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Edward Glover

To cite this article: Edward Glover (1966) Metapsychology or Metaphysics, The Psychoanalytic Quarterly, 35:2, 173-190, DOI: [10.1080/21674086.1966.11926380](https://doi.org/10.1080/21674086.1966.11926380)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926380>



Published online: 29 Nov 2017.



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METAPSYCHOLOGY OR METAPHYSICS

A PSYCHOANALYTIC ESSAY

BY EDWARD GLOVER, M.D. (LONDON)

During the past thirty-odd years the task of appraising essays on psychoanalytic theory has become increasingly arduous and responsible. This however is not due, as might lightly be assumed, to elaborate advances in psychoanalytical knowledge made during the period. There is of course a legend sedulously if not too openly cultivated in some quarters that in recent years psychoanalysis has made spectacular advances on all fronts. In fact the difficulty lies in quite the opposite direction. Until a few years before the death of Freud, the principles of psychoanalysis represented in effect his considered findings and one could well treat most extensions of his theory as either amplifying it in minor respects or as timid but no doubt ambitious efforts to blaze new theoretical trails.

Since Freud's death the more erratic of these efforts have inevitably acquired the sanction of sheer repetition, a form of group suggestion that requires the most rigid of disciplinary controls. In fact most of these speculative efforts have consisted of hypothetical reconstructions of early phases of mental development concerning which we have no direct psychoanalytic information. In other words, from the time when Freud loosened his disciplined grasp of psychoanalytic thinking, metapsychology, (a term that is not so popular as it once was), has in many cases tended to develop into an obsessional form of metaphysical speculation which in my opinion has an unmistakable Jungian bent.

This is perhaps most clearly indicated by what might be called a shift from unconscious to preconscious theory and valuation involving even the canonization of such Jungian terms as 'individuation' for example, or for the matter of that, the 'self', which originally led to the most inextricable confusion among

psychoanalysts. Not to mince words, I should have said that a large—much too large—proportion of modern psychoanalytic theory runs little short of sophistry and that such psychoanalytic students as must abide this instruction are willy-nilly forced to qualify for the status of sophisters.

I find myself opening each new book on theory, or reading the many articles on the subject that for one reason or another find their way into psychoanalytic journals, with mingled feelings of hope and misgiving: hope that the basic principles of psychoanalysis will be restated with whatever amplifications are justified by new and verified clinical findings; misgiving lest one is about to be snared in the sterile tortuosities of metaphysical reconstruction.

What, it may reasonably be asked, are the criteria by which we can assess the validity of theoretical presentations? I suggest that these are sixfold:

- (1) economy and comprehensibility of hypotheses; (2) correlation of these hypotheses with clinical experience; (3) elasticity of presentation, in particular regarding those phases of mental development that cannot be directly verified by actual analysis; (4) in the developmental sense, progress from the simple or rudimentary to the more complex, worked out either in chronological sequence or in the order of complexity; (5) at all times regard for the basic mental concepts on which all psychoanalytical theory is inevitably based; and finally, (6) suitability for presentation, which insists in effect that the theory should be capable of being grasped by students who have undergone during their training the process of correction of psychic biases.

Any theoretical presentation which neglects these basic principles should, I maintain, be treated with a reserve bordering on scepticism.

All this of course has a direct bearing on assessing the worth of theoretical essays; for what is sauce for the gander is *a fortiori* sauce for the goose. Following in other words the logical processes of argument, I subscribe to the view that if the premises

are unsound or indefinite the conclusions can be valid only by the sheerest accident of chance.

For many years I have maintained that no theoretical work on psychology can be trusted that is not founded on what I designate to be basic mental concepts.¹ In reading any theoretical psychoanalytic work, my first interest is therefore to examine the title of the book and then to fasten on the first chapter where if anywhere the virtues or defects of the author's approach are almost certain to emerge.

In pursuance of these criteria let me select as an illustration a recent publication, *The Self and the Object World*.² The title at once raises two controversial issues that bedevil the progress of metapsychology. As for the justification for adopting the journalistic term, 'the self', let us stay comment; but the term, 'object world', cannot be accorded such temporary complaisance. Those analysts who were nourished on Freud's masterly paper, *Instincts and Their Vicissitudes*—not to mention his later formulations in *The Ego and the Id*—might write imaginary letters to the author suggesting that in the second edition (which of a certainty this book will reach) she might use the more accurate but cumbersome title, *The Relation of Some Ego Formations to the Objects of Some Instinctual Drives*. It requires observing furthermore that object representations recorded—as are ego images—in memory traces are, to use a structural metaphor, inextricably intertwined or interleaved with those ego images. This is not simply to note that in the earliest stages of development it is generally agreed that there is no effective distinction between the ego and its objects.³ It is also to restate that a little later the mechanism of introjection continues to blur the distinction between ego and object; and

¹ See Glover, Edward: *Basic Mental Concepts*. Second Edition. London: Imago Publishing Co. (now George Allen and Unwin, Ltd.), 1952.

² Jacobson, Edith: *The Self and the Object World*. New York: International Universities Press, Inc., 1964. Reviewed in *This QUARTERLY*, XXXIV, 1965, pp. 584-589.

³ Primary identification is, incidentally, not a mental mechanism but a more or less plausible reconstruction of an early state of psychic affairs.

that still later the more elastic mechanism of identification permits an interchange of ego and object roles and continues to do so until the regressions of old age. From the functional point of view it is essential at each stage of development that a characteristic, complementary relationship exists between the two sets of organized images: viz., between the ego and instinctual objects. In this special sense one can speak of object representations as constituting an integral part of, or a functional complement to, the ego.

To all this might well be added that the dynamic laws of instinctual gratification—or frustration—do not justify the naïve conception of the ‘world of objects’ as something impinging spatially from ‘without’ on a psychic or, as Jung would have said, a spiritual institution (the ego). If this were indeed so, we should of necessity have to regard the mental apparatus in the structural sense, at any rate, as a kind of Siamese twin dynamized by the common forces of the id, and supporting two distinctly functional departments. Perhaps this is one, but only one, of the reasons why observers, who are prone to dissociate the uniqueness of personality from the comparative banality and often intractability of objects, insist on the use of the term, ‘self’, and why others compromise by speaking of the ‘total personality’. If I may say so, this issue constitutes the critical test of ability to discriminate metapsychology, and is responsible for some of the more naïve divagations which, to mix the metaphor, blossom on the modern metapsychological hedge.⁴

To return to the example chosen to illustrate this essay, Dr. Jacobson in her introductory chapter nails her colors to the mast. The first chapter is not devoted to a summary of the author’s views and definitions of the mental or psychic apparatus. On the contrary, it plunges at once into a discussion of primary

⁴I would cite in this connection the ‘object psychology’ of Fairbairn which slowly graduated from an antifreudian thrust to the status of a neofreudian proposition. See also, for example, Sullivan, Charles T.: *Freud and Fairbairn: Two Theories of Ego Psychology*. Doylestown, Pa.: The Doylestown Foundation, Inc., 1963.

and secondary narcissism, of primary and secondary masochism, of death instincts, all of which subjects are densely clouded by ambiguity. It then surfaces for a moment to speak of the simultaneous presence of libidinal and aggressive forces in the undifferentiated 'psychosomatic matrix' which, for convenience in this context, she calls the 'primal psychophysiological self'.⁵

There is wisely, I believe, no interdiction to labeling what other observers agree to term the ego as 'y', the superego as 'z', and the id as ' \pm '; but he who does should not permit himself the use of hybrid terms. Psychoanalysis is or should be the science of mind, and it boots nothing to eke out uncertain concepts by an appeal to nonpsychological disciplines. If the term 'primal psychophysiological self' has any validity then the term 'self', whether thought of as an unconscious system, a preconscious construct, or a conscious experience has lost whatever psychological meaning it possessed. We have had enough trouble with body-mind concepts these days; the time is high to apply to the study of mind concepts which have a definite psychological form and connotation.

Admittedly it is very hard to keep to this ideal and to refrain from being seduced by the fact that the origin and force of the psychic energies that drive the mental apparatus are somatic in nature; still easier and more comfortable is it to think of an environmental stimulus operating in some mysterious fashion from 'without' the mind as if independently, thereby neglecting the fact that psychologically speaking an external stimulus operates only to the degree that it evokes an internal, psychic reaction.

Freud was compelled to postulate the 'id' as a psychic system in order to clear the psychological ground of what I would like to call this 'psychosomatic confusion'. Granted that although a

⁵ Dr. Jacobson refers in a footnote to the term, 'self', as having been 'introduced by Hartmann (1950)' thereby doing less than justice to the Oxford Dictionary, and other lexicographical works of a much earlier date, not to mention the occasional use of that term by analysts in the early 'twenties.

psychological purist, Freud was nothing if not sympathetic to the quandaries of his pupils and, in his latter-day summaries of psychoanalysis, he sometimes referred to an 'undifferentiated ego-id' operating in the initial stages of mental life. But this did not mean that he was seduced by the philosophic myth of a transcendent phylogenetic ego-core lurking, as Jung sometimes used to suspect, in even the deepest (Jungian) unconscious systems. It was simply that having in principle clearly differentiated the main psychic systems (id, ego, and a differentiated ego system, the superego), Freud was in practice compelled to concede that in the course of early development there must be a stage (or stages) of an overlap among them. In simpler words, as early memory traces are laid down, (which when later amplified and organized constitute the structural ego), so the primitive, rudimentary ego must to some extent be penetrated (infiltrated or charged) by the id which tends to overcome the inhibitory influences turned in the service of adaptation by the rudimentary ego against some instinctual drives.⁶

What Freud intended to solve was the problem of a hypothetical primary ego, a conception that was attractive to the naïve observer. I think however, didactically speaking, it was unfortunate that he did not make clear the difference between a hypothetical isolation of psychic systems, and a psychic sequence or overlapping of functions during actual development or maturation. We have thus been left a legacy of theoretical terms—primal or primitive egos, psyche-somas, body egos, psychic egos, total egos, total personalities, selves and, as we have now seen, primal psychophysiological selves—the general effect

⁶ Of course psychoanalytic structuralists, (and I think the majority of psychoanalysts are structuralists—a shaming confession), may try to express this otherwise. They can say that these rudimentary ego traces are deposited, embedded in, or infiltrate the periphery of the id. This does not get us anywhere except that it warns us to be very guarded about the use of the term 'narcissism'. This is the trouble with metapsychology. If you are compelled to use three different approaches in the explanation of a mental activity—dynamic, economic, and structural—it is a hopeless endeavor to try to reverse the process and combine any two or all three of the criteria. How a structural metaphor can be telescoped with a dynamic conception of mind is beyond comprehension.

of which is to blur if not negate the clear-cut concepts of id and ego. To put this in simpler terms the main effect of this plethora of hypothetical terms is to foster the tendency to displace backward early phenomena of the ego and to regard them as manifestations of or pertaining to the id system.

Here is a line of thought which although familiar enough in therapeutic analysis is not commonly acknowledged in theoretical discussion: the phenomenon of selective resistances to theoretical concepts. Leafing through various discussions of theoretical problems, one gets the impression that two schools of popular analytical opinion exist: those who do not willingly accept the concept of the id;⁷ and those who cannot easily welcome the term, ego, or alternatively feel that it is an inadequate Latinization of a more red-blooded concept of *self*. Perhaps this is only a linguistic matter that affects English-speaking groups;⁸ but these forms of resistance are well worth considering during theoretical discussions. I think it would be well if some among our international committees would devote attention to this matter of terminology. Admittedly attempts have been made to prevent these confusions. One of the early and more illuminating glosses on the concept of the primal ego was made by James Glover in 1926.⁹ A few years later, by which time the concept of the pregenital libido stages had been gradually extended, an optimistic effort was made by the author of this essay to deal with what appeared to be a theoretical impasse regarding the early ego. Taking kindly to the idea of a tripartite (really bipartite of course) division of psychic functioning, I was nevertheless aware that the bulk of both clinical and theoretical descriptions of the mental apparatus neglected not so much the

⁷ I remember in this connection an early exchange of views between Melanie Klein and myself, in which that doughty pragmatist stated bluntly that the concept of the id was '*rein theoretisch*', meaning obviously that it was thoroughly fanciful, impractical, and of no particular clinical value.

⁸ A view advanced by Dr. Joseph Zelmanowits (personal communication).

⁹ Glover, James: *The Conception of the Ego*. Int. J. Ps., VII, 1926, pp. 414-419. Incidentally, in this paper the author adopted at one point the term, *self*, but clearly indicated that this was just a popular equivalent for the ego.

problem of origins but of gradual development from the simple to the complex. It was and still is the habit to talk of, shall we say, the ego or the superego regardless of the age of the child, or of the adult for that matter, as if these institutions spring into existence ready-made and definitively organized.

This sweeping assumption of 'structural identity' was not the worst of it. More unfortunate was the functional implication that the term, ego, implied also an all-round 'identity of effective function'; whereas it should be clear that so long as the parents impose their own ego and superego functions upon the child's developing mind, the functional efficiency of the infant's early ego—in particular the influence of inhibition—or the distribution of id energies, must be greatly at a discount as compared with the efficiency of the more synthesized ego of, say, a four-year-old child. In short, it seemed to me that instead of talking in flat terms about organized egos it would be better to assume that the earliest stages must inevitably be fractional and that until some synthesis develops between the various fractions one could speak only of embryonic and, to a considerable extent, of disparate *ego nuclei*.¹⁰

Basing my ideas on one of the more securely established findings of psychoanalysis, viz., the component and gradually progressive nature of libidinal impulse and the equally component and progressive nature of fusions between libidinal and aggressive impulses, (ignoring all metaphysical play with the conception of death instincts), and supporting this approach by the theoretical assumption that wherever these two tendencies exist

¹⁰ The nuclear theory of ego formation was adumbrated in 1930. It was more fully extended in 1932 and in three subsequent papers. (See Glover, Edward: *Grades of Ego Differentiation*. Int. J. Ps., XI, 1930, pp. 1-11; *A Psychoanalytical Approach to the Classification of Mental Disorders*. J. Mental Science, LXXVIII, 1932, pp. 819-842; *On the Aetiology of Drug Addiction*. Int. J. Ps., XIII, 1932, pp. 298-328; *The Relation of Perversion Formation to the Development of Reality Sense*. Ibid., XIV, 1933, pp. 486-504; *The Concept of Dissociation*. Ibid., XXIV, 1943, pp. 7-13.) All of these are included in Glover, Edward: *On the Early Development of Mind. Selected Papers on Psychoanalysis, Vol. I*. New York: International Universities Press, Inc., 1956.

in close association and deposit characteristic memory traces organized with the object of controlling mental conflict, we had, I believed, the prerequisites of an ego nucleus. I suggested that the concept of a primal or primitive ego could more accurately and plausibly be scrapped in favor of a detailed account of the clinical stages in fractional ego formation. More optimistically, I believed that a nuclear conception of ego development could supply us with a more precise understanding of the concept of fixation and thereby contribute to etiological researches into the origin of different mental disorders. I venture to think that the concept of nuclear development not only does away with 'psychosomatic confusions', but provides a plausible framework in which to contain the obviously necessary concept of increasing functional (dynamic) efficiency of the mental apparatus.

A long digression this, but it is essential to the assessment of Dr. Jacobson's first chapter. For if one pre-empts a primitive connotation of the terminus 'self', as it clearly does, how can one discuss intelligibly the question of primary and secondary narcissism without begging a number of questions? To be sure the nuclear theory of ego development involves a recasting of the term, narcissism. This term has always suffered from the theoretical disadvantage that it was coined on the strength of a clinical (if also mythological) observation.

Basic terms should rest on fundamental conceptions that cannot be further reduced. All that metapsychology needs in order to describe what is generally spoken of as narcissism is the conception of id-energy and of the channels by which this energy is either directly or indirectly turned toward ego formations at whatever stage of development. A more comprehensive cataloguing of the subdivisions of the early ego would in many instances render the term superfluous.

A more important implication of the theory of ego nuclei is that it takes cognizance of the fractional nature of object-directed impulses. It is indeed remarkable how little attention Dr. Jacobson has given in her first chapter to the psychological

standing of the 'object' of an impulse. Granted that the object is that toward which the aim of an impulse is intended to derive a gratification, and that whether the subject knows it or not, (the observer of course knows it but that is not evidence), this object may be either a part of the subject's own body or of some extracorporeal focus of interest.

Clearly it would be advisable when discussing the early development of mind to avoid terms which inevitably suggest a unified structure. Curiously enough the term, primary narcissism, although it is intended to convey an early direction of instinctual energy, implies a degree of unified organization which is in the highest degree improbable. In other words, to some extent, it is a clinical cloak for ignorance.

And so we come back to the title of Dr. Jacobson's book. If we consider mind as a gradually developing activity producing scattered deposits of a (structural) ego, we must refrain from employing such a term as 'the self' which connotes an advanced organization; or at least it should be reserved for stages of organization that can be subsumed in ordinary dictionary definitions such, for example, as 'the individuality of a person or thing'; or 'the object of introspection or reflexive action of a person or thing'. We shall otherwise find ourselves in the same state of inextricable confusion as was Jung, who started with the view that the focal point or final psychological product of his entire system was the 'self' or 'subject'—comprising both personal and racial elements and including the entire psyche, both conscious and unconscious, which in turn was the totality of all psychological processes including all experience—and ended by regarding it at the same time as the source and ultimate ground of psychic existence (an 'inner core') or alternatively as a sublimed residue of the process of 'individuation'.¹¹

We need not go so far with Jung as to share those transcendental transports in which he finally considered the self as an archetype of the deity in the human psyche to agree that we

¹¹ See Glover, Edward: *Freud or Jung*. New York: W. W. Norton & Co., Inc., 1950. Reviewed in *This QUARTERLY*, XX, 1951, pp. 293-294.

must purge psychoanalytic metapsychology of such confusing concepts. It seems to me that the way out of this theoretical impasse is simple enough. We must abandon such concepts as 'total ego', not to mention 'psyche-soma' and 'self', and cease canonizing such generic terms as the 'psyche', (preferably, of course, the 'mental apparatus'), of which the id and ego and its most important institutions are respectively component parts or derivatives. We can then settle down again to clinical work and its interpretation, for in the conflict of modern theories the role of clinical observation has been vastly neglected.

Only one difficulty remains. That is the importance which Freud attached to the influence of major racial traumata or of regression to racial forestages. One need not be a Lamarckian to suggest that in metapsychology such influences, (e.g., 'Thalassic regressions' to borrow from Ferenczi), can like other constitutional factors be regarded as being transmitted through the id; otherwise we shall have to become thorough-paced Jungians operating with 'collective archetypes'. How else can one attempt to particularize the unknowable? Indeed one cannot help thinking that the concept of the id, essential as it now is, covers a number of unexplored and perhaps inaccessible psychic phenomena.

One last comment is made in reference to instinctual energies from the preamble to *The Self and the Object World*. 'We may wonder', Dr. Jacobson says, 'whether the observable facts might not be explained more readily by the assumption that, at the very beginning of life, the instinctual energy is still in an undifferentiated state: and that from birth on it develops into two kinds of psychic drives with different qualities under the influence of external stimulations, of psychic growth and the opening up and increasing maturation of pathways for outside discharge'. It must be recalled that Jung's first postulate regarding psychic energy was that his monistic *elan vital* was originally of a sexual nature but that in the history of the race this energy became 'differentiated'; also that Freud sometimes played with the idea that an indifferent form of psychic energy might re-

enforce libidinal or aggressive drives, although it seems clear that in his view this neutral energy was derived (sublimated) from the sexual instincts. This hypothesis requires the test of clinical observations. Resort to animal behavior has a dubious validity, for the essence of human behavior lies not in its similarity to that of less developed species, but its differences from it. One cannot help questioning that the copulatory behavior of newborn lambs is due to a rapidly differentiated energy occasioned by environmental stimuli. For that matter we may inquire whether what we call libido, pertaining to what the observer knows to be the body of the subject, is already a postnatal differentiation of undifferentiated energy. On the other hand if the author means by 'undifferentiated' simply that the observer has no means of studying the manifestations of prenatal energy, and that what he knows to be the 'subject' (the foetus) has had so far no opportunity of discriminating between what the observer knows to be object drives, the author should say so.

But let that pass. I mention it only in support of the thesis that the strength of the metapsychological approach depends on the validity of its psychological premises. After all, the issue before us is not the form of these instinctual theories but the validity of the conceptions of the 'self'.

For all polemical purposes this essay might very well come to an end here were it not for the fact that in four subsequent chapters of Dr. Jacobson's book there is raised an identical issue: the metapsychological validity of the terms 'identity' and 'identity formation'. These concepts have in recent years become one of the fads in psychoanalytic circles, indeed have gained currency in nonanalytic, eclectic, psychiatric, and social-psychiatric groups, which is very often an indication of the superficiality of a new concept. Could the baptism of these terms have anything to do with the modern addiction to the idea of the 'self'; or are they just catch phrases, as for example, 'interpersonal relations' *et hoc genus*, that from time to time sweep like wildfire across the sometimes parched fields of modern psychoanalytic thinking?

Dr. Jacobson's too brief preliminary survey of the literature on this subject is of a refreshing clarity. Her criticism of these obfuscating terms are very well taken, particularly where she points out that Erikson had in mind an adolescent phase of mental development educed by sociological factors. There Erikson follows to a certain degree the ideology of Jung who, however, reserved the term for 'individuation', a period of life which in his reckoning ensued after the age of forty. Obviously Erikson's use of the terms connoted a purely preconscious activity.

Reading through Dr. Jacobson's critique one gets the impression that she has compromised the issue: should the terms be canonized as basic concepts, or is she prepared to accept them on condition that they correspond to her own definitions? The real issue of course is whether what is now popularly described as 'identity' and 'identity formation' can be described in simpler and more dependable terms.

So we resort once more to our etymological dictionaries, those treasure houses of psychology which *inter alia* portray in chronological, verbal sequence the progress of the preconscious ego, and to which reference can hopefully be made when psychoanalytic terminology gets into a tangle, more particularly over terms that should distinguish primary from secondary processes. But, alas, on this occasion our dictionaries do not help us much. While they by unwitting implication recognize the part played by identification in the development of the ego, they, wisely, do not push matters any farther than to say that 'identity' connotes 'personality' or 'individuality'. It is, in other words, our old friend the 'self' concealing itself under a different caption or paraphrase.

Perhaps that is not quite fair to our dictionaries, for in fact they do imply that unless a quality or attribute of 'sameness' can be established, there is little point in using the term 'identity'. So perhaps after all we can define identity as 'a persisting quality of the experience of sameness'. Whether psychoanalytically that helps us or not is quite another matter.

In passing it may be noted that Erikson,¹² while foreshortening the chronological phase of 'identity formation', is cautious enough to include under the concept not only 'self-sameness' but a certain sameness of characteristics shared by the ego with some of its instinctual objects or with social groups. He seems also to share with Jung the concept of a 'life-task', the failure to achieve, which is one of the potent causes of mental disorder. This grandiose Jungian term translated into psychoanalytic verbiage would emerge as: 'the function of ego adaptation in relation to instinctual drives and environmental stimuli with special reference to the gratification or inhibition of such drives on the objects of instincts'.

Unlike Erikson, who regards earlier stages of mental development as a preparatory phase leading to adolescent 'identity formation', Dr. Jacobson recognizes a multiplicity of stages in the process, commencing from the first infantile distinctions between ego and object and presumably—although she does not say so—ending at death. Here she is supported by or supports the views of most clinical, as distinguished from theoretical, psychoanalysts. All this is reasonable enough. What really matters is the fact that Dr. Jacobson uncritically accepts the *conceptions* of 'identity' and 'identity formation'. What is really impressive is that once theoreticians are seduced by these phrases, they tend to throw into their elaboration of them the whole of psychoanalytic psychology except perhaps their own particular theories and fads. It is one of the strongest pieces of evidence of the power of suggestion that once a catch phrase catches, there is no staying the enthusiasms of the caught. As I have said, Dr. Jacobson does not go quite so far as Erikson; but she obviously accepts, for example, such concepts as 'sexual identity' not to mention a host of therapeutic implications of, shall we say, 'identity disorder'. Indeed if all this is psychoanalysis, one might well substitute for that term the caption, 'Identity: Its Formation and Disorders'; or possibly even, 'The Psychology of Sameness'.

¹² Erikson, Erik Homburger: *The Problem of Ego Identity*. J. Amer. Ps. Assn., IV, 1956, pp. 56-121.

The mention of mental disorders inevitably reminds one that in the halcyon days of psychoanalysis when Federn, Schilder, and others were at the top of their creative form, the problems of ego boundaries and of ego feeling were closely considered on the basis of clinical investigations of both normal and psychopathological states. Such abstractions as 'identity' or indeed the 'self' were conspicuously absent; nor was it ever implied that a whole system of clinical psychology and treatment could be based on such slender, metaphysical foundations.

This is the parlous state of metapsychology at which we have now arrived. The dilemma is clear: whether to relinquish oneself to the recreational joys of building metaphysical dolls' houses or whether to have recourse once more to the exacting criteria of clinical investigation.

Let me suggest what I think is the Achilles heel of the problem of 'identity'. Our studies of affect, though fundamentally sound, lack any appreciation of what I have called 'fused affects'.¹⁸ I believe that the modern obsession with 'identity' is the result of an effort to deal in structural terms with a specific compound affect of ego-feeling which, when unachieved, gives rise to reactions of symptomatic disturbance among which hysterical, depressive, and schizophrenic experiences are dominant. If this is not a satisfying view, then all I can say is that, in the structural sense, the multiplicities of the formation of character or personality are immensely more illuminating than the naïve conception of identity.

I shall draw attention to the fact that although the concept of the 'self' and that of 'identity' are obvious congeners, once our theoreticians become attached to the latter term, we hear very little more of the concept, 'self'; yet if there is anything to be said for the concept of the 'self', it owes its recognition to the fact that it is a structural concept associated with a characteristic affect. It is precisely these metapsychological limitations that

¹⁸ See, for example, Glover, Edward: *The Psychoanalysis of Affects*. Int. J. *Psychoanal.*, XX, 1939, pp. 299-307. Reprinted in: *On the Early Development of Mind*. *Loc. cit.*

make the term, 'identity formation', so seductive because, as I have said, there is no end to the history of 'identity formation'.

Perhaps the best one can say of the concept, 'self', is that it represents a mathematical power by which the colder concept of the ego can be raised to a warmer *niveau*. The concept, 'self', sentimental as it undoubtedly is, cannot compare with the majestic yet austere scope of the freudian ego. No doubt it is hard to part with sentimental terms in the development of metapsychology but that is a sacrifice of feeling which is incumbent on every theoretician worthy of the name.

As for the terms, 'identity diffusion', and 'identity disorder', the least said the soonest mended in my opinion. Either they mean little or nothing or they comprise the whole of psychoanalytic psychology: the influence of instincts, the development of the ego and of object relationships, the part played by a sequence of mental mechanisms and, finally, constitutional and environmental factors. The concept of the ego has never arrogated to itself such a profusion of interrelated factors. Here one must call a metapsychological halt. No term that involves such a complicated interaction of factors and phases of development can lay claim to the status of a basic mental concept.

So we may well return the term, 'identity', to the care of our lexicographers. However preconscious their approach they do at least leave us with a crisp if circumscribed definition, a feat which no psychoanalyst has been able to achieve however much he might hope to emulate it. Strip the concept, 'identity', of its component parts—dynamic, characterological and economic—and it emerges in a shaky state as an affective end result with a multiplicity of shades of feeling.

Approach, on the other hand, the ego from whatever developmental angle you will, subdivide it in as many component parts as seem proper to you, detail the varying roles it plays in the functioning of the mental apparatus and you are still left with a solid, harmonious, uniform concept incapable of further reduction. It is with such basic concepts and with such basic concepts only that the 'anatomy' and the 'physiology' of mind can be con-

structed and with the help of which the 'pathology' of mind can in the long run be interpreted.

Having arbitrarily taken the first part of Dr. Jacobson's book as a point of departure for these observations, it remains to tender apologies to the author for appearing to ignore the second and third parts of her work. The second and third parts are equally stimulating and challenging; stimulating when she expounds (and Dr. Jacobson is a skilful exponent) standard psychoanalytic theory; challenging when she advances her own particular theories of ego development and function.

She has many interesting, if often contentious, remarks to make on such standard issues as the development and integration of superego and ego ideal components, the relation of guilt to feelings of shame, inferiority and the like, but she continues to string her narrative on the thread of 'identity formations' and 'identity disturbances'. Perhaps the main difference between these later and earlier parts of the book, is the fact that in the latter parts the term, ego, begins to come into its own again with a relative decrease of concern with the 'self'—excepting always the ambiguous term, 'loss of self'.

I readily admit that in so far as scientific research is concerned my motive in restricting this essay to one or two issues is contentious in that it is intended once again to call attention to the need for organized and disciplined research.¹⁴ I am exercised as always by the slovenliness with which unchecked speculations acquire sanction through sheer force of repetition from one reference to another without adequate examination. When in 1951 I was appointed chairman of the ill-starred International Research Committee my first concern was to isolate for purposes of examination whatever 'new' (now frequently spoken of as

¹⁴ The first attempt is to be found in a paper read at the Amsterdam Congress 1951, viz., Glover, Edward: *Research Methods in Psychoanalysis*. Int. J. Psa., XXXIII, 1952, pp. 403-409. Reprinted with annotations in: *On the Early Development of Mind*. Loc. cit.

neofreudian) ideas had emerged. Owing to the absence of branch organizations for research the effort fell flat in 1953. Matters have gradually improved in this respect, but the influence of group suggestion is still, I fear, paramount.

To be sure we must never hamper the promulgation of individual speculations. For this reason alone one welcomes Dr. Jacobson's book. It is nevertheless essential that these individual efforts be passed through, if necessary page by page, the grill of concerted inspection. Once upon a time and in most fields of scientific endeavor the disciplinary slogan ran, 'verify your references'. To this I would add the ancillary proviso: 'Examine your references before you lightly award them the status of established findings'. In the first instance I would support the recommendation: 'When dealing with fundamental conceptions of mental function, never accept or canonize terms which are capable of reduction to simpler and more basic concepts'.

A Reconsideration of Thinking, the Dream Process, and 'The Dream'

Lawrence S. Kubie

To cite this article: Lawrence S. Kubie (1966) A Reconsideration of Thinking, the Dream Process, and 'The Dream', The Psychoanalytic Quarterly, 35:2, 191-198, DOI: [10.1080/21674086.1966.11926381](https://doi.org/10.1080/21674086.1966.11926381)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926381>



Published online: 29 Nov 2017.



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A RECONSIDERATION OF THINKING, THE DREAM PROCESS, AND 'THE DREAM'

BY LAWRENCE S. KUBIE, M.D. (BALTIMORE)

INTRODUCTION

The purpose of this communication is to focus attention not on the form and content of the dream, but on dreaming as a process. Since we make use of the same apparatus whether we are awake or asleep, the dream process in sleep and the thought process when awake must be understood together, if we hope to understand the relationship between the two. It is my thesis that both awake and asleep, there is a constant asymbolic (imageless) preconscious stream of central activity and that this preconscious stream is sampled by means of conscious symbolic representatives, by a process which in turn is vulnerable to distortion under the influence of unconscious conflicts. In essence this is what Freud called the 'topological' aspects of mentation, and therefore of dreaming.

I will make no further use of this metaphor, however, nor of certain other metaphors which appear currently in psychoanalytic writings, and which are regularly miscalled 'hypotheses'. Nor will I debate them in this brief paper. I will only mention the fact that the term 'topological' has never seemed to me a happy one because of its static connotations. Webster defines topology as 'the description of a particular place; the history of a region as indicated by its topography; the configuration of a surface'.

