

## Psychoanalytic Therapy of a Male Homosexual

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## PSYCHOANALYTIC THERAPY OF A MALE HOMOSEXUAL

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In 1905, Freud wrote that the only possibility of helping homosexual patients was by demanding a suppression of their symptoms through hypnotic suggestion (10). By 1920, he believed that psychoanalysis itself was applicable to the treatment of perversions, including homosexuality, but later expressed caution about the possibility of complete cure. His criterion of cure was not only a detachment of cathexis from the homosexual object but the ability to cathect the opposite sex (11, 27). In 1950, Anna Freud lectured in New York on the recent advances in treatment of homosexuals, stating that many of her patients lost their inversion as a result of analysis. This occurred even in those who had initially proclaimed their wish to remain homosexual when entering treatment, having come only to obtain relief from their neurotic symptoms (9).

It became the consensus over the years that homosexuals could be treated for the most part like phobics. However, this presented considerable difficulty including the probability of premature termination of treatment and the production of excessive anxiety. The major challenge in treating homosexuality from the point of view of the patient's resistance has, of course, been the misconception that the disorder is innate or inborn.

The structure of homosexuality consists of conflicts around the œdipal phase and the greater part of the actual analytic work with any homosexual revolves around the uncovering and resolution of these conflicts. In my experience, œdipal phase conflict has been found to be superimposed upon a basic preœdipal nuclear conflict, a maturational failure with quantitative variations, characterized by the inability to make the

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passage through the separation-individuation phase of ego development (17). It is this failure, total or partial, that is responsible for: 1, the pronounced feminine identification with the mother and subsequent search for masculine identity; 2, the fear of breaking the symbiotic bond with the mother (separation anxiety); 3, the tendency in some individuals to experience a cataclysmic merging and fusing phenomenon with the mother upon approaching other women, or, in any way attempting to leave the mother, the threat of engulfment and loss of self in the undifferentiated phase may ensue (24). This extremely dramatic phenomenon may not be directly manifest in most patients but derivatives may be seen in dreams and fantasies of being enveloped, trapped in caves, sensations of bodily change, etc. There may well be homosexuals in whom these very early disturbances play either no role or only a subsidiary one. Such cases have been widely reported in the literature and it is usually accepted that they do not have as their determining nuclear psychopathology a psychic organization which is fixated in the earliest years of life.<sup>1</sup>

It is widely agreed that to achieve therapeutic success it is necessary to interpret to the patient his fear of castration; his fear of oral dependence; his disgust with the opposite sex; and his fear of his own destructiveness and sadism. However, the interpretation that most effectively achieves a relaxation of his resistance is the attempt to acquire masculinity through identification with the partner and his penis in the homosexual act (9). After this interpretation is worked through the patient may be able to function heterosexually, going through a strong narcissistic-phallic phase, women serving only the grandeur of his penis. Detailed reports of successful resolution of cases of overt homosexuality of the obligatory type are scarce, only five being known to this author: Flournoy (8), Lagache (15), Poe (19), Vinchon and Nacht (26), and Wulff (28). In addition, important insights into a successful resolution have been

<sup>1</sup> It is understood that the fixation described in the clinical material presented here can apply to many clinical disturbances other than homosexuality.

proposed by Bergler (2, 3), Bychowski (5, 6), Anna Freud (9), Freud (11, 12), Glover (13, 14) Lorand (16), Nunberg (18), Rosenfeld (20), Sachs (21), and others (22, 23, 25). Data on positive therapeutic outcome in this traditionally refractory condition have been collected in surveys by the American Psychoanalytic Association (1) and by the Bieber study conducted by the Society of Medical Psychoanalysts (4), both presented primarily in statistical format.<sup>2</sup>

Compounding the complexities of reporting any psychoanalysis with all its nuances, dimensions, and ineffability are the difficulties of condensing years of intense communication, synthesizing the material, and guarding against distortions which can so readily appear when the limitations of a single scientific presentation require highly selective content. In the case to be presented the anamnestic material has undergone very little distortion. The family dynamics persisted in all their floridity throughout the analysis and the mother's hostility was fully confirmed by her unrelenting attempts to communicate with the analyst, threats of interference, and efforts at coercion.

It is the intention of this paper to capture the essence, the central issues, of one man's treatment for homosexuality, the verbatim account of some of his deepest conflicts, his faltering efforts to overcome them, and their evolving resolution. Predictably, varied and profound clinical and theoretical questions emerged in the preparation of the report but will not be pursued in detail. This case illustrates what the writer feels are the central issues which must be uncovered and understood by both patient and analyst.

1. The importance of persistent stimulation of the child's aggression by the mother throughout early and late childhood. This results in an unalleviated guilt binding the child to her; any attempt at separation induces severe anxiety.
2. The substitution of the male partner for the mother as a

<sup>2</sup> This author is substantially in agreement with the views of the numerous sources cited and has found these contributions of inestimable value for further investigation.

love object to avoid both œdipal (incest) and preœdipal conflicts.

3. The conditions under which the imperative need for homosexual relief occurs.

4. The violence inherent in all 'love' relationships between homosexuals.

5. The ubiquitous presence of a distorted body ego.

6. The homosexual's characteristic demeaning and degrading of the father, often quite openly. He identifies with the aggressor (mother). This, however, produces guilt and in therapy is an impediment to his feeling entitled to be a man.

7. In his sexual acts the homosexual seeks masculinity, not femininity, through the mechanism of identification with either his partner's penis or body.

My patient was exclusively homosexual until entry into psychoanalytic therapy at the age of twenty-seven. His homosexual activity consisted of picking up partners in public toilets and sometimes having intercourse with fellow students at the graduate school he attended, where he was regarded as a gifted pupil and promising scientific practitioner. In the initial interview he stated that he had been living an active homosexual life since the age of eighteen although homosexual contacts had started around fourteen. He was attractive, vivacious, articulate, and generally personable. He complained that his only friends were homosexuals and that these involvements did not lead anywhere. Further, he had become increasingly fearful of exposure which could well interfere with his future career and end in disaster. He was extremely unhappy and suffered intensely because of inability to desist from homosexual practices.

His early history was replete with descriptions of brutal domination, physical and verbal assault by the mother who would at times claw him and sit on him to exact strict obedience to her barrage of demands and endless manipulative control. The father, terrorized by his violent wife, assumed a submissive and passive role, hoping to avoid having her scathing outbursts directed against himself. The only sibling was an older

brother who escaped the mother's clutches by leaving home for long periods and eventually moving to another community.

Until he was thirteen, the patient's mother would often sleep with him. He would enfold his arms around her from the back and feel very comforted by her. She frequently disrobed in front of him. At times she would make fun of his penis, stating that he would never be able to function as a man with a woman. She managed to isolate him socially by criticizing all his friends, especially girls, saying they were unworthy of him. The one thing that was allowed him, actually commanded, was academic excellence. During analysis the emergence of sexual material concerning her induced marked fear.

As an infant the patient had difficulty eating and recalls that at three and four years of age he was often force-fed when he did not 'clean up' his plate. Should he vomit, his mother insisted that he 'eat the vomit'. Consequently, he vomited frequently when even slightly upset during adolescence and early adulthood.

His homosexual relationships began in early adolescence, around fourteen or fifteen. They initially consisted of mutual masturbation with boys of his own age, occasionally mutual fellatio, and, rarely, anal penetration of the partner. It was not until an advanced stage of treatment that the patient remembered his first homosexual feelings which had occurred about age seven or eight. 'The children used to take a nap in the afternoon in a nursery where my mother left me and there was something about a bigger boy. I wished to have him as a substitute for my father and for a friend and he'd do something in bed with me. He was twelve and he'd lay on top of me and I liked that. Before that time I was a sexless kind of kid. I don't remember any sexual feelings. All the other boys in the nursery seemed weak except for that one.'

