

Mother-Child Interaction During Separation-Individuation

Margaret S. Mahler & Kitty La Perriere

To cite this article: Margaret S. Mahler & Kitty La Perriere (1965) Mother-Child Interaction During Separation-Individuation, *The Psychoanalytic Quarterly*, 34:4, 483-498, DOI: [10.1080/21674086.1965.11926361](https://doi.org/10.1080/21674086.1965.11926361)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926361>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



Citing articles: 9 View citing articles [↗](#)

MOTHER-CHILD INTERACTION DURING SEPARATION-INDIVIDUATION

BY MARGARET S. MAHLER, M.D. and KITTY LA PERRIERE, PH.D.
(NEW YORK)

THEORETICAL DISCUSSION

The first weeks of extrauterine life of the infant were designated as the stage of normal autism by Mahler. This normal autistic phase,¹ from birth until about the second month of life, corresponds to the 'undifferentiated phase' of Hartmann, Kris, and Loewenstein (4). During this phase there is no discernible distinction for the infant between inner and outer reality, nor does there seem to be any distinction for him between himself and his inanimate surroundings.

As the infant gradually passes into the symbiotic phase, he seems to become dimly aware that what relieves his instinctual tensions (hunger and other needs) comes from the outside world, whereas painful accumulation of tension is generated within himself. For this dim recognition to exist there must be, during the symbiotic phase, some rudimentary differentiation of the ego. In the intrapsychic organization of the infant, the boundaries of self and mother are still more or less confluent and fused. They are distinct for him when he is, for a short time, in a state of affect hunger (7), and they disappear again when he experiences gratification and satisfaction.

At the end of the fifth month and during the sixth month, we observe the infant's gradual emergence from the symbiotic

Presented at the Symposium on Research in Mother-Infant Interaction at the Annual Meeting of the American Orthopsychiatric Association, Chicago, March 1964.

This paper is based on research supported by Grant #MH08238, of the National Institute of Mental Health, which is carried on at the Masters Children's Center, New York.

¹ Many objections have been raised to this term, which Bleuler reserved for a severe pathological state. In the present context it conveys the meaning that there is no polarity between the self and any object.

stage of dual-unity. But just before this, at the peak of the symbiotic stage at around five months, we can note the beginning of the next phase: *separation-individuation*. Preliminary studies (9, 11) have led to tentative descriptions of four characteristic subphases of separation-individuation, which we hypothesize occur in all normal infants (10).

1. The first subphase of the individuation process, *differentiation*, begins at the age of five or six months, and lasts for the next four or five months. It is characterized by decrease in bodily dependence on the mother, which has hitherto been total. This subphase coincides with the maturational growth of locomotor partial functions, such as creeping, climbing, and standing up. The child now also begins to look beyond his immediate visual field (scanning) and makes progress in coördination of hand, mouth, and eye; he begins to express active pleasure in the use of his entire body, shows interest in objects and in pursuit of goals, and turns actively to the outside world for pleasure and stimulation. Primitive sensory-motor investigation of his mother's face, hair, and mouth are characteristic of this period, as are the peek-a-boo games initiated by his mother and then taken over by the infant. These emerging functions are expressed in close proximity to the mother, and the child seems chiefly interested in his own bodily movements and in his mother. This is particularly clearly shown by the fact that the young baby, up to ten months, prefers to play around his mother's feet, a preference made manifest by his much better functioning and consistency of mood when he is near his mother.

2. The second subphase of separation-individuation is *the practicing period*. It overlaps the previous subphase, beginning at any time after the tenth month and lasting until about the fifteenth month. The child now steadily increases his practicing of motor skills and exploration of his expanding environment, both human and inanimate. This is true whether the infant has started to toddle or is in the process of becoming proficient in ordinary crawling, righting himself, or paddling

around rapidly, using his entire body in a belly crawl. The main characteristic of this subphase is the great narcissistic investment of the child in his own functions and his own body, as well as in the objects and objectives of his expanding investigation of reality. He is relatively untroubled by knocks and falls and other frustrations, such as having a toy grabbed away by another child. Familiar adults are usually accepted as substitutes for his mother, in surroundings to which he is accustomed. (By contrast, he will change greatly in this respect during the next subphase of separation-individuation.)

With maturation of his locomotor apparatus, the child begins to venture further from his mother's feet, and is often so absorbed in his own activity that he seems oblivious to her for long periods of time. However he returns to her periodically, seeming to need 'emotional refueling' (11) by physical contact with her. In this second subphase he crawls to his mother, rights himself on her leg, and touches her, or merely stands leaning against her leg. His striving to explore and, as Greenacre puts it, his 'love affair with the world' (2) last for only short periods of time; they wane as soon as he becomes tired, and he then again needs to 'refuel' by being near his mother.

3. The third subphase, *rapprochement*, begins as the child becomes able to walk, and lasts from about fourteen to about twenty-two months. As he masters locomotion, the infant becomes aware that he is now able and destined to move away from his mother. This creates in him both pleasure of mastery (differing in degree in different children) and separation anxiety. Early in our study it was recognized that small amounts of separation anxiety promote the process of individuation.²

By the middle of the second year, when the infant has become a toddler, he grows more and more aware of his physical

² The beginning of the well-known negativistic phase (of which rudiments can be detected as early as the middle of the symbiotic phase [Cf. 17]) is also relevant to the child's tendency to disengage himself from his symbiotic tie with his mother. This tendency culminates in the second year of life in the somewhat stereotyped gestures and expressions of 'No!' (16).

separateness. With this awareness, he begins to lose his previous resistance to frustration and his relative obliviousness of his mother's presence. We hypothesize that the great narcissistic investment demanded by the practicing period is no longer required once mastery is achieved, and libido can therefore be redistributed and directed toward objects. A little fear of object loss can be observed—just enough for the toddler to seem suddenly quite surprised by his separateness. We see this, for instance, when he hurts himself and discovers, to his perplexity, that his mother is not automatically at hand.

During the whole period of separation-individuation, but especially during the subphases of practicing and rapprochement, maturation of the mental apparatus, particularly of the motor apparatus and of cognition, makes the ego of the infant and toddler aware of separateness. He is therefore faced by the necessity of emotional separation from his mother just at the time when he must cope with an expanded outside reality. And all this occurs in the midst of the psychosexual conflict. Relative obliviousness to his mother's presence, which is characteristic of the second subphase, the practicing period, is replaced by active approaches to her. A seemingly constant concern with mother's whereabouts characterizes the third subphase. As he becomes aware of his ability to move away from mother, the toddler seems to have increased need and desire for his mother to share with him every new acquisition of skill and experience. For this reason we call the third subphase the period of rapprochement.

Incompatibilities and misunderstandings between mother and child can be observed even in the average mother and her normal toddler. In the subphase of rapprochement, the toddler's renewed active wooing and demand for his mother's constant participation seems to her contradictory. While he is now not as dependent and helpless as he was six months ago and seems eager to become even more independent, he nevertheless insistently expects the mother to share every aspect of his life. During this subphase some mothers cannot accept the

child's demandingness; others are troubled by the fact that the child is becoming increasingly independent and separate.

This third subphase demonstrates with particular clarity that the process of separation-individuation has two complementary parts: one, individuation, the other, separation. Individuation proceeds very rapidly, and the child exercises it to the limit. Yet as the child becomes aware of his separateness, we observe how he tries to cope with it by experimenting with actively moving away from and moving toward his mother. The quality and amount of this experimentation is one of the best clues for assessment of the normality or deviation from normality in the separation-individuation process. One significant characteristic of the third subphase is the great emotional importance for the child of sharing with his mother, so that the degree of his pleasure in independent functioning and in ventures into his expanding environment seem to be proportionate to, and dependent on, the degree to which he succeeds in eliciting his mother's interest and participation. Whether or not the wooing behavior of the toddler may be considered normal depends on the history of the previous subphases, as well as on the mother's reaction to the rapidly individuating toddler and her communication with him during this period of rapprochement.

The first signs of directed aggression during this subphase coincide with the anal phase; so do growing possessiveness toward the mother and impulsive acquisitiveness. It is at this period that the toddler's need is specifically for his mother; substitutes are not easily accepted, particularly for physical contact. Another important characteristic of this subphase is the beginning replacement of vocalization and preverbal gestural language with verbal communication. The words 'me' and 'mine' have great affective significance.

Signals of potential danger are several: unusually great separation anxiety or 'shadowing' of the mother, or the opposite, a continual impulse-driven darting away from her with the aim of provoking her pursuit, and excessive disturbances of

sleep.³ Because the separation-individuation struggle is at its peak in the third subphase, falling asleep is like a regression and is an experience of separation; hence, disturbances in falling asleep are indicators of the child's progressive individuation and of his defense against the threat of symbiotic fusion represented by sleep (8).

4. The fourth subphase is characterized by unfolding of complex cognitive functions: verbal communication, fantasy, and reality testing. During this period of rapid ego differentiation, from about twenty or twenty-two months to thirty or thirty-six months, individuation develops so greatly that even a cursory description of it exceeds the scope of this paper. Suffice to say that establishment of mental representations of the self as distinctly separate from representations of the object paves the way to object constancy (10, 12). The actual continual presence of the mother is no longer so imperative.

CLINICAL ILLUSTRATIONS

Although our study⁴ is focused on children five to about thirty months old, we prefer to begin to observe mother and child as early as possible—at an age somewhere between four weeks and two months. Understanding the early interactions and adaptive patterns of the normal autistic and symbiotic periods helps in assessment of the progress and vicissitudes of the ensuing phases of separation-individuation.

Charlie, a full-term but in many ways an immature infant, was brought to the Center by his mother when he was approximately four weeks old. At seven weeks, his neurological status was estimated as more than two weeks less mature than expected at his chronological age, but his potential endowment appeared to be well above average.

His mother had participated in our research with her first child, a pretty, precocious, and eminently verbal little girl

³ Transient disturbances of sleep are characteristic of the second year of life (11, 15).

⁴ For a description of the setting and methodology of the research from which these observations are derived, see Pine and Furer (14).

who gave her mother much narcissistic satisfaction and whom the mother treated as a cherished and 'better-than-I' part of herself. With her infant son, on the contrary, we found this mother anxious, awkward, listless, markedly depressed, and perplexed in her attempts to understand his cues.

Charlie's immaturity was observed in the slow differentiation of waking and sleeping, in his inconsistent rhythm of hunger and satiation, and in his undirected, vague, and diffuse patterns of discharge. These characteristics of the normal autistic phase persisted in Charlie well into the symbiotic phase, not only because of his immaturity at birth but also because of his mother's inability to become predictable in her ministrations to him. We know that the infant learns to discriminate the object world and the difference between inside and outside through the observation that when inner tension mounts, only limited relief can be provided by discharge from within; that to be really satisfactory, relief must come from an outside source.

Charlie's mother was unable to respond to many of his cues; if she responded at all it was to interpret a wide variety of cues, such as crying, squirming, or whining, as 'Charlie wants to be fed'. Every so often, because of her own anxieties, she would push the bottle into the mouth of the sleeping infant, thereby contributing to the child's difficulties in establishing a more distinct pattern of sleep and wakefulness. The infant nursed from the bottle for long periods without reaching satisfaction, at times without even being permitted to drop off to sleep, as his mother would thrust the bottle vigorously into his mouth and move it rhythmically in and out. She was incapable of using her body to comfort him; for instance, she was never observed cradling him. As the result of all this, Charlie could not be easily calmed; even when he advanced in age to the peak of the symbiotic phase, he seemed to continue, well into his fifth month, to respond mainly to enteroceptive-proprioceptive stimuli.

Interviews with this mother disclosed her fear that the sleep-

ing infant might have died, which caused her to wake him frequently and to keep him awake by means of feedings. An excessively small nipple hole, through which very little milk could be obtained, was deliberately used to prolong the feedings, which were made to last one or two hours. The child's mother openly complained of the burden of caring for this small, inadequate infant, and she expressed her concern over his immaturity, which she contrasted with the very satisfactory babyhood of her older daughter. (Since we did not observe the sister before the peak of her second subphase, we do not know whether the mother retrospectively distorted the history of the child's earliest months.)

The relationship between Charlie and his mother improved dramatically when the infant was about four months old. At that time, a maturational spurt seemed to provide Charlie with internal mechanisms for reduction of tension, so that he no longer depended solely on comforting by his mother. Her depression lifted as her anxiety about her son grew less. By the age of five months, Charlie had developed an adaptive pattern of holding himself rigidly straight, not molding himself against anyone who held him. His motor development was accelerated. The closeness of the tie between mother and infant was apparent during the entire symbiotic phase in their parallel shifts in mood, appearance, and functioning. Charlie's motor and perceptual alertness on any particular day reflected his mother's affective state. For example, when he was six months old, at the peak of the normal symbiotic phase, his mother's depression recurred. Once again the baby's development suffered a setback, as reflected in his increased signs of discomfort and psychosomatic manifestations, such as skin rash and upper respiratory afflictions.

Charlie and his mother are an illustration of the circular nature of the interaction between mother and child, which—as we predicted and subsequently have observed—fall within the broad range of average, normal relations of mother and infant.

Consideration of two mothers and their infants illustrates the first subphase of separation-individuation, *differentiation*.

Bernie had had a blissful early relationship with his mother who seemed to find great fulfilment in breast-feeding her infant. For reasons related to her guilt feelings toward her first son (which cannot be elaborated here), she abruptly and impulsively weaned Bernie to the bottle. The weaning brought about a marked change in the mood of the symbiotic relationship. At first the infant insistently and fretfully rooted about for the lost breast, while the mother desperately denied the obvious reaction to the weaning trauma suffered by the infant. The radiance and contentment that his mother had exhibited during the breast-feeding gave way to listlessness and apathy, while the infant in turn became fretful, listless, and apathetic. The happy, smiling, well-molding infant at the breast became a passive, nonmolding, sacklike baby. It is interesting to note that in the arms of the participant observers this infant felt quite different from Charlie with his rigid postures and Stuart who, as we shall see, adapted and molded so well.

The generally difficult interaction of Bernie and his mother was favorably affected by each maturational spurt of the infant's autonomy. Bernie showed great interest in locomotion: he practiced such activity as crawling or pulling up with great pleasure and persistence. As he became able to engage others with his eyes and to give signs of differential recognition of his mother, and as he gained gratification from his own developing partial motor functions, his scope of exploration expanded to include the entire playroom area (and the entire apartment at home). His mother, relieved by the lessening of her son's symbiotic demands, was able to provide appropriate encouragement and protection for him (an achievement, by the way, that she had not been able to attain with her older son, who had also been in our project).

A strikingly different transition from the symbiotic to the separation-individuation phase was observed in Stuart, who enjoyed a close and prolonged symbiotic relationship with his

mother. Both Stuart's parents had symbiotic-parasitic needs, overvalued their child, and kept him in continued symbiotic dependency. This clearly slowed down Stuart's libidinal investment in his motor functions, in which perhaps he was also constitutionally weakly endowed. Whereas Bernie entered the separation-individuation phase with a preferred modality of motor exploration, Stuart's preferred modality was that of the tactile and visual sense organs. This preference seemed to be the outcome of several factors. Both parents insisted that he be brought relief of tension as soon as he manifested it, so that he did not need to exert himself in the least to get what he wanted. His mother displayed to us, and communicated in a nonverbal way to the child, her preference that he remain sedentary and accede to being handled.

It is possible that Stuart, by endowment, was a child slow to mature in motor functions. His musculature was flabbier, his large body movements more cautious and less energetic than the other children in our study of the same age. A notable exception was his vigorous kicking of his legs whenever he was excited. Confined to a small area by his lack of locomotor capacity, Stuart made the most extensive use of his visibly emerging perceptive, cognitive, and prehensile faculties to occupy and amuse himself for long periods of time with 'making interesting experiments last' (13). At the same time, he remained extremely visually alert to happenings around him; he willingly engaged others and accepted their comforting.

We have the impression that Stuart's mother, who had intensely enjoyed the symbiotic relationship with her breast-fed baby, belongs among that group of mothers who cannot endure the gradual disengagement of the infant at the beginning of the separation-individuation phase. They attach the infant to themselves and discourage his groping for independent functioning; instead of allowing and promoting gradual separation, they push their infant toddlers precipitously into 'autonomy'.

It was interesting to observe that Stuart showed definite signs of wanting to remove himself from the symbiotic-para-

sitic closeness imposed on him by his mother's holding of him. He had shown a slight but definite stemming of his hands and forearms against his mother's chest as early as his fifth month, and by the end of his eighth month this gesture had developed into a consistent bending backward with a rigid body posture, minimally yet clearly reminiscent of the opisthotonus of some symbiotic psychotic children who are seeking to extricate themselves from their symbiotic-parasitic fusion with mother (15).

Bernie and Stuart have shown us two different ways of entering the first subphase of separation-individuation, differentiation. It may be worth noting that they are equally matched in over-all performance on developmental tests.

Three mothers and their children will serve as examples of the interaction of mother and child in the second subphase of separation-individuation (*the practicing period*).

Marjie and Matthew had gone smoothly through the symbiotic as well as the first subphase (differentiation). Both children were enabled to 'confidently expect' their mothers to relieve their instinctual tensions, to be emotionally available. At ten months of age, both infants were observed entering the practicing period with great investment of interest in their emerging partial motor functions and other autonomous functions of the ego. We were able to observe in them Greenacre's 'love affair with the world'. For long periods of time, they happily occupied themselves with exploring the physical environment on their own, showing what Hendrick has described as pleasure of mastery (*Funktionslust*) (5). They returned to their mothers from time to time for 'emotional refueling'. Both mothers accepted the gradual disengagement of their infant toddlers and fostered their interest in practicing. They were always emotionally available, according to the child's needs, and provided the kind of maternal sustenance necessary for optimal unfolding of the autonomous functions of the ego.

In contrast to these mothers, Anna's mother, a highly narcissistic woman, exhibited a much less than optimal availability

so that her child's capacity for 'confident expectation' was severely taxed. The maturational sequence of Anna's emerging ego functions took place exactly on time. But so hard was her struggle to get the attention she needed from her mother that she had not enough libidinal energy left to cathect adequately her autonomous ego functions or to devote to pleasurable explorations and mastery of her expanding reality. The child was seen during the first subphase (differentiation) sitting at her mother's feet, imploring and beseeching her unresponsive mother with her eyes. This subphase seemed to last much longer in Anna than in Marjie and Matthew.

Anna's second subphase was also atypical. It was characterized by brief, tentative forays on her own, in which she absented herself from her mother's feet only for short periods. The practicing period—the time when toddlers invest so much libido in their own autonomous functions and in their expanding reality testing—was quite transient and abbreviated in Anna's case.

Usually after locomotion is mastered large quantities of libido are freed and become available for re-investment in the love object. The child actively seeks out his mother to share with her his every new acquisition, whether it be a skill or a possession. This period, the third subphase of separation-individuation, we call *rapprochement*.

During the period of *rapprochement* Barney behaved with particular poignancy. He went through a typical, although somewhat precocious, 'love affair with the world' in which he would often fall and hurt himself and always react with great imperviousness. Gradually he became perplexed to find that his mother was not on hand to rescue him, and he then began to cry when he fell. As he became aware of his separateness from his mother, his calm acceptance of knocks and falls disappeared.

Early maturation of Barney's locomotor function confronted him with the fact of physical separateness from his mother be-

fore he was sufficiently 'individuated'. For this reason he displayed during his period of rapprochement the opposite of 'shadowing' (3). In order to undo or to deny his physical separateness from his mother, he would challenge her by darting away from her, confidently—and correctly—expecting her to run after him and sweep him into her arms. Her increasingly frantic response made him intensify and prolong this behavior; at the same time his mother could not cope with his recklessness. This behavior was the result of the precocious maturation of the child's locomotor functions and the relative lag in maturation of his emotional and intellectual functions, which did not permit him to evaluate properly the potential dangers of his locomotor feats (cf. 1). His mother would alternately restrict him and, from sheer exhaustion, relinquish her usual alertness to his needs and attunement to his cues. She would either rush to him in any situation, whether or not his need was real, or she would keep away from him when she was really needed; in other words, her immediate availability became completely unpredictable. The disturbance of their relation during this period was not total, however. Barney over and over again brought everything within reach to his mother, filling her lap, and would sometimes sit quietly and do a jigsaw puzzle with her.

The relationship between Barney and his mother again became mutually satisfactory with the advent of the fourth subphase, when he became a patient, well-functioning, and normally sedentary child.

The imbalance observed in the second and third subphases appears to have set a pattern of accident-proneness in this child which was overdetermined. Further, Barney's reckless behavior no doubt also derived impetus from identification with his father, a sportsman whose children were permitted to watch and admire, and, at times participate in, his highly risky adventures.

A different manifestation of the third subphase (rapprochement) was observed in Anna. Her mother's marked emotional

unavailability made Anna's practicing and exploratory period brief and subdued. Never certain of her mother's libidinal availability, she found it difficult to invest libido in her surroundings and in her own functioning. After a brief spurt of practicing, she would return to her mother with greater intensity, trying to engage her by all possible means. From such relatively direct expressions of the need for her mother as bringing her a book to read to her, or hitting at her mother's ever-present book, she turned to more desperate measures, such as falling or spilling cookies on the floor and stamping on them, —always with an eye to gaining her mother's participation.

At the same time Anna's language developed rapidly; the usual period of baby talk was almost entirely omitted. This quickness at talking may have occurred because her mother could communicate with her better by verbal than by other means; she addressed and 'consulted' her daughter as if the child were her equal in age.

Anna also showed what we have come to regard as a danger signal in the third subphase. She had an oversensitive awareness of her mother's whereabouts at all times and tended to shadow her whenever her mother moved about the room or left it. She displayed marked separation anxiety and could not be easily comforted in her mother's absence. The relationship was at that early stage beset by many precursors of serious neurotic conflicts. However, Anna showed to an unusual degree the usual characteristics of the subphase.

A markedly harmonious interaction was observed during the third subphase between Matthew and his mother. She was adept at encouraging independence and autonomy in her child, while at the same time remaining fully libidinally available to him; in other words, she gauged her responses to him with great intuitive understanding of his changing needs. His mother's ability to do this ensured Matthew's smooth progression into the subphase of rapprochement. Despite her pregnancy and the arrival of a new sibling when Matthew was eighteen months old—when the toddler's renewed need for the mother

increases in intensity—, the child remained self-sufficient. He was able to use other adults as mother substitutes and seemed to have achieved some identification with his mother, as shown by his interest in other babies and in his little brother, in which the aggressive element was relatively well controlled. He was able, in sum, to sustain a prolonged 'love affair with the world' while at the same time sharing whatever his mother was ready to share with him.

CONCLUSION

The average mother makes the gross adaptation needed to meet her infant's biological needs. Yet it seems to be the infant who takes on the task of more subtle adaptation to the patterns and rhythms of his mother's personality. We observed the relation of mother and child throughout the subphases of the separation-individuation process and were impressed by the fact that their patterns of interaction showed marked fluctuations related to the specific characteristics of each developmental subphase. Time and again we found that a poor relation between mother and child in one subphase does not necessarily or usually preclude impressive changes for the better in the next subphase.

It seems that difficulties in the relation of mother and child come when the child is unable to make the proper adaptation. Nevertheless, it should be added that the normally endowed child has remarkable resiliency and finds many ways in which to adapt to his mother's unconscious fantasies, needs, and expectations.

REFERENCES

1. FRANKL, LISELOTTE: Self-Preservation and the Development of Accident Proneness in Children and Adolescents. In: *The Psychoanalytic Study of the Child*, Vol. XVIII. New York: International Universities Press, Inc., 1963, pp. 464-483.
2. GREENACRE, PHYLLIS: *Considerations Regarding the Parent-Infant Relationship*. Int. J. Psa., XLI, 1960, pp. 571-584.
3. HARTMANN, HEINZ: *Ego Psychology and the Problem of Adaptation*. New York: International Universities Press, Inc., 1958.

4. ———, KRIS, ERNST, and LOEWENSTEIN, RUDOLPH M.: Comments on the Formation of Psychic Structure. In: *The Psychoanalytic Study of the Child, Vol. II*. New York: International Universities Press, Inc., 1946, pp. 11-38.
5. HENDRICK, IVES: *Early Development of the Ego: Identification in Infancy*. This QUARTERLY, XX, 1951, pp. 44-61.
6. JACOBSON, EDITH: *The Self and the Object World*. New York: International Universities Press, Inc., 1964.
7. LEVY, DAVID M.: Maternal Overprotection (1938). In: *Modern Trends in Child Psychiatry*. Edited by Nolan D. C. Lewis and Bernard L. Pacella, New York: International Universities Press, Inc., 1945, pp. 27-34.
8. LEWIN, BERTRAM D.: *The Psychoanalysis of Elation*. New York: W. W. Norton & Co., Inc., 1950. (Reprinted by The Psychoanalytic Quarterly, Inc., 1961.)
9. MAHLER, MARGARET S.: Thoughts About Development and Individuation. In: *The Psychoanalytic Study of the Child, Vol. XVIII*. New York: International Universities Press, Inc., 1963, pp. 307-324.
10. ———: On the Significance of the Normal Separation-Individuation Phase (with reference to Research in Symbiotic Child Psychosis). In: *Drives, Affects, Behavior, Vol. II*. Edited by Max Schur. New York: International Universities Press, Inc. (In press.)
11. ——— and FURER, MANUEL: *Certain Aspects of the Separation-Individuation Phase*. This QUARTERLY, XXXII, 1963, pp. 1-14.
12. ——— and GOSLINER, BERTRAM: On Symbiotic Child Psychosis. In: *The Psychoanalytic Study of the Child, Vol. X*. New York: International Universities Press, Inc., 1955, pp. 195-212.
13. PIAGET, JEAN: *The Origins of Intelligence in Children*. Second edition. New York: International Universities Press, Inc., 1952.
14. PINE, FRED and FURER, MANUEL: Studies of the Separation-Individuation Phase: A Methodological Overview. In: *The Psychoanalytic Study of the Child, Vol. XVIII*. New York: International Universities Press, Inc., 1963, pp. 325-342.
15. *Sleep Disturbances in Children*. Panel at the Midwinter Meeting of the American Psychoanalytic Assn., December 1955. Chairman: Margaret S. Mahler; Reporter: Maurice R. Friend. J. Amer. Ps. Assn., IV, 1956, pp. 514-525.
16. SPITZ, RENÉ A.: *No and Yes*. New York: International Universities Press, Inc., 1957.
17. SPOCK, BENJAMIN: The Striving for Autonomy and Regressive Object Relationships. In: *The Psychoanalytic Study of the Child, Vol. XVIII*. New York: International Universities Press, Inc., 1963, pp. 361-366.

The Child's Concept of Death

Hermine von Hug-Hellmuth

To cite this article: Hermine von Hug-Hellmuth (1965) The Child's Concept of Death, The Psychoanalytic Quarterly, 34:4, 499-516, DOI: [10.1080/21674086.1965.11926362](https://doi.org/10.1080/21674086.1965.11926362)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926362>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



Citing articles: 4 View citing articles [↗](#)

THE CHILD'S CONCEPT OF DEATH

BY HERMINE VON HUG-HELLMUTH, M.D.

Translated by ANTON O. KRIS, M.D. (BOSTON)

No event among the abundant phenomena of human life is insignificant for the child. In particular the beginning and end of life, the entrance and exit of individuals, are inexhaustible sources of his 'whys' and 'wherefores'. Once he is aware of the eternal riddle of life, he pursues it as the goal of all investigation, playful and serious. For in *life and death*, he sees *love and hate, cruelty and pity* joined to each other. The little child that laughingly crushes a worm underfoot picks it up with careful fingers to reunite the quivering parts, and he is genuinely sad that his attempts are unsuccessful. The child senses so strongly the mental superiority of human beings over every other creature that he ascribes to himself, without further thought, power over life and death. Sometimes, being dead may mean a state of sleep from which one can be easily awakened; at other times, it may mean being far away but able to return at will. This friendly view of death comes largely from fairy tales, which regularly make up for horrors and cruelty with a happy ending. As soon as the hero or heroine is wakened from death by the kiss of a good fairy or a sword-bearing knight, sadness and mourning are converted to wedding celebrations and happiness. And when some fairy-tale figure does not arise from his bloody death, the child's fantasy sees in this the deserved punishment for serious crimes. For this reason some children with a nervous tendency are afraid of death when they feel guilty for some misdeed. Such brooding fantasies of one's own death,

Das Kind und seine Vorstellung vom Tode appeared originally in *Imago*, I, 1912, pp. 286-298, in the section entitled *Vom wahren Wesen der Kinderseele* (The True Nature of the Child Mind).

In this translation, footnotes which originally appeared in the text have been transferred to an appendix. Notes of the translator appear in the text as footnotes.

which do not seem to occur very often in the tender years of childhood, indicate the germs of a psychoneurosis. But no child's life is spared the moment when he gets an inkling that he is not excluded from the universal rule of life and death. However, along with this awareness, for a long time death signifies no tragic end but simply a temporary separation. It seems, therefore, neither strange nor unusual to a child to wish dead someone whose presence means restrictions on his freedom or who may threaten him with loss of love. When my five-year-old nephew, Max, learned of the death of the man who served as caretaker and gardener for friends of ours, he came home calling happily: 'Yoo-hoo, the grumbling old bear is dead. Now I can ride my wagon all over the garden as much as I want to!' Freud in his *Interpretation of Dreams* (4) has shown in several examples how jealousy of a newborn sibling and fear of being cut off from the parents' love are expressed in rejection of the baby and death wishes toward him.¹

A child of this age does not as yet know altruistic feelings; he knows and loves only himself; and this *egocentric* approach to life cannot hurt our feelings, lacking as it does the conscious intent of adult egocentricity. We are much more pained when a fourteen-year-old, hearing of her teacher's death and of the students' attendance at the funeral remarks: 'Bravo, that's clever; I'll drive out there too!' We tend to expect that the roots of good upbringing will have a firmer hold. Such expressions, however, are to be taken more as youthful thoughtlessness than moral crudity, yet at the least they indicate ingratitude. An unexpected afternoon off from school is always a delight, even if the occasion is sad. Grownups all too willingly measure the wishes and actions of youth with the same yardstick they use for those of mature adults. This biased judgment disturbs understanding of infantile spiritual and emotional life and makes all remembrance of one's own childhood

¹ Freud had also discussed this subject in *Analysis of a Phobia in a Five-Year-Old Boy* (1909), Standard Edition, X. An interesting example appears on pp. 72-73.

impossible. Hence, in healthy and sick alike it also pushes out of mind the *infantile death wishes against the parents and other persons close to the child*, with defense more acrid than in any other problem considered in freudian theory, except for infantile incestuous thoughts. Despite the fact that Freud (4) has clearly shown how far the child's appreciation of *being dead* differs from its true significance, neither layman nor specialist wants to acknowledge it. The thought of even an imprudent child nurturing death wishes against a beloved person is so painful to most people that their resistance to such a chain of thoughts prevents any insight.

It is, therefore, all the more gratifying to gain from an author, whose book is not based on freudian theories, a beautiful confirmation of that which the majority shuns. E. and G. Scupin (8) record valuable notes on *the child's relationship with death* in a diary in which they write about the psychological development of their little son. They neither conceal nor suppress anything; but they portray the child with all his charming idiosyncrasies and all the peculiar ideas which are produced in such remarkable abundance in the first years of life. Little Ernst Wolfgang first encountered the idea of death when he was three-and-a-half years old and his parents took him along on a visit to a cemetery. In the diary they note:

Nov. 2, 1907. Taken to the churchyard, Ernie² pointed to the graves: 'What sort of heaps are those?' He was told briefly that sick people sometimes die, that is, do not wake up again, and that they are put to bed here under grass and flower hills so that they can sleep quietly. That interested the boy. He stopped at every grave and asked: 'Who sleeps there, and who sleeps there?' Furthermore he refused to be satisfied with what we told him. Ernie doesn't *believe* willingly; he wants to *see*. And so he pleaded urgently, pointing to a grave: 'Mummy, you can dig one up, huh?'

One month later, on December fifth, the little boy, who was

² Throughout these selections I have replaced the untranslatable *Bubi* by the more familiar diminutive of the boy's name.

scolded for nibbling at a loaf of bread like a 'little mouse', wanted nothing to do with this designation because 'the mouse is locked in the trap and *dead*'.

March 22, 1908. Quite suddenly the child thinks about death and dying. He says: 'And when we are dead, can we only speak softly?' Here he whispered very quietly to himself. Then followed the even more singular question: 'When one dies, is one's hair torn out?' This question is explained by the fact that the child was often in the kitchen watching feathers being plucked from fowl, so that he applied the treatment of dead animals to dead people.

I cannot agree with the Scupins in the assumption that the child *suddenly* thought of death and dying. Apparently that first visit to the cemetery made a lasting impression on his receptive mind and was interwoven with all the earlier experiences in the kitchen and the daily sight of the stuffed birds in his father's study until, at last, the child gave words to his thoughts. (Scupin works at the *Zoologisches Institut* in Breslau.)

April 4. The boy always has a great deal of sympathy for suffering animals, even for those used as food. For instance, he saw a plate of smoked sprats from Kiel on the supper table. In answer to questions he was told, in outline, something of how fish are caught. He took the destiny of the fish so much to heart that in greatest excitement he berated the bad men who caught such nice little fishes. Along with this he developed a rather horrible fantasy. 'They're naughty men if they kill poor little fishes—I'll hit 'em and saw'm up and cut off their head and breast and a(r)ms and stick needles in their eyes, and I'll throw the pieces in the water, and the swans'll come and eat 'em up . . .'. Finally he asked us, with voice nearly failing, not to eat any more of the sprats, so the little fishes would come alive again. He believed that put in water they would swim again, *for the concept of death is still incomprehensible to him*. That came out also in the following event. He ran around the house with his gun and shot everything and everyone dead, but *to his mother he said lovingly: 'I'll only shoot you a little dead, mummy, just*

a little—then you can only run slowly'. Being dead means for Ernie a decrease in life functions; for instance, no longer running and eating, and being able to speak only very quietly.

By the remark that then mummy 'can only run slowly', the child expresses a wish to obtain more freedom for mischief through the lessened hindrance of his mother as soon as she is 'shot a little dead' (Cf., March 22, 1908).

May 4. Ernie crushed a fly at the window and is greatly amused over it. Mother tells him of the poor mama-fly that will find her child dead and will cry about it. Ernie then said with choked voice: 'If another fly-child comes, I'll leave it!' . . . When later he felt a sticking pain in his finger, the little fly-killer with his guilty conscience believed that the mama-fly came secretly and wanted to hurt him because she found her child dead.

Breaking the chronological sequence, I bring here an analogous experience from Ernie's sixth year of life.

June 28, 1909. Ernie saw a dead fly on the window ledge and pointed it out to us. In contrast to his usual behavior, this sight incited him to catch a fly that was buzzing around and to squeeze it with his fingers till it lay just as still as the other. Looking embarrassed and blushing with a guilty conscience, he told us what he had done. He was scolded and reminded never again to kill an animal that had not hurt him. After a while he pulled secretly at his mother's sleeve, pointed at the dead fly, on which by chance a little fly was now crawling, and asked with voice nearly failing because of excitement: 'Is this perhaps the baby-fly, and is it crying because it thinks its mother is dead?' His mother agreed seriously, embraced Ernie vigorously, pressed his face against her own in a sudden welling up of tenderness, and tried to control his tears. The destiny of the orphaned fly-child kept him busy for a long time. As the little fly went to the neighboring ledge, he asked if it was now going to look for the daddy-fly or whether he, too, was perhaps already dead. About this we gave him comforting news.

These two experiences show how the occasional death wishes

against the mother become the unconscious source of pity and regret.

July 26, 1908. The child's continuing ignorance of the manifestations of death can also be seen in the following. Once again, Ernie was shooting everything dead with his wooden pistol. At the word 'dead', the word 'died' occurred to him, for he said: 'When we go to the churchyard again, I'm going to shoot dead all the people who are in the graves and have died. They'll hear that, when I shoot them dead and it makes such a noise.' On this occasion it was also mentioned that the dead were so fast asleep in their bed, the coffin, that they could never again wake up. Ernie asked if children who are dead also lie in such a 'box' and are fast asleep, and, as we agreed: 'Can they also make a rumpus there?' When Ernie doesn't want to go on sleeping in the morning, he is in the habit of making a rumpus in bed, so he thought that when the dead children happened not to be sleeping at some time they, too, would make mischief in their beds. Very seriously we told him that it is very bad. When a child dies he never wakes up, and his mother cries a great deal because she no longer has a child. Ernie listened, sighing; this conclusion did not please him. Finally he found a happy solution and called out: 'So, the men can shovel the sand away and pull the flowers away from the grave and can sell the *little boy*³ to his mother again—so she can have her child again'. Of the whole idea of death, visibly by far the most unbearable to him was the thought of a child's being separated from his mother and that she would cry.

For the first time, here, there is a clear identification of the dead with the self where the lad spontaneously spoke of the 'little boy' lying in the grave. While the train of thought in the death of the fly-child is actually the same, it does not reach expression in words.

How closely the child's death fantasies are connected with a strong sadistic tendency is shown by the sketches of April fourth and September eighteenth.

³ *Bübchen* in the original, hence very close to his own nickname, *Bubi*.

September 18. As much as Ernie fears blood on his own body, he loves to think up bloody dramas. Most of the battles that he fights, now with dangerous animals, now with men, end with his wounding the enemy, from whom much blood flows. Today he became furious with the mailmen who, as he was once jokingly told, would on some night collect all his toys that were lying around and take them to a child who liked to keep things neat. Instead of cleaning up, Ernie rolled his eyes, stabbed wildly at the air with his arms, and threatened: 'But I will shoot them dead with my shooting pistol and throw them against the door. And then I'll close the door quickly, and then they'll be completely crushed, and lots of blood will come out.'

September 27. On seeing a funeral procession the boy became upset about the gravedigger who was going to shovel earth over the coffin. He apparently blamed this man for the death, *and only with the matter of burying-in-the-earth did he connect the idea of being dead*, for now he can already imagine that deep under the earth a person can no longer breathe and live. Very agitatedly he called out: 'The old gravers (gravediggers) shouldn't always dig such a grave and put people in it. But I'll get rid of the sand and the flowers and *let the people out again. And I'll take the old graver and throw him into the water.* And then I'll crawl up to the sky on a ladder and shovel a lot of ice into my bucket—there's a lot of ice up there, you know; the other time lots of ice came from the sky (memory of a recent hailstorm)—and then I'll pour the ice on the bad man's head, and then he'll get a cold, and his nose will be bloody, all bloody, and *then the graver will be completely dead*, and I'll pour out more and more ice, *and he'll be deader and deader.'*

For the child, being dead continues as a graduated concept that can be interrupted at any time, like sleep. At the same time, killing seems to him a means of punishment, an act of revenge.

November 25. The lad's interest in the mystery of death increases daily. *The idea that a person cannot feel and think after death is something completely incomprehensible.* The question recurs again and again: 'But what does a man (or animal) say while he is dead?' *Because Ernie does not yet com-*

prehend the often cruel and painful part of death, he uses the words 'die' and 'be dead' quite unconcernedly. The same was noticed with Lottie, his cousin, who is a few months older. *For instance, she was furious when her father punished her for stubbornness by not taking her along for a walk. Watching him go she said angrily: 'Now daddy should die'*, naturally without having any idea of the significance of these words. Ernie perpetrated a similar breach of sensitivity today when he was in a bad mood because we were going to the theater. His mother asked jokingly: 'What if I never come back?' Fighting back the tears he replied: 'Then I'll tell daddy he should marry another good mother for me who doesn't always run out'. His mother asked sadly if this meant she was a bad mother. Here Ernie already regretted his words, and in order to comfort his mother and to put everything right again he corrected himself: 'No, mummy, you know, only when you're dead and I'm not yet dead and daddy isn't yet, then daddy should marry another mummy for me'. Ernie had also spoken of 'other daddies' as something to be taken for granted. One must certainly not see in this any heartlessness on the child's part. On the contrary, he is most tenderly attached to his parents, and, for example, once when his father went away for three days he cried. When his mother goes out for a few hours, the caresses are endless. The child embraces her and presses her vigorously to himself many times, without a word.

In what follows the Scupins suggest that the parents are themselves responsible for this apparent crudeness, since occasionally when their son misbehaved they spoke of wanting to send him away and fetch another Ernie. Even though that may play a part, the decisive factor for the infantile death wishes against the parents is the thought of getting away from routine regulations or the hope of showing the parents: 'if you leave me so often, then I won't care much about you either'. It is striking that little Ernst Wolfgang, in contrast to other children, cherishes death wishes against his father much less frequently than against his mother. When one considers that it is in fact she who has many more occasions to interfere when the

child is engaging in inappropriate games, then it is no wonder that the wish to remain undisturbed is directed against her.⁴

Again, on December eighth, the child is intensely concerned with death on looking at a picture in which the family does not appear complete to him (based on his observation of his own family). All absent persons are dead for him. He repeatedly names the members of his own family, grandmother, Aunt Olga, etc. Finally the people in the picture and those in reality become so fused for him that he suddenly declares his grandmother dead. A few days later (December eighteenth) he transfers his death fantasies to inanimate objects. Thus, he says to the Christmas tree: 'Oh yes, Christmas tree, you're sawed through, so you're dead'.

December 23. The boy was much moved today as he was looking at a picture of a war scene in which one soldier had just shot another. He immediately fetched his gun, placed the opening of the barrel directly on the head of the bad soldier, and pulled the trigger. Breathing easier, he gave vent to his sense of justice: 'So now I've shot him dead, too, because he killed the other soldier'. He asked: 'When one dies, does one just fall down on the spot?' When a bit about war and war customs was explained to him, he understood that we Germans must defend our land. He fetched his building blocks,

⁴ The modern reader may disagree with Dr. Hug-Hellmuth's explanation of Ernie's greater hostility toward mother than toward father. In fact, at first it seems surprising that she should have overlooked the mother's interference with the boy's expression of sadism. Even more striking is the mother's own hostility, as shown in this latest unwarranted salting of the wound of separation.

Dr. Hug-Hellmuth's point of view is largely influenced by the stage of development of psychoanalytic theory in 1912. After Freud's first, unsuccessful attempt to locate the etiology of neurosis in outside agents, the seduction theory, his attention turned more and more to the internal sources of conflicts, the drives. During this period the economic and dynamic points of view flourished, and, as in this paper, every mental leaf had its libidinal roots clearly marked. Only later, after the dual instinct theory, the structural revision, the development of ego psychology, and particularly with increasing experience in the psychoanalytic treatment of children, did the theory cease to interfere with the observation of mutual interaction. Among those who early abandoned psychoanalytic theory (for instance, Sullivan), this particular area of observation was much earlier in focus, but at a price.

some of which are painted red, others blue, and played war. He disagreed with the suggestion that first the reds should kill the blues, and then the blues should conquer the reds: 'If the reds have already killed the blues, then the blues can't kill the reds anymore', he said quite logically.

In this way, fantasy and reality are fused in the child's mind, where first one and then the other gets the upper hand. In spite of that, the child's concept of death is still unclear.

January 15, 1909. The rubber parrot that was put away for a long time greatly interests the little boy again. He asks if it is really a dead bird. He had thought that the rubber bird had once been alive and was then stuffed like his father's birds. Ernie had often seen the skull on his father's desk, but today for the first time he asked about it. 'Is this a head?' (Yes.) 'What is it a head of?' (A person.) 'Is the person dead?' (Yes.) 'Are these the eyes? They're so big!' (They are the eye holes.) 'What was the head's name?' (We don't know that. The person has been dead a very long time.) 'Why did the man die?' (Maybe because he was already old.) 'Does one die when one is old?' (Yes, all people must die some day.) 'Is one in the grave, then?' (Yes.) 'But who took the man out of the grave?' (One may have found the head while digging in the earth to build a house.) 'Why didn't the poor man become an angel? For here is his head.' Ernie stated a perfectly natural problem. How can a person be in heaven and at the same time part of his body be on earth? Nevertheless, we gave the following explanation (instead of the one generally held to be correct) because he might otherwise get into conflict with the opinion he would soon be given in school. So we said that the man whose head was lying here naturally got to heaven where the Good Lord made everything new for him, clothes, a healthy body, and wings. 'And a new head?', he asked eagerly. We agreed. 'But is the head completely the same?' He meant by this, was the person's face exactly the way it had been on earth so that he could immediately find all his friends and relatives. And in the interest of simplicity, we agreed to this too.

The thoughts of death and dying often lead children to their

first doubts of the truthfulness of assertions made by grownups and then lead them to meditate on religious conceptions as they come up incidentally in the environment.

The description of February nineteenth shows how thoughts of death are used in games.

February 19. Ever since Ernie was taken to the cemetery he has let his toy animals die a good deal, in order to be able to wrap them in newspapers and bury them under building blocks. Then he builds an oblong housing in the form of a grave and puts a monument in the form of a cross on it.

Pity for dead animals, whether real or in pictures, increases continually. In the movie theater (June third), Ernie sheds tears as a horse falls dead. His feelings are specially aroused when he can make a transference to his own person, as in the previously described scene of the 'fly-child' (June 28, 1909).