For the sake of clarity I must register one other dissent. I believe that analysts of all schools are in agreement that the dynamic interplay among the systems Cs, Pcs, and Ucs implements all human psychological processes; that they have bio-

Read at the Midwinter Meeting of the American Psychoanalytic Association, in New York, December 1964.

genetic roots in instincts and their derivatives (the id); and that they interact with the environment through the perceptual and effector apparatus, (which is the essence of Freud's original concept of the ego). There is general agreement also that the interplay among these three systems in human mentation, as well as their interactions with the environment, are guided by a continuous feedback from the value judgments of conscience and self-critique (*ego-ideals*), as these are developed and influenced by the expressed or unexpressed praise or criticism of others, and by the need either to conform to or rebel against the mores of the time and place. Moreover, it is generally agreed that these interactions occur on all three levels concurrently, to make up that mosaic of Cs, Pcs, and Ucs steering devices known as the superego. About this condensed statement of a vital aspect of psychoanalytic psychology, I have no reservations. It is a later step that troubles me. At a certain point, perhaps out of his earlier interests in neuro-anatomy, Freud called this the 'structural' aspect of human mentation. This metaphor seems to me to have been even more unfortunate and misleading than the other, because it does not increase the precision of our descriptions of mental processes, but blurs them by an inexact analogy, and also because it has no explanatory value itself. Indeed the effort to use this analogy as an explanatory hypothesis has led us into a morass of anthropomorphic pseudo-explanations.

One of many examples of how far astray this structural metaphor can lead us is found in the strained and hair-splitting distinctions, devoid of realistic clinical or theoretical differences, in Arlow and Brenner's recent book (*1*). They allude in general terms to technical innovations which they attribute to the structural hypothesis, but they cite none. Nor indeed does anyone else who uses the structural metaphor. It was particularly unfortunate for the development of a truly dynamic psychoanalytic psychology that Freud's formulation of the structural metaphor coincided with his turning his attention away from the dynamic role of preconscious processing.

Since these are my strong convictions, any effort to force my formulations into the framework of either the topological or the structural metaphor would only introduce confusion into my hypothesis and would be personally dishonest as well. Therefore I will present my thesis without further reference to them, returning instead to Freud's earlier dynamic concepts with some extrapolation from them.

Finally let me state explicitly that this will be an exposition of my hypothesis, not its proof.

THE HYPOTHESIS

Evidence has long been accumulating that the brain is always active, even in deep sleep, and that this activity consists of a continuous preconscious (subliminal) processing of experience, —what the Wurzburg School called 'imageless' thought (5). (In this connection, we must bear in mind the further fact that man is never completely asleep or completely awake, that the differences between the two states are relative and not absolute, and that these two states which seem so different when superficially regarded are in fact only widely spaced bands on a more or less continuous spectrum.)

All psychological processes have afferent roots, the nature of which will be discussed below with respect to their origins and levels. But whatever their sources, and whatever the levels on which they operate, each incoming 'bit' or unit or 'gestalt' stirs the residual imprints of prior psychological events. Consequently, the ensuing flow of processing always represents a condensation of the near and far, the past and present, plus their extrapolation into the future. These make up that continuous stream of inner psychological events which—both when we are, relatively speaking, awake and in the state of relative sleep—is carried forward in time preconsciously, implemented by what the engineers call 'coded signals', which are the primitive forerunners of symbol formation. This pre-conscious processing of data goes on unceasingly throughout all life. A study of quantitative and qualitative variations in the

preconscious stream awaits psychological and physiological investigation, by means of refinements and quantifications of our qualitative use of the techniques of free association, of dream analysis, of electro-encephalography, and of other methods.

During sleep this flow of preconscious processing can best be called the '*preconscious dream stream*', (or, so as to avoid confusion by 'clang' association with Lewin's dream screen, it might be called the 'preconscious dream flow'). What is customarily spoken of as 'the dream' (both in popular and scientific parlance) is in reality only a fragmentary, weighted sample of this preconscious flow: a sample expressed for the most part in multivalent and therefore condensed visual symbols. This symbolic sample (i.e., 'the dream') occurs primarily if not exclusively during transitions from sleeping to waking and from waking into sleeping, and also during those partial, abortive, incomplete transitions in either direction which occur many times during sleep (3, 6, 8). Clearly then 'the dream' bears to the preconscious dream flow the same relation that the hypnagogic reverie bears to sleepy ruminations, or that our conscious processes in the fully waking state bear to the continuous waking stream of preconscious processing. In short, all conscious processes, whether awake or asleep, are weighted symbolic samples from a stream of continuous asymbolic or imageless preconscious processes. It follows that all creative learning and thinking (whether awake or asleep) is preconscious; our conscious symbolic processes serve primarily to sample, communicate, ruminate, and test.

Freud pointed out long ago (4) that the dream is fed and also modified by after-images derived from the unfinished business both of the current day and of an entire lifespan. What I will emphasize here are certain additional facts. During both wakefulness and sleep, the preconscious stream is fed and also modified by a continuous afferent bombardment from the body and from the outside world by way of all afferent modalities. Like the central preconscious stream itself, a major share of this afferent input is preconscious, although it contains at the

same time variable conscious symbolic components. During sleep the sources of the afferent input are predominantly enteroceptive, with secondary proprioceptive and minor exteroceptive contributions (9). In the waking state the relative roles of these three basic sources of afferent supply are reversed: exteroceptive and proprioceptive predominate over enteroceptive components. This shift has relevance both to the preconscious dream flow and also to those fragmentary samples of the process that are called 'the dream'. Hypnotism, drugs, and relative afferent isolation (erroneously miscalled 'sensory deprivation') (7, 10, 11) have effects on the relative roles played by these three basic sources of input. These effects are similar to those which accompany sleep, in that there are parallel changes in states of psychological organization and disorganization, ranging from sleep to waking, from dream to hallucination, from neurosis to psychosis.

The changing tides of body needs and the incessant flux in the outside world send signals, both conscious and subliminal, to the central nervous system. In the body the messages arise from recurrent changes in tensions in muscles, joints, and tendons of the trunk and extremities, and from changes in the distribution of glandular, cellular, muscular, and vascular activities on the body surface, in the apertures and in the internal organs. Recent work by seismologists has demonstrated the constant occurrence of 'microseisms' (microquakes). It is said that awake and asleep we live on the 'trembling, shuddering crust of the earth'. These are transmitted as fine, subliminal vibrations to the bones, joints, muscles, and viscera and thence to the central nervous system. Together all this constitutes the source of an incessant subliminal body-borne afferent input. Another input is exteroceptive in origin. For instance, Dr. John Bordley said recently that we live in a continuous subliminal sound stream (2). At the same time the eye, at least when it is open, sends a continuous bombardment of subliminal input from the perimacular retina. The contributions from subliminal olfactory and gustatory input await investigation. In any consider-

ation of the mentational process, awake or asleep, we cannot continue to leave this imageless bombardment out of account; yet among analysts only Charles Fisher has investigated these phenomena (3).

Furthermore, the studies of Marsh and Worden (12) and of others indicate that a direct overflow can occur from subliminal input and subliminal processing to autonomic responses. There may be individual differences in the ease with which, without the intervention of conscious processes, the subliminal input can influence the autonomic system and its output. If so, such differences might provide a clue to differences in thresholds of affective responses in general, including the affective color both of the preconscious dream flow and also of the symbolic dream sample. Consequently these investigations may add to our understanding of the contribution made by the preconscious afferent bombardment to the affective quality of the dream flow and of the dream, as well as to its content.

New techniques are needed by which to measure individual differences in rates and qualities of preconscious processing, differences in the threshold for autonomic responses to the preconscious input and to the ensuing preconscious stream, differences in the accessibility of the continuous preconscious stream to conscious symbolic sampling, and finally differences in the vulnerability of the process of symbolic sampling to the various kinds of dissociative distortion which lead to repressive inhibition. The qualitative and quantitative clarification of all such possible differences will be essential for the future development of a psychophysiology of psychoanalysis.

Clearly future psychophysiologic and psychoanalytic research in this area will be built around investigations of the preconscious stream both in the waking state and in sleep. This will be essential for our further study of dreaming, of creativity, and of symptom-formation in the neuroses. Unhappily, we have as yet no precise methods by which to carry on such investigations. The development of appropriate techniques will constitute a major methodological breakthrough for all psychologies, but especially for psychoanalytic psychology.

Such methods will be important also for understanding the nature of organic deficits in brain function. Here the limitations of our knowledge are due to the fact that we do not know what the aging processes (or brain damages of other kinds) do to the preconscious stream. Up to the present time, investigations of deficits in cerebral functions which are due to processes of organic disease have been confined to studies of disturbances in the conscious symbolic sampling of the preconscious stream. Such studies have great importance; but without more precise data on the influences of brain damage on the preconscious stream itself, they provide us with only a part of the story.

POSTSCRIPT

I do not relish my position about these matters, because few who hear or read this will like or approve what I say. What they do not realize, however, (and by 'they' I mean my many psychoanalytic colleagues and friends, especially perhaps from New York) is that they are in danger of becoming the defenders of the most uncertain, the least necessary, and the most easily challenged elements of psychoanalytic theory. They are defenders of static elements in psychoanalytic thinking which they polish and refine but never clarify, never re-examining their own premises. It is a strange experience to travel over the face of America or Europe talking to colleagues everywhere, as I have in recent years, only to hear the same thing from the most erudite and diverse scholars in our field. These scholars have several traits in common: for many years they have contributed to psychoanalytic literature and have taught and led psychoanalytic institutes. All are unassailably freudian. This adds to the significance of their uniform complaint, which is: 'I cannot read the literature in my own field anymore. It has become stereotyped repetitions of verbal clichés.' Some even called it 'sophistry'. All say that we must break out of this rut and return to our fundamentals, if we are to move forward again. They also bewail the way our younger colleagues repeat these standard formulae uncritically, almost as though they were afraid that they would be excommunicated if they had the

temerity to do any independent thinking. They agree that it has become the major duty of senior and experienced theoreticians and clinicians in psychoanalysis to challenge this enforced stereotype.

This is what, in a small way, I have tried to do here. Whether my specific hypothesis is right or wrong is of less importance than the challenge which it brings to re-examine certain assumptions we have been taking for granted.

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Some Considerations of a Retirement Policy for Training Analysts

Joseph J. Michaels & Mollie L. Schoenberg

To cite this article: Joseph J. Michaels & Mollie L. Schoenberg (1966) Some Considerations of a Retirement Policy for Training Analysts, The Psychoanalytic Quarterly, 35:2, 199-216, DOI: [10.1080/21674086.1966.11926382](https://doi.org/10.1080/21674086.1966.11926382)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926382>



Published online: 29 Nov 2017.



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SOME CONSIDERATIONS OF A RETIREMENT POLICY FOR TRAINING ANALYSTS

BY JOSEPH J. MICHAELS, M.D. AND MOLLIE L. SCHOENBERG (BOSTON)

In 1963 a committee of the Boston Psychoanalytic Society and Institute, Inc. reported on special problems of training analysts with particular reference to recommendations for policies and procedures concerning retirement.¹ This study evolved from that report. Two aspects of the committee's considerations were: first, the review of a long-existing policy on retirement, hitherto unimplemented, and second, the need for a policy in the face of increasing longevity with its concomitant problems. The whole subject of retirement is under discussion, and principles and policies in the process of formulation, at the Boston Institute.²

Although the policy and practice of retirement is well established in government, industry, and education, we can find no allusion to this in the annals of the American Psychoanalytic Association. Obviously, when an institution is growing and developing, factors which deal with aging are not in the foreground. Knight (6), in his presidential address in 1952, referred to the Association as 'an overgrown adolescent, with more growth in prospect and still looking forward hopefully to attaining scientific maturity'; but made no reference to retire-

From the Boston Psychoanalytic Society and Institute, Inc.

¹ Joseph J. Michaels, M.D., Chairman, Grete L. Bibring, M.D., and John M. Murray, M.D. Though the corporate name, Boston Psychoanalytic Society and Institute, Inc., embodies both the Affiliate Society and the Approved Training Institute of the American Psychoanalytic Association, the Boston Psychoanalytic Institute is used to designate the training arm of the organization. For purposes of brevity in this paper the term Institute refers to the training school.

The authors wish to express their thanks to Drs. Bibring and Murray, and their special indebtedness to Dr. Bibring who read this manuscript critically and offered invaluable suggestions.

² Since submitting this paper the Boston Psychoanalytic Society and Institute, Inc. has adopted a policy based on the guidelines proposed.

ment. Neither did Hendrick in his presidential address in 1955 (5), nor did his successors. While institutes may have had to deal with the problem of retirement individually, so far as we have been able to determine, of the nonuniversity-connected institutes, only the Los Angeles Institute for Psychoanalysis has formulated a definite procedure. However, it is of interest that the word—retirement—is nowhere explicitly stated in their Procedures for the Reappointment of Training Analysts.

As recently as December 1958 the American Psychoanalytic Association took cognizance of the increasing number of senior members by incorporating into its constitution a category of life membership,³ paralleling the policy of other well-established scientific organizations.⁴

HISTORICAL DEVELOPMENT

In the early days of psychoanalysis, there was no need for retirement provisions for the small number of institutes and the few relatively young training analysts. However, as institutes grew in number and size, and as a new impetus was given to this discipline following World War II (4) and the immigration of eminent psychoanalysts from abroad, the number of training analysts increased and the problem of retirement arose imperceptibly. While this probably affected the larger institutes, such as Boston, Chicago, and New York, it was not until 1953 that the Boston Institute had on record a policy on retirement—a policy which was not implemented until ten years later. In 1933 there were only three institutes (Boston 1932, Chicago 1932, and New York 1931) with a fourth (Baltimore-

³ Article II, Section 3. 'Life Members, Active Members, who either (a) have attained the age of seventy (70) years, or (b) have completed a period of thirty (30) years as an Active Member shall be known as Life Members. Life Members shall have the same status as other Active Members in all respects, except that no Life Member shall be required to pay annual dues.'

⁴ On January 13, 1965 the Boston Psychoanalytic Society and Institute adopted a constitutional amendment establishing Life Membership for active members who have attained the age of seventy years or have completed a period of thirty years as an active member.

Washington) in the process of formation. Thirty years later the Roster of the American Psychoanalytic Association listed eighteen Approved Institutes and Training Centers. As an explanation of this rate of growth, it must be kept in mind that one of the requirements for qualifying as a provisional institute is a faculty with a minimum of five training analysts. It is noteworthy that of a national total of three hundred fifty-one training analysts in 1963 (3), only two hundred fifty-five are recorded as active training analysts in institutes which have no declared retirement policy. One may speculate as to why ninety-six (27.4%) training analysts are not active, and whether this bears any relationship to an implicit retirement which was mainly self-imposed. Nor have the institutes developed corollary policies concerning other aspects of the training analyst as a faculty member, such as sabbatical periods, leaves of absence, etc., although in the latter case several institutes make arrangements on an individual basis.

UNIQUE ROLE OF THE TRAINING ANALYST

In addition to carrying out the personal or didactic analyses of accepted candidates, the training analyst fulfils many other functions. He is part of the group that usually forms the central core of the institute or of the Education Committee, and is responsible for the policies and practices of the entire educational training program. The criteria for the selection and appointment of training analysts have never been uniformly established for all institutes, one reason being the complicated therapeutic and educational aspects of psychoanalytic training itself. In fact, in many instances no data are available since material on nominees for training analyst status, if recorded at all, is regarded as confidential.

Lewin and Ross, whose pioneer work on psychoanalytic education is being continued under the aegis of the Committee on Psychoanalytic Education (COPE) of the American Psychoanalytic Association, refer to these complicated aspects as a 'syncretic' process:

The psychoanalytic educator has awakened gradually to the fact that education and the psychoanalytic procedure exist in two worlds and that psychoanalytic education, as a concept, is a syncretism. . . . the two models 'psychoanalytic patient' and 'student' complement, alternate with, and oppose each other . . . the institutes are unavoidably trying to exert two effects on the student: to 'educate' him and to 'cure' or 'change' him . . . he is the pedagogic unit or object of teaching and the therapeutic unit or object of psychoanalytic procedure.

There is no unitary theory of psychoanalytic education. A student is presumably psychoanalyzed; he is also presumably educated at the institutes. But the two processes proceed, each according to its own canons. The training analysis has its goal . . . the education has its separate goal. A system which satisfactorily interdigitates the two has been at best approximated by the institutes (7, p. 47).

This problem of syncretism, the dualistic role of training analyst as therapist and teacher, is reflected in the reluctance of institutes to keep open records of candidate training because of the confidential nature of the psychoanalytic process. In some institutes, only training analysts have access to them. While confidentiality has always beset the training analyst, this should not invalidate maintaining statistical records on training and teaching data. Yet the sorting of personal qualitative data from objective quantitative data has, in a number of instances, met with resistance. The work of Lewin and Ross, pointing up this lack of factual data in educational institutes, served as a stimulus for improved record-keeping in the institutes after 1958. Our study emphasizes the need, both from a long-range point of view and for historical and research purposes, of keeping simple, impersonal, but complete statistical training records.

To understand the problem of retirement, a number of other factors unique to psychoanalysis and hence to the training analyst must be scrutinized. The length of psychoanalytic training, preceded by a long period of training to fulfil the medical and psychiatric requirements, is well known. Recent information from the Board on Professional Standards (2) shows that the

average length of training is eight years, which is about the same as that cited for the four-year span from 1957-1958 to 1961-1962. This is more than the 6.2 years given for the twenty-five-year period of 1932-1957 reported in the Survey. The analyst at the time he is eligible for appointment to training status is 44.5 years of age, according to the national average quoted by Lewin and Ross. Bandler (1) further describes this time of life as 'an age close to what the medical schools are looking for in the appointment of a chairman of a department of psychiatry'.

The data from the Boston Institute compare interestingly with the above. The average age at time of appointment of the current group of twenty-five training analysts was 46.0 years (45.2 for men and 47.4 for women). Yet for the last six training analysts appointed in the past three-year period (1959-1962), the average age was 47.0 years (above the national mean age in 1958 of 44.5 years). Of the current Boston group of training analysts, eight (four of whom were women) were trained or graduated abroad, and were appointed in the early history of the institute. Other statistics of the last few years seem to indicate a continuing trend that analysts are well beyond their middle forties before being eligible for training analyst status.

Academic Year Graduated	Number Graduated	Average Age on Admission	Average Age on Graduation	Average Number Years in Training
1958-59	6	32.5	41.8	9.0
1959-60	14	29.6	37.7	8.3
1960-61	15	32.3	40.1	8.5
1961-62	4	31.6	41.5	9.5
1962-63	9	31.0	39.0	6.8

It might be presumed that in the past, when there were few institutes and few training analysts, a training analyst who was aware of any incapacitating condition would withdraw from training activities or, if seriously afflicted, would be requested to withdraw. On the other hand, some training analysts may wish to carry on with their work in spite of any disability and thus avoid narcissistic mortification. In general, with the lack of

definite retirement policies, subtle means have been utilized not to reappoint a training analyst whose faculties have begun to show impairment. In some institutes, where the Education Committee has the responsibility of assigning candidates to training analysts, such a training analyst receives no further assignments and has no training duties to perform, but retains his official titular status. However, if an institute considers a training analyst incapable of conducting a training analysis, this might raise questions as to his capacity to practice privately.

What is the responsibility of an institute to those training analysts whose entire time has been devoted to training within the institute when their professional life is cut off with the termination of their role as training analysts? What consideration should an institute give to the training analyst who, at seventy years and over, is mentally intact? In general, training analysts have been much more aware of their responsibilities and obligations to the institute and to their candidates than the institute has been to the training analysts.

As some institutes develop close associations with universities, there is a tendency to adopt the principles and procedures of the universities with which they are affiliated (8). Here, because of the uniqueness and syncretism of analytic training, as well as the need of the institute to maintain autonomy in essential aspects of training, there are limitations to the application of this policy. The university faculty member is reappointed at regular intervals and often receives tenure, whereas the training analyst is usually reappointed regularly for five-year periods after his original appointment but without tenure. While the official principle among these institutes is one of recurrent evaluation and reappointment, in practice an original appointment usually means appointment for life.

There are at least four approved institutes which are university-connected, that is, are affiliated with the psychiatric department of a medical school. These are Columbia, Division of Psychoanalytic Education of the State University of New York, Cleveland, and Pittsburgh. The Pittsburgh Institute may be cited as part of the Department of Psychiatry of the medical

school. Although university appointments to that department terminate for deans and chairmen at sixty-five, and for others at seventy, the institute works under its own regulation that appointment to the Department of Psychiatry is not a prerequisite for membership on the Faculty of the Institute.⁵

In contrast, the Columbia University Psychoanalytic Clinic operates within the policies of the medical school in regard to academic appointments: an instructor or professor must retire at age sixty-five; a training analyst over the age of sixty-five cannot begin a training analysis of a candidate; there is, as yet, no policy concerning a supervising analyst.⁶

In communications from institutes on retirement policies, such phrases as 'no fixed policy', 'discuss it informally', 'have a gentleman's agreement', 'tacit agreement that we can decide and act decently' constantly appear. There is abundant confirmation of the institutes' difficulties in facing retirement and its harsh implications. As a result, this issue has been side-stepped. As each painful, individual case arose, it became manifestly desirable to set up a definite policy.

It was against this background that the Boston Institute decided to formulate an objective policy on retirement that would take into consideration the candidate as well as the training analyst. It would resolve for the analyst an extremely difficult issue to which he inevitably brings his complex, subjective orientation, especially where a colleague or his training analyst is involved. In the Boston Institute, and perhaps others, where training analysts form a small, closely knit group with a history of long associations and personal interrelationships, it would minimize the otherwise insurmountable task of retiring an intimate colleague.

FINANCIAL RETIREMENT PLAN

In October 1959, the Boston Institute pioneered in adopting a deferred compensation plan, which has been operating smoothly to the satisfaction of the training analysts, the insti-

⁵ Astley, Royden: Personal communication. September 16, 1963.

⁶ Goldman, George S.: Personal communication. September 23, 1963.

tute, and the candidates, with, as yet, no observable adverse effects on the latter. This arrangement is consistent with the general practices of educational institutions and industry. It involves two marked changes from traditional analytic procedures: 1, all training analysts become employees of the Boston Psychoanalytic Society and Institute; and 2, all candidates are billed for training analysis fees by the institute in contrast to receiving bills personally from their individual training analysts. General statements appear in the Employment Agreement between the Society/Institute and the training analyst concerning the validity of the contract until the training analyst's 'retirement'. One of the stated conditions of terminating the contract of a training analyst is 'if in the opinion of the Education Committee of the Institute, . . . Dr. X is unable to perform his duties as a member of the Faculty of the Institute . . .'.⁷

Prior to this (1953), the Education Committee of the Boston Institute made the following proposal: 'Training Analysts who have reached the age of seventy-five should become Training Analysts Emeritus, and should no longer be engaged in active training matters'. This proposal was never implemented as a definite policy. Hence, ten years later, with the current attitude of planning for the aging and the operation of a financial retirement plan, the problem is being studied again. It may be idiosyncratic to the evolution of psychoanalytic organizations that certain procedures and policies develop only after a crisis. For example, the present Committee on Retirement at the Boston Institute was appointed to avoid the need for dealing with critical, acute situations.

The establishment of important safeguards, as represented by any retirement plan for training analysts, creates certain liabilities, such as the loss of creative individuals who are still capable of functioning to full capacity. Waelder states: 'Psychoanalysts spend a great part of their professional lives—not only their official training period, long though it is—merely trying to learn what Freud or other, older workers already knew. An unknown but certainly large part of such insight is

⁷ Article I, Item 2, (c).

not handed down at all but is completely lost when an experienced analyst dies. It may, or may not, be rediscovered by the independent efforts of others' (9).

As a physician grows older, he acquires greater skill, more understanding, and a broader perspective in his discipline. This is especially true in the field of psychoanalysis where the training analyst begins this aspect of his career rather late. But since he is also prone to man's physical and psychological illnesses and stresses, there is a need to make provision for retirement, ideally on an individual basis. It should be emphasized that once a general retirement policy is established, the incumbent training analyst should accept it with due dignity and grace as a routine procedure. Any broad financial retirement plan might well consider the development of a long-range pension program, as is done in other disciplines.

SOURCE MATERIAL

While the Committee on Retirement at the Boston Institute was formulating principles and policies on retirement, specific background and other data were obtained and assembled from major medical schools of Boston, affiliate institutes, and official records of the Boston Institute.

Retirement policies of the three major medical schools in the Boston area indicate that the age of retirement varies from that of sixty-five at the Boston University School of Medicine, sixty-six at the Harvard Medical School, to seventy years at Tufts Medical School. Not included were the hospitals connected with these medical schools, all of which have specific retirement policies and pension plans.

As stated earlier, with the exception of the institutes which are university-affiliated, only the Los Angeles Institute has a retirement policy, with a critical evaluation of the training analyst at seventy years of age.⁸ The original appointment is for a three-year period and reappointment for five-year periods until

⁸ Friedman, Lawrence J.: Personal communication. September 23, 1963. (Los Angeles Institute for Psychoanalysis: *Procedure for the Reappointment of Training Analysts*, p. 5, rev. Feb. 5, 1962.)

the age of sixty-six, when it is for a four-year period, i.e., until the age of seventy. If the training analyst at age seventy should be reappointed, tenure is reduced to a three-year period thereafter. It is felt this method takes into account the individual and personal factors, and avoids blanket action. As a general policy, Los Angeles limits the number of candidates carried by a training analyst to four, which minimizes the complications for the candidates involved if a serious illness or retirement of the training analyst occurs.

Lewin and Ross found 'no general rule about the retirement of training and supervising analysts' (7, p. 220). Their figures reveal that 'if retirement, or the attainment of an emeritus status, were routinely compulsory at the age of seventy, the training analyst body would lose three percent of its number'. If we compare the figures of the current Boston group of training analysts with this percentage, there would be a loss of three (12.0%) training analysts who have attained the age of seventy. The International Psycho-analytical Association has no direct information of established policies and specific practices on the retirement of training analysts within its component societies.⁹

The study of the current group of training analysts of the Boston Institute was made in relation to number, age, sex, ratio to other groups, training load, work load, etc. Data were compiled from curricula vitae, Biographical Directory of the American Psychiatric Association, and institute records. Ages were recorded on the basis of the last birthday prior to April 1, 1963.

A word of explanation is warranted about terminology which differs among the institutes. In the category of training analyst (five-year appointment) the associate training analyst is included. His initial appointment is for a two-year period in which he can conduct only training analyses with consultation, but no supervisory analyses.

In Table I the column labeled Eligible Members refers to the fact that an individual appointed as training or supervisory analyst 'must be eligible for active membership in the Ameri-

⁹ Zetzel, Elizabeth R.: Personal communication. October 2, 1963.

TABLE I
AGE AND SEX DISTRIBUTION OF TRAINING ANALYSTS AS COMPARED WITH EDUCATION
COMMITTEE, ELIGIBLE MEMBERS, AND TOTAL ACTIVE MEMBERS

Ages	Training Analysts			Education Committee			Eligible Members			Total Active Members		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
36-39	0	0	0	0	0	0	0	0	0	15	0	15
40-45	0	0	0	1	0	1	12	2	14	35	4	39
46-50	7	0	7	9	0	9	19	2	21	29	4	33
51-55	2	0	2	3	1	4	9	0	9	13	2	15
56-60	4	3	7	4	3	7	11	3	14	12	3	15
61-65	1	1	2	1	1	2	3	2	5	6	3	9
66-70	1	3	4	1	3	4	1	3	4	2	3	5
71-75	0	1	1	0	1	1	2	2	4	3	2	5
76+	1	1	2	1	1	2	1	1	2	1	1	2
Total	16	9	25	20	10	30	58	15	73	116	22	138

can Psychoanalytic Association and have been an active member for at least five years in any Affiliate Society'.¹⁰ The age range of the twenty-five training analysts of the Boston Institute is from forty-six to seventy-eight years, the mean age being 59.3 years at the present time, which may be compared with the 1958 figure for Boston of 56.9 years and the national figure at that time of 54.7 years (7, p. 217). This denotes an increase in age in a five-year period in the Boston group of only 2.4 years in the mean age.

Table I further shows that of a total active membership of one hundred thirty-eight, there are twenty-five (17.8%) training analysts. However, of this total active membership, seventy-three (52.9%) are eligible for such appointment as far as the basic requirements are concerned, so that actually the twenty-five training analysts represent 34.2% of those eligible for this status. Of a total of fifteen eligible women nine (60.0%) are training analysts. These women represent 40.9% of the total female active membership of twenty-two (15.9% of total active membership). It is of interest that although the age range of active members is between thirty-six and seventy-six plus years, there are no training analysts of either sex under forty-six, but fourteen of thirty-nine active members are eligible; no women training analysts are under age fifty-six.¹¹ It may be of some consequence that of the nine training analysts over sixty-one years, there are six (66.6%) women, whereas of the twenty-one active members over sixty-one years, only nine (42.8%) are women. Yet of the fifteen eligible members in this same group over sixty-one years, eight are women, of whom six (40.0%) are women training analysts. Stated another way, of the entire active membership, there are forty-nine (28.9%) ineligible for training analyst status, i.e., forty-two (30.4%) men and seven (5.0%) women.

¹⁰ Compendium of Rulings 1911-1961. Board on Professional Standards, American Psychoanalytic Association.

¹¹ Following April 1, 1963, one new training analyst was appointed—a woman under this age—and one senior training analyst has died.

It becomes clear from these data that the proportion of women among the training analysts and on the Education Committee is greater than that of the men in both the eligible group and in the total active membership. That there is such a high proportion of women on the Education Committee is a logical sequence to the fact that training analysts automatically become members of that committee.

Lewin and Ross state, 'the age group [of training analysts] over sixty [years] numbers about one-fourth of the total training and supervising analysts, and the percentages show that it does about one-fourth of the work' (7, p. 221). In comparison the Boston figures show nine (36.0%) training analysts over age sixty, a figure somewhat higher than the national one. Further, these nine training analysts carry a training load of twenty-four (34.7%) of all candidates in training analysis, sixteen (22.8%) of all candidates in supervision, and thirty-nine (52.0%) of graduate members in supervision. It may also be pointed out that the bulk of this training load is carried by four training analysts. If seventy years is taken as a possible arbitrary age for retirement, this would involve three training analysts who carry eight candidates in analysis, two in supervision, and one graduate member in supervision.

Of relevance to any consideration of retirement policies is the rate of appointment of training analysts. Lewin and Ross

TABLE II
AGE DISTRIBUTION AND TRAINING LOAD
OF TRAINING ANALYSTS

Age Distribution and Training Load	Number of Training Analysts	Number Students in Analysis	Number in Supervision	
			Students	Members
46 to 50 Years	7	18	29	15
51 to 55	2	7	3	2
56 to 60	7	20	22	19
61 to 65	2	1	1	1
66 to 70	4	15	13	37
71 to 75	1	0	0	0
76 and Over	2	8	2	1
Totals	25	69	70	75

(7, p. 216) point up the sharp jump in the number of training analysts appointed after the war, from nine in 1945 to twenty-five in 1946, reflecting the increased postwar demand for psychoanalytic instruction, to two hundred fifty-five in 1958. They state that they are unable to make adequate statistical comparisons with former years because of the dearth of records, the numerous disabilities and deaths of training analysts, and the difficulty in obtaining statistical information.

Comparable trends in the Boston Institute, from 1938 to 1948 show a total of nine training analysts appointed, of whom six (66.6%) were women and from 1950 to 1960 thirteen additional appointments, of whom three (23.0%) were women. From 1961 to 1963 only one new training analyst was appointed. In the period from 1938 to 1948 the nine training analysts were appointed for a student body that had increased from twenty-two to fifty-three, whereas in the last decade the number of candidates has almost doubled.

With this slow rate of appointment of training analysts, it may be predicted that in the next ten years, sixteen (64.0%) of the present group of Boston training analysts will be sixty-six years of age and over, and that twenty years hence the entire group of current training analysts will have reached retirement age or be deceased.

