Contents

List of contributors: House guests vii
Acknowledgments x

Introduction 1

PART I
Diagnosing House 9

1 Doctoring individuation: Gregory House: Physician, detective or shaman? 11
LUKE HOCKLEY

2 The physician’s melancholia 27
JOHN IZOD

3 Playing House: Convincing them of what you know simply by who you are 43
CHRISTOPHER HAUKE

PART II
Consulting House 57

4 House’s caduceus crutch 59
TERRIE WADDELL

5 Anatomy of genius: Inspiration through banality and boring people 75
LUCY HUSKINSON

http://www.routledgementalhealth.com/house-the-wounded-healer-on-television-9780415479134
<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Author</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Limping the way to wholeness: Wounded feeling and feeling wounded</td>
<td>ANGELA COTTER</td>
<td>101</td>
</tr>
<tr>
<td>7</td>
<td>Our inner puer and its playmates, the shadow and the trickster</td>
<td>SALLY PORTERFIELD</td>
<td>116</td>
</tr>
<tr>
<td><strong>PART III</strong></td>
<td><strong>Dissecting House</strong></td>
<td></td>
<td>131</td>
</tr>
<tr>
<td>8</td>
<td>House not Ho(l)mes</td>
<td>SUSAN ROWLAND</td>
<td>133</td>
</tr>
<tr>
<td>9</td>
<td>Gestures of excess: An exploratory analysis of melodrama as a collective archetype</td>
<td>LESLIE GARDNER</td>
<td>152</td>
</tr>
<tr>
<td>10</td>
<td>Not as a stranger</td>
<td>JOHN BEEBE</td>
<td>169</td>
</tr>
<tr>
<td>11</td>
<td>‘I feel like a failure’ – in-House feminism</td>
<td>CATRIONA MILLER</td>
<td>188</td>
</tr>
</tbody>
</table>

**Glossary**  
**Index**  

http://www.routledgementalhealth.com/house-the-wounded-healer-on-television-9780415479134
Chapter 1

**Doctoring individuation**

Gregory House: Physician, detective or shaman?

*Luke Hockley*

---

**Introduction**

Gregory House (Hugh Laurie) is both a gifted diagnostician and an unpleasant human being. He is also curiously likeable. Indeed Hugh Laurie (despite the change in accent and the newly acquired walking stick) is now seemingly inseparable from his character in *House*. He has become a somewhat improbable heartthrob, at least so far as UK viewers are concerned, where he is better known as a comic actor from television series such as *Jeeves and Wooster* (1990) and *Blackadder* (1982/3).

Nonetheless, in 2005 the US publication *TV Guide* labelled him one of ‘TV’s Sexiest Men’ (5 June 2005) and in 2008 he came second on the list of sexiest television doctors ever, just behind ER’s Doug Ross (George Clooney). But not everyone is a fan of Gregory House, perhaps because he embodies contradictions. As this volume shows it is almost as though his internal divisions manifest themselves in the opinions of viewers and theorists alike.

This tension is encapsulated rather neatly in another headline from *TV Guide*: ‘House, the man you love to hate’ (17 April 2004). In the Jungian world opposites run into each other and unconscious projections run rife. House is a figure who embodies both the best and the worst aspects of being a doctor. Sometimes he saves lives, and at other times he is almost complicit in his patient’s death. He is what is sometimes called a ‘wounded healer’ both literally and metaphorically. Indeed this chapter is going to suggest that to understand the complicated appeal of House we need to see him as a complicated character rooted in a range of different literary, filmic and anthropological traditions. As a doctor he is part detective and part shaman and it is this proximity to the shadow and the unconscious which is both appealing and frightening.

However, little is served by trying to come up with a ‘balanced’ view of Dr House. That enterprise would be thwarted by his contradictory nature and end up being merely an attempt to allay our own fears that something unconscious is at play. Instead I want to suggest that it is not that we are
seeking to come to a reasoned interpretation of who this Dr House is, but that Dr House can more fully be understood as someone who experiences life as an individuated person. Not perfect, but whole. Not pleasant, but the person he is. As the subject of analysis, he does not need to be reined in or pinned down with the appropriate archetypal tag, such as ‘wounded healer’. It is precisely because there are unpalatable forces at work that temptation to neuter the unconscious with neat archetypal terms should be resisted. Instead we, along with the 16 million American viewers that this show attracts each week, are better off savouring the contradictions.