The patient's aggression was continually stimulated throughout early and late childhood. He was teased, provoked, and ridiculed by his mother. She would scratch him with her fingernails; he would hit her hands violently and strike her on the



arms and enjoy seeing her cry. At times she so enraged and goaded him that he would attempt to choke her. On many such occasions she would mockingly offer her throat and invite him to choke her to death. 'I became frightened that I would kill her and then suddenly I would be overwhelmed with an awful sense of guilt and then I would stop.' Through her provocation he became the guilty captive of his mother. During analysis he realized that the homosexual partner substituted for the mother. 'I want to choke my partner with my legs around him or my hands around his neck just the way I wanted to choke my mother. However, I guess I substitute a man for a woman. I want to choke her by shoving my penis so far down a man's throat that he is choking and gasping for breath. I get pleasure out of that.'

He was afraid to speak of childhood erotic incidents and of the fantasies to which they later gave rise, but began to understand that when he had 'sex with a man I am having sex with my mother. . . . It's fantastic but it's what I want to feel. It's my sexual interest. It has to do with the fact that I want her, to be a part of her, and that she wants me. She's always wanted me to see her that way, as a sexual interest. I guess I've always wanted her body. That sounds stupid when I say it. When I used to sleep next to her that's what I wanted. I recall now that I used to have fantasies at the age of twelve or thirteen, about putting my penis into my mother's vagina with my arms around her. It wasn't like a lover but like mother and son and I'm getting pleasure out of it. It's a terrible sick picture that I get of myself. And she's gloating over me, she's enjoying it, too, and she has control and power over me.' This clearly demonstrates that the patient's homosexuality served a defensive function against his incestuous desires as well as his matricidal impulses. His progressively diminishing homosexual desires continued to be revived when he felt 'abandoned by mother' and frightened about his dependence upon her, when he felt frightened by the omnipotent power and aggressiveness of other men who might threaten him socially

or professionally, whenever he felt an anxious depressive loneliness, a state which demanded that he search for and gain possession of another male, and when he experienced overwhelming aggressive feelings due to his unsatisfied love needs.

After two-and-a-half years of analysis he discovered that his homosexual feelings were filled with violent impulses. 'When I get a sexual feeling the man must be extremely submissive and as I say this I get a dizzy feeling as though I'd like to punch these men or strangle them or strangle their genitals by pulling them off, tearing them off, and causing them pain and enjoying the pain. I'd like to see the pain on their faces. I'd get a real charge out of this. I have very many angry feelings within me and all this façade of being nice to people, it's all an act. . . . And I hate my mother so. I hate her for all that she did to me, her selfishness and everything being for her. I feel like crying and I feel awful and the hate is getting more and more about all the things that have happened to me and I guess I've wanted to kill her for a long time. Then I wouldn't be weak and helpless.'

As in other cases of homosexuality, this patient presented a severely distorted body image. 'You know, I don't feel I have my own body. I want someone else's body. My body is flat. I guess because the penis is flat or never gets erect with girls. I keep looking for a body in another man and that's one of the reasons for choosing a man, especially if he's clothed and looks very masculine. It seems I'm reaching for that when I want a man. It has to do with the muscles. I want more muscles. I was never allowed to do anything that would make muscles for me such as sports. My mother would laugh at me and say to me, "What are you trying to be? A killer?" She would make fun of my penis. She used to say, "You'll hurt yourself if you ever have sex". She said if I ever exercised strenuously or lifted heavy things I might hurt my penis.'

The patient consciously feared and hated both parents. Strength derived from identification with the analyst allowed him to take steps toward heterosexuality. Yearning for the



father was expressed directly in the transference. He began to grant that his father did try, for a short while in the boy's midchildhood years, to fight against the mother's undue attentions and torture of the patient and consequently his aggression toward his father diminished. 'I feel terrible in realizing now that I made my father feel like shit. I would hurt him and embarrass him and it would give me satisfaction and my mother satisfaction. I would gang up with her on him and save myself.'

Following his first successful heterosexual experience during the analysis, he dreamed of his mother attempting to pull his testicles or his penis away from his body and of wanting to run back to and escape into homosexuality. He would feel depressed over the loss of his mother and fear that 'she would somehow pay me back for my interest in girls'.

Even though heterosexual functioning with full orgasmic satisfaction was achieved rather early in treatment (after eight months), the patient characteristically developed homosexual wishes whenever he felt 'imprisoned' and constrained by a girl friend. His heterosexual activities were made possible by his comprehension of a crucial factor which involved his control of the sexual situation. Whenever he would lose an erection, it was 'because the girl was trying to control things and I feared her the way I feared my mother when she would control me'. He also feared that the woman's sadism, if uncontrolled, would take over and therefore stimulate his own sadistic assault against her (mother).

In his continuing resistance toward heterosexuality he commented on certain difficulties which he encountered: 'Homosexuality is much easier . . . it has a wildness about it, an urgency, a mystery. But I was wishing this weekend that it would be different. . . . If I had only been stopped before expressing my homosexual life so completely. I don't have a feeling I want to talk to any of these girls I've met or get a good feeling out of telling them any of my problems or about the good things that happen. I don't get a certain feeling

with them that I get with my mother, that secure feeling. Why is that? Why is it so strong with my mother that it can't be with other women? I derive a strength from my mother' (identification with the aggressor).<sup>3</sup>

Whenever the patient's mother was effective in hurting him through her verbal attacks he became weakened, frightened, and masochistic. Following one such incident, which was brought up in the analytic session immediately afterward, he went to the subway toilet and engaged in mutual masturbation with a casual pickup. Simultaneously he observed two other men. 'This one guy went over to the other one, went down on his knees and started sucking him. The second guy was dirty looking, a positively dirty guy. It showed extreme masochism. It looked so terrible. The first guy dressed splendidly in a business suit, clean-cut and good-looking. I've seen guys suck other guys but it was never like this. He was on his knees on the dirty subway floor and he was feeling this guy, running his hand up and down his arms and legs taking him all in and with his other hand he was masturbating himself. I was watching. I know why I was. I was punishing and hurting myself, too. I *was* the guy on his knees and I wanted the disgust to go all over me. I was watching his degradation and enjoying it. Every time I engage in homosexuality I'm sure that I am enjoying a degradation with men. Also I feel I only degrade myself in front of my mother and I really want to eat her up, eat her breasts, eat her, eat all of her. Other girls are out. Her breasts are to be eaten and they are substituted for by the penis of men.' This incident was followed by a dream that night.

<sup>3</sup> Here the patient aptly demonstrates the mother-child bondage. The loneliness he experiences when he has been close to a girl comes from jeopardizing the mother-child relationship. His belief that he is strengthened by her has to do with the alleviation of fear of her destructiveness through reassurance. In the earliest years of life it had induced such fear in him that he could not make the separation process from his mother a reality in his early years of development (17).

My mother and I walk into a place like a restaurant and we see a girl sitting there; she is a pleasant girl. I keep saying that my mother is crazy, that I don't want to hurt her. My mother doesn't hear. She is with me and, of course, she hears what she wants to hear, you know that. Somehow or other this girl is involved, perhaps it's being the girl I am having intercourse with but getting involved with her further will hurt my mother. I yell over to this girl, 'I know my mother is crazy but I don't want to hurt her'.