Table III delineates the work load of the training analyst other than that of training or supervisory analyses, namely, his role in Education Committee work, standing or ad hoc committees, and classroom teaching. It shows that eighteen (72.0%) of the twenty-five training analysts serve on standing committees; sixteen (64.0%) on ad hoc committees and the same number engage in classroom teaching. Only six (33.3%) of eighteen training analysts over sixty-one years serve on standing committees, while three (18.7%) of the sixteen training analysts over age sixty-one serve on ad hoc committees. In this age group, only one (6.3%) of sixteen training analysts teaches. In the Boston group there is no training analyst over seventy-one who teaches or serves currently on any of the Education

TABLE III
RATIO OF AGE AND SEX DISTRIBUTION OF TRAINING
ANALYSTS TO COMMITTEE WORK AND TEACHING

Ages	Training Analysts			Education Committee Standing Committees*			Education Committee Ad Hoc**			Teaching		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
46 to 50 Years	7	0	7	7	0	7	7	0	7	7	0	7
51 to 55	2	0	2	2	0	2	2	0	2	2	0	2
56 to 60	4	3	7	2	2	4	1	3	4	3	3	6
61 to 65	1	1	2	1	0	1	0	1	1	0	0	0
66 to 70	1	3	4	1	3	4	1	1	2	0	1	1
71 to 75	0	1	1	0	0	0	0	0	0	0	0	0
76 and Over	1	1	2	0	0	0	0	0	0	0	0	0
Totals	16	9	25	13	5	18	11	5	16	12	4	16

* Standing Committees of the Education Committee are:

Admissions
Curriculum
Child Analysis
Students
Institute Analysis

** Ad Hoc Committees are those appointed as needed to consider special issues, problems and situations.

Committee subcommittees. What Table III does not show is: 1, that a number of senior training analysts, who do not serve regularly on standing subcommittees, perform special services from time to time on a consultant basis for the Education Committee; and 2, that there are senior analysts who conduct the analyses of society members, concerning which there is no official record.

PROPOSED GUIDELINES FOR A RETIREMENT POLICY

On the basis of this study it seems feasible for individual institutes to set up a retirement policy for training analysts. This would be in accordance with modern practices of other educational institutions, government, and industry. Certain guidelines which can be adapted to local situations are suggested.

In setting up such a policy, it may be mandatory not to include those training analysts who have reached the age under

discussion and whose training activities would be involved immediately, without allowing them time to prepare for the sudden changes. In these instances special arrangements should be made for an adequate period of transition satisfactory to the Education Committee and the individual training analyst.

Voluntary Retirement:

A training analyst and associate training analyst may elect to retire subsequent to the end of the academic year in which he shall have attained the age of sixty-five years. Any individual training analyst or associate training analyst may request retirement prior to the age of sixty-five years.

Compulsory Retirement:

1. Adoption of the concept of a policy of compulsory retirement.

2. Acceptance of age sixty-eight, or the end of the academic year closest to the sixty-seventh birthday, as the cut-off date for the training analyst or associate training analyst in respect to the following training activities: a, he shall accept no new candidates for a training analysis; b, he may complete the training of those candidates who are in analysis; c, he may continue as supervisory analyst or teacher subject to the provisions under the policy of reappointment.

3. Discontinuance of the policy of five-year period of reappointment at age sixty-five, with review and reappointment, where appropriate, for a three-year period to age sixty-eight, with annual reviews thereafter. The evaluation for reappointment from age sixty-five on will be specifically in terms of either training analyst and/or supervisory analyst, in contrast to the original appointment of full training analyst.

4. Acceptance of age seventy as mandatory for retirement, except in those cases where annual re-evaluation by the Committee of Training Analysts permits reappointment for the conduct of supervisory analyses.

5. Factors of incapacitating illness, disability, or other emergency situations may require retirement at any time before the age of seventy. Such cases may be assessed individually by the

Committee of Training Analysts for specific recommendations and action by the institute.

SUMMARY

Following a preliminary report by a Committee on Retirement, the authors made a detailed study of the various factors involved in a retirement policy for training analysts. On the basis of this study, certain statements may be made.

1. The establishment of a policy of retirement for training analysts by individual institutes is indicated, even though this presents a complicated problem due, in large measure, to the uniqueness and syncretism of psychoanalytic education.

2. For many years, policies of retirement, usually beginning at the age of sixty-five years, have been accepted procedures in educational institutions, industry, and government. This should make it less difficult for institutes to set up similar programs.

3. No statement of a retirement policy appears in the Minimal Standards of the Board on Professional Standards of the American Psychoanalytic Association, the training branch of the organization, or in any of its annals.

4. Most of the affiliate institutes have no definitive retirement policies for training analysts, though, in practice, they have dealt with individual situations as they have arisen. An exception is the Los Angeles Institute for Psychoanalysis with a definite policy designating age seventy as the critical year for considering retirement. Of the four institutes associated with psychiatric departments of medical schools, only one (Columbia) adheres to the same principles and policies on retirement as the medical school with which it is affiliated. Other institutes are now actively studying the question.

5. A statistical study of the training analysts of the Boston group relative to such pertinent factors as number, age, sex, work load, etc., showed the following: a, of an active total membership of one hundred thirty-eight, including twenty-two (15.9%) women, there are twenty-five (17.8%) training analysts, of whom nine (36.0%) are women; b, the rate of appoint-

ment of training analysts was higher in the decade from 1938-1948 than from 1950-1960, with a higher proportion of women, trained mainly in Vienna and Berlin, appointed in the first period; c, the training analysts carry the burden of the administrative work of the Education Committee, including teaching. Eighteen (72.0%) serve on its standing committees; sixteen (64.0%) serve on ad hoc committees; and sixteen (64.0%) are active in teaching (Table III).

6. Some of the difficulties, especially the syncretic factor, in setting up a policy of retirement for training analysts are discussed. Other factors include such variables as the age and size of an institute, its location, degree of autonomy, relationship to psychiatric departments of medical schools, age, sex, and number of training analysts available, and the changing pattern of the age for retirement as a result of increasing longevity.

Guidelines for a retirement policy for training analysts are suggested.

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On Bibliomania

Norman D. Weiner

To cite this article: Norman D. Weiner (1966) On Bibliomania, The Psychoanalytic Quarterly, 35:2, 217-232, DOI: [10.1080/21674086.1966.11926383](https://doi.org/10.1080/21674086.1966.11926383)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926383>



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ON BIBLIOMANIA

BY NORMAN D. WEINER, M.D. (PHILADELPHIA)

It has never been explained to my satisfaction why women as a class are the enemies of books and are particularly hostile to bibliomania.

—EUGENE FIELD

Bibliomania, the collecting of, and the inordinate desire for books, has heretofore been largely ignored by psychoanalysts. Perhaps one of the reasons that analysts have not turned attention to it is that these activities may be ego-syntonic for the patient and thus never enter the analysis for fine scrutiny by patient and analyst. Further, the dearth of references to bibliomania in the psychoanalytic literature may be the result of a reluctance to look for underlying motives in an activity which leads to an enrichment of the world of letters.

It is the purpose of this paper to examine bibliomania from a psychoanalytic point of view and to suggest that in some cases there is considerable evidence that the hobby is neither conflict-free nor a full sublimation, but rather a problem-solving complex of activity that relieves anxiety or directly gratifies certain instinctual drives. Since there is no record of a patient saying to an analyst, 'Stop me before I buy another book', literary sources and essays of bibliomaniacs must be the basis for our speculations.

Bibliomania may be defined as a state of mind in which an individual has an excessive regard for books and an inordinate desire to collect them. The most striking feature of the affected individual is that often he is not a scholarly person and is known not to read the books he buys. Yet, nothing will stop him in his quest for certain books. He will pursue a volume in an active or seductive way; he will use intrigue and stealth; he will

From the Department of Psychiatry, Jefferson Medical College, at Friends Hospital, Philadelphia, Pennsylvania.

hazard his fortune and he will journey around the world, or even marry for the gain of a coveted book. He is different from the bibliophile, who is interested only in the book's content and who can glory in the majesty of Shakespeare in a paper-bound edition. What is valuable for the bibliomaniac is the rare and curious, for the bibliophile, the readable. Seneca recognized that the afflicted knew only the outside of their books and disparaged the mania, as did Sebastian Brandt in 1494 when he observed and recorded that the chief of his 'Ship of Fools' was the nonreading collector (21). Dibdin, in 1809, entitled his monumental work, *The Bibliomania; or Book Madness; Containing some account of the history, symptoms, and cure of this Fatal Disease*—thus emphasizing that there was some morbidity in this hobby (9). Let us examine the symptomatology.

I

A famous bibliomaniac had the following misadventure.

During the political upheavals of the 1830's in Spain, a monk named Don Vincente took advantage of the situation to sack the libraries of several monasteries, including his own. Shedding his robes, he disappeared for a while and then re-emerged as a bookdealer in Barcelona. Don Vincente wanted to own what he thought was the only existing copy of the *Furs e Ordinacions*, printed in 1482 by Lamberto Palmont, the first Spanish printer. Although Don Vincente bid everything he owned for the book in an auction, he was overbid by Augustino Paxtot. Shortly afterward Paxtot's house was razed by fire and he perished in the flames. Don Vincente was indicted when the book was found in his possession. His lawyer, in trying to establish his innocence, found another copy of the book in Paris and used this evidence to show that Don Vincente's book was not necessarily Paxtot's. The defendant became raving mad and cried, 'Alas, my book is not unique'. He was hanged shortly thereafter (13).

Such is the nature of bibliomania. In this case the desired volume became valuable to the collector because it was asso-

ciated with the first Spanish printer. While the reasons for the value of books are multitudinous, there are some that appear more frequently than others. Primarily, the importance of the author or the influence of the work on the history of the world affects the ultimate value of the book. First editions, proof sheets, and manuscripts are more valuable in that relative order. Association copies—for instance, Thoreau's copy of the first edition of Whitman's *Leaves of Grass*—seem to have an extraordinary lure. The book itself may be valuable as an example of a certain type of binding or typography, or the paper may be of a special quality. Some individuals collect books only about horses or scandals, some only of authors who illustrated their own books, or who died by their own hand, some for seemingly obscure reasons. Inchrule Brewer, who derived his nickname because he carried an inch ruler in his pocket at all times to measure the length and breadth of books, bought only those that met his particular specifications (19).

Of the many gratifications that come from book collecting, some are more obvious than others. John Winterich, in a standard primer for book collectors, writes that it is a selfish pursuit and that the selfish pleasures are of two kinds: possession and exhibitionism. One type of collector is satisfied to own and fondle his treasures alone; another must continually have his treasures on display and is never so happy 'as when expounding to an auditor the delectable trove of a mashed letter i or the glory of a missing comma' (29). It is interesting to note the vocabulary that emerges when an author begins to describe the pleasures of book collecting.

By exhibitionism, Winterich means that the book collector somehow feels enhanced by owning a certain book and looks for further enhancement from external sources. Holbrook Jackson, a man who attempted to anatomize bibliomania, writes that the glory of possessing a manuscript of Cicero seems to approximate that of being its author (21). As if to validate this, Barton Currie, a Philadelphia book collector, writes: 'There remain also scattered among the British Museum, Frampton

Court, and several private collections, many letters and manuscript poems and copybooks filled with notes that Sheridan made for his speeches in Parliament. But, the chef-d'œuvre of all the Sheridan relics that have been preserved is [the manuscript of] *The School for Scandal*, and I have it. . . . Sheridan was a giant of his day; . . . he was deservedly eminent as a playwright and a play producer, as a statesman, as a wit, as a theatrical manager, . . . he consorted with royalty . . . he was the intimate of premiers . . .' (7). This type of identification and participation in the greatness of Sheridan appears in a book filled with braggadocio and that seems to reiterate, 'Look at what I have!'

A. S. W. Rosenbach, the eminent bookdealer and bibliomaniac, writes: 'I never dreamed that one day I should own all that is left of the original manuscript of the master's great work, *The Pickwick Papers*. This, which Dickens wrote when he was but twenty-four years old, is without a doubt the most valuable modern manuscript in existence' (25). In an essay on collecting, Edwin C. Bolles writes in such a way that the reader is able to see a fusion of the book and the collector. He says that the book collector dreams of having on his oak shelves Grolier and Maioli (fine bindings) and sees *himself* the object of the gloating eyes of the world (6).

In the literature on bibliomania, mention is made that the book functions as a talisman for its owner but it is a temporary and fleeting pleasure. The bibliomaniac must set out on another quest for a great book as soon as his anxiety returns. The quality of the boasting, the constant search for new conquests, and the delight in recounting the tales of acquisition and success brings to mind the activities of the hypersexual male hysteric who must constantly reassure himself that he has not been castrated. It seems germane to this point that Casanova, after his many amatory adventures, settled down as a librarian in the castle of Count Waldstein at Dux, in Bohemia (21).

Hence it seems that the book is endowed with magical powers of an ego quality which, in certain men, builds their self-

esteem and reduces anxiety by allowing them to feel that they participate in the power, intelligence, or historical significance of the author or his book.

The second 'selfish gratification' that Winterich mentions is the fondling of books by their owners. 'To fondle' a book appears repeatedly in the literature on books. In *A Book Hunter in Paris*, Uzanne writes: 'To turn over the pages of a book, long coveted, to handle an unexpected find, to fondle a binding, to dust the edges, are exquisite joys in which the hand shares with the eye' (28). Anatole France writes that one is not happy with books unless one likes to caress them (21). Books of no literary value frequently bring thousands of dollars for their bindings alone. While the binding may also please the eye, the emphasis in the literature seems to be on the tactile sense. Thus, it is not surprising to find many references to human skin being tanned and used for bookbinding; the breast is favored, with the nipple forming a swelling on the cover. A great deal of manskin was used for books during the French Revolution, and Carlyle wrote that although French nobles laughed at Rousseau's theories, their skins were used to bind the second editions of his books (21). There is the story of a mistress who stipulated in her will that after her death the skin from her shoulders, which her lover so enjoyed kissing, should be used as a bookbinding in his library. The forbidden gratification found in caressing books is shown in this poem.

The tender touches that I give
to every well worn cover,
And as I love you, friends of mine,
I could not love a lover (21).

The collector actually holding a book in his hand appears to gain a sense of power. Most photographs of book collectors show them in their libraries holding a book, and in descriptions of the pleasures of collecting, emphasis is on the idea of 'book-in-hand'. Speculation would lead us to the conclusion that the collector is anxious and may feel impotent when he sees a book

that he wants and does not own. Acquisition, possession, holding, and exhibiting a new and important book relieves anxiety in a bibliomaniac and seems to build self-esteem at least for a short time.

The gratification of possession per se is examined in some detail only to highlight certain aspects. As has been seen, one of the reasons for possession is the individual's overvaluation of a book that represents some great person or idea. However, there are instances of men who were so covetous of any books that they made literary history.

A man named Boulard bought books by the rod, by the acre, wholesale and retail. He carried them by the basket and by the heap. He piled them in his drawing room, anteroom, vestibule, parlor, bedrooms, and cupboards until his château was filled; then he evicted his tenants, one by one, from six houses as he needed space for his six hundred thousand volumes (28). John Hill Burton, in his scholarly work on book hunters, records the story of Archdeacon Meadow who grew so disturbed and anxious during the auction of his library that he left, but then returned disguised as a military gentleman and began to bid on his own books (19).

Since it is apparent that we are dealing here with various aspects of anality, it is appropriate to mention other vicissitudes of this determinant of the bibliomaniac's personality.

The hatred the bookman feels toward the bibliocleptomaniac stems not only from the fact that he has lost a cherished possession, but also because the symmetry of his shelves has been disturbed. Charles Lamb, in his *Essays of Elia*, writes that a 'foul gap' is left at the bottom of a shelf when a book is borrowed. Elia, incidentally, states that his treasures are encased in leather rather than closed in iron coffer (22). References to disorderliness and the dirty condition of books are constantly found in the literature. The fact that books are often covered with dust, are in tatters, and that bookshops are notoriously sloppy places seems most pleasing to the bookman. Holbrook Jackson quotes another author as saying that the

bibliomaniac will go down a 'pestilential-looking alley', and grope among rags, dirt, and filth to gratify his all-consuming passion (21). Bolles' wife, in a postscript to her husband's essay, writes that collecting is worse than immoral, it is untidy. 'Who ever knew a collector who did not war to the death against a dust brush or broom?' She is aware of the unconscious when she writes that the beautiful Law of Order, which the collector obeys, only applies to the *show* collection, and asks: 'What of the vast store of material in the attic, the cellar, the closets, and every available corner?' (6).

Coprophilic elements are recognizable in the fact that several authors have commented on the smell of books as being peculiarly pleasing. Dickens, in Martin Chuzzlewit, writes of the pleasant smell of paper freshly pressed (21), and Holmes writes that James Russell Lowell is at home wherever he smells the invigorating fragrance of Russia leather (20). Havelock Ellis records two cases in which pleasurable sexual excitement was experienced by smelling leather-bound and worm-eaten books (21).

The destructive and sadistic aspects of anality are not uncommon manifestations of the book collector's hobby. Under the rationalization of creating a scarcity and thereby increasing the value of his own copy, the book collector has destroyed books by various methods. Dibdin is known to have warmed his guests by a fire of woodcuts which had been made for his book, A Bibliographical Decameron, thus insuring a high price for the remaining copies that still contained the plates. But in the opinion of the bookman, the biblioclast cannot be compared to the grangerite, who destroys one book in order to procure its illustrations for another book. He is considered to be madder than the bibliomaniac and is described with great disdain in their literature.

Rivalry runs high among book collectors who at times are blatantly sadistic. Hill Burton writes about a man who neither read his books nor indulged in the fondling and complacent examination of their exterior and general condition, nor did he

luxuriate in the pride of seeing his volumes increase. His hoard of books was heaped in garrets, cellars, and warerooms, not for his own pleasure but to prevent others from enjoying them. 'For, ignorant as the monster was, he had an instinct for knowing what other people wanted and was thus enabled to snatch rare and curious volumes from the grasp of the systematic collectors. He would attend auctions and bid spitefully against all who showed desire for a particular volume' (19).

Much that has thus far been presented is encompassed in a recurrent wish that may become conscious: 'someday, perhaps tomorrow, or next week, I shall unearth an undiscovered book' (26). This thought seems to spur the book collector in his mania and it sounds not unlike the conscious part of a fantasy. If we take the view that large and complex endeavors are sometimes the result of an unconscious fantasy, as described by Beres (5), then it would elucidate certain careers and hobbies. In reading about passionate bibliomaniacs, one often has the feeling that this might be the case.

Before the collector can exhibit, he must gaze at his prize himself. In *The Bibliomania*, Dibdin writes: 'When he views the morocco bindings, the silk-water tabby lining, blazing gilt edges, when he turns over the white spotless leaves, gazes on the amplitude of margins, on a rare and lovely print . . . and is charmed with the soft and coaxing manner in which leaf succeeds leaf, . . . he can no longer bear up against the temptation' (9). Other evidences of the scopophilic aspect of bibliomania have been alluded to in previous descriptions.

In book collecting endeavors that show an oral genesis, the descriptions in the literature seem more apt for bibliophiles than for bibliomaniacs. However, the bibliomaniac will pursue books with the same drive we find in the behavior of certain food addicts. Holbrook Jackson writes: 'Bookmen taste, chew, masticate, nibble, ingest, devour, gorge, cram themselves with books'. In a biography of Charles Lamb, Percy Fitzgerald wrote that both Leigh Hunt and Charles Lamb literally feasted on books, that they desired the taste of certain delicious vol-

umes to linger on their palates, as the memory of sweet dishes does on those of other men. They enjoyed the flavor of a rare passage of poetry with exquisite relish, as though it were a morsel of ripe and juicy fruit (21). In *Love's Labour's Lost*, Shakespeare's Sir Nathaniel says: 'Sir, he hath not fed of the dainties that are bred of a book; he hath not eat paper, as it were; he hath not drunk ink . . .' (27).

Lang, in *The Library*, writes of a collector who, outbid at an auction, turned to the overbidder and said: 'I will have the book when your collection is sold after your death' (21). Dibdin notes the vehemence and rapture with which a dirty little volume is contended for in the auction room (9), and Rosenbach writes that the bidder in the auction room requires courage and the spirit of adventure (25). These descriptions seem to indicate a phallic competitiveness.

From this review of the symptomatology of bibliomania, it appears that the bookman derives gratification from a book for various reasons: it gives him a sense of security to relate either to it or to its author; he finds pleasure in merely possessing it, touching or gazing upon it, exhibiting it, smelling it, or making it a part of himself. We tend to think of an object that is used in this way to alleviate anxiety and to provide gratification as a fetish, or as a fetishistic derivative.

II

Psychoanalytic thinking on fetishism has shifted its emphasis from time to time from strictly genital considerations to pre-genital determinants. Some authors define fetishism as a sexual perversion that requires not only a split in the ego (12) but a rather weakened ego. Others have reported fetishism in individuals who otherwise appear to be almost normal. Bibliomania would seem to run the gamut of all definitions of fetishism.

Freud wrote in 1905 that 'what is substituted for the sexual object is some part of the body . . . which is in general very inappropriate for sexual purposes, or some inanimate object which bears an assignable relation to the person whom it re-

places' (14). Book collectors who specialize in one-author libraries, and those who are most proud of their collections and desire to be admired for their connection with the author, fit neatly into Freud's early formulations of fetishism. In 1910, Freud and Abraham both became aware of some of the pre-genital determinants in the choice of a fetish. Abraham emphasized the sadomasochistic and scopophilic elements of fetishism and showed the continuum from anality to genitality (1). In a footnote to *The Three Essays* in 1910, Freud cited the repressed coprophilic pleasure in smelling as a determinant in fetishism, and mentioned for the first time, in speaking of foot fetishism, the absence of the woman's penis as being deeply felt. In a later footnote (1915), he mentioned the scopophilic instinct in fetishism in seeking its object, the penis, generally from below. Freud felt that fetishism was pathological only if the longing for the fetish was greater than for the normal object.

Eugene Field writes in *The Love Affairs of a Bibliomaniac*: 'Had Frametta been a book—Ah, unfortunate lady:—Had she but been a book, she might still be mine for me to care for lovingly and to hide from profane eyes and to attire in crushed levant and gold and to cherish as a best beloved companion in mine age' (12). Field seemed to have an uncanny sense of the substitutive aspects of the fetish and there is just a hint that he knew of the scopophilic fetishistic elements of bibliomania in the following passage which combines phallic and female associations: 'Fanchonetta—it was she who acquainted me with Beranger; that is why I never take up that precious volume that I do not think sweetly and tenderly of Fanchonetta. The book is bound as you see in a dainty blue and the border toolings are delicate tracings of white—all for a purpose I can assure you. She used to wear a dainty blue gown from behind the nether hem of which the most immaculate petticoats peeped out.'

In 1927, Freud again stressed the genital aspects of fetishism and the role of castration anxiety in its formation (15). His insight into the fact that the fetish is a symbol, which both denies

and asseverates the fact of castration, is now analytic history. It was in this paper that he stated that the fetish was a substitute for the lost penis of the mother. Almost simultaneously, Glover wrote about fetishism in connection with homosexuality and other perversions, and described its oral determinants (17). Balint, in 1935, described fetishists as those people who did not need a normal sexual object but only their fetish (4).

As more analysts turned their attention to fetishism, the facts seemed to indicate that Freud was correct in his statement that the fetish stood for the female's lost penis, but they found too that it could also stand for a great deal more. Payne analyzed a case in which the fetish stood for the father's penis or the mother's genital, nipple, body, and anal tract, and the parents' feces (24). The fetish stood for part objects, as formulated by Abraham in 1924 (2). Payne also equated the relationship of a man to his fetish with his relationship to his internalized parents. Bak wrote that the fetish symbolized the mother's skin, feces, or fantasied phallus (3), and Mittelman stated that the fetish represented an undifferentiated phallus, one that is as much of the father as of the mother; he too stressed the concept of part objects (23). Bak also mentioned the role of separation anxiety and the predilection for touching in fetishism. He felt the fixation to be in pregenital phases with the emphasis on anal erotism and smelling (3). Greenacre, in her 1953 paper, defined fetishism as the obligatory use of some nongenital object as part of the sexual act, without which gratification could not be obtained. However, she stated further that the fetish occurs detached from its clear sexual functions in many other conditions and may not even impress us as particularly abnormal (18).

Thus by about 1955 the concept of the fetish had broadened. It was viewed as a symbol of a masculine or feminine phallus with strong pregenital determinants which, when used as a talisman, would allay castration (and separation) anxiety. It was seen as psychologically useful in fostering normal sexual behavior. And, so-called 'minor fetishism' was now recognized.

Further, analyses of fetishists brought to light certain criteria for the fetish. Greenacre wrote that the fetish must be stable, visible, and tangible; it must be capable of symbolizing the penis and its obverse; and often it includes the quality of being smelly, so that it can be incorporated through being breathed in. She felt that it must be capable of remaining intact outside of the body so that, at the same time, it may be visually introjected and stabilize the sense of one's own body. Other criteria were that the fetish must be durable in order to diminish the fear of annihilation, inanimate in order to be nonretaliative, and immobile in order to counteract the anxiety of the sensations of changing size and shape of the penis and body (18). Books fill these criteria.

In the 1927 paper Freud stated that the fetish is the token triumph over the threat of castration and a safeguard against it. This, added to the material indicating that the fetish is a *pars pro toto* of the parents, gives us still more insight into the fantasies of the bibliomaniac. The acquisition of an important book is a way of acquiring the power of a very great parent and gives one the sense of participation. Bibliocleptomaniacs acquire by seizure the power of a great parent, the author, or of a great book collector. Some celebrated and famous bibliocleptomaniacs were Pope Innocent X, Cardinal Richelieu, Catherine de' Medici, and Cardinal Mazarin. Fenichel (11) wrote that the relation between the collector and his objects may reflect the feeling that he has acquired something that originally belonged to someone more powerful, but which is now a talisman for him or which connects him magically with the previous possessor. Fenichel felt that the trophy (fetish) was always acquired orally. There is little doubt that unconsciously the book is directly connected to its author and also that it is humanized. Biblio-anthropomorphism occurs again and again in the literature on books. Richard de Bury wrote:

[Books] are masters who instruct us without rod or ferule, without angry words, without clothes or money; if you come to them they are not asleep; if you ask and inquire of them they

do not withdraw themselves; they do not chide you if you make mistakes; they do not laugh at you if you are ignorant; they give to all who ask and enfranchise all who serve them faithfully (8).

Dickes (10) emphasized the fact that normal object-seeking is curtailed in the fetishist. In their biographies, many collectors reveal themselves as being less than genital characters.

Mention of A. S. W. Rosenbach's personality is pertinent here. His biographers (30) stress the fact that he was a 'mama's boy' and that his mother tried to 'make him into a girl'. He became an obese, unathletic, intellectual man who was deathly afraid of bodily injury. He early became an alcoholic and although his sexual appetite was famous in the book world, he could never bring himself to marry. He was the successful partner in a business he shared with his brother, but he was dominated completely by the brother. Although there is no evidence that Rosenbach used his books in a perverse way, his behavior was that of a man who was fleeing from castration anxiety and who used his books to build his self-esteem. Each book he sold was 'the greatest' and he continually tried to build up his own image in the eyes of the world.

Bibliomaniacs who marry have a notoriously difficult time with their wives. A famous cartoon pictures a woman throwing books from the second story of a house that is on fire, while her husband, standing on the lawn below, is catching them. He is calling up to her: 'Great work, dear! Just the Johnson Dictionary now, the Brontës, the Austins, and Trollopes. The fire brigade should arrive presently' (7). There are few wives of book collectors who do not realize that the library often receives more libido than do they. One collector referred to his library as his seraglio and called his librarian, his eunuch.

From the foregoing it would seem that depression should follow a separation from books and this is well-documented in the literature on bibliomania. Petrarch, for instance, was punished by his Bishop for some misdemeanor and was locked out of his library. The first day of absence from his books passed

wearily, seeming longer than a year; on the second day he had a headache; and on the third, he began to feel symptoms of fever. The Bishop then restored the keys to the library and Petrarch, on the instant, recovered.

Thus bibliomania, sometimes called a soothing affliction, reveals itself in some cases as a masked perversion. It is not the purpose of this paper to state categorically that bibliomania equals perversion, nor is the purpose to show blatant id derivatives in the collector's behavior. But following Greenacre's statement that the fetish can occur detached from its clear sexual function, it appears that in the collector whose hobby is neither a complete sublimation nor conflict-free, there is a complex unconscious fantasy which gratifies certain urges and relieves anxiety, and that if that fantasy were analyzed, it might reveal a fetishistic background. In those with extensive anxiety, more erotic elements may corrupt the seemingly laudatory collecting habit. Erotic elements appear as a type of perverse activity including exhibitionism, scopophilia, and direct gratification of the senses of touch, smell, and, in a way, taste; but, in the collector, they are not deemed perverse, usually because they do not involve another human being.

Many of the explanations offered in this exploration of bibliomania would be applicable to any collecting endeavor, from abaci to zithers, some are germane only to objects that can be held, but still others to books only because of the special significance of the authors, bindings, typography, or the subject matter.

No doubt there are other determinants in the choice of book collecting as a hobby. One may be identification with a father or other important person in childhood who collected books, such as Rosenbach's Uncle Moses Pollock, a Philadelphia book-dealer. In those who collect for special content, it is possible that the gratification of childhood fantasies may be fulfilled; for instance, a collection of books having to do with rebellion and mutinies might ease a poorly resolved œdipal conflict. Books may also appear in screen memories, and thus help to ward off anxiety.

Bibliomaniacs themselves feel that if their hobby takes the form of a sickness, it should be called a perversion. Dibdin wrote in 1809 that they, the bibliomaniacs, 'are buried in a perversion of book tastes or in the short-lived pleasures of sensual gratification', and Holbrook Jackson writes that bibliomaniacs are like mad eroticists who are impelled by an unruly instinct which can never be appeased.

SUMMARY

An attempt has been made to demonstrate that a hobby, which might appear to be conflict-free, may be rooted in a complex problem-solving fantasy that both allays anxiety and, if acted out, provides gratification of certain drives and part instincts. In the case of the book collector, material has been cited which suggests that he may alleviate his castration anxiety by the collecting of books which act as a fetish for him and provide gratification of oral, anal, and phallic strivings.

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The Operational Principle and Meaning in Psychoanalysis

W. W. Meissner S.J.

To cite this article: W. W. Meissner S.J. (1966) The Operational Principle and Meaning in Psychoanalysis, The Psychoanalytic Quarterly, 35:2, 233-255, DOI: [10.1080/21674086.1966.11926384](https://doi.org/10.1080/21674086.1966.11926384)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926384>



Published online: 29 Nov 2017.



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THE OPERATIONAL PRINCIPLE AND MEANING IN PSYCHOANALYSIS

BY W. W. MEISSNER, S. J. (BOSTON)

At the high point of his career, Freud was moved to observe: 'We have often heard it maintained that sciences should be built up on clear and sharply defined basic concepts. In actual fact no science, not even the most exact, begins with such definitions. The true beginning of scientific activity consists rather in describing phenomena and then in proceeding to group, classify, and correlate them. Even at the stage of description it is not possible to avoid applying certain abstract ideas to the material in hand, ideas derived from somewhere or other but certainly not from the new observations alone. . . . They must at first necessarily possess some degree of indefiniteness; there can be no question of any clear delimitation of their content. So long as they remain in this condition, we come to an understanding about their meaning by making repeated references to the material of observation from which they appear to have been derived, but upon which, in fact, they have been imposed. Thus, strictly speaking, they are in the nature of conventions—although everything depends on their not being arbitrarily chosen but determined by their having significant relations to the empirical material, relations that we seem to sense before we can clearly recognize and demonstrate them' (12).

Freud here states a problem that remains today a central concern of psychoanalysts. Failure to resolve it has given rise to a number of dichotomous views of the nature and intelligibility of psychoanalytic theory. At one polarity, there is a tendency to emphasize the descriptive aspect of psychoanalytic concepts and their inherent indefiniteness. At the opposite pole many theorists try hard to apply the canons of rigorous scientific thinking to analytic theory. The critical issue which dominates the debate is that of meaning. The difficulties encountered by the

From the Harvard Medical School, Boston, Mass.

former group stem from the relative inconsistency of meaning and the impossibility of supporting theoretical formulations with convincing demonstrations. The latter group has run afoul of difficulties in reducing concepts to clear and systematic formulation. Consequently, it does not seem superfluous to re-examine meaning in psychoanalytic theory and thereby to reassess the formulation and validation of that theory.

The most rigorous attempt to impose clarity and consistency on psychoanalytic concepts has come through use of the operational principle. This principle, enunciated by Bridgman (3), fundamentally concerns the determination of meaning. One function, at least, of examination of method is to discern and clarify the meaning of scientific terms and propositions. The implications of meaning must therefore be seen in the whole context of the scientific enterprise. Meaning plays an integral part in determinations of method, decisions as to the acceptability of evidences, inductive generality, explanatory power, and other important questions about scientific understanding.