**What is individuation?**

One of the many distinctive contributions to the psychology of the individual made by Jung is the idea of ‘individuation’. Jung positions himself quite differently to Freud who came to the view that psychological disturbances in adult life were always the result of unresolved difficulties from childhood. Jung thought this was at best partial and at worst inaccurate. Instead, Jung wanted to re-orientate the psyche and rather than constantly looking back to childhood he thought it was important to examine the current situation. Why look into the past when there is every possibility that the current situation will contain enough material to tell the therapist what is happening for the client? Jung thought that there was no need to overly complicate the matter.

Along with this emphasis on the present moment, Jung’s view was that the psyche was teleological, which is to say that it has a goal. He suggests that the aim of every human is to live to their fullest potential and to become completely the person they are. This is not an easy undertaking as family, friends and society all have views about how we should behave. So at its simplest, individuation involves just aging and letting the body grow old and eventually die. However, the complexity arrives when we try to understand what it means for us to live in a personal and unique manner within this context, since it makes the contradictions between our individual psychology and collective expectations explicit.

Individuation is also a psychosomatic concept, linking the unconscious with the body. This link is important since it is a theme that we are going to return to as we consider both *House*, the television series, and Gregory House, the man. Jung puts it as follows:

In so far as this process [individuation], as a rule, runs its course unconsciously as it has from time immemorial, it means no more than that the acorn becomes and oak, the calf a cow, and the child an adult. But if the individuation process is made conscious, consciousness must confront the unconscious and a balance between the opposites must be
found. As this is not possible through logic, one is dependent on *symbols* which make the irrational union of opposites possible.

(Jung 1952: para. 755, emphasis as original)

As a diagnostician Gregory House is concerned with the health of the body and in making sure that it can run its course. His medical interventions are designed to restore the body to a state of health and as such we conceive of him as someone who supports and assists in the biological aspects of individuation. However, as we will see, House’s evolving personal psychology, or his process of individuation, gets mixed up with the treatment of his patients – indeed this unconscious aspect of his psyche is crucial in coming to a view about why he treats patients as he does, and how he interacts with both his immediate team and the hospital in general.

The interweaving of the personal and the social is significant for while individuation is a personal matter it also has broader collective and cultural aspects. Jung suggested that to undertake the work of individuation was to place the need for personal authenticity over and above cultural norms and expectations. There is a catch here. Jung seems to be suggesting that the only way to be fully the person you are is to reject the social conventions and etiquette of the day. Yet this interpretation of matters is only partly true. What Jung is really driving at is that individuation requires that we are conscious in broader contexts about the choices that we make. In making these choices we are inclined to privilege our inner preferences, even if they fly in the face of what society regards as ‘normal’ or acceptable behaviour. In so doing we opt for authenticity over social or cultural expectation and personal need over social conventions. The downside to this is that the comfort of the collective, the easy life of fitting in and going with the flow, is abandoned in favour of the personal struggle to be fully ourselves. For Jung, this call to individuation is a vocation. Indeed, Jung thought that when the individuation process was made conscious it took the form of quests, heroic tasks, labyrinths and other maze-like forms. He comments:

The words, ‘many are called, but few are chosen’ are singularly appropriate here, for the development of personality from the germ-state to full consciousness is at once a charisma and a curse, because its first fruit is the conscious and unavoidable segregation of the single individual from the undifferentiated and unconscious herd. This means isolation, and there is no more comforting word for it. Neither family nor society nor position can save him from this fate, nor yet the most successful adaptation to his environment, however smoothly he fits in. The development of the personality is a favour that must be paid for dearly.

(Jung 1934: para. 294)
Clearly Gregory House is not overly concerned with the niceties of everyday social interaction. His numerous ‘House-isms’ encapsulate his frustration with the demands of patients and colleagues alike to moderate his behaviour to a social norm: ‘Everybody lies,’ House opines (*Pilot*, 1: 1), and again, ‘Normal’s not normal’ (*Autopsy*, 2: 2), and ‘Guilt is irrelevant’ (*House Training*, 3: 20) and ‘Lies are like children: they’re hard work, but it’s worth it because the future depends on them’ (*It’s a Wonderful Lie*, 4: 10), to cite only a few examples.