The problem of death becomes particularly interesting to the child as he begins to deal with thoughts of whether *he himself* must die.

June 19. Ernie wants to be an architect. Very often when given a task, he asks if adult architects also perform it. If one says yes, he obeys willingly, because he uses as a model everything that architects do. The lad heard someone say that *all people have to die one day*. He replied that *he didn't want to die*. After a while he asked if architects also die. When we agreed, he said: 'Well, then I want to, too'.

August 21. 'When all people are dead, will the earth be removed, and will the architects tear down the houses till there is just grass again, and then will the architects die too?'

On the other hand, '*burying*' is only a source of purest pleasure (3, 9). Here is a report of this.

August 19. We had found five dead newborn rabbits in the woods. The child asked sadly: 'Does the good animal-lord take the little rabbits into animal heaven, and do they go on living there?' Eventually he was given permission to bury the animals in a cigar box. He shoveled on earth and scattered flowers over

it, on his own initiative, and *was so delighted that he danced about the grave, jumping for joy.*

September 5. A dung-beetle was crawling with difficulty on the floor. Ernie was delighted and wanted to give the 'dear beetle' to his cousin, Lottie. But he didn't get far before he put the beetle on the path and stepped on it lightly. Then he picked the squashed beetle up again. 'But Ernie, the poor beetle!' 'Well, he was crawling on my hand too much, and he made it wet. So I crushed him a little bit dead, so he would lie quietly. When Lottie comes he'll wake up again.' Ernie stumbled over stones and roots of trees, but carefully, with love, he carried the dung-beetle along. It surprised him that Lottie didn't share his pleasure in the beetle. For him it was still the 'dear dung-beetle', even if he was a 'little dead', that is, only a form of being asleep. Ernie was firmly convinced that the beetle would soon crawl vigorously.

So the child who has been thinking about the problem of death for two years still lacks proper understanding. To him 'being dead' still means to lie quietly for a while, to sleep, to be away; but always it is in man's power to change it. In this concept, the boy's unconscious finds license to action for his sadism. Cruelty to animals and death wishes against persons close to him appear, in overcompensation, as exaggerated pity for dead creatures and the belief in man's power over life and death.⁵

Innumerable quotations of children's sayings speak for the fact that most children are satisfied with the same solution to the problem of death as the Scupins' little son. I shall give only a few of these quotations. For instance, a 'grandma' (II) reports: 'Rudi is out walking with his governess and his brother, Fritz. They come to a fountain, and Rudi wants to splash

⁵ A few further examples quoted from the Scupins may be found in Heinz Werner's *Comparative Psychology of Mental Development* (1948), New York: Science Editions, Inc., 1961. A particularly pertinent example from the third volume, where the boy of six years, two months involves a little girl in burial play, is on page 397. It may be of interest to note that Ernst Wolfgang Scupin's dissertation in law, published in 1926, was titled: *Todeserklärung und guter Glaube . . .* (Certification of Death and Bona Fides . . .).

around in it all too much. But that is forbidden. "Well", he says, "Fräulein, when you, papa, and mama, and Fritz, *as soon as you are all dead, I'll really splash*". Perhaps we can see the precursors of such wishes when father or mother is kept out of the child's room by the child's holding the door shut with force. For the preverbal child has only imitation and gesture at his disposal.

The child's egocentric *Weltanschauung* corresponds to his sense of importance of his own little person. It disguises the tragic when death, even of his parents, occurs in his environment. In spite of the oppression which he cannot completely dispel, he discovers a welcome cause for general attention and sympathy; in short, an abundant and unusual show of love. Hence, the new mourning clothes are of greatest importance for children. Even the funeral loses some of its gloomy character and stamps itself on the mind as both a sad and pleasurable event. Children's sayings document such thinking, as in the following example: 'In the Schwarzwald, in the region of B, little boys wear a costume with a red vest. Shortly after Casper received his first red vest, his grandmother died. His father explained that Casper could not go to the funeral in his red vest. "Oh", said Casper, "*if I can't put on my red vest, then I won't enjoy the funeral at all*"' (11, p. 31). As the child gets more experience and is taught certain conventional forms, he believes that he must force himself to express emotions on specific occasions, although they are still foreign to his simple feelings. Here is another nice example from 'grandma's' collection: "'You know, granny", Toni said one day, "when you die, I'll cry". "Why?" "Oh, that's what one does"' (11, p. 56).

Not infrequently children expect that the pain must set in along with certain formalities. Marie von Ebner-Eschenbach (2), in *My Childhood*, tells how the death of her deeply beloved mother and *particularly the numb pain of her grandmother* at the deathbed had *shaken* her that morning. She continues: 'In the evening we were playing happily in the children's rooms. Suddenly, I understood what had happened and

said to my sister: "Now the best mother is dead. We'll never see her again. Why aren't we sad?" "Wait a bit", she replied, "*as soon as the black dresses come, we'll be sad*".'

From a certain age level on, the little ones take it for granted that old people die. They do not hesitate on occasion to ask their grandparents when they are going to die, and they ask the question in such an unbiased way that one cannot be angry. In a recent conversation, my nearly six-year-old nephew, Max, was boasting to his great aunt that as a machine-engineer he was going to earn so much money that we would live in our own house with a huge garden and that we would drive about in a car built by him. When his great aunt replied: 'Bubi, not me any more; by then I'll have been dead for a long time', he answered patiently: 'Well, then mummy and Aunt Hermine; naturally by then you'll be dead'. And another time when Max pushed in close to me as I was reading on the chaise longue, I called to his mother: 'Look, a nice picture, mother and child'. 'Well, why not. *You're two years younger than mummy, so you'll die two years later*, and I'll have you two years longer', he said.

Also 'little Anna', whose early mental conflicts are reported by Jung (7), finished off her grandmama's explanation that she was getting older and older and then must die, with a quiet, 'And then?' For that child the grandmother's answer, 'and then I'll become an angel', developed into a guide in the puzzling subject of the origin of babies. The child replied: 'And then you become a little child again?' With the fine logic of childhood she feared, after she was told of the birth of a brother, that the arrival of the newcomer might cause the death of her mother. She put her arms about her mother's neck and whispered hastily: '*Well, don't you die now?*' (7, p. 4). Here the comforting thought that *one* person's death is cancelled by a new life shows its unfriendly reverse. The childhood fantasy that old people return as little children by way of the intermediate station of being an angel briefly gives a satisfying answer to the question: *where do babies come from?* For

that reason the child often conceives of the dead as shrunken to the size of infants (7, p. 102). This thought comes from the child's observations in the world around him. Countless times he sees plants, particularly buds, wilting. Just as rarely does his fine faculty for observation miss the fact that the bodies of dead flies and worms, etc., dry out, that is, grow smaller.

Beyond that, occasional remarks of adults on religious views support the child's opinion. The dead body's size and weight must fit the strength of the angels that are to take it to heaven.

Outer influences and inner processing of these experiences bring a time in the life of every child when he transfers from the death and dying of others to his own ego. That this awareness is followed by lively rejection is almost the rule. It is explained by the pleasure in being and the life-force of the child. So, according to Sully (10), a three-and-one-half-year-old girl asks her mother to put a big stone on her head as she does not want to die. Asked how the stone can prevent that, she answered: 'Because I won't grow up if you put a big stone on my head. And the people who grow become old and die.' Anxious people already see in the child's concern with death and dying a serious sign for his mental and physical health. They forget that it is precisely the healthy child that can find in every occurrence in his environment a source of joy. So long as health and the joy of life rule in his immediate environment, death is a puzzle whose solution is withheld without becoming too horrible.

As a rule, only older children regard the passing of a beloved person as a horrifying mystery: those who have been constantly reminded of an impending death through a long illness of mother or father, most often where the grownups repeatedly expressed their own fears; those who are frightened by unexpected death; and perhaps also those who have observed particularly deep psychic devastation of their own parents after the death of a beloved person. But even then it is only a vague fear of something unknown that disturbs the mood of the house and prohibits lively play and loud cheerfulness. That this fear

—as every other—does not lack libidinal roots is shown by the unyielding adherence of such children to the death complex, which sometimes is maintained into maturity as a special predilection for cemeteries. Bogumil Goltz (5) reports from his tenth year of life:

With regard to remembering the dead and my feeling in cemeteries, I have changed little if at all since the days of my childhood. At the time of the unfortunate war with France, the Haberg and Rosegarten cemeteries looked very much like village churchyards. Except for a few old trees and some massive gravestones or simple fenced burial mounds and crosses, there was no sign of pomp, and therefore also no profane strolling about. Here and there an old person wandered aimlessly or stood, lost in memory. When I saw that, I trembled with feeling, as if I were to dissolve into the atoms of my existence. *It was the human pain of earth and death [Erden und Todesschmerz] that already touched my soul, though still a child. At those graves I developed with pleasure-pains [Wollustschmerzen] for my whole life the feeling, the conception of death and the transience of all that is earthly, the destruction and worldly annulment, the consumption of life and the death which is in all life, the nonexistence in all existence and being. And I made it an integral part of myself.*

Similar 'pleasure-pains' are reported by J. C. Heer in his autobiographical novel, Joggeli (6), where the little hero suffers them in the following way.

In nature he always had a sanctuary. For a time it was the grave of a Frenchman, found by cousin Diethelm and other peasants on a forest road. As they pushed the skeleton back in, Joggeli put a smooth piece of wood on the grave. Pleased with himself he looked at the 'Rest in Peace' he had written with a red pencil. Convinced that he had benefited the forgotten foreign soldier, he did not fear him, despite his superstitions, but instead considered him as his silent friend. At his resting place in the green forest he spun tales and saw woven there, half from his imagination, half out of the twilight, senti-

nels of distant wars moving through the forests of their native land.

Therewith, something swept through his soul that was as lovely as the waves of green hair in the water, and *it was resolved into a game that could occur only to a strange person. He composed epitaphs for dead and living*, in which he gave vigorous expression to his affection or dislike for the people of his acquaintance and which, after new impressions, he would improve upon or set a tone lower. When it concerned someone he cared for, then he himself was astonished at the warmth of the words he found for them. *He surprised himself with the wish that they might really have died*, so that his epitaph might be valid for them. Then he was frightened about himself, with pangs of conscience for something abysmal within himself. *But he was not always able to overcome the wishes that emerged like compulsive ideas.*

The abysmal source of his pangs of conscience was, in spite of the thoughtful dreaminess of little Joggeli, not very different from the hate-rages of the 'Wlass boy' of Ossip Dymow (1) who says: 'As I lowered my head over this notebook, hate for my teacher flared up from time to time, and—as was my wont at that age—I secretly wished his death'.

Only on leaving childhood, in the years of ripening and fermentation, does the mind feel the horrifying in death without bowing before its majesty. The rebellion of puberty against that horror remains specially strong in the female sex where, fed by its origin in infantile death wishes against the near and beloved, it builds an unconquerable reservoir of superstition. On the other hand, death will often awaken in the young man thoughts such as the 'Wlass boy' had in his fifteenth year: 'It always seemed to me that in the matter of death there was something shameful, petty, and blighted, *that one had to keep secret from women and particularly from girls. Death seemed a secret of life, like nakedness or some illnesses*' (1, p. 126).

When a person has long since found the correct solution to the riddle of life, dying remains shrouded in untearable veils—the unexplorable secret of nirvana.

APPENDIX

1. DYMOW, OSSIP: *Der Knabe Wlass* [The Wlass Boy], p. 61.
2. EBNER-ESCHENBACH, M., VON: *Meine Kinderjahre* [My Childhood], pp. 82-85.
3. ERNST, OTTO: *Aus Appelschnuts Leben und Taten* [The Life and Deeds of Appelschnuts].
4. FREUD: *The Interpretation of Dreams*. [Standard Edition, IV, pp. 248-249].
5. COLTZ, BOGUMIL: *Buch der Kindheit* [Book of Childhood], pp. 334-335.
6. HEER, J. C.: *Joggeli, Die Geschichte einer Jugend* [Joggeli, the Story of a Boyhood], pp. 129-130.
7. JUNG, C. G.: *Über Konflikte der kindlichen Seele* [On Psychic Conflict in Childhood], *Jahrbuch f. Psychoan. und Psychopath. Forschgn.*, II, 1910, pp. 33-58.
8. SCUPIN, E. and G.: *Bubi im vierten bis sechsten Lebensjahre* [Bubi from the Fourth to the Sixth Year, 1910. This is the second of two volumes by Ernst and Gertrud Scupin. The first, published in 1907 (second edition, 1933) is *Bubi's erste Kindheit, Tagebuch über die Entwicklung eines Knaben, die ersten drei Lebensjahre* (Bubi's Infancy, Diary of the Development of a Boy, the First Three Years). A third volume by Gertrud Scupin, published in 1931, ten years after her husband's death, is *Lebensbild eines deutschen Schuljungen, Tagebuch einer Mutter* (Picture of the Life of a German Schoolboy, Diary of a Mother). It may be of interest to note that Ernst Scupin was born in 1879, Gertrud Scupin in 1880, and Ernst Wolfgang Scupin in 1904.]
9. STORM, TH.: *Von Kindern und Katzen, und wie sie den Nine begruben* [Of Children and Cats, and How They Buried Nine], *Collected Works*, Vol. III.
10. SULLY, JAMES: *Untersuchungen über die Kindheit* [Studies of Childhood], p. 104. [The original is in English, 1896.]
11. *Was Kinder sagen und fragen, mit 26 Zeichnungen von ihnen selbst, gesammelt von einer Grossmama* [What Children Say and Ask, with 26 Drawings of Their Own, Collected by a Grandmama], Munich: R. Piper.

The Role of Movement Patterns in Development

Judith S. Kestenberg

To cite this article: Judith S. Kestenberg (1965) The Role of Movement Patterns in Development, The Psychoanalytic Quarterly, 34:4, 517-563, DOI: [10.1080/21674086.1965.11926363](https://doi.org/10.1080/21674086.1965.11926363)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926363>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)



Citing articles: 4 View citing articles [↗](#)

THE ROLE OF MOVEMENT PATTERNS IN DEVELOPMENT

II. FLOW OF TENSION AND EFFORT

BY JUDITH S. KESTENBERG, M.D. (NEW YORK)

In the earliest postnatal stage it is difficult to disentangle the nuclei of functions that will later serve the ego from those we attribute to the id. Also, it is often hard to decide what part of it could already be described in terms of mental functioning. . . . It is clear that there is no ego in the sense we use the term for later stages; what the state of the id is at that level is unknown.

—HEINZ HARTMANN (19, p. 166)

As psychic functioning emerges and develops, motor apparatus available at birth as well as those maturing later are put into the service of drive discharge, the taming of drives, and adaptation to reality (9, 12, 14, 15, 16, 18, 19, 27, 40, 41, 49, 50). The newborn has at his disposal only primitive methods of regulation which do not permit satisfaction of his needs. His needs cannot be gratified nor wishes fulfilled without the help of his mother's ego, which organizes and tames the drives. The mother lends the child her regulatory apparatus and so prepares him for a more refined use of motility. Only when he has learned to control his body independently of his mother can he begin to adapt to the exigencies of reality.

Motor apparatus for taming of drives have a greater affinity to the ego than those serving discharge of drives. Mechanisms

From the Department of Psychiatry, Division of Psychoanalytic Education, State University of New York, Downstate Medical Center, Brooklyn, New York, and from the Long Island Jewish Hospital, New Hyde Park, New York.

I am grateful to Drs. Isidor Bernstein, Maurice Friend, Margaret Fries, Merton Gill, Heinz Hartmann, Edith Jacobson, Samuel Karlitz, Charles I. Kaufman, Ernst Kris, Samuel Lehrman, and others whose advice and helpful suggestions furthered this study. Drs. Hershey Marcus and Esther Robbins have made my observations more acute by their critical evaluation of my methods.

used in regulation of motility organize drive discharge. They are widely used by the ego in the sphere of its secondary autonomy. Motor apparatus that mature later in development equip the individual for adaptive functioning so that his actions can influence his physical environment in a significant way.

The present paper is concerned with the transition from early rhythmic motor patterns, which are put in the service of drive discharge, to complex motility controlled by the ego. It describes in detail methods of regulation that lay the foundation for adaptive motor functioning in adulthood. It introduces new concepts, partially derived from Laban's movement theory (34, 35), and an attempt is made to correlate these concepts with psychoanalytic formulations about the development of psychic structure.¹

PSYCHOANALYTIC CONTRIBUTIONS TO THE UNDERSTANDING OF MOTOR PATTERNS

Freud's interest in rhythm ranged from the rhythm of excitation in the nervous system, rhythmic discharge of drive energy, the relation of specific rhythms of stimulation to qualities of pleasure and unpleasure, to the development of our concept of time from the rhythm of successive quanta of cathexis issuing from the ego (7, 8, 9, 10, 11, 13). Rhythm is a characteristic of all living tissue and Freud looked for its role in the lowest and highest modes of functioning.

Staerke (47, 48) suggested that the sensing and perceiving of our environment is mediated by kinesthetic awareness of the smallest movements which bring the outside world into the ego. He traced sensorimotor development in ontogeny and phylogeny and divided it into stages: one or more tonic stages, followed by a stage of interrupted tonus, which he subdivided into varieties of repetition—epileptic, rhythmic, reactive, and

¹ The introduction of new concepts necessitates new classifications and new terminology. A glossary, appended to this paper, contains explanations of new movement terms, as well as definitions of familiar terms which may lend themselves to misinterpretations.

delayed. He regarded tonic discharge as a rhythm with so extremely high a frequency that it is perceived as continuous. Hollos (22) believed that all of Staerke's sensorimotor stages pertain to forms of rhythm and agreed with his view that the highest forms of motility patterns are those with the lowest frequency of rhythm.

Spitz (46) pointed out that the joy and interest in repetition we see in young children wanes when they reach latency. He expanded Freud's view that rhythmic discharge in nonerogenous parts of the body can be sexual in nature, and suggested that rhythms are as specific as are zones for particular component drives. He concluded that the latency child is bored by repetition because he defensively shuns pregenital and genital temptations. Yet in a recent paper, Kaplan (24) reports her observations of joyful rhythmic games in latency. Both Spitz and Kaplan are right, however. Latency children begin to look down on rhythmic repetitions that are suitable for a specific drive discharge; they enjoy and seek games that regulate old rhythms by standards of skill and achievement. As Jacobson expressed so well, the developmental changes in pleasure and unpleasure depend on 'maturation of the ego which creates innumerable new channels for pleasurable functional motor and affective discharge' (23). Staerke postulated a developmental principle in phylogeny and ontogeny, namely: as development progresses the frequency of repetition decreases. Concurrently we can observe an increase in the variety and complexity of motor patterns. Kris (33) described the developmental enrichment of motor behavior as 'a transformation of rhythmical, automatic motor discharge into melody' in movement.² He suggested that we might understand ego development by studying the

² This does not mean that when movement acquires the pattern of melody it loses its rhythmic quality. In fact both rhythm and melody operate simultaneously. Ruckmick writes: 'In music the melody may be considered as a pattern of two dimensions, pitch and time. The chord adds the third dimension of depth of tonal mass or musical volume while rhythm provides the repeated periodic accent which adds movement to the whole' (42). Most definitions of melody refer to it as an organized succession of single tones.

development of motility, an inspiring proposal that poses two basic difficulties. Because of the global way most of us experience rhythm we tend to confuse the organ systems in which we perceive it and fail to analyze its components. Where a great many rhythms operate at the same time, some of them metrical, some ametrical, some simple, some complicated, we find it easier to experience the effects of continuity or discontinuity than to analyze all the variables.³ Although we know that our feelings and concepts are derived in some way from kinesthetic perceptions, we cannot clearly see how this occurs (4, 22, 43, 44, 47, 48). The difficulty increases when we investigate complex ego functions such as the sense of time and space. Here we are dealing with concepts partially derived from complex kinesthetic perceptions of various elements of movement.

Freud (8, 10) suggested that we perceive time as continuity by elaborating our perception of 'rapid firings of small quanta of cathexis'. But Bonaparte (2) was not convinced that 'our perceptions of space and time are originally and essentially an internal affair'. She believed that they 'must bear some relation to the fundamental reality of the universe . . .'. Freud's construct may have been derived from his kinesthetic perception of the most minute changes in muscle tension. Bonaparte, on the other hand, was impressed by feelings evolved from kinesthetic perceptions of movement elements which pertain to the

³ Ruckmick defines rhythm in whatever sensory field it occurs as 'the perception of a temporal form or pattern in which individual members repeated periodically are consistently varied in any one or more of their qualitative and quantitative attributes' (42). I believe it would be more all-inclusive to say that the variation in biological rhythms is more or less consistent. Mosonyi (37) remarks that rhythm in general refers to the reappearance of periodic movement; in organic life it pertains to repetition of movement in response to stimuli. The repetition is essential; the periods, that is, the lengths of intervals between repetitions, are of secondary significance. Mosonyi, like most authors, thinks of rhythm as a repetition of movement after intervals of immobility with the implication that movement itself, regardless of its changing qualities, is the element of rhythm. My first notations and diagrammatic representations of movements were in part based on observations of two simple elements: movement and pause (30). For the definition of rhythm used in this paper, see the glossary.

'fundamental realities of the universe . . .', namely, space, gravity, and time. Laban's (34, 35) distinction between 'flow' and 'effort' brings into focus the feeling of continuity we experience while moving ('an internal affair'), as contrasted with our attitudes toward space, gravity, and time, the external forces to which we adjust in our psychomotor behavior.

The division of movement into elements of 'flow' and 'effort' may contribute to the clarification of problems posed by investigators of our sense of time and space. We have taken for granted that primary process thinking is devoid of realistic appraisal of space, gravity, and time, as exemplified in timeless and spaceless flying in dreams. However, with the notable exceptions of Piaget (38) and Schilder (44), little attention has been paid to our sense of weight and our relation to gravity. Spielrein (45) linked space, causality, and time as a triad and tried to trace the development of these concepts in children. Causal thinking is not only intimately connected with our attitude toward time and space, but also gravity. In contrast, primary process thinking is derived in part from the noncognitive perception of rhythmic changes in the flow of muscle tension. The regulation of tension flow which enables us to distinguish between continuity and discontinuity is one of the first steps in the development of motility control. Only after we have achieved mastery over the initiation, continuity, and stoppage of movement can we begin to time our actions in accordance with the exigencies of external reality.

RHYTHMS OF TENSION FLOW

Flow of tension refers to the relation between contractions of agonistic and antagonistic muscles. It is this relation that determines whether a particular part of the body is immobile, rigid, or relaxed; whether movement begins, continues, becomes intermittent, or ceases. At rest there is a balance between agonists and antagonists, a balance not static but rather consisting of minute swings from a hypothetical line of complete equilibrium. Movement is initiated by an imbalance between agonists

and antagonists. The more the antagonistic muscles participate in the movement, the more they counteract and inhibit the movement. We then feel or see *inhibited or bound flow*. The less the simultaneous contraction of the antagonistic muscles, the less inhibited the movement. We then see and feel *free flow*. Various degrees of intensity can be observed in free and bound flow. The degree of intensity in bound flow is determined by the degree to which agonistic and antagonistic muscles oppose each other. The degree of intensity in free flow is determined by the degree to which agonistic muscle groups are freed from inhibition imposed by their antagonists. Extremely bound flow leads to rigid immobilization or cramping. Extremely free flow ends in immobilizing tremor. A high degree of free flow leads to the overshooting in movement so characteristic of young children (spilling, falling, running into objects).

The relation between flow and affect is best demonstrated by the fact that movements with free flow make one feel carefree, while movements with bound flow evoke that shade of anxiety that we call caution. Conversely, when we feel carefree we move freely, whereas caution makes us bound. Movements that maintain an even intensity in free flow convey steady confidence; in bound flow they give the impression of steady concern. Variations in levels of intensity may give a dreamy quality to our feelings; in free flow they are associated with pleasure, in bound flow with a sense of unreality. High degrees of intensity of free and bound flow evoke corresponding shades of feeling ranging from exuberance to depression. Low intensities of flow can be noted in manifestations of slight comfort and discomfort. Sudden eruptions of free flow are associated with surprise, of bound flow with fright. Gradual increase in freedom of flow is associated with feelings of pleasant expectation; gradual increase in bound flow can produce or express uneasy foreboding.

In the newborn, flow fluctuates widely and rapidly, but as the child grows older flow becomes more stabilized. Staerke described this trend as reduction in frequency of repetitions. It

accounts for the fact that little children cannot sit still and that adults become increasingly sedentary. Within the range of normal temperamental differences we encounter vivacious people whose flow fluctuates more than it does in the average spontaneous person. Least fluctuation of flow occurs in phlegmatic and placid types and in solid, steady people who move with dignity.

Rhythms of flow of tension consist of more or less regular alternations between the elements of free and bound flow; there are also recurring changes in such attributes of flow as the degree of its intensity, the steepness of its ascent and descent, and the evenness of its level. Periodic alternations in the basic elements of flow and its attributes operate in the borderland between soma and psyche. The study of rhythms of tension flow seems particularly suitable for the exploration of the development of psychic functioning. But the immensity of the task that confronts us when we try to correlate early psychic processes with types of rhythmic motor discharge makes the path of investigation rugged and uncertain.

In the first part of this series (30), I presented a method of notation which helped me to correlate motor rhythms with specific forms of drive discharge, such as oral, anal, and phallic. From longitudinal observation of three children from the lying-in period to the age of eleven, I was able to develop this method further. At the start of the study I classified rhythms intuitively in accordance with clinical impressions derived from observation of total behavior. I was then most impressed by the individual tendencies to build up tension steeply or abruptly, to high or low intensity, to fluctuate in intensity or maintain long plateaus of even tension, to tend to relax, be rigid or limp in phases of immobility. These tendencies seemed to correspond to modes of drive discharge. In classifying motor rhythms as oral, anal, or phallic, I followed a long-standing tradition in psychoanalysis. Zone specific drives have been named after the somatic source from which they arose; terms of certain modes of complex ego functioning were derived from

their precursors in patterns of drive organization. Every erotogenic zone requires an optimum rhythm of discharge to insure zone specific functioning; ego traits derived from zone specific functioning are marked by attributes of zone specific rhythms; for instance, stubbornness is an anal trait modeled after the holding phase of the anal rhythm. It facilitates research to classify apparatus in accordance with the zone in which it operates best and in keeping with the particular id-ego organization into which it will become incorporated.

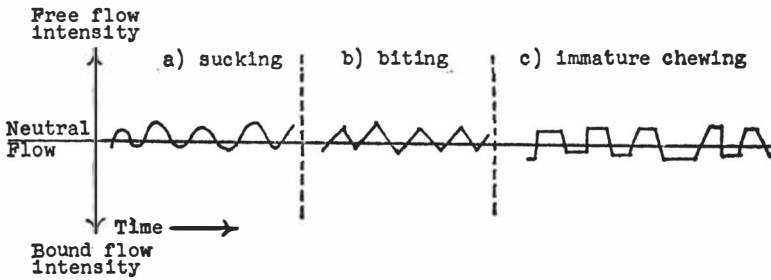
A diagrammatic presentation of typical rhythms of zonal discharge will serve to illustrate the manner in which these apparatus can be specifically defined in terms of elements and attributes of flow of tension. For clarity, I shall use quotation marks when referring to 'oral', 'anal', or 'phallic' rhythms as apparatus of motor discharge, and no quotation marks when referring to oral, anal, and phallic drives or drive derivative activity.

In appraising the illustration one must keep in mind that there are variations within the normal range of rhythms for specific zonal discharge. What has been presented here is the result of extrapolation from a number of observations and notations. Furthermore, one must keep in mind that it is easier to observe sucking, biting, and chewing rhythms (Illustration 1, I-a, I-b, I-c) than other zonal rhythms which are shrouded in the privacy of the body. It is also important to note which parts of the body involved in the zonal discharge have been observed. The sucking rhythms presented here refer to the changing flow in the labial and buccal muscles; the 'anal' rhythms stem primarily from the recording of flow changes in accessory muscles that contract simultaneously with the sphincter; the defecatory rhythm is derived from changes in abdominal and intercostal muscles; and the 'phallic' rhythms from observations of manual and pelvic masturbation of young children and dogs.

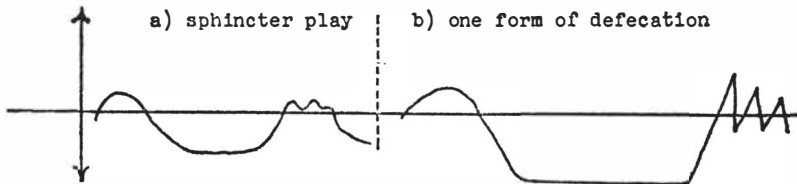
With these qualifications in mind, let us examine the components of the rhythms shown in Illustration 1. Sucking rhythms alternate between small intensities of free and bound flow (I-a). Biting rhythms differ from sucking rhythms by the sharp rever-

Illustration 1

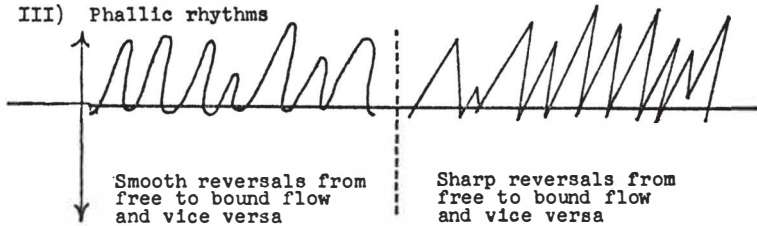
I) Oral rhythms



II) Anal rhythms



III) Phallic rhythms



Diagrams of typical rhythms of tension flow that are appropriate for zonal discharge.

sals from free to bound flow (I-b). Short plateaus, in which the level of flow intensity is even, can be noticed in immature chewing (I-c). Later forms of chewing, not shown here, are characterized by alternations between steady and fluctuating levels; they can be noted when jaws begin to move laterally and the tongue participates in churning food.

'Anal' rhythms of tension flow often exhibit long plateaus

of evenly held flow of higher intensity, alternating with short phases of unevenness in lower intensities. Moreover, after a brief spurt of suddenly ascending free flow there follows a more gradual increase of bound flow until a plateau is reached (II-a). The defecatory rhythm presented here shows an alternation between a long plateau of high intensity in bound flow and a short phase of varying but lower intensity. It differs from the sphincter play rhythm not only in intensity but also in the steep ascent and descent and in the sharp reversals of flow elements (II-b). Both 'phallic' rhythms illustrated show alternations between small intensities of bound flow with high intensities of free flow; they are both characterized by a very steep ascent and descent of flow intensity. They differ in that the first is characterized by smooth transitions between ascent and descent of flow; the second exhibits sharp, pointed reversals rather than smooth transitions (III). It may well be generally true that smooth transitions are more frequent in libidinal forms of discharge and sharp reversals more frequent in rhythms suitable for discharge of aggression.

In the neonate we can record a great many rhythms of flow that follow each other and combine with each other. Different parts of the body may move in different rhythms. Samples of actual recording of flow changes in newborn infants can best illustrate the usefulness of the classification presented here.⁴

⁴In preparing these charts, the observer is aided by his kinesthetic identification with the subject. Free hand drawing of curves of changes in tension flow is obviously open to large subjective error in estimating the neutral line and the degree of change. Self-observation and practice as well as comparison with tracings of other observers, are methods used to reduce errors.

One observer cannot take note of simultaneous flow changes in different parts of the body but the record should contain successive alternations of free and bound flow and their attributes in all parts of the body.

One does not merely note a preference for a certain rhythm; one determines the balance of rhythms used by the subject by computing the ratio of the frequency of their manifestation. For example, Glenda (Illustration 3, I) at the age of eleven had a ratio of 'oral', 'anal', and 'phallic' rhythms = 4: 1: 2. In scoring and computing separately the ratio between free and bound flow and the ratio of recorded attributes of flow (even or fluctuating levels of attained intensity; high or low intensity; steep or gradual ascent and descent) one gains insight into

Illustration 2

I. a) Baby C - Shortly after feeding



b) During bottle feeding



II. a) Baby S - About an hour after feeding



b) Spontaneous sucking



I. Baby C (6 days old, birth weight 5 lb. 5 oz.)

- a) Sample of flow changes in movement of right hand, wrist and elbow.
- b) Sucking rhythm recorded from labial and buccal movement. Nurse helps by stimulating movements (Stm).

II. Baby S (4 days old, birth weight 8 lb. 10 oz.)

- a) Sample notation of flow changes in arm movements.
- b) Spontaneous sucking recorded from labial and buccal movement.

During nursing the oral rhythm, localized in the mouth, begins to approximate a metrical rhythm. Some time elapses before sucking is established in its pure form. Some babies must be helped a great deal to make it regular (Illustration 2, I-b). Congenital preferences for divergent rhythms interfere with

preferred methods of flow regulation. With this method one may discover that a child in whom 'anal' rhythms are not particularly pronounced, still favors even levels of bound flow because of his excessive use of certain 'oral-sadistic' rhythms (Illustration 3, III). In extremely high frequency of 'oral-sadistic' rhythms, bound flow may appear continuous rather than intermittent. The comparison with records in various states of relaxation and tension, as after and before feeding, helps us to decide what rhythm has been modified by the interpolation of a prolonged plateau.

optimal functioning when they unduly intrude upon the oral rhythms and distort them. A baby's tendency to interpolate periods of bound flow, may cause him to cease sucking and to nibble on the nipple before he resumes feeding (2, I-b). Such a tendency is an attribute of 'oral-sadistic' rhythms and even more so of 'anal' rhythms (1, I-b and c, II-a and b). When a representative sample of recordings from various parts of the body indicates that 'anal' rhythms predominate over others, we suspect that the baby's congenital preference for such rhythms interferes with optimal sucking. The total record of Baby C, from which only a small fraction is reproduced here, indicated such a preference (1, II; 2, I-a and b).

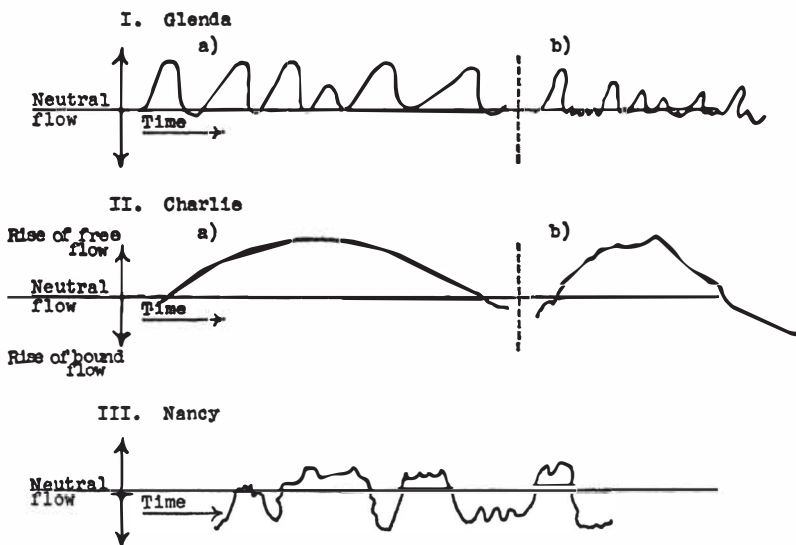
A tendency to steepness of ascent of flow, may lead to gulping during feeding with a resulting overflow of milk (2, II-b). This tendency is an attribute of 'phallic' rhythms and of certain phases of 'anal-sadistic' rhythms (I and II-b). The sample of Baby S, presented here, exhibits a combination of 'oral', 'anal', and 'phallic' rhythms with the latter predominating. The relative dearth of sharp reversals from free to bound flow suggests a constellation of rhythms which will not favor aggressive discharge forms.

Drive endowment is closely correlated with congenital differences in apparatus of discharge. By classifying rhythms of tension flow in accordance with their suitability for specific zonal discharge, we may be able to assess their contribution to drive endowment. Changes in the ratio of rhythms in successive developmental phases may give us insight into the ways and means by which dominance of phase specific rhythms becomes established. Perhaps we may also get to understand better how the child's early methods of flow regulation become incorporated into the special modes he later 'chooses' for taming of drives and subordinating them to the aims of adaptive ego functioning.

To illustrate how congenitally preferred rhythms of tension flow, in interaction with maternal preferences for certain motor patterns, influence psychological development, I shall use ex-

amples from case histories of three children I have observed from the lying-in period through their latency (30). Diagrams of these children's characteristic modes of rise and fall of tension, that could be observed in the newborn nursery, are reproduced here in the same form as the first two illustrations. Flow changes were actually written in this manner in later stages of the longitudinal observation of Glenda, Charlie, and Nancy.

Illustration 3



A schematic representation of preferred rhythms of tension flow in three children.

- I-a) Glenda's 'phallic' rhythms of tension flow, preferred since the neonatal period until the present age of eleven and a half. Note alternations between high intensity in free flow and low intensity in bound flow, and prevalent steepness in ascent and descent of intensity.
- I-b) 'Oral-sadistic' rhythms combined before the end of the first year into a sequence with 'phallic' rhythms (biphasic functioning).
- II-a) Charlie's preferred rhythms have certain features in common with typical 'anal' and 'anal-sadistic' rhythms. (Gradual ascent to high intensity and prolonged evenness of flow.) Note the steeper ascent of intensity and the increase of fluctuations under stimulation (b).
- III) Nancy's preferred 'oral-sadistic' rhythms mixed with other less identifiable rhythms. Note tendency to use bound flow, to sharp reversals, and the frequency of flow changes.

In the first paper of this series I tried to correlate the preferred rhythms of these three children with my appraisal of their drive endowment from the observation of their behavior. The classification of these rhythms according to the elements of free and bound flow and their attributes (evenness of fluctuation of levels of intensity, high or low intensity, steep or gradual ascent or descent of intensity), helped me to define these children's predilections for certain modes of flow regulation. These predilections were characteristic of each infant and proved to be the *Anlage* for ego traits. A baby's preference for steep ascent of flow intensity that is quickly followed by a sudden descent may predispose him for an approach to problem solving by transitory spurts of activity (3, I-a). A sequence of steeply ascending and descending free flow, followed by a quick alternation of small quantities of free and bound flow, may predispose the child to biphasic functioning in which enthusiasm wanes quickly and is revived after a phase of repetitious laboring (3, I-b). A baby's preference for maintaining even levels of flow intensity, whether these appear chiefly in 'oral-sadistic', 'anal', or 'anal-sadistic' rhythms, may predispose him to stability, placidity, or attentiveness which are often already noticeable in early infancy. It may also lead to stubbornness, inflexibility, or other traits that cause clashing with the environment (3, II-a). A baby's preference for bound flow, especially if used to counteract too frequent flow fluctuations, may cause the persistence of a primitive regulatory mechanism of freezing in immobilizing stiffness that promotes rigidity of defenses and retards ego development (3, III).

When these three children were eight months old I described their favored rhythms and correlated them with clinical observations of behavior (29, 30). At that time Greenacre (17) contrasted lolling and orgasmic types of rhythm that could be observed in infants and emphasized that '... in fact, all lines of activity are present in some degree at birth or soon thereafter, but rise to a peak of maturational activity at different rates of speed. It is the maturational peak and its prominence in the

total activity of the individual organism which marks the phase.' In full agreement with Greenacre's thesis I can say that all rhythms of tension flow suitable for zonal drive discharge can be noted in various parts of the neonate's body. The establishment of zone specific rhythmicity that is a prerequisite for drive differentiation is contingent on the localization of specific rhythms of tension flow in appropriate zones. Only then can we speak of phases in which particular component drives gain dominance.

In a paper read in 1945 (26), I contrasted the behavior of a girl who masturbated to the point of orgasm since early infancy with that of a deviant boy who rigidly immobilized his arms in reaction to frustration (28). I spoke then of the persistence of the original motor rhythms of the infant '... in a modified because higher organized form, throughout the life of the individual'. At the same time I stressed the importance of 'early organic tensions and early organic reaction types' for the development of individuality. Today I can be more specific: The newborn infant shows preferences not only for particular rhythms of tension flow but also for particular modes of flow regulation. Intrinsic in each rhythm of tension flow is a type of flow regulation determined by the elements and attributes of that rhythm (40). A preference for special forms of flow regulation may be derived from various rhythms which have certain attributes in common with each other. Rhythms become increasingly modified to conform to specific tasks; at the same time flow regulation becomes increasingly more complex. There is a hierarchic ascendance in rhythm differentiation and in the refinement of flow regulation, but the original preferences seem to persist within the framework of higher organization.

FLOW REGULATION

Methods of flow regulation which help to organize motor discharge cover a wide range of mechanisms from neurophysiological apparatus, that decrease repetition and promote flow stabilization, to ego controlled modulation of flow intensity. Com-

plete stabilization of flow leads to immobility; partial stabilization confines flow changes to one zone of the body. Redistribution of flow elements and their attributes in different parts of the body operates in coordinated motor patterns.

Partial stabilization and patterned distribution of flow aid in the localization of zonal functioning. In successive stages of flow regulation the child gains a freedom of choice, limited to be sure, but allowing for a selection of elements of flow and their attributes in the service of a function. Fine gradation of intensities is a late acquisition that enables the child to modulate movement in the service of differentiated affective expressions and fine skills. Maturation of cortical connections enables the child to weave kinesthetic, touch, visual, and auditory perceptions into concepts of 'where, what, and when', and as he does he becomes progressively aware of space, weight, and time. Maturation of apparatus which seem designed for control of these forces of reality brings forth elements of 'effort' in our adaptive motor behavior (1, 34, 35, 36, 43). 'Effort' elements operate in our approach to space directly or indirectly, to gravity by strength or lightness, and to time by acceleration or deceleration. Rhythms of flow of tension become subordinated to 'efforts' in the most advanced stages of flow regulation.

The motor patterns of neonates differ from each other in several ways: in the degree to which tension flow fluctuates (14, 15), which forms the basis for their temperament; in the range of rhythms they exhibit from which we may assess their drive endowment (30); in the preferences for certain attributes of flow from which we may be able to predict future preferences for dealing with reality through 'efforts'; in the methods of flow stabilization they favor in reaction to frustration (5, 6, 14, 18, 26, 27, 28, 41, 49, 50); in the type of flow regulations they employ in the service of functions from which we may be able to predict their propensities for coping with their needs.

Stabilization of tension flow reduces the frequency of repetitions and counteracts rhythmicity. Within the normal range of flow fluctuations in neonates we encounter lively babies who

may need a period of readjustment of flow before they settle down (3, I) and phlegmatic babies who look and feel heavy because their flow changes are few or develop too gradually to be easily noticed (3, II). So-called 'hyperactive' babies exhibit rapidly changing flow elements and their attributes (3, III). Some of them tend to use high quantities of free flow that lead to tremor; others can achieve stabilization only by immobilization through extremely high degrees of bound flow. Another rather extreme method of stabilization can be observed in limp immobility in which free flow decreases to a state of neutrality.

Immobilization through primitive methods of flow stabilization must be distinguished from immobility in relaxation and immobility in which we observe flow changes preparatory to movement. In relaxation moderate degrees of tension in agonistic and antagonistic muscles balance each other. Before movement begins, the parts of the body that will become involved in it exhibit changes in flow that enable us to predict whether movement will be initiated with free or bound flow. A redistribution of flow elements makes it possible to maintain bound flow in some parts of the body while others alternate between bound and free flow. The result of such a flow redistribution can be seen in neonates who maintain spontaneous rhythmic sucking of one hand by using the other hand to support it. In some infants who become attentive during defecation only those parts of the body which are involved in defecation undergo flow changes while the rest of the body maintains even flow as if in support of the discharge in the anal zone. In these instances flow redistribution led to a partial stabilization that was used to localize rhythmic discharge in one zone only.

A redistribution of flow elements that leads to a participation of all parts of the body in the main zonal rhythmic discharge can be seen in infants who become totally immersed in sucking. Fingers and toes follow the sucking rhythm and even those parts of the body which do not move, undergo flow changes in coördination with the sucking rhythm. A total involvement in a zonal discharge can be seen in infants who strain with their

whole body, grunt, and become red in the face during defecation. In those instances a redistribution of flow led to a centralization of rhythm in the service of a function. But centralization of flow may also be achieved by successive rather than simultaneous changes of flow in all parts of the body. Rhythmic flow changes may begin in a finger or a toe and spread through the body before rhythmic discharge becomes localized in a specific zone. Another form of centralization can be seen in infants who maintain sucking during defecation or look around as they nurse. They are able to integrate divergent rhythms with each other into one central experience. When rhythms in various parts of the body are not coördinated with each other, the observer gets the feeling that the baby is uncomfortable.

Despite the number of mechanisms available to the neonate to aid him in localization of zone-specific functioning, his flow regulation is rudimentary and undependable. He needs his mother's flow regulation to maintain his. Holding the baby is by no means a mechanical restraint of the baby; the mother employs sensitive mechanisms of flow regulation to re-enforce the baby's own modes of regulation and to introduce new ones by kinesthetic communication (3, 32).