Admittedly, as a scientific undertaking, psychoanalysis is poorly structured and demands considerable refinement in the articulation of its basic concepts and theory. Such articulation must wait upon a clear conception of the problems of method involved in the formulation of the theory itself. By studying these methods we may hope to shed some light on the evidential bases of psychoanalysis, as well as on the ways in which psychoanalytic theory develops.

The criticism has often been leveled at psychoanalysis that it does not meet the accepted criteria of scientific method. One of the most stringent critics has been B. F. Skinner (19), who applauds psychoanalysis for advancing beyond sheer introspection. Skinner faults Freud, however, for failing to go on to say that not only unconscious, but also conscious mental events can be inferred from observable behavior. Moving out from this basic position, Skinner scores Freud on five points:

1. The nature of the act as a unit of behavior was never clarified. The simple occurrence of behavior was never well represented.

2. The dimensions of behavior, particularly its dynamic properties, were never adequately represented.

3. In his emphasis upon the genesis of behavior, Freud made extensive use of processes of learning. These were never treated operationally in terms of changes in behavior but rather as the acquisition of ideas, feelings, and emotions later to be expressed by, or manifested in, behavior.

4. An explicit treatment of behavior as a datum, of probability of response as the principal quantifiable property of behavior, and of learning and other processes in terms of change of probability is usually enough to avoid another pitfall into which Freud, in common with his contemporaries, fell.

5. Since Freud never developed a clear conception of the behavior of the organism and never approaches many of the scientific problems peculiar to that subject matter, it is not surprising that he misinterpreted the nature of the observation of one's own behavior.

Skinner's points are valuable in so far as they reflect what I have chosen to call the 'operationist attitude'. The operationist attitude regards the observable or what can be reduced to the observable as the sole evidential base of science and it establishes prediction as its primary goal in theory. Skinner's criticisms are accurate enough; but do they have any point in reference to the functional methods of psychoanalysis?

Attempts have been made to reformulate psychoanalytic terms in a more acceptably operational mode (18, 20). The most systematic attempt to do this was made by Ellis (8), who insists that theoretical concepts be ultimately related to observables. He recognizes, however, that intervening variables or dispositional concepts have limits which make it inadvisable to limit one's methodological framework to observables.

Yet the problem that must be faced sooner or later is whether one can continue to insist on definition in terms of observables and at the same time permit the more flexible type of constructive theorizing that introduces a level of meaning not discernible in the evidence for the constructs. This differential between the construct and its evidential base has been discussed exhaustively in the literature under the rubric of 'surplus

meaning' (14). The 'surplus' in 'surplus meaning' implies that the added dimension of meaning in hypothetical constructs cannot be reduced to observables, not, at least, if 'observable' refers to 'public' data observable by anyone properly equipped to observe. The theorist must commit himself to the operationist attitude, using 'observable' in this sense, or he must reject it; he cannot do both.

Skinner's third objection to Freud's method raises the critical issue. Freud obviously did not treat learning processes in operational terms for two major reasons: 1, he probably never thought of it; and 2, he was not dealing with observable evidences. The first reason was very likely culturally determined although the empiricist tradition was well developed in Freud's time. Szasz (22) has discussed the influence of Ernst Mach, the father of positivism, on Freud's thought, particularly in relation to Freud's persuasion of the physical basis of psychic phenomena. The second reason, however, is crucial. The material with which Freud worked consisted not only of segments of behavior, but also of thoughts, feelings, images, emotions, and the whole complex of privately experienced and perceived phenomena that arise within the personal experience of the patient and that are in one sense or another communicable to the therapist. In dealing with these phenomena, Freud was dealing with the world of inner experience, he was analyzing communicated emotions and thoughts, and not verbal reports of such emotions and thoughts. This stands out most clearly in his handling of dream phenomena. In terms of the demands of meaning in relation to types of evidence, one cannot impose the same demands on observable and instrumental types of evidence as one can impose on introspectional and experiential evidences.

Ellis' attempt to reconstruct the formulation of psychoanalytic concepts runs afoul of this difficulty (8). He derives his operational vocabulary from the observables—perception and response. Perception is defined in terms of acts of observing, seeing, sensing, or feeling; response is defined in terms of act-

ing, performing, or behaving. These phenomena might be regarded as observables as long as they involve some behavioral, external, objective consequences, or they might be regarded as observable in a loose sense that could include introspection. Taken in the sense of 'observable' we have been using here—derived from sensory perception of externally occurring processes and events—only strictly motor phenomena can be regarded as observable. The operationist attitude demands this restriction. But if 'observable' means 'observable by introspection', the evidences lose their character as 'public', and therefore objectively repeatable and verifiable, data. And then the point of the operational reduction is lost because of the nature of the evidence. It is pointless to formulate evidence operationally unless one can maintain the 'public' verifiability and repeatability which are required by the operational approach if it is to work.

Ellis attempts to spell out the criteria by which one can determine observationally the presence or absence of inner processes. It is a fine point to insist that an inference is involved in such maneuvering that automatically places the inner process at one remove from the observational basis. The inner experience is not observed, but it is inferred from postulated consequences of such inner experiences. Despite the independence of the two orders of phenomena (based on the possibility of separation of perception, feeling, etc., from consequent actions), it is naïve to think that one can treat a verbal report as evidence for reformulation of the reported experience. In any case, it seems quite clear that Ellis' reformulation has not put the matter on an observational basis at all, but has merely tried to treat private evidences as though they were public. The nature of evidence cannot be altered by mere fiat.

Another facet of the problem is brought to the fore by Ellis' attempt to reduce introspectional and experiential evidences to the status of observations. If we set up the paradigm of independent-intervening-dependent variables as normative, where can we fit introspectional and experiential evidences? Clearly,

observational and other objective types of evidence must be 'independent' or 'dependent'. They represent the peripheral elements of the theory and the intervening variable that links them therefore represents nonobservable inner processes. Or we might say that since evidence from introspection is essentially an objectified process in the self, it can be regarded as representing a dependent variable. Thus one might regard a loud noise as an independent variable and the introspected response as the dependent variable, in which case one would construct the mechanism of response to explain the sequence of stimulus and response. However, since the objectified process is intrinsic to the functioning organism, the evidence of response taken as strictly introspectional can also be regarded as a direct manifestation of the presence and operation of the intervening mechanism. On this supposition, we would not have the pre-existent conditions required for our intervening variable paradigm to be applicable. That paradigm is set up on the supposition that there is no direct evidence of the nature or operation of the real structure by which stimulus and response are connected.

Moreover, although it is true that in the act of introspection the subject is objectifying his inner processes in a kind of inner observation, it is likewise important to remember that such self-observation is likewise identically an experiential act. While the subject is aware of his emotional reaction and is capable of objective reflection on the emotional experience, the emotion itself is an experience and the act of introspection is an experience. In both acts, he is simultaneously aware that they are the acts of a single subject, himself. If these operations are derived from the subject as from an ultimate and irreducible source, as experience seems to indicate, it seems we are dealing with elements that should be considered parts of the intervening structure. It is precisely this subjective dimension of psychoanalytic theory that Erikson has been so careful to distinguish in terms of the opposition between 'self' and 'ego'. The ego is the subjective dimension of personality and the ex-

perienced source of personal activity (9). The whole realm of ego identity still awaits development.

In short, operational reformulation of psychoanalytic concepts is inadequate. But what about the operationist attitude? Can it be applied to psychoanalysis to make Freud's intuition presentable? One school of thought insists that only thus can real scientific progress be achieved in scientific psychoanalysis. This school insists that scientific data are objective and measurable and can be generalized in theories. These scientists usually accept hypothetical construction as the royal road to development of psychoanalytic theory (10). Colby (6), for example, favors the hypothetico-deductive paradigm in psychoanalytic theorizing. All his criticisms of psychoanalytic method are based on the requirement that evidence be observational and theory strictly hypothetical and constructive. Thus he can score analytic procedure as committing the unpardonable error of living with such things as uncontrolled observation, unrecorded observations, lack of quantification, lack of experiment, lack of control, lack of follow-up, lack of confirmation, lack of predictive value in theory, lack of interpretative rules, and finally obscurantist language. All this would be quite accurate, of course, if we could safely presume that psychoanalysis can be made to work by hypothesis and deduction.

Colby is particularly interesting when he discusses 'communicant observation', trying to illuminate the differences between observation of things and observation of a person by another person (6, pp. 86-88). When two persons participate in observing each other, their observations have certain characteristics: 1, the observer and the observed observe each other observing; 2, such mutually observing persons tend to try to communicate; 3, they not only observe and make inferences in return, but they can make inferences about inferences; 4, the observed person is capable of confirming observations by his own introspections; 5, the observer simultaneously observes himself. None of these characteristics can be controverted, since it is obvious that analysts observe and that their patients observe

them in turn. But the interesting conclusion is that observational evidences make up the whole cloth of the psychoanalytic situation. The first question to be asked is whether introspection can be simply equated to observation as evidence. As I have pointed out, there are essential differences between observation of objects and observation of self: the former enjoys 'public' verifiability, repeatability, and confirmability by independent observers, and the latter evidence does not.

The most extensive and sophisticated attempt to systematize psychoanalytic theory by use of the intervening variable paradigm was made by the late David Rapaport (16). He discusses the status of the main classes of psychoanalytic variables: external reality, motivations, structures, and behavior.

In the reflex-arc model, external reality appears as an independent variable: it serves as the stimulus to which the organism responds by some combination of motor action, conscious thought, and affect. Unconscious impulses and ideas intervene between the stimulus and the response variables, to a greater or less extent depending on the degree of relative autonomy between stimulus and response. Rapaport also pictures reality as intervening between structure or motivation as independent variable and behavior as dependent. Reality can also serve as dependent variable if it is conceived of psychologically and not merely physically: objects are external but as variables they may be dependent on my feelings toward them as, for example, in the classic experiments of Bruner and Goodman in which the sizes of coins appear as dependent variables. There seems to be room here for a distinction which Rapaport brushes over. The mediating influence between structure and behavior or between motivation and behavior is exercised by the subject's perception of the reality rather than the reality itself. The reality itself does not enter directly into the paradigm in this case but remains part of the field of action. Similarly, in the perceptual experiments cited, the coins seem rather to be independent variables; what was measured was in fact the subject's estimate of the size of the coins (4). Consequently ex-

ternal reality does not seem to function in any role but that of an independent variable, which is of course consonant with its observable character.

The second class of variables is motivations. In experiments with deprivation or observations in therapy (transference), motivations appear as independent variables related to behavior as the usual dependent variable through the mediation of defenses and psychic structures. Here again it seems preferable to say that in the transference phenomenon the therapeutic situation, specifically the person of the therapist, is the independent variable, while the intrapsychic perceptions, motivations, and structures of the patient are the intervening variables. Thus this context seems to be little different from reflex-arc situations where it is clear that reality serves as independent, motivations as intervening, and behavior as dependent variables. Rapaport also tries to make motivations into dependent variables in cases where other motivations or reality (deprivations) serve as independent variables. Clinically defenses are inferred from derivative motivations which function as dependent variables: for example, the presence of reaction-formation in the study of a coprophilic impulse may be inferred from the motivation for excessive cleanliness. But in this example, the motive itself is inferred from the available evidences communicated to the therapist. Similarly in deprivation experiments, what is observed is change in behavior, from which alteration of drives is inferred. It is not at all clear that motivations can safely be ascribed any other status than that of intervening variable.

The third class of psychoanalytic variables is intrapsychic structures. Rapaport regards such structures as serving in the capacity of independent variables when individual differences are under scrutiny, as in the comparative study of symptoms in various neuroses or in the study of individual differences in perception. As intervening variables, they are commonly accepted in clinical observations as mediating the lack of a one-to-one relation between motivations and behavior. As de-

pendent variables, they appear in processes of structural change, including learning. Consequently, they are also the dependent variables in at least some of the observations in successful psychoanalytic therapy, in which the alteration of existing structure is achieved. However, it is not clear in what sense psychic structures can be regarded as independent or dependent variables. They are certainly not empirical variables, nor can they be regarded as systematic variables, since as terms in the language of psychoanalysis they do not denote classes of empirical events that are operationally identifiable, nor do they represent manipulable antecedent conditions. They are consistently inferred from such events and conditions.

The fourth and last class of psychoanalytic variable discussed by Rapaport is behavior. The role of behavior as dependent variable is obvious, but it is to be noted that Rapaport would broaden the notion of behavior to include both conscious and unconscious thought, affect, and action. But unconscious thoughts and affects are by definition not experienced and must be inferred from the data of experience. Also, conscious thoughts and affects, precisely because they are attainable through private channels of introspection and experience, lack that 'public' quality demanded by the logic of the paradigm. This very lack of 'public' verifiability of the thought and affect that determine behavior is implicitly recognized by Rapaport's use of behavior as an intervening variable. In the situation in which motivation serves as the independent variable and observable action as the dependent variable, he asserts that the thought and affect determinants of behavior interpose themselves as intervening variables. A weak attempt is also made to regard behavior as an independent variable: under conditions of high autonomy, one facet of behavior may serve as independent variable for another facet. The example cited is the experiment of Werner in which the physical resistance to a motor restraint is the independent variable and the subject's M-responses on the Rorschach are dependent. It seems rather obvious that each variable is functioning in a different specific logical paradigm

and that the independent variable for the M-response is the Rorschach card and the attendant circumstances of administration of the test. The subject's motor activity may have had something to do with the M-response frequency, but not as independent and dependent variables.

Rapaport's analysis is valuable because it is carried on at a sophisticated level by an understanding student of psychoanalytic theory. It is interesting in so far as, in order to make the complex psychological situations treated within analytic theory relevant to the schematic demands of the intervening variable paradigm, he is forced to distort or disregard the inner logic of the paradigm itself. Consequently, the relationship of the psychoanalytic variables is cast in related groups of three—independent, dependent, intervening—with only the barest semblance of sequence preserved among the variables. The very attempt casts the psychoanalytic concepts into a rigorous mold into which they simply do not fit.

Two outstanding factors contribute to this inability of psychoanalytic theory to submit to the demands of the operational logic. The first is the concept of overdetermination. However we explain a given segment of behavior or experience, our explanatory hypothesis must admit the operation of other causes for it too. But this is inadmissible in the logic of the intervening variable and therefore invalidates the application of this paradigm. It must be remembered that for the operationist the meaning of the explanatory concept is contained in its empirical referents. The simultaneous presence of multiple determinants in the intervening variable therefore must correspond to multiple referents in the independent and dependent variables. This, however, would not be overdetermination at all; it would be nothing more than an aggregation of simple determinations.

The second factor is autonomy. In the logic of the intervening variable paradigm, the antecedent conditions of behavior are attributable to the independent variable. For consistency with the inner logic of the schema, the independent variable must consist of observable, 'public' evidences. Of the classes of

psychoanalytic variables described by Rapaport, only one will really fill the bill, namely, external reality. Consequently, the schema would dictate that behavior and the complexities of human experience illuminated by psychoanalytic theory must be stimulus-dominated. But it is strikingly obvious that human activity is not stimulus-dominated, but that alternative responses, spontaneous activity, and the lack of one-to-one relationships between stimuli and their respective responses bespeak an autonomy within the ego that cannot be confined to the mere reactivity of an intervening variable. Yet, as I have already suggested, ego functions share with psychic structures, motivations, and cognitions a logical status that prevents their surviving the rigor of operational analysis.

Consequently, it is likely that attempts to reduce psychoanalytic concepts to a behavioral or operational base are doomed to frustration from the start. It is also plain that any such attempt must begin by selective elimination of certain crucial evidences and rejection of the most central and significant parts of human experience. Meaning is central for understanding human activity and for psychoanalytic theory; and meaning cannot be incorporated into an operational theory of human behavior.

The critical difficulty in all these attempts is that they attempt scientific validation of psychoanalytic theory according to a logical paradigm of scientific evidence and meaning that was developed in physical science. There the theorist can very well insist on observable data precisely because no other data are available. Likewise, he can insist on the intervening variable paradigm since there is no other way to arrive at scientific intelligibility. Once the situation is radically changed, however, as it is in psychoanalysis, the presumption that one can insist on observable data and can continue to think in terms of the intervening variable paradigm becomes highly questionable. It is unscientific to insist on the norms of mathematics when one is dealing with physics. Physics certainly uses mathematics, but if the theorist used only the norms of mathematics he would clearly be doing mathematics and not physics. Confusion would

arise precisely because physics has certain sources of empirical data recognized as pertinent to its organization as a science. Mathematics can do without such evidence, physics cannot. Similarly, it becomes grossly unscientific to insist that only norms evolved in physical science be used in an area of investigation where there are other kinds of available and pertinent data. Physics can do without introspectional and experiential data, but psychoanalysis and the psychological sciences in general cannot.

But what kind of evidences does psychoanalysis employ? To put it simply, psychoanalysis is built on a foundation of observational, introspectional, and experiential evidences. It is important to grasp the connections between these various evidential bases. The observational base is essential to the analyst's appraisal of the patient. He observes the patient's behavior primarily in the therapeutic setting. He watches the patient's general demeanor, his mannerisms, the way he lights his cigarette, the way he uses his eyes, the way he holds himself, the way he fixes his lips. The observational data are undoubtedly rich, and it has been one failing of analytic presentations that they have not been accurate enough in observation and recording of significant behavioral data. Introspectional evidences are the most prolific source of information about the patient. The basic technique requires that the patient suspend all censorship as far as possible and produce free associations. Free association is essentially communication of the patient's rich inner life in verbal form to the analyst. We shall see what its theoretical significance is later, but the important point at the moment is that free association provides introspectional evidence about the inner processes of the patient and that without this verbal communication we should have no way of making contact with this rich source of evidence. It is important to realize that free association, no matter how free, does not communicate the whole of the patient's inner world. It catches fragments of the whole and by the sheer limitations of language it expresses only a facet of the fragment.

The spectrum of introspectional evidences is very broad in-

deed. Reports of dreams and feelings are basically introspectional. Data of the patient's history are fundamentally introspectional in so far as they are filtered to the therapist through the memory of the patient. One might argue that the series of historical facts that constitutes the patient's history is objective and therefore not to be treated as private evidence. But much of what is contained in a case history is not objective fact, but rather the patient's perception of that fact and his reconstructed interpretations of events and relationships.

The evidences are also experiential. The subject's experience can be communicated only indirectly, reflected in language that pertains to objects. Part of the analyst's effort is directed toward understanding not only of introspected content, but also of what is revealed to him of the subject's experienced ego. This cannot be done merely by careful reading of objective communications. Understanding the subject's communicated experience requires reflection by the analyst on his own inner experience as a thinking, feeling, loving, hating, worrying human being. By retreat into himself the analyst finds the common ground of experience with his patient (15). The capacity to do this comes to the analyst in two ways: he may have lived through the experience of the patient, or he is able by imagination literally to reproduce the patient's experience in himself. Because every man's life is unique, the analyst can have 'lived through' only a limited number of the patient's experiences, but life experiences can approximate to one another and often this is sufficient. The imaginative empathy is the more sensible and the more flexible, but it places special demands on the imaginative capacity of the therapist. However, it seems that experience and development of techniques for 'reading' the patient contribute to the therapist's capacity to accomplish this objective.

So much of the elements involved in this type of communication is unknown to us that we are reluctant to describe the process as consisting in the individual experiences of patient and therapist and a communication between them, whether

verbal or nonverbal. Actually the process is highly complex and embraces a wide spectrum of observational, introspectional, and experiential evidences. The communication undoubtedly requires a moment of self-reflection on the part of the analyst, but the total complex of awarenesses by which the analyst engages in the situation seems to include an unreflective awareness of the irreducible subjectivity of the patient. We move in a sense beyond the façade of extrinsic behavior and communicated introspections to a confrontation with the ultimate core of the patient's personality, the core that makes him an autonomous and independently existing and totally unique person, the ego. This deeper communication between analyst and patient cannot be reduced simply to observations; it somehow involves the therapist's experience of the other. This confrontation has been described by Buber as the 'I-Thou' relation, as opposed to an 'I-It' relation. The latter is the relation of oneself to a thing, an object; the former, however, has to do with the relation of oneself to another self (5). The same type of communication was described by Rogers (17) in terms of empathy with the internal frame of reference of another person.

If we accept the inherent characteristics of the various types of evidence we have been discussing, we are faced with some perplexing problems. The problems are culturally compounded since the prevailing movement, or at least the most articulate movement, in the scientific conceptualization of psychoanalysis seems to be directed toward trying to fit psychoanalysis to the intervening variable paradigm (2).¹ Although many psychoanalysts feel a vague malaise in this type of thinking, the logical purity of the methodological schema has an almost overpowering effect. Consequently, many analysts resolve their doubts by an appeal to the immature status of their science, or by the wise caution that perhaps clinical data will not

¹ This article seems to assume that the proper basis for psychoanalysis as a scientific discipline is the intervening variable or hypothetical construct type of paradigm, including the idealization of reduction of theoretical concepts to an operational base.

fit too neatly into any accepted schema. The implicit concession is that we have a long road to travel but one day we shall be able triumphantly to take our place alongside the most sophisticated of modern sciences. I think much of this kind of thinking is a deception, which we have fallen into because of a prior failure to come to grips with the peculiar problems of method that must be faced in any science of human personality.

The problem is how we can accept certain evidences as valid in our scientific theory. There is no great difficulty with observational data, or instrumental data where they can be employed—no more than in any scientific context. These can be confirmed and verified by accepted criteria. But the private evidences of introspection and experience cannot be subjected to these criteria. I do not see how private evidences derived from the patient's inner frame of reference can be directly verified. If verification is to be had at all, it must be had indirectly, and therefore comes to mean something rather different.

Let us take the example of a dream analysis. A patient reports a dream; to him it seems utterly devoid of meaning. As the analyst listens, he fits it into a context which he has been assembling from the beginning of his association with the patient. He may ask for the patient to free associate to the content of the dream to help him find connections between portions of the dream fragment and the developing context. The context is provided not merely by the mass of evidence that the therapist has gained through his contact with this patient, but also through all the experience and clinical awareness developed in his work with other patients. The more experienced the analyst is, particularly with the type of patient he is now dealing with, the better developed will be his context of meaning. The context is also determined by the collective experience of other psychoanalysts, psychiatrists, and psychologists, transferred to the therapist through his formal training and study and constant professional exchange with his colleagues. In discussing the dream with his patient, the analyst brings this context of meaning to bear on the dream so that certain parts of

what the patient has said begin to take on meaning for him. He begins to perceive the possibilities for understanding the context of the dream and he receives clues that begin to open up the meaning of the dream. But his penetration of the mystery of the dream is only partial, leaving the analyst still wondering what it all means. For several days he mulls the matter over until suddenly he sees a whole pattern of significant relationships in the dream that he had not seen before. In his next session, the patient reveals his insight to the therapist and the process is thus extended. The therapist combines his previous interpretations with the patient's new insight and fits this new level of meaning into the general context of meaning; thus he begins to probe more deeply into the meaning of the dream, to fit it into the general pattern of the patient's life, to draw the dream and other things revealed in the process of therapy into a consistent and intelligible pattern that makes sense to the patient and gives him the opportunity for increasingly effective and penetrating insight into himself and his problem (*II*).²

It is *meaning* that clearly organizes and integrates this process and establishes its continuity. The dimly grasped and successively more and more sharply focused meaning is what emerges with greater penetration and comprehensiveness at each stage in progressive elaboration. Both patient and therapist contribute to the elaboration of meaning: the patient in terms of his personal experience of inner processes which embody and express meaning and the therapist in terms of a previously established interpretative context. It is clear, then, that meaning is the central fact of human existence with which psychoanalysis has to deal. The whole direction of the therapist's effort is toward elaboration of the full context of meaning in which the whole range of data that he has gathered about the patient falls into a consistent, coherent, and intelligible pattern.

The consistency of meaning is seen very clearly in Freud's

² My description of this process is similar to Freud's, except that I have tried to make clear the continuity of meaning.

understanding of the symptom. He did not see a physical symptom as a mere physical fact, as the prevailing medical attitude would have dictated. He saw it rather as possessing a symbolic dimension, a dimension of meaning. The apparent discrepancy between the occurrence of the symptom and the patient's awareness of the meaning of the symbol led Freud to infer a level of unconscious meaning which determines the occurrence and form of the symptom. The symptom itself is an expression of this unconscious meaning. This relation demands careful scrutiny, for it contains several elements we must understand if we are to understand psychoanalytic method. First, the data involved are both observational and introspectional. Second, these two kinds of evidence are unified by meaning; both the observational evidence of the patient's behavior and externally manifested symptoms and the introspected evidence of his feelings and perceptions in regard to the symptom are united in a single coherent and consistent framework, and this unifying principle is the meaning latent in the symptom and repressed from conscious awareness. Third, the repressed meaning can be discerned in other fragments of the patient's awareness such as dreams. The nature of the symptom may provide a clue to the nature of the repressed meaning, but determination of the exact significance of what has been repressed often comes only from intense therapy over a period of years. Fourth, the guiding presumption in the therapist's approach to understanding is that the specific content determining this symptom will emerge as part of a broader context of meaning which is reflected in the whole of the patient's experience. The better this content can be integrated into the total meaning of the patient's life, the more accurate we may suppose the interpretation to be. Fifth, the unconscious determinant is not proposed by the analyst as an intervening variable, nor as a hypothetical construct.

This last point needs explanation. Either of these ways of employing the unconscious determinant will demand use of the logical framework of the intervening variable paradigm. If the

unconscious determinant of the symptom were an intervening variable, the whole intelligibility of the unconscious determinant could be expressed in terms of observables. Equivalently, this would eliminate the unconscious determinant, or at best give it little or no intelligibility aside from the symptom. If the unconscious determinant were a hypothetical construct, the theorist would have proposed this determinant as explaining the regularity of association between a set of antecedent variables and a set of consequent variables. If we try to specify these variables, we are in trouble since the logic of the paradigm demands that they be observable and confirmable evidences. Moreover, the intervening variable paradigm has reference to the scientific determination of objective structure and function. But here we are not dealing with objective structure and function, but with subjective meaning. There is no justification for imposing the suppositions of such a causal analysis on meaning; meaning can be a determinant of the operation of structures and mechanisms which are also determined by causal analysis, but causal function cannot be ascribed to meaning as such. We must conclude, then, that the unconscious meaning which is discerned as determining the symptom and its introspectional concomitants is not logically or really related to the appearance of the symptom in the same way as a physical structure is related to the observable manifestations of such a structure.

How, then, is the unconscious determinant elaborated within the analyst's theoretical appraisal of the patient's situation? In the analyst's apperception of the total complex of available evidences, the symptom functions as an expression of a certain significance which has an integral and meaningful relation to a pattern of meaning. This pattern of meaning at its highest level of generalization encompasses the entire life experience of the patient. The unconscious determinant of this specific symptom is proposed by the analyst in order to fill a gap in this total picture. If we remember that the elaboration of such a meaning is never a product of the analyst's understanding alone

(as would be the case in a hypothetical construct) but is arrived at conjointly by both analyst and patient, we have a double confirmation of the accuracy of the interpretation and therefore of its theoretical significance. In so far as the interpretation fits the pattern of the patient's life and is recognized by him as doing so, the validity of the interpretation is bolstered. In so far as the interpretation is consistent with the body of analytic thinking, it serves as substantiating confirmation of the theory itself.

It is important to remember that the understanding of which we have been speaking is primarily a determinant of meaning at the theoretical level. It should not be confused, therefore, with the kind of *Verstehen* developed by German phenomenological psychologists and sociologists (7, 13, 21, 23). The operation of *Verstehen* is not concerned with the level of theory at all, but has to do more with the communication of experiential evidences. The *Verstehen* is the essential factor of self-experience that is involved in the 'reading' of another's experience (23, pp. 677-687). As we have been careful to point out, there is more to the appraisal of another's experience than mere self-introspection. But without access to the patient's inner frame of reference, the kind of scientific understanding we are trying to describe would be little more than sheer fancy.

It should be obvious that this sort of evaluation of method reflects a goal of the science more than the actual state of the science. The actual operation of psychoanalysis is far from the idealized picture painted here. Its limitations are many, but they stem from two major sources. First, psychoanalysts have not developed the techniques that would enable them to gather the available data. Observation of behavior is becoming increasingly exact and penetrating as the practice of analysis is extended and sharpened. Introduction of recording devices has made collection of verbal reports more objective and complete. It is possible to film segments of behavior for more intensive study. But it is more difficult to devise techniques for dealing with certain kinds of introspectional and experiential data,

especially where the analyst's own introspective processes become an essential part of the process. Freud accurately perceived that the psychoanalyst is more than a mere observer; he is also a participant in the analytic relationship and therefore plays an intimate role in the 'receiving' of experiential data and in the 'reading' of the patient's inner frame of reference. Freud therefore insisted on the necessity of didactic analysis, in which the prospective analyst must carefully reconstruct the pattern of meaning in his own life and thus become able to recognize the similarities and differences between his own inner frame of reference and that of the patient. The success of this maneuver is not complete, because reconstruction of the pattern of meaning is not complete. Success must wait upon accumulation of experience and evolution of techniques.

On a higher level, the limitations on the effectiveness of analysis stem from the inadequacy of the framework of analytic theory. The overall theory is important since it provides the generalized context of meaning that definitively guarantees the accuracy of a particular interpretation. The theory of psychoanalysis is still very much a collection of fragments which do not provide us with a consistent and integral context of meaning. Perhaps we can wait for the entrance of some intuitive genius to fit the pieces together, but I rather expect that the integration of meaningfulness with theory will come at the hands of hundreds and perhaps thousands of lesser men. Progressive elaboration can occur; it requires careful collection of data and accurate synthesis of patterns of meaning at all levels. It especially requires flexibility of thought and creativity of imagination to find new patterns of meaning and to improve and unify more and more of the fragments of meaning in the light of ever-increasing clinical experience and new data, new manifestations of the patterns of meaningfulness that govern the lives of men.

The mistake has too often been made of rejecting a position with such vigor that the valid insights it offers are lost. I deny that psychoanalysis can be reformulated in operational terms

or that it can be validly conceived within the operationist framework, I emphatically do not deny the obvious value of attempting to reformulate psychoanalysis so that it conforms to operational criteria. It should be obvious that the type of reconstruction of meaning that is basic to the method of psychoanalysis does not achieve certain acceptable and valuable scientific goals, particularly prediction and control.

CONCLUSION

Psychoanalysis can achieve some predictability, but it simply does not permit the quantified prediction attainable in a more operational approach. It is conceivable that an attempt to formulate the analytic situation in operational terms and a quantitative evaluation of the relation of certain isolatable variables may bring to light certain important factors that an approach based on meaning and understanding can never find. The attempt therefore should be made, but the point of my argument is that such a reformulation, even if it uncovers important and valuable material, cannot be regarded as representing the methods or concepts of psychoanalysis. If an elaboration and accurate formulation could be achieved by operational means, psychoanalysis would still be confronted with the same crucial questions it now tries to face—and the reason is that psychoanalysis is a scientific attempt to deal with dimensions of human experience that cannot be reduced to the level of operational analysis.

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Pyromania in a Woman

Harvey R. Greenberg

To cite this article: Harvey R. Greenberg (1966) Pyromania in a Woman, The Psychoanalytic Quarterly, 35:2, 256-262, DOI: [10.1080/21674086.1966.11926385](https://doi.org/10.1080/21674086.1966.11926385)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926385>



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PYROMANIA IN A WOMAN

BY HARVEY R. GREENBERG, M.D. (NEW YORK)

Freud (3) first established the unconscious sexual significance of fire; Fenichel (1) and Ferenczi (2) later traced the genesis of pyromaniacal perversions to sadistic, urethral-erotic fixations in preœdipal childhood. The frequent relationship between enuresis and fire, especially in the male, is well known.

Miss B was born into an environment consistent only in its deprivation and brutality. Both her parents were confirmed alcoholics. The father's excesses frequently led him to attack members of the family for which he was repeatedly confined in jail. The mother's drinking was sufficient to keep her in a chronic state of semi-intoxication. She was neglectful and critical, or oblivious to her children. The patient's three siblings all displayed traits of their disordered rearing. She had seen the father beat the other children mercilessly, but she had always been spared physical abuse by him.