The point is that individuation does not offer a model of personal perfection, rather it is more usefully thought of as an ongoing life process in which the challenge is to make conscious the unconscious as a particular individual is driven to do. Jung stressed that individuation was not about losing our imperfections, rather he thought it was about ‘wholeness’ which for him involved not eradication of imperfection but rather its acceptance. We can go further. Individuation does not offer a paradigm for psychological health, it is not about being free from complexes or fantasies. Rather it offers a way of being in the world, a way which others might find threatening, distasteful or bizarre. Put another way, the challenge of individuation is to find a personal myth, a way of understanding how we want to live in the world. Like it or not, it seems clear that Gregory House has found his personal myth.

**The body – the unconscious and disease**

Jung’s model of the psyche is a psychosomatic one, making it a good fit for my proposal about House, i.e. that it is a drama about the interplay between medicine and personal psychology. Of course there are other narrative tropes and inflections at play. *House* is also partly about the institutional politics of a large hospital. It explores the role and power of individualisations in such an organisation, from the Executive Board down. But sitting underneath all this, or we might say at the centre of all this, is Gregory House – it is his psyche, his way of thinking and behaving, which permeates the series.

As mentioned, individuation is the lifelong process of bringing unconscious contents closer to consciousness with a view to living a more authentic and fulfilling life. Jung hypothesised that underlying this process there were a series of psychological structures which regulated how individuation would unfold, and he called these ‘archetypes’. Archetypes can roughly be thought of as analogous to psychological genes. They are partly inherited and partly arise from the circumstances of our upbringing. Another way of thinking about them is to regard archetypes as a predisposition to behave and to conceptualise the world in certain ways.

Archetypes influence all aspects of our lives. For example, they impact on how we present ourselves and how we try to fit into society, what Jung
called the ‘persona’ – the archetype of social adaptation. Similarly our gender identity arises from the interplay of the ‘contrasexual archetypes’. In essence this is the idea that our biological sex should not limit our access to ways of being which tend to be culturally prescribed in terms of femininity and masculinity. Contrasexuality suggests that everyone has access to a much fuller range of human gendered sexuality than culture generally allows. Jung outlines numerous other archetypal patterns, noting that often archetypes appear in clusters or groups with one prefiguring the other. This notion of underlying patterns is a useful consideration as it moves us away from thinking about individuation as a linear process predicated on a series of steps. Instead it is more productive to see individuation as something ‘messy’ with different archetypes and aggregates of archetypes coming into consciousness at different times over the course of an individual’s life. The question of what might be going on ‘archetypally’ in House is something we will get to in a moment.

But first the perennial question about archetypes: if archetypes such as the contrasexual archetypes are invisible then how can their presence be deduced? Jung had two related answers to this problem. The first is that archetypal patterns manifest themselves in images. While the pattern may be fixed, the images that give expression to that pattern come from the interaction of the archetype with its social setting. For example the underdeveloped part of the psyche is what Jung termed the ‘shadow’. We are both attracted to and afraid of this part of ourselves, especially when it is not well understood, or to use a more psychological language, integrated into consciousness. The exact form the shadow takes will vary from person to person but typically it will induce a certain attraction combined with a sense of fear or unease. The vampire and the criminal are common images of this archetype. We are unaccountably fearful or drawn to these figures. As we shall see, in House disease expresses both House’s fascination with his shadow and his frustration and anxiety when it eludes his conscious grasp – something that he is at different times more and less relaxed about.

Jung goes still further in suggesting that it is the interplay of archetypes and society which gives rise to the fundamental ideas on which cultures are founded. There is a sense in which again this can be thought of as the interplay between pattern and image, only this time the interaction is occurring in society as a whole rather than in the life of a particular individual.

The unconscious ... is the source of the instinctual forces of the psyche and of the forms or categories that regulate them, namely the archetypes. All the most powerful ideas in history go back to archetypes. This is particularly true of religious ideas, but the central concepts of science, philosophy, and ethics are no exception to this rule. In their present form they are variants of archetypal ideas, created by
consciously applying and adapting these ideas to reality. For it is the function of consciousness not only to recognise and assimilate the external world through the gateway of the sense, but to translate into visible reality the world within us.

(Jung 1931: para. 342)

It is easy to develop this point to realise that there is an archetypal component to our conception of what constitutes ‘health’. This is to see illness in psychosomatic terms. Jungian authors such as Maguire (2004) and Ramos (2004) have in their different ways explored this territory. Their approach is to see illness as a disruption of the body’s healthy and balanced system of self-regulation. It follows that one way of conceptualising disease is that it is an image of disruption to the archetypal substrata of the psyche. While Ramos explores how the body may symbolise and express such disruption, Maguire concentrates on the archetypal dimension of skin, as the semi-permeable barrier between the inner self and the outer world that is breached by illness. It is also to conceptualise health in holistic terms which sees humans as body and psyche immersed in a social environment. (Lipowski 1984). This is also how House thinks. As he succinctly puts it, ‘Your mind controls your body. If it thinks you’re sick it makes you sick.’ (Airborne, 3: 18).