Kris's suggestion that autoerotic sucking is an active repetition of the passive experience of sucking during nursing must not be interpreted to mean that the child needs to learn the sucking rhythm (33). The apparatus of sucking is available even before birth. What the infant learns from the experience of nursing is to maintain a continuity of sucking by actively re-applying those methods of flow regulation that had been re-enforced by the mother and mirroring those she had introduced.

Mothers enforce partial stabilization in the service of localization of zone specific rhythms in a number of ways: by picking up a crying baby so that the mother's body creates a steady barrier against flow fluctuations, in preparation for nursing (32); by holding the baby firmly to prevent movements that interfere with nursing; by positioning the baby in the crib in a manner which facilitates hand-mouth contact; by blanketing the baby

securely to prevent interference from flow changes from the lower part of the body; by refraining from diapering or readjusting the baby who maintains stable flow during defecation or urination; and by holding or even lifting a child whose many flow fluctuations interfere with defecation.

Mothers encourage centralization in the service of localization of zone specific rhythm: by attuning their own flow changes with those of the baby they hold for nursing; by positioning him in the crib in a manner which allows for a spreading of the rhythm through the whole body (for instance, putting a baby whose rooting motions tend to culminate in hand sucking in a prone position); by limiting distractions which might strain the capacity of a child to absorb various stimuli into one central experience.

Localization of the appropriate rhythm in the appropriate zone is a necessary prerequisite for need satisfaction. It forms the basis for zone specific dominance and fosters drive differentiation. Disturbance of localization in infancy hinders the development of a cohesive ego organization. One of its early manifestations is an inhibition of autoerotic sucking that may hinder the orderly progression of ego functions.

Charlie, from birth, exhibited a dearth of flow fluctuations unusual for an infant (3, II). He felt heavy in one's arms because he hardly adjusted his body to that of the person who carried him. Though heavy and phlegmatic, under special conditions Charlie learned a great deal by mirroring and later by imitation. Under stimulation he became more lively, and could function with all kinds of rhythms and with all parts of his body, provided he was allowed to build up tension gradually to a high plateau that he used as a base line for activity (3, II-b). Although he was disturbed by the many flow fluctuations of his vivacious mother and siblings, Charlie's vivid enjoyment of sucking persisted unabated. His ability to centralize helped him to maintain the continuity of sucking and to absorb many divergent stimuli into a whole experience (30). Charlie's mother regularly pulled his hand out of his mouth, admonishing him

playfully to be a good boy. Possibly because of her own discomfort in holding the baby to whose rhythm of flow she could not adjust, she resorted to prop feeding relatively early. For this reason Charlie was not deprived of sucking. The fact that the bottle was left to him to do with as he pleased, allowed for a longer sucking experience than if he had been held by an impatient feeder. His talent for stabilization and centralization of flow kept him contented and in good contact with his environment. However, when he began to teethe, it became evident that an inhibition of hand-to-mouth movements had diminished his resources for soothing himself. He hardly rubbed his gums and would not hold a zwieback in his hand to feed himself.

A similar, but much more serious defect in the development of the executive functions of the ego could be seen in Nancy who exhibited an excess of flow fluctuations from birth. Nancy had very limited resources for flow stabilization. She tended to veer from extreme bound flow to limpness. In a prone position she would establish hand-mouth contact while rooting. But when sudden jerks of free flow or a sudden decrease of flow would disrupt the continuity of sucking, she responded with excitement that would soon lead to stiffening of the whole body. She would suck vigorously and continuously when her mother held her for feeding in the hospital. As soon as she came home she was left on her own for a greater part of the day. In addition her formula had not been changed so Nancy had to consume great quantities before her hunger was satisfied. She seemed to suck forever on the propped bottle and would not release the nipple even after the bottle was empty. Her frequent flow changes were held in check by a continuous maintenance of bound flow in her whole body, a method that insured uninterrupted holding on to the nipple. The immobilization of the body in the service of localization had the effect of isolating it from the oral experience. At the same time the tonic hold on the empty bottle enhanced libidinization (and aggressivization?) of the jaw muscles at the expense of the rest of her body. Nancy could neither suck her hand nor use it for reaching. Her hand as well as her other limbs became instru-

ments of holding. She would clutch objects that were handed to her for a long time. As soon as she could stand she would remain in that position for very long periods of time, as her stiff spine, bound legs, and clutching hands prevented her from moving. She used tonic immobilization in the service of functions even where stabilization of flow became a hindrance rather than aid for functioning. It was interesting to note that Nancy could be soothed when she was crying by the very same quick and irregular fluctuations of tension flow which she had overcome by habituation to steady bound flow. Her mother would rock her with great abruptness and with a manner that impressed me at the time as both absent-minded and impatient. It seemed to me then that the mother's rocking could release Nancy's excessive boundness, as she was moved in a familiar way which became pleasurable when she was held securely.

Kinesthetic perceptions of rhythmic zonal discharge rarely gain access to consciousness. As they convey to the infant in which manner parts of the body are moving toward and away from each other, they become firmly embedded in their own creation—the body ego (4, 20, 21). In contrast to this, visual and acoustic perceptions seem designed to awaken consciousness and to make flow regulation subservient to psychic representations (9). All apparatus that promote consciousness tend to stabilize flow and to delay repetition.

Frequent flow changes reduce perceptivity for external stimuli and conversely, repetition of flow changes increases whenever apparatus serving perception of external stimuli cease functioning. In coma, the eyes usually move at irregular intervals, in varying intensities and in various rates of increase of free and bound flow. At times the rhythm becomes metrical and free flow changes into bound in a manner reminiscent of 'oral' rhythms (1, I-a). During awakening from coma, when seeking movements reappear, the spontaneous rhythm of eye movements interferes with attempts to follow objects until a state of consciousness is reached (25). Similar changes in eye movements

reflect the changing states of drowsiness and alertness in the neonate (3, 52).

Even in states of alertness, neonates have little control over the flow of their eye movements. They can only be induced to follow visual stimuli when objects are moved at the same rate of speed, with the same gradually evolving flow of tension by which their eyes move spontaneously. We can deduce that the child is pursuing the object from the fact that he maintains the direction in which the object is moving much longer than he does without the visual stimulus. Visual pursuit not only effects localized delay of repetition but also stabilizes the flow in the rest of the body. When the newborn follows visual stimuli he becomes quiescent. Either his body becomes immobilized by partial stabilization of flow or all the body parts strain toward the stimulus in consonance with the movements of the eyes (centralization).⁵

In response to external stimuli, the rhythm of spontaneous movements becomes modified in conformance with the nature of the stimuli. The newborn reacts to the rhythmic flow of milk by a modification of his spontaneous rooting and sucking that brings out a pure 'oral' rhythm in the oral zone. At the same time partial stabilization of flow inhibits rooting movements in the rest of the body, or centralization of flow effects integration of flow changes in all parts of the body with the dominant 'oral' rhythm. In this manner a metrical 'oral' rhythm becomes localized in the oral zone and the continuity of sucking is preserved.

Flow regulation not only maintains the continuity of zone specific functioning, it also plays a role in the initiation or cessation of localized activities. Onetime rhythmic units are used as transitions to flow stabilization, in the beginning and at the end of zonal functioning. Free flow may effect the turning of the head away from the breast before the baby turns back to it and settles in a nursing position. Similarly, a baby may respond to a

⁵ All data on neonatal eye movements presented here are based on my own observations. Some of them have been described in accounts of more systematic observations of the newborn (3, 39, 52).

moving object by first moving his eyes away from it and only then pursuit of the visual stimulus begins.⁶ Transitions from rhythms of flow to flow stabilization that end motor discharge are seen when a baby uses bound flow to push out a nipple or tighten his lips and relaxes tongue or mouth in gradually decreasing free flow until he reaches the neutral flow of rest or peaceful sleep. When a baby tires of following objects, he may cease to respond, close his eyes, or blink. We see in these mechanisms of flow regulation a tendency to limit repetition not only to adapt to a stimulus but also to shut it out (8, 18).

Some newborn babies are so entranced by looking or listening that they stop sucking; others close their eyes or stare ahead as if to protect themselves against disturbing visual stimuli. Hands get into the infant's line of vision as they move to the breast in preparation for fingering it during sucking. When the infant turns to the breast the hands begin to move by following the eyes but the eyes may also follow the hands. Visual pursuits become incorporated into the eye-hand-mouth system in phases preparatory for need satisfaction. By guiding the hand to the mouth and to objects, eye movements reduce flow fluctuations in the arm to conform to their own rhythm. When an excessive stabilization of flow in the eye muscles is used to shut out stimuli, the biphasic eye movements that prepare reaching are considerably reduced and the rhythm of hand movements remains unmodified. As a result too frequent changes in the flow of arms prevent neutralization of energy that is necessary for the establishment of the hand as the executive organ of the ego.

While in the hospital Nancy would follow objects with her eyes in the short phase when she was peaceful. She looked intently when her mother held her for nursing. At home she was

* Two interrelated rhythms are described here: 1, the alternation between free and bound flow, and 2, the alternations between centrifugal and centripetal movements which Lamb called the 'flow of shape' (1, 31). Free flow initiates movements that veer from the midline; as the head or the eyes near the end positions, antagonistic muscles begin to contract in response to stretching of muscles and tendons, and bound flow breaks the lateral movement. For movement to continue, flow becomes free again and the direction of the movement reverses itself.

left in a darkened room with the bottle propped on her pillow. As her whole body became immobilized to support her hold on the nipple her hands would hardly get into the line of her constricted vision. Long after her contemporaries began to reach, Nancy would look at a rattle, listen to its noise, bring her head forward, open her mouth, but her 'bound' hands would not move to reach it. When she became more mobile she reverted to aimless mouthing and 'fiddling' with her hands and feet that retained the 'oral' and 'oral-sadistic' rhythms of her neonatal phase (3, III). She would look intently 'doing nothing, saying nothing', not only in her infancy but in later stages of development as well. Her steady looking was isolated from her manual and intellectual performance. When Nancy was fed solids she would clutch a spoon in each hand. This clutching continued after feeding very much the same way she held the nipple in her mouth after she finished sucking. The tonic holding retarded the development of biphasic actions such as reaching and grasping. When she finally did begin to reach she would grab the hand of the examiner rather than the object. It looked as if she perceived the hand as a holding instrument; when she released the grip she may have been reaching for the other person's hand to retrieve her 'lost instrument'.

When rigid immobility is used for partial stabilization of flow, the immobile parts of the body cease functioning. Once movement is released, numerous fluctuations of flow are brought about by the fact that rhythms from different parts of the body interfere with each other rather than modify each other. Each new function must be learned as a separate experience by a new process of localization in a new functional zone.

Nancy immobilized her hands during feeding and had to learn to reach as a separate experience, isolated from the restricted oral organization she had to adhere to.

Centralization in the service of a function uses all body parts simultaneously or successively; rhythms of flow arising in different parts of the body modify each other as they become integrated into a functional organization. When a zonal activity

ceases, the modified rhythms can be used in the service of other functioning. When a child's power of centralization is strained to the limit, he may need to withdraw from stimuli by a complete stabilization of flow in order to recuperate. He may also defensively restrict functioning to avoid disorganization.

Even as a newborn Charlie reacted to rhythmic acoustic stimuli with what seemed a high degree of attentiveness. Visual and acoustic stimuli tended to further reduce his already scanty flow fluctuations. During the first few weeks of life he was able to absorb visual, tactile, acoustic, and oral experiences all at once so that listening and looking became part of the early feeding situation even during prop-feeding.

Charlie's motor development was quite advanced: he grasped objects early and manipulated them with a purposiveness unusual for his age. He became selective in the rhythms of tension flow he used for different functions. But he often lapsed into a vacant stare that seemed to remove him from the world around him. The dazed staring seemed to shut out stimuli from inside and outside.

Charlie was not only prevented from autoerotic sucking but also from playing with solids. Objects were presented to him to distract him from messing and interfering with the mother's spoon feeding. At first Charlie was spellbound by objects and kept still during feeding, but he became dazed when objects were removed and substituted by others before he could finish his thorough examination of each toy. He would cry and refuse solids, but would be content drinking from his bottle in his crib. He would not hold the bottle or a zwieback and he stopped reaching for objects, but he did not immobilize his hands as Nancy did; he used them to play with his feet which no one could take away from him.

Charlie restricted functioning selectively to avoid displeasure. Even when he immobilized his hands, they did not cease to play a part in feeding or play. The flow changes preparatory to reaching could be observed in his resting arms. He did not isolate parts of his body from each other but he isolated his body totally or partially from contact with external stimuli that interfered with his preferred rhythm of tension flow (30).

Even in withdrawal he used centralization of flow in the service of the defensive shutting out of the world around him. The flow of his whole body adjusted to the far-away look in his face. In his crib he would come to life again. Undisturbed he would practice motor skills and evolve a great many modifications of rhythm which he could use for differentiated functioning. When he could engage in zonal activity without undue interference, he was able to apply the rhythms that had been modified when he learned something new. He would learn little when he could not use centralization in approaching problem solving, and he would learn instantly where the use of already familiar rhythms or their attributes were required. He would watch a psychologist keenly as his whole body was engaged in flow changes mirroring hers. When she finished the demonstration of a test item he immediately knew how to proceed although he was not capable of it before the demonstration. When he was much older and had learned to shun examinations in school, he responded poorly to verbal instructions and acted dazed. Even then he could learn with eagerness when one took special care to approach him gradually and to let him use his own methods of problem solving. Mechanisms of flow regulation that could be observed in Charlie's first year of life became incorporated into his executive and defensive ego functions.

The localization to appropriate zones of all zone-specific rhythms begins early in life (17). Methods of flow regulation that contribute to drive differentiation in stages that follow the oral are not only dependent on maturation of specific apparatus of control but also on all previous zonal experiences. Early methods of flow regulation extend to the anal and urethro-genital zones before zone-specific flow regulation can be established in these areas. For that reason none of the partial drives gains a dominance comparable to oral dominance. Throughout life more or less 'pure' oral rhythms can be seen in the flow of tension in facial movement, in purposeless motility of hands and even feet, as well as in many purposeful work movements that require frequent repetition.

At birth babies may show a predilection for rhythms suitable for anal or phallic discharge or for rhythm attributes that promote a flow regulation conducive to the differentiation of 'anal' (2, I) or 'phallic' rhythms (2, II). In those instances a modification of 'oral' rhythms by the divergent discharge occurs long before 'anal' or 'phallic' rhythms normally gain dominance. We then encounter precocious development while at the same time functions that depend on optimal 'oral' rhythms may suffer.

As rhythms become localized in appropriate zones the child begins to use them selectively in a pure form for drive discharge and in a modified form for neutralized discharge. Once a repertoire of modified rhythms of flow becomes available for adaptive functioning the child begins to use selection of rhythm attributes as a method of flow regulation. From the range of optimal combinations of rhythms and their attributes he will select those he likes best. To reach an object he may prefer to use even flow which will help him not to deviate from the shortest route to the object, or he may change his flow a number of times and stop himself in time with an excess of bound flow. To open a cabinet he may select high intensity of bound flow that develops gradually, or he may use a number of spurts of suddenly ascending free flow without resorting to high intensity in order to accomplish the task. Controlled selection of flow attributes in the service of functions are forerunners of 'efforts' which are elements of movement we use to make an impact on the environment (1, 34, 35, 36, 43). Subordination of flow changes to control through efforts is a highly advanced method of flow regulation that is not fully established until adulthood. Its development overlaps with a progressive refinement in selectivity that enables us to graduate flow intensities by modulation and to organize selected sequences of rhythmic units in phrasing. Highly differentiated selectivity in flow changes and subtlety in affective expressiveness are interdependent achievements. Flow of tension in graduated intensities evokes a succession of shades of feelings, and finely differentiated affects express themselves in shadings of flow intensity. A repeated sequence or

'theme' of graduated flow intensities gives 'melody' to movement. As Kris (33) suggested, melody of movement rates high in the developmental scale of ego functions. It may well be that it is the individual melody of movement that differentiates adult genital organization from its precursors in infancy.

At this stage of my study I am not able to give more than general data on the hierarchy of flow regulations. Nor am I able to say in which phase of maturity single 'effort' elements can be noted and when they become consistent psychomotor elements. But the following conclusions are possible. 1, The various rhythms of tension flow seen in the neonate become differentiated in such a way that pure rhythms serve localized drive discharge and modified rhythms are used in drive derivative functioning as apparatus of secondary autonomy. 2, Methods of flow regulation derive their style from the elements and attributes of rhythms from which they evolve. 3, Selectivity in flow becomes differentiated with progressive development of the ego's control over expression of affect. 4, Controlled selection of flow attributes is a precursor of effort. 5, Developmental trends overlap and interact in such a way that patterns of tension flow reflect changing constellations of drives, while patterns of effort subordinate the flow of tension to their adaptive aims and reflect transitory and permanent ego attitudes to the world in which we live.

DEVELOPMENT OF EFFORTS

The newborn infant is not capable of organized action and his motor behavior bears little relation to reality. He has at his disposal primitive regulatory mechanisms that he can use to stabilize flow and limit repetition. With his mother's help he develops means to localize zone-appropriate rhythms and to modify divergent rhythms in the service of functions. Even when he grows older, the child uses methods of flow regulation that are derived from the qualities of rhythms he most frequently experienced. Gradually he develops enough control over his own flow of tension to enable him to select optimum rhythms of

zonal discharge and those attributes of rhythms that are most suitable for the execution of a task. Throughout life he retains a preference for patterns of movement that evolved from rhythms he enjoyed most. When maturation of apparatus for dynamic dealing with the forces of space, gravity, and time enables the older child to change his environment through work and affective communication he still favors 'efforts' that have the greatest affinity to his originally preferred flow patterns.

Flow of tension initiates movement, maintains its continuity, and stops it. Without it, no 'effort' is possible. Although 'effort' elements subdue and govern the flow of tension, they are genetically and currently dependent on it. 'Effort' elements in our movement reflect changes in our attitudes toward: (1) space, by approaching it directly or indirectly; (2) gravity, by relating to weight with strength or lightness; and (3) time, by accelerating or decelerating the pace of our movements. 'Effort' is comparable to a rider who, in complete control of his horse, may choose to take a direct or an indirect route, or to whip the horse with strength or lightly, or to speed the pace or slow it down—all this provided the horse has been tamed and trained to carry a rider, to start and stop, and to change the rhythm of its gait in subordination to the rider's commands. To complete the metaphor, one may add that the trainer has acted in the double capacity of training the horse and the rider as well.⁷ It is apparent from this metaphor that 'efforts' are those components of movements by which the ego controls drives in the service of adaptation to reality (9). They are complex functions of

⁷ Laban (35) depicts efforts as arising from the medium of 'flow of effort'. I have changed this term to 'flow of tension' to indicate that movement can proceed with flow independently of effort. I have used only a few of Laban's terms and only such definitions and modifications of his concepts as are necessary to fit his movement theory and Lamb's contributions to it (1, 34, 35, 36, 43) into the framework of psychoanalytic psychology. I am indebted to Irma Bartenieff and Warren Lamb who taught me the principles of movement theory and effort notation, but they are in no way responsible for my method of rhythm notation nor my modifications and expansions of Laban's and Lamb's movement theories (30, 31).

the ego which reflect our feelings and our concepts of space, weight, and time.

In stages of transition from adaptive flow regulation by selection of flow attributes to adaptive control through 'efforts', the observer is often in doubt whether he has seen a precursor of 'effort' or a mature 'effort' element. A toddler playing carpenter with his peg set seems to use strength or directness. But it may well be that he has merely selected flow attributes for his movement which have an affinity to these 'effort' elements. We can use several criteria to distinguish a forerunner of 'effort' and mature 'effort': first, we must ask ourselves whether that type of directness or strength could be used to make an impact on real objects. Can we interpret these motor patterns as expressive of a dynamic relationship to space or weight? Could they be used to convey a direct approach to problem solving or to communicate authority? Since we are dealing here with transitions to elements of 'effort' we may be uncertain in our answers. Once 'effort' elements are clearly established, trained observers will recognize them without doubt.

Aim-directed selection of flow qualities is prerequisite for dealing with reality through 'effort'. It is a part-function of 'effort' which becomes integrated with other components into the complex organization of 'effort' patterns. We can recognize the affinity of certain flow attributes to specific elements of 'effort' and may be able to predict future preferences for certain 'effort' elements from earlier preferences for the corresponding flow qualities.

1. There is an affinity between evenness of flow levels and a direct approach to space. In direct movements, we may utilize even flow to achieve steadiness, either in the entire action or in one phase of it. To become direct in our movement, we not only select sequences and attributes of tension flow that will give impetus and continuity to our action, but we direct our attention to one spatial plane in which we decided to proceed and restrict the use of other planes. We may use directness for the precise execution of a task, as driving a nail into a plank, or we may use

it to communicate a definite attitude, as 'hitting the nail on the head' or 'getting to the point'.

When a child selects even flow for his movement in order not to stray from his path, his attention is centered on restricting his flow fluctuations so that they do not interfere with his attempt to reach an object. Such an aim-directed control of tension flow is accomplished through taming of impulses to move every which way. It differs from earlier types of regulation by stabilization of flow, as it is specifically concerned with adjusting the body to function in space. It constitutes a stage in the development of mastery of space and as such is a forerunner of a direct approach to space through 'effort'.

2. There is an affinity between variations in levels of intensity of tension and an indirect approach to space. Uncontrolled variations of flow intensity may convey unsteadiness, absent-mindedness, or dreaminess. Deliberate changes in flow intensity that preserve the continuity of movement in winding from one spatial plane to another, indicate a flexibility that has to be attained before we can develop indirectness of approach. Indirect 'efforts' incorporate planned changes in flow intensity into actions which require the successive use of two or three planes. They are employed in tasks such as spinning wool or wringing a towel dry. They communicate modes of affect and thought in gestures when we 'spin a yarn' or 'wring a subject dry'.

3. There is an affinity between high intensity of tension flow and strength. High intensity of flow conveys strain or enthusiasm. Deliberate increase of flow intensity to accomplish a purpose is a precursor and component of organized actions in which we cope with weight. It reflects the degree of intent that motivates us to use strength as an 'effort' to oppose gravity. We apply strength when we lift weights, give orders with authority, and communicate our affective attitudes in such phrases as 'weighty considerations' or 'the gravity of the situation'.

4. There is an affinity between small quantities of tension flow and lightness. Through the use of small quantities of tension we may convey lack of concern, delicacy, or slight discom-

fort. Before we can approach objects with lightness, we must be able to decrease the intensity of tension flow at will. The 'effort' element of lightness incorporates diminutions in flow intensity into certain phases of actions that are based on previous success in overcoming gravity, and operate from a base of levity. We employ lightness in manipulating light objects, in dancing on tiptoes, and in gestures that express 'lightness of spirit' or an attitude of 'treating a matter lightly'.

5. There is an affinity between steepness of ascent or descent of flow and acceleration. Sudden changes in flow intensity merely connote quickness of response. A deliberate increase of the rate with which tension rises or falls is an achievement of a stage in the development of our sense of time. We use steep ascent of flow to start a movement in high speed and we use steep descent of flow to stop abruptly. We incorporate those flow changes that reflect our sense of urgency into actions in which we oppose the passage of time. We accelerate our speed in walking to get somewhere faster, and use acceleration for the communication of attitudes to time that language expresses in such phrases as 'beating time' or 'having no time'.

6. There is an affinity between gradual ascent and descent of flow, that gives the impression of leisure, and deceleration. We are able to select the degree to which we decrease the rate of ascent or descent of tension only when we begin to understand that flow changes progress in time. When a child begins to appreciate that dawdling can make him late, he may begin to use the appropriate rate of increase or decrease of tension flow to effect a slow start or a slow stopping of movement. The 'effort' element of deceleration incorporates gradual changes of flow intensity into actions, retarding the passage of time. We may decelerate the rate of our speed to conform to the speed of a machine we operate, or we may decelerate the speed with which we walk when we decide to get to an appointment on time instead of too early. Through deceleration we convey our affective attitudes to time that language expresses in phrases as 'having plenty of time' or 'being a sluggard'.

'Efforts' are patterns of movement that we employ in our dynamic adjustment to forces of reality. In physical work, through which we exercise our influence over our environment, we are required to use more 'effort' elements than in any other activity, with the exception of sports. People are suited for certain occupations when their individual preferences for specific 'effort' elements coincide with the 'effort' required in the work involved, but training habituates one to use all the elements of 'effort'. Rhythms used in sequences and combinations of 'effort' elements make work enjoyable rather than a chore (36). Rhythms of tension flow mark the individuality of drive derivative work habits, such as 'oral' swaying to-and-fro or 'anal' straining and releasing (see Illustration 1, I and II). Elements of 'effort' by themselves can be used to compose a rhythm as can be seen in alternations between strong and light beats. The choice of work rhythms and rhythms in art reflects individual preferences for tension flow expressive of drives, as well as for sequences of 'efforts' that represent ego attitudes.

Not before adolescence do we acquire the ability to use three elements of 'effort' in one action. Preferred combinations of effort and flow elements in phrases of movement become permanent characteristics in adulthood. Elements of 'effort' and their combinations are interrelated with a wide range of qualities, from physical characteristics and style of movement to affective attitudes and modes of thinking. Which of these qualities will prevail in our use of 'effort' depends on the degree to which tension flow and psychic representations of space, weight, and time contribute to the relatively autonomous apparatus that makes 'effort' possible (16, 41).

At the age of ten and a half, Nancy surprised me during two successive visits in which neither mouthing nor 'fiddling' was prominent. But notation of her rhythms of tension flow revealed that 'oral-sadistic' rhythms far exceeded any others in her repertoire of movement. Even though 'oral' rhythms are generally used more frequently than others, especially in hand and face movements, the ratio of 'oral': 'anal': 'phallic'

rhythms of 13:1:1 computed from Nancy's record deviated substantially from the average. Notation of 'effort' showed a preference for lightness and avoidance of strength. Nancy tackled problems requiring strength by a controlled increase of bound flow.

At eleven and a half Nancy was more productive and spontaneous than ever before. But her long-standing tendency to repeat could be noticed in her drawing of the inside of the body which she filled almost completely with small dots representing cells. Here and there she fitted in organs whose location she had learned in school. Notation of tension flow revealed a ratio of 'oral': 'anal': 'phallic' rhythms of 8:1:1. Her repertoire of 'effort' increased markedly, with lightness still prevailing. It seemed that a new maturational spurt brought forth a control of flow through 'effort'. But her main modes of defense, derived from her regulation of flow by extreme stabilization, still persist as she primarily uses bound immobility, inhibition, and restriction of function.

Nancy's 'efforts' seem to operate without a foundation based on modification of rhythms and differentiated flow regulation. The new maturational spurt may enable Nancy to make up for her lag in ego development. Unless this happens she may continue to use 'effort' with few variations of rhythm and in isolation from affective and mental representations.

Nancy's newfound ability to use 'effort' confirms the opinion of observers of movement that 'efforts' have a high degree of autonomy and may even replace flow and occur, so to speak, on their own (1, 34, 35, 36). Where 'efforts' act as physical equipment rather than as psychomotor manifestations of affective attitudes, they are almost isolated apparatus of primary autonomy that create the automated ego of a robot, without style and ideational content.⁸

We shall know more about how 'efforts' are used in building

⁸ Alexander Calder, in his machine sculpture entitled *Frame*, has re-created all six elements of 'effort' of which humans are capable. He did not succeed in combining them into one action, nor did he convey the individuality of human action.

personality and adaptation to the wider world as the three children of my study become independent from family and school. At the age of eleven all three children still evidence a preference for rhythms of tension flow that they have favored since birth (Illustration 3), and they are still turning to methods of flow regulation adopted in early infancy. Glenda still enjoys steep rises of free flow that she uses gracefully for well-timed acceleration (Illustration 3, I). Charlie, whose combinations of rhythm and 'effort' are unusually varied and rich, still functions best from a high level of tension flow which he builds up gradually (Illustration 3, II). He still uses dazed immobility to shut out stimuli. The gradual ascent of flow intensity tends to support Charlie's deceleration when he withdraws from contact and slows down physically as well as mentally. Nancy's preference for lightness still shows traces of her neonatal limpness. Her use of strength suffers from the fact that she continues to use highly bound flow defensively (Illustration 3, III). The role these preferences played in the complex development of higher modes of functioning can best be presented through the history of Glenda's motor patterns.

Glenda's mother was very sensitive to the child's needs. The young infant slept right next to her bed so that she could hear the baby stir and be ready to respond. She picked Glenda up with gradually rising tension flow and held her for frequent short periods with lightness of effort and evenness of moderately bound flow. She blanketed her tightly but soon became concerned lest she restrict motility too much and asked my help in finding a way to keep the child warm and yet not completely restrained. She did take Glenda's fingers out of her mouth but ceased interfering because it 'made the baby angry'. She worried because the baby drank very little milk at a time and had to be fed often, but she adjusted to this schedule because 'Glenda is so little'.

Glenda's preferred biphasic rhythm consisted of a phase of steep increases and decreases of free flow, followed by phases of 'rest' which an observer who saw her as a toddler aptly called

'periods of recuperation' (3, 1-6). Relaxed and graceful, Glenda did not tend to sharp reversals of flow as a newborn. She used small intensities of free and bound flow in sucking for a short time and would drop off to sleep during feeding. Back in her crib she would periodically perform like an acrobat, using sudden increases of free flow to propel herself in a supine position to the head of the crib.

Glenda's mother could develop enough steepness in ascent of flow to cope with the baby's motor feat, which she greatly admired. She attuned to the child's preferred rhythms but her own preferences for gradual ascent and steadiness of flow levels did have an influence upon the child. By the time solids were introduced, Glenda had begun to suck for longer periods of time. She was then fascinated by colorful objects at which she would stare in complete immobility. Glenda's mother respected this need, even though at times it interfered with spoon feeding. Her adjustment to the child's rhythms was most noticeable in the manner in which she presented spoonfuls of food. Each spoonful reached Glenda's mouth at the precise moment when her mouth opened to receive it. Her mother achieved this by proper timing of accelerations and was satisfied that her baby ate so quickly.

As soon as Glenda's appetite was satisfied she demanded to be put in a position in which she could stare at a red tablecloth. The mother held her on one knee to bring the child closer to the table. Using lightness and evenness of bound flow in her left arm she would at the same time change efforts and tension flow in the rest of her body to accommodate to her own needs and to those of her visitors. The staring was Glenda's own affair. Mother only provided the tablecloth and a stabilizing support. When a visiting toddler covered the tablecloth and disturbed the baby, mother reacted with gradually ascending flow intensity. Once she reached a high enough degree of intensity, she acted to restore the visual stimulus to Glenda. Perhaps she was a little late, but she taught Glenda a method of flow rise in reaction to frustration that was almost alien to the baby's repertoire of flow attributes.

Glenda's mother helped her to localize 'oral' rhythms in oral zones and encouraged independent functioning in keeping

with the child's biphasic sequences. In contrast, she was neither timely nor sensitive when she localized 'anal' rhythms in the anal zone. She would become excited in what seems to me, retrospectively, a form of 'anal-sadistic' rhythm (Illustration 1, II-b) when she diapered the baby. She held up the legs in a tense, even grip. She talked in a scolding voice and then playfully spanked the baby's bottom. There was more face-to-face contact in diapering than in feeding. The mother reported with pride that Glenda soon recognized more forceful spanking as disapproval and puckered her mouth. This became a play between them rather than a clash. Although mother reported constipation in the first two or three months, she was not worried about it. Only much later, when Glenda tried to fit sitting on the pottie and getting off it into her preferred rhythm, did her mother demand that she sit there until defecation was accomplished.

The early record does not include sufficient data on rhythms other than Glenda's preferred ones, nor does it include enough clinical observations to appraise the precursors of the anal stage in Glenda's early interaction with her mother. It is apparent, however, that the maturation of visual-motor apparatus alongside the mother's tendency to use gradual ascent and even levels of bound flow and her early erotization of the anal zone, contributed to the modification of Glenda's preferred rhythmic pattern. Toward the end of the first year, when oral and anal needs normally overlap, Glenda began to rub her mother's, and later her own, underwear while engaged in auto-erotic sucking (51). I once observed that the rubbing followed immediately after she touched her anus. It occurred to me then that the mother had prepared Glenda for an oro-anal centralization as a method for both gratification and tension reduction.

This method of regulation was successful in decreasing Glenda's need for biphasic functioning and was a source of comfort when her flow fluctuations became numerous at the age of four. She was then flooded by 'oral-sadistic' rhythms which were only rarely interrupted by her originally preferred 'phallic' spurts. For a time, the oral-sadistic invasion seemed to disrupt Glenda's biphasic rhythmicity. She again lost her ability or need to recuperate in frequent rest when 'phallic' thrusts

in an inexhaustible succession pervaded her movements at the peak of her phallic phase. At that time, modification of her original 'phallic' rhythm brought forth sharp reversals, borrowed perhaps from the subdued 'oral-sadistic' rhythms (Illustration 3, I-b). I thought then that her phallic sadism derived its aggressive component from latent oral-sadistic wishes.

Glenda's greatest difficulty at that time was indistinct speech. She was an early talker but was unable to adjust the rise and fall of flow intensity to the length of words. She would omit word endings at points when, in her own rhythm, flow intensity dropped suddenly. In trying to regulate her speech she would use evenness of flow intensity, which promoted slurring of words into each other. Sounds would burst out as if from nowhere, when sudden ascents of free flow to high intensities broke her ability to maintain evenness of flow.

On entering school Glenda still spoke indistinctly. She was looking forward to school to the extent that she gave up sucking and rubbing of silk when told by her mother that school children did not do this. At the same time her own wish to succeed, as well as pressure from her mother and teacher, led her to subdue spurts of excitement and to transform her 'rest periods' into 'work periods'.

Throughout latency one could notice a considerable discrepancy between her motor performance in play and her deficiency in motor skills needed for school work. By the time she was ten she used all 'effort' elements in play and had acquired considerable facility in combining two and sometimes even three elements in one action. As could be predicted, her accelerations evolved easily from steep ascents of free flow, and she was equally capable of strength and lightness. She had learned to decelerate from her mother and would use this where needed. It was especially noticeable that she could move in space both directly and indirectly, but would use only precursors of these 'efforts' during work.

In writing, for instance, she had little appreciation of the space above the paper when she changed from one line to another. She would make the necessary flow changes to accomplish it but her deliberate planning caused her to decelerate. In order to write or to draw in straight lines she would use even

levels of bound flow instead of the 'effort' of directness. She would erase a great deal and start anew. When she would at times become direct, a burst of free flow would soon cause her to overshoot, derail her direction, and disorganize her. She frequently regained equilibrium by an unwarranted acceleration. The first thing that seemed to come to her mind when she was confused was to 'hurry up'.

Glenda's lack of directness during work resulted from her defensive use of even bound flow, selected in emulation of her mother's preferred method of flow regulation. Her use of controlled flow changes instead of an indirect approach may have been initiated when, as a toddler, she followed her mother around the house and mirrored her movements. Her mother would wander around the house, adjusting the gas range, picking up dishes, answering the telephone, all the while turning to Glenda to praise her or to hand her a doll. All these actions required successive readjustments of flow intensity but were accomplished in a manner that conveyed wandering of attention rather than an indirect approach to objects in space.

Glenda's mother seemed to prefer lightness and deceleration. She used little strength unless challenged by a matter of great importance; she would then put her whole body into the service of strength and would frighten people into submission. In excitement she used frequent sharp reversals between free and bound flow, steep ascents and high intensity of flow. Acceleration and indirectness were less conspicuous. In a friendly mood she would approach people directly with lightness and deceleration which gave the effect of gliding. To express hostility, she would exchange lightness for strength and press her point until one had to give in.

At eleven and a half, Glenda developed a greater facility in using all 'effort' elements in a number of combinations. A maturational spurt brought about a new ability in directness and indirectness of approach, even during work periods. As a result she has become more proficient in school and the contrast between her attitude in work and in play is much less marked. She has retained her preference for acceleration and either lightness or strength. Flow notation reveals the persistence of 'phallic' rhythms, but they are far outweighed by a recent in-

flux of 'oral' patterns. The sharp reversals from free to bound flow that characterized her 'rest' periods and work periods throughout latency have given way to smooth transitions. She seems more poised and biphasic functioning is fading. She tries to act like a young lady now and shows no evidence of the impatient and demanding behavior of her earlier years. Because of the abundance of soft transition from free to bound flow, she appears more feminine than before, but in her carriage, her choice of clothes, and her drawings she betrays her strongly phallic orientation. Her preference for steep increase of flow intensity is still in evidence, but is made less conspicuous by its incorporation into combinations of various rhythms of flow and 'effort' elements. She now uses full 'efforts' preferably in combinations that effect dabbing, flicking, and punching movements. All these contain accelerations that are initiated by sudden rises of free flow. In motor patterns and other characteristics of behavior, she shows signs of growing independence of her mother. It is too early to establish her permanent 'effort profile', too early to say wherein will lie her aptitude (36). We may get a better insight into the role her movement patterns played in the development of her character when we learn more about the way she uses her efforts in her relations to people.

We have seen how a mother's preference for certain qualities of tension flow and for certain 'efforts' interact with a child's congenital preferences. We have observed that maturation of apparatus makes the child partially independent of the mother. We have begun to study the role of 'effort' in the development of autonomy. We have gained some insight into the role movement patterns play in ego development. We will learn about their role in the development of object relationships when we study rhythms of 'shape' flow that underlie withdrawal and approach behavior and methods of shaping the body through which we convey our 'efforts' to others (37).

CONCLUSION

The rhythms of the neonate's movement contain the *Anlage* for expression of drive and affect and for their regulation as well.

Analysis of rhythms of flow of tension reveals an alternation between two basic elements, free flow and bound flow. This alternation reflects the changing balance between agonistic and antagonistic muscle groups. Imbalance of these muscle groups results in movement that brings the individual into contact with the outer world; their balance causes immobility which withdraws the individual from contact. Extreme imbalance exposes him to the dangers of a clash between himself and the outer world, but extreme balance exposes him to dangers from within. Immobility, apathy, or rigidity prevent us from using the resources of our body for survival.

The polarity of free and bound flow is a quality of organic life from which Freud derived his concepts of polarities of pleasure and unpleasure, of life and death instincts (8). It reflects two trends in regulation. One is a basic trend toward the world around us that prompts us to use the resources of nature for our survival. The other, antithetical trend protects us from the dangers of too great an exposure to reality.

But rhythms of tension flow contain a more complex regulatory mechanism in the qualities of free and bound flow that are also capable of change. Flow of tension varies as its intensity increases or decreases, remains steady or fluctuates, and changes gradually or suddenly. These polarities of flow attributes form the basis for all the varieties of movement possible to us in our accommodation to the environment and our defenses against it.

All possible rhythms of tension flow seem to be available to the neonate. But he hardly has any ability to organize them for adaptation or defense. To do this he needs the combined influence of reality (and its foremost exponent—his mother) and the maturation of his organ systems. We too easily forget that apparatus and structures, be they somatic or psychic, are regulatory systems (5, 18, 40), and we burden ourselves too much by trying to establish when psychic functioning begins. It seems that all functions become mobilized at birth when the neonate becomes exposed to external stimuli and begins to function autonomously.

In the basic rhythms of alternations between free and bound flow, we recognize a regulation familiar to us from primary process functioning. The primitive archaic regulations of the id shift from displacement to condensation of psychic energy. When the ego gains access to the regulation of frequencies of their repetition, in various degrees of intensities and at various rates of increase, condensation and displacement become subject to the laws of secondary process functioning (27).

Frequency of repetition, degree of intensity, and rate of increase of flow, free and bound, combine to form rhythms that are appropriate for need satisfaction in particular zones of the body. In this process we see a model for the operation of drives which are the psychic representatives of needs. The regulation of quality and quantity of free and bound discharge in the id is dependent on rhythmic changes in various organs of the body. Individual differences are expressed in the frequency and combination of these 'organ' rhythms. These individual differences contribute to the individuality in the central organization of rhythm in the nervous system. They appear to be the core of the id-ego organization from which individual traits of the ego emerge (12, 18).

Analysis of rhythms of tension flow suggests that rhythmic discharge is characteristic of the id. The id becomes a mere 'seething cauldron' when rhythm ceases and boundness prevents discharge (16, 19); conversely, it becomes an 'erupting volcano' when rhythm ceases and free discharge becomes boundless. These are primitive regulatory mechanisms that are used throughout life as emergency measures. Analysis of attributes of tension flow suggests that the regulation of frequency, intensity, and rate of discharge, which are originally determined by the confluence of rhythms of different organ systems, is taken over by the ego. The ego not only 'transforms the id's will into actions . . .' but also mediates between the organism and its milieu. Organ systems that are specifically designed to receive stimuli from outside the body oppose rhythmic discharge and promote flow stabilization and delay in repetition. The body ego

evolves from the id as it incorporates the noncognitive kinaesthetic perception of tension rhythms. To the degree that it incorporates acoustic and visual perceptions the ego becomes the exponent of continuity of environmental forces.

Maturation of psychomotor apparatus that serves adjustment to the environment supports and further differentiates ego functioning. Motor patterns, which are designed to cope with forces of our environment, are 'efforts' that we use in our adjustment to space, gravity, and time. The complex functions of the ego include several modes of motor discharge that develop in successive stages: rhythms of tension flow appropriate to specific tasks are localized in specific functional zones; elements and attributes of tension flow are selected in the service of actions that require delay in repetition; fine gradation of flow attributes adds melody to rhythmic movements; rhythms become subordinated to adaptive aims in 'efforts'.

Differentiation of drives is contingent on differentiation of rhythms to conform to optimal modes of discharge in zones in which specific concrete transactions occur between the body and its milieu. When drive discharge is thus localized and its rhythm becomes truly functional, there begins a specific ego-controlled drive organization. This becomes possible only when the mother lends to the child her own methods of regulation and mediates between him and reality before a constant ego takes over this function and makes the child independent. During these transactions the child's original endowment becomes modified; within the complex modified functioning of the adult we may, however, detect traces of inborn traits that we have observed in the newborn.

GLOSSARY

Attributes of free and bound flow are qualities of flow that depend on the frequency of changes, the degree of their intensity, and the rate of increase or decrease. The intensity of tension may fluctuate or remain even for a time, it may decrease or increase, it may rise or abate gradually or steeply.

Centralization: A method of flow regulation in which all parts of the body, simultaneously or successively, undergo flow changes in consonance with a localized functional activity. For instance, the whole body of a drummer contributes to the actions of the arms.

Effort: A motion factor that expresses the changes in our attitudes toward space, gravity, and time.

Effort elements are direct or indirect in relation to space, strong or light in relation to weight, increasing or decreasing speed in relation to time.

Elements of flow are free, uninhibited flow in movement that cannot be easily stopped at will; and bound, inhibited flow that can be easily stopped at any point of movement.

Flow of tension: A motion factor that pertains to the sequence of fluency and restraint in the state of muscles in movement and rest. Laban refers to it as 'flow of effort' because efforts arise from flow and use it for their adaptive aims.

Flow regulation organizes flow changes in the service of functions.

Localization is a mechanism of flow regulation which initiates and maintains zone specific patterns of flow changes in functionally related parts of the body so that a sucking rhythm becomes dominant in the mouth region or a rhythm appropriate to grasping in the hand.

Melody of movement results from a flow regulation in which flow intensity is graduated in a selected sequence.

Modification of rhythms of flow occurs when several rhythms combine with each other, or when one or more flow qualities of a rhythmic pattern are changed through flow regulation. A child may decrease the rate of rise of tension in sucking because of a confluence of 'oral' and 'anal' rhythms, or he may do so to conform to the rhythm with which milk is released from the nipple.

Modulation of flow: A regulation by fine graduation of intensities.

Phrasing of rhythmic patterns: Organization of sequences of selected rhythms of tension flow and effort, in a manner characteristic for an individual.

Redistribution of flow: A flow regulation through which flow elements are changed in various parts of the body to initiate, maintain, change, or stop a functional activity.

Rhythm: Periodic repetition of variations in one or more quality. In regular rhythms, the intervals between variations and the modes of variations are consistently the same.

Rhythm of tension flow: Periodic alternation between free and bound flow in simple rhythmic patterns to which is added a variation of flow attributes in complex rhythms. Regular stimuli evoke pure rhythms in which intervals between variation and the degree of change in frequency, quantity, and rate of increase or decrease of free and bound flow are consistent.

Selection of flow elements and their attributes: Flow regulation by planned selection of flow qualities in adaptation to reality; for instance, choosing even bound flow to reach a small object. This type of flow regulation is a part-function of effort and its precursor.

Stabilization: Flow regulation that decreases the frequency of flow fluctuations. Complete stabilization leads to immobility in all parts of the body. Partial stabilization reduces flow changes in certain parts of the body to prevent interference with localized motor discharge.

Subordination of flow to efforts: Flow regulation in various parts of the body by which sequences of flow changes are adapted to the effort elements chosen.