Her first memories were of the chill which pervaded the house because the parents spent for drink the money with which they should have bought fuel. She was a sickly child, subject to attacks of pneumonia. At such times she found that treatment in a city hospital was more warmly cheerful than being at home.

In her seventh year she once brought home a kitten, and begged her father to let her keep it. In answer to her plea, he picked up the animal and hurled it out the window. She dated from about this time an intense fear of, and fascination with fire. 'When a firetruck came down the street', she recalled, 'all the kids would run after it, but I ran the other way; still I could sit for hours and watch flames in a fireplace—provided there was a screen in front of it. There was something happy about that kind of fire; but the kind you got from lighting a match always

The author gratefully acknowledges the assistance of Dr. Pauline Rudnick, of the Bellevue Psychiatric Hospital, for her help in the preparation of this paper.

scared me because something could catch fire from it. . . .’ She had no conscious impulses to kindle fires; moreover, newspaper accounts of major conflagrations terrified her. She brooded about ‘. . . the poor people who were trapped and burned’.

When she was ten, her parents separated, and a welfare agency placed the children in different institutions. She enjoyed a certain measure of security at the orphanage. Her scholastic achievement, however, was consistently quite poor despite a normal intelligence quotient. Two years later, her parents were temporarily reconciled but the children remained in institutions.

During a weekend visit at home in her thirteenth year, she witnessed her father having sexual intercourse with her fifteen-year-old sister. She had an impulse to flee, but stood rooted to the spot. Afterwards, while her sister lay sobbing, her father swore her to silence. This episode increased her chronic fear of her father almost to panic proportions.

She nevertheless would have returned home at sixteen, had her mother not declined to take her. She was told she would have to make her own way in the world. However, her younger sister was allowed to return because ‘. . . she was smarter and more cheerful than me’. Angered and depressed, she vowed never to see her parents again, a promise which she kept faithfully. She worked first as a nurse’s aide; then with the guidance of a kindly priest she took vows in a religious order devoted to the care of the elderly and infirm.

She found the routine of convent life comforting, especially enjoying the work with elderly people. She was transferred to a home for the aged in another city where she functioned well for several years. She developed a strongly dependent attachment to the Mother Superior who took a special interest in her welfare. A crisis developed, however, when her request to attend a course in practical nursing was denied because of her lack of formal education. Instead, her closest friend was chosen for this training. When the friend left, Miss B was given greater responsibility in the infirmary. She became increasingly depressed, and obsessively fearful that she might somehow injure her patients.

Suddenly one evening as if 'in a daze', she had an overwhelming urge to set fire to the basement where she was laundering clothes. She kindled a small blaze which she quickly extinguished. On succeeding evenings, she was compelled to re-enact this impulse, and with each incendiary act her guilt and agitation increased. She finally confessed her misbehavior to the Mother Superior who relieved her of her duties and arranged for psychiatric consultations. Admitted to a hospital for several months, she was discharged with only a slight improvement.

She was decidedly uncertain about returning 'to the outside'. She found employment in a city hospital where she worked at night as a nurse's aide, living elsewhere in a rented room. She made no effort to have any company or diversion, living simply to work and sleep. 'I tried', she said, 'to build another wall around myself'. As her early twenties passed, she came to feel a mounting dissatisfaction with the meaninglessness of her life. Her chronic depression deepened.

A bright spot appeared in her drab existence when she met a thirty-five-year-old married fireman who was recovering from an injury to his back. He created opportunities to talk with her in a friendly way to which she responded with many small favors in nursing care. She was aware of no romantic notions about him but was inexplicably distressed when his hospitalization came to an end. Some six months later, he appeared unexpectedly at a wedding party to which she had been invited. He was somewhat intoxicated when he asked if he might visit socially with her. She flatly refused. At home that evening she ruminated anxiously about the interest he took in her.

The following day, a Sunday, she was uncommonly bored and lonely. When the man telephoned and asked if he might come to see her, she agreed. He arrived with several cartons of beer. Miss B, who previously had had a phobic aversion to alcohol, became tipsy for the first time in her life. Without quite knowing how it happened, she found herself in bed with him. During the next several hours, she seemed to be moving in an altered state of consciousness. She was a virgin, and first penetration must have been clumsy, for it was intensely painful. There was a series of at

least four acts of coitus during which she sustained increasingly pleasurable orgasms. Her partner then abruptly got dressed and staggered drunkenly out the door, mumbling a perfunctory apology for his hasty exit. She was immediately plunged into a state of profound depression, accusing herself of disrupting his marriage. She cut both of her wrists and swallowed a large quantity of phenobarbital. Found by a neighbor, she was removed to a hospital.

In the psychiatric ward, she appeared as a rather plain young woman who was obviously depressed. There were no signs of disordered thinking. From the complete psychiatric examination a provisional diagnosis of neurosis, with depressive and hysterical features, was made. Psychological tests were interpreted as suggestive of minimal evidence of organic brain disease, especially from the interpretation of the Bender-Gestalt test, and even possibly from a diffusely abnormal EEG. She was discharged from the hospital after three months and was given appointments as an outpatient three times a week. These continued three years.

From the first, what could most fittingly be described as a 'classical', primitive purity was noted in her symbolic 'style', as elaborated in her dreams, associations, slips of the tongue. At one point somnambulism appeared as a new symptom (4). The suspicion arose that a latent schizophrenia might explain her ready accessibility to unconscious processes. She was occasionally greatly agitated, and at times had ideas of reference bordering on delusion. She had dreams of being torn apart and of being devoured. Twice she was briefly readmitted to the hospital because of suicidal trends precipitated by unexpected letters from her mother demanding that she return to her and support her.

Gradual abatement of her chronic depression kept pace with her increasing self-esteem, and the improvement in her personal relationships. She has remained well more than a year without any therapeutic assistance.

Although Miss B's pyromania first appeared during late adolescence, her history and psychopathology bear an impressive resemblance to the history and symptomatology of pyromania in

childhood as described by Nurcombe (5). The children in his series were frequently victims of maternal neglect, parental strife, and separation, and they had had to endure intemperate adult aggression. They tended to be poor students, and gained little acceptance among their peers. Nurcombe observed that organic defects, if present, possibly rendered a child more vulnerable to compulsive incendiarism. This patient quoted her mother as saying that, following a difficult birth, the patient had had difficulty in breathing and had 'turned blue'.

The destructive, sadistic psychological content and motivation of pyromania are the most striking features of this symptom. They are well documented in the literature. Miss B's obsession with fire began shortly after her father destroyed a helpless young animal with which she identified herself. Her given name was Catherine, and she loathed being called 'Kitty'. Whatever else it meant to her, fire represented the acting out of her repressed rage toward frustrating objects. This was well illustrated in the transference by a dream she reported shortly before her therapist was obliged to move to another part of the country.

You got up and said you had to go, but that you would be right back. I waited and waited. I got more and more scared and mad at you for lying to me. I thought you never would come back. I ran to the door. When I opened it there was a wall of fire. It was horrible. I was trapped. I ran to the window and thought of throwing myself out; then I woke up.

It was clear that fire also had for her pleasant, nurturing connotations. Her childhood memories of chilly rooms and bare tables contrasted sharply with pleasant recollections of the warmth of blazing fireplaces, of food, and of the loving care she received whenever she was treated in the city hospital.

However circumstantial it may appear to have been, it is difficult to believe that her only sexual experience, which was with a fireman, was not dictated unconsciously by choice. In the hospital, after her attempt at suicide, an indwelling catheter was kept in her bladder for more than a week. It is notable that,

months later, this experience was still the source of a great deal of obsessive shame and guilt, invariably reminding her of the strenuous sexual exertions which preceded her hospitalization. Later, because of persistent pyuria, she was referred to an urologist. His examination—especially the cystography—provoked tremendous anxiety with direct associations to violence and rape.

Freud (3) speculated that the alternating urinary and sexual functions of the penis were probably a source of much wonder and consternation to primitive man who, through myth and anthropomorphic fantasy, attempted to reconcile the opposition or contrast between sexual ardor (fire) and urination (water). It is less generally emphasized—possibly because of the stress in the literature on vaginal and clitoral sexuality—that the female urethra may be highly eroticized during a woman's psychosexual development.

Aggression and sexuality were inextricably commingled in this patient's life experience and fantasy. Her father was a model of personal violence and sadistic incestuous assault. The maternal substitutes from whom she hoped to gain affectionate warmth were institutional and relatively impersonal. An orphanage somewhat contained her frustrations and sustained her fantasies by partly satisfying her dependent needs.

The truce she had made with herself abruptly collapsed when the Mother Superior preferred her best friend much, to her way of thinking, as her mother had chosen her younger sister as the recipient of what limited capacity to love she had to bestow. Her repressed rage found symptomatic expression in phobias which were reaction-formations to her burgeoning hatred of the Mother Superior, the elderly patients, and ultimately the infantile objects. When these phobic defenses failed, her ego was temporarily overwhelmed. In episodes of pyromaniacal acting out, which eventually terminated in guilt and deep depression, she expressed her destructive fury toward the objects.

After her expulsion from the convent, she diligently constructed a life more unvarying and rigid than it had ever before been. The fireman's flirtation set in motion the return of her re-

pressed œdipus. When an unexpected opportunity for its consummation was offered, she was powerless to avert it. That the episode corresponded much more closely to a rape than to a romance was suitably in accord with her direct observation and her unconscious fantasy.

SUMMARY

A clinical instance of pyromania in a woman corresponds in most respects to the recorded literature of the subject. Singular in this report of the symptom is the clarity of the precipitating events in the chronology of its development. Remarkable, even if coincidental, is an overt acting out of the incestuous sexual fantasy with a fireman.

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Robert J. Stoller

To cite this article: Robert J. Stoller (1966) Shakespearean Tragedy: Coriolanus, The Psychoanalytic Quarterly, 35:2, 263-274, DOI: [10.1080/21674086.1966.11926386](https://doi.org/10.1080/21674086.1966.11926386)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926386>



Published online: 29 Nov 2017.



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SHAKESPEAREAN TRAGEDY: CORIOLANUS

BY ROBERT J. STOLLER, M.D. (LOS ANGELES)

An essence of poetic art, we are told, is ambiguity (3). There will, for example, never be a definitive theatrical interpretation of Shakespeare's *Hamlet*. To produce such a play, each director chooses among innumerable possibilities and creates a vision of what the protagonist signifies to him. Each version is but one aspect of a character that can never be wholly defined much less comprehended. As he searches for the play's meaning—'As Shakespeare must truly have intended it to be'—each interpreter believes he will find the clues Shakespeare surely must have given for an astute interpreter to discover. The last notable interpretation will be *the* definitive production—until the next. In the process, Shakespeare, who is as indefinable as life itself, will have suffered an artificial limitation; and so it proves that the poet's art transcends any interpretation be it on a stage or in an essay like this. The story of the play is the play itself.

To modern critical estimation, ambiguity in art is directly proportional to its enduring value (keeping in mind that what is idiosyncrasy in one generation may be universality in the next). *Coriolanus* may well be judged a lesser work than many others of the plays because the central character is less imbued with multiplicity and equivocation of motivation than, for example, *Hamlet*. Men like Coriolanus are deficient in the richness of their personalities. Stereotyped inhibitions, reaction-formations, and the smell of death give their humanity a two-dimensional quality. This is not a defect of the playwright's art but a defect of nature in the hero. While less enigmatic, this

From the Department of Psychiatry, U.C.L.A. School of Medicine, Los Angeles.

Part of a Panel Discussion on the Artist and Human Behavior, chaired by Charles W. Tidd, M.D., at the Meeting of the American Psychiatric Association, May 1964, Los Angeles.

drama is still another example of the poet's capacity to hold the mirror up to nature.

One of the greatest skills of a playwright is the progressive revelation of character. The tragic drama is considered the unfolding of a hidden fatal flaw in the character of the hero. This is certainly true of *Coriolanus*, but there is no unfolding; simply a breaking apart as one would break a stick. The protagonist erupts suddenly swollen with rage into the play.

As Coriolanus makes his entrance (Act I, i) his friend, Menenius, is striving to reason with a company of mutinous Citizens, armed with staves, clubs, and other weapons.

Menenius Hail, noble Marcius! [Coriolanus]

Marcius Thanks.—What's the matter, you dissentious rogues,
That, rubbing the poor itch of your opinion,
Make yourselves scabs?

First Citizen We have ever your good word.

Marcius He that will give good words to thee will flatter
Beneath abhorring. What would you have, you curs,
That like nor peace nor war? the one affrights you,
The other makes you proud. He that trusts to you,
Where he should find you lions, finds you hares;
Where foxes, geese: you are no surer, no,
Than is the coal of fire upon the ice,
Or hailstone in the sun. Your virtue is,
To make him worthy whose offence subdues him,
And curse that justice did it. Who deserves greatness
Deserves your hate; and your affections are
A sick man's appetite, who desires most that
Which would increase his evil. . . .

This is a play that centers about phalluses and castration. The references to swords, pikes, lances, staves, darts, war, Mars, charge, beat, wrath, hate, hard, advance, pierce, fight, are beyond count. We feel the great social stiffness, the muscular and psychological hardness of this man, who can scarcely help himself from penetrating everyone he meets either with his explosive words or with his weapons. It is appropriate that the

zenith of his career which wins Marcius his epithet, 'Coriolanus', is when singlehandedly he penetrates the gates of the city of Corioli and subdues her.

Along with the majority of Shakespearean commentators I am guilty of ignoring the multiple sources which influenced Shakespeare's writing. Omitting the prevalent political, religious, or moral influences that may have been determinants—the demands of his varied audience that shaped the form of the plays—the restricted perspective here is that of the psychodynamics of *Coriolanus*. Certainly Shakespeare was not consciously aware of these dynamics. We know that the great writers did not discover the unconscious; it made itself known through them by their genius. Freud freely acknowledged this debt. It is probable, judging by much of the modern American stage, that a conscious knowledge of psychoanalysis is an insuperable barrier to great creativity. It produces at best beautifully described case reports from which the ambiguity and mystery of man's nature have been removed.

In *Coriolanus*, Shakespeare has created a relationship between a mother and her son which reveals with direct clarity the antecedents of the development of the play and the inevitability of the tragedy. Putney has clearly shown the accuracy of Shakespeare's vision of the dynamics of destruction that energize this tragedy (4). With this I am in complete agreement, as with Seidenberg and Papathomopoulos—who mention *Coriolanus* in a footnote to an essay on Ajax—in the emphasis placed on the relationship between mother and son (5).

Coriolanus, lurching and charging through this play, is driven in a chronic state of misery he cannot understand or control and from which there is no release. As one of the causes of such arrogance there is the contribution of the prevailing culture that established with the passage of generations the cachet of an arrogant military hero and aristocrat. As a modern instance we may be reminded that from the end of the twelfth century, when the Order of Teutonic Knights was formed to

slaughter the pagans, to our present times, the Prussians preserved through generations a minutely scored choreography for their dance of arrogance: each movement of the head and limbs, the flick of facial muscles, the practiced rasp of the voice—and the cataclysmic consequences.

The inculcation of tradition and character begins in the nursery with one's mother. In *Coriolanus*, Shakespeare documents this explicitly.

Volumnia I pray you, daughter, sing, or express yourself in a more comfortable sort. If my son were my husband, I would freelier rejoice in that absence wherein he won honour than in the embracements of his bed where he would show most love. When yet he was but tender-bodied, and the only son of my womb; when youth with comeliness plucked all gaze his way; when for a day of kings' entreaties a mother should not sell him an hour for her beholding; I, considering how honour would become such a person—that it was no better than picturelike to hang by the wall, if renown made it not stir—was pleased to let him seek danger where he was like to find fame. To a cruel war I sent him, from whence he returned, his brows bound with oak. I tell thee, daughter, I sprang not more in joy at first hearing he was a man-child than now in first seeing he had proved himself a man.

Virgilia But had he died in the business, madam, how then?

Volumnia Then his good report should have been my son; I therein would have found issue. Hear me profess sincerely: had I a dozen sons, each in my love alike, and none less dear than thine and my good Marcius, I had rather had eleven die nobly for their country than one voluptuously surfeit out of action (I, iii).

For such a mother, a son is the literal embodiment of her phallus which from infancy she had wished to attain by one means or another. Subjected to such relentless pressures, her son may either surrender and become virtually emasculated, or he may be able partially to salvage his virility by acting out his mother's

fantasy as her surrogate until his repressed (feminine) identification with her—and his guilt about his repressed hatred of her—lead him to contrive his destruction.

What Khan has called 'cumulative trauma' in the relationship of a child to his mother is a modern elucidation of what Shakespeare knew intuitively.¹

Shakespeare perceived the powerful, passive, feminine striving unresolved in such a hero's motivations. Two accusations, to which Coriolanus reacts with violent denial, unhinge him.

Sicinius We charge you, that you have contrived to take
From Rome all season'd office, and to wind
Yourself into a power tyrannical;
For which you are a traitor to the people.

Coriolanus How! Traitor!

Menenius Nay, temperately! Your promise.

Coriolanus The fires i' the lowest hell fold in the people!
Call me their traitor! Thou injurious tribune! (III, iii).

We now know that no man could more easily have become a traitor than the one portrayed as Coriolanus. This hero and savior of his people, cannot hurry fast enough after he is exiled to submit abjectly to his archenemy, Aufidius, and to offer his services for the destruction of his native city. Shakespeare's language understandably conveys the universal consensus of the transitional equivalence of city, home, and mother.

The second indictment, unmanliness, strikes even closer. Battle scarred, Coriolanus had been required by custom to display to the citizens his wounds to gain the promotion due him. This he intransigently refuses to do. The importance Shakespeare attached to this can be measured by the great number of lines

¹ My aim here is to discuss the function of the mother in her role as a protective shield. This role as a protective shield constitutes "the average expectable environment" (Hartmann, 1939) for the anaclitic needs of the infant. My argument is that cumulative trauma is the result of the breaches in the mother's role as a protective shield over the whole course of the child's development, from infancy to adolescence—that is to say, in all those areas of experience where the child continues to need the mother as an auxiliary ego to support his immature and unstable ego functions' (1).

he gives to this mounting controversy of Coriolanus with the citizens. His insensate refusal to display his wounds ritualistically poses for him an insupportable threat. Shakespeare intuitively knew that wounds for such a man signified castration, and that publicly exposing his body was a phallic exhibitionism—borrowed from his mother—that he could not risk. He defends himself, as noted, by reviling and depreciating the male citizenry as hares rather than lions, and as geese rather than foxes.

. . . He that depends
Upon your favours swims with fins of lead
And hews down oaks with rushes (I, i).

When, however, his mother astoundingly succeeds in coercing him to submit to simulate humility toward this same rabble, he is suddenly stripped of the armor of his overcompensatory defense. 'Must I', he demands, 'go show them my unbarbed sconce?'

Coriolanus Well, I must do't.
Away, my disposition, and possess me
Some harlot's spirit! My throat of war be turn'd,
Which quired with my drum, into a pipe
Small as a eunuch, or the virgin voice
That babies lulls asleep! The smiles of knaves
Tent in my cheeks, and schoolboys' tears take up
The glasses of my sight! A beggar's tongue
Make motion through my lips, and my armed knees,
Who bow'd but in my stirrup, bend like his
That hath receiv'd an alms! . . . (III, ii).

Aufidius, an uncomplicated realist, is a foil to Coriolanus as Fortinbras is to Hamlet. He brands Coriolanus again with the charge of being a traitor; he further charges him with the intolerable truth that strips from Coriolanus the fruits of a lifetime of struggle by dismissing him with an attribute of impotence '... thou boy of tears ...'.

Aufidius . . . tell the traitor in the highest degree

He hath abus'd your powers.

Coriolanus Traitor! How now?

Aufidius Ay, traitor, Marcius.

Coriolanus Marcius!

Aufidius Ay, Marcius, Caius Marcius. Dost thou think

I'll grace thee with that robbery, thy stol'n name

Coriolanus in Corioli?

You lords and heads of the state, perfidiously

He has betray'd your business, and given up,

For certain drops of salt, your city Rome,

I say 'your city,' to his wife and mother;

Breaking his oath and resolution like

A twist of rotten silk, never admitting

Counsel o' the war, but at his nurse's tears

He whin'd and roar'd away your victory,

That pages blush'd at him, and men of heart

Look'd wondering each at other.

Coriolanus Hear'st thou, Mars?

Aufidius Name not the god, thou boy of tears.

Coriolanus Ha!

Aufidius No more.

Coriolanus Measureless liar, thou hast made my heart

Too great for what contains it. Boy! O slave!

Pardon me, lords, 'tis the first time that ever

I was forc'd to scold. Your judgments, my grave lords,

Must give this cur the lie: and his own notion—

Who wears my stripes impress'd upon him, that

Must bear my beating to his grave—shall join

To thrust the lie unto him.

First Lord Peace, both, and hear me speak.

Coriolanus Cut me to pieces, Volscies; men and lads,

Stain all your edges on me. Boy! False hound!

If you have writ your annals true, 'tis there,

That, like an eagle in a dove-cote, I

Flutter'd your Volscians in Corioli:

Alone I did it. Boy! (V, v).

Obviously, this shrill arrogance strives to shout down a pas-

sive, feminine sense of himself founded on the only infantile object that was provided him, his mother, for Shakespeare chose to exclude the influence of a father from Coriolanus' life.²

It is only more evidence of Shakespeare's genius in understanding his characters that the delineation of Coriolanus' character is completed by some indirect expression of homosexual needs. This is revealed in their first meeting, when, after Coriolanus has come to Aufidius and offered up 'My throat to thee and to thy ancient malice', Aufidius responds to this gentle surrender.

Aufidius O Marcius, Marcius!

Each word thou hast spoke hath weeded from
my heart
A root of ancient envy. If Jupiter
Should from yond cloud speak divine things,
And say, 'Tis true,' I'd not believe them more
Than thee, all noble Marcius. Let me twine
Mine arms about that body, where against
My grained ash a hundred times hath broke,
And scarr'd the moon with splinters: here I clip
The anvil of my sword, and do contest
As hotly and as nobly with thy love
As ever in ambitious strength I did
Contend against thy valour. Know thou first,
I lov'd the maid I married; never man
Sigh'd truer breath; but that I see thee here,
Thou noble thing! more dances my rapt heart
Than when I first my wedded mistress saw
Bestride my threshold (IV, v).

Let us examine further the implications of the evidence that Coriolanus is the product of his mother's influence. (Contemplating the overwhelming Volumnia, we admire Shakespeare's good sense in not creating a father for Coriolanus. Such a

² Shakespeare took the plot of *Coriolanus* from Plutarch, who records that Coriolanus never left his mother's house even during the years of his marriage and parenthood.

father would have only cluttered the stage as he scurried around trying to avoid being eaten by his wife.) She gladly wishes her son dead if he will not fulfil her masculine ambition. We see her using him, both as boy and man, as if he were her's to command. 'There is', she says, 'no man in the world more bound to's mother' (V, iv). She relentlessly incites him to a state of sustained tumescence, of virile achievement, from which he is permitted no relief. Volumnia never stops prodding this swollen battering ram to keep it at full salute. It comes as no surprise that she directly incites him to his doom. She is first responsible for his being driven into exile by her emotional blackmail which forced him to try again to submit to the demands of the populace. Yet his mother's inexorable indoctrination from the cradle rendered him incapable for this very task. In exile, his hatred of his mother causes him to submit to Aufidius for their joint annihilation of Rome. The last scene of all is the destruction of a man whose identity was an insubstantial image of his mother's phallic fantasy. The relentless fatality, the inexorable unconscious determinism is played out. No longer the extension and manipulated agent of her virility, Coriolanus becomes for his mother only a threat to be destroyed to preserve herself from his reprisal. Volumnia plays on every emotion, to subjugate him, and her witchcraft prevails. When his vengeful intrigue for the assault on Rome encompasses the destruction of his mother, his wife and son, Volumnia reminds him of this fact, at least as far as it includes her.

Volumnia . . . thou shalt no sooner

March to assault thy country than to tread—

Trust to't, thou shalt not—on thy mother's womb,

That brought thee to this world (V, iii).

It is apparent that the hatred and destructiveness within Coriolanus cannot simply be explained on the basis of unconscious oedipal desires. More than just an intrapsychic struggle with oedipal guilt feelings, this tragedy moves swiftly to a mortal combat between mother and son. It has been stated

from the start that Volumnia envisions her son's death as a calculated risk. Having lived with her callous detachment throughout his life, his provocative arrogance attempts to shout down his insight into her power over him; that he cannot dispel his sense of being an impostor is revealed in his embarrassed disclaimer of popular renown.

All Welcome to Rome, Renowned Coriolanus!

Coriolanus No more of this; it does offend my heart:

Pray now, no more (II, i).

Thus the latent self-destructiveness of this seeming unassailable tyrant is foreshadowed.

This drama is not the gradual evolution of a conflict between a mother and her son. At the outset Shakespeare made it a combat for survival, the mother's exploitation of the son always in the ascendancy.

The universality of the threat that every infant senses (to which we give the name of separation anxiety)—his mother's life-and-death power over him—reverberates in each person of the audience. This is brought into clear focus by having Volumnia openly express her conscious awareness that her son's life is hers to dispose of as her caprice determines. In such an instance, a mother becomes the 'Fate' that can drive her son inexorably to his doom.

The development of the drama closes the roads to safety, until at the climax there is no way out. One or the other must die. The issue is exquisitely balanced but conclusively determined. Mother and son confront each other, *both quite aware that the only choice is whether to die or to kill*. Volumnia has no doubt; she has always been ready for this decision. She tells him he cannot kill her (Rome). She has no doubt what Aufidius will then do to her son. Coriolanus knows that his choice means her life or his.

O, mother, mother
 What have you done? Behold, the heavens do ope,
 The gods look down, and this unnatural scene
 They laugh at. O my mother, mother! O!
 You have won a happy victory to Rome;
 But for your son—believe it, O, believe it!—
 Most dangerously you have with him prevailed,
 If not most mortal to him. But let it come (V, iii).

He knows his master's voice, and for the last time obeys, as always, her command, this time that he be killed.

There are those who assess Coriolanus's love for his wife as his motive for sparing Rome; there is little in the play to give support to this opinion. In the second act as he returns victorious from battle, he sees only his mother to whom he kneels until she says to him: 'But, O, thy wife'. When he is exiled from Rome he ignores his wife completely (IV, ii). In the few additional encounters Shakespeare gives them, Coriolanus is at best perfunctory when he does not ignore her. The poet would have sensed that, having such a mother, her son could not be devoted to any woman.

Coriolanus may provide us with a clue that gives a partial understanding to all tragedy. In the classical definition, tragedy is the flaw in the hero's character that makes the tragic ending inevitable. Is not, then, tragedy the unfolding of the protagonist's need to suicide, 'engineered as a murderous response from the environment' (2) ? If so, it is a self-destruction determined by a mortal struggle between homicidal hate and helpless dependence.

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Charles Davison 1891-1965

Charles Brenner

To cite this article: Charles Brenner (1966) Charles Davison 1891-1965, The Psychoanalytic Quarterly, 35:2, 275-276, DOI: [10.1080/21674086.1966.11926387](https://doi.org/10.1080/21674086.1966.11926387)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926387>



Published online: 29 Nov 2017.



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CHARLES DAVISON

1891-1965

Dr. Charles Davison, who died in Paris on September 7, 1965, was a member of the New York Psychoanalytic Society for twenty-five years. He enjoyed the unusual distinction of having achieved professional eminence in another, related medical speciality before he entered the New York Psychoanalytic Institute as a candidate. Like Freud, he began as a neurologist and neuropathologist and by 1940 had contributed nearly one hundred articles to the neurologic literature. Indeed, in 1932 he was president of the Association of Neuropathologists, and he was a member of the Association for Research in Nervous and Mental Disease, the American Neurological Association, and the New York Neurological Society long before he began his formal training as a psychoanalyst.

He served as neuropathologist and attending neurologist to Montefiore Hospital from 1932 to 1953, and remained a consultant to the hospital in those specialties until his death. However, by 1945, when I first met him at Montefiore, his major interest was in psychoanalysis, though his working day was still divided between analysis and neurology. As time went on he devoted most of his time to psychoanalysis although he served as a neurological consultant in difficult cases for many of his analytic colleagues throughout his professional career.

Born in Rumania, he came to this country as a child and was educated here. He was graduated from the University of Pittsburgh Medical School and practiced neuropsychiatry in Pennsylvania until 1927, when he came to New York as a fellow in neurology at Montefiore Hospital. Later he received a teaching appointment at Columbia and was also an attending neurologist at Beth Israel Hospital.

It was chiefly as a clinician that Dr. Davison won recognition in the field of analysis. Two of his papers—*Intrapsychic Factors in the Choice of a Sexual Object* and *Psychological and Psychodynamic Aspects of Disturbances in the Sleep Mechanism*—as well as many book reviews were published in *This QUARTERLY*.

In 1946, Dr. Davison was elected to the Board of Directors of

the New York Psychoanalytic Society; from 1949 to 1955, he served as a trustee of the New York Psychoanalytic Institute. In both positions he gave freely of his time and energies and was highly esteemed by his fellow officers for his integrity and good judgment.

When I went to Montefiore Hospital in 1945 as chief of psychiatry, Dr. Davison was the only member of the neuropsychiatric division who was a psychoanalyst. He advised and guided me during my first years in New York, showing an interest and affection for which I have always been grateful. To me, as to so many others, Charles Davison was a hospitable companion and a loyal friend, never obtrusive but always ready when one turned to him for help. As a man and as a psychoanalyst he brought honor to all of us, as he did to himself.

His closing years were saddened by progressive vascular disease, and as a result he became progressively less active in both his professional and social life. He died suddenly of a myocardial infarction while vacationing abroad. He is survived by his widow and by a sister.

CHARLES BRENNER, M.D.

Sidney Tarachow 1908-1965

Charles Fisher

To cite this article: Charles Fisher (1966) Sidney Tarachow 1908-1965, The Psychoanalytic Quarterly, 35:2, 277-279, DOI: [10.1080/21674086.1966.11926388](https://doi.org/10.1080/21674086.1966.11926388)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926388>



Published online: 29 Nov 2017.



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SIDNEY TARACHOW

1908-1965

His many friends and colleagues were profoundly shocked to learn of the untimely death of Sidney Tarachow, a member of the New York Psychoanalytic Society since 1949.

Sidney Tarachow's work and scientific contributions more than anything else portray the special and unique qualities of his mind. For over thirty years there was a steady outpouring of scientific papers from his pen. The range of his interests is indicated by some of the titles: *A Psychosomatic Theory Based on the Concepts of Mastery and Resolution of Tension*; *The Analysis of a Dream Occurring during a Migraine Attack*; *Remarks on the Comic Process and Beauty*; *Judas, the Beloved Executioner*; *A Short Contribution to the Problem of the Simulation of Insanity*; *Remarks Concerning Certain Examples of Late Medieval Ecclesiastical Art*; *Experimental Studies on Ambivalence*; *Saint Paul and Early Christianity*; *The Syndrome of Inhibition*; *Totem Feast in Modern Dress*; *Ambiguity and Human Imperfection*; *Circuses and Clowns*. Perhaps his articles of most enduring value will be those that dealt with wit, humor, and the comic process, æsthetic subjects, and, above all, his historical religious studies. He had the makings of a great psychoanalytic historian. His paper on Saint Paul and Early Christianity is a model of psychoanalytic history, and he was in the process of expanding this study into a book at the time of his death.

In such work, Tarachow utilized his wide range of talents in a most original way. He had a special gift for understanding the interaction between cultural institutions and man's personality, especially the vicissitudes of instinctual drives. He postulated that Christianity owes much more to Paul than it does to Jesus, and that the neurotic aspects of Paul's character, especially his ambivalence toward the father, transformed Christianity from a father into a son religion.