This consideration of what constitutes health takes us to another understanding of how ‘health’ is considered. What ‘health’ is varies from person to person and changes over time. In Jungian terms, the archetypal view of health is that it is a state of being in which the body’s energy is balanced and flowing freely. Jung calls this type of energy ‘libido’ and it is both activated and channelled via the archetypes. Importantly, to have a mind and body that are in balance with each other does not require adaptation to the social setting – indeed the social setting may be contributing to the imbalance in the first place. Again this corresponds to Gregory House’s view of matters and is what underlies his constant berating of the management of Princeton-Plainsboro Teaching Hospital. House’s work is largely mental, he works on solving why patients react in the way they do. His request to the management is not ever for more resources (House uses those available to him with abandon and as he sees fit) but rather for less interference to enable him to deduce why a given disease is taking the particular course it is. The problem with his actions is that they often involve complicated and sometimes life-threatening interventions.

The disease detective

This raises the question: why is House driven to such ends? Part of the answer to this lies in the association that the screenwriters have created
between House and the filmic and literary genres of detective fiction. While House is a physician and a medical diagnostician, the way he approaches his job, and indeed the way that he opts to live his life, is more like that of his legal counterpart, the detective. Throughout the series the parallels between House and Conan Doyle’s Sherlock Holmes are made clear and deliberate. (They are explored thoroughly elsewhere in this volume by Susan Rowland in her chapter *House Not Ho(l)mes.* For our purposes it is enough to note the similarity in their names: House and Holmes. Both House and Holmes have close male colleagues: Holmes has Dr J Watson as his *fidus Achates* (faithful friend) and House has Dr J Wilson. Both House and Holmes are musical: Holmes played the violin and House’s instruments of choice include the electric guitar, piano and harmonica. While Holmes used cocaine recreationally, House takes large amounts of Vicodin to relieve the pain of an infarction in his leg muscles (which also provides the narrative justification for House’s cane). Finally, House lives at 221B (Hunting, 2: 07) and Holmes famously lived at the fictional address of 221B Baker Street, London. (This list is not definitive . . .)

Detectives on the screen come in different guises of which Holmes as an intellectual gentleman detective is one variant. Another type is from the hard-boiled detective of 1940s *film noir*. Films such as *The Big Sleep* (1946), *The Maltese Falcon* (1941) and *Laura* (1944) typify the genre. Normally those detectives are loners, seemingly incapable of forming steady relationships and often with an addiction (often to alcohol). These detectives are tortured souls. Pictorially the screen suggests this through the use of dark shadows, canted camera angles and rain-soaked city streets which in combination express the detective’s sense of isolation and inner turmoil.

Gregory House succeeds in combining elements from both traditions. Swapping a trench coat and trilby for jeans and trainers (sneakers) he nevertheless adopts some of the traditional elements of the hard-boiled detective’s persona. For example he sets about the process of diagnosis in an intellectual mode, i.e. a puzzle to be solved. What Holmes shares with the hard-boiled detective is their mutual reliance on leaps of intuition and insight while apparently using logic and deduction. For these detectives the world of ratiocination is not enough, they need proximity to the non-logical world of the unconscious to solve the crime. So too does House.

House parts company with these traditions, however, when it comes to relationships with women. The *femme fatale* of *film noir* is all but missing from the series. Indeed Gregory House often sees women as sexual objects to be either manipulated at work or used for his gratification, not as alluring women whose dangerous charms cannot be ignored. Instead he makes numerous sexual references to his boss, Lisa Cuddy (Lisa Edelstein), and in one episode goes so far as to fantasise about her pole-dancing in a schoolgirl’s uniform. (this is a hallucination which arises from an injury to the head [*House’s Head*, 4: 15]). Another important part of this episode
concerns a mystery woman (Ivana Milicevic) who House sees while he is hypnotised. Returning in a dream which House has at the end of the episode she provides him with clues which help him solve the episode’s core problem. In some ways she represents House’s normally hidden feminine side – what analytical psychology might refer to as his anima, a representation of his contrasexual archetype. The episode is clear about this and the audio commentary makes it explicit, noting that her character’s script title is The Women in Black – the title of a ghost story by Susan Hill (1983). Further, she has two forms, the woman on the bus and Wilson’s girlfriend Amber. Interestingly, when Amber makes her first appearance in the episode (while Chase hypnotises House) she is shot at 40 frames per second to make her appear ‘ethereal’ (Audio Commentary, House’s Head, 4: 15) and this serves to further enhance her supernatural qualities. Giving added weight to this interpretation, the producers comment that their reason for casting Ivana Milicevic was that there was something ‘completely otherworldly and hard to place about her’ (ibid.).