His associations were that if he became progressively involved with a girl it will hurt his mother in the long run as he will wish to marry the girl someday. He retreats from heterosexuality and submits himself to a 'crazy mother' who will only hurt him. He feels that his mother 'probably is crazy' but this further ties him to her because she then needs him even more. 'I feel sorry for her. I remember her cold, hard self and how she used to treat me but it seemed at least she loved me. In my homosexuality I think I'm giving in to her, too. I do not take another woman; I take a man. I subject myself to such humiliation and torture in these subway things.'

The patient's conviction that he would hurt his mother by going with girls and having intercourse with them had a double meaning. If he had intercourse with girls he felt he was much more directly having intercourse with his mother than when men were substituted; if he penetrated another woman he felt he was penetrating his mother, an event to be avoided at all cost. The importance and meaning of this penetration of the mother as regards the basic conflict of this patient became apparent a few months later. He reported a significant dream, the unraveling of which demonstrates the underlying symbiotic preœdipal conflict. 'It's only a short dream. It's of my mother bleeding right down the middle and I'm rolling over on top of her.'

His associations were: 'I am hurting mother by talking against her, by going out with girls. You recall the last dream I had of importance, it seems to me, was the dream that I was

hurting my mother when I approached other women. Every time I feel I've hurt my mother I then begin to have homosexual desires. In the dream the blood was all over me. It strikes me as odd that I'm telling this all to you, that I have to force myself to talk and I feel very anxious. Last night I tried to masturbate with this girl's image in mind but I couldn't. I could only masturbate with a man's penis in my thoughts. . . . I find I look at certain guys depending on what I feel I'm missing or needing at the time. If I feel loneliness I need a gentle guy. If I need strength I get a fierce looking, a wise type, hate-look-in-the-eyes kind of man. In the dream my mother was bleeding from the heart but it was in the midline and it was a slash, a long cut, deepest at the heart and some sort of conflict in the dream. She deserved it but I didn't want her to have it. She deserved to die but I was almost choking in the dream myself, like almost it was my death, like Siamese twins together, the blood. I got almost vicious in the dream, pushing away and yet not pushing away, holding tight to her, the way I hold tight to homosexuals. It makes me feel very nauseous, very upset, and my heart is going very rapidly and I'm frightened like I wish it was over and I didn't have to keep going back to it. . . .

'Suddenly I feel shame about wanting to have intercourse with my mother. I know I've wanted to for years. It brings tears to my eyes when I say that and I'm crying now. I'm loving her all over that way but I wish my mother could have my father and my father her and that I could just let it go at that, the two of them, I just can't blame one of them if I separate myself from them.'

The patient felt shame and guilt about his incestuous feelings and his desire to unite with the mother and then suddenly would substitute a man to alleviate his deep anxiety. He could see now why he had not tried intercourse with women instead of men. He said that he wanted to be a child with his mother but that if he approached a woman he would not get rid of his incestuous wishes and his guilt of fusing with his mother.

Further, he would also not be able to control his aggression, as vividly depicted by the slashing of her body in the dream. By not approaching a woman he shows that he has no interest in mother and therefore denies his aggressive, murderous, and libidinal wishes toward her.

'In the dream I am loving her all over and she is holding me even though she's bleeding and it's mostly her holding me and my clinging, and all those things make me feel ashamed. I hated myself and my feelings and my mother but more I felt ashamed and now I feel relief as I tell you and it brings tears to my eyes . . . relief from guilt. I didn't feel I did anything wrong as a child but I see now that in loving her I'm killing her and destroying her. The killing of her and below that is the intercourse with her but I feel there is a good reason to kill her, to kill our relationship, to get her out of my life, to let my father have her. . . . There is an expression, "Go in health and peace", if it could happen that way my mother could have my father and my father her.'

This session was marked by great affective release as expressed by the patient's tears, grief, sorrow, thrashing on the couch, despair, and depression. He left the session only to call the analyst a few hours later, saying that he 'never felt so happy' in his life. The session clearly illustrates the nuclear conflict of the preœdipal homosexual. The isolated affective state he attempts to ward off is the mother-child unity that is so frightening to him. This wish and dread which come from an intense fear of the mother and lack of a strong father are what had been repressed during the infantile sexual phase of life. The homosexuality serves to maintain this repression.

In the mother-child unity complex are: 1, the wish for and fear of incorporation; 2, threatened loss of personal identity and personal dissolution; 3, guilt over any attempt to heal the bond through invasion of the mother; 4, intense desire to cling to the mother due to separation anxiety which later develops into a wish for and fear of incestuous relations with her; 5, intense aggression of a primitive nature toward the mother.



Through being 'forced' by the analysis into heterosexual relationships and being stimulated into aggressive attacks because of the devouring nature of his mother, the patient experienced a denial of his independence and masculinity which touched off the underlying nuclear fear of the union with her. In the previously described session, he experienced her death, destruction, merging, and his own death as a result of their clinging together and joining in an everlasting union.

The connection between breast and penis became adequately clear to the patient. 'The realization right along that this had something to do with my becoming homosexual . . . it is very important . . . has helped me a great deal. My mother's breast and the penis of these men are quite the same. I don't have the same kind of homosexual feelings now. I realize they're wrong for me and when I think of sucking a man's penis or his sucking mine, my homosexual feelings vanish. The penis is the breast.<sup>4</sup> This is the feeling that I've had since I discovered the penis and the breast are the same. It has something to do with talking about it to you. It gives me a masculine feeling rather than a homosexual one to realize this. The attraction of the penis seems to be fading away like the homosexuality is fading away but as I say it I'm frightened and I begin to feel a terrible lonely feeling. So I give up the penis [breast] . . . it has something to do with feeling alone, a lonely feeling. What is it due to? It's leaving the security of the home which to me *represents my mother*. As long as I know that the breasts of women are not my mother's breasts I can approach them and enjoy them. I realize to give up homosexuality seems to be to give up my mother. It is sex with my mother's breast, that is what I do when I have homosexual intercourse.'

His homosexual arousal came from the erotization of anxiety; a relationship to part-objects, i.e., breasts, penis; a magical fulfilment of masculinity through identification. It allowed an aggressive discharge; it achieved a closeness with his mother

<sup>4</sup> Cf. Fairbairn (7).



in the disguised form of a male and prevented her engulfment of him.

As the patient began to make the transition to heterosexuality he underwent a process of mourning and sadness for his mother and felt frightened by her loss. He reported a dream:

I was talking to a girl, telling her I had to give up my mother. She kept asking why and I started to cry and I opened the door.

His associations were that talking to a girl meant leaving the mother or having intercourse with the girl. He was losing his mother. He felt sad over the weekend and felt he had no friends. 'Also it's not simply that I am sad. I knew I was frightened. It's stupid to be frightened. Odd that a thing like this continues from childhood. Talking to you of not seeing my parents again. This is a childish approach. It isn't that I don't have to see them again. I don't have to be part of my mother. That's the real matter. An emptiness that I shall lose her. I can clearly see now that as soon as I've had desire for girls, and especially for A, it's immediately taken away when I'm afraid of losing my mother.'

As he improved he experienced a stabilization of his body ego. 'What I don't like now is when I go on the street and if I want a man to look at me, to like me, I don't like that feeling. *I don't know myself when I do that any more.* I can't feel my body or my face when I do that. It takes me a while to get over it.' He did not want to experience these feelings as he had started to feel full-bodied, having reconstituted his body ego; he felt pride in himself, in his movements, in his new identity. 'There's a lot more independence in me now. I don't even try to force my heterosexual feelings any more. They just happen. I don't have to convince myself they're happening or try to induce them.'