REFERENCES

1. BARTENIEFF, IRMA: *Effort Observation and Effort Assessment in Rehabilitation.* (Lecture at the National Notation Conference.) New York: Dance Notation Bureau, 1962.
2. BONAPARTE, MARIE: *Time and the Unconscious.* Int. J. Psa., XXI, 1940, pp. 427-468.
3. CALL, JUSTIN D.: *Newborn Approach Behavior and Early Ego Development.* Int. J. Psa., XLV, 1964, pp. 286-295.
4. DEUTSCH, FELIX, Editor: *On the Mysterious Leap from the Mind to the Body. A Workshop Study on the Theory of Conversion.* New York: International Universities Press, Inc., 1959.
5. ESCALONA, SIBYLLE: *The Impact of Psychoanalysis Upon Child Psychology.* J. Nervous & Mental Disease, CXXVI, 1958.
6. FREUD, ANNA: *The Ego and the Mechanisms of Defense* (1936). New York: International Universities Press, Inc., 1946.
7. FREUD: *Three Essays on the Theory of Sexuality* (1901-1905). Standard Edition, VII.
8. ———: *Beyond the Pleasure Principle* (1920). Standard Edition, XVIII.
9. ———: *The Ego and the Id* (1923) Standard Edition, XIX.
10. ———: *A Note Upon the Mystic Writing Pad* (1924). Standard Edition, XIX.
11. ———: *The Economic Problem of Masochism* (1924). Standard Edition, XIX.
12. ———: *Analysis Terminable and Interminable* (1937). Standard Edition, XXIII.
13. ——— and BREUER, JOSEF: *Studies on Hysteria* (1893-1895). Standard Edition, II.
14. FRIES, MARGARET: *Factors in Character Development.* Amer. J. Orthopsychiatry, VII, 1937, pp. 142-181.
15. ———: Some Hypotheses on the Role of the Congenital Activity Type in Personality and Development. In: *The Psychoanalytic Study of the Child, Vol. XIII.* New York: International Universities Press, Inc., 1958, pp. 48-64.
16. GILL, MERTON M.: On Topography and Structure in Psychoanalysis. In: *Psychological Issues, V.* New York: International Universities Press, Inc., 1963.

17. GREENACRE, PHYLLIS: Problems of Infantile Neurosis. In: *The Psychoanalytic Study of the Child, Vol. IX*. New York: International Universities Press, Inc., 1954, pp. 18-24.
18. HARTMANN, HEINZ: *Ego Psychology and the Problem of Adaptation*. New York: International Universities Press, Inc., 1958.
19. ———: The Mutual Influences in the Development of Ego and Id. In: *Essays on Ego Psychology*. New York: International Universities Press, Inc., 1964.
20. HOFFER, WILLI: Mouth, Hand and Ego Integration. In: *The Psychoanalytic Study of the Child, Vols. III/IV*. New York: International Universities Press, Inc., 1949, pp. 18-23.
21. ———: Development of the Body Ego. In: *The Psychoanalytic Study of the Child, Vol. V*. New York: International Universities Press, Inc., 1950, pp. 49-56.
22. HOLLOS, STEFAN: *Über das Zeitgefühl*. Int. Ztschr. f. Psa., VIII, 1922, pp. 421-439.
23. JACOBSON, EDITH: The Affects and Their Pleasure-Unpleasure Qualities in Relation to the Psychic Discharge Processes. In: *Drives, Affects, Behavior*. Edited by Rudolph M. Loewenstein. New York: International Universities Press, Inc., 1953.
24. KAPLAN, ELISABETH B.: *Reflections Regarding Psychomotor Activities During the Latency Period*. Panel on Latency. Meeting of the American Psychoanalytic Association, 1964.
25. (KESTENBERG) SILBERPFENNIG, J.: *Contribution to the Problems of Eye Movements. 1. Eye Movements in Insulin-Coma*. Confinia Neurologica, I, 1938, pp. 188-200.
26. KESTENBERG, JUDITH S.: *Early Reactions to Tensions*. Read at Meeting of the New York Psychoanalytic Society, 1945.
27. ———: *Note on Ego Development*. Int. J. Psa., XXXIV, 1953, pp. 1-12.
28. ———: *History of an 'Autistic' Child*. J. Child Psychiatry, II, 1935, pp. 5-52.
29. ———: Problems of Infantile Neurosis. In: *The Psychoanalytic Study of the Child, Vol. IX*. New York: International Universities Press, Inc., 1954, pp. 18-24.
30. ———: *The Role of Movement Patterns in Development. I. Rhythms of Movement*. This QUARTERLY, XXXIV, 1965, pp. 1-36.
31. ———: *The Role of Movement Patterns in Development. III. Shape, Flow, Shaping*. In preparation.
32. KHAN, M. MASUD R.: *Ego Distortion, Cumulative Trauma, and the Role of Reconstruction*. Int. J. Psa., XLV, 1964, pp. 272-279.
33. KRIS, ERNST: Some Comments and Observations on Early Auto-erotic Activities. In: *The Psychoanalytic Study of the Child, Vol. V*. New York: International Universities Press, Inc., 1961, pp. 95-116.
34. LABAN, RUDOLF: *The Mastery of Movement*. Second edition. Revised by L. Ullman. London: MacDonald & Evans, Ltd., 1960.
35. ——— and LAWRENCE, F.: *Effort*. London: MacDonald & Evans, Ltd., 1947.
36. LAMB, WARREN: *Aptitude for Management: Its Relation to Executive Health*. The Manager, J. British Inst. of Management, XXVII/2. London: Management Publications Ltd., 1959, pp. 102-103.

-
37. MOSONYI, DESIDERIUS: *Die irrationalen Grundlagen der Musik*. Imago, XXI, 1935, pp. 207-226.
38. PIAGET, JEAN: *The Child's Conception of Physical Causality*. New York: Harcourt Brace & Co., 1930.
39. PRATT, KARL C.: The Neonate. In: *Manual of Child Psychology*. Edited by L. Carmichael. New York: John Wiley & Sons, Inc., 1946.
40. RAPAPORT, DAVID: *On the Psychoanalytic Theory of Thinking*. Int. J. Psa., XXXI, 1950.
41. ——— and GILL, MERTON M.: *The Points of View and Assumptions of Metapsychology*. Int. J. Psa., XL, 1959.
42. RUCKMICK, C. A.: *The Rhythmical Experience from the Systematic Point of View*. Amer. J. Psychology, XXXIX, 1923.
43. RUSSEL, JOAN: *Modern Dance in Education*. London: MacDonald & Evans, Ltd., 1958.
44. SCHILDER, PAUL: *The Image and Appearance of the Human Body*. Psyche Monographs No. 4. London: Kegan Paul, Trench, Trubner & Co., 1935.
45. SPIELREIN, SABINE: *Die Zeit im unterschwelligem Seelenleben*. Imago, IX, 1923, pp. 300-317.
46. SPITZ, RENÉ A.: *Wiederholung, Rhythmus und Langeweile*. Imago, XXIII, 1937, pp. 171-196.
47. STAERKE, AUGUST: *Entwicklungs Phasen der psychischen Motilität*. Beiheft der Int. Ztschr. f. Psa., IV, 1918.
48. ———: *Über Tanzen, Schlagen, Küssen usw.* Imago, XII, 1926, pp. 268-272.
49. STERN, MAX: *Prototypes of Defenses*. Int. J. Psa., XLV, 1964, pp. 296-297.
50. ———: *Prototypes of Mental Phenomena*. Read at Meeting of the New York Psychoanalytic Association, 1963.
51. WINNICOTT, D. W.: *Transitional Objects and Transitional Phenomena*. Int. J. Psa., XXXIV, 1953.
52. WOLFF, P.: *Observations of Newborn Infants*. Psychosomatic Med., XXI, 1959, pp. 110-118.

The Role of the Ego in the Recovery of Early Memories

William G. Niederland

To cite this article: William G. Niederland (1965) The Role of the Ego in the Recovery of Early Memories, The Psychoanalytic Quarterly, 34:4, 564-571, DOI: [10.1080/21674086.1965.11926364](https://doi.org/10.1080/21674086.1965.11926364)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926364>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)



Citing articles: 2 View citing articles [↗](#)

THE ROLE OF THE EGO IN THE RECOVERY OF EARLY MEMORIES

BY WILLIAM G. NIEDERLAND, M.D. (NEW YORK)

The dominant function of the ego as a means of recovering memories from childhood is accepted as being a decisive element in psychoanalysis. Breuer's initial work with the 'chimney-sweeping' patient Anna O, in which Freud later joined, ultimately led Freud to the fateful discovery of the mental processes and basic psychological principles governing human life (2). Omitting the details of this heroic achievement—including his self-analysis and his later conclusion that his patients' memories of seduction were fantasies—it can be said that Freud never lost sight of the significance of the reality factor in the recall of crucial experiences. An instance of this is the repeated emphasis on the 'nucleus of truth' noted in his last paper (6).

Freud had observed the role of the ego in these processes in an earlier work (5). 'Anything arising from within (apart from feelings) that seeks to become conscious must try to transform itself into external perceptions; this becomes possible by means of memory traces. . . . it is possible for thought-processes to become conscious through a reversion to visual residues. . . . Thinking in pictures is . . . only a very incomplete form of becoming conscious. . . . It stands nearer to unconscious processes than does thinking in words and it is unquestionably older than the latter both ontogenetically and philogenetically.' Noteworthy are Freud's mention of 'external perception', 'visual residues', 'thinking in pictures', which are ' . . . only a very incomplete form of becoming conscious'. Attention is called also, in the same work, to his definition of auditory perceptions as 'a special sensory source'; and that in his diagrammatic sketch accompanying the text he adds an auditory

Presented to the American Psychoanalytic Association, New York, December 1964.

segment to his graphic representation of the ego with the statement, 'The ego wears an auditory lobe'.

Though much of our knowledge of the recovery of memories from childhood was ably reviewed by Kris, certain aspects of the process appear to require further elaboration and clinical attention (8).

CASE I

Patient A, a man of twenty-five who was sexually impotent, was obsessed chiefly with a dread of what he called 'ghoulish faces' which he saw everywhere. They floated over the trees of a park on which he looked from his family's apartment. He ascribed this ghoulish facial appearance to the analyst, and to his father who, in addition, had prominent and menacing eyes, and the patient frequently scrutinized his own face in the mirror, grimacing and contorting his features to test whether they were similarly ghoulish. Early in analysis, he drew a picture of himself as a particle of undifferentiated protoplasm, which represented his unprotected and helpless ego.

During analysis, on one occasion, the sirens of an air-raid test threw him into an acute state of panic. He had palpitations, difficulty in breathing, broke into a sweat, began to sob, and stammered helplessly that the analyst's room was filled with ghoulish faces.

At the start of the war when he was two years old, he and his mother had moved from France to England. He was asked if he had any recollection of seeing his mother wearing a gas mask, and if perhaps he had been similarly equipped as was then customary during air raids in England. He confirmed this (later corroborated by his parents), and it was substantiated by a flood of associative memories and by the therapeutic outcome.

As might be expected, his state of acute panic, confusion, and altered perception had multiple determinants. Condensed in it were many traumatic events at the outbreak of the war: the anxiety-filled days of the Munich crisis in France; the pre-

cipitous emigration to England; the disrupted relationship with his mother in the highly overemotionally charged atmosphere. These and successive experiences on an immature ego left it—particularly in the perceptual area—precisely in the unprotected and exposed state he depicted in the drawing he made of himself. Seeing the dreaded ghoulish faces over the trees in this country was traced to his emigration from the urban center of Paris to a rural area in England. The recall in analysis was precipitated by an appropriate auditory stimulus of sirens which plunged him into an acute affective state accompanied by altered perception in which he re-experienced the early traumatic events and recovered the path that led to the pathogenic memories.

In a number of sessions prior to the return of the memory—including the beginning of the particular session of recall—he had felt relatively comfortable and protected with the analyst who provided a maternal ‘protective shield’ (7) until this illusory protection was suddenly shattered by auditory stimuli identical with those of his traumatic past. The archaic ego state was thus re-established *in concretu et actu*, and the pathogenic experience emerged with the impact of a nightmare or a hallucination during the analytic session reported.

CASE II

Patient B had been treated over a period of seven years by several psychiatrists and analysts. The prevailing diagnosis was schizophrenia.

When first seen by me when he was nineteen, and throughout most of the first two years of psychotherapy, he engaged in all sorts of mischievous and bizarre behavior. He giggled, grimaced, made derisive noises, sang jingles from radio announcements, or remained coldly indifferent and made no sound. During the latter part of the second year he would at times call me ‘Mr. Magoo’—a farcical, semiblind, babbling, and baby-faced old man of movie or TV cartoons. When he became convinced that he would not be dismissed from treatment, (as

had happened to him before), he could talk occasionally about current affairs, magazine articles, and the like. I persevered in his treatment for three reasons: he came regularly to his appointments, four times a week; gradually he began to read books and periodicals; he successively relinquished various sweaters, woolen shirts, and the like that he felt compelled to wear even on warm days. Commenting that he must feel cold if he had to wear all these garments was a remark he did not consider worthy of answering.

In the third year of treatment he reported his first dream.

I was near or at the North Pole in an arctic region. It was night and I was lying on an ice block or a refrigerator which was my bed or something. I was surrounded by ice and snow and it was totally dark. The night remained icy, cold, and dark for a long, long time, as if it would never end. Finally the dawn came and some people were walking in and out of the room where I was lying on the refrigerator which was also my bed.

There were no associations. His fashion of telling the dream was light; he giggled as if describing a rather funny event about another person.

As he had repeatedly and curiously looked about the room while relating the dream, and as the twice repeated emphasis on the refrigerator (which was also his bed), struck me as a potential allusion to a real experience in his life, I formed a tentative idea as to the possible concreteness of the event represented. I asked him whether he had ever actually been frozen in any manner comparable to the situation depicted in his dream. He laughed at my question, then became attentive and remained reflective throughout the rest of the session. As a matter of fact, recently he had not been as coldly indifferent as he had formerly been.

He came the next day in a state of great excitement. He had told his parents about my 'foolish Mr. Magoo question'. Their reaction had been one of great astonishment. They told him that when he was less than a year old, they indeed had had to

'thaw him out' of his urine, feces, and vomitus because 'by mistake' they had left the window of his room half-open throughout a very cold winter night. They had ignored his cries during the night on the recommendation of their pediatrician. He developed pneumonia, was hospitalized, and remained an invalid for a long time. The dream proved to be a turning point in the treatment and in his life. The patient ultimately recovered and follow-up observations through several years after the termination of the treatment have confirmed its favorable outcome.

Various authors have postulated that a shift in the dynamic balance of the mental forces involved in the maintenance of repression occurs through a reduction of the anxiety connected with the mnemonic representation which is repressed. From such reduction and shift 'will result . . . a relaxation of the defenses directed against it' (1, 13). This is undoubtedly so; but in addition to the element of diminished anxiety, the specific state of the ego, especially in relation to its perceptual and sensory functioning at the time of the original experience—as well as to its functioning at the time of the recovery of the memory in analysis—,should be taken into account.

The sudden impact of the auditory experience on patient A caused an abrupt, intense change in certain ego functions. There were alterations of perception, speech affect, and concomitant physiological manifestations approximating, or at least reflecting, those which had originally occurred at the time of the pathogenic experience. The anxiety involved was undoubtedly reduced by the interpretation in an analytic setting. Prior to this the overwhelming auditory stimulus of the sirens had, however, intensified acutely the anxiety to a point where the patient's surroundings were invaded to a degree from which there was no escape except by a regression to the archaic, traumatic event itself. Its revival first released an 'affective deluge' so often observed under such circumstances (11). Second, it resulted in a controllable regression to the archaic state of the ego with alteration of perception, loss of ego boundaries, transient hallucinatory phenomena.

In patient B, the revival of the pathogenic experience was revived through a dream made possible by a very slow change in the ego following a prolonged therapeutic process. Imperceptibly the 'frozen' state of the ego had altered under the influence of the ongoing therapeutic process which made it accessible to a gradual 'thaw' long before the emergence of the dream. By projection, his identification of the therapist was with a fictional character who approximated his own helpless, weak, infantile, semiblind, yet not entirely unresourceful, ego. At the same time he was equating the analyst with his blind, foolish parents, in particular his father who in the transference became the devalued as well as admired 'Mr. Magoo'.

Pötzl noted, with reference to primitive or incompletely developed visual percepts in dreams, a preponderance of preoccupation with a past often closely related to the dreamer's infancy: 'In the analysis of the dream [of this type] . . . autobiographical factors rise to the surface, saturated with infantile material . . .' (10). In the visual field, as the investigations by Marbe, Pötzl, later refined by Fisher and other observers have demonstrated, part perception appears to predominate and to this original visual modality of perception may be attributed the characteristic fragmentation of the later recall in memory of the predominantly visual type in analysis (3, 12). It has been my clinical experience that remembering of a fragmentary and disconnected type usually derives from a predominantly visual type of early experience (9). In the kinesthetic, olfactory, and auditory experiences of early childhood a more global type of sensory perception appears to prevail. The totality of such experiences tends to recur during the recovery of memories in analysis, all of which, under the influence of repression and resistance, undergo various vicissitudes and further changes.

Kris observed that the process of remembering which analytic interpretations set into motion appears often to proceed under its own impetus. Among the reasons given are the partial and controlled regression in the analytic situation, the

fusion of past and present experiences, the pressure of material from repression toward consciousness, and so on. In addition to these may be advanced the more general proposition in the recovery of memories—their close relationship to certain types of perceptual experience and subsequent recall during an analytic procedure. The fragmented, apparently isolated and piecemeal type of memory recall is in the visual field where originally part-percepts predominated. It is mainly in this area that Freud's formulations about 'visual residues', 'thinking in pictures', and 'incomplete form of becoming conscious' are relevant (5). The process of free association itself, with its characteristic piecemeal, seemingly disconnected, fragmented and incomplete verbal production, makes it, in fact, almost ideally suited to the promotion of the return of predominantly visual memory traces and experiences. Freud's comparison of free association to 'sitting at the window of a railway train and describing to someone behind you the changing views you see outside . . .' emphasizes its fragmented and disjointed nature (4).

SUMMARY

The recovery of memories is therapeutically effective not only because of the discharge of affect, but also through the re-emergence of the specific state of the ego which was repressed at the time of the traumatic experience. The regressive features which often accompany the recall may approximate forms of thinking and feeling close to the primary process. These seem to carry with them a greater force of conviction than is ordinarily attainable. With the release of forces that were bound in the psychic structure, the synthetic function of the ego makes possible its reorganization and restructuralization. With such recall and working through into consciousness, content and affect of memory can be dealt with in a revised fashion by both the ego and the superego functions, permitting a more realistic solution of the conflict between the archaic, instinctual, and defensive forces which made the original traumatic event pathogenic.

REFERENCES

1. BRENNER, CHARLES: The Theory of Repression. In: *Scientific Proceedings. Panel Report: Memory and Repression*. Fall meeting American Psychoanalytic Association, New York, December 1964. J. Amer. Ps. Assn., XIII, 1965. In print.
2. BREUER, JOSEF and FREUD: *Studies in Hysteria* (1893-1895). Standard Edition, II.
3. FISHER, CHARLES and PAUL, I. H.: *The Effect of Subliminal Visual Stimulation on Images and Dreams: A Validation Study*. J. Amer. Ps. Assn., VII, 1959, pp. 35-83.
4. FREUD: *Further Recommendations in the Technique of Psychoanalysis* (1913). Coll. Papers, II, p. 355.
5. ———: *The Ego and the Id* (1923). Standard Edition, XIX, pp. 20-21.
6. ———: *Constructions in Analysis* (1938). Coll. Papers, V.
7. KHAN, M. MASUD R.: The Concept of Cumulative Trauma. In: *The Psychoanalytic Study of the Child, Vol. XVIII*. New York: International Universities Press, Inc., 1963.
8. KRIS, ERNST: The Recovery of Childhood Memories in Psychoanalysis. In: *The Psychoanalytic Study of the Child, Vol. XI*. New York: International Universities Press, Inc., 1956.
9. NIEDERLAND, WILLIAM G.: *River Symbolism*. This QUARTERLY, XXV, XXVI, 1956, 1957.
10. PÖTZL, OTTO: The Relationship Between Experimentally Induced Dream Images and Indirect Vision. In: *Psychological Issues, Monograph VII*. Edited by George S. Klein. New York: International Universities Press, Inc., 1960.
11. ROSEN, VICTOR H.: *The Reconstruction of a Traumatic Childhood Event in a Case of Derealization*. J. Amer. Ps. Assn., III, 1955, pp. 211-221.
12. ROTH, NATHAN: *Perception and Memory*. J. Hillside Hosp., XII, 1963, pp. 218-231.
13. WANCH, MARTIN H.: Personal communication. Quoted by Charles Brenner. *Op. cit.*

Stealing as a Defense

Arnold Allen

To cite this article: Arnold Allen (1965) Stealing as a Defense, The Psychoanalytic Quarterly, 34:4, 572-583, DOI: [10.1080/21674086.1965.11926365](https://doi.org/10.1080/21674086.1965.11926365)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926365>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



Citing articles: 2 View citing articles [↗](#)

STEALING AS A DEFENSE

BY ARNOLD ALLEN, M.D. (DAYTON, OHIO)

The thinking to be expressed here was stimulated by comments in Waelder's by now classic paper on the multiple functions of the ego (10). As a result of modifications in theoretical thinking, he noted that acts previously thought of as pure impulse expressions are now recognized as having defensive function. He stated: 'Formerly it was assumed that anxiety originated in the id as a direct result of excessive, unrelieved tension and that during this process the ego was somehow overtaken as a defenseless victim'. He then quoted Freud's modification that 'in a situation of danger, that is, in a threat of oncoming excessive, unrelieved tension, the ego may anticipate the latter in the form of anxiety, and . . . this anticipation then becomes the immediate signal which tends to induce the organism to adjust itself so as to avoid the danger—for example, flight, or any other appropriate protective measure'. Waelder continued: 'Even in the extreme case of an action carried out under the pressure of impulse which may seem at first to be driven purely by the instincts, the ego contributes its part'. This emphasizes in a way relevant to our approach that the ego is not limited to a passive role alone and that a psychic act 'even if initiated as an attempted solution for one definite problem . . . must also, at the same time and in some way, be an attempted solution for other specific problems'.

In the present paper I shall try to show that stealing in certain cases represents an ego defense against anxiety, although of course other functions are also served. Some pertinent literature on stealing and clinical material from my own experience with patients in psychoanalysis and psychotherapy will be adduced in illustration.

Stealing as a symptom has been fairly extensively discussed in the literature. The most characteristic psychiatric resumé

is in a paper by Kirkpatrick and Tiebout (6), who approached the subject from the standpoint of the uncontrollable impulse: 'if the desire to take overcomes the inhibitions established, stealing will occur'. Stealing for these authors is a gratification of one of two possible needs—either the attainment of the object that somehow dispels a feeling of deprivation, or the commission of the act itself that is gratifying in some way. This almost implies that the theft may have a defensive function, but they veer from this assertion to say that stealing comes from a need to be punished, or because the stolen object has fetishic value, or as a revenge. In conclusion, they recognize possible multiple causation. This paper appears to represent, by and large, the thinking of 'dynamic psychiatry' on the topic.

In the psychoanalytic literature, an early reference is Abraham's (1) statement that 'so-called kleptomania is often traceable to the fact that a child feels injured or neglected in respect to proofs of love, which we have equated with gifts, or in some way disturbed in the gratification of [his] libido. [He] procures a substitute pleasure for the lost pleasure and at the same time . . . takes revenge on those who have caused . . . the supposed suffering.' Abraham also referred to stealing in women as symbolic of stealing a penis. Fenichel (3) sums up the problem: 'if you won't give it to me, I will take it', and also reports stealing as a perversion accompanied by orgasm. Zulliger (11) reports on an adolescent girl who stole petty cash to buy stockings and underclothes, the theft signifying masturbation and the fresh clothing purification. Glover (5) describes a girl whose stealing represented acquiring the penis of an envied younger brother. All these instances refer to stealing largely as an expression of infantile needs, or primarily as the gratification of id impulses.

Alexander (2) gave the following possible interpretations of stealing: 1, an expression of and reaction to infantile oral receptive attitudes to the mother; 2, a symptom of penis envy in women; 3, a spite reaction; 4, relating to competition; 5, relating to identification with the father; and 6, a reaction to a

sexual urge. He explained the dynamics as overcompensation for a sense of inferiority; an attempt to relieve a sense of guilt; a spite reaction to the mother; and as leading to gratification of dependent needs by way of the imprisonment that follows the commission of the theft. Thus, he too believed that stealing occurs as a gratification of needs, but also stressed its origin from a sense of guilt—to satisfy superego demands. He conceived of stealing as a reaction against, as well as a gratification of, infantile oral receptive attitudes. His interest in the 'fate neurosis' and the superego demands for punishment overshadowed the ego-defensive aspect of stealing. He stated: 'Stealing is a reaction to a strong sense of inferiority, giving a feeling of bravado and toughness. The sense of inferiority is itself a reaction to a strong dependent receptive wish expressed in the attitude of obtaining things without working for them. . . . Stealing is an overcompensatory reaction to an internally felt weakness. The urge to steal is frequent in individuals who have a strong but repressed need for dependence—the infantile wish to be supported by others. Taking by force represents a denial of a wish to be given things. It satisfies the wish for possession without the humiliation caused by the helpless longing for being given everything by others. . . . In the ego a split is created between the wish for the comfortable dependent situation and the ambition for independence—the latter being re-enforced by the environment.'

Anna Freud (4) gave an impetus to the recognition and study of the ego's operations and defenses, and presumably played no small part in the type of thinking that led to the publication by Menaker (7) of a study of twelve boys who stole. She stressed the unconscious content of the symptom as an attempt to retrieve from the mother those things of which she deprived the boy, namely, oral and anal satisfactions. The boys identified themselves with the concept of mother as a phallic woman, and expressed desires to be loved by father as he loves mother. Accordingly, Menaker feels that the symptom is an attempt at bisexual gratification. The libidinal impulses fluctu-

ate between masculine and feminine poles, and superego development and organization are impaired by fixation on the pregenital level with consequent inability to complete successfully an identification with the father figure. The symptom is also a defense against pregenital wishes: 'it is characteristic of the boys who steal that they are insatiable and demand immediate gratification'. Menaker concludes that the boy who steals achieves masculinity by identifying himself with his mother and, because of passive homosexual attitudes, not with the father by whom he wishes to be loved. In his unconscious, he is uncertain whether mother or father has the penis and whether he should be masculine or feminine. In short, the boy who steals has a conflict of identification because of a pregenital fixation on the mother which arose from powerful constitutional oral and anal instincts and a weak ego, usually as the result of the operation of libidinal forces in a psychopathological family setting. Such a family may consist of a phallic, aggressive, castrating mother and a passive, weak father. The stealing represents a reversal of the passive feminine desire to receive into active taking. The idea of actively working for something is not developed. It is as though the only defense against the strong passive-receptive wish is the opposite wish to grab, steal, or tear away.

This particular aspect of the defensive function of stealing is the one I should like to emphasize. Recently, Socarides (9), in a report on a woman who stole, referred to stealing as an expression of a lost sexual satisfaction, the stolen object representing milk, feces, penis, or child, according to the fixation point in libidinal development and the impulse representing the longing for something forbidden, such as masturbation or a perverse act. The essence of his report, however, is a sequel to Rado's (8) formulation of kleptomania as a defense against masochism. Stealing for Rado's patient represented a reparative move against the dissolution of her ego organization, arising from masochistic temptations with their implicit threat of annihilation. Here again the defensive function of stealing and

its role as an ego maneuver aimed at the avoidance of overwhelming anxiety are stressed.

CLINICAL MATERIAL

My interest in the subject of stealing was first stimulated by a patient in psychoanalysis in whom stealing was not the primary problem. When first seen, the patient, a professional man, was twenty-seven years old. Even in his first interview he repeatedly made interpretations about himself and his wife that suggested that his intellectualization and his ambivalence about accepting the role of a patient would present difficulties in his analysis. His stated reasons for seeking analysis were that he was 'functioning at only ten per cent of capacity' and 'did not produce without pressure'. For three years he had had all the data needed with which to finish his Ph.D. thesis but had done nothing with it. He realized that without his degree he could not obtain a good professional position. He felt his negligence about completing his thesis was due in part to his fear of producing an inadequate paper; also, he could remain in a passive, dependent role if he did not obtain a good position. This difficulty began during college and increased as the years went by. He managed by maneuvering people with 'diplomacy, charming personality, and even temper', which, of course, was the way he related to me.

Other complaints were difficulties with his wife, with constant arguments and mutual provocation, and with his parents, particularly his mother; he could not decide whether to assume the masculine role of husband and father or to remain 'mother's boy'.

The patient was the older of two children; his sister was nine years younger. He denied any particular feeling about her birth but he had regularly showered her with gifts, many of which he had stolen. He felt that his mother, an aggressive, ambitious, controlling woman, had castrated his father, always nagging at him to be more of a man and depreciating him. She

early turned to the patient to make up for disappointments in her husband, but at the same time she infantilized him and blocked his efforts at growth and masculinity. The weak, passive father was uncompetitive and content to work in a factory. The patient never felt close to him and joined his mother in deriding him. Nevertheless he was sorry for him because of all the mortification he suffered at the hands of his wife. The stage was set early for the patient's problems in identification: strength and femininity were embodied in the mother, weakness and masculinity in the father. Even more confusing his mother incited him to fierce competition in school; indeed he won many awards in the early grades with compositions written for him by his mother. Despite the constant push to achieve, his mother kept him a baby. She took milk to him at school until he was nine or ten years old and one summer, confined him to the house lest he be exposed to poliomyelitis.

His life was spent as an only child in this setting until the age of nine, when his sister was born. With his peers he felt he did not fit in; he thought of himself as a sissy and was never sure of his role. Faced with the threat of mother's disapproval, he always 'did well' at school.

In his marriage he overtly assumed a passive and nonaggressive role while covertly he seethed with rage at the least slight or deprivation. His choice of a wife seemed to have been determined largely by her being weak, not especially feminine, and not threatening to him as a sexual partner. Prior to his marriage he had had no sexual contacts and his relations with women had been casual and shallow, he playing a passive role in the relationships. His parents objected strongly to his marriage. When he was twenty-four years old, they finally agreed but then became involved in constant discord with his wife. During these arguments the patient would stand by passively, wishing to act somehow but not daring, and secretly rather enjoying his central position.

A dream on the night before his first analytic hour gave some indication of things to come.

I was in a laboratory conducting an experiment. A girl entered and we went out together. I was apprehensive because I was not supposed to be away, but later I returned and nobody was any the wiser.

This dream apparently represented his need to isolate himself from the analysis and indicated also the first entry into the analytic situation of the defense of reversal, of protecting himself against a dependent striving by an aggressive act.

Stealing, which to this patient had no connection with seeking analysis and was not a major problem, had begun following the birth of his sister. He would steal trifles and toys from five-and-ten-cent stores, giving some to his sister and keeping some himself. This stealing appeared to fulfil a variety of functions. First, in the face of intense dependent strivings stirred by his displacement by the younger sister, it served as a denial: 'I don't want what she is getting; on the contrary I enjoy having this rival around so much that I even want to give her things myself'. Thus he both identified with her and denied the identification at the same time. (Anna Freud describes this as an altruistic identification.) At another level he was defending against the anxiety stirred by his strong wish to be given things. By aggressively taking, he was saying in a sense: 'It's not true that I am weak; as a matter of fact I am quite strong, like mother' (identification with the aggressor). Not to be overlooked of course was the dependent gratification in his providing for himself something of which he felt deprived.

The stealing served still another function: after it was discovered by mother, she would punish him. He would then be filled with remorse but relieved of his guilt and temporarily close again to mother of whom he felt deprived. The act thus entailed all of the motivations described in the earlier literature on stealing: dependent id gratification, gratification of superego demands, rivalry with the envied object, and revenge or spite. At the same time it revealed the defensive aspect of the stealing; it protected him from the anxiety mobilized by his dependent strivings.

In later years he took more and more pride in his ability to 'get away with things', considering this a real accomplishment and a demonstration of strength. His petty thievery continued throughout life, even in his current job where he pilfered from the laboratory. He rationalized 'there is so much, it will never be missed', and he used the stolen items to avoid buying things for various home projects, feeling that only a 'weak sucker' would fail to take advantage of the situation. Except for cookies he stole while baby-sitting with his sister, the objects stolen never had particular symbolic significance. It is noteworthy that the stealing was more apt to occur when he felt deprived or humiliated in some way. His great pleasure was to find 'bargains' and 'put one over' on the seller. Humiliation was a recurrent theme in this man's analysis.

The analytic relationship mirrored the situations just described. It was marked by a constant seesaw between overwhelming dependency and his reactive competitiveness, always flavored with dishonesty—getting something for nothing or shirking the work involved—, followed by mounting anxiety. He would then return to passive dependency, feeling small, weak, and humiliated. His greatest fear was of being humiliated by being considered weak and inadequate, which was gradually related to a fear of facing and exposing his intense passive-dependent feminine wishes. Any confrontation with his dependent needs called forth shame and humiliation. The role of patient was for him a humiliation, to keep an appointment on time was a sign of weakness. He had repeatedly to affirm his strength by keeping another person waiting, and this was acted out early in his analysis. A good grade in school was for him not the result of effort but evidence of his having 'put something over', which then was a source of pride. To work on his thesis and acknowledge his wish and need for a Ph.D. was to admit to weakness. The strong thing to do, he felt, was to make it appear he had no need for the degree. Guilt connected with aggressive acts was manifest only when he was caught and faced with disapproval. The recognition of his

strong need for approval again led to feelings of weakness and humiliation. His stealing abated as he came to recognize its aggressive defensive nature, and as he made me the forbidding superego to whom he would have to confess and from whom he would meet disapproval. In time he came to think of the stealing itself as a weakness rather than a strength; in other words, it became ego alien.

After the analysis had been in progress for nearly two years, he reported an interesting, hitherto unmentioned matter: when he went to his own refrigerator to take out food (as he often did when he felt frustrated or rejected), he had the feeling that he was stealing, and he would look around to see if he were being watched. This material confirmed the idea of the defensive nature of his stealing. In the face of a feeling of rejection or frustration, his wish to receive was directly expressed in a wish to eat. Yet the feeling of smallness and shame stirred by the awareness of a dependent need, and the resultant anxiety, were defended against by the fantasy that he was stealing; that is, aggressively grabbing rather than expressing a passive need. It was as if he had a fleeting unconscious fantasy of being fed at the moment before he decided to 'steal' from his own refrigerator. His ego seemed to prefer facing superego anxiety rather than anxiety stirred by infantile id needs.

An illuminating incident occurred in the patient's third year of analysis which illustrated some of the behavior described earlier. One day he arrived a half hour early and asked that I be informed of his presence. He was told that I would see him when I had completed the session with the patient now in my office, who he was aware was a young woman who had begun her analysis some time after he began treatment. As he sat in the waiting room he became increasingly angry. He explained his behavior by the following reasoning: I would like to know he was there so that I could start earlier with him and thus go home earlier. (He had repeatedly denied the fact that another patient followed him.) He saw the previous patient leave and I called him in ten minutes earlier than usual. As soon as he got

into my office he expressed strong disapproval of my secretary for failing to inform me of his presence. Ignoring that he had seen my patient leave, he believed that he had waited fifteen or twenty minutes for me after her departure. When I confronted him with the fact that not over two or three minutes had elapsed between her leaving and his coming in, he was amazed. Analysis revealed his wishful fantasy that I be interrupted while with my previous patient, that I discharge her and immediately take him in so that he would not have to wait. Associations led to his feeling 'left out' as though he did not exist, repeating his childhood feeling when mother was pre-occupied with his little sister. He became aware of the intensity of his own dependent needs and that his early arrival was not for my benefit but for his. His response to this was a feeling of shame, weakness, and humiliation. In the next hour he offered me as a gift a pipe he had just acquired—'a terrific bargain'. A friend had smuggled it into the country. This chain of events is a clear-cut illustration of strong defensiveness mobilized by his awareness of dependent strivings in his relationship with me, followed by an aggressive pseudomascuine act.

Among other such sequences was a dream of stealing which followed an argument with his wife that ended in her refusal to speak to him and his feeling 'out in the cold'. Another dream was of an act of sabotage which came after a humiliating recognition of dependency, stirred by my not giving him a 'special reception' upon his return from a vacation.

Psychic operations similar to this have been observed in at least two other patients who were seen in brief psychotherapy. Basic intense, unresolved dependency strivings were seen in both. One, a potentially successful business man of great ability, repeatedly failed in what could have been very profitable business ventures when, in the face of possible realistically motivated dependency on other men, he felt compelled to steal, with consequent disastrous results. He identified himself with his father, who took more pride in wealth acquired by theft

and subterfuge than in legitimately earned money. Another patient, a physician, damaged his practice by losing patients because he kept no records. The reason for this was to avoid paying income taxes—the evasion of which did more to bolster his faltering concept of himself as a man than could a more adequate income easily achievable by realistic and legitimate means. A colleague has told me of a patient who had great difficulty in accepting his dependency which he attempted to handle by stealing something immediately before coming to each therapeutic hour.

SUMMARY

As suggested by Alexander, Fenichel, and others, there is little doubt that my analytic patient's stealing represented an expression of infantile oral receptive attitudes, a spite reaction, a superego bribe, and a way of re-establishing a lost relationship. However, I should like to emphasize the concept, introduced by Alexander, elaborated by Menaker, and supported by Waelder, that many functions can be served by a single act. In certain cases, particularly where there is a strong need to reject underlying dependent strivings, stealing primarily represents an ego defense against anxiety. As in Menaker's boys, the psychopathological family setting, with weak father and phallically perceived mother, was clearly illustrated in my patient. The attempts to solve the bisexual gratification, the fluctuation between masculine and feminine roles, and confusion about them, were also clearly seen. Further he illustrated the type of superego defect which results from inability to identify successfully with the father and from fixation on the pregenital level. His passive homosexual attitude to the father, his failure to identify with him but his wish to be loved by him, and the attempt to identify with a phallic mother were also demonstrated. The most striking finding, however, was the reversal of a desire to be given into active taking, and the use of symptomatic stealing as a defense against passive pregenital wishes

for immediate gratification. Rather than the ego's operating passively as a mere tool for instinctual and superego expression, all of this implies definite defensive ego action.

REFERENCES

1. ABRAHAM, KARL: *Selected Papers*. London: The Hogarth Press, Ltd., 1942.
2. ALEXANDER, FRANZ and HEALY, WILLIAM: *Roots of Crime*. New York and London: Alfred A. Knopf, 1935.
3. FENICHEL, OTTO: *The Collected Papers, First Series*. New York: W. W. Norton & Co., Inc., 1953.
4. FREUD, ANNA: *The Ego and the Mechanisms of Defense*. New York: International Universities Press, Inc., 1946.
5. GLOVER, EDWARD: *Selected Papers on Psychoanalysis, Vol. II*. New York: International Universities Press, Inc., 1960.
6. KIRKPATRICK, M. and TIEBOUT, H.: *Psychiatric Factors in Stealing*. Amer. J. Orthopsychiatry, II, 1932, p. 114.
7. MENAKER, ESTHER: *Contribution to the Study of the Neurotic Stealing Symptom*. Amer. J. Orthopsychiatry, IX, 1939, pp. 368-376.
8. RADO, SANDOR: *Fear of Castration in Women*. This QUARTERLY, II, 1933, pp. 425-475.
9. SOCARIDES, CHARLES W.: *Pathological Stealing as a Reparative Move of the Ego*. Psa. Review, XLI, 1954.
10. WAELDER, ROBERT: *The Principle of Multiple Function: Observations on Overdetermination*. This QUARTERLY, V, 1936, pp. 45-62.
11. ZULLIGER, HANS: *Eine Diebin aus fehlgeleiteter Gewissenreaktion*. Psyche (Heidelberg), VIII/IX, 1954, pp. 545-558.

The Self and the Object World. By Edith Jacobson. New York: International Universities Press, Inc., 1964. 250 pp.

A. Russell Anderson

To cite this article: A. Russell Anderson (1965) The Self and the Object World. By Edith Jacobson. New York: International Universities Press, Inc., 1964. 250 pp., The Psychoanalytic Quarterly, 34:4, 584-613, DOI: [10.1080/21674086.1965.11926366](https://doi.org/10.1080/21674086.1965.11926366)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926366>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



Article views: 1



View related articles [↗](#)

BOOK REVIEWS

THE SELF AND THE OBJECT WORLD. By Edith Jacobson. New York: International Universities Press, Inc., 1964. 250 pp.

Dr. Jacobson points out the increasing interest that has been centered upon the pathology and nature of identity, for which there is no generally accepted psychoanalytic definition and about which various authors express considerable difference of opinion. The importance of the concept at the present time seems to be due to an increasing need for a better theoretical and clinical understanding of 'borderline' and psychotic patients subject to severe regression leading to a deterioration of object relations and superego and ego functions with 'dissolution of those essential identifications in which the experience of our personal identity is founded'. The author has expanded her earlier paper on *The Self and the Object World* into the present volume.

The book scrutinizes not only the interrelating development of object relations, identifications, and the feeling of identity, but also the interplay between their vicissitudes and the building up of ego and superego. Its thorough and systematic approach is divided into three sections: a study of the Early Infantile, Precædipal and Cædipal phases; Superego Formations and the Period of Latency; and a final section on Puberty and the Period of Adolescence. As we expect of Dr. Jacobson, she thoroughly discusses all the interrelating factors of psychic development and attempts to integrate them at each level of development, and carefully assesses controversial opinions. Certain sections of the book demand careful re-reading because of their complexity, while many most enlightening parts bring out important concepts with a free and ready exposition.

Dr. Jacobson carefully reviews the concepts of primary and secondary narcissism and masochism as they have been accommodated to an increasingly clear understanding of the development of the ego, the self, and the self and object representations within the ego. The self is seen as an organized entity including the body as well as the ego and its self-representations and the id and superego. The author points out that 'primary narcissism' could very well apply to what she speaks of as the primal physiological undifferentiated self in the infant, in whom is present a diffuse and undiffer-

entiated energy which can be discharged outwardly, or in sleep inwardly in the form of silent physiological processes. Thus primary narcissism is an early state without energetic or structural differentiation. This theoretical possibility means that regression later in life includes both structural and energetic regression, and that in clinical states with impoverished libido and excessive aggression we may be dealing with a partial retransformation into undifferentiated energy.

By identity formation the author understands 'a process that builds up the ability to preserve the whole psychic organization as a highly individualized but coherent entity which has direction and continuity at any stage of human development' and 'depends upon the effectiveness of synthesizing, organizing functions of the ego. Normal identity formations appear to rest on the ability to develop and achieve an optimal secondary autonomy of superego and ego.' Jacobson questions the concept of Kurt Eissler, which implies a new structure arising at adolescence. In a similar way Erikson seems to place the focus entirely upon pre-adolescence and adolescence and 'disconnects identity from identifications, and both from object relations, and object relations from those conflicts around which the emotional turmoil and disturbances' of adolescence are centered as a result of psychobiological changes. Jacobson believes that Lichtenstein, who sees identity as a function needed for escape from symbiosis, oversimplifies the problem, leaving out the important roles of aggression and capacity for adaptation to the environment. Throughout it is repeatedly stressed that one must trace development through all the stages of childhood as well as adolescence to gain criteria for normal identity.

Dr. Jacobson then considers the early undifferentiated months in which child and mother are empathically attuned to each other. In a full discussion of infantile orality it is pointed out that memory traces left by any kind of libidinal stimulation or gratification in the past will tend to cluster around the original visual-oral experience with the breast which is equated with mother. During this early period crawling, standing, walking, and talking are stimulated by the pleasure-giving attentions of the mother and lead to functional activities. The first real differentiation arises around the third month, but for some time there is frequent refusion which in itself is probably the earliest type of identification. This is followed

by identification on the basis of imitation which is at first of magical 'as if' type but later develops into imitation as a more individuated independent being. Some sense of identity arises at about two and a half when with the acquisition of the ability to walk and talk there develops a sense of 'I am I'. The perception of being like the object is important in the early process of differentiation and formation of identifications, but it is very probable that the awareness of differences from the objects which may lead to envy and rivalry are of even greater importance. Dr. Jacobson stresses the fact that the selective identification of the ego and superego occur together with continued object relationships and tend to neutralize aggression rather than release it. The part played by aggression as an essential component in development of the self and identity is consistently stressed throughout the book.

In the section on the development of sexual identity there is careful consideration of the importance of the whole body and mental self as well as of the genitals themselves. Dr. Jacobson notes that even in overt homosexuals of both sexes identifications with a loving, dominant, phallic mother usually lead to a stable identity, while identifications with a suffering, castrated mother lead to serious problems of identity. With establishment of sexual identity much energy is released and becomes available for ego development and interests. The essential purpose of ego functions and actions is always the pursuit of object-directed activity and presupposes an enduring libidinal cathexis of both object and self-representations. The same is true of affects and feelings.

