed on the Jews, and he thus resolved to enter politics to combat the Jewish threats to Germany. Hitler believed that the resolutions he came to while at Pasewalk were brought to him in a vision sent from God (see Langer, 1942/1973; Rosenbaum, 1998). Such a hallucination and resulting delusional belief is characteristic of schizophrenia.

**Conclusion**

Many attempts have been made to understand Adolf Hitler and what could have led a human being to commit atrocities of such grand and epic proportions. Too often many of these attempts have sought explanation and understanding through the non-explanatory conclusion that Hitler was merely “evil”. Others have chosen to simply ignore the question and write-off his actions as beyond understanding. Such evasions are deeply unscientific and unsatisfactory. We have attempted in this paper to provide a psychological-historical analysis of Adolf Hitler from a variety of personality and psychopathological perspectives. This review suggests that Hitler was a human being afflicted with a variety of deeply destructive psychological disorders which were experienced in combination and led to the development of a character so disturbed that the beliefs and behaviours he exhibited are easily comprehensible. What is more interesting is how such a deeply disturbed human being was capable of attaining such power and exerting such influence over so many individuals, the vast majority of whom were not afflicted with any kind of psychological pathology yet committed acts of such horror.

**References**


**AUTHOR BIOGRAPHIES**

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