It was through repeated intercourse with his girl friend that he began to attain complete orgasmic response and finally deep feelings of tenderness and affection for her. 'I admit that I

am giving up my mother, *that I'm switching sides* and switching sides is like doing something bad.' The source of this guilt was his incestuous wishes. He also clearly saw that it served the conscious and unconscious needs of both parents that he remain homosexual.

The patient was not to be dissuaded from his new-found freedom despite the increased interfering machinations of his mother. He felt exultant and happy. 'It's more exciting this way. A whole big new world ahead of me.' He began to feel more powerful than his mother and that he did not have to be like her. He began to report spontaneous arousal, erections, and further investment of libido in his female love object. This cathexis was not without anxiety at first but the anxiety gradually diminished. Finally, during the third year of treatment, these feelings were uninhibited and he no longer doubted their qualities of genuineness, depth, and strength, a consideration which had always previously concerned him. 'The first time it happened, this natural feeling, it was like a cascade of water coming out under high pressure.'

In the latter part of the fourth and final year of his analysis the patient proposed marriage to A. 'I never felt so good. It's quite a thing to give yourself completely to a person, to just let go. We have the best sex life. I touch her differently and I say things to her that I've never said before. I never thought I would be able to have something like this. I feel I can analyze my fears now and understand them.'

### SUMMARY

A semi-narrative account of four years of psychoanalysis, starting at age twenty-seven, demonstrates the progressive attainment of heterosexual functioning and object love in a patient who had been an obligatory homosexual of the preödipal type since early adolescence. Crucial to these developments were the revival and working through of the following psychodynamic issues.

1. The homosexual makes an identification with his partner in the sexual act. Homosexual contact promotes a transient, pseudo-strengthening of his own masculinity and identity which must constantly be repeated or a psychic 'decompensation' occurs. The homosexual seeks masculinity, not femininity, and knowledge of this unconscious motivation becomes a potent source of strength, reassurance, and determination for change in the direction of heterosexual functioning.

2. While the analysis of oedipal fears of incest and aggression is of paramount importance in the analytic work, it is vital to the understanding and termination of sexual perversion that the nuclear preoedipal anxieties be revealed. In my patient these consisted of primitive fears of incorporation, threatened loss of personal identity, engulfment by the mother, and personal dissolution which would accompany any attempt to separate from his mother. The presence of this preoedipal conflict suggests that the homosexual suffers from the inability to successfully pass through the separation-individuation phase of human development.

3. The presence of a distorted body image.

4. The penis of the partner is revealed to be a substitute for the feeding breast of the sought after 'good' mother (breast-penis equation). The homosexual thereby escapes the frustrating cruel mother and makes up for the oral deprivation suffered at her hands.

5. At unconscious levels there exists an intense yearning for the father's love and protection, a further frustration of the need for masculine identification. The homosexual act dramatizes the aggression and yearning toward all men as a consequence.

6. Heterosexual interest and strivings are continually subject to suppression and repression in the course of therapy due to unconscious guilt feelings toward the mother because of intense incestuous and aggressive impulses. The careful maintenance of the positive therapeutic alliance is a considerable source of strength to the patient in his attempts to control

and finally triumph over his fears of murderous retaliation on the part of the mother, as he gradually moves toward his long sought for masculine identity.

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## Psyche and Environment

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# PSYCHE AND ENVIRONMENT

## SOCIOCULTURAL VARIATIONS IN SEPARATION AND INDIVIDUATION

BY WARNER MUENSTERBERGER (NEW YORK)

Every individual provides evidence of various points of view—biological, physical, psychological, social—from which human beings can be observed. Empirical research must take all these factors into account, since all of them play their parts in the development of personality.

I propose to discuss particular sociocultural variables in the early mother-child relationship and their possible effects on psychic structure and personality development. This exploration takes into consideration both the dyadic relationship of mother and child and the comparatively long period of postnatal growth, underscoring the fact that by the time man reaches genital maturity, about one fifth or one quarter of his life expectancy has already elapsed.

The impact of this prolonged dependence is a key to the essential human condition, and to the complexities and details of individual life. During the comparatively long period in which the child lives in a symbiotic relationship with his mother, he moves from an initial stage of relative undifferentiation toward an awareness and gradual discovery of his own body as well as an experimentation with his immediate environment. Psycho-

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analysis recognizes the relation between this emotional development and the processes of physical growth and biological need. Increases and refinements of auditory and visual perception accompany each of the zone-specific stages. Although when we speak of the oral, the anal-urethral and the phallic phases—connecting each of them with a variety of libidinal and aggressive events, deriving respectively from the mouth, the anus, and the genitals—the dividing lines are not, in fact, that clear: progression from one phase to the next does not eliminate the needs and wants of the previous prevalent experience.

Physiological development leads from one psychological phase to the next. What the infant perceives are primal sensations of pleasure or pain. Not only do the breast or the bottle satisfy hunger or thirst, they also transmit some kind of information about the external and the internal, the self and the not-self, and thus introduce the earliest awareness of a separate world. The infant's sensations of his urine and bowels also contribute to his capacity to distinguish between inside and outside, and his sensory and visceral perceptions add to the complexity of his responses.

This interplay must be kept in mind: it has a lasting influence on the way the young child reacts to the formative forces in his life. Nor do these reactions derive entirely from the dyadic mother-child unity, since the mother's actions and many of her responses themselves reflect the sociocultural climate. As Anna Freud (9) has explained, the duration of the period during which the child is free to wet and soil is environmentally rather than maturationally determined (p. 73). It is with the conglomerate of factors—biological, psychological, and environmental—that I shall deal. They all interact to influence the child's eventual ability to deal with reality.

When we speak of reality, we refer not merely to the physical world, but to the sociocultural environment in which the individual exists. Man has always lived in an associative community which demands its own particular kinds of behavior. The prolonged dual unity of mother and infant enables the child

gradually to adapt to inner and outer conditions by way of various introjective and identificatory processes which themselves contribute to an awareness of the 'I' and the 'non-I', of 'me-ness' and 'you-ness' (cf. Shields [29]). We believe that this process leads, eventually, to the internalization of regulatory measures and the consequent development of reality-syntonic and culture-syntonic responses.

There can be little doubt that different environments call for specific modifications in the individual's adaptive responses. The type and character of the mother-child relationship in a great number of primitive cultures give ample evidence that not all cultures conform to what we have come to accept as average expectable practices in child rearing.

Freud was fully aware of these differences and spoke of them explicitly in his paper on Female Sexuality (10), pointing out that in Western societies the mother is often accused of not having given enough milk to her baby. He continues:

It would seem rather that this accusation gives expression to the general dissatisfaction of children who, in our monogamous civilization, are weaned from the breast after six or nine months, whereas the primitive mother devotes herself exclusively to her child for two to three years. It is as though our children had remained forever unsated, as though they had never sucked long enough at their mother's breasts (p. 234).

Psychoanalysis has concentrated almost all its attention on Western or westernized man, and has never dealt adequately with the developmental consequences of the differences between his environment and primitive man's culture. The emotional and sensory feedback of a symbiotic relationship that extends over what amounts to the entire preœdipal phase has not been sufficiently recognized in all its complexities and consequences. But this social institution of a long-continued mother-child bond is crucial to our understanding of particular psychological and social configurations. The very fact of this protracted intimacy

with the mother may lead to a pace of development of the infant's sense of his own boundaries different from that at which those infants progress who provide our models for instinctual and social development. It will, I hope, be clear that the differentiation between narcissistic libido and object libido must be influenced by this condition of extended dual unity. But does this difference leave its mark on the pre-adaptive instinct-controlling, i.e., innate maturational forces? To what degree does the limitation of the internalized delay influence the pressure for drive discharge and the capacity to wait? To what degree does body pleasure remain in the foreground, at the expense of regulation by reason and intellectual capacities?