One of the most rewarding parts of the book is the section dealing with superego formation and the period of latency. Dr. Jacobson believes that the superego, including the ego ideal, is in part determined by innate factors and that true superego autonomy implies freedom from pressures by its early precursors. Although the foundations are laid down in the first years of life, a definite system arises only with the passing of the oedipal conflicts. Precursors of the superego develop in the preoedipal stages as isolated reaction-formations. The most important of these precursors center around the reaction-formations in the anal period which result in turning of aggression from the object toward the self, with development of disgust and shame as well as new aims and efforts. During the early oral period values are shaped around pleasure and unpleasure, but

at this later period power and omnipotence in the parental figures displace this earlier value system. The dangerous sexual and aggressive tendencies toward the parents and their general devaluation leads to reactively intensified opposite strivings, with admiration and overestimation of the parents. The idealized self-images and object-images which begin to arise protect the object relationships and heal the narcissistic wounds. This is clearly seen in the boy, whose greater hostility to father leads to greater idealization of him than of mother.

With the renunciation of the primitive libidinal and aggressive striving toward the parents and the availability of this libidinal and aggressive energy, it becomes possible for the superego components to be integrated and superego identifications to proceed with creation of a firm moral code and displacement of conflicts to an inner mental stage. The author believes that not only the renunciation of the incestuous castration and death wishes toward the parents but also the increasing identification with the reactive idealized parents makes it possible to develop this new system. Of equal importance is the rapid ego development at this time, with an advance from a concretistic self and object imagery to conceptual, abstract, and discriminating understanding of the parents' personalities, of their characteristics, their superego standards, their ideas, opinions, attitudes, and wishes. As an autonomous central system for regulation of libidinal and aggressive cathexis of the self-representations, independent of the outside world, the superego is less concerned with external success or failure than with inner harmony or discordance between its moral codes and ego manifestations. This also leads to the maintenance of a sufficiently high level of self-esteem with limited vacillations. I would note, however, that the superego-ego ideal as a functional system does not have the same simple basis of biological development and availability for observation and study as the id or ego functions. We have a heavy investment in this least well-defined structure, because within its possibilities are contained much of our hope for man's existing with continuity as a creature with consistent values and self-directed, controlled behavior. We must be careful and tentative in our formulations, as is Dr. Jacobson.

In the chapter on developmental trends in the latency period there is an excellent study of shame, inferiority feelings, and guilt,

with a delineation of their origin and their influence upon the final formation of identity and its possible pathology. The author accentuates the fact that guilt is always referable to hostility to other people. Feelings of shame and inferiority are related to narcissistic exhibitionistic trends which imply feelings of contempt for weakness. Predominance of shame and inferiority are usually indicative of a narcissistic disturbance, which will lead to problems of identity.

The last section of the book deals with the problems and developments during puberty and adolescence and their effect upon post-adolescent identity formation and personality development. The author states that the adolescent 'in climbing up the tortuous ladder to adulthood, seems to experience at every new step anxiety, confusion, disorganization and a return to infantile positions, followed by propulsion and reorganization at more advanced and more adult levels'. During adolescence the struggle for maturity and liberation from the family bonds finds important support from remarkable modifications and new structures within the ego and superego. The rapid growth and change necessitates continuous readjustment in self-representations. There is gradual development of a view of the world that includes not only moral and ethical ideals but also opinions about nature, culture, social factors and sexual, religious, and general intellectual problems. In post-adolescent identity formations and development of personality, ego development is increasingly based on self-critical judgments and autonomous trends of the ego, which in conjunction with the earlier identifications and development bring about later identity formation. Jacobson emphasizes the observation that intersystemic conflicts as seen in psychoneuroses and depressive states do not usually affect identity except in the sexual sphere. Intrasystemic conflicts, which result from conflicting attitudes of parents or divergent attitudes in the social group, tend to lead to problems of identity. The author discusses in detail post-adolescent difficulties in object relationships, identifications, and identity formation, and offers clinical illustrations. The effect of maternal and paternal attitudes which are essentially narcissistic, or in which a symbiotic union of child with mother or both parents has been steadily maintained by the parents from birth to adulthood, is carefully delineated. This section of the book is rich in clinical material and illustrates the

pathological developments at various stages and their effect on identity.

In conclusion, this volume, with its wealth of information and careful construction of the various periods of development which lead to and affect formation of identity, is well organized and the important trends and factors in development are consistently developed throughout the book. I believe that no one deeply interested in psychoanalysis can afford to miss reading and re-reading this contribution, which I have found of the utmost value in my own thinking and understanding.

A. RUSSELL ANDERSON (BALTIMORE)

INTRODUCTION TO THE WORK OF MELANIE KLEIN. By Hanna Segal, M.D. New York: Basic Books Publishing Co., Inc., 1964. 118 pp.

In this concise volume Dr. Segal has outlined the basic theoretical assumptions which in her opinion determine the clinical orientation of contemporary Kleinian psychoanalysis. For readers essentially unfamiliar with this point of view and its implications, her presentation, which is clearly written and illustrated by vivid clinical examples, may usefully serve as an introduction. The more difficult and obscure formulations of Melanie Klein herself, and many of the recent significant contributions of her students, are relatively neglected in the curricula of most American Institutes. Kleinian orientation is, however, currently determining the training and practice of a significant proportion of Latin-American psychoanalysts. It is, therefore, to be hoped that Dr. Segal's introduction is being widely read in the United States.

The value of this presentation as an elementary text is enhanced rather than diminished by its somewhat dogmatic simplicity. These same qualities and the related failure to discuss a number of controversial issues may, however, prove disappointing to psychoanalysts who are well versed in this very difficult approach to both theory and practice. It was understandable that Melanie Klein herself made no attempt in her later years to delineate certain areas of convergence and overlap between her own contributions and those approaching early stages of psychological development from different points of view, using different tools of investigation. The same

allowances, however, cannot be extended to younger analysts who are utilizing her pioneer work as the basis on which further developments may follow. Therefore, in so far as Dr. Segal follows in Mrs. Klein's footsteps without raising questions, her introduction does not further increased communication. Moreover, her tendency to cite fragmented quotations from certain of Freud's papers, making no reference whatever to later contributions, gives her presentation an old-fashioned, somewhat anachronistic appearance. Gratitude even according to the Kleinian definition should not demand uncritical or indiscriminating loyalty. Progress and growth require adaptive and selective integration of new knowledge with old.

In reviewing this book it is clearly essential to make a differentiation between its value as an accurate outline of Melanie Klein's definitive orientation and an assessment of the current status of this school of thought in respect to theory and practice. Apart from her reference to Bion's contributions, Dr. Segal has, I believe, epitomized the position that Kleinian psychoanalysis had reached at the time of its founder's death. It is highly unlikely that this position can remain static. The growth and development of her former students during this period of time will inevitably determine the direction of future contributions. Whether and how far this will lead toward integration with or further separation from other schools of analytic orientation will depend on many factors. Unless, however, the more gifted of her students continually review and revise her original and provocative hypotheses, mutual understanding will not be increased.

In this context it is important to recognize that many psychoanalysts who continue to appreciate and to utilize Melanie Klein's illumination of the importance of early object relations regard some of her other hypotheses with considerable reserve. For example, her concept of the death instinct has always been subject to considerable controversy and discussion. The problems relevant to her reconstructions of early fantasy life and its manifest œdipal content will be familiar to most readers. As already indicated in my review of *Envy and Gratitude*,¹ there was, finally, much to suggest that in her later years Melanie Klein was moving away from, rather than toward, the main stream of psychoanalytic thinking. Her concepts of envy, of early splitting, and of projective identification re-

¹ This *QUARTERLY*, XXVII, 1958, pp. 409-412.

main the subject of considerable controversy. Dr. Segal's presentation is didactic and explanatory rather than reflective and critical. Each of Melanie Klein's basic theoretical assumptions is presented with clarity and lack of compromise. This may increase our awareness of important differences of orientation. Conversely, Dr. Segal reveals, to this reviewer at least, the dubious grounds on which certain of these premises are based.

The Kleinian school of thought, like that of another British psychoanalyst, Fairbairn, assumes for example that the ego is capable from birth of experiencing signal anxiety, instituting defenses, and forming object relations. No objective evidence is given to support these very hypothetical assumptions. Dr. Segal, moreover, answers the suggestion that certain fantasies 'arise later and are retrospectively projected into babyhood' by a summary dismissal. 'This', she says, 'is surely an unnecessary additional hypothesis'. Dr. Segal assumes the existence of the ego at birth; yet she cites in support of the influence of object relations on ego formation a quotation from *The Ego and the Id*: 'The ego is a precipitate of abandoned object cathexis'. If the latter statement is true, how can an ego be assumed to exist at birth before object relations have been initiated?

This controversial hypothesis of an ego that is operative from birth constitutes the essential foundation stone on which, in both English schools, concepts of cleavage or splitting have been constructed. A hypothetically unitary ego turning toward a single object, the breast, is assumed to exist from the moment of birth. Unlike Fairbairn, however, Melanie Klein and her school also propose an innate dualistic instinctual endowment. The infantile ego is thus immediately confronted with the conflict between the life and the death instincts. The unitary ego cannot survive this onslaught. It thus 'splits itself and projects that part of itself which contains the death instinct onto the original external object, the breast'. Not only during the early months of life, but to differing degrees at all times, the ego must defend itself against the anxiety aroused by its own death instinct by projective identification and splitting of both ego and object.

No reference is made in Dr. Segal's presentation to long-standing and continuing differences of opinion in respect to Freud's concept of the death instinct and its relation to aggression. How and in

what manner a part of the ego can contain the death instinct and at the same time be projected into an external object is not conceptualized. Dr. Segal's conviction that it is 'simpler' to assume an originally unitary ego which is actively sundered than to regard positive and negative experiences as originally separate can only be understood on the assumption that Kleinian instinct theory and the related concept of anxiety remain unquestioned and axiomatic.

Although Dr. Segal notes that the infantile ego is largely unorganized, the lack of organization she implies is not well defined. This infantile ego is clearly endowed with enough perceptual discrimination to be capable of envy, which is conceived as operative from birth. This concept, like that of a unitary ego capable of object investment, implies some degree of differentiation of self-object during a period of life when the perceptual apparatus is not fully developed. Such concepts, although they facilitate Kleinian reconstructions, will need considerable validation before they can seriously influence psychoanalysis as a whole.

During her own lifetime Melanie Klein worked in the direction of classical psychoanalysis, namely, from the more to the less mature periods of psychic development. Her concept of the depressive position and the impact of early object relations was proposed before the more controversial hypotheses relevant to the paranoid position and projective identification had been clearly delineated. Dr. Segal, in presenting Kleinian concepts in terms of the development of the infant from birth, is working in the reverse direction. It is therefore noteworthy that her thesis becomes more understandable and more compatible with the work of other analysts as she approaches the depressive position. Although Kleinian timing and the hypothesis of early oedipal fantasy remain questionable, many of Dr. Segal's statements are compatible with propositions put forward by more traditional analysts.

Good real experiences, for example, appear to be as important for optimal development in Dr. Segal's presentation as they are in approaches of very different orientation. The capacity to perceive and to identify with a predominantly good object is also regarded as an essential prerequisite to optimal development. Dr. Segal's discussion of differentiation of self and object and mastery of the depressive position thus points to the area in which Kleinian psychoanalysis comes closest to the work of other contemporary analysts.

The Kleinian approach, however, involves significant differences in respect to emphasis. These differences not only concern theoretical reconstruction but also determine clinical technique.

The more traditional analyst does not regard the dichotomy of good and bad experience which precedes differentiation of self-object as the result of active intrapsychic defenses. He conceptualizes rather a psychic apparatus which has not yet achieved the capacity to integrate or to internalize various perceptions. The major areas of mental life re-experienced during traditional psychoanalysis concern the periods which follow rather than precede this crucial differentiation. Dr. Segal and the Kleinian school attribute, in contrast, the separation itself to active defensive efforts which are gradually but never fully relinquished. Mastery of the depressive position is thus regarded as the basic achievement which will largely determine future mental health. Projective identification, splitting, and envy inevitably re-emerge in transference analysis and, indeed, these primitive defenses often appear to overshadow the later stages of the infantile neurosis. The fact that Dr. Segal's *Introduction to the Work of Melanie Klein* appears to conclude at a period of life before the infant has learned how to walk indicates the gulf which still separates this work from the rest of analytic theory and technique.

ELIZABETH R. ZETZEL (CAMBRIDGE, MASS.)

CHILDREN TELL STORIES. AN ANALYSIS OF FANTASY. By Evelyn Goodenough Pitcher, Ph.D. and Ernst Frelinger, Ph.D. New York: International Universities Press, Inc., 1963. 256 pp.

The importance of fantasy in the course of normal development, and in the causation of neurosis, has been emphasized from the earliest days of psychoanalytic psychology. Some workers have attempted to define different types of fantasies, their development and course, others to determine its nature as a form of primitive thinking. All who work in this field agree that there are certain universal fantasies which enter into and affect normal mental development. Often the overt form of a fantasy has behind it a latent form (to borrow the terminology of dream psychology), which can be discovered only by analyzing the associations of the person who has the fantasy.

The authors of this book, while recognizing the importance of this last statement, have undertaken to determine what might be learned from the manifest content of stories told to them by children ranging from two to five years of age. They analyze the form and content of the stories, although aware that they are unable to obtain the related associations which would confirm their speculations about the meaning of the fantasies. They bring together a fascinating collection of stories by a number of children of different ages. The increasing complexity of the stories shows impressively how the ego apparatus matures during these formative years.

The authors theorize that a fantasy is mobilized by drives (or combinations of drives) that determine both aim and object of the fantasy. Formation of fantasies is therefore modified by the forces that tend to control, channel, or otherwise modify the drives that underlie them. Analysis of three hundred sixty stories told by children shows how the fantasies and the way they are told are determined by the child's level of development and by his experience of nature, his culture, the people he knows, his own personality, and biological factors such as differences in sex. Referring to the psychosocial modalities described by Erikson, the authors demonstrate the presence of specific 'issues' at different stages of development, as reflected in the changing forms of the stories at different ages.

All in all, Drs. Pitcher and Frelinger have provided material for much thought. Since they have recognized both the limitations of working with the manifest form and the possible alteration in the fantasy resulting from the presence of the observer and recorder in the experimental situation, they display a well-developed scientific methodology. Another implied limitation might be explicitly stated. Each of the three hundred sixty stories is from a different child; it would be informative to trace the changing form of 'stories' given by the same child over a period of several years, say from ages two to five. In this way, one might find that the same basic fantasies are at work in a given child and it would be possible to determine more clearly the role of development of various ego functions, including the defensive structures. Here may be another undertaking for these authors who have worked so carefully in what they have done.

EDWARD D. JOSEPH (NEW YORK)

THE PSYCHOANALYTIC STUDY OF THE CHILD, VOLS. XVII and XVIII. New York: International Universities Press, Inc., 1962, 1963. 493 pp.; 661 pp.

Volumes XVII and XVIII of *The Psychoanalytic Study of the Child* offer forty-three papers on subjects collected under the headings of contributions to psychoanalytic theory, to normal and pathological child development, to clinical and applied psychoanalysis. The policy of publishing clinical and theoretical material from both child and adult analyses and from practice and research has proved a fruitful one. Psychoanalysis is essentially a genetic developmental psychology. Any psychoanalyst may find the data and implications of psychoanalytic treatment and research studies of children valuable to his understanding of normality and of psychopathology; this annual demonstrates the reciprocal contributions which general theory building and adult psychoanalyses make to the continuing refinement of our knowledge of children as well as of adults. Helene Deutsch has spoken recently of the warm interest all analysts felt in the early child work in Vienna; this annual has played an important role in closing the gap built up in the intervening years between child analysis and adult analysis.

A reviewer confronted with eleven hundred odd pages from two volumes of an annual holding a unique position in psychoanalytic literature will vary his comments according to his impression of those papers he believes of general interest to psychoanalysts and of others which hold a particular significance for him. While each of these forty-three papers is worthy of perusal, they vary in intent, format, and range.

The theoretical papers of Volume XVII reflect the current interest in superego concepts, four of six in the section concerning this topic. Hartmann and Loewenstein in *Notes on the Superego* recognize this trend and place their formulations regarding superego and ego ideal within the context of the more differentiated knowledge of the development and functions of the ego available to us today. They disagree with the tendency to ascribe to the superego all that opposes the child's instinctual drives from within, before the superego is fully formed. They agree that such phenomena and functions may be connected genetically with the system superego but

emphasize that the distinction between function and genesis is an invaluable one to maintain.

In this tightly reasoned and wide ranging discussion, Hartmann and Loewenstein cover comprehensively theoretical considerations proposed by Freud and others, clinical findings, research data, and concepts from other fields. They attain a clear, valuable statement of their views of the development, structure, and function of the superego; in the course of doing so they propose a number of fascinating questions for further investigation in case study or formal research.

Jeanne Lampl-de Groot in a paper entitled *Ego Ideal and Superego* presents a lucid case for a somewhat different point of view from that of Hartmann and Loewenstein. She believes that the ego ideal, essentially an agency of wish-fulfilment, and the restricting superego, necessary for living in a given community, originate alongside each other as primitive forerunners in infancy. Special ego areas with their own functions, they are at the onset of the latency period both centered upon the parental images. They act together in harmonious development guiding the ego in its achievements. In pathological development, fixations on and regressions to earlier developmental stages give evidence of the separate origins of superego and ego ideal.

Sandler and his colleagues at the Hampstead Clinic present their current schema for the classification of superego material in the Hampstead Index. The six main headings with definitions and criteria for classification along with illustrative examples are given: I, Characteristics; II, Sources; III, Contents activating the Superego System; IV, Ego Responses; V, Regulation of the Feeling of Well Being; and VI, Extent of Organization and Structuralization.

The following paper, *The Concept of the Representational World* by Sandler and Rosenblatt, continues the examination of traditional and differing concepts of the formation and development of the superego. They point out that the task of classifying actual child analytic data in terms of the classical model of the superego uncovered many confusions and inexactitudes. As the Hampstead group constructed a theoretical model which contained their material satisfactorily and did no violence to Freud's statements on superego and ego ideal, they found that their concepts of the child's subjective world occupied a central role in their consid-

erations. This paper deals with the implications of their understanding of the representational world. It is far too complex an argument to be summarized briefly; this contribution, the result of a progressive interaction of theory and observation, deserves the careful study of clinicians and theoreticians. Its final test, as the authors observe, must be its wide applicability to clinical observations.

Kurt Eissler in his essay *On the Metapsychology of the Preconscious* takes issue with those analysts who see no need for topographical hypotheses or find them incompatible with the structural concepts. He believes that the full consequences of Freud's introduction of the concepts of ego, id, and superego have not been worked out and notes that Freud himself indicated the need for retaining the terms conscious, preconscious, and unconscious as designating the psychic qualities of the mind. Eissler deals with the question of the pathways of communication among the three provinces of the personality, indicating that the present topographical division of the ego, superego, and id does not account for this fundamental function.

The section on child development is introduced by Anna Freud's *Assessment of Childhood Disturbance*. Miss Freud outlines briefly the difficulties in diagnosis of children's emotional disorders and the reasons for the ineffectiveness of different attempts in this direction. She describes the rationale for the Hampstead Diagnostic Profile, which is initiated by the referral symptoms of the child, his description, his family background and history, and an enumeration of the possibly significant environmental influences. From these, the Profile proceeds to the internal picture of the child which contains information about the structure of his personality; the dynamic interplay within the structure; some economic factors concerning drive activity and the relative strength of id and ego forces; his adaptation to reality; and some genetic assumptions.

The task of assessment which the diagnostic team begins must be continued by the child analyst from the stage of initial diagnostic study into and through the stage of therapy. This comprehensive metapsychological picture of the child provides far more than guidelines to the immediate plans for therapeutic management: it can contribute to our knowledge of earlier stages of functional disorders, distinguish relatively transient from permanent pathology, and in general increase insight into the developmental processes

themselves. The Hampstead Diagnostic Profile has already made a deep impression upon students of child development and child analysis in several countries: further elaborations in the psychoanalytic literature are eagerly awaited.

Decline and Recovery in the Life of a Three Year Old is an unfinished essay of Ernst Kris. It concerns a little girl who had recovered from physical retardation and developmental arrest following upon experiences of pronounced emotional deprivation during her first year of life. The data used came from the Yale Child Study project which Kris describes in some detail to illustrate in what respects they varied from the usual material available to psychoanalysts. His note on the significance of the characteristics and procedures of this research project in longitudinal child development is in itself a valuable commentary upon the methodology and, further, an indicator of the type of contributions to psychoanalytic understanding such a research study can make.

The essay opens with a vignette of the lively and contented three-year-old in the play-yard as her mother comes to take Anne home. The question to be explored is stated: how to account for her earlier development, decline, and subsequent recovery? The material from past observations is described according to the following scheme: first, some biographical information about the parents, next, data regarding the pregnancy, delivery, and early child care, and third, Anne's history. The essay describes the period of the little girl's decline during her first year, presents a discussion of the deficit and provocation in the mother-child contact, and ends with a section on Anne's anxiety and despair.

In the discussion and in the footnotes, a number of suggestions, comments, and hypotheses are presented which have already stimulated other studies by members of the Yale group. Although there are no indications of how Kris planned to finish the essay, whether he intended to pursue one or another of the various possibilities he had mentioned, or, indeed, to amend what was already written, the essay is for many reasons a peculiarly satisfying paper. It is an artistic creation in which the little girl and her family are caught in a vivid portraiture conveying past, present, and future elements as case reports rarely succeed in doing. It is a scientific presentation which illustrates the quality of understanding of the individual child in his family surroundings attainable in a psychoanalytic study of

child development. It illuminates the nature of the parent-child interplay and demonstrates the intricate and delicate forces at work in the interactions of the infant with the emotional climate of his home, his influences upon his parents, and theirs upon his development. We are grateful to the editors for their decision to publish the essay as Kris left it among his papers.

Seymour Lustman's paper, *Defense, Symptom and Character*, utilizes the data of a child analysis to trace the vicissitudes of two sharply delineated behavioral patterns, a symptom of cleansing and an attitude of 'bravery'. He discusses the problems of research design in studying such an issue as character and symptom formation and points to the great advantages of child analysis as a research tool in such an investigation. Lustman illustrates the intimate relationship between defense, symptomatic act, and character formation in his young patient whom he saw in analysis from four to eight years of age. He believes that a basic character structure consonant with it underlies all symptom formation. A developmental direction may determine the predominance of one over the other. The differences in his patient seemed related to the degree of internalization of parental ego ideal and superego demands and conflicts, the former being more likely to become elements of the ego while the latter are more peripheral to the ego core.

The section on clinical contributions is opened by a paper on *Patterns of Aggression in School Phobia*, one of a series of publications by Coolidge, and others from the Judge Baker research studies. The authors examine the difficulties of the mothers in dealing with their own aggression and the repercussions upon the attitudes toward the child. The findings of the six-year study indicate that specific events in the lives both of the child and of the mother intensify the precariousness of their equilibrium just prior to the onset of the acute phobic disturbance. Further investigation reveals the presence of a mutual chronic separation anxiety which may be re-enforced by the attitudes of the father or other family members.

Marjorie Sprince reports from the Hampstead Clinic upon the simultaneous analyses of an adolescent girl and her mother, a companion piece to Levy's paper on the mother, appearing in this annual (XV, 1960). In this research study, the nature and implications of the preoedipal tie between the mother and daughter could be

carefully investigated. Although the girl moved from her libidinal investment in the original object and heterosexuality was finally established, the forward movement appeared labile and dependent upon specific factors. The relationship with the man repeated many aspects of the infantile ties to mother and to father and the man had to become part of the actual family circle. Particularly valuable is the discussion of Debby's proneness to regression and the various factors which contributed to the continuing ego weakness. The limitations of psychoanalysis in reversing ego damage in certain instances are thoughtfully considered.

The contents of Volume XVIII represent from several points of view continuations of the predominate themes of Volume XVII. The pursuit of clarification and refinement of different aspects of the structural theory is continued in two papers by Leo Rangell, *The Scope of Intrapsychic Conflict* and *Structural Problems in Intrapsychic Conflict*. In the first, Rangell elucidates the complexity of the procession of intrapsychic events in which conflict plays a part, illustrating that it comprises a crucial link in the chain of events but is not the whole process. While he painstakingly separates each discrete succession of psychic phenomena, he concludes that they may take but a moment to exert their effects, or conversely may lead to a prolonged almost static behavioral process; he offers clinical vignettes to illustrate the variability and range familiar in psychoanalytic practice.

In his second paper, Rangell surveys the range of inter- and intrasystemic loci for intrapsychic conflicts. He concludes that a central and major ego function not identical with its organizing or synthetic functions is the decision-making operation whereby choices between conflicting elements both outside and inside its own borders and decisions for action are made. Each activity ranges over a spectrum from conflictful spheres to more neutralized, and relatively conflict-free, problem-solving activity. Rangell believes that the superego is a locus for intrasystemic conflicts but relatively less so and in only a secondary way as compared with the ego. Whereas the ego can achieve considerable autonomy from conflicts, drives, and even from the superego, the superego can do so to a much less degree. While both the superego and the id can initiate conflict, the ego largely suffers it.

Sandler and colleagues from the Hampstead Clinic continue their

reformulations necessitated by the practical task of indexing child analytic material. The papers on a Model of Superego Functioning and of the Representational World preceded this critical survey of theories of The Ego Ideal and the Ideal Self. The authors trace Freud's varying views of the ego ideal and outline more recent theoretical propositions, pointing out areas of confusion and disagreement which complicated the attempts to index clinical material under the heading 'ego ideal'. They found that in children of varying ages, they could not differentiate an ego ideal system or structure as functionally distinct from the ego and the superego. Starting from their views of the superego in terms of what they have called the representational view of the world, the authors develop their concepts of the ideal self to which the idea of the shape of a representation of self or object is particularly relevant. This is the particular form or character assumed by that representation at any given moment, determined by the pressures of the id, the requirements of the external world, and the standards and demands of the introjects. The special economic gain through constructing an ideal self on the basis of identification is emphasized. One of the shapes which the self-representation can assume is what we can call the ideal self, that is, that which at any moment is a desired shape of the self, the one which would yield the greatest degree of well being for the child, the highest degree of narcissistic gratification, and the minimal quantity of aggressive discharge on the self.

Seymour Lustman's contribution, *Some Issues in Contemporary Psychoanalytic Research*, is an important appraisal of the current atmosphere of research in the United States and of the implications this climate has for research in psychoanalysis. He demonstrates that the nature of psychoanalysis makes it impossible to compress the psychoanalytic field into the mold of a nineteenth century concept of physics and the physical experiment. Yet the pressures from without and within psychoanalytic circles to attempt research methods based upon the latter concepts are strong: one consequence is the obligation for analysis to maintain a critical self-inventory of its methods. Lustman feels keenly that for its development as a research method, psychoanalysis must develop internally and toward this direction the logical step would be for institutes to set up and finance their own full-time research sections. The other alternative, which is not excluded, is the participation of analysts in multi-

specialist projects in universities if these arise from a spontaneous wish to collaborate in a suitable intellectual climate. Lustman's thoughtful warning essay contains comments upon the role of the university and of departments of psychiatry at a time during which something very important may be lost if the community of free scholars and the communication so made possible within the university, are altered. He makes it clear that psychoanalysis has a vital stake in these developments and analysts need to participate in the thoughtful re-evaluation he regards as crucial.

The section on Normal and Pathological Development similarly continues themes pursued in the previous volume. Anna Freud describes in *The Concept of Development Lines* assumptions underlying the Diagnostic Profile and enlarges the scope of her view presented in New York in her 1960 lectures. Developmental lines are historical realities, conveying a convincing picture of an individual child's personal achievements or of his failures in personality development. They include the basic interactions between id and ego and their various developmental levels, and also age-related sequences of them, which in importance, frequency, and regularity are comparable to the maturational sequences of libidinal stages and of the gradual unfolding of the ego functions. Whatever level has been reached by a child in any one respect represents the result of interaction between drive and ego-superego development and their reaction to environmental influences.

Among the seven other papers in this section, I shall refer to two which contribute particularly to psychoanalytic understanding of child development. The first, by Sibylle Escalona, is a report of her detailed analysis of data from six-month-old infants who were subjects of an earlier study, first reported in 1952. In *Patterns of Infantile Experience and the Developmental Process*, Escalona concentrates upon the central theme that very different actions on the part of mothers may have very similar impact upon the child's experience as reflected in behavior, and conversely, that similar or identical external stimulation may have varying and opposite consequences in the direction in which they alter behavior. Two categories of variables, environmental and organismic, converge and reciprocally interact in shaping the moment-by-moment and year-by-year experience of the growing child. The assumption of a reciprocal relationship among influences which in their totality make up

the child's experience should make unnecessary the distinction between maturation and learning when these terms are applied to aspects of the developmental process.

Margaret Mahler in *Thoughts about Development and Individuation* brings into the context of her well-known concept of the separation-individuation phase data from her present research studies of normal babies. From examples of specific infants, Mahler seeks to show how the libidinal availability of the mother facilitates the optimal unfolding of innate potentialities. This factor contributes to or subtracts from harmonious synthesis of the autonomous functions in the service of the ego, the neutralization of drives, and sublimation by activating or temporarily hindering the flux of developmental energy. Mahler is impressed by the abundance of developmental energy available at the period of individuation to an extent seen at no other period of life with the exception perhaps of adolescence.

Among the nine clinical contributions are Dorothy Burlingham's *Study of Identical Twins*, Eissler's *Notes on the Psychoanalytic Concept of Cure*, Liselotte Frankl's *Self-Preservation and the Development of Accident Proneness in Children and Adolescents*, and Janice Norton's *Treatment of a Dying Patient*. Burlingham's paper, written with Arthur Barron, compares the analyses of twin boys first observed in early childhood and brings reports of their adult status. Their life vicissitudes as individuals and as twins both before and after their separation in mid-adolescence are described. The very considerable amount of data is organized under a number of headings, one of the most interesting being the boys' anti-social development. The intricate factor of twinship is retained as a central focus, a valuable continuation of the themes found in Mrs. Burlingham's 1952 book.

Janice Norton's *Treatment of a Dying Patient* is an unusual, sensitive, and provocative account of her therapeutic experience during the last three and one-half months of life of a gallant and articulate woman. Because all the figures who ordinarily listen to dying patients had already relinquished their roles, Norton was faced with the choice of allowing this patient to die a lonely and miserable death or of trying to relieve her suffering as much as she could. The report was written because of the rarity of such cases in the literature and because of its theoretical and therapeutic implications.

Norton suggests that, following Eissler's formulation of 'the gift situation' to the dying patient, the really crucial gift the therapist can give is that of himself as an available object. Norton believes she helped defend this patient against object loss by facilitating the development of a regressive relationship which precluded object loss. She illustrates by the delicacy, courage, and awareness of her own response that an essential prerequisite of therapy with the dying is the conscious acceptance of the countertransference reactions. The acceptance and use of these inevitable responses can be most therapeutic for the patient.

EVEOLEEN N. REXFORD (BOSTON)

RECENT RESEARCH ON SCHIZOPHRENIA. Edited by Philip Solomon, M.D. and Bernard C. Glueck, Jr., M.D. Washington, D. C.: American Psychiatric Association, 1964. 205 pp.

This research report of the American Psychiatric Association bypasses matters of definition and gives approximately equal space to the psychosocial and organic approaches to schizophrenia. Each presentation is followed by a discussion. The discussions lend great value to the volume; in many instances the discussants add a conservative view to balance the overenthusiasm of the investigators.

Eldred and his co-workers most interestingly demonstrate the barrier that exists between staff and patient, the staff speaking mainly to staff. Several papers about milieu therapy are equally interesting. The presentation by Herbert Rosenfeld offers an approach to the psychotherapy of schizophrenics based largely on Kleinian psychoanalysis. The discussion by Zetzel compares the Kleinian theory to current psychoanalytic thinking in this country and she finds areas of increasing convergence.

The second half of the book, devoted to the somatic aspects of schizophrenia, has a less constrained quality than the half devoted to psychosocial aspects of the illness. Kallman amasses evidence that there is a significant genetic factor in schizophrenia but his discussant is not equally convinced. Klerman and his co-workers are convinced of the efficacy of phenothiazine drug treatment, but again their discussant was not equally convinced. Friedhoff reports an abnormal substance in the urine of schizophrenics but his discussant

raises a question of possible error. Heath suggests that schizophrenia represents an inherited biological error and he isolates a substance from the blood of schizophrenic patients. The discussants are 'startled' by the findings and ask how typical are the sample records and of what are they typical.

The volume interestingly accomplished its purpose.

MORRIS W. BRODY (PHILADELPHIA)

THE TRANSITION FROM CHILDHOOD TO ADOLESCENCE. By Yehudi A. Cohen. Chicago: Aldine Publishing Co., 1964. 254 pp.

This book is of interest to psychoanalysts who wish to supplement their knowledge of children with data from societies other than our own. Cohen has performed a herculean job in personally examining 'complete ethnographic reports' on sixty-five cultures to ferret out facts and correlations of which theoreticians concerned with psychoanalytic developmental psychology should be aware. He found this method more rewarding than merely referring to the Cross-Cultural Files at Yale, a more convenient and conventional practice. The data uncovered are rather extensive and I will refer to only a few. He found that extrusion (the dislodgment of a child, usually a boy, from his household) and brother-sister avoidance occur at eight or nine years of age. He also noted the rise in sex hormones that occurs at that age. And he observed that these customs occur more frequently than do initiation ceremonies of puberty. The following correlations are quite remarkable: when the child is taught by his parents *and* descent group, extrusion or brother-sister avoidance is almost universally present; in sixty-six per cent of the societies studied puberty rites are also performed. When a child is taught by his parents and by *nonmembers* of his descent group, extrusion, brother-sister avoidance, and puberty ceremonies are rare.

Although the author's observations will be stimulating to the analyst, his theoretical attempts will often be disappointing. Cohen's concept of an innate need for privacy, which he considers a biological determinant of the incest taboo, is interesting when one realizes that he is referring to the organism's attempts to avoid excessive and traumatic stimulation. But this concept is not satisfactorily formulated. His idea of two stages of adolescence, the first begin-

ning at eight or nine when hormones increase and the second starting with development of the physical changes of puberty, can be related by analysts to concepts of prepuberty and preadolescence as differentiated from puberty and adolescence. Indeed some analysts suspect that we should consider prepuberty to start earlier than we generally do and Cohen's observations feed their arguments. But again the book's formulations are not sufficient to our needs. The author fails to supply necessary psychological information about individuals' struggles with their drives in the societies studied. Such data are needed to bridge the gap between the biochemical facts and those derived from the study of customs.

I recommend this book to analysts who are interested in using ethnological data to broaden their theoretical vistas.

JULES GLENN (GREAT NECK, N.Y.)

MAGIC, FAITH AND HEALING. STUDIES IN PRIMITIVE PSYCHIATRY TODAY.

Edited by Ari Kiev, M.D. New York: The Free Press of Glencoe, 1964. 475 pp.

This excellent anthology is concerned with various forms of psychological treatment employed in a number of undeveloped and primitive cultures, most of which are in a state of transition because of the impact of Western civilization. Its purposes are to add a further dimension to our knowledge of the basic processes of psychological treatment and to provide in one volume materials demonstrating differences and similarities throughout the world. The impact of cultural factors on the form and content of psychiatric theories and treatment is emphasized in order to demonstrate forcefully that culture contributes not only to formation of personality and psychic conflict but also to the development, perpetuation, and management of mental illness. The orientation of this book recognizes the biological limits of human behavior, which account in part for the fundamental similarities of psychotherapies in various cultures.

Superficially, conceptualizations of mental illness and healing differ vastly between nonindustrialized and industrialized societies. In the former, illness is thought to result from combinations of harmful environmental influences, the enmity of other persons,

and the disfavor of the gods. The sick person is viewed as dangerous to the group. The shaman provides ethnocentrically designated physical agents, means for confession, atonement, and reintegration within the social group, and intercession with the spirit world. That his actions are predominantly psychotherapeutic is obvious to the observer and acknowledged generally by other members of his culture. In industrialized societies, the human being is viewed increasingly as a machine, the malfunction of which results from noxious environmental agents, inborn and acquired characteristics, and metabolic dysfunction. The physician is increasingly seen as a detached, skilled scientist-technician.

In all groups, illness results in alteration of the individual's view of himself and of the attitudes of other members of his social group toward him. Disturbances of emotion and thinking are present in varying degrees. The so-called mental illnesses disturb all levels of the person's functioning: bodily, psychological, and spiritual. They affect the sufferer's world view, ethical values, and self-image, and his relationships with his compatriots. These disorders result from or express the interaction of sociocultural stresses with vulnerabilities which are the products of combinations of genetic, physicochemical, and experiential factors. The healer, whether psychiatrist or shaman, derives his healing powers from his status and role in the sufferer's society. He functions, among other ways, as an evoker of healing forces, a mentor, whether that group be conceived to include solely the living or, additionally, the dead.

In Kiev's introductory chapter, he demonstrates the shifting orientations of anthropologists during the past century. The first approach was that of describing and cataloguing traits of a culture. It was learned that there are only three or four basic explanations of disease: loss of a vital substance from the body, which may include the soul; introduction of detrimental agents into the body, including spirits and possession; violation of taboos; and witchcraft. The widespread nature of such explanations and the attendant practices determined by them were attributed to trait-diffusion. During the twentieth century, anthropologists have sought increasingly to relate their observations to general theories of human behavior. In such studies, the main heuristic device has been the concept of culture, which in general has included those shared beliefs, attitudes, and ways of behaving that have developed

groups' world views and ways of life. It has referred to the patterning of social intercourse and the nature of economics, technology, and religion, and also to the total pattern of interrelated activities and values. It has been learned that the varying beliefs and practices of groups differ according to their respective cultures. From this point of view, the individual is largely ignored.

At the same time that some anthropologists have focused on the functions of social structure and organization, others have interested themselves in studies of the mutual influences of personality and culture. Their work has been made possible by the systematic study of psychological treatment and organization of personality begun by Freud, who has been called by at least one anthropologist 'the greatest anthropologist of them all'. The psychoanalytic model has been incorporated into most subsequent systems of intensive psychotherapy and personality development. The universality of human needs and the limited avenues of expression of those needs have come to be regarded as explaining—better than does cultural diffusion—the widespread relative uniformity of beliefs and practices relating to the treatment of mental disorders.

In the development of intensive psychotherapy, the encouragement of insight by interpretation was viewed at first as the curative agent; later the resolution of transference distortions, interpretation of the abreaction of affect, modification of the superego, and identification with the therapist were emphasized. It was expected that skilled psychiatrists would obtain the most enduring results most frequently, but various studies have indicated that differing methods of treatment produce results that appear to be similar, depending upon the orientation of the assessor. It has been suggested that therapeutic achievements may depend less upon real knowledge of causal treatment than has been expected, and that the main agents in cure depend on confession and suggestion, the essential elements employed by shamans. Improvements conform predictably to the theoretical expectations even of psychoanalysts, and patients show shifts in values toward those of their therapists. In part, perhaps because of the difficulties in evaluating psychotherapy critically and objectively, there is an increasing interest in the cultural and social elements of psychotherapy.

According to Kiev, the psychoanalytic model of psychotherapy underemphasizes emotional aspects of the therapeutic process,

the nonspecific effects of psychotherapy, the role of social forces, the powerful influence of the therapist, and the effects of culturally induced stresses.

A question that has troubled anthropologists and psychologists alike is the concept of psychic normality. The cultural relativists define such normality strictly with reference to average expectable behavior within the cultural group. Other anthropologists follow the psychoanalytic notion that a hypothetical normality must be measured by the degree to which the individual has attained psychological maturity measured by the degree of genitality. This anthology presents relevant data that will permit the reader to decide for himself, although the point of view of the cultural relativists is represented by only two authors,—and not explicitly.

Most of the articles are of high quality and their selection speaks well for the discrimination of the editor. The authors include anthropologists, psychiatrists, a psychoanalyst, and psychologists, all of whom have written from their own field data. The seventeen contributions include five depicting beliefs and practices of Indian tribes and one that deals with Mexican-Americans of Texas; four treat groups from India, Sarawak, Turkey, and Yemen; one discusses aboriginal Australians; and six are concerned with Africans in Kenya, Nigeria, Northern and Southern Nigeria, and Sierra Leone. The book is strongly influenced by psychoanalytic thinking of the past thirty years; there is almost no reference, even by implication, to id psychology; the work of Róheim is not mentioned.

In the opinion of this reviewer, the anthology does not add a new dimension to our knowledge of the basic processes of psychological treatment. However, it presents previously known data and amplifies them with additional information in a forceful manner. It may well open a new area of knowledge to readers who have not kept abreast of traditional anthropological and epidemiological studies and studies of personality and culture. It does indeed demonstrate clearly that culture contributes not only to formation of personality, but also to development, perpetuation, and management of mental illness. The book offers graphic portrayals of differences and similarities of ideologies and processes of psychological treatment. It is directed to problems of treatment and the evaluation of results of treatment. The editor believes the data support his view that important factors in treatment are under-

stressed by psychoanalysts, but he presents sufficient material to permit the reader to draw his own conclusions.

A number of articles deserve special comment, but only one can be mentioned. In *The Social Meaning of Navaho Psychopathology and Psychotherapy*, Bert Kaplan and Dale Johnson attribute the effectiveness of Navaho curing to two processes. The first, suggestion, needs no elaboration. The role of the second may have application in continuing research into the results of psychological treatment. The Navaho stem from the Apachean group who migrated southward perhaps a thousand years ago from northwestern Canada. Some hundred years ago they became heavily influenced by the Pueblo Indians of the Southwest. Although the values emphasized in anthropological literature have been associated with those resultant from Pueblo influence, Kaplan and Johnson deem those values to be 'official' and superimposed upon others which remain from the Apachean period and express themselves especially in the nature of deviant Navaho behavior. It is their argument that Navaho curing rites for psychological illness reaffirm the solidarity of the community and 'indeed of the whole pantheon of Navaho deities with the patient. The ceremony surrounds him with concern and good will and serves as a kind of reintegration of the social group, with the sick person not only as a solid part of it but at its very center. . . . This aspect of the ceremony has more to do with the protection of the person than with curing or purging him of already established evil power.'

This anthology is highly recommended to all who are interested in the processes of psychological treatment and comparative psychiatry.

L. BRYCE BOYER (BERKELEY)

MOTIVATION: THEORY AND RESEARCH. By C. N. Cofer and M. H. Appley. New York: John Wiley & Sons, Inc., 1964. 958 pp.

'Our purpose in this volume', state the authors, 'is to examine some of the main forms which motivational concepts have assumed in the major theoretical systems current in psychology today. In order to realize this purpose, we have first attempted to assemble some of the historic background of the problem both generally and in relation to each of the more-or-less systematic positions. For each of the

systems discussed, we have tried to show how the need for one or more motivational constructs developed and how the system attempts to account for the motivational phenomena with which it deals.'

For the most part the authors admirably fulfil this purpose. The historical summary in Chapter Two is a scholarly resumé of the problem, starting with the Greek philosophers and followed by the role of Darwin's theory in the development of comparative psychology and a discussion of the implications of twentieth century physiology for theory and research in motivation.

Other chapters discuss, among other subjects, the data of ethology, learning theory, and sociology. A chapter on psychoanalytic theory of motivation is outstanding for its accuracy and clarity. Although the book is occasionally verbose and repetitive, it is a scholarly contribution and can be highly recommended. There is an excellent bibliography of over two thousand references.

LOUIS LINN (NEW YORK)

RECENT RESEARCH ON CREATIVE APPROACHES TO ENVIRONMENTAL STRESS.

Edited by Ralph H. Ojemann. Iowa City: State University of Iowa, Department of Publications, 1964. 186 pp.

'I'm interested. I am concerned. I really wish we knew more about it', says one of the participants part way through the Proceedings of the Fourth Institute on Preventive Psychiatry, sponsored by the State University of Iowa in 1963. Her comment shows the concern and dedication of the participants, but it also raises questions.

Some two hundred fifty persons—among them psychiatrists, social workers, psychologists, clergymen, teachers, students, businessmen, personnel directors, 4-H leaders, lawyers, sociologists, representatives of government agencies, and other interested citizens—banded together for an institute, the purpose of which was 'to look at the problem of prevention . . . by considering recent investigations in creative approaches to environmental stress'. They discussed seven papers on the stresses arising from biological factors, from the period of adolescence, and from the effects of authoritarian controls, industrial automation, and family conflicts. The papers and the discussions are reported verbatim.

This is not the first time (nor will it be the last) that mindlessly

recording electronic tape has collaborated in the production of a book—producing, in this case, at least a third of the total number of pages. The result is a mixed blessing. Written language is different from that which is spoken. The latter is more than the words of which it seems to consist; nuances of gesture, tone of voice, and facial expression form an integral part of the evolving process of a conversation as the participants grope their way toward consensus and meaning through a series of tentative, often ambiguous and hazy, and sometimes trivial or senseless formulations. The writer, on the other hand, alone with his pen and his paper, can take the time and effort to pause and reflect, to organize, condense, and simplify his thoughts, to choose the exact word—laborious luxuries denied the speaker embroiled in the heat of debate. If the writer will, he can say what he has to say clearly, directly, and unambiguously. When the speaker's words are frozen in print, they are only a dumb show, a simulacrum of written language. They have lost their essential nonverbal elements, but retain their obscurity. So it is with the transcribed discussions that fill some seventy pages of this book, and transcription of a tape recording cannot be substituted for the pain of careful writing when precise, concise communication of ideas is the goal.