His last published paper dealt with ambiguity and human imperfection. He believed that the religious demands of Western Christianity caused man to live beyond his means and to make greater instinctual renunciations than his capabilities would allow. 'The

religious system itself must offer an outlet for the aggressions . . . ambivalence and ambiguity. Christianity does function in this way at several levels. One is the ceremony of the Mass, in which God is both loved and eaten. . . . Others include the wide variety of institutional images of the ambivalent figure of the God . . . God and the Devil, Christ and Anti-Christ, Jesus and Judas, Heaven and Hell. The creators and organizers of religions seem to have . . . a better grasp of the ambivalence and ambiguity in human nature than the organizers of social systems. Religious systems have repeatedly outlived social and political systems.'

The following passage, an example of Tarachow's brilliant, aphoristic style and the way in which he used psychoanalytic insight for historical analysis, illustrates how the religious system provides outlets for the instincts. 'The antithesis of sacred and profane rituals can be easily documented . . . the profane rituals were institutionalized just as ritualistically as the sacred, and generally offered to the public within the official church edifices, even to the bringing of a jackass to the altar. . . . The Feast of Fools, the Boy Bishop, and the Black Mass are examples. There is Heaven and there is Hell. To reassure those who fear the loneliness of death, Hell is enormously overpopulated with fellow sinners. Antitheses abound. Heaven is milky, Hell is dark and anal. Heaven is above, where mother's face and breast were always to be found. Hell is below, like the toilet, into which there is a lifelong loss of body parts. . . . Both the sadistic and libidinal abound within the religious system.'

As a social philosopher, Sidney Tarachow pleaded for those things that save us from the very institutions that we have evolved to civilize ourselves. He believed that we must never get too far away from our childishness, our pregenitality, and our ambiguities, that we need our imperfections to remain human and enjoy life. We need puzzles, nonsense speech, magicians, carnivals, dances, celebrations, art, and literature in order to tap the wide range of ambiguous feeling that we are in danger of losing in the civilizing process. Much more than most of us, Sidney Tarachow was as much artist as scientist. He had many talents and a free, wide-ranging mind. He was a first rate, more than amateur, musician and 'cellist. He had artistic, æsthetic, historical, and scholarly interests. He had a sensitivity to language and literary skill, and, at least once, col-

laborated in writing a mystery story. He was also a rare book collector who read the books he collected.

Sidney Tarachow was a wise and humane man, warm, decent, kind and gentle. It is a matter of profound regret, of deep personal grief that the voice of this ceaselessly creative spirit has been prematurely stilled.

CHARLES FISHER, M.D.

The Psychoanalytic Study of the Child, Volume XIX. New York: International Universities Press, Inc., 1964. 493 pp.

Edwin I. Corbin

To cite this article: Edwin I. Corbin (1966) The Psychoanalytic Study of the Child, Volume XIX. New York: International Universities Press, Inc., 1964. 493 pp., The Psychoanalytic Quarterly, 35:2, 280-307, DOI: [10.1080/21674086.1966.11926389](https://doi.org/10.1080/21674086.1966.11926389)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926389>



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BOOK REVIEWS

THE PSYCHOANALYTIC STUDY OF THE CHILD, VOLUME XIX. New York: International Universities Press, Inc., 1964. 493 pp.

The current volume is dedicated to Dr. Hartmann in celebration of his seventieth birthday and the editors are to be congratulated for their novel presentation. They could have published his latest paper but then this yearbook would not have differed from all the other yearbooks. They could have commissioned a paper describing his achievements, but this has already been done by Solnit in another issue of *This QUARTERLY*. Or they could have asked Hartmann to define his achievements and contributions, a prerogative of an elder of a scientific discipline. The editors eschewed the commonplace, dramatically resurrected an old paper written thirty-five years ago in German, and translated it into English expressly for this volume. This is exciting. What must have been regarded by his 1930 contemporaries as misty adumbrations and irresponsible speculations has become a beacon defining the future of psychoanalysis by describing a rational and valid method for the formation of scientific propositions. The goals and techniques for experimentation are as fresh today as they were radical thirty-five years ago.

The editors provided a more subtle and hence more flattering portrayal of him by an unwitting and unplanned circumstance. Of the first thirteen theoretical articles in this Annual, the bibliographies of all but one mention Hartmann. This single abstention will be considered later in the review.

Hartmann's paper established psychoanalysis as a science with the goal of establishing a general theory of human behavior. Methodologically it resembles other scientific disciplines. Concepts are created and used in the same way as in the physical sciences, even though planned experimentation is not always possible. Concepts derived by finding causal connections capable of being genetically derived enrich our observations and allow further penetration to the core of the personality.

Korner's contribution is an attempt to explore the manner in which congenital drive endowment influences development. She starts with the concept that anatomic and autonomic modes of

behavior predetermine psychological behavior. Anatomic 'holding on' becomes psychic constipation. The direct transposition of anatomic and physiological mechanisms into psychological has never been very successful. It has been contradicted by clinical observations. Not all anal characters are constipated. Her paper contains an interesting hypothesis that maturational spurts in infants result in sudden increased sensitivity and awareness. This sudden flooding of the sensorium is related to anxiety and the ego's fear of the id. Clinically this maturational flooding corresponds to the overstimulation produced by the primal scene. The overstimulation is perceived as pain and is traumatic.

Petö attempts to extend his work on the fragmentizing function of the ego into the thinking processes. He readily admits that he is proceeding on an assumption that there is a fragmentizing function. But there appears to be another assumption implicit in his work: that in some way all ego functions are identical with thinking. He states that sublimation is 'thinking in proper thought symbols'. But not many would agree to the second assumption even though all would agree that ego mechanisms and defenses influence thinking.

An important source of knowledge of ego development is derived from observations of the impact of anatomic and psychic catastrophes on the ego. Massive sensory deprivation such as congenital blindness leads to ego deformities which have never been adequately pictured. The description of the disastrous effects of blindness first appeared in this Annual in 1961. The sequelae of blindness were described more as a local condition than as a generalized disease. Two papers, one by Burlingham and the other by Freiberg and Freeman, correct this deficiency in the literature describing the psychopathology of blindness.

One would expect that with the destruction of the sensory organs of vision, other sensory organs would compensate by hypertrophy. Burlingham illustrates this thesis by describing the changes in hearing. Thus the intentness of listening is a clue to the child's interests. 'Listening' can become a substitute for action. The greater libidinalization of hearing has a significant role in ego development and this is well described. An unfortunate complication which prevents hypertrophy of hearing is the mother's depression and guilt as a reaction to the increased quiet of the child. This obliterates ma-

ternal sources of sound which, in a vicious cycle, further impedes the ego development of the blind child.

Fraiberg and Freedman's discussion of blindness is a more comprehensive study of ego functions and development. The adaptive failure of the hand and its hypertrophy as a perceptual organ are described. The hazards of achieving object relations are enumerated as are the difficulties of identifying the world in ignorance of spatial dimensions. The loss of mobility with its loss of many perceptions, the depreciation of the concept of mother and diminished opportunities for identification with her, retard development. Aggression which can be discharged by motility in the sighted has no outlet in the blind. But in order to develop fear of aggression it must first be permitted and discharged. A concept of one's body image fails to develop. Sexual identification is deficient and the concept of 'I' is defective even though distinctions between 'I' and the rest of the world can be made by nonvisual sensory data. Mobility suffers and pinwheel locomotion becomes a substitute for creeping. The failure to achieve hand autonomy is destructive and the mouth retains the importance of a sensory organ for life. The paper is a fascinating account of therapeutic achievements.

Nogera contributes two papers. The paper on fixations is excessively mechanistic. His definitions read like equations in physics. 'The intensity . . . of fixation points will be proportional to the amount of libido and aggression arrested.' The paper consists of arithmetical alterations of one side of the equation with consequent alterations of the other side. The fixation is weakened when 'the right amount of libido has moved forward and has made its contributions to the ego'. These tortured variations of an old original theme create conceptual disharmonies so that regression is not seen as a psychic defense but as a physical disequilibrium. Hartmann's name does not appear in the bibliography of this paper.

Barchilon writes on the development of artistic stylization by presenting a child's drawings over a period of years. He traces the changes in style and arrives at conclusions that will dismay and outrage educators. He states that 'Education is a passive acceptance of the knowledge which parents, educators, and society impose upon the child'. Later he repeats: 'Children lose artistic spontaneity as a consequence of this educative process'. Artistic creativity for Barchilon is related to the primary process but without intervention by

the ego. Without the work of the ego, primary process thinking becomes either schizophrenic or childish art. Barchilon seems to dismiss the work of the ego by stating: 'Alice [the patient] has followed the path of Nature whereas the artist must retrace that very path in reverse'. This is mystical and vague.

The clinical section is less controversial. A group of articles describes children's reactions to death. Furman describes the ability of children as young as three to master the concept of death, stating that the process of mourning can be resolved in young children especially if the substitute for the dead person is constant. In another contribution he concerns himself with the technical problem of continuation of an analysis of a six-year-old after the death of a parent. He concludes that death in the family is not a deterrent to analysis.

This symposium on death is enhanced by the reports of the same death by two observers from different vantage points. Barnes describes in abundant detail the events from the point at which a child was told of the mother's death to the child's acceptance of her death. Fantasies and poignant episodes of daily life were dramatically presented and the child's attempts to become a mother and to find a substitute mother were humorously pathetic.

McDonald describes group and individual reactions to the same death among the child's classmates. Some of the children were quite articulate and it becomes apparent that a traumatic event need not necessarily deform the ego, which has the dual task of understanding facts and experiencing feelings. If this can be accomplished, ego expansion is enhanced. The reader is offered a lagniappe with Alpert's description of children's reactions to Kennedy's assassination.

Kaplan contributes an excellent clinical study of narcissism. The child in the study was traumatized by withdrawal of stimulation from the periphery and retained an unusual degree of investment in the self for a prolonged period of time. She became anesthetic to stimulation by objects and immobile for prolonged periods of time. Kaplan presents an interesting hypothesis that there is an inherent readiness for stimulation. It must be noted that this child, like blind children, pinched herself.

A reader who approaches Melitta Sperling's paper on transvestitism and fetishism is in a dilemma. Our definitions of these

perversions have been modified considerably since they were defined by Freud as postpubertal syndromes. This topic was discussed by Greenacre in Volume X using Freud's definition, but in Volume XV she had altered the basic characteristic by including nongenital activities. Now 'fetishistic behavior' appears as a prepubertal nongenital activity and has the same import as fetishism. One wonders about prepubertal transvestitic behavior. Perhaps it is confused with feminine identifications in prepubertal boys? Many transvestites never go through the stage of 'transvestitic behavior'. So far as is known transvestitism can only be diagnosed with certainty after puberty. Boys with 'transvestitic behavior' can become homosexuals or heterosexuals after puberty.

Both Hartmann and the reader are enriched by the gift of this volume. It is a fitting tribute to the man.

EDWIN I. CORBIN (NEW YORK)

THE PSYCHOANALYTIC STUDY OF SOCIETY, VOL. III. Edited by Warner Muensterberger, Ph.D. and Sidney Axelrad, D.S.Sc. New York: International Universities Press, Inc., 1965. 408 pp.

Articles in applied psychoanalysis may add breadth and interest to the analyst's work. For example, they may educate him in the uses of religion and artistic expression and help him better understand the behavior and conflicts that arise out of the diversity of child-rearing practices, adaptive patterns, cultural goals, and opportunities. They may also stimulate fruitful collaboration between psychoanalysis and the other social sciences, providing psychoanalytic concepts illuminate rather than distort the subject as a whole. Using such criteria, the articles in this annual succeed in varying degrees, but generally do so better than comparable articles written a dozen years ago.

The first papers are from a panel discussion entitled Mythology and Ego Psychology. Jacob Arlow discusses one interpretation of the myth of the Annunciation to the Madonna, derived from art and case material. The unconscious fantasy of stealing the paternal phallus is transformed into a fantasy of conception in which the sun's rays enter the Virgin's eyes. Through this transformation, the myth may influence character formation in all exposed to it. Sadistic aggressive guilt-laden oedipal impulses are

replaced by passive receptive sublimations and reaction-formations. Symptoms sometimes occur when oedipal impulses are reactivated; in a woman with this Virgin fantasy, the sun's rays caused headache and fear of cancer. Mark Kanzer notes in the next article that Sophocles's *Oedipus* reflects the intellectual currents then prevalent in Athens and Sophocles's own views and needs. Every psychoanalytic interpretation of *Oedipus* also reflects the analyst's personality and the theories that have influenced him. Kanzer's timely essay applies to all such interpretations, for no one can survey a subject from Olympus. Arlow's well-documented and convincing paper, for instance, would be scarcely recognizable if it were written from the view of orality, object loss, and depression rather than the phallic point of view. Visual incorporation might then relate to fear of intimacy: the outsider, a hungry onlooker, carries on relationships at a safe distance, the eye substituting for the mouth. The patient's fear of cancer could become an attempt to deal with a reactivated fear of loss and depression by incorporating the tumor that caused her father's death, aiming at reuniting them in heaven. Feelings of alienation and depression were probably relevant to early Christianity and may have contributed to the Christian artist's use of the sun's rays and the halo. Early Christian art, both Roman and Coptic, reintroduced enormous sad eyes in full-faced view, eyes that are hungry to engulf every available morsel of light. Light in this case represents milk, love, and happiness. We need to know more about determining the comparative relevance of such varied points of view, especially as they may differ from one discipline to another.

Renato Almansì shows that the Tables of the Law symbolize a pair of hands, the hands of a punitive Father-God. He traces the origin of this idea from paleolithic cave paintings to the round-topped forms still placed behind legal tribunals. The hands in turn symbolize powerful reaction-formations, adaptation, man's double—his immortal spirit, and the phallus. Almansì tops off his historical evidence by making the improbable but effective leap from Moses to the tachistoscope. Using Fisher's technique, he finds verification for his hypothesis by studying responses to subliminal exposure to the Tables. This technique could prove to be a model for similar studies. Arlow's Annunciation hypothesis, for instance, might be broadened by comparing Catholic with non-Catholic

responses to a painting of the Annunciation scene, and the importance of alternative interpretations might be determined. Almansì, following Freud and the Old Testament, stresses the paternalistic aspect of God. Yet behind every punitive Father-God lies the promise of a protective, nourishing Goddess. Almansì, in fact, points out that Egyptian male gods usually wore feminine, round-topped head-dresses. So perhaps there is another important meaning to the double, round-topped Tablets. Representing the full breasts of a loving trustworthy Mother God, they may make more tolerable the threat of punishment from the mighty Father.

Max Stern writes that myth and rite originate in an attempt to master threatening reality. Through magical thinking, handling the symbol is equated with handling reality. There is a symbolic re-enactment of fear of object loss, basically loss of mother, in rites. The accompanying group ecstasy re-establishes the mother-child relationship. This view, while no doubt correct, seems restricted and unintegrated with other possible interpretations. Stern asserts that myths arise from the verbalization of the rite's unconscious fantasy. This idea might stir the hackles of anthropologists, for they have long debated the issue without resolving it. Kluckhohn, for one, believes that myth and rite usually arise independently out of an attempt to solve a common cultural problem.¹

William Niederland discusses the derivation of symbols from bodily processes. He suggests that both symbol and thought originate out of these same sources. An article published in 1920 by Hermann Goja on the alteration of folk songs by frequent singing has been translated by Marjorie Leonard. It is mainly of historic interest.

A posthumously published paper of Géza Róheim, one of a series on the western tribes of Central Australia, deals with the myth of the *alknarintja*, a phallic mother who resists the demands of her son. Róheim concludes that the inverted œdipal attitude of male adults is determined by the custom of the male child sleeping under the mother. Although the point of view is old-fashioned and id oriented, interesting observations abound. Parrin and Morgenthau discuss ego and orality in West Africans; the article is an unfortunate condensation from a book published earlier in Switzer-

¹ Kluckhohn, Clyde: *Myths and Rituals: A General Theory*. Harvard Theological Review, XXXV, 1942, pp. 45-79.

land. Illustrative case material has been omitted and a skim of psychoanalytic verbiage is about all that remains.

L. Bryce Boyer, in contrast, describes in detail the lives of male Apache Indians, discussing the dovetailing factors that contribute to Apache character and Apache problems. While too complicated to outline briefly, the incompatibilities between childhood-derived patterns and offered opportunities is shockingly impressive. A traumatic childhood is marked by gross parental inconsistency, lack of a clear male model, intense and prolonged shaming, and early frequent exposure to sex and sadism among drunken adults. This rearing results in a passive stoicism that hides a feeling of hopelessness, a poorly differentiated self-image, and intense latent homosexual urges. The latter stimulate equally intense defenses: sadistic sexual aggressiveness and drunkenness. Shaming leads to deliberate shamelessness. All this is intensified by disrespect for the white man's legal and educational systems, encouragement of dependency by the government, and lack of social and economic opportunities. Boyer's observations suggest that mass executions and starvation are not the only ways of eliminating unneeded or unwanted segments of the population. A seemingly benevolent government may accomplish much the same end by enabling cultures to carry on their ancient child-rearing practices but not providing the outlets required by them.

The article by the late Ann Parsons, who was well-versed in both anthropology and psychoanalysis, reveals the great loss the two fields have suffered in her early death.² South Italian kinship patterns are contrasted with the patriarchal freudian pattern in an effort to clarify the Jones-Malinowski debate on the universality of the oedipus complex. The male's close attachment to mother, a Madonna figure, remains unbroken and is marked by great respect. Erotic impulses are displaced toward prostitutes. The superego is of matriarchal origin. The father is treated with lack of respect and open hostility. Oral-dependent wishes are preserved and phallic-aggressive wishes renounced. This pattern militates against marriage and family continuity. The key to marriage lies in the father-daughter relationship. In contrast to the mother-son relationship, it is barely desexualized; teasing is prominent, especially

² Goertz, C. and Schneider, D. M.: *Ann Parsons, 1930-1964*. J. Scientific Study of Religion, IV, 1965, p. 182.

during the œdipal and courtship periods. The poorly repressed sexual impulses toward the father combine with her teasing behavior to drive the girl toward a husband, even as the sublimated tie to mother holds the son at home. After marriage, the son returns in fantasy to his mother and looks outside the marriage for erotic gratification. The wife, in turn, transfers affection to her sons, and the cycle begins again. Parsons concludes that the question of the universality of the œdipus complex is no longer meaningful. The correct question is, 'What is the possible range within which culture can utilize and elaborate instinctually given human potentialities and what are the given limits of this range?'. The Jones-Malinowski debate, like the recent Eissler-Shapiro polemic on Freud's Leonardo, did more to separate than to unite psychoanalysis with a related discipline, even though the distance between opponents was not infinite. Parsons' compatible mixture of psychoanalysis and anthropology should counteract this trend. It should also prove valuable to the clinician, whose patients' backgrounds often do not resemble the classical pattern, and help prevent his couch from becoming a Procrustean bed.

The fascination with these distant relatively unknown or exotic cultures is somewhat attenuated by the absence of similar psychosocial studies of our large divergent conflict-laden cultural groups, especially the American Negro. This absence suggests that applied psychoanalysis has isolated itself from contemporary life. Martin Grotjahn's stimulating essay on the psychodynamics of television viewing alleviates this criticism. In contrast to art, television builds up tension in order to deny honest emotion and postpone integration. Hence it may contribute to existential despair and delinquency rather than maturation, especially when outside reality has little to offer. K. R. Eissler discusses 'crusaders'—social innovators whose interest in a cause is accompanied by action. The isolation of interest and action in the vast majority, says Eissler, deserves our urgent attention. This was written before the recent civil rights demonstrations and student protests.

Finally, Anton Ehrenzweig adds a chapter to his writings on the artist's perception. Differentiation in the visual field is not innate but is stimulated by object relations. The undifferentiated field is linked to Hartmann's undifferentiated id-ego matrix. The artist is able to set up a rhythm between the undifferentiated and the dif-

ferentiated visual state that gives rise to new symbols. Ehrenzweig's highly original idea helps relate perception to various regressive phenomena, such as fusion of self and object, that artists use creatively.

ALBERT J. LUBIN (WOODSIDE, CALIF.)

SCIENCE AND PSYCHOANALYSIS, VOL. VII. DEVELOPMENT AND RESEARCH.

Edited by Jules H. Masserman, M.D. New York: Grune & Stratton, Inc., 1964. 296 pp.

The late John Benjamin, that excellent and creative researcher in the field of psychoanalysis, once while summing up a psychiatric research conference characterized the different contributions through a salty anecdote about the phallic ambitions of little boys. Some, he suggested, express their urinary pride in hitting the target, while others prefer a style of self-expression that requires them to cover as wide an arc as possible. He then went on to divide the researchers into those who aim at a specific target and those who prefer that wide arc.

Dr. Masserman's eternal struggle against 'the thunderings of an already superannuated orthodoxy' leads him to believe that progress in psychoanalytic research comes from moving 'from freudian "metapsychology" to comprehensive modern concepts'. As we see what he includes in the new volume of this series, we perceive that he thinks the wide arc preferable to the target. The volume therefore has no focus but is an umbrella, including just about everything in the tradition of a tolerant eclecticism.

The book pursues no clear line of development, no specific topic, but rather seems to be a broad, eclectic psychiatric journal that covers everything from analytic theory to existentialism; from socio-psychological studies to animal and biologic studies; from dream studies to studies on vocal patterning; from clinical studies on therapy to comparisons of therapy and learning theory; from group training methods to hospital practice. The book even includes studies of the contributions of Anna Freud, Erikson, and Hartmann—contributors who have indeed remained in the analytic mainstream, perhaps thus expressing Masserman's diminished concern about that uncreative orthodoxy he pursues so lovingly or so hatefully.

This general estimate of the underlying tendency governing this effort is by no means to condemn the various individual contributions. Many of them are highly stimulating and worth while; for example, papers by Pumpian-Mindlin, Hedda Bolgar, Harry Harlow, and Judd Marmor, to mention but a few of the large group of contributors.

The volume is dedicated to development and research and contains a memorial tribute to Franz Alexander, that erudite and thoughtful, though sometimes impatient, researcher. During my last meeting with him, we spoke about our common belief that scientific truths are neither orthodox nor liberal. Am I right in sensing that this present volume begins to discover this? For this reason I think it shows growth over the preceding ones in the series. If its editors agree, they might then change the title of Volume VIII and start to speak about the science *of* psychoanalysis rather than, as they still do, about science *and* psychoanalysis.

RUDOLF EKSTEIN (LOS ANGELES)

THE WILD ANALYST. THE LIFE AND WORK OF GEORG GRODDECK. By Carl H. Grossman, M.D. and Sylva Grossman. New York: George Braziller, Inc., 1965. 222 pp.

Groddeck is described as a cultured, charming, gifted gentleman whose life was embellished by the friendships of the most eminent psychoanalysts of the day including Horney, Fromm-Reichman, Ferenczi, Jones, and Freud. A quotation from Freud's *The Ego and The Id* acknowledging Groddeck's contributions to psychoanalysis adorns the frontispiece of the biography. But disinterested criticism reveals that he was a man who attempted to replace revolutionary scientific thinking with specious rebellious suppositions and whose work was hampered by his credo, 'I would want my own way, right or wrong'.

Groddeck introduced a concept of Es which bears a relation to the id in name only. In discussing the unity of body and mind, he stated: 'The Body and Mind is one and it harbors an Es'. He considered the Es to have independent 'symptomatic activity' and simultaneously believed 'the Es heals'. 'The Es affects the senses, digestion, and heart action', he wrote. Concurrently the power of the Es disappears and it must 'protect itself against the threat of all

chemical, mechanical, and bacterial attacks'. When these disparate propositions are correlated and integrated, one has the impression that Groddeck has anthropomorphized the id and that his Es is a homunculus rather than a structure. Horney objected, 'You smuggle omnipotence into the id'. Freud later recanted, 'In your Es, I do not recognize my civilized bourgeois Id'. Then inexplicably he added, 'However you know that mine is derived from yours'. Still later Freud was quoted as saying, 'Es mythology carries me nowhere'. Freud also attacked Groddeck's 'philosophy' as 'panpsychism which amounts to mysticism'. Es psychology was a caricature of id psychology.

Groddeck extrapolated his hypotheses into a generalized theory of psychosomatic illness. Since the Es alters bodily processes, these cannot exist without the Es. Such absolutism led to startling conclusions. Disease as a consequence of bacterial infection does not exist. There are no diseases of senescence. Coronary occlusion does not exist and Groddeck died proving that he was only a victim of his Es and not sclerosed coronaries. There are no ocular diseases, only the need of the Es not to see. There are no tumors, and Groddeck chided Freud for his tumor, suggesting analysis. He also considered analysis for ununited fractures. Childbirth would be painless if women could have a healthy Es. Ferenczi nevertheless called Groddeck the 'champion of psychoanalysis of organic disease', a perplexing statement by a man who had written about the pathoneuroses and was acquainted with Freud's thinking on the subject.

The relation between Freud and Groddeck can provide the student of freudiana with many opportunities for biographical speculation. The first contact between the two came when Groddeck attacked psychoanalysis. He later wrote to Freud acknowledging that his diatribe was without merit since he had never read any books about psychoanalysis. Freud immediately forgave. This was the beginning of an extensive correspondence. Freud was patronizing and told Groddeck, 'Everything that comes from you is interesting even though I am not always in agreement'. Freud excused his indulgence with, 'I value originality even if connected with a certain amount of orneriness'. Groddeck continually made demands upon Freud for admiration and approbation. All his works were submitted to Freud who always responded with encouragement. He called Groddeck a 'splendid psychoanalyst' and helped

him publish a psychoanalytic novel which had been refused by all publishers. He also helped Groddeck to become an accredited analyst against the determined opposition of most analysts. Even while Freud was favoring him, he was also chastising him for seeking priority for his ideas.

The biography is of interest because it presents an aspect of Freud not frequently described.

EDWIN I. CORBIN (NEW YORK)

INTRODUCTION TO DEVELOPMENTAL PSYCHIATRY. By Beulah C. Bosselman, Ira M. Rosenthal and Marvin Schwarz. Springfield, Ill.: Charles C Thomas, Publisher, 1965. 139 pp.

Psychoanalytic insights concerning the influence of early traumata upon the development of neuroses have had more influence on educators than on physicians. Medical education lays emphasis on pathology and does not equip the young physician with insights and techniques that enable him to practice preventive psychiatry.

In teaching general practitioners and pediatricians I found them especially interested in psychiatric syndromes and less concerned with the management of developmental crises. Yet my experience as analyst of adults and children and observer of infants has convinced me that teaching of psychopathology and psychotherapy on all levels of education hinges on the understanding of developmental changes not only in childhood and adolescence but also in adulthood. It therefore gives me great pleasure to find that a psychiatrist treating adults (Beulah C. Bosselman), a pediatrician (Ira M. Rosenthal), and a child psychiatrist (Marvin Schwarz) have collaborated in a book on developmental psychiatry which is to serve as a textbook for medical students.

They attempt to present developmental crises and to examine the ' . . . adaptive responses of the child and adolescent in these crises . . . as determinants of the adult life pattern' (p. 7). In the last particularly valuable chapter on Adaptation to Maturation, they stress the continuity of the developmental process and try to show that even the psychiatric syndromes of the aged have their roots in earlier developmental phases.

As so frequently happens in pioneering work, the book falls short of the high aims of the authors. Intermingled with excellent pas-

sages are diffuse, sometimes misleading formulations. These seem to be due to a curious mixture of too much generosity in imparting knowledge, a sometimes naïve oversimplification of developmental and psychiatric problems, and terminological as well as semantic confusions. It is to be hoped that future editions of this well-intended book will delete or change the sources of misunderstanding which can be summarized as follows.

1. The suggested reading list includes articles beyond the level of understanding of medical students while many important books written with clarity and simplicity of style are omitted, for instance, Anna Freud and Dorothy Burlingham's *War and Children*.

2. Developmental phases are presented in such a way that the continuity the authors aim for is frequently lost. The anal phase is shrouded in the discussion of aggression. No mention is made of the phallic phase. There is a regrettable omission of adult developmental phases such as parenthood or involution.

3. Case reports sometimes give the impression that the treatment process is predominantly centered on changes in parental attitudes brought about by the therapist's advice. Oversimplification and abbreviation of the evidence often leads to the mistaken assumption that factors involved in a neurosis are already evident in the initial diagnostic appraisal and that treatment follows an outline of expected changes planned by the psychiatrist in advance of treatment. Yet the truth is that knowledge we gain as treatment progresses frequently contrasts with our initial impressions, and the student should guard against preconceived notions. Giving advice and recommending environmental changes is an art practiced by many a physician intuitively; the psychiatrist in providing a structure for this art should stress the careful selection of such adaptive responses as the parent is capable of and the child will respond to. Such a selection can be based only on a thorough study of personality resources.

4. Both poor organization and semantic confusion obscure the meaning not only of psychoanalytic but also of some psychiatric terms. In the chapter on Aggression and Character Disorders, projection, paranoid attitudes, and paranoia are presented in such a way that one may easily gain the impression that all projection is paranoid and paranoia is a disease common in childhood. The impulsive disorder of the psychopathic personality is called 'compul-

sive'; no clear distinction is made between the compelling nature of some dissocial acts and compulsive-obsessive magic rituals. Defense mechanisms are described interchangeably with neurotic symptoms so that the reader must conclude that defense mechanisms are pathological. Repression is confused with suppression, inhibition, or denial. Secondary autonomy is defined as 'the late developing aspects of the character' (p. 83). Some of the misunderstandings may stem from the authors' opposition to certain aspects of psychoanalytic theory. Although they do not so state explicitly, they seem to reject Freud's concept of drive. They avoid the use of the word 'drive' throughout the book; as a result, they give a variant meaning to terms which pertain to direct or derivative drive expressions or reactions to drives—such terms as aggression, secondary autonomy, defense mechanisms.

A less catholic use of terminology, clear, concise definition of terms, and greater simplicity of language would obviate many of the difficulties in the presentation, and would help the authors to focus more succinctly on their avowed aim to present developmental psychiatry to the future practitioner of medicine.

JUDITH KESTENBERG (SANDS POINT, N. Y.)

THE TACTICS OF PSYCHOTHERAPY. By William F. Murphy, M.D. New York: International Universities Press, Inc., 1965. 623 pp.

In this book, Dr. Murphy has set himself a herculean task; on the whole I should say he has succeeded. This is a big book and most of the volume is taken up with verbatim transcriptions of psychotherapeutic interviews with a wide variety of patients whose illnesses range over the phobic, hysteric, psychosomatic, and 'borderline' syndromes.

The author approaches these problems from the point of view of Felix Deutsch's sector psychotherapy, which he defines as a therapy 'that most closely resembles psychoanalysis and makes a maximum use of the . . . clinical experience embodied in . . . psychoanalytic theories'. He points out that therapy involves more than the ability to listen; the physician must also know how to be active, how to organize and integrate, and how to help the patient to use these functions. Guidance through verbal communication is an essential part of this technique.

The emphasis in the therapy in almost all the cases reported is on separation and disappointment and the reaction to it. Murphy sees the most common obstacle in treatment as 'injured pride or narcissism', rather than 'instinctual needs and moral inhibitions'.

Without going into the pros and cons of verbatim transcription, one can say that we have here a wealth of clinical material not duplicated anywhere else to my knowledge. It includes not only the patients' words but all the interventions of the therapist, as well as periodic comments by the author on the rationale (or lack of it) for the activities of the physician.

Dr. Murphy has directed his work primarily to the resident and to all psychotherapists 'who wish to improve their technique'. And, one must add, their understanding. One may agree or disagree with the author on the emphases and interventions, and his comments about them. However, the book is not only valuable today; we have also for the future a conscientious and detailed record of the interaction between patient and therapist, which can be studied and re-studied in detail in a variety of teaching situations, to the benefit of both student and teacher.

FRANCIS MC LAUGHLIN (BALTIMORE)

A TEXTBOOK IN ANALYTIC GROUP PSYCHOTHERAPY. By S. R. Slavson.
New York: International Universities Press, Inc., 1964. 563 pp.

Slavson, a pioneer who began his work in group therapy during the 1930's, has more than anyone else stimulated and aided in the use and growth of group psychotherapy in every type of clinical setting in this country, and even throughout the world. As a teacher and supervisor, he helped to train many of the important workers in the field.

As he states in the Introduction 'the present volume is an attempt to organize systematically the outcome of fifty years of experimentation and observation with various types of groups in and out of clinical settings, thirty years of which were spent in the latter'. His small groups and 'several thousand' patients in every kind of setting have included children, adolescents, and adults with almost every type of disturbance.