In a situation of prolonged mother-child unity, differentiation of ego from id inevitably occurs at a somewhat later time. This in itself prepares the child for relationships which, from our point of view, have a distinctly narcissistic quality. Moreover the comparatively long closeness with the mother may also slow down the developmental process of perceptual organization and hence the readiness to perform a variety of cognitive operations. Primitive people seem to differ from the members of Western societies in their preparedness to apprehend and assess rational and irrational elements. Our investigatory means and methods are still limited, but the work by Bruner and his collaborators (4) with Senegalese, Mexican, Eskimo, and North American (Boston) children points to remarkable differences between rural and city children, 'most compactly' evidenced as a 'difference between abstractness and concreteness' (p. 315).

The configurations that were investigated seem to promote a nonabstract type of perception, and a more limited capacity to divide thought from action, and hence variations in the phenomenology of separation-individuation, emotional response to loss of the object and—implicitly—to the threat of castration (*cf.* Muensterberger [24]). Werner (33) found that developmental functions among primitive people are 'characterized on the one hand by precocity and, on the other, by a relative early arrest of the process of intellectual growth' (p. 27). Can we assume

a correspondence between the infant's extended attachment to his mother and certain effects on his organization of ego and superego, narcissism, representation of self and object, reaction-formations, reality-testing, and capacity to conceptualize?

Until now, we have been dealing with the possible relation between psychic functions and sociocultural conditions as a purely theoretical construct. Let us review some field observations. In addition to my own work in Southeast Asia and North and West Africa, I have gathered a number of field reports from other investigators about the early stages of life in various parts of the world. They indicate the range of conditions of which we must be aware, since these conditions govern both the child's emerging responses and the mother's spontaneous and reciprocal sentiments. In their very helpful and informative overview, Child Training and Personality, Whiting and Child (34) report on investigations of various aspects of the process of socialization in fifty-two societies. Their research is useful in more than one respect. The only criticism the psychoanalyst might raise is that it is conceived too rigidly within a statistical-factual framework and depends largely on a somewhat simplified genetic-adaptive rationale to demonstrate the existence of an underlying mechanism of cause-and-effect.

In the light of Freud's comments about the extended nursing period among primitive peoples, it is not surprising to learn from Whiting and Child that 'for the median case, weaning is reported to begin at the age of about two and a half years. Approximately this age is indeed typical of primitive societies in general, for the estimate for 33 out of the 52 societies falls between the ages of two years and three years. . . . The age of weaning is an aspect of socialization in which our American middle-class group is quite extreme . . . the typical age of weaning [being] . . . a little over half a year' (p. 70).

My own study in Southeast Asia and parts of Africa confirms these gross findings. In Mali I had contact with the indigenous Bambara and Peul, among both of whom the mother-child



bond is required to extend over the first two years of the infant's life although there is, I believe, a certain difference between the treatment of girl babies and boy babies. The implications of this culturally prescribed symbiosis are quite complex, and involve more than merely a prolonged oral-parasitic union. In the area of Bamako, I spoke to a young mother who had a sleeping infant—a boy of about nine months and her first child—tucked in a shoulder sling across her naked body. I found this woman coöperative and pleasant though quite shy in her dealings with me, and her behavior with her baby was, by Western standards, warm and affectionate: she was easy and casual in her responses. There is no doubt that my presence caused some shyness and hesitation. Nevertheless she remained consistent in her handling of the child's demands. During the course of our talk, she got up and disappeared into the hut for a short time. When she returned, I saw that the child had, during the interval, defecated on her body. But she seemed to take it with great ease, cleaning herself and the baby—in that order—without any indication of aversion or misgivings.

This vignette seems characteristic of maternal behavior among these people. The child's almost continual contact with his mother's body—with her skin, her rhythm, her smell, her voice—suggests a kind of fusion quite different from what we usually expect. It is customary for the baby to sleep at his mother's side. She carries him on her back during her waking hours, taking him along on her walks and visits, to the market and to the fields. Crying or whimpering is the child's way of getting attention, and suckling is considered the best means of calming him down. On one occasion, I watched what happened when a little boy of about two screamed for ten minutes or even longer. In a quiet and gentle manner, his mother and another woman—possibly a relative—made various efforts to calm him down, make him laugh, offer him the breast, and coax him in many ways. Not for a moment did either of them lose their tempers. On the other hand, I saw a father, one of my informants, severely beat his quite stubborn son of about eight. Simenauer



(30), who lived for sixteen years among the Bantu of Tanganyika, speaks of the intimacy between mother and infant, the warmth and continual oral satisfaction. Again, the naked child is carried on the mother's naked body for two or three years. This closeness continues throughout the night, when the child sleeps next to his mother—thus suggesting the importance of other components, besides the oral (p. 52).

In his extensive study of Indian personality, Lannoy (18)<sup>1</sup> tells of the Hindu child. Once again, the intimacy between mother (or mother's substitute) and child continues for a comparatively long time: 'The child will be fed at the breast for at least two years, if not more; a period of four years is not unknown. By the time this period ends the child is accustomed to a fairly generous diet, and though weaning is gradual, it is still a wrench and may lead to anger. Ideally, it will be fed any time it cries, and every effort is made to stop its crying, which is considered weakening.' As in many other cultures, the child is carried astride the mother's hip and remains in immediate touch with her body for several years. However, this ideal pattern of indulgence and closeness is not ubiquitous among the Hindus: in general, only the higher castes can afford to maintain it. 'There is little emphasis on self-reliance', Lannoy observes. 'Transition from infancy to independence is prolonged. A child will continue to sleep with its mother, perhaps with one or two brothers and sisters, for anything up to five years. Similarly, it will be bathed till it is five or six, fed by hand till it is five, and dressed up to the same age.'

Parin and Morgenthaler (26) worked with the Dogon, neighbors of the Bambara and Peul. They found that breast feeding usually lasts for two rainy seasons and three dry seasons—in other words, until the child is between two and three years old. Moreover, in order to be able to lactate sufficiently, the mother must postpone her next pregnancy. The Dogon say that a woman must refuse a man for two or three years after the birth of a

<sup>1</sup> Quoted with permission of Mr. Richard Lannoy from his forthcoming monograph on Indian culture and personality.

baby. After all, she now has what she wants—a child. They admit, however, that this rule of abstinence is not always strictly observed.

The post-partum sex taboo exists among a great number of tribes in which sexual relations are either forbidden or limited to such activities as coitus interruptus. Lévi-Strauss (19) tells us of the very primitive Nambikwara of Brazil that sexual intercourse is forbidden for as long as the child is not weaned, frequently until he has reached his fourth year (p. 273). Freuchen (8) gives a more or less similar picture from the Far North: 'An Eskimo mother doesn't wean her baby until her next pregnancy sets in, however long that may be. If she does not become pregnant again, she often nurses her last-born for many years. It is considered a sign of a woman's youth and agility that she still has a child to nurse and milk to give, and only when she has finished her usefulness to her children is she really old. I thus saw several times, both among the Hudson Bay and the Polar Eskimos, and even in Southern Greenland, mothers giving the breast to fourteen-year-old boys who were already sporting in kayaks and taking part in the hunt' (p. 82).