Exploring a similar theme, the episode It’s a Wonderful Lie (4: 10) plays with House’s view of women as either pure or (and) available to him sexually. This cine-literate reference in the title suggests the setting of this episode at Christmas. House decides that one of his outpatients, Melanie (Jennifer Hall), is a prostitute – largely because she is wearing a medal of St Nicholas who as well as being Father Christmas, is also patron saint of children and prostitutes. When she returns with a rash House diagnoses contagious ecthyma as a result of contact with donkeys which he assumes are used in a sex show. Melanie does nothing to dispel his belief and gives him a flyer for a show she is in. Of course, she turns out to be playing the Virgin Mary in a church nativity in which she rides a donkey.

What this suggests about House is that in some ways it subverts audience expectations about the detective genre, while relying at the same time on these tropes to provide an element of narrative engagement. Psychologically, it shows that House is both highly manipulative but also retains a secure sense of self which can withstand the personal criticism that is bound to come his way as a result of his behaviour. So Gregory House contains a duality. Sometimes he uses women for his own ends, as recipients of sexual commentary (particularly to Lisa Cuddy). The character of Allison Cameron (Jennifer Morrison) poses more challenges for House as she is in love with him. In the episode Role Model (1: 17) Cameron resigns her post agreeing to come back only if House will go on a date with her. This happens in Love Hurts (1: 20) although House comments that he will not do it again; Cameron is more ambivalent. House seems both attracted to the caring and compassionate side of Cameron but perhaps also keen to keep his feelings at a distance.

Visually House owes little to the style of film noir. What the series does share with feature film production more generally is the use of single-
camera shooting. This production technique is in contrast to the multi-camera set-ups that are more commonly used for soap operas. *House* is not unique in this respect. Television series including *Star Trek: The Next Generation*, *Desperate Housewives*, *The OC* and *The Sopranos* are all shot using single-camera. However, the effects of this are different in each of the series, although in each case the camera becomes a sort of character in the scene. In *House*, the result on-screen is lots of steadicam shots of House striding down long hospital corridors, moving from room to room. This would not be possible if *House* had been shot on a series of three-wall sets using multi-camera techniques. The effect is to suggest the hospital belongs to House – he can be where he wants, when he wants. Not that the camera is always with him. We often see the team without him, tending patients and carrying out various medical tests and procedures – as such, the viewer becomes House’s proxy, viewing his team at something of a distance.

Single-camera work also means that the common set-up of shot-reverse-shot, where the camera moves between two talking heads with one nodding while the other speaks, is a rarity. Instead, the viewer is offered an insight, a close-up if you will, into the disdain House feels for those round him. The result is subtle but over the course of the multiple series of *House*, where there is the time and scale to be subtle, what happens is that gradually viewers get to find out more about the inner workings of House and his relationship with those around him. This is not a plot-driven series as essentially the plot is the same each week. *House* is character-driven television, and this gives it an inherently psychological feel that is enhanced through its references to the world of the detective and the act of detection. Such psychological territory is well served by the use of single-camera technique.