This book covers practically everything related to group psychotherapy. Some chapters deal with biological, cultural, and social

concepts describing the dynamic forces involved in group formation. In other chapters Slavson carefully and very usefully clarifies the relation of group psychotherapy to other forms of group therapeutic methods and to education, social organization, and psychiatry. This most valuable section of the book clearly and succinctly defines and organizes concepts of group treatment that have been disorganized and confused.

The heart of the book, the part dealing with analytic group psychotherapy, is complete and beautifully organized. There are chapters on Basic Dynamics of Group Psychotherapy, Criteria for Selection, and Some Guides for Grouping. Phenomenology, the nature of communication, and the dynamics of the interview in analytic group psychotherapy are classified and described, and regression and acting out in group psychotherapy are discussed. Other chapters include Analytic Group Psychotherapy with Some Character Disorders, Group Psychotherapy and the Nature of Schizophrenia, The Qualifications and Functions of the Group Therapist, and Supervision.

Every aspect of the dynamics and technique of analytic group psychotherapy is treated and charts and tables help clarify the complex phenomena. Sometimes, perhaps for the sake of clarity, there is too much organization, so that repetition and fragmentation occur; however, this is a minor criticism when we consider the clarity thus obtained. Many beautiful summaries of group sessions illustrate the phenomena and theoretical concepts.

The analytic point of view is best conveyed in the author's own words: 'The basic orientation [of the book] is frankly derived from Freud's formulations as to the structure and function of the human psyche and its misconstruction and aberrations. Experience with different types of clinical problems, the immense variety of neurotic and character structures and deviations, and especially the fact that the treatment was carried out in a group setting, necessitated modifications as well as expansion of Freud's basic concepts. Nonetheless, these diversional necessities in no way detract or counter the profound laws formulated by Freud.'

Slavson uses freudian concepts correctly and most helpfully in explaining the complex interactions in group psychotherapy. He performs a most useful function in describing, from the analytic point of view, how identification, projection, and regression occur

in group interactions, how the manifestations of transference are altered, and how the group method is most useful in dealing with certain types of resistance, particularly in relation to certain character disorders. The usefulness of group psychotherapy in reality testing and in dealing with certain types of ego impairment is very clearly indicated. Perhaps most important of all, Slavson clearly indicates from the analytic point of view the limitations of analytic group psychotherapy. Its conditions dilute and alter the manifestations of the transference to the therapist and do not permit the regression in the therapeutic relationship that aids uncovering and working through the underlying unconscious conflicts stemming from childhood. Accordingly, individual psychotherapy or psychoanalysis is the treatment of choice for many cases. Slavson may be more rigid in this regard than some analytic group therapists, such as those in England, but he makes a most important point clearly and well.

This book is a fitting culmination for Slavson's monumental work. Here are all of the essential factors comprising the dynamics and the technique of group psychotherapy. The book is authoritative and most useful and can be highly recommended.

AARON STEIN (NEW YORK)

FORENSIC PSYCHIATRY. Second Edition. By Henry A. Davidson, M.D.
New York: The Ronald Press Co., 1965. 473 pp.

The author, superintendent of the Essex County Hospital, has prepared this manual primarily for the benefit of the neophyte psychiatric witness who is called on to testify as an expert before a tribunal. Recognizing that the psychiatrist is 'playing in the lawyer's arena and plays by lawyers' rules, taking the law as he finds it', the author makes no pretense at legal or psychiatric profundity, nor does he consider the problem of interdisciplinary 'fit'; rather, he emphasizes what the witness should do or say if he wants to help a party at interest in an adversary procedure. This goal presupposes a superficial knowledge of pertinent points of law, the preliminary steps, including details of examining a patient, which are necessary to prepare testimony, the format of the testimony itself, and the various pitfalls and booby traps that await the unsuspecting physician. There is stress throughout on typical attitudes of judges,

lawyers, and jurors that impede understanding of the effect of mental illness, and lists of terms to avoid lest the layman enthusiastically misconstrue them or become angry because he does not understand.

The first part of the book, entitled *The Content of Forensic Psychiatry*, discusses testimony in cases of criminal acts, personal injury, marriage and divorce, placement and custody of children, wills, sex offenses, alcoholism, addiction, juvenile court proceedings, malingering, commitment, competency, civil rights of the mentally ill, and malpractice.

Part II consists of avuncular advice from a friend returned from the fray. The author tells how to impress a jury and how artfully to avoid being discredited by hostile counsel.

This book may be of use to a physician who does not know what is expected of him in court and has not been enlightened by the attorney who summoned him to appear. Yet one is reminded of a remark of the late Felix Cohen, a practitioner, teacher, and legal philosopher: 'I wonder whether we have not outgrown the right to rely on hired champions, whether they wield medieval battle-axes or modern theories of psychoanalysis or economics, in our search for the truth in courts of law'.

JOHN A. COOK (NEW YORK)

MEDICAL PRACTICE AND PSYCHIATRY: THE IMPACT OF CHANGING DEMANDS. Report No. 58. New York: Group for the Advancement of Psychiatry, 1964. 42 pp.

This report of the Group for the Advancement of Psychiatry ('GAP') proceeds from the unassailable fact that the physician should treat the whole patient, if we assume the goal is good medical care. That this goal is self-evident in no way implies that the physician does his best to attain it. The greatest obstacle to this goal involves those patients with varying forms and degrees of psychological disturbance, with or without organic illness. The obstacle is not the patient but the inadequacy of his treatment by the psychiatrist and nonpsychiatrist.

The report succinctly points out many problems of attitude and technique of psychiatrist and nonpsychiatrist that work to the detriment of the patient's health. Some psychiatrists are at fault in their

professional relations with the nonpsychiatrist. The psychiatrist must, for example, learn to communicate with the nonpsychiatrist in nontechnical terminology. On the other hand, psychiatrists are increasingly involved with the community on many levels, as for example in the general hospital.

The preponderant evidence indicates that the most commonly encountered difficulties arise from the inadequacy of the physician's training in medical school and in his early clinical experience. These problems can be easily recognized and clearly stated, as indeed they are in this report. But the report only briefly refers to the education and training of the nonpsychiatrist, indicating the shortcomings therein and expressing hope for the future.

In spite of the fact that the number of hours devoted to the teaching of psychiatry in medical schools has increased considerably in recent years, it seems to the reviewer (who works intimately in liaison with the house and attending staffs of a large general hospital) too little of the psychiatrist's and social scientist's concepts of illness have been absorbed in these formative years. The house staff reacts to the consideration of both psychiatric and sociologic factors of illness with varying degrees of indifference and hostility. (Re-education of physicians already in practice, the attending staff, seems to be even more discouraging.) Despite the statement that psychiatry is now inseparable from medicine, the separation in practice is still appreciable. Medical school educators are well aware that present methods of teaching the inseparability of psychiatry and all the rest of medicine falls short of this goal. An enlightened faculty seems to be the essential prerequisite. Further, more research is necessary by the psychiatrist-teacher into the complex problem of medical school education before his thesis is accepted by a larger proportion of medical students. The evolution of more skilful teaching programs may then ensure greater success.

Recent experiences in psychiatric liaison work indicate that only by the expenditure of greatly increased time and effort will the psychiatrist achieve success in re-orientation of the attitudes of the nonpsychiatrist intern and resident. It is hoped that a future GAP report will be devoted to the exploration of current efforts by the psychiatrist to perfect his techniques of education and training.

LAWRENCE J. ROOSE (NEW YORK)

NEW DIMENSIONS IN PSYCHOSOMATIC MEDICINE. Edited by Charles William Wahl, M. D. Boston: Little, Brown and Co., 1964. 340 pp.

A collection of twenty papers by thirteen authors on various aspects of psychosomatic medicine, this volume is mistitled, for it contains precious little that is new and certainly explores no dimensions. It reads as though these were lectures given in an extension course for general physicians. Five of the papers are reprinted. The topics covered are the traditional ones prepared for the edification of psychologically enlightened physicians. Many are written in the patronizing style that regrettably mars so many such writings addressed to general physicians by psychiatrists and analysts.

There is a spate of opinion and advice on how physicians can better take care of their patients, some plausible, some questionable, but few sufficiently documented to be convincing. Many are clearly unsupported personal opinions, as is Wahl's statement, 'It is my conviction that no patient should ever be told he is going to die'. This highly personalized approach is confirmed by the fact that only nine of the papers include references to the writings of others; nor does the reader get the feeling that the opinions are based on studies in depth of the patients discussed. Pumpian-Mindlin, for example, discussing techniques of interviewing, describes how he as an analyst interviews patients referred to him in his office, apparently not aware that practical circumstances have demanded, and ingenuity has led to, methods of interviewing more practical for use at the bedside, and equally informative. Indeed, Mellinkoff, the only nonpsychiatric author, in *Medical Management of Psychosomatic Disorders*, comes closer to presenting the essentials of modern interviewing even though his treatment of the subject is brief and superficial.

Only five contributions bear recommendation, and two of these are reprints: Alexander's summary after thirty-five years of his views of psychosomatic concepts, and Grotjahn's account of his own experience as a patient. Mandell's discussion of coronary artery disease reveals experience and scholarship. Willis' paper on periodontal disease and Wahl and Golden's paper on psychogenic urinary retention are the only two that at least contribute some new and worth-while observations.

Though many of the authors are analysts, there is little in this

volume which will prove of interest or value to their colleagues; nor can the work be recommended with any enthusiasm to others, who can find the same material much better treated in other easily available sources.

GEORGE L. ENGEL (ROCHESTER, N.Y.)

THE GROUP IN DEPTH. By Helen Durkin, Ph.D. New York: International Universities Press, Inc., 1964. 378 pp.

Group therapy became well established, generally accepted, and widely used during World War II and has remained so ever since. Yet the term 'group therapy' encompasses so many contradictory or overlapping theoretical approaches, such as variety of technical maneuvers, and so many different situations for its application that it has become too diffuse to be descriptive without further qualification. Here the author, with several decades of experience in this procedure, clarifies and defines group therapy in breadth as well as in depth, in most if not all of its aspects.

As we read, we can infer, perhaps too readily, that writing this work was a peace-making mission, in which the author tried to reconcile differences of opinion in a bevy of individualistic and possibly opinionated practitioners. The main contention seems to be between those who consider the benefits of group therapy to derive from interpretation of behavior, analytic in nature, offered in the presence of others by a leader or by their companions, and those who attribute therapeutic effects to group dynamics, the interaction of individuals on each other. The issue is further complicated because both sets of contenders differ among themselves, and all are original thinkers, abundantly articulate.

To present their views fairly, the author has explored the reaches of sociology and the historical progress of psychology. She comments on her investigations in what sound like rueful overtones, 'Surveying the research findings in the field of group dynamics proved in itself an arduous task'. Arduous it must have been, since the material is voluminous, and here it is condensed and discussed in chapters that are a scholarly and informative introduction for those unfamiliar with the subject.

However, group therapy is a less theoretical than a special type, or types, of human interrelationship. The author states: 'In addi-

tion to a serious attempt to comprehend each method intellectually, I have also striven to gain an empathic experiential understanding of them. For example, I participated in an existential group as a patient, and in a group dynamics training group as a participant observer. I tried to record each kind of group therapy from the point of view of the school it represented. . . . My particular version of analytic group therapy received the most emphasis and although I know my psychoanalytically-minded colleagues will differ with me in a number of respects, I believe that we have in common the simple basic fact that we adhere strictly to analyzing transference and resistance in a group in order to bring about basic personality changes in the individual members.'

The principal respect to which Dr. Durkin refers is that where the influence of Bergler appears greater than that of Freud. She mentions Freud's 'analogy with the primal horde to account for the group's mysterious power over its members. In the horde, the father is all powerful and the others must obey. So magic and dangerous is his power that the others cannot even look upon him directly. But in the end he is killed and eaten and the primal horde is thereby transformed into a fraternity of brothers. Freud conceived of the group as a revival of the primal horde.' She then goes on to say, 'According to Bergler, the father not only played his part in the libidinal aspects of the oedipal drama, but often inherited the role of the controlling dangerous preoedipal mother. . .'. Drawing on her clinical experience, the author states: 'The idea of a group, i.e., a large totality of unknown power, conjures up the harsh preoedipal mother image, reactivating the individual's narcissistic fear of her, and the individual perceives the group accordingly in distorted fashion, and behaves in a way that resembles his mode of reacting to his mother, but in modern dress'.

A therapy such as psychoanalysis, designed for the individual, necessitates modifications and the introduction of new ideas when applied to a number of persons simultaneously. We learn here how Bion, Ezriel, and Foulkes use their psychoanalytic insight in conjunction with Kurt Lewin's extension of gestalt psychology. The methods and theory of Moreno and Adler are also given fair consideration. The influence of existentialist philosophy on group therapy is thoroughly discussed, and mention made of the recent development of family therapy. In conclusion, Dr. Durkin comments on her enterprise: 'Even when the misunderstandings among

schools of group psychotherapists and the consequent exaggeration of differences among them have been minimized, certain of their basic group therapeutic principles remain irreconcilable. They cannot agree on what constitutes emotional illness, nor on which are the decisive etiological factors of neurosis. Consequently their conceptions of what processes and techniques function to alleviate the symptoms and bring basic changes in their group patients continue to be at variance.' She adds later: 'The psychoanalytic approach offers more than any other to the group therapist. It alone is sufficiently responsive to the intricacies and subtleties of human behavior and especially to the depths of its sources.' She ends by hoping that by 'research and the expanded practical services made possible by this broader conception of our goals, still wider horizons become visible. Group therapists . . . may find their capacity for contributing to the solution of contemporary social problems appreciably magnified. . . . Instead of giving their relatively untutored opinions to those who are in charge of government on the advisability of testing atomic weapons and offering value judgments on political policies, [they] may find the means to contribute to national and even international problems in the area of their greatest skill, the management of human relationships.'

One criterion for determining a book's worth is the extent to which it fulfils the goals its author strove for in the writing. In this case, these goals are 'acquainting the general reader with some of the difficulties and problems that group therapists have had to face; to give the inexperienced group therapist a sound basis for choosing the method best suited to his training, his personality, and the needs of his prospective patients; to provide the more seasoned busy practitioner with knowledge of theories and techniques other than his own; and to offer the trail blazer a reasonably clear-cut base of theory and operations from which to take his departure'. Speaking on behalf of the general reader, this reviewer found the accounts of the therapeutic process like watching a session through a one-way screen, during which an inner voice whispered explanations of what was seen, while the descriptions of theories are a distillate of whole libraries of philosophical and psychological thinking.

In short, this book is an achievement of enduring usefulness.

GERALDINE PEDERSON-KRAC (NORTHPORT, N.Y.)

REPORT OF THE COMMITTEE ON GROUP TREATMENT IN FAMILY SERVICE AGENCIES. New York: Family Service Association of America, 1964. 55 pp.

This small pamphlet was issued to serve as a guide for family service agencies in establishing group treatment programs. It was prepared by a committee composed of outstanding and experienced workers in the field: Sanford N. Sherman, Chairman, with Dr. Hannah Grunwald, Ruth A. Janowicz, Dr. Joyce Gale Klein, and Dr. Saul Scheidlinger.

In carrying out its function as a guide, the pamphlet is most succinct and deals largely with practical matters involved in setting up group treatment programs in a family service agency. These include the selection of clients, their preparation, organizing the group, arrangements for sessions, training programs and supervision for therapists, recording procedures, and 'the integration of group treatment in the agency's program'. Very briefly but quite clearly the rationale for group treatment is discussed and the relation between group treatment and casework treatment is described. A valuable section of the pamphlet is devoted to describing various types of group treatment and indicating the psychological and social bases for their use.

This well-organized pamphlet is highly recommended as a guide to its subject.

AARON STEIN (NEW YORK)

THE NEW SOVIET MAN. HIS UPBRINGING AND CHARACTER DEVELOPMENT.
By Herschel and Edith Alt. New York: Bookman Associates, Inc., 1964. 304 pp.

The subtitle of this book is overambitious. The aim of the Alts' study was to portray the impact upon the character of the individual of the entire Soviet system, of which child rearing and education are a part.

The authors raised a number of questions. Are adults in the USSR more unselfish, more willing to sacrifice personality for the community than in Western cultures, in particular in the USA? What psychiatric problems are found? How are these handled?

The Alts twice visited Russia, in 1956 and 1959. They have drawn upon works published over many years on changes in the

Soviet system. For their report on frequency and types of psychiatric cases they quote almost exclusively from Dr. Nathan Kline, a psychiatrist from the United States, who visited Russia in 1957. Since no psychiatric case studies were available the authors' conclusions cannot be substantiated by quoting conscious or unconscious material from any patients. The conclusions in regard to character development are based, therefore, mainly on socioeconomic factors, on Dr. Kline's material, and the Alts' own deductions.

The authors make some interesting comparisons between types of frustration and anxiety-producing situations in Russia and the United States. They show, for instance, that the usual assumption that the Soviet worker, because of his more secure job, housing, and medical care, should be freer from anxiety than the worker in the United States is untrue. He has his own form of insecurity because he carries a work book in which the plant manager records his rating as to ability, fulfilment of norms, and so forth. The Soviet worker, therefore, has no assurance of being able to get a similar job with equal pay, or of staying in the same locality. He may have to accept work thousands of miles away among total strangers.

The problems of delinquency, which are increasing the world over with urbanization, are present in Russia despite the suppressive measures of spying and punitive action. The Soviets have not solved the handicaps of 'illegitimate' children. The regime, they contend, is finding it increasingly difficult to explain in their Communist society nonconformity, egotism, and crime, and there has been a slowly increasing self-study with re-evaluation of earlier concepts about education, importance of family life, causes of neuroses, and the personal equation.

The Alts conclude that the Russians do not seem to have solved basic psychological issues of man and society any more than we have. Unfortunately, they have no evidence from the unconscious to show what intrapsychic factors are at play in the Soviet people.

MARGARET E. FRIES (NEW YORK)

THE SEXUALLY RESPONSIVE WOMAN. By Phyllis and Eberhard Kronhausen. Preface by Simone de Beauvoir. New York: Grove Press, Inc., 1964. 255 pp.

The 'meat' of this book is the detailed accounts of their sex life by

four women selected from a group of volunteers, called 'The More-than-Average Housewife, The Married Lesbian, The Doctor's Wife, and The Sexual Sophisticate'. Aside from the authors' distorted view of sex, there is some question in this reader's mind if these four women represent a cross-section of the women of America, what with one being a Lesbian who hates men, and another a nymphomaniac.

In a section on Psychoanalysis and Woman's Sex Response, psychoanalysis is taken to task for its 'unrealistic expectations' regarding vaginal orgasm as a prerequisite for a 'psychosexually fully mature female'—a view that could be discussed on an objective level, but which the authors pursue on a personal level. They state: 'The only women who might qualify [as psychosexually fully mature females], we would have thought would probably be the wives of the analysts themselves'. Therefore, they selected as one of the four women whose descriptions of their sex life comprises the bulk of the book (one hundred sixty pages out of two hundred thirty-seven), the wife of a psychoanalyst.

What are we to think of a book addressed to the lay reader that leaves him with the impression that cunnilingus is the one practice giving the most pleasure to women, a book that allows the reader the thought that cunnilingus performed by a woman on a woman is preferable to the practice performed between man and woman, and a book that states in the chapter on Lesbian Love: 'We (also) are inclined to think that *exclusive* (Lesbian or male) homosexuality constitutes an unnecessary and possibly unhealthy limitation. However, by the same reasoning, might one not have to apply the same standard to an exclusively heterosexual orientation?' (pp. 223-224). Or what are we to think of a book whose authors, referring to Kinsey, write in the chapter on Women and Premarital Sex: '... most of the women by far who have tasted of the forbidden fruit before acquiring the necessary official sanction, have *no regrets* about it, including even the majority of those who had become pregnant in the course of their premarital activities. Not many even voiced regret at having undergone the sad experience of illegal abortion!' (p. 86). I cannot imagine a more vicious and destructive and misleading presentation of material than that which the authors make in this book.

There is another aspect of the book likely to mislead the lay

reader: the authors are called 'doctors' in the Preface, and 'Drs.' in the biographical sketch on the cover flap, where it is also stated that they 'did their postgraduate work at Columbia University, 1954-1958, and have since specialized in family therapy and group guidance, both in their private practice and their lectures'. The impression that the reader is dealing with physicians is enhanced by the next sentence: 'In 1957, they presented their findings . . . at the Second International Congress for Psychiatry in Zurich . . .'.

And how do the Drs. Kronhausen see 'The Future of Female Sexuality'? One might have guessed: in the form of a 'flexible monogamy', and this reader, at least has little question in his mind what part in what direction the authors would like to flex.

The book offers no new thoughts to persons familiar with the subject matter. For the reasons given above, it is not recommended to the lay public.

MARCEL HEIMAN (NEW YORK)

International Journal of Psychoanalysis. XLIV, 1963.

Eugene V. Ninger

To cite this article: Eugene V. Ninger (1966) International Journal of Psychoanalysis. XLIV, 1963., The Psychoanalytic Quarterly, 35:2, 308-319, DOI: [10.1080/21674086.1966.11926390](https://doi.org/10.1080/21674086.1966.11926390)

To link to this article: <https://doi.org/10.1080/21674086.1966.11926390>



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ABSTRACTS

International Journal of Psychoanalysis. XLIV, 1963.

The Repetition Compulsion and 'Maturational' Drive Representatives. Theodore Lipin. Pp. 389-406.

Findings suggest that repetition compulsion is clinically detectable. Two categories of drive representatives are delineated: maturational and structural. The former produces progressive unfolding of structured functioning according to a genetic timetable until adult organization materializes; the latter involves processes that maintain the integrity of the structured functioning in any one phase of the timetable. A deficiency of experiences essential to the proper discharge of these representatives results in discharge blockage of the former and distortions of the latter. The structural representatives come to subserve tension discharge in such a way as to inhibit and distort maturational representatives rather than further them. One clinical manifestation of this intrasystemic id conflict is repetition compulsion.

Impulsive Sexuality: Some Clinical and Theoretical Observations. Morey M. Segal. Pp. 407-418.

According to the author, patients who combine depression and impulsive, perverse sexuality suffer excessively from real or imagined object loss, probably because of a disturbed early mother-child relationship. The sexually impulsive behavior is a desperate measure to re-establish the symbiotic relationship. Success in treatment depends on the relative strength of the healthy ego along with the more primitive ego and the pregenital needs associated with it.

Activation of Mourning and Growth by Psychoanalysis. Joan Fleming and Sol Altschul. Pp. 419-431.

The analysis of a twenty-nine-year-old woman, in which absence of mourning after loss of the parents in her adolescence served to deny their death and prevented maturation beyond an adolescent level, is presented. Treatment activated the repressed mourning and helped the patient to achieve new growth and integration. Few memories existed before age ten and little preœdipal or œdipal material entered the four-year analysis.

The Concept of Transference. Thomas Szasz. Pp. 432-443.

Transference occurs in all human relationships but is especially facilitated and used in analysis. Both analyst and patient may be aware of it, or the patient but not the analyst, the analyst but not the patient, or neither. The patient can learn only from transference he experiences and recognizes; therefore only the first condition above, and sometimes the second, can result in improvement. Breuer retreated from psychoanalysis through failure to recognize the transference in Anna O's erotic attachment. Freud's discovery of the transference and his assumption that this was the sole relationship to the analyst served to deny unbearable reality. Actually, the analyst must function as both real and transferred

object for the patient and these distinctions must be kept clear by both of them; otherwise analysis is impossible.

The Plurality of Determinants in Psychoanalysis. Ishak Ramzy. Pp. 444-453.

Analysis of a husband and wife—the latter after the former's death—is used to demonstrate the multiple determinants in their interlocking neuroses and deteriorating marriage. The difficulty of differentiating cause and effect is also demonstrated. The author concludes that the analyst should accept the scientist's framework of plurality of causes, but also that beyond all this lies the increasing autonomy of the human mind which is the major force directing man's destiny.

Some Considerations for the Further Development of Psychoanalysis. Francis McLaughlin. Pp. 454-460.

The replacement of strict determinism with an approach best designated 'scientific humanism' should provide a broader perspective for work in psychoanalysis. This is comparable to the abandonment of determinism for the concept of probability in other sciences. Such a change is implied in the concepts of autonomy as delineated by Hartmann, Kris, and Loewenstein.

Faith, Trust and Gullibility. Kenneth S. Isaacs, James M. Alexander, and Ernest A. Haggard. Pp. 461-469.

Faith begins in infancy with projection of omnipotence onto the mother. Trust develops as a particular quality of object relationship after inner and outer reality can be differentiated. It has to do with both parents. Gullibility occurs only after a sense of guilt is possible and represents an unconscious wish to be victimized. Pathological development of trust in various forms and its significance for therapy are discussed.

On Being Empty of Oneself. Enid Balint. Pp. 470-480.

Feedback or echo between the child and his mother is a necessary mechanism for the development of the ego and the self. The child stimulates his mother by his behavior and she, out of her self, responds so that he gets to know what he is like in terms of her experience. A lack of this feedback can result in a feeling of living in a void and being empty of oneself. The successful six-year analysis of a seventeen-year-old girl 'empty of herself' because of insufficiency of response from the mother is described in detail.

The Second Analysis. Philip S. Wagner. Pp. 481-489.

Most of the twenty-two patients who came for further treatment after analysis with a previous analyst (or analysts) re-created the problems of the preceding analysis and, in general, found the experience of transference unacceptable. In most cases the essential genetic facts were uncovered in the first analysis and there was no justification for considering it a failure. If any technical error existed in the first analysis it was in his insistence that the patient work 'analytically' and accept the reality of the transference. This was usually difficult for the patient to do. Where a change of analysts was necessary for external reasons, the

second analysis usually resumed where the first left off and came to a mutually agreeable conclusion in a relatively short time.

A Note on Migraine. R. E. Money-Kyrle. Pp. 490-492.

Attacks of migraine with scotomata and blinding lights in a woman patient failed to respond to an interpretation that they were the expression of unconscious sadistic fantasies, but disappeared after they were interpreted as a defense against the apprehension of aggressive impulses. With the aid of a dream they were linked to an unconscious fantasy in which the internal mother protects her daughter from seeing the terrifying—ultimately her own envious self—by burning out her optic nerves. This occurred while the patient was facing a calamity. The actual calamity is not revealed.

EUGENE V. NININGER

International Journal of Psychoanalysis. XLV, 1964.

On Symbiosis and Symbiotic Neurosis. George H. Pollock. Pp. 1-30.

Symbiosis is a general term denoting a relationship that can occur at all developmental levels and may involve various types of activities, needs, stimulations, gratifications, frustrations, and inhibitions. Earlier disturbance results in a more global tie of the child to the parent, later disturbance in a more focal one. In analytic therapy the symbiotic relationships are revived in the transference but not gratified. Instead, they are replaced—both through interpretation and the analyst's presence—by the analyst as a new introject neutralizing the effect of the older ones. The conception is supported by case material.

Some Aspects of the First Relationship. Lois B. Murphy. Pp. 31-43.

Clinging and following behavior of the toddler is not instinctual as Bowlby contends, but an expression of the infant's attachment to and reliance upon a need-gratifying, protective mother figure. An adequate review of the mother-child relation should look at the contributions and problems each brings to the other in ego terms as well as in terms of the instinctual development of the baby, the process of identification, and the libidinal supplies of the mother.

Note on Dr. Lois Murphy's Paper. John Bowlby. Pp. 44-46.

In various lower animals as well as human infants, clinging and following behavior occurs prior to attachment to the mother. This suggests that the behavior is species-specific and inborn rather than learned and secondary to mother attachment as Dr. Murphy contends. It is true that learning probably plays a large role in such behavior, but rather in determining the particular ways it manifests itself than in being its sole origin.

Comment on Dr. Bowlby's Note. Lois B. Murphy. Pp. 47-48.

The human infant has inborn crying, grasping, and other reflexes, but these are rapidly overshadowed by the emergent adaptive gestalts fostered by the par-

ticular culture and are first experienced in the relationship with the mother. The author believes she and Dr. Bowlby agree on the multiple needs and drives of the human infant but disagree on the degree of flexibility of the mechanisms for handling these needs.

The Role of Narcissism in the Emergence and Maintenance of a Primary Identity. Heinz Lichtenstein. Pp. 49-56.

Through the libidinal cathexis of the mother to the infant, the latter undergoes a mirroring experience with the mother in which he perceives not a primary love object but the outlines of his own image as reflected by his mother's unconscious needs for him. Through this experience a primary identity emerges that may be called narcissistic but is not yet a sense of identity. This mirroring is later followed by a pattern of acting and reacting in object relationships; here a true sense of identity is present. In the adult, a return to primary identity maintenance by mirroring may indicate a regressive phenomenon, but may also indicate a second birth in the sense that Erikson and, before him, James delineate.

Introjection, Identification and Incorporation. Morris W. Brody and Vincent P. Mahoney. Pp. 57-63.

The three terms refer to different forms of an assimilative process whereby the self relates to external objects. Introjection, the earliest form, occurs before the infant is aware of objects. Identification occurs after object cathexes are established. Incorporation is a regressive process occurring after object loss, in which the self-representation in the ego becomes much like the hated object-representation.

On Verbalization. Charlotte Balkányi. Pp. 64-74.

A person verbalizes his thought a fraction of a second before speaking. By this interposition he delays the discharge of affect and distills it into meaning.

Creative Imagination in Terms of Ego 'Core' and Boundaries. Gilbert J. Rose. Pp. 75-84.

The ego 'core' lies, on the one hand, opposite to the outer ego boundaries demarcating the world of space and time and, on the other hand, opposite to the inner ego boundaries lying against the id and superego. In creative imagination alternation occurs between constriction to the 'core', or preoccupation with self, and expansion to the outer boundaries, or loss of self in something larger. The ultimate result is that the ego boundaries are expanded and the individual is able to find himself in a wider integration of space and time.

The Too-Good Mother. Robert W. Shields. Pp. 85-88.

The too-good mother is wholly accommodating to her child's needs and unable to accept him as a developing, differentiating organism able to bear frustration and hate. As a result separateness is not achieved by the child and various disturbances, such as blurring of body limits and suppression or distortion of hate, occur.

On the Transformation of Early Narcissism During Pregnancy. John R. Blitzer and John M. Murray. Pp. 89-97.

A married patient who became pregnant during analysis had dreams and fantasies revealing the coming birth as a narcissistic threat that engendered a postpartum depression. Analysis enabled her, among other successes, to experience delivery as gain of a baby rather than loss of a penis and other losses of pregenital origin.

On Procrastinating. Philip S. Holzman. Pp. 98-109.

In addition to the usual meaning of procrastination as expressive of a specific conflict and inhibition to action (for instance, in Hamlet's hesitation to kill his uncle), it was found in one patient to be a defense against heightened tension, fear of disorganization, and immediate impulse discharge. It served general adaptation as well as specific psychological conflict.

Psychosexual Development in a Case of Neurotic Virginity and Old Maidenhood. Philip Weissman. Pp. 110-120.

The predominant symptom in the neurosis, an unconscious fear of sexual intercourse, appeared to stem from an intense fixation on the oedipal father, but this concealed a fixation on the mother due to uneven mothering in the pre-oedipal period. The conflict seemed not to be fully resolved at the time the paper was written; it was unclear whether the patient was still in analysis or had recently completed it.

On Taking Notes. Ira Miller. Pp. 121-122.

Patients may wish notes to be taken during the session to obscure or conceal something they are saying. The analyst may have the impulse to take notes in order to avoid awareness of something in the transference.

EUGENE V. NININGER

Psychiatric Quarterly. XXXVIII, 1964.

Psychogenic Visual Defect and the Visual Field. Nathan Roth. Pp. 109-125.

Disturbances in the visual field occur in every neurosis as the result of anxiety and resistance. The commonest phenomena are contraction of the field, darkening of the field, and diminution of acuity. These disturbances frequently go unnoticed while awake but appear more striking in the imagery of dreams. The author illustrates these phenomena with clinical material and discusses the relationship between them and the defects produced by sensory deprivation experiments. It is suggested that psychogenic visual disturbances are the result of anxiety produced by the threat of separation from an object and that the state of sleep represents such a threat for neurotics.