Burton-Bradley (5), Assistant Director of Mental Health of the Territory of Papua and New Guinea, furnishes me with the following information: 'Throughout Papua and New Guinea it is most unusual for a child to be weaned under two years of age. The *average* age for weaning for a Sepik River child is two and a half years, and for the Chimbu child it is as much as four years. In most areas the mother is supposed not to have sexual intercourse with her husband for some specific time after the birth of the child. . . . I have also been able to make use of the long lactational period as a defense on psychiatric grounds in the courts where the mother has been charged with killing her husband during this period.'<sup>2</sup> Among the Yoruba of Nigeria,

<sup>2</sup> Letter of 31st May, 1967. In a subsequent communication, 9th December 1968, Dr. Burton-Bradley informs me that 'in some Highland people where I have been recently, it would seem that weaning is the net product of the needs of mother, child, and father. During weaning the father will appease the child

according to one of my informants, the mother should devote herself exclusively to her baby during the first two years of his life.

On Bougainville, one of the Solomon Islands, the lactation period lasts until the child can walk and talk (Blackwood [3, p. 156]). However, we then learn: 'The criterion most frequently quoted was "Until the child has yaws". This tropical skin disease falls to the lot of every child, usually between one and two or three years of age. I estimate that, in general, intercourse is not resumed until the child is at least two years old' (p. 157). A child's ill health is usually taken as an indication that the parents have broken the post-partum sex taboo.

Illness and physical discomfort often accompany the intimacy and indulgence with which children are reared under these conditions, so primitive from our point of view. For example, Lannoy (18) points out that skin diseases are the order of the day among Hindu children. Climatic circumstances such as the monsoon can be most bothersome for the helpless young child, particularly when one takes the very inadequate housing conditions into consideration. The huts are damp and sticky as I myself have experienced. 'Muddy floors are often awash, clothing rots, insects and flies torment [the child]; bandycoots and rodents terrify, often injure and sometimes kill babies. Dust chafes the skin and inflames the eyes.'

Monique Gessain, (11), who studied the life of women in Guinea, indicates some of the psychic discomforts primitive children face. 'Night and day, the baby is never parted from its mother', she writes. 'It spends the day on its mother's back, wrapped in a cloth from which only its head and its feet peep

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by giving him "kau kau" (sweet potato) or banana, to stop the hunger pains, and this could well result in the father being . . . important . . . for character development. Even when the child is weaned both parents continue to tend to the child's demands. Complete weaning can take up to four years in some instances. Towards the end of the period the weaning process is gradual, and this plus the effect of the eruption of the teeth could have importance for character development.'

out. . . . At night it sleeps on the same bed as its mother, with perhaps a brother or a sister on its other side. The mother gives it the breast every time it cries, day or night. She enjoys nursing it and taking it about wherever she goes. . . . During the period she is breast-feeding it—about two years—she has no sexual relations. When the baby begins to crawl, it starts getting boiled rice or fonio, then millet and mashed peanuts, and it is weaned once it is able to walk. Weaning is always gradual. Often the child itself will refuse the breast, but sometimes the mother, in order to stop it from sucking, will put it to shame, saying for instance: “if you go on drinking milk you won’t grow up”, or “you won’t have any teeth”, or “your teeth will decay”’ (p. 37).

Comparable threats are offered among the Bambara and Peul. Once the child reaches the stage of walking, his elders often enforce obedience by warning him that his teeth may fall out, or that he may turn into a monkey, or that, if he wanders too far away, he may be carried off or eaten up by the witches outside the compound.

Nor does the mother’s physical closeness with her child demonstrate affection. LeVine (20) describes the African mother who remains unperturbed ‘while her child chokes, sputters, screams: she shows no signs of empathizing with the infant’s discomfort. It is also significant that, despite the physical closeness of the African mother to her child, she rarely tries to stimulate a response from him, verbally or through play, fondling or cooing. In fact, she pays little attention to him when he is not crying. . . . There are no indications that the mother sees the infant as a lovable extension of herself from whom she in turn desires love’ (p. 23).

It seems profitable to include here Dr. LeVine’s elucidating comments in his discussion<sup>3</sup> of this paper: ‘Western observers in Africa, for example, particularly if they have some awareness of psychoanalytic concepts of development, are frequently struck

<sup>3</sup> Dr. Robert A. LeVine was the discussant of this paper when it was read at the Annual Meeting of the American Psychoanalytic Association in 1968. This paragraph is quoted with Dr. LeVine’s kind permission.

by the close and physical mother-child bond and the apparent indulgence of infants before they are weaned. There is a danger here that our Western preoccupation with the permissiveness-strictness dimension might blind us to other aspects of equal relevance to ego development. On the basis of my own observations in East and West Africa, I would not challenge Dr. Muensterberger's account—on the contrary, my data contain cases of 15 month-old children being fed 25 times in a 12 hour period or about once every 30 minutes (13 times at the breast, 12 times supplementary foods). I would want to add other facts that are inconsistent with the contention that the experience of African infants deviates from the model of optimal frustration and optimal stimulation in ego psychology.'

These examples—not merely of indulgence and intimacy, but equally of discomfort, stress, and even threats—could be considerably extended, through illustrative descriptions pointing up both the similarities and differences in the practices of various societies. To list these examples would clearly demonstrate the number of variations that operate in any culture, and would show, too, that the process of socialization and enculturation is never identical in two situations. Moreover, the various factors contributing to these processes also differ in terms of realistic and adaptive behavior.

The mother who is deprived of sexual gratification, who warns her child of witches or of losing his teeth, or who is unable to protect him against pain, heat, and insects is, obviously, experienced with ambivalence as her own feelings must vacillate. Such barely concealed ambivalence may very well evoke, in the young child, a tendency to uncertainty and distrust and thus lead to narcissistic defenses. At the same time, the mother's constant presence and availability limit the child's experience of loneliness or anxious expectation of mother's return (as so often observed in our own society). But it seems also to intrude upon the development of hallucinatory wish-fulfilling fantasies, which we see as critical factors for future mental development.



Thus the normal separation-individuation phase, which Mahler (21) regards as beginning around the fifth month, is influenced by sociocultural and environmental traditions and procedures. In systematizing individual development according to psychosexual phases, we make the implicit assumption that drive organization and conceptual coördination are biologically determined. But although specific patterns of child rearing may not interfere with the *modes* of development and their relation to basic drives, particularly marked sociocultural ways of behavior do confront the growing child with more or less prescribed codes of interaction and etiquette. It is true that the modal system constitutes but a frame of reference. Yet the very fact that, in many primitive cultures, early maternal function and genital satisfaction are to a certain extent mutually exclusive has psychological consequences that reach far beyond its expressed purpose as a pedagogical device. We usually pay considerable attention to disenchantment and the dread of object loss and see in them critical factors for the individual's further development. But in these cultures, we find something surprisingly different: an extended symbiotic relationship in a situation where the prolonged mother-child bond cannot be regarded as simply an evidence of maternal love and devotion.

If, for example, the mother is sexually abstinent for two or even three years after the birth of her child, a cathectic shift from the husband to the child seems inevitable. The child, then, is not only the recipient of her maternal needs, but unconsciously also fulfils her erotic demands, and supplies significant secondary sexual pleasure. The woman's maternal function is more or less distinct from her genital-sexual one as a mate, as in those higher animals in which oestrus and the feeding of the young are divided into two separate phases. In institutionalizing the post-partum sex taboo, many primitive peoples have divided—in a more or less expedient resolution—the female's erotic-object-directed and her narcissistic-maternal roles. A vital element of the woman's sexual responsiveness, namely her maternal feelings, is built into the regulatory



kinship system. The prolonged dual unity with her child seems to provide her with a certain measure of narcissistic satisfaction which is unfamiliar to the Western observer.