Yet, if clarity is lost, something else is gained by the presentation of these unweeded discussions. The reader, far from the din of battle, can detect broader patterns in the individual skirmishes and verbal sallies that often go unnoticed by the busy participants. In the discussion of a paper dealing with alienation of business executives and procedures designed to get them to share their thoughts and feelings, a psychologist commented, 'I'm not so sure that this is all a defensive operation or that it reflects any genuine alienation as much as the possibility that there is a certain healthy value in privacy. Perhaps people need time and a feeling of freedom to reflect on their inner thoughts and feelings or creations to do useful, productive work without an excessive degree of socialization or having to focus their attention on each other rather than on some of the other aspects of their work situation. I don't know any answer to this, but I think there is some matter of degree involved here and that the maximum might not be the optimum.'

What is of interest here is not so much what the speaker says as the tentative, almost apologetic way in which he suggests that there

may be value in a private, unshared inner life. His is not the only voice so raised, but the tacitly accepted, apparently unrecognized climate of much of the Institute has quite another cast. The emphasis is on shared group activities, on ways of influencing behavior, on techniques for helping others when they do not want help, on the social matrix of the individual, on treating, in the words of one speaker, 'a person not as a machine in himself but as a cog in a larger machine'. In the minds of some, the new society will rest on the principle of 'people helping people'—a new sort of feudalism in which society supplies protection and the individual supplies participation in the group. As one participant (perhaps somewhat facetiously) put it, 'As more people become unemployed [through industrial automation], more people are employed to help the unemployed. . . '.

These comments are not meant to derogate the current movements to organize and improve the care of those with emotional disorders, or the efforts to prevent the development of such disorders, for only through organization can the necessary help be brought to those who need and want it. But they are meant to reiterate the proposition that social organization exists for the individual, not the individual for the organization, and to suggest that in our enthusiasm for organizing we must not forget why we are doing so, or lose sight of the trees for the forest. The seventeenth century Puritan could be utterly ruthless in his insistence on conformity, but his goal was the salvation of individual souls, not the submergence of its members in the group.

JOHN C. NEMIAH (BOSTON)

International Journal of Psychoanalysis. XLIV, 1963.

Eugene V. Ninger

To cite this article: Eugene V. Ninger (1965) International Journal of Psychoanalysis. XLIV, 1963., The Psychoanalytic Quarterly, 34:4, 614-628, DOI: [10.1080/21674086.1965.11926367](https://doi.org/10.1080/21674086.1965.11926367)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926367>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

ABSTRACTS

International Journal of Psychoanalysis. XLIV, 1963.

The Effects of Preœdipal Paternal Attitudes on Development and Character. Philip Weissman. Pp. 121-131.

Preœdipal play between two fathers and their sons, which had permanent effect upon the children's subsequent development, is described. In one case, the father had accepted 'victory' over himself by his son only to 'defeat' suddenly the child by screaming at him and then forcing him to stand motionless for a long period. In later life, the son showed a repetitive sequence of omnipotent victory followed by annihilating, self-inflicted defeat. In the other case, the son later in life withheld desired objects from his daughter until she screamed violently, whereupon he would give her the object with an approving smile for her persistence. He was an overaggressive person who had been encouraged by his father to behave like the daughter, and then allowed to win. In both cases the mothers had not been able to participate consistently and favorably in their sons' subsequent development.

Some Observations Relevant to Early Defenses and Precursors. William C. Lewis. Pp. 132-142.

After summarizing and discussing the literature on the relations between emotional attitudes and psychosomatic disease, the author describes primitive defense precursors of later desomatized, secondary-process verbalized responses. He proposes these precursors be called 'mantle defenses' as they function like an integument or magic cloak put on in perilous situations. An example is vomiting as a precursor to projection, both of them having the aim of getting rid of something unwanted and then instituting a barrier against it.

Somatic Symptoms and the Transference Neurosis. Peter L. Giovacchini. Pp. 143-150.

The author describes a patient who suffered from hypertension when her behavior was disorganized and she was unable to relate to the analyst. When she was able to experience feelings, even disruptive ones, her blood pressure returned to normal. Thus, presence or absence of hypertension could be correlated in the transference to the presence or absence of object relationship.

Impediments of Speech: A Special Psychosomatic Instance. Augusta Bonnard. Pp. 151-162.

Demonstrating details of tongue and mouth movements to two male children made them aware of the connection of these movements with genital conflicts and was followed by disappearance of the speech impediment. The author emphasizes the central importance of the tongue as a spontaneously assertive organ even before birth and suggests that since speech impediment is largely confined to males, it may arise from displacement to the tongue by way of the phallus-

tongue equation of desires and fears involving especially the assertive, exhibitionistic aspects of male genitality.

Analysis of a Woman with Incipient Rheumatoid Arthritis. A Contribution to the Understanding of Somatic Equivalents of Withdrawal into Sleep. Jose Barchilon. Pp. 163-177.

A woman patient developed hypotonia in one or several muscle groups when having angry feelings toward a mother figure. She would then identify with a father figure and shift from hypotonia to tension and shooting pains in the previously hypotonic muscles. Finally there would be a burst of physical activity followed by pain, stiffness, swelling, and arthritis in one of the joints activated by the previously hypotonic muscles. An important unconscious meaning of the hypotonia was of being asleep, which was a central defense against anger.

Colds and Respiratory Introjection. Bruce Ruddick. Pp. 178-190.

The paradoxical word 'cold' to label an essentially afebrile condition is found in various Indo-European languages to relate to words for death, birth, pregnancy, and sexual arousal. These in turn can be linked to primitive theories involving air as the carrier of the life principle introjected—or in the case of death, ejected—by respiration. Clinically, the appearance of colds while never excluding an infectious factor, often follow loss or separation. Some colds conceal underlying depression, withdrawal of object libido, and conflicts over unconscious attempts to regain the lost object through oral and respiratory incorporation.

Symposium on 'Reinterpretation of the Schreber Case: Freud's Theory of Paranoia'.

I. Introduction. Philip M. Kitay. Pp. 191-194.

Fifty years of progress in psychiatry, psychoanalysis, and psychology since the publication of the Schreber case provide a basis for re-examining it. In addition, we have new material on Schreber and his family unearthed by Baumeyer and Nederland, and the provocative contentions of Macalpine and Hunter that Schreber suffered from doubt and uncertainty in sex identification rather than unconscious homosexuality as Freud concluded.

II. Observations on Paranoia and Their Relationship to the Schreber Case. Arthur C. Carr. Pp. 195-200.

Studies questioning Freud's formulation that paranoid delusions are a defense against unconscious homosexuality do not challenge the theory as seriously as first appears. Both hostility and homosexuality appear defended against in Schreber's case rather than, as some have contended, that the latter defends against the former. Back of the delusions in paranoia can often be found an early history of denial by family members of the validity of a perception found by the patient to be accurate. In Schreber's case this factor appears in the form of sadistic treatment by the father while he verbalized a quite different morality. Besides the other defenses that have been described in paranoia—projection, denial, and introjection—rationalization should be considered.

III. Further Data and Memorabilia Pertaining to the Schreber Case. William G. Niederland. Pp. 201-207.

Resemblance can be found between the sadistic manipulations of Schreber's father, as described in his book *Pangymnasticon*, and those of God in one of the delusions of Schreber's psychosis. Another of Schreber's 'miracles'—that of possessing a plurality of hands and severed heads coming out of the body—appears to derive its 'kernel of truth' from drawings in the book which show gymnastic figures simultaneously in different positions. The 'little men' of the psychosis resemble the small drawings of men from the same source. Additional findings from other sources are described. A sister's letter reveals that the mother was a full participant in the father's manipulations of their children. One brother committed suicide a few weeks after becoming a judge; another tried to commit suicide after attaining an even higher position and succumbed to life-long mental illness. Schreber's first illness followed disastrous defeat in one election. The father died on the 10th or 11th of November, in his early fifties; Schreber was hospitalized on the 9th or 10th of November, in his early fifties, at which time he thought himself 'dead' and tried to commit suicide.

IV. Schreber, Parricide, and Paranoid-Masochism. Jule Nydes. Pp. 208-212.

Schreber's Memoirs serve to support the thesis that the masochist renounces power for the sake of love while the paranoid sacrifices love for the sake of power. The paranoid fights, even if against projected, imaginary enemies; the masochist submits and expects extra love in consequence. Schreber's earlier position was to fight God (his father) after infantile omnipotence was aroused in his appointment as *Senatspräsident*; his later position at the time of the Memoirs is to have accepted castration in exchange for God's love and protection.

V. The Schreber Case Reconsidered in the Light of Psychosocial Concepts. Robert S. White. Pp. 213-221.

Schreber's life and illness are considered from the viewpoint of Erikson's eight stages of development, which emphasizes the importance of the stages after adolescence as well as before. It is conjectured that Schreber's intense identification with his compulsive father enabled him to manage the instinctual conflicts of childhood and adolescence in spite of an underlying, voracious wish to be his mother's only infant; but he was then vulnerable to the adult problems of intimacy versus isolation, generativity versus stagnation, and integrity versus disgust and despair. It was when Schreber reached the first of these adult conflicts, in the form of his engagement to marry, that his severe difficulties became manifest. He appeared unable to overcome fear of the ego loss entailed in intimacy, and six years later could not cope with the generativity crisis created by his defeat in politics and the still-birth of his first two children.

VI. Summary. Philip M. Kitay. Pp. 222-223.

After summarizing the contributions of this symposium, Kitay emphasized the progress in understanding the Schreber case since the 1911 formulations of Freud. This can be seen in the more comprehensive and more detailed dynam-

ics, greater flexibility of theoretical formulations, attention to the phenomenological world of Schreber's childhood, consideration of developmental factors causing weakness in reality testing and in autonomy and trust, and emphasis on defenses other than denial and projection in paranoia.

Synopsis of an Object-Relations Theory of the Personality. W. Ronald D. Fairbairn. Pp. 224-225.

The author lists sixteen points as synopses of the theoretical views he has expounded over the last twenty years. They form the basis of a theory of personality conceived in terms of object relations rather than instincts and their vicissitudes.

The Younger Sister and Prince Charming. Michael Balint. Pp. 226-227.

Two sisters, aged five and three, enacted a before-bedtime pantomime for a fortnight in which both wished to be Cinderella. The solution was that the younger became Prince Charming. Clinically one can observe in two sisters close in age that the older is more narcissistic, the younger more bisexual. If they sing a duet, the older sings the melody, the younger accompanies in contralto voice. These findings are further proof that the masculinity complex in women is almost certainly a secondary phenomenon. The younger sister develops penis envy because her older sister prevents her straight path to femininity.

Transference Psychosis in the Psychotherapy of Chronic Schizophrenia. Harold F. Searles. Pp. 249-281.

Even the most chronic symptoms of schizophrenia are not simply a debris from earlier phases of the illness, but are an intensely alive, unconscious effort by the patient to recapture, maintain, and free himself from relationships of childhood which he re-establishes in the present, including that with the therapist. Four varieties of transference psychosis are distinguished: 1, the therapist feels unrelated to the patient and treated as inanimate or inhuman; 2, the relationship is ambivalent; 3, the patient's psychosis attempts to help the therapist-parent establish himself as a whole and separate person; 4, the patient attempts an ambivalently symbiotic relationship in which the therapist is to do his thinking for him, and he is to become a separately-thinking, separately-functioning person through sadistic undoing of the therapist's efforts. Extensive clinical material illustrates the four categories.

Primitive Object Relationships and the Predisposition to Schizophrenia. Arnold H. Modell. Pp. 282-292.

Two different orders of possible biological determinants in schizophrenia are considered. One has to do with impaired capacity from birth onward to develop mature object relations; the other, the capacity to suspend object relations that can become manifest at varying ages, including maturity and middle age.

The Concept of Narcissism in Schizophrenic States. Thomas Freeman. Pp. 293-303.

Freeman divides narcissism in schizophrenia into two categories. 1, Psychotic narcissism, which is a functional state represented through delusions, hallucina-

tions, etc., that are not compromise formations but instead are processes of excitation and discharge resulting from the processes. 2. Nonpsychotic narcissism, which appears during the prepsychotic phase as well as during the illness and is similar to that encountered in sexual deviations and character abnormalities.

Hope and Repudiation of Hope. Thomas M. French and David R. Wheeler. Pp. 304-316.

The emerging hopes of the patient in treatment, essential if increasing integration is to occur, are first repudiated because they are closely associated with hopes of the past that ended disastrously. The analyst can help by making the patient aware of the unreality of the repudiations in the present and of their basis in the past. Ultimately the disturbing affects should be discharged, and then hopes similar to those repudiated should begin to emerge.

Assimilation of Unconscious Material. Paul G. Myerson. Pp. 317-327.

Assimilation is a cognitive process, as Hartmann has delineated, which follows emergence into awareness of derivatives of unconscious conflicts and involves thinking about the causal connections among the various previously isolated elements. This intermediate thinking process is then followed by new ways of tolerating and expressing affect and in more organized ways of behaving. The ability to tolerate painful inner or outer reality is important for assimilation and mastering it.

The Non-Verbal Relationship in Psychoanalytic Treatment. S. Nacht. Pp. 328-333.

Deeper in the unconscious than the instinctual drives lies a wish for union that goes to the source of life itself, and exists prior to the wish for separation included in object relationships. The level can be reached in treatment through a change, at a culminating point, from the classical neutral attitude that brings on the transference neurosis to one of deep-seated availability and hearty attentiveness that permits silences and may include granting of special wishes, such as change of appointment hour. In this way the patient experiences an added dimension from treatment to that provided by classical analysis of the drives; he experiences a 'peace of the depths' (Huxley) that enables him to escape the ebb and flow of life as well as to re-enter it.

The Fragmentizing Function of the Ego in the Analytic Session. Andrew Peto. Pp. 334-338.

The author discusses several additional aspects of the fragmentizing function of the ego as he conceptualized it in his 1961 paper. During a single analytic hour, phases of fragmentizing may develop into integration which then leads to another phase of fragmentation. Interpretation is most effectively timed when it occurs at the point of transition from fragmentation to integration, or vice versa.

Dependence in Infant Care, in Child Care, and in the Psychoanalytic Setting. D. W. Winnicott. Pp. 339-344.

The psychoneurotic patient revives the dependency needs of childhood in analysis and experiences with the analyst a corrective experience regarding them. However, he also reinstitutes the failure of these needs omnipotently rather than helplessly as he did in childhood. If dependency needs are not met in infancy, maturational processes do not occur and the basis for psychosis is present, with cure only possible if these needs can be met later in a manner comparable to the spoiling the parents must sometimes supply during a period of regression. A good beginning in infancy followed by failure before establishing an internal environment, results in antisocial tendencies.

A Case of Transvestism. Murray D. Lewis. Pp. 345-351.

A male with transvestite masturbation appeared to have suffered early body image impairment which then became fused with genital and castration anxiety during the phallic phase. This in turn resulted in pervasive body-phallus identifications along with total body-disintegration anxiety. The transvestism was a defense against castration anxiety and derived from early efforts of his mother to dress and treat him as a 'sissy' and from his sister using him in sex play.

On Fetishism. Alan Parkin. Pp. 352-361.

A male was sexually excited by mackintosh coats. Associations and recollections indicated they possessed the dynamic significance of transitional objects and recapitulated and condensed preœdipal object choices. These then acted as a defense against phallic conflicts that gave the fetish its final and definitive form.

Relations Between Psychoanalysts. Leon Grinberg. Pp. 362-367.

Because of the nature of his work—the isolation, self-denial, yet involvement with emotional situations prone to stimulate instinctual drives—the analyst tends especially to use mechanisms of projection and displacement in his relations with his colleagues. It is suggested that he would benefit from less time with patients and more time with the 'outside' analytic and other worlds.

A Note on Non-Payment of Psychiatric Fees. John Gedo. Pp. 368-371.

Patients who fail to pay their bills appear to treat money unconsciously as a transitional object. Upon failing in treatment to maintain an internal object through symbiosis with an external one (the therapist), they use withholding of payment to deny their separateness.

A Comment on the Psychodynamics of the Hypnotic State. Harold Stewart. Pp. 372-374.

Various considerations suggest that the hypnotic state represents a collusive manic denial of a controlling aggressive attack of the subject on the hypnotist, together with a denial of fear of retaliation that is connected with guilt over the aggressiveness.

Bulletin of the Philadelphia Association for Psychoanalysis. XIV, 1964.

Affects and Consciousness. Mitchell D. Dratman. Pp. 183-192.

While affects cannot be repressed, their significance may not be appreciated because of repression or isolation of associated ideas. They are also equated with processes of discharge which are conscious, serving a discharge phenomenon in lieu of motor discharge. Thus affects are likened to ideas which are 'small quantities of trial action'.

A Psychoanalytic Review of Music. Albert S. Terzian. Pp. 193-215.

The author presents a rather comprehensive review of the psychoanalytic literature on music, and summarizes the diverse libidinal sources of and contributions to music. The nature of pleasure in music seems to be highly overdetermined. Many id strivings find refuge in music; the ego uses music for organization, mastery, and defense; the superego gratification centers around adherence to formal rules and the distractions offered. While noting the special problems of interpreting this nonverbal, nonrepresentational medium, the author believes that psychoanalysis offers an ideal means for the exploration of the meanings of music.

Some Ethical Values of the Psychoanalyst. Louis Paul. Pp. 216-224.

Paul discusses nine ethical precepts which he sees as the 'basic model technique' of psychoanalysis. 1, The analyst refrains from moralizing on the patient's thoughts and feelings, or their verbalization in analysis; 2, he refrains from sanctioning cruelty toward one's self or others; 3, he leaves the patient free to develop his own value system; 4, he respects his patient as a person; 5, he avoids intruding beyond the patient's boundaries and protects his own boundaries as well; 6, he does not endorse self-deception or belief in magic; 7, he has a preference for healthy behavior; 8, he abstains from indulgence of the patient; and 9, he is always interested in furthering the analysis. Psychoanalytic treatment is not ethically neutral. It is firmly committed to the values of the patient as an individual, to the value of accurate self-observation, and to the value of the psychoanalyst as a professional assistant to the patient in his self-analysis.

EDWIN F. ALSTON

American Imago. XXI, 1964, Nos. 1-2.

The Significance of Psychoanalysis for the Humanities. Otto Rank and Hanns Sachs. Pp. 6-133.

Written in 1913 by the original editors of *Imago*, this monograph takes up the application of psychoanalysis to various sectors of the humanities. The investigation of myths is most thoroughly treated. Myths are seen as parallel structures to dreams in which incestuous and homicidal material is admissible to waking consciousness because of the recognition of its fantasy character. While myths are distorted and reworked through the years, late versions may be similar to early

ones as a result of the return of the repressed. Religion is formed as a compromise between the instincts and defensive forces; accordingly, celebrations and taboos are prominent features. With elaboration of the anti-instinctual side, religion may take on a dry, obsessional quality. As a reaction to this there may arise a new religious movement in which the instincts (spiritual experience, love) are given fresh emphasis. Difficulties presented by the external world are met with magic (prayer) as an expression of belief in the omnipotence of thought, gesture, and speech. A chapter on aesthetics attempts to explain the paradoxical enjoyment of tragic poetry and drama. Other topics dealt with are the psychology of artists, ethnology, linguistics, philosophy, ethics, law, pedagogy, and characterology. The monograph is of interest as a historical document and for its numerous penetrating observations.

JOSEPH W. SLAP

American Imago. XXI, 1964, Nos. 3-4.

On Love and the Death Drive. Compiled by Fabian X. Schupper. Pp. 3-10.

Excerpts from Freud on the subject of death and the death drive, spanning the years 1915 through 1940, are presented chronologically without comment. A short bibliography from other sources is appended.

Thanatopsis: Life's Last Stand. Sidney Halpern. Pp. 23-36.

Freud's concept of a death drive is seen as a defense against the dread of death. It wards off the terror of absolute annihilation and oblivion, and also makes death an actively sought rather than a passively experienced eventuality. By establishing the concept of the death drive, there is an attempt to render death harmless; in speaking of a conflict between Eros and the death drive, there is a tacit, optimistic implication that the outcome is in doubt.

Platonic Love and the Quest for Beauty: The Drama of J. J. Winckelmann. Gustav Bychowski. Pp. 80-94.

A strong homosexual disposition is revealed in the writings of this renowned eighteenth century classical scholar and archeologist. The author sees his murder as an unconsciously arranged feminine masochistic surrender.

The Bullfighter. John Ingham. Pp. 95-102.

The family structure characteristic of Mexico and Spain—absent father and indulgent mother—predisposes male children to homosexuality. The Don Juan tradition and aspects of Catholicism are seen as compromise formations arising from the conflict between homosexual drives and countering defenses. The bullfight, in which the fancily clad matador, passive and defensive at the outset, becomes aggressive and penetrating, enacts the triumph of masculinity over femininity in the bullfighter and those who identify with him.

JOSEPH W. SLAP

Psychoanalytic Review. LI, 1964, No. 3.

Technique in Psychoanalytically Oriented Psychotherapy. George Zavitzianos. Pp. 9-18.

The author differentiates psychoanalysis from psychotherapy on the basis of whether or not the resistances and transferences are analyzed, whether or not transference development is encouraged, whether the resolution of the basic conflict is attempted, and whether the therapist is in the role of transference figure only or as a real object to the patient. Zavitzianos advocates limiting the goals of psychotherapy, its duration, and the extent to which interpretations are made. He warns against id interpretations, arousing the guilt of the patient, encouraging the development of sexual feelings for the therapist, dream interpretation except where it is partial, and the use of drugs since they encourage passivity, dependency, and magic. The latter this abstractor considers a courageous position in these days of much grant support for investigations of drug therapy.

Aspects of Relatedness in the Psychotherapy of Schizophrenia. Helm Stierlin. Pp. 19-28.

This paper discusses the problem of maintaining a balance between fusion and distance in personal relationships. At the risk of oversimplification, the author asserts that the experience of 'near fusion' is precisely the plight of the schizophrenic patient. Two case examples are presented. In his generalizations, the author does not seem to be fully aware that oversimplification might be useful to the control of the anxiety in the therapist who treats very sick patients.

The Contribution of Paradigmatic Psychotherapy to Psychoanalysis. Herbert S. Strean. Pp. 29-45.

This paper is concerned with role-playing in psychotherapy. Although it is argued at some length, the relationship to psychoanalysis is not clearly demonstrated. The author encourages role-playing by the therapist and justifies it by asserting that the therapist is never neutral. Several techniques in role-playing are discussed: to permit the patient to direct the therapist, to support or mirror the resistance of the patient rather than interpret it, to side with the patient or to be the antagonist whom the patient must defeat, to assume the role of the hostile introject. One wonders about a beginning therapist attempting role-playing, which appears to call for the utmost skill, experience, and flexibility.

Recent Developments in 'Direct Psychoanalysis'. Charles T. Sullivan. Pp. 46-64.

The author presents an objective review of the theories and practices of John Rosen, who views psychosis as a psychogenic disorder susceptible to a psychological type of treatment. In 'direct psychoanalysis' emphasis is placed on the difference in technique in the 'phase of resolution of the psychosis' and in treatment of the 'neo-neurosis', and the author stresses that this difference is important in answering some of the criticisms of Rosen's theories. He also points out that Rosen differed from Freud in his views on the superego, the question of transference in the psychoses, and in his definition of the œdipus complex.

Ego-Activating Approaches to Psychotherapy. David Grossman. Pp. 65-88.

This paper describes several techniques of psychotherapy in which the therapist is active: exaggerating the patient's complaint or problem, the use of sarcasm, and the use of bluntness in evaluating the patient. The author acknowledges that in practice the 'ego-activating' approaches are not used to the exclusion of more traditional approaches. He criticizes the passive technique of classical psychoanalysis, but fails to distinguish clearly between psychoanalysis and psychotherapy.

The Resolution of Resistances by Conjoint Psychoanalysis. Louis R. Ormont. Pp. 89-101.

A therapeutic method is described in which, in addition to individual analysis, the patient meets in a group under the leadership of another analyst. The advantages of the method are: 1, an unworkable transference to the individual analyst can be discussed in the group and the patient encouraged to work with it; 2, the patient who resists facing a problem with the individual analyst can be confronted more effectively by the group. The limitations of the method are also discussed.

Schizophrenic Development of Two Children. Lizzi Rosenberger and M. Woolf. Pp. 133-194.

Detailed histories of two psychotic children are presented; both cases ended in failure. The symptoms were autism, isolation, despondency, motoric unrest, aggression toward toys and persons that were seen as attempts at re-establishing contact with reality. In both cases the pathological personality of the father played a decisive role in the development of the daughter's abnormality; both mothers were weak and passively subordinate to their husbands. The realistic difficulties encountered by those working with psychotic children are described.

STEWART R. SMITH

Psychiatry. XXVII, 1964.

The Mystique of Adolescence. Joseph Adelson. Pp. 1-5.

This article is based on interviews with one thousand boys, fourteen to sixteen years of age, and two thousand girls, twelve to eighteen years of age. Dr. Adelson proposes revisions in the generally accepted views that consider adolescence as a time when conflict with the family leads to more independence and an acceptance of the peer group as the authority. The adolescent asks for and is freely given an unusual degree of freedom in the United States, but it is doubtful whether he wants a high degree of emotional autonomy or value autonomy. For many the peer group is merely used for learning social skills and not as an arena for confrontation of the self.

The author believes that the tensions of adolescence are displaced to and discharged within the matrix of peer group sociability. The defenses of repression, reaction-formation, and certain forms of ego restriction are used to curtail experience and limit growth. Both parents and children are made captive by the ado-

lescent's dependency based on the long preparation needed for advanced training. They make the best of it by the adolescent's forfeiture of passion, restlessness, and vivacity, and by the acceptance of the mixed childishness and pseudo-adulthood of the adolescent culture.

The Quest for Omnipotence in Professional Training. Myron R. Sharaf and Daniel J. Levinson. Pp. 135-149.

In studying the professional development of young psychiatrists from a socio-psychological approach, the authors found that the 'quest for omnipotence' is a regularly observed theme with numerous variations. The psychiatric resident is likely to perceive certain teachers, especially psychoanalysts, as possessing special powers, and in his training he tries to obtain the same powers. The quest for omnipotence is less conscious and less rational than the striving for professional competence, a natural part of the residency.

Psychiatric residents fall into two patterns of professional ideology and role definition—the 'analytic' and the 'eclectic'—although the differentiation is less sharp than it was ten or fifteen years ago. The 'analytic' resident has made a relatively exclusive commitment to psychoanalysis and analytic psychotherapy. Initially he searches for omniscience focused particularly upon psychodynamics. Psychoanalytic institute training is imagined as the final key to psychodynamic omniscience and to the liberation of the self. No resident approaches the institute with confidence regardless of how outstanding his record may have been; he is fearful that his secrets will be found out, and he will be considered unworthy.

The distinctive feature of the 'eclectic' group is a substantial commitment to at least one other aspect of psychiatry in addition to the practice of psychotherapy or psychoanalysis; this may be to somatic or social aspects of clinical psychiatry, to administration, or to research. The 'eclectic' resident finds possessors of omniscience outside the institutes as well as among psychoanalysts.

The quest for omnipotence may hinder or help learning. The detrimental effects can be seen when the resident becomes ineffective as his longing to know everything prevents him from learning anything well. The resident may become simply an imitator of the admired teacher, giving up independent thinking. If identification occurs, the resident's anxiety may prevent learning from anyone with diverging or supplementary views.

PETER LADERMAN

British Journal of Psychiatry. CIX, 1963.

Hughlings Jackson's Influence in Psychiatry. E. Stengel. Pp. 348-355.

The author maintains that Hughlings Jackson has exerted a great influence in psychiatry. In the monograph, *On Aphasia*, which was translated into English by Stengel, Freud demonstrated a close familiarity with Jackson's writings, which contained such fundamental psychoanalytic concepts as regression, psychic determinism, psychodynamics, unconscious mental processes, and resistance. Stengel believes Freud's failure to acknowledge an indebtedness to Jackson might be explained by 'Freud's attitude to his prepsychoanalytic period, which he treated as a closed book'.

JOSEPH W. SLAP

British Journal of Psychiatry. CX, 1964.

Observations on Adolescents in Psychoanalytic Treatment. Ilse Hellman. Pp. 406-410.

This rich but highly condensed paper is drawn from the experiences of the author and her colleagues at the Hampstead Clinic. Several difficulties encountered in the treatment of adolescents are emphasized. The guarded communication of adolescent patients makes it almost impossible to follow their rapidly changing dynamics. Special transference problems and crises arise from the struggle for independence, paranoid projection, idealization of the analyst, the need to exchange love objects, fear of ego regression, and anxiety caused by experiencing sexual feelings in sessions. Parents of adolescent patients frequently require help which should be provided by another therapist, preferably in a separate facility.

JOSEPH W. SLAP

Revista de Psicoanalisis. XXI, 1964.

New Phylogenetic Contributions to the Psychology of Women. Werner W. Kemper. Pp. 107-113.

Among other factors, Kemper discusses four specific elements which corroborate the psychological difficulties described by Freud. The first is the metamorphosis of the female organism, reviewed from the fish to the human, which shows how the female in these phylogenetic developments sacrifices the active primary orgiastic pleasure. The second element is a phylogenetic demonstration that the vagina is a very late acquisition. From an excretory organ it became an internalized process, passing through the intermediary step of a cloaca in which the female had the same cavity for genital activity, urination, and defecation. The third point is the contradictory function of the vagina which supports anatomically the preceding phylogenetic consideration. The fourth is that women have acquired the ability to perform coitus without any reference to the hormonal cycle. Other females, not in heat, would attack the male. Woman then appears to adapt herself sexually to the man.

For these reasons, the author feels that Freud's postulations were well grounded in phylogenetic data, and also that, precisely because the female can adapt herself to the sexual act of the male, she is an organism biologically stronger and better prepared for survival. 'The female obtains a better creative omnipotence corresponding to the initial primary cells.'

The Previous Genital Phase. Arminda Aberastury. Pp. 203-213.

The author describes the genital phase as being what the oral phase is to birth trauma. The apparent contradiction between her ideas and Freud's descriptive content is based on the fact that, according to Freud, the phallic phase is included in the resolution of the oedipus complex, while the stage that she is studying initiates oedipus fantasies. Walking and language, to her, are equivalent to being born; i.e., it is a dual proposition which permits separation from the mother figure, but at the same time attempts to preserve the love object.

The previous genital phase precedes the anal stage and is related to the biological process of teething. Special reference is made to losing the baby teeth as if the acquisition of new, adult teeth were a bodily representation of the different elements involved in the oedipus complex, namely, a step between the oral and genital phases in an organized way. In essence, acquiring new teeth means separation from the mother's breast, the search for the father figure; the genitals by displacement are orally changed, the mouth becomes genitalized, and there is a capacity for creating symbols, becoming a pedestrian, masturbation, curiosity, exhibitionism, and an intense, excessive interest in the primal scene.

Aberastury bases her concepts on clinical descriptions of nursery children, mother and father groups, and analysis of children and adults.

The Rupture of Emotional Blocking and the Increment of True Information in the Analytical Situation. D. Liberman, R. Avenburg, and J. A. Carpinacci. Pp. 214-219.

The modalities of the mechanism of defense that the patient uses when confronted with anxiety produced in the transference neurosis in a prolonged analytic treatment are studied. Emphasis is primarily on the content, form, dosage, and opportunity of interpretation. In essence, they deal with the 'basic unit' of the analytic situation; i.e., the handling of the unconscious fantasy, the way it is expressed in free association and the countertransference.

The authors emphasize three aspects: 1, a methodological approach—comparison of two different sessions to look for similarities, discrepancies, etc., in the material as a means of evaluating the patient's changes during analysis; 2, research and study of what the patient says; and 3, objectivity in evaluating the rupture of the defensive emotional frigidity through detailed study of the increase in information interchanged between patient and analyst.

Mourning, Learning, and Motor Aspects of the Ego. Isaac L. Luchina and Leonardo Wender. Pp. 227-238.

Why can certain patients with serious physical impairment, mutilation, and paralysis be rehabilitated to the fullest capacity of their abilities while, in others, gross psychoneurotic disturbances interfere, so that they are unable to be readapted? The authors think that, in the latter, before physical impairment occurred, there had been a series of ego inhibitions pertaining to basic motor learning, together with a particular relationship to the love object. Clinically, they find not only chronic depression and difficulties in learning, but inhibition in any activity. This they call 'nucleo paralitico temprano' (NPT). In lethargy there is an ego attempt to encapsulate. The object in the lethargic patient is handled by introjection; hence, the different levels of phobia, hypochondria, melancholia, and, finally, lethargy. In NPT, identification deficits in the object relationship are shown. The object is idealized and omnipotent, and the patient's defenses are primarily autistic, symbiotic, omnipotent, and, finally, psychopathic or perverse.

The clinical material shows that transference is very hard to establish in the lethargic patient while in the NPT patient, it is extremely hard to resolve.

GABRIEL DE LA VEGA

Revista Uruguaya de Psicoanalisis. VI, 1964.

Theoretical and Technical Aspects of Agoraphobia. Its Implications Derived from the 'Umbilical Stage'. Hector Garbarino. Pp. 99-126.

Hypotheses derived from clinical material, the analyses of children, universal infantile games, and the analytic situation itself are presented. Technique based on these theoretical formulations aims to prevent the phobic patient from making the analyst a perpetual companion. The transference is managed carefully so that the ego will not feel disintegrated and confused, and the patient's anxiety will be manageable.

The author systematically analyzes the relationship between the patient and the principal, or most important, companion. This led him to see this relationship literally as an umbilical one which, just as at birth, sooner or later must be cut, and the patient freed from his attachment through fantasies of birth, assumed to be concomitant to any analytic situation.

Parasitic-Symbiotic Union and Identity. Carlo Mendilaharsu. Pp. 127-158.

Clinical material is presented to show the precarious and peculiar pattern of an ego which becomes the shadow of the love object. The nucleus is considered to be an indiscriminate, confused state which, sooner or later, vitiates transference. It is possible, systematically and progressively, to reduce partial splitting of the ego, thereby freeing energy which could be used for structuring a more intact ego.

It is remarkable that this author does not take into consideration Mahler's paper, L. Young's thesis, or Fliess' book, all of which deal precisely with different aspects of symbiotic relationships, especially since the authors of the following articles do take into consideration the above-named contributions.

Symbiosis. A Study of that Psychotic Part of the Personality. Jose Bleger. Pp. 159-280.

Symbiosis is an almost immobilized and controlled interdependence between two or more people who might be satisfied in this type of relationship. What is referred to here as the 'agglutinated nucleus' corresponds to Bychowski's ideas of the psychotic nucleus. This nucleus is considered the remnant of a much more primitive organization, for which the author coins the word, 'glischrocarica', which explains the timelessness, the lack of discrimination between ego and nonego, the most primitive œdipus complex (a fusion of the parents and not two entities), and the characteristic fusion in opposition to confusion in any human relationship.

This nucleus can be modified with different mechanisms of defense taking part in the conflict; it might be partially resolved, allowing for certain progress and maturation of the ego. It is an ambiguous and polivalent nucleus and, in its more overt manifestation, there is almost total lack of discrimination and, at times, a psychotic fusion between the body ego and the external world. It can produce a phenomenologically hypochondriac syndrome, a psychosomatic disease, and, at times, impulse-ridden psychopathic characteristics. The author differentiates the latent autistic nucleus from the latent symbiotic nucleus.

Symbiosis and Symbiotic Neurosis. George H. Pollock. Pp. 281-341.

The most general and widest uses of the term symbiosis are studied. It is a particular type of relationship with different levels, correlated with what has been called 'dialogue'. Pollock studies the mutually stimulating, circular reverberations which take place between mother and child. As the ego matures, new cycles appear which are reflected by the way the previous cycle was handled while, at the same time, modifying the future one. Nevertheless, the symbiotic relationship is not simply a communication and is not limited to any particular developmental stage. For instance, manifestations can be created in a symbiotic relationship. The binomial and timeless interrelationship at times can produce 'symbiotic systems' and even structures that neither of the two participants could have produced alone.

The author suggests as potential areas of investigation: the specific characteristics of each partner in relationship with the symbiotic process as well as those which do not participate in the symbiotic process; the different ways by which the interaction of this process could or could not alter or modify any of the specific components of the two personalities; what mechanisms might appear crucial or incidentally appear in a particular symbiotic association; a more thorough description of the different levels of symbiosis during different periods of the patient's life; and, finally, whether it can be determined that there is a characteristic pattern of interaction which could differentiate a specific symbiotic state from other symbiotic manifestations.

GABRIEL DE LA VEGA

Arquivos do Departamento de Assistencia a Psicopatas do Estado de Sao Paulo. XXVIII, 1962.

Psychiatry and Mysticism. Alberto Lyra. Pp. 15-41.

Mystical phenomena in intellectual and psychophysiological manifestations are well summarized. Revelation is considered visual, corporal, imaginary, and perceptual. Physiological correlates, from sensations of levitation and prolonged abstinence to ecstasy, are studied. Mysticism is considered a special type of psychological experience which expands the ego but also, because of its value as a defense mechanism, preserves the sense of identity and retains contact with reality. It is considered to be not simply a religious experience, but a more general psychological manifestation which could lead to such pathological phenomena as hallucinations. Before it can be considered a defense or the breaking through of repressed material, one must take into consideration the total personality of the 'mystic'.

GABRIEL DE LA VEGA

Laci Fessler: 1897–1965

Marcel Hetman

To cite this article: Marcel Hetman (1965) Laci Fessler: 1897–1965, The Psychoanalytic Quarterly, 34:4, 629–638, DOI: [10.1080/21674086.1965.11926368](https://doi.org/10.1080/21674086.1965.11926368)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926368>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

NOTES

LACI FESSLER: 1897-1965

Dr. Ladislaus Fessler died March 10, 1965 in New York. He was born in Czechoslovakia December 6, 1897. After receiving his medical degree from the University of Vienna Medical School he was a member of the Staff of the Department of Psychiatry and Neurology of the Vienna University under Professors Wagner-Jauregg and Pötzl from 1927 to 1934, after which he served as an Assistant at the Nervenheilanstalt Rosenhügel, near Vienna, for several years. Having visited the United States during 1935-1937, he then settled in New York City practicing psychoanalysis and teaching at The New School for Social Research and elsewhere. He is survived by his widow, the former Emmy Feuerstein.

MARCEL HEIMAN

Dr. Henrique Julio Schlomann, President of the Brazilian Psychoanalytic Society, died on May 9, 1965.

MEETINGS OF THE NEW YORK PSYCHOANALYTIC SOCIETY

January 12, 1965. STRUCTURE AND FUNCTION IN PSYCHOANALYSIS. David Beres, M.D.

In psychoanalytic theory the terms 'function' and 'structure' are assigned different meanings by different authors. Freud, in *On Aphasia*, challenged the proponents of cerebral localization and proposed a functional explanation for the psychological disturbances in aphasia, particularly those of speech and language, rather than a tight correlation between the negative symptoms of aphasia and their assumed, underlying, morphological structures. He described the disturbances in function as due to the interruption of a process whose basic structure is a network of connecting nerve fibers. Function is thus more closely linked to processes than to anatomical structure. Later in Freud's writings structure lost its material meaning and was related to function. Such a correlation was, of course, linguistically legitimate as structure refers not only to a material object.

Dr. Beres then traced the development of Freud's concepts about conflict. In his early theories, conflict was between the 'systems' unconscious and preconscious; later he conceived of conflict as occurring between 'structures', such as the ego and the id, or the superego and the ego. Freud thus believed that psychic activity depended upon the interrelationship between functional groups which have no neuroanatomical basis. Part of the confusion about the meaning of the term 'structure' may perhaps be traced to Freud's writings. At one point he seemed to define it as a coherent organization of mental processes; at another, in terms of function. But never were substructures of the personality meant to be abstractions.

The danger of the structural theory is that its units are subject to reification, as illustrated in the writings of many in the field of psychoanalysis. A second

danger is that it may lead to confusion if the concept of 'structure' is used in ways other than Freud's limited formulations without clearly distinguishing the differences. Third, perhaps there has been too great an emphasis on the structural theory, and too little emphasis on the functional basis of structure. Each of these tendencies is illustrated from Freud's writings, in particular the use of metaphor in talking about the id, ego, and superego. Further, one of the substructures of the personality, the id, is said by Gill and other authors to have contents, thus making a conceptual abstraction a concrete entity. The danger is that when metaphor is treated concretely it may be used as an explanatory tool.

The word 'structure' is used in several senses by various authors when it might better be referred to as the 'structural theory'. Glover considers the concept of the memory trace a structure, thus confusing an inborn apparatus with a psychic structure. The structural approach, in its limited sense, is based on function, requiring dynamic and economic considerations for its application. In some of his writings, Gill postulates function without structure and emphasizes fixity as an essential element of structure. Dr. Beres believes that function and structure are inextricably linked; one cannot occur without the other. Further, it is not correct to speak of structure when talking about modes of discharge and of organization. According to Gill, there are processes deep in the mental apparatus with a fast rate of change, which would imply that they are without any structural basis. Dr. Beres criticizes definitions of structure which make stability and recurrence of function a central criteria. Further tautologies and logical inconsistencies in the formulation of hypotheses about 'structure' are taken from Rapaport's work. The author points out that mechanisms and processes cannot be subsumed under structural concepts, especially when they refer to modes of discharge of psychic energy.

Dr. Beres emphasized a need for further development of the tripartite structural theory. Whether the organization of each function be called a structure or a substructure of the basic systems is a matter of choice. However, certain precepts should be followed and, above all, the new formulations should be based on observational data, carefully defined terminology, and related to current theory whether in accord with it or not. In his later writings Freud emphasized function: developmental and economic factors, the role of the conscious and unconscious, mode of organization, and the dynamic interrelationship of the systems to each other and to reality. Since Hartmann's monograph, the emphasis on adaptation makes the functional approach imperative. However, the danger of this approach is that it may fall into a teleological trap; this can be avoided if there is no implication that 'the future acts causally on the present' or is an efficient cause thereof. The advantage of the functional approach is that it is closer to observation; psychic functions can be recognized by their overt manifestations and by the derivatives of unconscious mental processes. The usefulness of the structural theory is historically proven, but the functional approach is an integral part of the structural theory.

DISCUSSION: Dr. David Rubinfine pointed out that even in his work on aphasia, Freud substituted localization of function by the concept of a word schema which was continuously evolving as a result of function building up structure. The

bases of all structure are preformed thresholds and the delay of discharge. Dr. Rubinfine disagreed with Dr. Beres' interpretation of Rapaport's secondary model of affect; the term 'structuralized delay' refers to the delay of discharge by intrapsychic structures, while 'segregated affect changes' refers to signals evoked in the ego. He also disagreed with the criticisms of the formulations of Gill and Glover that structures are not defined by their fixity but their slow rate of change.

Dr. Charles Brenner felt that Dr. Beres had demonstrated the clinical usefulness of the functional approach. It is more important to assess each function in regard to the degree or manner of its disturbance than to speak of the maldevelopment of the ego. He supported the criticism of Rapaport who conceived of structures as learned responses as opposed to innate ones. Structures are not environmentally conditioned psychic reaction patterns but are groupings and divisions of functions.

Dr. Heinz Hartmann felt that Dr. Beres' paper was clarifying, especially if structure is defined in terms of function. However, one must differentiate between abstractions about content and those about function in connection with content. The problem is that there are several meanings of 'structure': Freud, Hartmann, Rapaport, and Gill use the concept differently; Dr. Hartmann still defines it in terms of relative stability and automatization, not as the tripartite theory. These different concepts of 'structure' may all have relevance to psychoanalytic concepts of structure.

Dr. Merton Gill disagreed with Dr. Beres that the structural theory is valid and the concept of structure is not. The concepts of relative autonomy of the ego demand the postulate of 'microstructures', for example, memory mechanisms. He criticized his own formulations about *ad hoc* activity as not 'structural enough'. In his opinion structure is not rigidly fixed but is defined by its slow rate of change. Rapaport's models are not tautologies but are models 'stripped to the bone'. Structural delay is a common observation and signal affect implies structuralization.

Dr. K. R. Eissler commented that Freud never spoke of a topographic theory but of an aspect of a general system of suppositions that describe psychic elements as completely as possible. Spatial psychic relations and structure are not mutually exclusive. Further, structure is related to organization, and therefore not to the id except in its repressed part. Structures are characterized by fixity, constancy, and continuous change which re-creates the constant elements. Psychological forms should not be prematurely discarded and should not be formulated only in terms of function.

HERBERT WEINER

February 9, 1965. SOME ASPECTS OF SCIENTIFIC THEORY CONSTRUCTION AND PSYCHOANALYSIS. Samuel A. Guttman, M.D.