If Gregory House is a detective this raises the interesting issue of what crime has been committed and who is the criminal? In *film noir* the crime is nearly always murder but in *House* there aren’t criminals and murders *per se* but there are viruses, infections and pathologies all of which attempt to rob the patient of life. The result is that in the narrative of *House* the crime is the corruption of the body while the disease becomes the criminal. This casts House in the role of the detective but unlike his punning namesake Sherlock Holmes, House is at least nominally part of a team – not a lone detective, working outside the institutional structures of the police and the judiciary. Of course House does his utmost not to fit into Princeton-Plainsboro Teaching Hospital. In part this outsider stance is what viewers expect of the generic detective, but it is also important for House that he exists on the edge. He needs a liminal space in which he can move between the world of rational thought and the brilliance of intuitive insight. Put another way, he needs to stay close to the material world of consciousness while also being able to descend into the underworld of infection and disease.
Being in a hospital also gives House access to complicated medical machinery and extensive diagnostic testing. The medical science in the series remains inaccessible to the viewer. We are not supposed to understand the body, its distress and disease. After all, this is not a documentary nor is it educational television. (c.f. the chapters by John Izod and John Beebe in this volume.) The machines, the diagnostic procedures, all remain the stuff of medical magic yet House is able to move between these two seemingly incompatible worlds and as an insider can reveal its secrets. Levi-Strauss describes such individuals as anomalous characters – ‘anomalous’ because they exist neither in the world of good nor in a world of bad. Instead they straddle this type of binary divide and are able to contain the competing tensions of X and X. What engages us, therefore, is House’s fluidity and familiarity with these two realms as he moves between intellect and insight. As a blog post on the website Polite Dissent put it:

There seemed to be no logic behind his [House’s] deductions, he just seized on some minuscule fact and used it to concoct some untenable theory. That he turned out to be right in the end seemed more luck than skill.

(‘Scott’ 2004)

Following a hunch, and making leaps of logic and insight are what all detectives do when they solve a crime. They can do this because they are close to the criminal and inhabit the same psychological space of the criminal underworld. Alternatively, as we might put it, they live close to the unconscious. We have already seen that individuation requires that the unconscious becomes conscious and that unconscious contents express themselves as images which can be projected onto those round about us. It follows that the shadow side of the detective is the criminal and that in many ways the detective and the criminal are different sides of the same coin – opposites that run into each other, a psychological principle that Jung termed enantiodromia (a description he took from Heraclitus). In fiction, at least, the reason detectives can catch criminals is that they understand the psychology of the underworld, for this is their milieu too. It is no accident that House has a dead leg muscle – he carries the pathology with him – he is the stuff of shadow. Put another way, the detective needs to get close to the criminal, right alongside him, shoulder to shoulder.

House – doctor or shaman?

The everyday language for the insights that House has is, as the quote above puts it, more luck than skill. Those versed in the discourse of
analytical psychology or of the mythological world might put it differently. House behaves in an intuitive and apperceptive manner; he relates to the physical world partly as an actual corporeal reality and partly as a source of inspiration and insight. In this respect House has something of the persona of the magician, the shaman or healer. Jung’s umbrella term for this type of psychological presentation is ‘mana personality’. Now this might seem at odds with House’s disdain for anything other than medicine routed in a strictly hi-tech bi-medial model. However, it is worth reflecting that this type of medicine fails House and his team on a regular episode-by-episode basis. Indeed, the dramatic tension of most episodes relies on the differential diagnosis proving inadequate. Partly this is the result of the narrative requirements of an episodic series in which narrative expectation and familiar characters with which to populate the show week in week out are demanding. But it is also the case that House is schooled in a particular type of medicine which he cannot eschew, yet at the same time he cannot work within the strictures that this type of ideological and institutional confinement confers.

This dysfunction hints at a certain puer-like (or childlike) quality in House. As the producers comment, ‘He’s at his best when he’s speaking from his inner child . . . or outer child’ (House’s Head, 4: 15). The audience imagines what it would feel like to be unfettered (like House): if only the management did not insist on such and such, we tell ourselves; if only we could be allowed to get on and do our jobs . . . then finally the bosses would realise my full potential and I could ‘re-think’ this business. House acts out that fantasy for us. And because it is a childlike fantasy that is not based in the reality of the world but on acting out a fantasy streaming from an arrested part of the self, it carries with it a powerful, archaic and archetypal appeal.

This, then, is part of the function of the mana personality. Jung borrowed the term from anthropology to explain the specific power that some people appear to have in influencing the behaviour of others. This is seen most clearly in the characters in fairy stories, myths or indeed dreams who seem to have a mystical insight into what is happening. As a result, they are often able to direct the hero forward, or at least put him back on the right track. The reason for this capacity is that they have a proximity to the unconscious and are essentially archetypal figures who are able to use their intuition to tap into the energy of the unconscious. Samuels et al (1986: 89) put it as follows:

Mana is a word derived from anthropology, being Melanesian in origin; it pertains to the extraordinary and compelling supernatural power which emanates from certain individuals, subjects, actions and events as well as from inhabitants of the spirit world. The modern equivalent is ‘charisma’. Mana suggests the presence of an all-pervading vital force,

http://www.routledgementalhealth.com/house-the-wounded-healer-on-television-9780415479134
a primal source of growth or magical healing that can be likened to a primitive concept of psychic energy.