As development proceeds, the child's focus of awareness shifts from oral-synesthetic sensations to anal-urethral ones. Here, too, the environment must have its effects. Both in Africa and in various areas of Southeast Asia and Indonesia I have seen infants and toddlers being cleaned in the most casual manner and without any suggestion of shame or disgust. I recall two different occasions when the household pet, a skinny dog, licked a young Maanjan-Siung Dayak boy of the Barito area in Borneo after the little fellow had soiled himself. And no bystander made any comment. I saw men and women urinate without any shame or concealment. They showed somewhat more modesty with regard to defecation, going a few yards behind the house or preferably squatting near the edge of the river where they could clean themselves in the water. All this was done with little fuss or emphasis. Róheim (27) described a rather similar attitude among the Central Australian tribes he studied. 'They just urinate into the sand while they eat [at the Mission station]. They do it very skillfully. First they scratch a little hole in the sand with their toe, then they urinate into the hole and cover it up with the same foot. . . . Another scene of a similar nature. We are returning from a ceremony and Lelil-tukutu stops for a moment to talk to us. While talking he would urinate and not even attempt to hide his action by turning his back to us. . . . There was a little more shame in connection with defecation; but Pukutiwara defecated in the presence of my wife and of his own wives, only turning his back to the spectators. There was absolutely no shame in talking about the subject' (pp. 82, ff.). Kidd (16) writes that African children lying on their mats in the sun are often cleaned by their dogs. Simenauer (30) speaks of Bantu babies who, while being carried on their mothers' naked backs, urinate and evacuate on her without restraint, evoking from her neither admonition nor any show of repugnance.

What are the effects of such relaxed child-rearing practices on the qualities we tend to link with anal-urethral responses? When the attitude toward elimination is almost entirely free from systematic instruction, rules, and ceremonies, there is virtually no trace of sphincter morality, a relative feeling of timelessness and a certain tolerance of openly expressed aggression. Aggression lies close to the surface and is brought out rather suddenly, often to the surprise of the Western-trained observer. There are—comparatively speaking—fewer culturally developed releasers such as competitiveness, acquisitiveness, steady and sustained interests as a sublimated function and goal substitution. At the same time, I have found much less prejudice against open expression of ambivalence, so that positive and negative feelings can exist side by side without visible conflict. Mood swings and affect-prone behavior can be displayed without signs of guilt and superego interventions.<sup>4</sup>

Two examples from Indonesian and African natives illustrate this point. Both cases concern middle-aged men of some status in their communities, whom I had provided with goods they would otherwise have had difficulty in obtaining. We had developed a good and more or less reliable relationship, evidenced by their helpfulness and their continued acceptance of my presence. But then, in each case, the day came when I was unable to satisfy their demands. Both men reacted immediately with unconcealed anger. The Peul gave me a furious look, grabbed a wooden box which was standing in front of him, and smashed it on the floor. He was a big husky man whose affective outburst was quite impressive. He then shouted at a servant and hit a dog which happened to cross his path. But it took him only a few minutes to collect himself, thus giving me a chance to explain that my supplies

<sup>4</sup> The implications of cultural relativity for transcultural analyses has been discussed at a panel on Aspects of Culture in Psychoanalytic Theory and Practice, at the Fall Meeting of the American Psychoanalytic Association, New York, 1967. See Jackson (14).

had run out. He immediately regained his old composure and politeness and behaved as if nothing had occurred. Nor was the incident ever mentioned again. The Dayak reacted similarly except that thereafter he began to steal from my staple food. When he was confronted with this, he seemed quite indifferent, showing no signs of remorse and offering no explanation. I do not believe that he had an inner reaction of being disapproved of by his superego.

But I do not want to imply that prolonged breast feeding or our logical assumption of the variability of oral gratification and laxity in anal-urethral functions can be regarded as the sole determining forces in the development of the total personality. The synesthetic-cutaneous sensations between mother and infant, the sleeping arrangements, the emotional climate in response to the post-partum taboo—all these must also be taken into consideration. Breast, skin, face, cues, smell, movements are all part of the introjective-identificatory process, even though it is quite conceivable that the small child does not experience them as part of the same entity.

When the breast disappears, the child is neither left to himself nor compelled—as in our sociocultural environment—to turn to a transitional object (36). He is immediately compensated by other tactile and olfactory sensations and hence does not have to replace the earlier real object either by hallucinatory ones or transitional substitutes. What are the possible effects of this sociocultural condition on development and conflict-free identifications? The immediate gratification of oral and tactile-synesthetic needs seems to lead to a low tolerance for frustration and a different quality from ours of future-oriented thought—a different attitude toward time and timing, the *mañana* behavior of the South American being a case in point. Another related difference lies in the direction of structural development. The child's continued closeness with the mother makes the father into a less inhibitive figure, at least during part of the preœdipal stage. He is less of a rival, and

sanctions and interventions are less likely to come from him than from those ogres and man-eating witches with which the mother threatens the child.<sup>5</sup> Hence the discrimination between actual and imaginary or fantastic menaces is not clearly outlined. Ideas that may sound paranoid to the Western observer are, in fact, culture-syntonic simply because the superego organization is much less distinct, and regressive adaptation (Hartmann [12]) part of the world in which the child lives.

Current psychoanalytic findings lead us to believe that an optimal pattern of tension and relief is important for hallucinatory image formation, for the development of mental representations, for the search and demand for intermediary objects as a tangible bridge to the outside world, for a recognition of self and not-self, and eventually for secondary process thinking. Separation and frustration help generate the equilibrium between inner and outer reality (see, for example, Rycroft [28]). Here are forerunners for symbol formation, the capacity to produce sequential thought and repressive defenses.

In the case of the conditions discussed in this paper, the pattern of tension and relief is quite different. The mother does not appear as an external organizer until comparatively late, nor does the infant truly act separately from the mother (or her substitute) even at a time when he is maturationally ready for independent function in various respects. Thus we find a socioculturally defined divergence between maturation and development. The protracted dual unity allows the mother to respond more rapidly than is generally the case in Western cultures, and it seems reasonable to postulate that this permits the child's innate longing for reunion to be quickly satisfied. Such rapid satisfaction itself restricts perceptual and cognitive capacities and helps the child to misinterpret reality beyond ordinary, everyday experience in magic-animistic terms. These restrictions are thus manifested in intellectual limitations and, since moral conduct is essentially regulated by strict external

<sup>5</sup> The *vagina dentata* theme in myths, folktales, and dreams is quite common. (See Elwin [7] and Muensterberger [23].)

obligations, in ethical standards in which impulsive outbursts and affective agitation are a familiar phenomenon. In the primitive cultures I have visited, the individual can usually discharge his emotions without involving himself in conflicts or serious modifications of affect. Moreover, because it is largely directed by his pleasure-seeking attitude, much of his behavior is predictable and well understood by his fellow-tribesmen, whose habitual reactions are consistent with his.

This model of the earliest environment suggests a variation in the types of defensive maneuvers that are developed as well as in the modes of adaptation. There is evidence here that the prolonged availability of the need-satisfying person seems to limit the development of the ability to wait and to postpone or even forego gratification. The low frustration threshold, the dread of being lost, the comparatively short mourning reaction, and the comparatively quick replacement (at least, according to my observations)—all these seem to illuminate significant differences in ego development, superego function, object relationships, and the objectification of external reality.