The Psychotic Character: Clinical Psychiatric Considerations. John Frosch. Pp. 91-96.

The psychotic character is a syndrome which may be crystallized from the various 'borderline states'. What distinguishes this syndrome is the relationship

of the ego to inner and outer reality rather than the particular symptomatology, which may be protean, or the likelihood of a frankly psychotic decompensation. In this syndrome the capacity to test reality is relatively intact although feelings of unreality may exist. Unlike the psychotic, the regressions of ego functions are transient and reversible. Object relations are infantile but not as primitive as in psychotics. These basic traits allow for a reasonable level of reality-syntonic adaptation.

'Neurodermatitis' with a Case Study. Paul R. Purchard. Pp. 518-528.

The literature on neurodermatitis, or atopic dermatitis, is reviewed. Early writers emphasized the displacement of sexual impulses. Later emphasis has been on aggressive impulses and the cutaneous expression of guilt feelings. A case is presented in which asthma and neurodermatitis seemed to occur reciprocally. The rash occurred in response to separation from objects and expressed the resulting rage.

The Paranoid-Depressive Existential Continuum. D. A. Schwartz. Pp. 690-708.

All behavior may be rated on a paranoid-depressive scale. On the paranoid end of this continuum are those who attribute the responsibility for their lives and feelings to the outside world; on the depressive end, those who feel entirely responsible for their state of being. The clinically paranoid person constructs this outer influence to compensate for an underlying conviction that he lacks the power or responsibility to affect others. Depression, in this view, represents an escape from the feeling of destructive power within by regression to a powerless state. Therapy should be directed toward the underlying self-concepts rather than the compensatory symptoms.

Beyond the 'Wound and the Bow'. Leonard S. Zegans. Pp. 717-732.

The author attempts to synthesize various contributions to the understanding of the creative process. He discusses the concepts of neutralization of energy, regression in the service of the ego, states of awareness, and synthetic functions as they are related to creativity.

NORMAN GOTTFREICH

American Journal of Psychiatry. CXXI, 1964-1965.

Contact Lens Phobia. Morton Fier. Pp. 502-503.

A case of a thirty-seven-year-old woman with anxiety attacks and sudden inability to wear contact lenses is briefly described. The patient's fear of wearing such lenses was associated with fear of using a diaphragm: similarity of lenticular shape and displacement from below upward seemed to be involved in the phobia.

The Prediction of Schizophrenia in Infancy. III. A Ten-Year Follow-up Report of Neurological and Psychological Development. Barbara Fish; Theodore Shapiro; Florence Halpern; Renee Wile. Pp. 768-775.

Sixteen children were selected at random from the Bellevue Hospital Well Baby Clinic for long-term study, and, to this point, were followed for ten

years. Of the sixteen, three infants were judged 'vulnerable' to schizophrenia on the basis of grossly uneven development at one month of age. One of the three was lost to the study before it was complete. Of the two remaining, at age nine, one was judged autistic, a childhood schizophrenic; the other as having psychopathic features, schizoid emptiness, and detachment. This pilot study suggests the value of and need for wider and more detailed developmental and predictive studies.

Spinoza: A Look at His Psychological Concepts. Joost A. M. Meerloo. Pp. 890-894.

Meerloo describes some of Spinoza's concepts of the mind, pointing to his ideas as forebearers of current thought. Spinoza's ideas of affects, his recognition of the role of ambivalence, reminiscence, emotional association, and transference of affect long anticipated apparently new ideas.

LAURENCE LOEB

Archives of General Psychiatry. XII, 1965.

Freud-Bleuler Correspondence. Franz Alexander and Shelton T. Selesnick. Pp. 1-9.

The reasons for, and consequences of, Bleuler's decision not to join the International Psychoanalytic Association upon its formation in 1910 are examined. Freud was forced to form this organizational body by the joint pressure of vigorous opposition from general psychiatry and the vociferous partisanship of his own followers. The authors feel that this created a 'movement' which demanded acceptance of all particulars for inclusion in the group and which in turn produced a rift with academic psychiatry that had wide-reaching and unfortunate consequences. Excerpts of correspondence are presented to substantiate that Bleuler withdrew only because he opposed this closed-door policy of the association.

Modification of Perceived Body and of Body Concepts. Charles E. Orbach and Norman Tallent. Pp. 126-135.

Thirty-one patients who were five to ten years post-colostomy following abdominal-peroneal surgery for cancer were studied by interviews and Rorschach tests. Common clinical findings were distorted body concepts based on the conviction of having been severely injured. Men tended to view the anterior opening that bled as evidence of feminization. Women tended to view it as a second vagina. Coping with the idea of a shift from unseen bowel elimination to visual elimination was universally difficult. Somewhat startling was the typical Rorschach finding of a prepsychotic ego organization with confusion about body image, feelings of mutilation, and body violation. Effective repressive defenses were lacking.

KENNETH RUBIN

American Imago. XXII, Nos. 1-2, 1965.

The Vulture as Mother Symbol: A Note on Freud's *Leonardo*. Noel Bradley. Pp. 47-56.

In a recently discovered culture dating from the seventh millenium B.C. in Anatolia, as well as in ancient Egypt and Minoan cult art, the vulture was a mother symbol. An important basis for the vulture-mother symbol is the projection of oral sadism onto the breasts. While purely an oral-sadistic mother symbol in neolithic Anatolia, it took on the added meanings of birth, primal scene, and phallic mother in the later Egyptian symbol of the phallic, vulture-headed, mother goddess. This condensation was probably determined by activation of oral sadism during primal scene experiences, the resemblance of the unfeathered head and neck of the vulture to the phallus emerging from the pubic hair, and a connection between scopophilia and the vulture's extraordinarily keen sight.

Salinger's 'Franny': Homoerotic Imagery. Daniel Seitzman. Pp. 57-76.

Analysis of Franny's behavior and psychotic breakdown during her college week-end date reveals that her conflicts centered on penis envy. This envy had been fanned by the need to compete with her six older, brilliant siblings, complicated by a misguided attempt on the part of Seymour and Buddy to lead her to a state of ultimate wisdom (*satori*) by withholding from her knowledge of the arts, sciences, classics, and languages. Fans of the Glass family should enjoy this penetrating paper.

Neurotic Downward Identification. George Devereux. Pp. 77-95.

Downward identification refers to an alliance or the adoption of a way of life socially inferior to the level of that of one's parents. Devereux gives numerous instances of the phenomenon from personal acquaintance, anthropology, history, and myths. No central theme is persuasively developed.

Psychoanalysis and Music. Richard Sterba. Pp. 96-111.

In a review of articles on music, starting from 1917, Sterba shows how they reflect the sequence of ideas which have dominated psychoanalytic thinking. He finds consensus that music 'reaches back to a period of development previous to the establishment of ego boundaries and the separation of inside and outside world' and yet is organized by the 'highest synthetic functions of the ego'.

From Eden to Utopia. Rudolf Eckstein and Elaine Caruth. Pp. 128-141.

Examination of Shangri-La and other utopias reveals that they are expressions of past longings in the form of wish-fulfilling fantasy. Such fantasy may also give motive power toward striving for something new. The content of the fantasy may suggest ways of achieving the desired changes and thus be in the service of adaptation.

Megalomania. R. E. Money-Kyrle. Pp. 142-154.

Status seeking and painful feelings of inferiority are pervasive in human nature. The ultimate origin of these phenomena is traced to the infant's dawning awareness of his separateness from the good, milk-giving mother and his unhappy discovery that he produces only worthless feces. The manifestations of status in social intercourse, clothing, rank, committees, and institutions are explored. Extending the use of the term, the author contends megalomaniac delusions are almost universal, even in nonpsychotic portions of the population.

JOSEPH WILLIAM SLAP

British Journal of Medical Psychology. XXXVII, 1964.

The Significance of the Actual Historical Event in Psychiatry and Psychoanalysis. Samuel Novey. Pp. 279-299.

The author reviews briefly the significance of historical data whether viewed as an actual event or an endopsychic experience of the event; the nature of the influence of repression and characterological change on memory; and the question of whether the validation of reconstructions of specific events is or is not of major importance in psychoanalysis.

Specifically, Novey considers when and under what circumstances such experiences and memories can be said to coincide with external reality. He then raises questions relative to the therapeutic process about the actuality of events in the patient's history. He concludes that, while such events can never be totally re-examined, a careful study of the available evidence gives useful hints as to the characterological nature, modes of defense and sources of emotional difficulty from which the patient suffers, and is important in determining the therapeutic approach. In attempting such reconstruction, the physician is guided partially by his intuition as well as by his particular point of view and interests as a therapist. Though there are limitations to the actual validation of historical events in the patient's life, where appropriate, every effort should be made to attempt such validation.

Case History of a Borderline Personality. Lucy P. Liebermann. Pp. 301-312.

In this case history of a borderline psychotic stammerer, the material permits some theoretical conclusions justifying Melanie Klein's theory concerning the schizoid developmental position. The case is an excellent research project into the psychodynamics of stammering. The author postulates that it is a deep regressive disorder originating from a fixation in the schizoid developmental position and manifests itself chiefly in the disconnectedness of emotional reaction and presents a certain element of periodicity and projection.

Bernard Shaw and His Women. Lisbeth J. Sachs and Bernard H. Stern. Pp. 343-350.

The authors review certain highlights in the life of Bernard Shaw. They relate childhood events, particularly those surrounding his mother, with his

later relation to the many women in his life. Shaw had an extremely unhappy childhood, full of sordidness and disillusionment, which he associated with the cold, harsh, and ungiving attitude of his mother. The hostility to women, observable in his plays and adult life, is, in literary form, basically hostility to his mother. In real life, it is the anger of the anally fixated child.

Since his real affairs with women were without sexual contact, it is probable that Shaw was impotent, a latent homosexual, and that his teasing and hurting women was the expression of a preöedipal, oral-sadistic, and anal fixation. These observations are correlated with the creative work of men that show intensely cathected, unconscious feminine reproductive fantasies. The productive activity of the ego is dependent upon the process of neutralization of instinctual energies.

HERMAN HIRSH

British Journal of Medical Psychology. XXXVIII, 1965.

Some Metapsychological Aspects of Interpretation. Clifford Yorke. Pp. 27-42.

Yorke assembles present-day theoretical understanding of interpretation and attempts to integrate it with the insights of modern ego psychology. A vast literature is surveyed. One of the main points is the differentiation between the use of interpretation in psychoanalysis versus its use in other forms of dynamic psychotherapy. Regression in the service of the ego plus the modification of the superego represent the structural details of differentiation. The economic and dynamic aspects of the transference neurosis are also surveyed. A differentiation is defined between acting in the transference and acting out. A scholarly discussion of the metapsychology of interpretation follows. The concept of the representational world and self-representation is discussed and practical applications of the author's integration of this theoretical material are offered in the last section of the paper. The danger of acquiring deep interpretive material without the proper analytic framework is described, e.g., the possibility of acting out due to frustration. There is a discussion of confrontation and clarification as therapeutic devices which allow insights without controlled analytic regression. The analyst may use these techniques to meet a variety of situations.

The Gift of Anna O. Frederick M. Bram. Pp. 53-58.

Careful scrutiny of this legendary case causes the writer to postulate that this woman's psychosis (now seen as a schizophrenic rather than a hysteric) was released by the loss of the symbiotic relationship with her father. The power of this attachment is equated with the disillusionment that the child feels in a mother. To transcend the lack of feminine identity, fusion with a man, a father substitute, was necessary. In order to live through a man, she had first to captivate him, so Anna gave the only gift she was able to give—her marvelously creative mind. She did this by giving Breuer the opportunity to fathom the fascinating concepts of the unconscious. An explanation is offered for Anna's pseudocyesis and Breuer's sudden discontinuation of treatment. Breuer's reluctance to publish his findings is also discussed.

The Mathematical Thought Process with Reference to a Single Case. J. C. B. Sym. Pp. 135-146.

Analytic treatment of a young mathematics student who developed difficulties in his studies is reported. An important part of the psychopathology is related to the scopophilic drive, the erotization and aggressivization of vision. Because of dissipation of energies, the mathematical work could not be continued and degenerated. The dynamics of the patient are elaborated according to Kleinian thinking with a review of the literature about mathematics and mathematicians. The relation between mathematics and the anal-sadistic level of organization is elaborated. Mathematical work is the aggressive treatment of abstracted fantasy and is amply displayed in the analyses of several patients' fantasies. The author concludes that mathematical thought is involved in the refinement of aggression; requires the tolerance of doubt with the aim of securing certain knowledge which will limit aggression; aims at the elimination of a bad object; contains the hope of finding a good object.

The Nature of the Observing Function of the Ego. Arthur A. Miller; Kenneth S. Isaacs; Ernest A. Haggard. Pp. 161-169.

Despite frequent references in the literature to the observing function of the ego, a comprehensive and definitive statement regarding its characteristics and development has not been made. The authors describe this function as an intrasystemic aspect of the nonconflictual sphere. Self-observation is an important criterion of the capacity to participate in psychoanalytic treatment. Some of the forms of self-observation are: consciousness of self; cognizance of self; self-observation in a critical evaluating form; and integrative observation in which evaluative attitudes are held in abeyance. Of particular importance in integrative observation are: differentiation of observing and experiencing ego functions; the relationship between perception, cognition, and affect; affect modulation; observation of ego processes as contrasted with observation of the self; and ego mechanism and self-observation. The modes of informing in psychoanalytic treatment include reporting, admitting, and imparting.

Integration 'beyond insight' is discussed as important for re-integration and change as well as the importance of distinguishing between synthesis and integration. Possible techniques for effecting change in the function of integrative observation are stimulation and exhortation, interpretation, instruction, and identification.

HERMAN HIRSH

Revue Francaise de Psychanalyse. XXVIII, 1964.

On the Phallic Image. B. Grunberger. Pp. 217-234.

Proceeding from a statement of Freud's to the effect that for the unconscious there is only one sexual organ, the phallus, the author advances the concept of a primordial 'phallic image'. Its ambiguity in the unconscious signifies a positive and negative (intact and damaged) aspect; it exerts a regressive pull toward the re-establishment of the infant's original narcissistic state repeatedly

breached at every stage of drive development. Thus, instinctual development and the tendency toward narcissism under the sway of the phallic image are antithetical forces operating in a 'dialectic movement' in the unfolding and maturation of the individual.

A Case of Precocious Integration of the Father during Pregenital Development. R. Mises. Pp. 371-392.

In the analysis of a male adult, certain transference phenomena could be traced to an early defecation ritual containing the significant triangular relationships with the two parents usually associated with the phallic stage of development. The conflict could not be considered a characteristic defensive regression from phallic phase dangers, but was, rather, an elaboration of the anal phase proper in which the father figured as rival and avenger. The instinctual and maturational disequilibrium which occurred in the patient's early development was attributable to the father's active participation in the child's toilet training, and was experienced by the child as an attempt by the father to separate him from his mother, thus interfering with the attainment of the phallic level.

Unconscious Fantasy and Psychosomatic Mechanisms. M. Fain and P. Marty. Pp. 600-622.

The authors disagree with the view that tends to apply indiscriminately, to any level of development, the classical model derived from the hysterical conversions. To do so implicitly equates, for example, the energy which impels an unconscious content toward consciousness with the neural flow which activates an organ or organ system. They trace the changes in libido by which a psycho-neurotic disorder is transformed into a somatic one. In the former, object libido becomes narcissistic libido (secondary narcissism) while in the latter, a further desexualization occurs and the affected ego functions are no longer invested with narcissistic libido but with 'autonomic' excitations. The shift from one type of mental functioning to another precludes applying the same principles of regression to both.

JOHN DONADEO

Meetings of the New York Psychoanalytic Society

Jules Glenn & Stephen K. Firestein

To cite this article: Jules Glenn & Stephen K. Firestein (1966) Meetings of the New York Psychoanalytic Society, The Psychoanalytic Quarterly, 35:2, 320-326, DOI: [10.1080/21674086.1966.11927599](https://doi.org/10.1080/21674086.1966.11927599)

To link to this article: <https://doi.org/10.1080/21674086.1966.11927599>



Published online: 29 Nov 2017.



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NOTES

MEETINGS OF THE NEW YORK PSYCHOANALYTIC SOCIETY

May 25, 1965. PANEL ON MELANIE KLEIN. Jacob A. Arlow, M. D., Moderator; Charles Brenner, M. D.; Alexander Bromley, M. D.; Manuel Furer, M. D.; Elisabeth R. Geleerd, M. D.

Dr. Arlow explained that the panel was an outgrowth of preparations for a discussion between Kleinian and other analysts at the 1965 International Psychoanalytic Congress. Dr. Brenner described past interaction between the two groups where both a mutual willingness for communication and a defensiveness on the part of the Kleinians were found.

Dr. Bromley summarized the historical development of the Kleinian movement. After being analyzed by Ferenczi and Abraham, Mrs. Klein moved to England in 1925, where her ideas received enthusiastic support from Jones and others. 1925 was a time of transition. The *Ego and the Id*, published in 1923, was not translated into English until 1927. Many analysts lacked the theoretical discernment to evaluate the implications of Mrs. Klein's theories on the earliest stages of development. Gradually the Kleinians became more numerous than the Freudians in London, just as at present they prevail in South America and have great influence in France. While a complete split into two societies and two institutes was never accomplished, a compromise was reached in 1946 and both groups exist under the same roof. Dr. Bromley emphasized Freud's disagreement with Klein despite the Kleinians' belief to the contrary.

Drs. Bromley, Geleerd, and Furer summarized Melanie Klein's ideas.

Object relations, formed fantasies, ego, and superego exist from birth. The death instinct is stronger than the life instinct at birth and therefore expresses itself with great intensity, causing the infant to fear annihilation. In the first three months of life—the time of the schizo-paranoid position (earlier called the paranoid position)—the child uses projection as the main mechanism for warding off dangerous aggressive impulses. Hostile desires to attack and bite the mother's breast and insides are projected onto part objects, as the breast, which are then felt to be dangerous—the bad part objects. Identification with or introjection of the object onto which the hostile projection occurred results in an internal persecutor, the superego. In the next phase, whole objects are recognized and, due to the aggression of the child, a fear of destroying the good object ensues with a resultant fear of losing the good object, the good mother. The consequent depressive position must be guarded against by manic defenses and reparation. If the infant cannot work through the paranoid position because of excessive persecutory fears, the working through of the depressive position will be adversely affected and regressively may lead to severe psychosis. On the other hand, severe difficulties arising during the depressive position may lead to manic depressive disorder in later life. Less severe difficulties in this phase may determine the choice of neurosis. In other words, neuroses are varieties of defense against fundamental, depressive anxiety. Idealization and splitting are defenses that give rise to picturing the breast or mother as good or bad. The

positions described are not stages of development since they continue to exist throughout life. The oedipus complex and superego are present in the first months of life. The superego is described as a fantasy of internal persecution.

Dr. Geleerd described the technical therapeutic procedures of the Kleinians in child analysis. Generally Kleinians show little interest in history or diagnosis. In treatment, the patient is believed to suffer from deep anxiety caused by fantasies of internal and projected persecutors and immediate deep interpretations are felt necessary to relieve this. Throughout a Kleinian analysis, symbolic and transference interpretations are prominent. Since internal conflict, based on the early mechanisms described above, is the center of the child's trouble, there is no need to see the parents regularly for information and history. However, Dr. Geleerd noted that Mrs. Klein was not as extreme as some of her followers. In *A Narrative of a Child Analysis*, she did give some historical data and recognized the role of present reality. Dr. Geleerd then described freudian child analytic procedures: parents are seen regularly for information; the role of the environment as well as the inner struggle is appreciated; there is a gradual analysis of the defenses which helps a child not to be overwhelmed by his impulses (in contrast to the Kleinians who feel the child must be given all possible freedom of action to reveal his fantasy life). With certain reservations Dr. Geleerd recognized the following contributions of Melanie Klein: her early emphasis on the first year of life (erroneous though the details were); her recognition of transference in child analysis although this is entirely different from what freudians understand as transference; her use of play to take the place of free association. Many of the phenomena she described are derived from work with psychotics and are valuable in work with psychotic patients.

Dr. Furer compared Kleinian and freudian concepts. He recognized the development of some Kleinian ideas from Freud's concept of the purified pleasure ego. In Klein's theory of the development of object relations the chief motive is the avoidance of externalization of the dangerous death instinct. On the other hand, most analysts, including Freud, state that the infant's anaclitic, physiological needs result in perception of and response to the mother as an actual object; need tension is diminished by gratification from the outside. Gradually the object image is invested with differentiated drive energy. According to Klein the role of the real mother is to modify the primarily important internal fantasy life that distorts the infant's perception. Most other theoreticians emphasize the role of the real mother as the external ego or beacon of orientation and buffer, the other half of the symbiotic unit in the building of object relations. In both Kleinian and non-Kleinian theory, the infant's eventual goal is the development within of a good maternal image. But for Klein this results from the recovery of a universal infantile psychosis. Dr. Furer noted that Hartmann and Anna Freud conceive of progression from the stage of a need-satisfying object to a phase of object constancy which involves neutralization of drives. Mrs. Klein conceives of a similar process in which there is progression from relations with part objects to relations with whole objects which can be ambivalently cathected. Eventually there is a predominantly good object image invested with libido. It is difficult to conceive of Klein's infant with his differentiated ego at birth using complicated mechanisms without assuming that

from earliest infancy there is differentiation of self from object and inside from outside. Hence, there is no place in Klein's formulations for an undifferentiated phase in regard to ego or drives. Dr. Furer pointed out increasing overlapping of themes described by Kleinians and non-Kleinians: 1, the role of aggression in relation to anxiety, especially separation anxiety and the precursors of the superego; 2, the spreading of instinct tension along developmental lines, described by Klein, is similar to the premature activation of the phallic phase, observed by Dr. Greenacre; 3, devaluation (Jacobson), idealization (Jacobson, A. Reich), splitting of object image and projection onto external actual objects of good and bad images, the personification of impulses and their projection. But there remains total discrepancy between Kleinians and freudians as to the timetable of psychological events.

DISCUSSION: Dr. I. Peter Glauber recalled that in his work on stuttering he independently came upon certain mechanisms described by Klein: part object identifications, nuclear passivity, and the importance of aggression. Nuclear passivity was later referred to by Dr. Lewin as the oral triad. It was suggested that since we have not yet developed the optimum therapy, we could learn from Klein's techniques.

In response to a question, projective identification was defined as the projection of one's impulses onto an object with consequent identification with the projected aspects of the object. The relation of this concept to narcissistic identification was considered. Replying to another question, Dr. Geleerd stated that Klein's theories were observationally inaccurate. Her belief in the existence of the oedipus complex in the first months of life is erroneous.

Attempts to bridge the gap between Kleinian and non-Kleinian psychoanalytic concepts, to translate one into the other, were unsuccessful. It was asked whether Klein's concepts would be acceptable if the time distortions of her work were corrected; perhaps her ideas, such as the superego being the result of a series of introjections or the concept of the superego as internal persecutor, are acceptable to freudians. Dr. Geleerd noted that when Kleinians are confronted with such transpositions, they object that they are incorrect. Dr. Martin H. Stein and others noted that the relative neglect of structure and ego in the English school's concepts and their relegating libido to a secondary defensive role made it impossible to achieve a successful transposition. Dr. Rudolph M. Loewenstein objected to the Kleinian reification of concepts, to their considering, for instance, an introject not just a fantasied but a real inside object. Discussing Klein's theory of anxiety, Dr. Brenner criticized Mrs. Klein's assertion that anxiety is simply a result of the death instinct. Dr. Edward Harkavy questioned the strong emotion about scientific differences; he wondered whether the intense schism was not the result of the narcissism of small differences.

In summary, Drs. Brenner, Bromley, and Geleerd indicated a need to differentiate sharply between Kleinians and psychoanalysts on scientific grounds. Dr. Furer regretted that Klein had become a movement rather than an observer of clinical material. Dr. Arlow noted that freudians too make errors in theoretical formulations similar to those of the Kleinians.

JULES GLENN

June 8, 1965. REACTIONS TO SEPARATION. (Dr. Rudolph M. Loewenstein's Section of the Kris Study Group.)

Dr. Bernard D. Fine introduced the over-all plan of the two-year study which began with a review of the literature and a tentative definition of separation experience as 'the physical or emotional separation or withdrawal, imagined, anticipated, or actual, of one or more parental figures or surrogates'. Clinical material studied by the group focused on the genesis of the specific vulnerability in later childhood and adult life to special separation reactions. Pathological separation reactions came to be viewed as symptom complexes with diverse causes and no simple correlation could be discerned between adult reactions and childhood separation traumas. Dr. Fine described the nature and vicissitudes of the ego function of object constancy, considered as specially significant in relation to separation reactions. Noted was Mahler's statement that aggression toward the ambivalently loved object is an important, but not the only, interference with the development of this function.

Dr. John McDevitt reported an excerpt from the analysis of a three-year-old girl who developed marked separation anxiety and a fear of being bitten. Analysis of the phobia revealed it as a regressively expressed wish for, and fear of, sexual attack by the patient's previously seductive father. The second aspect of the oedipal component of the neurosis, the patient's hostility toward her mother, was an accretion to resentments acquired during an already troubled preoedipal period, during which the mother had been in conflict between motherhood and a career. The separation anxieties central to the child's neurosis were aggravated by the parents who frightened her about dangers during their absences. They often left the child stealthily and without warning, thus providing no assistance in achieving active mastery of the anxiety connected with ordinary separations. Development of the ego function of object constancy was crucially interfered with and she entered the oedipal phase handicapped.

Dr. Jerome Ennis presented the case of a gifted professional man who sought treatment for feelings of anxiety and loneliness, work inhibitions, and problems in relating to women. Rivalries at his job were behind much of his anxiety, and this in turn related to his early life history, knitting together oedipal themes and significant separation experiences. The father's employment kept him away from home and during his absences the patient slept in his mother's bed. When the father returned, the mother deserted the patient for the father's bed and other children were conceived and born. During these periods he often felt lonely, angry, and humiliated, feelings recurrently experienced as an adult. With women, who represented his faithless mother, his relationships were sadomasochistic and associated with variable impotence. He would prowls the streets of red light districts and masturbate with sadistic sexual fantasies. The patient retaliated against his family for having abandoned him by not returning to the land of his birth. This in turn led to guilt and self-destructive behavior, especially in the area of his work. Oedipal disappointments and fears, which were the major analytic focus, were regressively experienced as feelings and fears of separation and abandonment. Conversely, separation might be experienced as oedipal defeat and castration.

Dr. Herman Roiphe reported the case of a young woman who gave no advance indication of the role of separation in her life. However she developed an intense maternal transference like that of a two-year-old child. Coinciding with the prospective first vacation of the analyst and of her employers, the patient had an episode of bowel incontinence. This represented aggression against the abandoning object and an identification with the worthless stool. Problems about separation now became central in the patient's pathology. Succeeding analytic recesses were preceded by concern about money and cleanliness. Feelings of rage mobilized by separation experiences were brought out in connection with an intensely ambivalent relationship with her mother. Material emerged of repeated primal scene exposures, to which the patient responded with sexual and aggressive feelings which threatened her ego functioning.

Dr. Joan Erle summarized five additional cases, her own and those of Drs. Roiphe, McDevitt, John Donadeo, and Felicia Landau. These patients described intensely painful experiences of separation, as if loved persons no longer existed and their own existence was threatened. There was considerable variation in the amount of actual physical separation from parents or other important early objects in these patients. Early object relationships were frustrating and ambivalent, ranging from absence and deprivation to seduction and over-indulgence. It was, however, only later, in early adult life, that the patients were seriously incapacitated. The most intense anxiety, rage, and depression were provoked by separation from an important person. These affects resulted from the undermining of the fantasy of magical omnipotence which is so important in these patients. Reality testing may suffer during the ensuing helplessness and there may be considerable guilt related to fears of loss of control of impulses dangerous to the self or object.

Several types of anxiety reactions to separation were noted by the group: separation anxiety occurring in early childhood as a normal developmental phenomenon, anxiety reactions to later actual separations, however brief, experiencing of later disappointments, conflicts and frustrations in terms of separation reactions. Traumatic prior separations from important objects did not regularly occur. The meaning of separation varied. It could signify inability to manage and control the object, loss of a narcissistic extension, abandonment, castration, retaliation, and punishment. Marked separation reactions occurred in patients with different personality structures and degrees of pathology. Reconstruction in these patients did not permit a complete differentiation between fixation and regression in the genesis of vulnerability to separation. In the child and borderline cases there were certain defects in thinking, instinctual fusion and neutralization, object relations, and identity. These patients had difficulty controlling and tolerating their aggressive impulses and fear of destroying the object. Many of the developmental observations and hypotheses relating to separation-individuation and the establishment of object constancy in childhood were useful and suggestive. These pathological reactions to separation seemed an important and distinct feature in the patients studied, even though there was no clear correlation found between disturbances in the separation-individuation phase and later reactions to separation.

DISCUSSION: Dr. Rudolph M. Loewenstein emphasized that the clinical material represented only a sample of patients who react with symptoms to separation from their analysts. The only safe generalization from this small sample is that there is no discoverable, simple correlation between reactions to separation and traumatic separations in early childhood. In five of the cases, preöedipal fixations were characteristic and important. Even where öedipal conflicts are apparent, the form of anxiety experienced is loss of the object, indicating the related problem of ego regression.

Dr. Max Schur was gratified to note that the rubric 'separation anxiety', had been discarded and separation studied as a problem in development, as a danger to which infant and adult respond in various ways. He cited Freud who emphasized that the first danger is an economic one, absence of gratification. Danger arises secondarily from the absence of the object that provides the gratification. Separation of self from object begins with the development of mental structure; then separation anxiety becomes a normal developmental factor, associated with the beginning development of object constancy.

Dr. Edith Jacobson concurred with Dr. Schur and described two cases of three-year-old children, sufferers from severe separation anxiety. In one case the dynamic impact of primal scene experiences was important. In the other, anxiety was but one element in a depressive syndrome. Dr. Nathan Root noted that an individual's separation reactions vary. Citing clinical data, he suggested that attention to such variations might facilitate the search for genetic data. Dr. Manuel Furer referred to the timing of the separation of self from object. This development is gradual and may be achieved in partial stages. Dr. Burness Moore inquired whether unusual amounts of acting out occurred in connection with reactions to separation. Dr. Elisabeth Geleerd noted that the separation-individuation phase of development overlaps the anal phase. If toilet training is pursued with great vigor at the same time the child is dealing with his fear of losing the mother, an overevaluation of body parts and excreta may develop, with considerable castration anxiety.

In response, Dr. Fine indicated that one of the cases studied had depression as the reaction to separation. Dr. McDevitt confirmed the primal scene meanings in some of the separation reactions studied. Dr. Erle added that acting out had figured prominently in some of the material. In conclusion the Group expressed through Dr. Loewenstein their special gratitude to Dr. Margaret Mahler for her collaboration with their work.

STEPHEN K. FIRESTEIN

THE AMERICAN PSYCHOANALYTIC ASSOCIATION will hold its 1966 Annual Meeting at the Chalfonte-Haddon Hall, Atlantic City, New Jersey, May 6th through May 9th.

The MAXWELL CITELSON MEMORIAL FUND has money available to make interest-free loans to candidates to assist them in meeting the financial obligations of

their training. Inquiries may be addressed to the office of the Fund, 664 North Michigan Avenue, Chicago, Illinois 60611.

The EDMUND AND MARIANNE BERGLER PSYCHIATRIC FOUNDATION has been established for the purpose of arranging publication of papers by Dr. Bergler and to initiate major programs that stem from his ideas. Inquiries should be directed to the Foundation at 241 Central Park West, New York, N. Y. 10024.

The THIRD INTERNATIONAL CONGRESS OF PSYCHOSOMATIC MEDICINE will be held in Paris, September 15-18, 1966. For further information write to the Société Française de Médecine Psychosomatique, Hôpital Cochin, 27 rue du Faubourg Saint-Jacques, Paris XIV.

The DEVEREUX FOUNDATION announces Internships and Fellowships in Clinical Child Psychology, offered at The Devereux Schools. For information write to Dr. Henry Platt, Director of Training, The Devereux Foundation Institute for Research and Training, Devon, Pennsylvania 19333.