So there is a sense in which modern media stars, including actors and actresses, have something of a mana personality. House has the two aspects. One derives from his work as a healer, the other stems from the inter-fictional carryover of Hugh Laurie, who is an unusual figure as a British actor in an American series, playing an American. As noted in the introduction, Laurie is well known to UK audiences for playing comedic roles, and his appearance as an American diagnostician contributes to a certain strangeness to his casting as Gregory House, at least for that section of the viewing audience who are familiar with his previous work (c.f. Dyer 1979: 121 on audience foreknowledge).

But of more immediate concern here are the quasi-shamanistic practices which form part of House’s persona. These are sometimes subtle, sometimes less so. Like some shamans House relies on drugs in order to work effectively. Sometimes he also feels the need to isolate himself in order to gain an insight into a given situation. For example in *It’s a Wonderful Lie* (4: 10) House immerses himself in cold water in an effort to clear his mind, and to bring some clarity to what are partial memories. Of course, immersing yourself in cold water is not in and of itself a shamanic practice. Where the shamanistic aspect manifests itself is in House’s ritualistic need to mark his position as someone outside the norms of society in order to effect healing within the same society. The shamanic part of this is that House is both part of the institutionalised practice of medicine and yet he also needs to be outside this frame. His immersion in cold water encapsulates this inside and outside-ness and is redolent with suggestions of birth, of someone who exists in a liminal and transitory space.

The dialogue in *House* also seems to suggest that House’s proximity with disease is closer to that of a shaman than a western doctor. It is almost as though House summons up disease, as though it is House’s own wounded nature, both physical and psychological, which brings the disease into being. Almost every episode starts with an apparently healthy person suddenly falling ill. Once he or she encounters House they invariably get worse. But sometimes the opposite is true, as the character Thirteen comments, ‘House has gone and so have her symptoms’ (*Not Cancer*, 5: 2). The idea that an inner psychological condition is activated as part of a process of healing is an idea that will be familiar to psychotherapists. It is not that the therapist causes illness, rather it is the clinician’s own wounded nature that partly facilitates the process of identification and healing; it allows for empathy and a sense of recognition. In the case of *House* there is a rather literal representation of this process translated into the medical realm. *House* amplifies qualities which can be thought of as being present in many types of healing. I have in mind here the dual need to believe in the expert
nature of someone who knows more about ourselves and our health than we do, and also in the effectiveness of the medicines and treatments we are given. In the case of the character of Gregory House, both have a dark side. House deals with extreme cases and his treatments are also extreme as his patients are often close to death.

Interestingly the use of special effects sequences in *House* also promotes the proximity of Gregory House to both shamanistic practice and the shadow side of his psyche. From the first episode of the first series *Pilot* (1:01) most of the programmes feature a sequence in which the camera seemingly enters the body of the patient and follows the course of the disease as it tracks its progress either through various organs or sometimes at the molecular level. This is visually spectacular and in terms of the series the device has several narrative effects. First it suggests to the viewer that House is engaged in medical science that is serious and yet also magical – the ability of the viewer to transcend the limitations of physical space and to see inside the patient’s body as a magnified image reflects what is happening in House’s mind – is this what he sees, or at least imagines is happening inside his patient? In this way, these images reflecting the ‘insights’ of House become a channel for the viewer into the mysteries of the human body. As the producer of *House* remarks on one of the audio commentaries, ‘So much of what we do takes place in House’s head, usually metaphorically’ (*House’s Head*, 4:15).

Second, these incursions into the body reinforce the view of House as a detective, who uses his intuition to get close to the criminal – in this case, the disease. My suggestion is that to do so House needs to get close to his own shadow. Interestingly special effect sequences normally start as House gives a diagnosis for a patient and they continue in voice-over as House continues his narration. It is almost as though he is conjuring up the disease, as though he is bringing it into being for the purposes of healing, bringing it to life for viewers and characters alike who cannot see and cannot understand without his intervention thereby initiating the process of healing. This raises the interesting possibility that it is House’s shadow, his dark, painful and shamanistic side which is needed to invoke the disease and somehow pull it into consciousness where it can be understood and treated. Citing Eliade, Jung notes, ‘Dismemberment is a practically universal motif of primitive shamanistic psychology. It forms the main experience in the initiation of a shaman’ (Jung 1938/1954: para. 91n.). Perhaps there is a sense in which House’s invasive exploration of the patient’s body serves as an initiatory rite for both himself and for his team. House’s team frequently get caught up in this shadow play, as when he requires them to break into patient’s homes, or when he pits one against the other and when he toys with the affection they feel for each other and the wariness with which they treat him. House disturbs and provokes his team, yet he cannot work without them. Even the differential diagnosis scenes, which feature in
most of the episodes, are combative and challenging in tone and nature. In short, House needs a home for his shadow and he finds that home in the interactions with his team and his patients.