Dr. Guttman discusses both scientific theory and scientific theory construction with the aim of giving perspective to the position of metapsychological theories in psychoanalysis. He believes that psychoanalysis can learn much from the development of theory in other sciences. He cites T. S. Kuhn's definition of paradigm, 'structure of scientific revolutions', as a widely recognized achievement that

for a time provides model problems and model solutions to a community of practitioners of a science. When there is a change of paradigm it not only influences perception but also produces a change in the evaluation of familiar data. A new model generally calls forth a new and more rigid definition of the scientific field, which may have certain unwelcome consequences. 'Normal' scientific work (the investigation of model problems with model solutions according to the paradigm) extends the knowledge of facts that stem from the paradigm. Thus paradigms force one to observe and study a small range of esoteric problems in depth and detail. To reject a paradigm without substituting another one is to reject science itself.

The author criticizes the type of psychoanalytic institute which, like a textbook, is primarily geared to detailed chronological study of Freud. While this 'textbook study' may give the appearance of systematic development, it actually hides the basic processes involved in scientific progress. Many problems of contemporary 'normal' science did not exist until the most recent paradigm was established. Research projects in psychoanalysis fall into one of three categories: determination of significant facts, matching of facts with theories, and articulation of theory. When work under a paradigm cannot proceed in these ways, it must be abandoned, and this often leads to a scientific revolution with the emergence of a new paradigm.

To illustrate the vicissitudes of paradigm movements in psychoanalysis, Dr. Guttman points out that if structural theory has as its operational *sine qua non* a new way of giving order to data with a change in the perception and evaluation of familiar data and a fundamental reconceptualization, then there has been a significant paradigm change. New theory need not conflict with all the tenets of its predecessors, nor solve all problems. However, a crucial question is always: which theory has the broadest conceptual framework to cover the phenomena?

Predictive success is important but not the only criterion for good scientific theory. The most serious defect in this approach is that it gives the false impression that other possibilities are closed. Further, we must make sense of what we predict. The mainspring of science is the conviction that by imaginative inquiry we can build a system of ideas significantly related to reality.

The conception of atomism, schematically defined as the study of structure and relationships, has led to the highest adaptive precision yet achieved. Dr. Guttman points to parallels between physics and psychoanalysis. Both sciences reject two ancient views about the nature of things—that stable atoms are the basis of phenomena and the central position of the conscious mind; both sciences are discovering that particles and structures are no longer isolated and stable but rather are changing systems in a changing environment; both sciences are now concerned with patterns of changing relations.

In physics a new, highly abstract language is required, associated with an almost incomprehensibly intricate calculus. Shall we too go toward an ultra-abstract view of psychoanalytic theory in which we give up the use of word images and use the various calculuses? Instead the author hopes that psychoanalysis will return to basic ideas and to fundamental principles which bring abstractions closer to the human being. For Freud, the ego, superego, and id were the mental structures. However, Hartmann has emphasized that every semi or relatively

stable formation in the mental apparatus is called a structure, and as Rapaport said, in a structure the rate of change is slower than in a process.

The author concludes by emphasizing that the type of thinking applicable to science in general and psychoanalysis in particular is not of a special kind. There is nothing arcane about psychoanalysis or the thinking which is requisite to resolve its conceptual problems.

DISCUSSION: Dr. Martin Stein pointed out that the special value of the paradigm study is in its relationship to the historical approach to science. He remarked that we must not forget that at times, without a narrowing of interests and attention, the study of science would become too diffuse.

Dr. Jacob Arlow agreed that the central theme of the paradigm played a major role in the history of theory construction and in the development of ideas in general. However, he felt that the dangers of the paradigm in psychoanalysis were exaggerated. In psychoanalysis, the later models required the earlier ones, leading to a hierarchy of models. He suggested that the difficulties described by Dr. Guttman were not inherent in model construction but related more to theory formulation. He wondered if we have adequately explored the paradigms we now have.

Dr. Max Schur referred to Freud's comments on the impact of various revolutions in thought and spoke of an exchange of letters between Freud and Marie Bonaparte. The latter, noting Niels Bohr's comment on the 'free will', or lack of determinism, of the atom, felt that 'free will' might be finding a refuge in these atomic speculations. Freud replied: 'It is here that the breakdown of today's *Weltanschauung* is actually taking place. We can only wait and see.' Dr. Schur advised that any analogy between the conceptualizations of psychoanalysis and those of atomic theory should be stated only in the most general terms.

Dr. Rudolph Loewenstein felt this erudite paper might serve the function of a 'gadfly'—to arouse doubts and disturb our complacency. He inquired as to what part of psychoanalytic theory does the paradigm, its use and misuse, apply. He mentioned the possible danger that the term 'paradigm' might become a cliché and be misused; therefore, it requires a clear and concise explanation.

Dr. Charles Brenner suggested that we move cautiously in accepting Kuhn's evaluation and theory of scientific revolutions. Dr. Leo Orenstein referred to the central importance of the study of Freud's works and the development of his ideas, in itself a prime example of creative thinking in theory construction.

In closing, Dr. Guttman gave his definition of a paradigm as a commonly accepted model that a community of scientists employ for making observations, which in turn limits the observations they can make. He gave the example of the original basic paradigm of psychoanalysis—the unconscious—which led to the psychological revolution initiated and developed by Freud.

BERNARD D. FINE

March 9, 1965. UNCONSCIOUS HALLUCINATIONS IN NORMAL THINKING. Engene V. Nininger, M.D.

According to the author, all thought, even the most abstract, is unconsciously experienced as occurring in a space outside the brain case. This sphere is fre-

quently occupied by real objects, which may be refashioned from moment to moment into illusions that fit thinking requirements, and may also contain hallucinations without link to surrounding reality. The hallucinations differ from those of psychosis in that they may be controlled or dismissed from awareness. The consciously accepted conviction that thinking takes place within the head is a form of denial initiated by the infant because an unpleasant prototype of thought must be denied. This is the hallucinated image of the absent mother, called into existence by hunger, but ultimately rejected when memory proves it to be associated with a continuation of hunger pain.

Nininger observed this mechanism in an adult patient who believed she was experiencing compulsive thoughts inside her head relating to her mother's death. She did not close her eyes, however, lest the 'thoughts' become images of 'movie-like' intensity, i.e., hallucinations. Instances of a similar denial mechanism may be observed in normal individuals when their gestures and eye movements betray that they are experiencing thoughts not inside their heads as they believe, but as if outside themselves. The author himself was able to catch a phase between sleeping and waking when his dream images intermingled with those of real objects for several moments. In another instance he observed himself remembering eidetic, auditory, and tactile experiences that did not seem to have occurred within his head as he recalled them, so, by inference, must have occurred as events in space.

Turning from concrete memory to abstract thought, Nininger considers the experience involved in his comprehension of the equation, $A + B = C$, and its relation to various tactile and motor events which occurred to him while he was learning mathematics. As to abstract thought on a higher level, a mathematician's experience of 'curved space' as a concept was in terms of working out 'a piece of space' in front of him, giving it a bent shape and tracing bent paths through it. Thus thought, whether concrete or abstract, takes place beyond the skull.

In the developmental phase where denial of the spatial aspects of thought first occur, Freud concluded that the infant first hallucinates gratification in the interval between his hunger and its relief by the mother and then abandons hallucination in favor of reality upon finding that the latter genuinely gratifies him while the former does not. Isakower, Lewin, Spitz, and others have noted that in the hunger stage the mother's breast and face are hallucinated in space prior to actual satisfaction at the breast. Because hunger pain is eventually remembered as an accompaniment of the hallucination, the infant is motivated to curtail it in the interest of the reality of finding the mother. He must scan the environment and recognize her, a procedure which implies that a vestige of the hallucination must remain because scanning with recognition is made possible through 'fitting' the image of the actual mother with the hallucinated one. Adult thinking parallels that of the infant in that there is a surface denial of hallucination, but an underlying active use of it, when finding a face in a crowd, a fact in memory, or even a solution to an abstract problem. Spatial imagery is used, yet denied, and in both infant and adult thinking is founded on a search for the mother, resting at a level of development where the distinction between the self and the mother is not yet clearly established.

The author attempts to explain why thoughts are assumed to take place specifically in the head. The unconscious imagery is that the head is a container filled with precious highly intimate 'things' yet not 'really' existing. The complex origin of this container can be found in the nursing situation where infant and mother are partly fused. The container is the infant's mouth and stomach enclosing the nipple and milk, and simultaneously it is the enfolding mother who contains the infant. This hallucinated fantasy is then projected and partially denied, only to be later re-incorporated as a fantasied 'shrunk' container with traces of its previous history. The container is believed to be the head rather than another part of the body because it represents a concept of the infant's mouth and the mother's head in the nursing situation. The emphasis on the upper part of the head is attributed to the influence of the superego, which relegates bodily impulses and sensations 'below', while retaining 'above' all that is nice, passionless, and clean. Oneself and one's thoughts then occupy a pure and lofty place, namely, the brain case.

DISCUSSION: Dr. George Wiedeman noted that the most archaic perception presumably consists of syncretic phenomena in which the different sensory modalities are perceived as an undifferentiated totality. The various sensory modalities become differentiated during maturation. The less mature the individual, the more prominent are the eidetic phenomena which are intermediate between true percepts and memory images. The decreased importance of hallucinatory processes may be explained by a decrease in the cathexis of the sensory projections and an increase in the cathexis of adult abstract thinking, which occurs in normal maturation. In commenting on gestures in space which serve the adult to describe objects or actions, Dr. Wiedeman referred to Werner's statement that movement is basic for primary form perception.

Dr. Milton Malev felt more emphasis should be given to structure formation, developmental sequences, duration factors, and other processes. From the beginning there are primary autonomous ego apparatuses which are the nuclei of later ego structures, and are the organism's first guarantees of adaptation to an expectable environment. Dr. Nininger's schema tends to 'adultomorphize' infant behavior by the use of such sophisticated teleological terms as 'scanning' and 'recognizing'. The infant's recognition of the mother is attributed to memory, though actually it stems from an inborn reflex. Memory does not appear until later. The difficulty that results from blurring the distinction between memory and hallucination is illustrated by the statement that 'remembering is a hallucinatory reproduction of original experience'. Dr. Malev felt that, unlike hallucination, which is primary process, memory is secondary process par excellence, the binding of the drive in search for the real object.

Dr. Marcel Heiman commented that different people have different areas of spatial thinking experience, and wondered whether such areas vary with the level of intelligence. He also raised a question about the imagery of something which the thinker has not experienced—death, for example. In the case of a painter, death was spatially represented by the focal point of perspective in his painting.

Dr. Leo Spiegel was not convinced that unconscious visual imagery accompanies all thought. Such imagery as Dr. Nininger's patient demonstrated could

be accounted for by ego regression. Affect also may be regressively experienced as imagery. The mother's death viewed as trauma could have provided the motivation for her regression.

Dr. Walter Stewart recalled three cases where similar symptomatology appeared. In each instance there had been early object loss, and he asked if this might not also have been true for Dr. Nininger's patient.

Dr. John A. Cook questioned whether all abstract thought was capable of being experienced visually, and suggested that perhaps it was a very imperfect model which could be visualized. He gave as an example the abstraction: 'the square root of minus two'. This can be used in a mathematical formula, be modeled or visualized as a bit of writing on paper, but the concept itself is inescapably abstract and incapable of being concretized.

Dr. Nininger did not agree with the view that for mental imagery to be called hallucination it necessarily must be considered 'real' by the patient. Many patients are aware that their hallucinations are not real, yet they know they are hallucinating. His patient's imagery served two defensive functions: an attempt to master the trauma of the mother's death, which occurred very early in her life, and as punishment for feelings of hostility toward the mother.

JOHN A. COOK

March 23, 1965. OPPOSITE SEX TWINS. Jules Glenn, M.D.

The author demonstrates that opposite-sex twins manifest the same characteristics noted in same-sex fraternal twins and in identical twins. These traits, typical of the 'twinning reaction', encompass difficulty in establishing a sense of identity and an adequate self-image, a tendency to polarize active and passive roles, difficulty in resolving the oedipus complex because of the ease of substitute gratification through the twin, defectiveness of the superego, sticky transferences, and displacement as the result of a tendency to see the world as full of twins. Although opposite-sex twins are actually slightly more common than identical twins, the psychoanalytic literature contains only one article on them, by Hilda Abraham in 1953. Glenn bases his study on this article, the analysis of an opposite-sex twin, and psychotherapeutic interviews with a ten-year-old girl twin and two adult female twins, one of whom was subsequently analyzed. Mythological, anthropological, and literary references support the author's clinical findings.

Dr. Glenn's analysand entered treatment because of anxieties about dying of a heart attack, burglars, and impulses to injure his wife. These were related to his feelings of incompleteness, of having been robbed of half of his penis in the womb by his twin sister. Fantasies about circumcision determined his impulses to rob and cheat his analyst, wife, sister, and business partner. The business partner appeared to be a surrogate twin who ate the same food, drove the same car as the patient, and was in a business similar to the twin sister. Though the patient and his twin sister had slept in the same room until the age of nineteen and 'she was as beautiful as a movie-star', he was never aware of any attraction to her. However, in analysis it developed that she was the central figure in his masturbation fantasies which were precipitated by his mother's absence. The patient was primitive, tending to use primary process thinking, particularly in

his sexual activity with his wife. These characteristics were also evident in Dr. Abraham's case and in the little girl seen by Dr. Glenn.

The author believes that twins develop an ego fixation at the phase in which primary process thinking predominates and that regression to this stage occurs with greater facility in twins. The difficulty in progressing from primary to secondary process thinking stems from periods of too intense frustration by the mother and too intense gratification by the twin. The defective superego which the analysand revealed in his attempts to cheat others seemed to be caused not only by the unsatisfactory resolution of the *œdipus* complex but, more specifically, by the twin's concept of himself as an 'exception'. Since he had been cheated by his parents and sister, he felt entitled to steal back what had been taken from him. Furthermore, as a twin, he felt so special and superior that he considered himself beyond the law.

DISCUSSION: Dr. Jay Shorr cautioned against attributing pathological factors specifically to twinship. The important factor determining the traits described by Dr. Glenn might be the degree of narcissistic conflict. Dr. Shorr believed that the twin in Dr. Abraham's case suffered from a symbiotic psychosis in which she never left the anal womb of her mother, while her twin brother seemed to represent primarily a part object. He stressed the role of parents in encouraging or discouraging individual and separate identity formations in their twin children and their role in the superego development of their twins, noting that the parents of Dr. Glenn's patient had allowed the patient and his twin sister to share a room through their adolescence. Dr. Shorr thought that in identical and same-sex fraternal twins the factors of narcissistic injury or narcissistic enhancement may be crucial in precipitating pathological parental attitudes or in accentuating pathological attitudes in the twins. However, in opposite-sex twins there is the additional element of the heterosexual nature of the twinship.

Dr. Edith Jacobson felt that the paper was an excellent contribution to the psychology of opposite-sex twins and to the problems of twinship in general. She commented about the important differences between opposite-sex twins and same-sex twins. Central in importance is the temptation to have incestuous relations. For example, in Dr. Glenn's patient incestuous fantasies are interwoven with twin fantasies involving wishes to merge with the twin. The fantasy of the twin sister having a penis enables the patient to transform her into a homosexual object, which helps to ward off the heterosexual incest fantasy; it also serves to ward off guilt feelings based on his having gotten more than she. Dr. Jacobson pointed out that in the girl twin described by Dr. Glenn, the wish to have a twin sister is a way of seeking to escape the heterosexual incest temptation. She also mentioned the problem of the 'stronger' twin, pointing out that in opposite-sex twins the male is the stronger since he has a penis. In identical twins she has observed that the so-called 'stronger' twin always reacts with intense guilt and attempts to deny superiority.

Dr. Stuart Asch, who analyzed one of the cases used by Dr. Glenn, described how his analysand utilized the fantasy of having a twin with her in order to complete a defective self-image. He felt that the displacement, which Dr. Glenn believed was primarily defensive to avoid the incestuous object, actually resulted

from the need for the self-representation to be complete by way of finding a twin. He emphasized the factor of fixation rather than regression in the prevalence of primary process thinking in twins. The oedipal object can be approached only if the twin is also present and in this sense the twin is like a fetish, a part object.

Dr. Bernard Brodsky agreed with Dr. Jacobson that incest is the central problem in opposite-sex twins. He described a case in which there had been actual incest, but this patient did not show regression to primary process thinking, loss of ego boundaries, or merging wishes, described by Dr. Glenn as characteristic of twins. Another twin he treated showed intense regressive wishes for merging and union with her dead twin, toward whom she had felt intense incestuous fantasies which, however, had not been acted out.

JAY SHORR

THE AMERICAN PSYCHOANALYTIC ASSOCIATION will hold its 1965 Fall Meeting at the Commodore Hotel, New York City, December 3rd through December 5th.

STATE UNIVERSITY OF NEW YORK, DOWNSTATE MEDICAL CENTER, announces a two-year program of research training in psychiatry. The program is open to physicians who have completed two or three years of residency training in psychiatry. Applications for the academic year beginning September 1966 should be submitted before January 15, 1966. For further information write to: Office of Admissions, Downstate Medical Center, 450 Clarkson Avenue, Brooklyn, New York.

Donald F. Klein, M.D. has been appointed to the newly-created post of Director of Research at HILLSIDE HOSPITAL, Glen Oaks, New York.

At the Annual Meeting of the AMERICAN PSYCHOSOMATIC SOCIETY, in May 1965, the following officers were elected: Robert A. Cleghorn, M.D., President; Lawrence E. Hinkle, Jr., M.D., President-elect; William A. Greene, M.D., Secretary-Treasurer. The Twenty-Third Annual Meeting of the Society will be held in Chicago, March 18-20, 1966. Abstracts of papers for presentation should be submitted by November 15, 1965, to the Chairman, Robert A. Cleghorn, M.D., 265 Nassau Road, Roosevelt, New York 11575.

Index

To cite this article: (1965) Index, The Psychoanalytic Quarterly, 34:4, 639-654, DOI: [10.1080/21674086.1965.11926369](https://doi.org/10.1080/21674086.1965.11926369)

To link to this article: <https://doi.org/10.1080/21674086.1965.11926369>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

INDEX

- Aarons, Z. Alexander, reviewer of Maserman, 286-89.
- Aberastury, Arminda, on genital phase (Abstr.) 625-26.
- Abraham, Karl, on kleptomania, 573.
- Abstinence, rule of, see Technique, classical psychoanalytic.
- Abstraction, and ego ideal, 96, ff.
- Acoustics, and emotion (Rev.) 128-30.
- Acting out, and action (Rev.) 118-19; and movements of testes, 198-200; in obsessional neurosis, 224-25; alcoholic bout as, 420, ff.
- Adaptation, and sense of guilt, 71-75.
- Addiction, cocaine, and Freud, 407, 410, in the United States, 409; morphine, use of cocaine in, 410-11.
- Adelson, Joseph, on adolescence (Abstr.) 623-24.
- Adolescent, and infantile tie to mother (Abstr.) 133; genesis of passivity in (Rev.) 290-93; universal experiences of (Rev.) 296-98; and identity (Rev.) 585, 588-89; ego weakness in (Rev.) 599-600; and dependence (Abstr.) 623-24; treatment of (Abstr.) 625; Negro, personality development of (Rev.) 303-304, and identification (Rev.) 304; see also Child.
- Affect, of seriousness (Abstr.) 463-64; and defense (Abstr.) 472; and movement patterns, 517, ff.; and recovery of early memories, 566, 568, 570; and consciousness (Abstr.) 620; see also Emotion.
- 'Agoraphobia in the Light of Ego Psychology', (Rev.) 276-81.
- Agoraphobia, and umbilical stage (Abstr.) 627.
- Aggression, and depression, 40-41, 49-50; and development, 351-54, 367; and school phobia (Rev.) 599; and hypnotic state, 619; see also Hostility.
- 'Alcoholic Bout as an Acting Out, The', (Browne) 420-37.
- Alcoholism, and death of parent (Abstr.) 136; and acting out, 420, ff.; and motility, 421, 433-36; and mother's breast, 422-28, 436; and orality, 423-28, 435-36.
- Alexander, Franz, on psychoanalysis in Western culture (Rev.) 116; on learning theory (Abstr.) 140-41; on modern society (Abstr.) 470; on stealing, 574.
- Alexander, James M., on affective attitudes (Abstrs.) 463-64, 472.
- Allen, Arnold, 'Stealing as a Defense', 572-83.
- Almansi, Renato J., reviewer of Valabrega, 125-26.
- Alt, Herschel, 'Residential Treatment for the Disturbed Child' (Rev.) 121-23.
- American Psychoanalytic Association, Fall meeting (Notes) 638.
- Anal rhythm, and movement patterns, 30-31, 32-33, 524-29, 542-43.
- Anality, and withdrawal from mother (Abstr.) 307; regression to, in prepuberty, 186-87, 189.
- Anderson, A. Russell, reviewer of Jacobson, 584-89.
- Anderson, Beverly L., on inferiority in women (Abstr.) 469.
- Andreas-Salomé, Lou, Freud journal of (Rev.) 274-76.
- Anesthesia, use of cocaine and morphine in, 408-409.
- Animal, early influences on development of, 339-45, 349-50, 356-58; effect of handling on, 342-44; in fantasy and dream, 438-40.
- 'Annual Survey of Psychoanalysis, The, Vol. VII, 1956', (Rev.) 119.
- Anorexia nervosa, and psychosomatic theory (Rev.) 451-53.
- Anthropology, and hand-breast complex, 237, ff.; and psychiatry (Rev.) 606-10.
- Anxiety, and role of analyst (Rev.) 114; and driver's test (Abstr.) 133-34; of candidate (Abstr.) 142; pregenital, 185-86; and visualization, 224-26; and impairment of ego (Rev.) 277-81; and stealing, 572, 576, 578; castration, and prejudice, 104-107, in prepuberty, 184-89, 200-203, and cryptorchidism, 201, ff.; phobic, and ego (Rev.) 278-80; separation, in infancy, 485; see also Fear.
- Appley, M. H., co-author of 'Motivation, Theory and Research' (Rev.) 610-11.
- Araico, Jose Remus, on early-orphan adults (Notes) 316-18.
- Archeology, and hand-breast symbolism, 234, ff.
- Arlow, Jacob A., on symptom formation (Abstr.) 463.
- Aronson, Jason, on Soviet psychiatry (Abstr.) 311.

- Art, psychoanalytic writings about (Rev.) 298-99; see also Creativity.
- Artifacts, and hand-breast symbolism, 234, ff.
- Auditory perception, and recovery of early memories, 564-66, 568, ff.; see also Acoustics, Hearing.
- Autistic child, see Child, autistic.
- Bak, Robert C., on object relations (Notes) 473-75.
- Balint, Michael, on sisters (Abstr.) 617.
- Ball, symbolic significance of, 236-37.
- Barchilon, Jose, on hypotonia (Abstr.) 615.
- Bell, Anita I., reviewer of Winokur, 127; 'The Significance of Scrotal Sac and Testicles for the Prepuberty Male', 182-206.
- 'Bender Gestalt for Young Children, The', (Rev.) 123.
- Beres, David, reviewer of Eissler, 447-50; on structure and function (Notes) 629-31.
- Bibring, Edward, on depression, 37.
- Bion, W. R., 'Elements of Psychoanalysis' (Rev.) 281-82.
- Bird, symbolic significance of, 236-37, 244.
- Bisexuality, in prepuberty, 189-93; and stealing, 574-75, 582; see also Homosexuality.
- Blank, H. Robert, reviewer of Lloyd, 461-62.
- Bleger, Jose, on symbiosis (Abstr.) 627.
- Blos, Peter, reviewer of Kiell, 296-98.
- Body, touching of (Abstr.) 311; interest of infant in, 484-85.
- Body image, in neurotics and schizophrenics (Abstr.) 137; and hysteria, 401-402; and creativity (Abstr.) 467.
- Bonnard, Augusta, on speech (Abstr.) 614-15.
- Borel, Jack C., on security (Abstr.) 141.
- Bowlby, John, on separation, 346-47.
- Boyer, L. Bryce, reviewer of Kiev, 606-10.
- Braceland, Francis J., co-author of 'Modern Psychiatry' (Rev.) 126-27.
- Breast, and obsessional neurosis, 219, ff.; and hand, 219-20, 234, ff.; wheel as symbol of, 231; ball and bird as symbol of, 236-37; and alcoholism, 423, 425-26; and cyclothymic states (Abstr.) 465; see also Feeding, Nursing.
- Brodsky, Bernard, reviewer of Meerloo, 301-302; on working through (Notes) 319-21.
- Brody, Morris W., reviewer of Solomon and Glueck, 604-605.
- Brody, Selwyn, on the rejecting patient (Abstr.) 469.
- Brody, Sylvia, 'Passivity. A Study of its Development and Expression in Boys' (Rev.) 290-93.
- Browne, William J., 'The Alcoholic Bout as an Acting Out', 420-37.
- Bullfighter, and homosexuality (Abstr.) 621.
- Burial, child's concepts of, 509-10, 514-15.
- Burton, Arthur, on touching the body (Abstr.) 311.
- Bussel, Lili R., reviewer of Haworth, 453-56.
- Bychowski, Gustav, on frigidity (Abstr.) 464; on Winckelmann (Abstr.) 621.
- Calef, Victor, reviewer of Kaufman and Heiman, 451-53.
- Campo, Alberto J., on omnipotence (Abstr.) 143.
- Carons, Alexander, on negativism (Abstr.) 134-35.
- Carr, Arthur C., on Schreber (Abstr.) 615.
- Caruso, Igor A., '*La Personalizacion. Biologia y Sociedad*' (Rev.) 450-51.
- Castration anxiety, see Anxiety, castration.
- Cath, Stanley H., on comic strips (Abstr.) 135.
- Cesio, Fidias R., on lethargy (Abstr.) 314.
- Character, assessment of (Rev.) 289-90; formation, in identical twins (Rev.) 273.
- Charny, E. Joseph, reviewer of Ostwald, 128-30.
- 'Child Psychotherapy. Practice and Theory', (Rev.) 453-56.
- Child, and movement patterns in development, I, ff., 517, ff.; and sense of guilt, 66, 71, 75; religious prejudice in, 102, ff.; and Bender Gestalt test (Rev.) 123; and pregenital anxiety, 185-86; and passivity (Rev.) 290-93; emotional relationship with parent of, 356-61, 373-76; and symbol formation (Rev.) 458; and sense of existence (Abstr.) 464-65; and work inhibition (Abstr.) 468-69; and death, 499, ff.; sadism in, 504-507, 510; diagnostic assessment of (Rev.) 597-98; cultural studies of (Rev.) 605-606; autistic, treatment of (Abstr.) 312-13; development, modern perspectives in

- (Rev.) 293-95; disturbed, residential treatment of (Rev.) 121-23; rearing, and suicide (Rev.) 112-13; see also Adolescent, Infant.
- 'Children of Bondage. The Personality Development of Negro Youth in the Urban South', (Rev.) 302-303.
- 'Children Tell Stories. An Analysis of Fantasy' (Rev.) 593-94.
- 'Child's Concept of Death, The', (Hug-Hellmuth) 499-516.
- 'Circumcision Fantasy, A', (Yazmajian) 108-10.
- Circumcision, as defense (Notes) 318-19.
- Cocaine, Freud on, 406-12; addiction to, 407, 410; use of, in morphine addiction, 410-11.
- Cofer, C. N., co-author of 'Motivation: Theory and Research' (Rev.) 610-11.
- Cognition, maturation of, 486, 488; see also Intelligence, Perception, Thought.
- Cohen, Yehudi A., 'The Transition from Childhood to Adolescence' (Rev.) 605-606.
- Colds, and respiratory introjection (Abstr.) 615.
- Columbia University Psychoanalytic Clinic for Training and Research, twentieth anniversary (Notes) 482.
- Comic, caricature, and obsessive-compulsive phenomena (Abstr.) 466; strip, and anxiety (Abstr.) 135.
- Communication, of emotion (Rev.) 128-30; between mother and infant, 487-89, 496; see also Language.
- 'Community Mental Health Center, The. An Analysis of Existing Models', (Rev.) 459-60.
- Conflict, and slips of the tongue, 415, ff.; intrapsychic (Rev.) 600; unconscious, and Goethe (Rev.) 448-50; see also Drive.
- Connolly, Neville K., on cryptorchidism, 201.
- Conversion, mechanism of (Abstr.) 469.
- Core gender identity, see Maleness, sense of.
- Corman, Harvey H., et al., on visual imagery (Abstr.) 141.
- Countertransference, and depressed patient, 47, 63-65; and transference, 249-56; definition of, 250, 252-53; and projective identification (Abstr.) 307-308.
- Creativity, and ego ideal, 79, ff.; and object relations, 81, ff.; and father image, 82-90, 92-97, 99; and primary and secondary processes, 90-91, 97-98; and scopophilia, 92, 94-95; and Goethe (Rev.) 448-50; and body image (Abstr.) 467; see also Art, Literature.
- Cryptorchidism, and castration anxiety, 201, ff.; see also Testes, movements of.
- Culture, and psychoanalysis (Rev.) 116; and early development, 335, 353-56; and conformity (Abstr.) 470; primitive, and psychiatry (Rev.) 606-10.
- Curtis, James L., reviewer of Rohrer and Edmonson, 303-305.
- Davanzo, Hernán, on neurotic dependence (Abstr.) 308.
- Davis, Allison, co-author of 'Children of Bondage' (Rev.) 302-303.
- Davis, Elizabeth B., reviewer of Davis and Dollard, 302-303.
- Death, of parent (Abstr.) 136; and Freud (Notes) 144-47; 'truth' in dealing with (Abstr.) 469; child's concept of, 499, ff.; and fantasy, 499-500, 507-508, 512-13; fear of, 500-501, (Rev.) 603-604, (Abstr.) 621; child's games about, 509-10; fantasies about, and suicide (Rev.) 111-12; instinct, and infantile ego (Rev.) 591-92; wish, in child, 500-501, 503, 515.
- Defecation, and castration anxiety, 184-85; and motor rhythm, 524-30.
- Defense, and prejudice, 102, ff.; and circumcision fantasy, 109; and intellectualization (Abstr.) 134; obstinacy as (Abstr.) 134-35; hatred as, 258, 263; and hysterical personality, 397-98; and child therapy (Rev.) 455; stealing as, 572, ff.; and character formation (Rev.) 599; precursors of (Abstr.) 614; fetishism as (Abstr.) 619.
- de la Vega, Gabriel, reviewer of Caruso, 450-51.
- Denial, and depression, 38; and luck (Abstr.) 135; and dream, 266-67; and object loss (Abstr.) 465; as defense, in prepuberty, 186-87, 189.
- Dependence, and development, 351-53, 369; neurotic, resistances in (Abstr.) 308, and treatment (Abstr.) 619.
- Depression, treatment of, 37, ff.; and fear, 39-40, 47, 60-61; and projection, 41-42; and guilt, 42-43; superego in, 43-44; and hostility, 43-44; and narcissism, 43, 55-57, 64; and sexuality, 44-45, 52-53; and masochism, 50-51; and psychological stress, 53-55; and

- negative reactions, 63-64; and parental values (Abstr.) 136-37; in early-orphan adults (Notes) 316.
- Deprivation, sensory (Abstr.) 140; and working alliance, 177-79; and obsessional neurosis, 226-27, 229-30; and personality development (Rev.) 302-303; in animals, 342; in infancy, 345-49, (Rev.) 598-99; and stealing, 573-75, 581-82.
- 'Determinants of Human Sexual Behavior', (Rev.) 127.
- Deutsch, Albert, editor-in-chief of 'The Encyclopedia of Mental Health' (Rev.) 299-300.
- Diagnosis, in hysteria, 392-93, 396-97, 400; and child therapy (Rev.) 454; of children (Rev.) 597-98.
- Dickes, Robert, on hypnoid state (Notes) 480-82.
- Diersburg, von, Egenolf Roeder, editor of Groddeck, 298-99.
- 'Direct psychoanalysis', (Abstr.) 622.
- Disk, solar, symbolic significance of, 234-36.
- Dollard, John, co-author of 'Children of Bondage' (Rev.) 302-303.
- Dratman, Mitchell D., on affects (Abstr.) 620.
- 'Dream Interpretation. A New Approach', (Rev.) 282-86.
- Dream, in children (Rev.) 120-21; and omen (Abstr.) 133; breast symbolism in, 223-24, 230-32; and trauma, 265-67; light in, 266; denial of reality in, 266-67; ego in (Rev.) 283-85; psychology of (Rev.) 284-85; in hysteria, 403-404; and alcoholism, 428-33, 435; animal in, 438-40; recall and forgetting of (Abstr.) 467; analyst in (Notes) 475-77.
- Drive, and motor rhythm, 31-34, 517, ff.; frustration of, and guilt, 72-73; see also Conflict, Motivation.
- Drugs, see Cocaine, Morphine.
- 'Early Influences on Development and Disorders of Personality', (Saul and Wenar) 327-89.
- Easser, Barbara Ruth, co-author of 'Hysterical Personality: A Re-evaluation', 390-405.
- Edelheit, Henry, reviewer of Prelinger and Zimet, 289-90.
- Edmonson, Munro S., co-editor of 'The Eighth Generation Grows Up' (Rev.) 303-305.
- Effort, and movement patterns, 544-56.
- 'Ego-Psychological Approach to Character Assessment, An', (Rev.) 289-90.
- Ego, and motor apparatus, 2-3, 33-34, 517-20, 531-32, 535-38, 543-45, 556, ff., (Abstr.) 626; in physical illness (Rev.) 125; and reminiscing (Abstr.) 141; and working alliance, 158-59, 163, 170-74; and hatred, 257, ff.; Freud's concept of (Rev.) 270; and anxiety (Rev.) 277-81; 'dynamic mutilation' of (Rev.) 277-81; in dreams (Rev.) 283-85; discriminatory function of (Abstr.) 306; and slips of the tongue, 413, ff.; and creativity (Rev.) 449-50; and biology (Rev.) 450-51; and symbol formation (Rev.) 458-59; and symptom formation (Abstr.) 463; and libido plethora syndrome (Abstr.) 472; of infant, 483, 486, 488; in recovery of early memories, 564, ff.; and stealing, 572, 574-76, 582-83; and identity (Rev.) 584-89; fragmentizing function of (Abstr.) 618; existence of, at birth (Rev.) 591.
- Ego ideal, and creativity, 79, ff.; and abstraction, 96, ff.; and ideal self (Rev.) 600-601; see also Superego.
- Ego psychology, and creativity, 79-81; essays on (Rev.) 268-73; technical implications of (Rev.) 269-70; and agoraphobia (Rev.) 276-81; and religion (Notes) 322-23.
- Egocentricity, of child, 500, 511.
- 'Eighth Generation Grows Up, The. Cultures and Personalities of New Orleans Negroes', (Rev.) 303-305.
- Eisenbud, Jule, 'The Hand and the Breast with Special Reference to Obsessional Neurosis', 219-48; on humor (Abstr.) 309-10.
- Eissler, K. R., 'Goethe. A Psychoanalytic Study 1775-1786' (Rev.) 447-50; on Freud and history (Abstr.) 465-66.
- 'Elements of Psychoanalysis', (Rev.) 281-82.
- Elkisch, Paula, on boy's interest in mechanics, 188.
- Emotion, and acoustics (Rev.) 128-30; and parent-child relationship, 356-61, 373-76; and hysterical personality, 398, 400; see also Affect.
- Empathy, in psychotherapy (Abstr.) 311-12; see also Identification.
- 'Encyclopedia of Mental Health, The', (Rev.) 299-300.
- Engle, Bernice, in memoriam (Notes) 325.

- Environment, and security seeking (Abstr.) 141; and personality development, 370-76; and therapy (Rev.) 460-61.
- Erikson, Erik H., 'Insight and Responsibility' (Rev.) 117-19; on child therapy, 453-54.
- Esman, Aaron H., reviewer of Erikson, 117-19, of Brody, 290-93.
- 'Essays on Ego Psychology. Selected Problems in Psychoanalytic Theory', (Rev.) 268-73.
- Ethics, and psychoanalysis (Rev.) 117-18.
- 'Evolution of Psychosomatic Concepts. Anorexia Nervosa: A Paradigm', (Rev.) 451-53.
- Excitation, and motor discharge, 6-7.
- 'Exploitation of the Sense of Guilt', (Needles) 66-78.
- Fairbairn, W. Ronald D., on male homosexuality (Abstr.) 142; on object relations (Abstr.) 617.
- Fantasy, of circumcision, 108-10; and suicide (Rev.) 111-12; and movements of testes, 193-97; and hysterical personality, 397-98, 400; and slips of the tongue, 413, ff.; animal in, 438-40; and child development (Rev.) 593-94; of child, about death, 499-500, 507-508, 512-13.
- Father, and creativity, 82-90, 92-97, 99; and hysterical personality, 395-96; and preöedipal attitudes (Abstr.) 614; see also Parent.
- Fear, of death, in child, 500-501; of insanity, and depression, 39-40, 47, 53-54, 60-61; see also Anxiety.
- Fee, nonpayment of (Abstr.) 619.
- Feeding, and motor rhythms, 8-19, 526-28; and thought processes (Abstr.) 141; see also Breast, Nursing, Sucking.
- Feldman, Bronson, on origin of speech (Abstr.) 310.
- Feldman, Sandor S., on luck (Abstr.) 135.
- Fels Research Institute, longitudinal studies of, 351-55.
- Fenichel, Otto, on acting out, 421.
- Ferenczi, Sandor, on thinking and motility, 2.
- Fessler, Ladislaus, in memoriam (Heiman) 629.
- Field, Mark G., on Soviet psychiatry (Abstr.) 311.
- Fine, Bernard D., reviewer of Scher, 130-32, of Thyne, 295-96.
- Fischberg, Bruce, on comic strips (Abstr.) 135.
- Fisher, Kenneth A., on therapy (Abstr.) 469.
- Fisher, Seymour, on body experiences (Abstr.) 137.
- Fishman, Helen, executive editor of 'The Encyclopedia of Mental Health' (Rev.) 299-300.
- Fodor, Nandor, on Jung's Sermons to the Dead (Abstr.) 310.
- Follow-up studies, of movement patterns in development, 21-31; in research, 332-33.
- Fox, Ronald E., on empathy in psychotherapy (Abstr.) 311-12.
- Fraiberg, Selma, reviewer of Alt, 121-23.
- Frankl, Liselotte, on adolescent boys (Abstr.) 133.
- Freeman, Thomas, on schizophrenia (Abstrs.) 307, 617-18.
- Frelinger, Ernst, co-author of 'Children Tell Stories. An Analysis of Fantasy' (Rev.) 593-94.
- French, Thomas M., co-author of 'Dream Interpretation. A New Approach' (Rev.) 282-86; on hope in therapy (Abstr.) 618.
- 'Freud Journal of Lou Andreas-Salomé, The', (Rev.) 274-76.
- 'Freud on Cocaine', (Schusdek) 406-12.
- Freud, Sigmund, on pleasure and unpleasure, 1; on movement and energy, 1, 2; on depression, 60; on the superego, 72; on thought, 90, 91; on paranoia and sexual attraction (Abstr.) 135; and death (Notes) 144-47; on rapport, 158-59, 175; on love, 250-51; on transference, 158-59, 175, 250-51, 252; on working through (Notes) 319; on cocaine, 406-12; on morphine, 408, ff.; on acting out, 421; on Goethe (Rev.) 447; and history (Abstr.) 466; on ego and memory, 564-65; on death (Abstr.) 621.
- Frigidity, and object relations (Abstr.) 464.
- Frog, symbolic significance of, 241-43.
- Fromm, Erika, co-author of 'Dream Interpretation. A New Approach' (Rev.) 282-86.
- Frosch, John, co-editor of 'The Annual Survey of Psychoanalysis, Vol. VII' (Rev.) 119.
- Frustration, and motor rhythm, 5; and depression, 45; and guilt, 72-73; and creativity, 90; and rage, 257-58.
- Funeral, see Burial.

- Furer, Manuel, reviewer of Harms, 120-21, of Koppitz, 123, of Solnit and Provence, 293-95.
- Galinsky, Morris D., on intellectual defenses (Abstr.) 134.
- Gallagher, Eugene B., co-author of 'Patienthood in the Mental Hospital' (Rev.) 460-61.
- Games, thoughts of death used in, 509-10; in prepuberty, and anxiety, 202-203; see also Play.
- Garbarino, Hector, on agoraphobia (Abstr.) 627.
- Garcia, Blanche, on autistic children (Abstr.) 312-13.
- Garma, Angel, on psychoanalytic treatment of organic disease (Abstr.) 313.
- Gedo, John, on nonpayment of fees (Abstr.) 619.
- Gelding, see Horse.
- Genitality, and orality (Abstrs.) 471, 625-26.
- Genius, and creativity (Rev.) 449-50.
- Gero, George, reviewer of Hendin, 111-13.
- Gianascol, A. J., on childhood schizophrenia (Abstr.) 137-38.
- Giovacchini, Peter L., 'Some Aspects of the Development of the Ego Ideal of a Creative Scientist', 79-101; on somatic symptoms (Abstr.) 614.
- Gitelson, Maxwell, reviewer of Hartmann, 268-73; on 'neo-analysis' (Rev.) 288-89; in memoriam (Kramer) 441-44.
- Glaser, Frederick G., on Kafka (Abstr.) 310-11.
- Glauber, I. Peter, reviewer of Weiss, 276-81.
- Glenn, Jules, reviewer of Cohen, 605-606; on twins (Notes) 636-38.
- Glueck, Bernard C., Jr., co-editor of 'Recent Research in Schizophrenia' (Rev.) 604-605.
- 'Goethe. A Psychoanalytic Study 1775-1786', (Rev.) 447-50.
- Goldin, Paul C., on empathy in psychotherapy (Abstr.) 311-12.
- Goldstein, Joseph, on insanity defense (Abstr.) 138-39.
- Gordon, Kenneth H., Jr., 'Religious Prejudice in an Eight-year-old Boy', 102-107.
- Gorman, Warren, on words (Abstr.) 308-309.
- Gossip, psychology of (Abstr.) 467-68.
- Gratification, and motor discharge, 6-7, 10; and stealing, 573-75, 578, 582-83.
- Gravity, and movement, 520-21, 545-49.
- Greenacre, Phyllis, on gifted child, 88, n., 95; on infantile trauma (Notes) 148-50; on sex differences, 187; on motor rhythm in infants, 530-31.
- Greenson, Ralph R., 'The Working Alliance and the Transference Neurosis', 155-81.
- Greenspan, Jack, on persecution (Abstr.) 135.
- Grinberg, Leon, on guilt and mourning (Abstr.) 142; on countertransference (Abstr.) 307-308; on relations between psychoanalysts (Abstr.) 619.
- Groddeck, Georg, '*Psychoanalytische Schriften zur Literatur und Kunst*' (Rev.) 298-99.
- Grossman, Carl M., 'Transference, Countertransference, and Being in Love', 249-56.
- Grossman, David, on ego-activating approaches (Abstr.) 623.
- Grotjahn, Martin, reviewer of Andreas-Salomé, 274-76, of Groddeck, 298-99.
- Guilt, and depression, 42-43; exploitation of sense of, 66, ff.; in child, 66, 71, 75; and projection, 68-70, 75; and religion, 70, 73-74; and adaptation, 71-75; and mourning (Abstr.) 142.
- Guttman, Samuel A., on theory construction (Notes) 631-33.
- Hacker, Frederick, Jr., on discriminatory function of ego (Abstr.) 306.
- Haley, Jay, on transference (Abstr.) 138.
- Hall, Calvin, on slang (Abstr.) 309.
- Hallucination, and space (Abstr.) 307; as pseudoabstraction (Abstr.) 314; unconscious, and thinking (Notes) 633-36.
- Halpern, Howard, on work inhibition in children (Abstr.) 468-69.
- Halpern, Sidney, on thanatopsis (Abstr.) 621.
- 'Hand and the Breast with Special Reference to Obsessional Neurosis, The', (Eisenbud) 219-48.
- Hand-breast complex, and obsessional neurosis, 220, ff.; and anthropology, 237, ff.
- Harms, Ernest, editor of 'Problems of Sleep and Dream in Children' (Rev.) 120-21.
- Hartmann, Heinz, 'Essays on Ego Psychology. Selected Problems in Psychoanalytic Theory' (Rev.) 268-73; on 'social compliance' (Rev.) 287-88; on ego and id, 517.

- Hartocollis, Peter, on hospital romances (Abstr.) 468.
- Hatred, and ego functions, 257, ff.; as entrapment, 258-60; ego syntonic uses of, 260-61; and human relationship, 261-62; toward analyst, 262-63; as defense, and transference, 252; see also Hostility.
- Havens, Leston L., on hallucinations in space (Abstr.) 307.
- Haworth, Mary R., editor of 'Child Psychotherapy' (Rev.) 453-56.
- Hearing, and color (Abstr.) 470.
- Heiman, Marcel, co-editor of 'Evolution of Psychosomatic Concepts. Anorexia Nervosa: A Paradigm' (Rev.) 451-53.
- Heimann, Paula, on countertransference, 255; on the anal stage (Abstr.) 307.
- Heller, Louis G., on words (Abstr.) 308-309.
- Heilman, Ilse, on adolescents (Abstrs.) 133, 625.
- Hendin, Herbert, 'Suicide in Scandinavia' (Rev.) 111-13.
- Heredity, and personality development, 368-69.
- Hilgard, Josephine R., on parental loss (Abstr.) 136.
- Hoffer, Willi, on hand-mouth relationship in infancy, 219-20.
- Hofling, Charles K., on Lowell's investigation of Mars (Abstr.) 142.
- Homosexuality, and patient-doctor relationship (Rev.) 126; and castration (Abstr.) 142; and sense of maleness, 213-14; and feminine drives (Abstr.) 312; and bullfighter (Abstr.) 621; see also Bisexuality, Perversion.
- Horse, unconscious meaning of, 438-40.
- Hospital, 'romances' in (Abstr.) 468.
- Hostility, and depression, 43-44; and personality development, 359-60, 369-376; and alcoholism, 421-23; and gossip (Abstr.) 467-68; toward parents, of child, 507, n.; see also Aggression, Hatred.
- Hug-Hellmuth, von, Hermine, 'The Child's Concept of Death', 499-516.
- 'Human Reproduction and Sexual Behavior', (Rev.) 461-62.
- Humor, and resignation (Abstr.) 309; as defense (Abstr.) 309-10.
- Hypertension, and object relations (Abstr.) 614.
- Hypnoid state, and defense (Notes) 480-82.
- Hypotonia, unconscious meaning of (Abstr.) 615.
- Hysteria, sexual behavior in, 393-94, 396, 401; and shyness, 394; and fantasy, 397-98, 400; and defense, 398; and emotion, 398, 400; and object relations, 395-96, 399-401; and orality, 401; and dreams, 403-404.
- 'Hysterical Personality: A Re-evaluation', (Easser and Lesser) 390-405.
- Id, and creativity, 90-91, 94-95; and motor rhythms, 558-59; and stealing, 573, 578; and ego, in child (Rev.) 602.
- Identification, and exploitation, 76; and creativity, 83-84, 93, 96; and working alliance, 166-68, 170, 175-76; and Negro adolescent (Rev.) 304; and countertransference (Abstr.) 307-308; and personality development, 374; and hysteria, 395-96; in group (Abstr.) 471-72; and stealing, 573-75, 578, 581-82; see also Empathy.
- Identity, and sense of maleness, 211-12, 214; and object relations (Rev.) 584-89; sexual (Rev.) 586.
- 'Illness and Cure. Studies on the Philosophy of Medicine and Mental Health', (Rev.) 301-302.
- Illusion, see Religion.
- Image, decathexis of, and creativity, 93, 96; see also Body Image.
- 'Importance of the Gelding, The', (Lewis) 438-40.
- Impostor, stereotyped behavior of (Abstr.) 314-15.
- Imprinting, studies of, 340-42.
- Incorporation, and prejudice, 102; of breast, and alcoholism, 422-28, 436; see also Orality.
- India, psychoanalysis in (Notes) 321-22.
- Individuation, see Separation-individuation.
- Infant, and motility, 3-4, 5-19, 22-31; and trauma (Notes) 148-50; and passivity (Rev.) 291; institutionalization of, 345-50; and maternal separation, 345-50; and interaction with mother, 483, ff.; differentiation phase of, 484, 488-93; practicing period in, 484-85, 493-94; rapprochement phase of, 485-88, 494-97; and communication, 487-89, 496; see also Child.
- Ingham, John, on bullfighter (Abstr.) 621.
- In memoriam, Bernice Engle (Notes) 325; Maxwell Gitelson (Kramer) 441-44; George Joseph Mohr (Romm)

- 445-46; Ladislaus Fessler (Heiman) 629.
- 'Insight and Responsibility. Lectures on the Ethical Implications of Psychoanalytic Insight', (Rev.) 117-19.
- Institutionalization, in infancy, 345-49.
- Intelligence, and 'counter-intelligence' (Abstr.) 314; see also Cognition.
- International Congress of Psychosomatic Medicine, 1965 meeting (Notes) 153.
- International Psychoanalytic Congress, 1965 meeting (Notes) 153.
- Interpretation, and depressed patient, 43-44, 46, 51; in treatment of organic disease (Abstr.) 313; and psychotherapy (Abstr.) 622.
- 'Introduction to Psychotherapy, An', (Rev.) 124-25.
- 'Introduction to the Work of Melanie Klein', (Rev.) 589-93.
- Introjection, and ego ideal, 93-94, 97, 99.
- Isaacs, Kenneth S., on affective attitudes (Abstrs.) 463-64, 472.
- Isakower phenomenon, and masturbation guilt, 221-22.
- Jackson, Donald D., on transference (Abstr.) 138.
- Jackson, Hughlings, and psychiatry (Abstr.) 624.
- Jacobson, Edith, 'The Self and the Object World' (Rev.) 584-89.
- Jonas, A. D., on feeding (Abstr.) 141.
- Jones, Ernest, and Freud's cocaine episode, 406-407.
- Joseph, Edward D., reviewer of Pitcher and Frelinger, 593-94.
- Jung, C. G., and theory (Abstr.) 140; Seven Sermons to the Dead, analysis of (Abstr.) 310.
- Kafka, Franz, and metamorphosis (Abstr.) 143; portrayal of (Abstr.) 310-11.
- Kanter, Stanley S., et al., on group therapy (Abstr.) 471.
- Kanton, Robert E., on touching the body (Abstr.) 311.
- Kaplan, Abraham, on religion (Abstr.) 133.
- Kaplan, Bernard, co-author of 'Symbol Formation' (Rev.) 456-59.
- Katz, Jay, on insanity defense (Abstr.) 138-39.
- Kaufman, M. Ralph, co-editor of 'Evolution of Psychosomatic Concepts. Anorexia Nervosa: A Paradigm' (Rev.) 451-53.
- Kemper, Werner W., on psychology of women (Abstr.) 625.
- Kestenberg, Judith S., 'The Role of Movement Patterns in Development. I. Rhythms of Movement', 1-36, 'II. Flow of Tension and Effort', 517-63.
- Kiell, Norman, 'The Universal Experience of Adolescence' (Rev.) 296-98.
- Kiev, Ari, editor of 'Magic, Faith and Healing. Studies in Primitive Psychiatry Today' (Rev.) 606-10.
- Klein, Melanie, formulations of (Rev.) 589-93.
- Knapp, Peter H., et al., on hysteria, 392.
- Koppitz, Elizabeth Munsterberg, 'The Bender Gestalt for Young Children' (Rev.) 123.
- Korsakoff psychosis, parapraxes in (Rev.) 271.
- Kris, Anton O., translator of Hug-Hellmuth, 499-516.
- Kris, Ernst, on rhythmic motility, 2-3.
- Kubie, Lawrence S., on suicide (Abstr.) 138.
- Lampl-de Groot, Jeanne, on symptom and character formation (Abstr.) 463.
- Langer, Marie, on candidates (Abstr.) 142.
- Language, pre-stages of (Abstr.) 135; and symbol formation (Rev.) 456-59; technical, misuse of (Abstr.) 309; see also Communication, Speech, Word.
- La Perriere, Kitty, co-author, of 'Mother-Child Interaction During Separation-Individuation', 483-98.
- Law, insanity defense in (Abstr.) 138-39.
- Lazuriaga, Isabel, on intelligence (Abstr.) 314.
- Learning, psychology of (Abstr.) 140-41, (Rev.) 295-96.
- Leavy, Stanley A., translator of Andreas-Salomé, 274-76.
- Lesser, Stanley R., co-author of 'Hysterical Personality: A Re-evaluation', 390-405.
- Levin, Max, collaborator of 'An Ego-Psychological Approach to Character Assessment' (Rev.) 289-90.
- Levin, Revella, on death (Abstr.) 469.
- Levin, Sidney, 'Some Suggestions for Treating the Depressed Patient', 37-65.
- Levinson, Daniel J., co-author of 'Patienthood in the Mental Hospital'

- (Rev.) 460-61; on omnipotence and training (Abstr.) 624.
- Levitán, Harold L., 'A Traumatic Dream', 265-67.
- Lewin, Bertram D., honorary member Pittsburgh Psychoanalytic Society (Notes) 325.
- Lewis, Murray D., on transvestitism (Abstr.) 619.
- Lewis, William C., 'The Importance of the Gelding', 438-40; on defense precursors (Abstr.) 614.
- Liberman, D., et al., on emotional blocking (Abstr.) 626.
- Libido, and hatred, 262; plethora, ego in (Abstr.) 472; repression of, and depression, 44-45, 52-53; see also Sexuality.
- Light, in dreams, 266.
- Lima, Heitor de Andrade, on group therapy (Abstr.) 315.
- Linn, Louis, reviewer of Levinson and Gallagher, 460-61, of Cofer and Apple, 610-11.
- Lipkowitz, Marvin H., on homosexuality (Abstr.) 312.
- Lipson, Channing T., on denial and mourning (Abstr.) 465.
- Literature, psychoanalytic writings about (Rev.) 298-99; see also Creativity.
- Litman, Robert E., on suicide (Abstr.) 470-71.
- Lloyd, Charles W., editor of 'Human Reproduction and Sexual Behavior' (Rev.) 461-62.
- Lossy, Frank T., on suggestion (Abstr.) 308.
- Love, and transference, 249, ff.; and personality development, 374-76; and hysterical personality, 390-91, 396.
- Luchina, Isaac L., on motor aspects of ego (Abstr.) 626.
- Lyra, Alberto, on mysticism (Abstr.) 628.
- 'Magic, Faith and Healing. Studies in Primitive Psychiatry Today', (Rev.) 606-10.
- Mahler, Margaret S., co-author of 'Mother-Child Interaction During Separation-Individuation', 483-98.
- Maleness, sense of, and masculinity, 207-208, 211, and penis, 207-208, 215-17, and transvestitism, 208, and parents, 209-212, and homosexuality, 213-14.
- Marasse, Henry F., reviewer of Nacht, 113-14.
- Marcus, Eric H., on dogmatism (Abstr.) 139.
- Marmorston, Jessie, co-editor of 'Psychoanalysis and the Human Situation' (Rev.) 115-17.
- Masculinity, and sense of maleness, 207-208, 211; complex, and sisters (Abstr.) 617.
- Masochism, and depression, 50-51; and exploitation, 77; and stealing, 575.
- Masserman, Jules H., editor of 'Science and Psychoanalysis. Vol. VI' (Rev.) 386-89.
- Masturbation, in prepuberty, 185-86; and Isakower phenomenon, 221-22.
- McDevitt, John B., reviewer of Deutsch and Fishman, 299-300.
- McMahon, Arthur W., on reminiscing (Abstr.) 141.
- Meerlo, Joost A. M., 'Illness and Cure. Studies on the Philosophy of Medicine and Mental Health' (Rev.) 301-302.
- Melody, and movement, 519, n.; 543-44.
- Meltzer, Donald, on cyclothymic states (Abstr.) 465.
- Memory, and creativity, 90-91; reactivation of repressed (Abstr.) 139; early, and ego, 564, ff., and reality, 564, ff., and perception, 564-66, 568, ff., and affect, 566, 568-70; screen, and trauma, 266.
- Mendilaharssee, Carlo, on identity (Abstr.) 627.
- Mental Health, encyclopedia of (Rev.) 299-300; and community (Rev.) 459-60.
- Michaels, Joseph J., reviewer of 'The Community Mental Health Center', 459-60.
- Migraine, and object relations (Notes) 150-52.
- Mind, concepts of (Rev.) 130-32.
- Mirror rule, see Technique, classical psychoanalytic.
- Modell, Arnold H., on schizophrenia and object relations (Abstr.) 617.
- 'Modern Perspectives in Child Development. In Honor of Milton J. E. Senn', (Rev.) 293-95.
- 'Modern Psychiatry. A Handbook for Believers', (Rev.) 126-27.
- Mohr, George Joseph, in memoriam (Romm) 445-46.
- Morphine, withdrawal from, 408-409; addiction, use of cocaine in, 410-11.
- Mother, and child's movement patterns, 8-19, 22-31, 517, ff.; and creativity, 88-90, 92-93, 99; deprivation of, 345-

- 49; and personality development, 359-61; and hysteria, 395-96; and alcoholism, 422, 424-28, 430, ff.; in child therapy (Rev.) 454-55; psychotic (Abstr.) 470; and child during separation-individuation phase, 483, ff.; death wishes against, 503, 506-507.
- 'Mother-Child Interaction During Separation-Individuation', (Mahler and La Perriere) 483-98.
- Motility, and development, 1, ff., 484-86, 494-95, 517, ff.; and alcoholism, 421, 433-36; see also Rhythm, motor.
- 'Motivation: Theory and Research', (Rev.) 610-11.
- Motivation, inherited and external factors in, 329-30; and personality disorders, 351-55, 366-76; see also Drive.
- Mourning, and guilt (Abstr.) 142; in early-orphan adults (Notes) 317; and denial (Abstr.) 465.
- Music, libidinal sources of (Abstr.) 620; see also Art, Creativity, Melody.
- Meyerson, Paul G., on assimilation (Abstr.) 618
- Mysticism, and reality (Abstr.) 628.
- Myth, derivation of (Notes) 324; and psychoanalysis (Abstr.) 620-21; see also Symbol.
- Nacht, S., '*La Présence du Psychanalyste*' (Rev.) 113-14; on nonverbal relationship (Abstr.) 618.
- Narcissism, and depression, 43, 55-57, 64; and creativity, 88-89; and identity (Rev.) 584-85, 588; and schizophrenia (Abstr.) 617-18.
- Needles, William, 'Exploitation of the Sense of Guilt', 66-78.
- Negro, Southern, personality development of (Rev.) 302-303.
- Nemiah, John C., reviewer of Ojemann, 611-13.
- Nemiroff, Robert A., on psychoanalytic practices (Abstr.) 137.
- Neurosis, and depression, 37; and grief (Abstr.) 465; obsessional, and hand-breast complex, 220, ff., and acting out, 224-25, and oral deprivation, 226-27, 229-30, and reaction-formation (Abstr.) 472; obsessive-compulsive, and recall (Rev.) 272, and comic caricature (Abstr.) 466.
- Newman, Martha F., on parental loss (Abstr.) 136.
- Newman, Mildred R., on child therapy (Abstr.) 469.
- Niederland, William G., 'The Role of the Ego in the Recovery of Early Memories', 564-71; on Schreber (Abstr.) 616.
- Nininger, Eugene V., on unconscious hallucinations (Notes) 633-36.
- Noble, Douglas, reviewer of French and Fromm, 282-86.
- Normality, assessment of, 487-88.
- Nursing, and obsessional neurosis, 219-20, 226-27, 233; and immortality, 235; and alcoholism, 422-28, 436; see also Breast, Feeding, Sucking.
- Nydes, Jules, on Schreber (Abstr.) 616.
- Object loss, and hand-breast complex, 232-33; and lethargy (Abstr.) 314; and denial (Abstr.) 465.
- Object relations, and creativity, 81, ff., (Rev.) 450; and migraine (Notes) 150-52; and working alliance, 172-74; and hysteria, 399-401; and frigidity (Abstr.) 464; in schizophrenia (Notes) 473-75, (Abstr.) 617; and identity (Rev.) 584-89; and hypertension (Abstr.) 614; theoretical views of (Abstr.) 617.
- Obsessional neurosis, see Neurosis, obsessional.
- O'Connell, Walter E., on resignation (Abstr.) 309.
- Oedipus complex, in therapy (Rev.) 125; unresolved, and prejudice, 103, 107.
- Ojemann, Ralph H., editor of 'Recent Research on Creative Approaches to Environmental Stress' (Rev.) 611-13.
- Oliveira, de, Walderedo Ismael, et al., on group therapy (Abstr.) 315.
- Omnipotence, and creativity, 85-88; and genetics (Abstr.) 143; quest for, in training (Abstr.) 624.
- Oral rhythm, and movement patterns, 26, 32-33, 524-29, 542-43.
- Orality, and obsessional neurosis, 226-28, 230-31, 233, 237, 246; and hysteria, 401; and alcoholism, 423-28, 435-36; and 'finger-licking' habit (Abstr.) 468; and genitality (Abstr.) 471, 625-26; see also Incorporation.
- Ormont, Louis R., on group therapy (Abstr.) 623.
- Orphan, early (Notes) 316-18.
- Ostow, Mortimer, on libido plethora syndrome (Abstr.) 472.
- Ostwald, Peter F., 'Soundmaking. The Acoustic Communication of Emotion' (Rev.) 128-30; on color hearing (Abstr.) 470.

- Pao, Ping-Nie, 'The Role of Hatred in the Ego', 257-64.
- Paradigm, and psychoanalysis (Notes) 631-33.
- Parapraxis, and Korsakoff syndrome (Rev.) 271; and unconscious fantasy, 413, ff.; and ego regression, 413, ff.
- Parent, and superego, 66, 71, 75; death of (Abstr.) 136; and sense of maleness, 209-12; as Sphinx (Abstr.) 466-67; and child, emotional relationship between, 356-61; dominating, and development, 362-64; 376; indulgent, and development, 364, 376; see also Father, Mother.
- Parkin, Alan, on fetishism (Abstr.) 619.
- 'Passivity. A Study of its development and Expression in Boys', (Rev.) 290-93.
- Patient, classical analytic, 170-72; and working alliance, 172-74.
- 'Patienthood in the Mental Hospital. An Analysis of Role, Personality, and Social Structure', (Rev.) 460-61.
- Paul, Louis, on ethical values of psychoanalyst (Abstr.) 620.
- Pearson, Gerald H. J., on dreams and omens (Abstr.) 133; on sleep disturbance (Abstr.) 134.
- Peller, Lili E., on language (Abstr.) 135.
- Penis, and sense of maleness, 207-208, 215-17; in fantasy and dream, 438-40; and stealing, 573, 575; fears about, and prejudice, 104-107; see also Phallus.
- Perception, and rhythmic discharge, 537-42; and recovery of early memories, 564-66, 568, ff.; see also Cognition, Thought.
- Personality, and therapy, 175, ff.; and cultural factors (Rev.) 287-88; hysterical, 390, ff.; disorders of, and development, 327, ff.
- 'Personalizacion, La. Biologia y Sociedad', (Rev.) 450-51.
- Perversion, and circumcision fantasies, 108; object relations in (Notes) 473-75; see also Homosexuality.
- Peto, Andrew, on fragmentation of ego (Abstr.) 618.
- Phallic rhythm, and movement patterns, 22-23, 31-33, 524-29, 542-43.
- Phallus, anxiety about, in prepuberty, 185-89, 191-93, 202, ff.; displacement to, in prepuberty, 186-89; see also Penis.
- Pine, Fred, on marginal stimuli (Abstr.) 139-40.
- Pitcher, Evelyn Goodenough, co-author of 'Children Tell Stories. An Analysis of Fantasy' (Rev.) 593-94.
- Play, in child therapy (Rev.) 453-54, 455; see also Games.
- Politics, and psychiatry (Abstr.) 468.
- Pollock, George H., on symbiosis (Abstr.) 628.
- Preconscious, and visual imagery (Abstr.) 141; metapsychology of (Rev.) 597.
- Prediction, of temperament, and motor rhythms, 19-21.
- Prejudice, religious, in a child, 102, ff.
- Prelinger, Ernst, co-author of 'An Ego-Psychological Approach to Character Assessment' (Rev.) 289-90.
- Prepuberty, bisexuality in, 189-93; male, physiological changes of, 183-84, and castration anxiety, 184-89, 200-203.
- '*Présence du Psychanalyste, La*', (Rev.) 113-14.
- Pressman, Maurie D., on intellectual defenses (Abstr.) 134.
- Primary process, and creativity, 90, 97-98; and reality (Abstr.) 306; and slips of the tongue, 413-14.
- 'Problems of Sleep and Dream in Children', (Rev.) 120-21.
- Projection, and depression, 41-42; and guilt, 68-70, 75; and prejudice, 102, 107.
- Provence, Sally A., co-editor of 'Modern Perspectives in Child Development. In Honor of Milton J. E. Senn' (Rev.) 293-95.
- Psychiatry, modern (Rev.) 126-27; in primitive cultures (Rev.) 606-10; preventive (Rev.) 611-13; Soviet, institutional framework of (Abstr.) 311.
- 'Psychoanalysis and the Human Situation', (Rev.) 115-17.
- Psychoanalysis, elements of (Rev.) 281-82; distortion of concepts of (Rev.) 288-89; and psychotherapy (Abstr.) 306; in India (Notes) 321-22; structure and function in (Notes) 629-31.
- Psychoanalyst, practices and opinions of (Abstr.) 137; and relations to colleagues (Abstr.) 619; ethical values of (Abstr.) 620.
- 'Psychoanalytic Study of the Child, The, Vols. XVII and XVIII', (Rev.) 595-604.
- '*Psychoanalytische Schriften zur Literatur und Kunst*', (Rev.) 298-99.
- 'Psychology of Learning and Techniques of Teaching, The', (Rev.) 295-96.

- Psychosis, and environment (Abstr.) 136; and creativity (Rev.) 449-50.
- Psychosomatic medicine, and psychoanalysis (Abstr.) 313; evolution of (Rev.) 451-53.
- Puberty rite, see Rite, puberty.
- Pupin, Michael, on creative science, 89-90.
- Racker, Heinrich, on countertransference, 253, 255.
- Rage, and frustration, 257-58.
- Rank, Otto, on psychoanalysis and the humanities (Abstr.) 620-21.
- Rao, Sharadamba, on birth order and schizophrenia (Abstr.) 139.
- Rapaport, David, on ideas, 91.
- Reality, and creativity, 90; and actuality (Rev.) 118-19; and primary and secondary processes (Abstr.) 306; and motor apparatus, 517, 544, 548-49; and early memories, 564, ff.; denial of, in dream, 266-67.
- 'Recent Research on Creative Approaches to Environmental Stress', (Rev.) 611-13.
- 'Recent Research on Schizophrenia', (Rev.) 604-605.
- Regression, and depression, 43-44; and creativity, 79-80, 91-92; and working alliance, 157-58, 163-64, 172-74; and cure (Rev.) 301; and maturation, 370, 376; and slips of the tongue, 413-14; and symptom formation (Abstr.) 463.
- Rejection, of therapy (Abstr.) 469; parental, and personality development, 361-62, 376.
- '*Relation Thérapeutique. Malade et Médecin, La*', (Rev.) 125-26.
- Religion, and sense of guilt, 70, 73-74; maturity in (Abstr.) 133; and ego psychology (Notes) 322-23.
- 'Religious Prejudice in an Eight-year-old Boy', (Gordon) 102-107.
- Repetition and transference, 156-57; and alcoholism, 424-25, 428.
- Repression, and depression, 44-45, 52-53; as defense, in prepuberty, 186-87, 189.
- Research, marginal stimuli in (Abstr.) 139-40; on psychotherapy (Abstr.) 313; on early influences on development, 327-66; longitudinal studies in, 331-32; follow-up studies in, 332-33; cross-sectional studies in, 333-34; and experiment, 334-35; and reconstruction, 335-39; in child development (Rev.) 601-602; in schizophrenia (Rev.) 604-605.
- 'Residential Treatment for the Disturbed Child', (Rev.) 121-23.
- Resistance, and working alliance, 163, 166, 170, 179; and suggestion (Abstr.) 308.
- Rexford, Eveleen N., reviewer of 'The Psychoanalytic Study of the Child, Vols. XVII and XVIII', 595-604.
- Rhudick, Paul J., on reminiscing (Abstr.) 141.
- Rhythm, motor, in development, 1, ff.; and excitation-gratification-relaxation, 6-7; and drives, 22-26, 30-34, 518-20; and tension flow, 521-31; and flow regulation, 531-44; and effort, 544-46.
- Rite, puberty, and circumcision fantasies, 109; driver's test as (Abstr.) 133-34.
- Rohrer, John H., co-editor of 'The Eighth Generation Grows Up' (Rev.) 303-305.
- 'Role of Hatred in the Ego, The', (Pao) 257-64.
- 'Role of Movement Patterns in Development, The. I. Rhythms of Movement, II. Flow of Tension and Effort' (Kestenberg) 1-36, 517-63.
- 'Role of the Ego in the Recovery of Early Memories, The', (Niederland) 564-71.
- Rolla, Edgardo, on hallucination (Abstr.) 314.
- Rose, Gilbert J., on body image and creativity (Abstr.) 467.
- Rosen, Victor H., reviewer of Werner and Kaplan, 456-59; on comic caricature (Abstr.) 466.
- Rosenbaum, Jean B., on technical language (Abstr.) 309; on gossip (Abstr.) 467-68.
- Rosenbaum, Milton, on analyst in dreams (Notes) 475-77.
- Rosenberger, Lizzi, on schizophrenia (Abstr.) 623.
- Ross, Nathaniel, co-editor of 'The Annual Survey of Psychoanalysis, Vol. VII' (Rev.) 119; on religious experience (Notes) 322-23.
- Royer, Gilberte, on Kafka (Abstr.) 143.
- Rucker, Norman H., reviewer of Tarachow, 124-25.
- Ruddick, Bruce, on colds (Abstr.) 615.
- Rycroft, Charles, on reality principle (Abstr.) 306.
- Sachs, Hanns, on psychoanalysis and the humanities (Abstr.) 620-21.

- Sadism, and guilt, 77; in child, 504-507, 510.
- Sarnoff, Charles A., on 'the universality of the unconscious' (Notes) 323-24.
- Sarvis, Mary A., on autistic children (Abstr.) 312-13.
- Saul, Leon J., co-author of 'Early Influences on Development and Disorders of Personality', 327-89.
- Schafer, Roy, collaborator of 'An Ego-Psychological Approach to Character Assessment' (Rev.) 289-90.
- Scheidlinger, Saul, on identification (Abstr.) 471-72.
- Scher, Jordan M., editor of 'Theories of the Mind' (Rev.) 130-32.
- Schiffer, Irvine, on conversion symptoms (Abstr.) 469.
- Schizophrenia, and parental loss (Abstr.) 136; childhood (Abstr.) 137-38; and birth order (Abstr.) 139; and narcissism (Abstrs.) 307, 617-18; object relations in (Notes) 473-75, (Abstr.) 617; psychosocial and organic aspects of (Rev.) 604-605; and transference psychosis (Abstr.) 617; therapy of (Abstr.) 622; father's role in (Abstr.) 623.
- Schlossman, Howard H., on circumcision (Notes) 318-19.
- Schreber, reinterpretation of (Abstrs.) 615-17.
- Schur, Max, on Freud and death (Notes) 144-47.
- Schusdek, Alexander, 'Freud on Cocaine', 406-12.
- 'Science and Psychoanalysis. Vol. VI. Violence and War; with Clinical Studies', (Rev.) 286-89.
- Science, creative, and ego ideal, 79, ff.
- Scopophilia, and creativity, 92, 94-95.
- Scott, W. Clifford M., on finger-licking habit (Abstr.) 468.
- Screen memory, see Memory, screen.
- Scrotum, significance of, in prepuberty, 182, ff., 216.
- Searles, Harold F., on neutral responses in therapy (Abstr.) 464; on schizophrenia and transference (Abstr.) 617.
- Secondary process, and creativity, 90-91, 98; and working alliance, 173; and reality (Abstr.) 306.
- Segal, Hanna, 'Introduction to the Work of Melanie Klein' (Rev.) 589-93.
- Seidenberg, Robert, on 'mother' super-ego (Abstr.) 465.
- Seidner, Richard, on body experiences (Abstr.) 137.
- Selesnick, Sheldon T., on Jung (Abstr.) 140.
- 'Self and the Object World, The', (Rev.) 584-89.
- Senn, Milton J. E., on child development (Rev.) 293.
- 'Sense of Maleness, The', (Stoller) 207-18.
- Separation, maternal, in infancy, 345-49.
- Separation-individuation, mother-child interaction during, 483, ff., (Rev.) 603; differentiation phase of, 484, 488-93; and practicing period, 484-85, 493-94; rapprochement phase of, 485-88, 494-97.
- Sermons to the Dead, analysis of (Abstr.) 310.
- Sexuality, and depression, 52-53; and sense of guilt, 73; determinants in (Rev.) 127; and personality development, 351-54, 367; and hysterical personality, 393-94, 396, 401; and reproduction (Rev.) 461-62; see also Libido.
- Sexual identity, and ego (Rev.) 586.
- Shame, and depression, 59-60.
- Sharaf, Myron R., on omnipotence and training (Abstr.) 624.
- Shengold, Leonard, on parent as Sphinx (Abstr.) 466-67; on the rat and the tooth (Notes) 477-79.
- 'Significance of Scrotal Sac and Testicles for the Prepuberty Male, The', (Bell) 182-206.
- Silverman, Daniel, reviewer of Bion, 281-82.
- Silverman, Lloyd H., on TAT stories (Abstr.) 140.
- Sinha, T. C. on psychoanalysis in India (Notes) 321-22; on yoga (Notes) 479-80.
- Slang, and dream symbols (Abstr.) 309, see also Language.
- Sleep, in children (Rev.) 120-21, 488; disturbance of (Abstr.) 134; and child's concept of death, 499, 500-501, 505, 510.
- Sleepwalking, and alcoholism, 433-36.
- 'Slips of the Tongue', (Yazmajian) 413-19.
- Sloane, Paul, reviewer of Frosch and Ross, 119.
- Solnit, Albert J., co-editor of 'Modern Perspectives in Child Development. In Honor of Milton J. E. Senn' (Rev.) 293-95.

- Solomon, Joseph C., on Alice in Wonderland (Abstr.) 464-65.
- Solomon, Philip, co-editor of 'Recent Research on Schizophrenia' (Rev.) 604-605.
- 'Some Aspects of the Development of the Ego Ideal of a Creative Scientist', (Giovacchini) 79-101.
- 'Some Suggestions for Treating the Depressed Patient', (Levin) 37-65.
- 'Soundmaking. The Acoustic Communication of Emotion', (Rev.) 128-30.
- Soviet psychiatry, see Psychiatry.
- Space, and movement, 520-21, 545-49.
- Speech, origin of (Abstr.) 310; and genital conflicts (Abstr.) 614-15; see also Language, Word.
- Sperling, Melitta, on headache (Notes) 150-52.
- Spielberger, Charles D., et al., on manic-depression (Abstr.) 136-37.
- Spitz, René A., on institutionalization of infants, 346.
- Stainbrook, Edward, co-editor of 'Psychoanalysis and the Human Situation' (Rev.) 115-17.
- 'Stealing as a Defense', (Allen) 572-83.
- Stengel, E., on Hughlings Jackson (Abstr.) 624.
- Stern, E. Mark, on child therapy (Abstr.) 469.
- Stewart, Harold, on hypnotic state (Abstr.) 619.
- Stierlin, Helm, on therapy of schizophrenia (Abstr.) 622.
- Stock, Michael, co-author of 'Modern Psychiatry' (Rev.) 126-27.
- Stoller, Robert J., 'The Sense of Maleness', 207-18.
- Strean, Herbert S., on role-playing in therapy (Abstr.) 622.
- Stress, environmental (Rev.) 611-13; psychological, and depression, 53-55.
- Subrin, Mayer, on gossip (Abstr.) 467-68.
- Sucking, and motor rhythm, 524-30, 534-37; see also Feeding, Nursing.
- Suggestion, in psychoanalysis (Abstr.) 308; and hysterical personality, 397.
- 'Suicide in Scandinavia', (Rev.) 111-13.
- Suicide, and depression, 64; and fantasies about death (Rev.) 111-12; and parental attitudes (Rev.) 112-13; multiple determinants of (Abstr.) 138; and symbiosis (Abstr.) 470-71.
- Sullivan, Charles T., on 'direct psychoanalysis' (Abstr.) 622.
- Superego, and depression, 43-44; and exploitation of sense of guilt, 66, ff.; and parent, 66, 71, 75; 'mother' (Abstr.) 465; and stealing, 574-75, 578, 582-83; and identity (Rev.) 584-89; function, genesis of (Rev.) 595-97; see also Ego Ideal.
- Suraci, Anthony, on repressed memories (Abstr.) 139.
- Symbiosis, and separation-individuation, 488-93; and ego (Abstrs.) 627; and neurosis (Abstr.) 628.
- 'Symbol Formation. An Organismic-Developmental Approach to Language and the Expression of Thought', (Rev.) 456-59.
- Symbol, formation of (Notes) 324; ball, bird, and breast, 236-37, 244; breast, in dreams, 223-24, 230-32; dream, and slang (Abstr.) 309; fertility, in mother-goddess figures, 238-41; frog, significance of, 241-43; hand-breast, and archeology, 234, ff., and artifacts, 234, ff.; solar disk, significance of, 234-36; see also Myth.
- Symptom formation, (Abstrs.) 463.
- Szasz, Thomas S., on psychoanalytic practices (Abstr.) 137.
- Tarachow, Sidney, 'An Introduction to Psychotherapy' (Rev.) 124-25; reviewer of Braceland and Stock, 126-27; on interpretation and reality in psychotherapy (Abstr.) 306.
- TAT stories, and ego disturbance (Abstr.) 140.
- Technique, classical psychoanalytic, modifications in, 173, 175-79.
- Teeth, and overstimulation (Notes) 477-79.
- Tension flow, and motor rhythm, 521-31; regulation of, 531-44; free and bound, 531, ff.
- Terzian, Albert S., on music (Abstr.) 620.
- Testes, movements of, and fantasy, 193-97, and acting out, 198-200; see also Cryptorchidism.
- 'Theories of the Mind', (Rev.) 130-32.
- 'Therapeutic alliance', see Transference.
- Therapy, in depression, 37, ff.; hope in, 46-48, (Abstr.) 618; negative reaction to, 51-52, 63-64; exploitation of guilt in, 69-70; teaching of (Rev.) 124-25; transference in, 155-81; working alliance in, 155-81; and personality of analyst, 175, ff.; with children (Rev.) 453-56; hospital (Rev.) 460-61; assessment of change in (Abstr.) 464; neutral responses in (Abstr.) 464; 'age

- game' in (Abstr.) 469; with dying patient (Rev.) 603-604; silence in (Abstr.) 618; and role-playing (Abstr.) 622; ego-activating approaches to (Abstr.) 623; group, interaction in (Abstr.) 315; oedipal conflicts in (Abstr.) 315, oral and genital aspects in (Abstr.) 471, and analysis (Abstr.) 623.
- Thought, and creativity, 91, 97-98; and marginal stimuli (Abstr.) 139-40; and therapy (Abstr.) 469.
- Thyne, James N., 'The Psychology of Learning and Techniques of Teaching' (Rev.) 295-96.
- Time, and movement, 520-21, 545-49.
- Tongue, and penis, in fantasy, 439-40.
- 'Transference, Countertransference, and Being in Love', (Grossman) 249-56.
- Transference, and depressed patient, 45; in general medicine (Rev.) 125; and patient's adjustment (Abstr.) 138; definition of, 156-58, 249-50; susceptibility to, 173; 'positive' and 'negative', 249, ff.; defense against, 252-53; and schizophrenia (Abstr.) 617; neurosis, and ego ideal, 84-86, 92-94, 99, and working alliance, 155-81.
- 'Transition from Childhood to Adolescence, The', (Rev.) 605-606.
- Transvestitism, and sense of maleness, 208; and body image (Abstr.) 619.
- Trauma, and dream, 265-67; effect of, on animals, 344-45.
- 'Traumatic Dream, A', (Levitan) 265-67.
- Twins, character formation of (Rev.) 273; antisocial development in (Rev.) 603; opposite sex (Notes) 636-38.
- Unconscious, of the analyst (Rev.) 114; and scientific investigation (Abstr.) 142; universality of (Notes) 323-24; and slips of the tongue, 413, ff.; assimilation of (Abstr.) 618.
- 'Universal Experience of Adolescence, The', (Rev.) 296-98.
- Valabrega, Jean-Paul, '*La Relation Thérapeutique*' (Rev.) 125-26.
- '*Verstehende psychologie*', critique of (Rev.) 271-72.
- Visual perception, and rhythmic discharge, 537-42; and recovery of early memories, 564-66, 568, ff.
- Visualization, and anxiety, 224-26.
- Vomiting, and alcoholism, 426-27.
- Waelder, Robert, on multiple functions of ego, 572.
- Waldhorn, Herbert F., reviewer of Marmorston and Stainbrook, 115-17.
- Wallerstein, Robert S., on change in therapy (Abstr.) 464.
- Waltzer, Herbert, on psychotic family (Abstr.) 136.
- Ward, Clyde H., on psychotherapy research (Abstr.) 313.
- Weaning, and alcoholism, 423-26.
- Wedge, Bryant, on psychopolitics (Abstr.) 468.
- Weiner, Norman D., on driver's test (Abstr.) 133-34.
- Weiss, Edoardo, 'Agoraphobia in the Light of Ego Psychology' (Rev.) 276-81.
- Weiss, Justin L., et al., on psychotic mother (Abstr.) 470.
- Weissman, Philip, on precepidal paternal attitudes (Abstr.) 614.
- Wenar, Solveig, co-author of 'Early Influences on Development and Disorders of Personality', 327-89.
- Wender, Leonardo, on motor aspects of ego (Abstr.) 626.
- Werner, Heinz, co-author of 'Symbol Formation' (Rev.) 456-59.
- Wetmore, Robert J., on grief (Abstr.) 465.
- Wheeler, David R., on hope in therapy (Abstr.) 618.
- White, Robert S., on Schreber (Abstr.) 616.
- Whitman, Roy M., on dreams (Abstr.) 467.
- Winckelmann, J. J., drama of (Abstr.) 621.
- Winnicott, D. W., on dependence (Abstr.) 619.
- Winokur, George, editor of 'Determinants of Human Sexual Behavior' (Rev.) 127.
- Wisdom, J. O., on obsessional neurosis (Abstr.) 472.
- Wish, death, in child, 500-501, 503, 515; pregenital, and stealing, 575, 582-83.
- Wit, see Humor.
- Wolf-man, memoirs of (Abstr.) 136.
- Woman, inferiority in (Abstr.) 469; phylogenetic development of (Abstr.) 625.
- Woolf, M., on schizophrenia (Abstr.) 623.
- Word, psychological significance of (Abstr.) 308-309; and symbol (Rev.) 457-58; associative chains of, and

- parapraxis, 413, 415, 417-18; see also Language, Speech.
- 'Working Alliance and the Transference Neurosis, The', (Greenson) 155-81.
- Working through, techniques of (Notes) 319-20.
- Yarrow, L. J., on maternal deprivation, 348-49.
- Yazmajian, Richard V., 'A Circumcision Fantasy', 108-10; 'Slips of the Tongue', 413-19.
- Yoga, and psychoanalysis (Notes) 321-22, 479-80.
- Zac, Joel, on the impostor (Abstr.) 314-15.
- Zavitzianos, George, on psychotherapy (Abstr.) 622.
- Zetzel, Elizabeth R., reviewer of Segal, 589-93.
- Zimet, Carl N., co-author of 'An Ego-Psychological Approach to Character Assessment' (Rev.) 289-90.
- Ziskind, Eugene, on sensory deprivation (Abstr.) 140.

Books Received

To cite this article: (1965) Books Received, The Psychoanalytic Quarterly, 34:4, X-X, DOI: [10.1080/21674086.1965.11927596](https://doi.org/10.1080/21674086.1965.11927596)

To link to this article: <https://doi.org/10.1080/21674086.1965.11927596>



Published online: 29 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

BOOKS RECEIVED

- ADLER, J. MORTIMER: *The Conditions of Philosophy. Its Checkered Past, Its Present Disorder, and Its Future Promise*. New York: Atheneum Publishers, 1965.
- AICHHORN, AUGUST: *Delinquency and Child Guidance. Selected Papers*. New York: International Universities Press, Inc., 1964.
- ALLPORT, GORDON W., Editor: *Letters from Jenny*. New York: Harcourt, Brace, and World, Inc., 1965.
- BAROJA, CARO JULIO. *The World of the Witches*. (Trans. from the Spanish by O. N. V. Glendinning.) Chicago, Ill.: The University of Chicago Press, 1964.
- BERENDA, C. W.: *World Visions and the Image of Man*. New York: Vantage Press, Inc., 1965.
- BARRON, FRANK, et al.: *New Directions in Psychology II*. New York: Holt, Rinehart & Winston, Inc., 1965.
- BETTELHEIM, BRUNO: *Love is Not Enough. The Treatment of Emotionally Disturbed Children*. New York: Collier Books, 1965.
- BOSSELMAN, BEULAH C.; ROSENTHAL, IRA M.; and SCHWARZ, MARVIN: *Introduction to Developmental Psychiatry*. Springfield, Ill.: Charles C Thomas Publisher, 1965.
- DEUTSCH, HELENE: *Neuroses and Character Types. Clinical Psychoanalytic Studies*. New York: International Universities Press, Inc., 1965.
- DUFFY, CLINTON T. with HIRSHBERG, AL: *Sex and Crime*. Garden City, N.Y.: Doubleday & Co., Inc., 1965.
- DURKIN, E. HELEN: *The Group in Depth*. New York: International Universities Press, Inc., 1964.
- EISSLER, K. R.: *Medical Orthodoxy and the Future of Psychoanalysis*. New York: International Universities Press, Inc., 1965.
- FELDMAN, SUSAN, Editor: *The Story Telling Stone. Myths and Tales of the American Indians*. New York: Dell Publishing Co., Inc., 1965.
- FINGARETTE, HERBERT: *The Self in Transformation. Psychoanalysis, Philosophy and the Life of the Spirit*. New York: Harper & Row, Publishers, Inc., 1965.
- FREEMAN, PAUL: *An Introduction to Sigmund Freud and Psychoanalysis*. Englewood Cliffs, N. J.: Prentice-Hall, Inc., 1965.
- FROSCH, JOHN and ROSS, NATHANIEL, Editors: *The Annual Survey of Psychoanalysis, Vol. VIII*. New York: International Universities Press, Inc., 1965.
- HARDING, M. ESTHER: *The 'I' and the 'Not-I'. A Study in the Development of Consciousness*. New York: Pantheon Books, 1965.
- HENDRICK, IVES: *Psychiatry Education Today*. New York: International Universities Press, Inc., 1965.
- HOPKINS, PHILIP and WOLFF, HEINZ, Editors: *Principles of Treatments of Psychosomatic Disorders*. New York: Pergamon Press, Inc., 1965.
- JOSEPH, EDWARD D., Editor: *Beating Fantasies and Regressive Ego Phenomena in Psychoanalysis*. New York: International Universities Press, Inc., 1965.
- KERBIKOV, O. V., et al.: *Manual de Psiquiatria*. (Trans. from Russian by F. Villa Landa.) Havana: Empress Cossolidada de Artes Gráficas, 1965.

- LAUGHLIN, HENRY: *The Neuroses*. Washington, D. C.: Butterworth, Inc., 1965.
- LORAND, RHODA L.: *Love, Sex and the Teenager*. New York: The Macmillan Co., 1965.
- LUTHE, WOLFGANG, Editor: *Autogenic Training. Correlationes Psychosomaticae*. New York: Grune & Stratton, Inc., 1965.
- MARMOR, JUDD, Editor: *Sexual Inversion. The Multiple Roots of Homosexuality*. New York: Basic Books, Inc., 1965.
- MEERLOO, JOOST A. M.: *Unobtrusive Communication. Essays in Psycholinguistics*. Assen, The Netherlands: Koninklijke van Gorcum & Co., N.V., 1964.
- MEERLOO, JOOST A. M. and NELSON, MARIE COLEMAN: *Transference and Trial Adaptation*. Springfield, Ill.: Charles C Thomas, Publishers, 1965.
- MOK, PAUL P.: *Pushbutton Parents and the Schools*. New York: Dell Publishing Co., Inc., 1964.
- MOSS, C. SCOTT: *Hypnosis in Perspective*. New York: The Macmillan Co., 1965.
- NEUMANN, ERICH: *The Archetypal World of Henry Moore*. New York: Harper & Row, Publishers, Inc., 1965.
- NUNBERG, HERMAN: *Practice and Theory of Psychoanalysis, Vol. II*. New York: International Universities Press, Inc., 1965.
- ROSEN, EPHRAIM and GREGORY, IAN: *Abnormal Psychology*. Philadelphia: W. B. Saunders Co., 1965.
- ROSENBERG, MORRIS: *Society and the Adolescent Self-Image*. Princeton: Princeton University Press, 1965.
- SARGENT, S. STANSFELD and STAFFORD, KENNETH R.: *Basic Teachings of the Great Psychologists*. Garden City: Dolphin Books (Doubleday), 1965.
- SEARLES, HAROLD F.: *Collected Papers on Schizophrenia and Related Subjects*. New York: International Universities Press, Inc., 1965.
- WALKER, KENNETH: *The Mystic Mind*. New York: Emerson Books, Inc., 1965.
- WISDOM, J. O. and WOLFF, HEINZ, Editors: *The Role of Psychosomatic Disorder in Adult Life*. New York: Pergamon Press, Inc., 1965.