**Conclusion**

What arises from this set of relationships between Jungian psychology and *House*? I want to suggest that *House* provides us with a particularly clear example that Jungian individuation is not about psychological health. Indeed, and perhaps somewhat ironically for a medical series, it would clearly be perverse to claim that *House* offers models for psychological health. Instead, we need to see *House* from quite another angle. Instead of framing the series as providing examples of psychological qualities and attributes, it is more helpful to start with the psychological theory. From this perspective the idea of individuation offers an explanation as to why a manipulative, cantankerous and drug addicted character can be voted as one of the sexiest doctors on television. It also provides a new take on the popularity of the series. There is something deeply appealing and basic in people being themselves. This comment should not be taken lightly as it goes to the very root of what individuation is about. One of the distinctive aspects of Jungian psychology is the challenge it offers to be truly oneself and it sees this as the core psychological undertaking of life.

The extent to which Gregory House can be considered a character who is actively engaged with the work of individuation is a moot point. He remains a character in a television series and not one who is prone to self-revelatory psychological speculation. However, we should not be deterred from the attempt to find something of psychological value in the series and its characters. As Jung remarked of the novel, 'In general, it is the non-psychological novel that offers the richest opportunities for psychological elucidation (Jung 1930/1950: para. 137). What we know about House is that it is his acknowledgement of his own addicted and manipulative nature which is central to his work as a diagnostician. He functions in a space that exists between the inner mysteries of the body and the rationality of the medical and clinical world. House needs to contain these quite separate demands. In so doing, he struggles to be the person he is, namely an imperfect container for the conflicts that exist between the body, the mind and how these enact themselves in everyday life.

The realisation of the interconnectedness of our being is part of what individuation demands of us. Jung does not often make his views about individuation quite so explicit but in the following extract from a letter to a German physician, referred to as Dr S, Jung makes his views on the psychosomatic nature of the psyche clear. There are several published letters between Jung and Dr S. In this letter he expresses his view that the biological concepts of the parasympathetic and the sympathetic nervous...
systems (which along with the enteric nervous system form the autonomic nervous system) are the physiological counterparts to the unconscious.

If you do not go along with the unconscious properly, i.e. if it finds no expression through consciousness and conscious action, it piles up its libido in the body and this leads to physical innervations... The unconscious is largely identical with the sympathetic and parasympathetic systems, which are the physiological counterparts of the polarity of unconscious contents. You won’t get out of the ‘old house’ until you have drained to the last drop what is going on there. Only then can the situation change.

(in Adler and Jaffé 1973 (Letter of 20 October 1939): 278)

One suspects that Gregory House has little intention of getting out of the ‘old house’. In part this is in the nature of long-running television series. If the persona of House changed radically it might well jeopardise what is a successful and enduring television series. But what it also shows is the psychological insight that the idea of a cure is misplaced. House cannot cure himself and he does not want to. If he did he would cease to be House – he needs his demons. The effect week after week of what is essentially the same plot is to foreground the inevitability that the body and the psyche are tied together in a struggle to cope with life’s difficulties and to use these as a source of insight and understanding. As Jung comments:

But it does contradict a certain misplaced enthusiasm on the art of the therapist as well as the view that analysis constitutes a unique ‘cure’. In the last resort it is highly improbable that there could ever be a therapy that got rid of all difficulties. Man needs difficulties; they are necessary for health. What concerns us here is only an excessive amount of them.

(Jung 1916/1958: para. 143)

My suggestion, then, is that individuation is not devoid of pathology nor is it a model of health. Rather, as Gregory House shows, it is a way of living in the world. This way of living, or we might say ‘being’, is one in which the biological and psychological are deeply entwined. It eschews the conventions of society when it comes to the norms of social behaviour and cultural expectation. In short, House not only needs life’s difficulties but he also thrives on making life problematic for anyone he is close to.

References


http://www.routledgementalhealth.com/house-the-wounded-healer-on-television-9780415479134