As we have seen, the child's bond with his mother usually ceases at some time between the ages of two and a half and five. Often this step is sudden and abrupt and is followed automatically by the child's joining his age group, which, from now on, becomes the center of his daily activity, especially in the case of boys. The group bands together, stays together, often sleeps together, and shares the crucial significance of transition rites. More often than not age-group organization is the mainstay of primitive societies. In one sense it is the heir to the mother and in another it assumes the role of collective support supplied, in traditional European cultures, by the family. Psychoanalysts usually see the superego as the heir to parental controls. But the 'spotty superego', as Róheim once put it, of primitive man is in need of external signals, and so the group may function in this fashion. Moreover, this group frequently operates as an organizer, re-enforcing certain ego and



superego qualities which are not as clearly established as they are supposed to be in the average Western environment. The age group—or sometimes the clan or tribe as a whole—operates as a collectively managing agency, evidencing a series of elements we associate with internal phenomena: checking on standards, norms, and moral behavior, and directing itself toward adaptive aims related to the conditions under which the child has grown up. Monica Wilson's (35) highly informative study of Nyakusa age-villages in Tanganyika provides a fine example of this. 'The Nyakusa', she tells us, '. . . associate living in age-villages with decency in sex life—the separation of the sex activities of successive generations, and the avoidance of incest. When asked why small boys build apart from their parents they refer to the danger of a growing boy overhearing lewd talk between his parents, or seeing them unclothed. . . . We may add also the fear of young men seducing their fathers' junior wives, who are often girls of their own age. . . . Adolescent sons are not permitted to visit their homes after dark' (pp. 159, ff.). As one of the informants remarked: 'If a boy over ten years old stays at home to sleep, he is laughed at by his friends, and his own parents send him away' (p. 82).<sup>6</sup> Miss Wilson continues: 'If he sleeps at home he will hear what his parents talk about at night; the night is always full of lewd talk; and he may even see them undressing. He will grow up a fool, with little wisdom!' In other words, they understand the connection between early sexual excitation and stupidity as a symptom.

Is it surprising that under these preconditions aggression can barely be neutralized? It is, however, channeled into group activities, and often in a ritualistic or institutionalized manner. The megalomaniac-paranoid substructure is converted into culturally acceptable beliefs: the warnings issued to young children, for example, are countermeasures comparable to religious delusions in depressive states in our own culture. According

<sup>6</sup> There appears to be some recognition of the possible effect of primal scene experience. Also, this mode of etiquette indicates the still unresolved tension between the generations.



to LeVine's (20) findings among the Gusii 'many women become witches because they have been the victims of witches' (p. 13). One witch, for instance, had lost all six of her children. The common belief in witches tells us something about the mother's quite open ambivalence toward her children and shows a predominantly orally oriented mechanism of defense, which splits the mother image into the good, devoted mother and the dangerous, treacherous witch (see also, Bateson and Mead [1]; Belo [2]). The belief in devouring demons is a projective manifestation of ideas which are clearly preœdipal and are very often connected with food sacrifices to deceased ancestors. This ritual is rather widespread and is an institutionalized attempt to undo oral-destructive fantasies and thus provide protection against the retaliating mother (*cf.* Klein [17]). Since the struggle cannot be mastered by repression, animistic and magical concepts are created which transplant internal conflicts onto a projective, delusory antagonist.

Together with psychophysiological elements, sociocultural conditions have a decisive effect on drive organization and discharge, on the development of the psychic structure, on such ego functions as perception and reality testing, on identificatory phenomena, on frustration tolerance, on planning, intellectual, and future-oriented motivation, on affect and emotional responsiveness, and on other processes. Maturation and psychosexual growth do not seem to take the same route as expected in our Western schedule. Besides my own comparatively insufficient field observations there are numerous others, including the Whiting-Child study (34), which demonstrate the close and often exclusive attachment of the infant to his mother when he is well into the anal phase and beyond. I strongly believe that among many primitive peoples the initial state of relative undifferentiation lasts longer than we tend to expect. We can further assume that this culturally promoted state of the extended mother-child bond helps establish cathectic conditions in which identifications are largely imitative in nature rather than reflections of the ego's adaptive function.

Inevitably, in examining the psychic structure of people of

other cultures, the question arises whether ontogenetic conditions play a part in the psychic differences between them and Western man. The evidence leads me to believe that their potential for object cathexis and object constancy may be less than we count on. By implication it appears that primitive man's emotional response is often marked by disengagement and isolation. We can also speak of an 'ambitendent' disposition, which permits two impulses of an opposing nature—an alternation of doing and undoing, of closeness and distance—to operate side by side (*cf.* Mahler and McDevitt [22]).

To appreciate more clearly the meaning of this general difference to specific features of psychic structure, we must take into account that many primitive cultures allow or even promote modes of discharge and adaptation which not only accentuate the narcissistic position, with its oral-synesthetic bent, but also form the basis for the feeling, common among many primitive peoples, of magical power emanating from one's own body. Must we not conclude that the nature and quality of object relations are dominated by cathectic capacities linked to these archaic factors? There seems to be a basic tendency to gratify first one's narcissistic aims: a person can be desired or wanted (incorporated and experienced as a source of instinctual pleasure); at the same time, that person can be abandoned and left behind more or less easily. Mourning rites and reactions to dying people reflect a comparatively conflict-free assimilation of anal-sadistic impulses and give us a clue to the relative weakness of object cathexes and the narcissistic component in them. These characteristics are associated with quite basic defense mechanisms—projection, ritualistic obsession, isolation, denial, identificatory fantasies.

Considering the long dependence on the mother or her substitute, a dependence that often extends far beyond actual necessity; considering the fact that this dependency reaches far into the anal-urethral phase, so that the child experiences the loss of something of himself before the mother has been safely established as a separate entity; considering, finally, a

symbiotic existence which requires comparatively little renunciation of instinctual demands and produces not so much of the dread of abandonment which is so prominent in our culture,—considering all three factors, it seems questionable to apply either our clinically derived knowledge or our ideal requirement for ego autonomy—autonomy from the drives as well as from environmental pressures—to people whose psychic realm cannot be rendered intelligible by these criteria.

The indications are that in primitive cultures inhibitions and restraint depend more heavily on external than on internal influences, on a psychic organization that relies for support on the force of outside demands instead of stable introjects. We then observe, as a compromise, a range of proto-obsessive defenses determined in their specificity by the individual's history.

If primitive cultures produce a more restricted development of ego autonomy, what is the effect on libidinal and aggressive drives and on mental activity? Some of the elements in the mother-child relationship may offer a partial answer. There is a tendency toward fluctuation between primary and secondary process thinking which some anthropologists used to describe as 'pre-logical'. Regressive moves which we consider abnormal in so far as they include dissociation seem to be situationally or temporarily permitted. In fact, they are sometimes used in the service of enculturation and adaptive modes of communication. Some features in initiation and mortuary rites, magical acts, and shamanistic procedures provide illustrations of primary process forms of institutionalized activity. Thus, in primitive man's system of defenses the creation of these magic-animistic devices has what can be considered a strategic function. This projective form of control strengthens the somewhat indistinct boundaries between the self and the other, and thus balances barely unconscious wishes against the thrust of instinctual forces.

The child's relative well-being encourages the sense of magic and omnipotence, despite the often quite adverse conditions

of life. The protective symbiosis of mother and child blurs the distinction between self and libidinal object, and the consequent oral-narcissistic fixation is intensified by the accompanying synesthetic experience.

The mental operations of preliterate man suggest a considerable degree of cathexis of the representation of the self as it is experienced in the ego. There is a good deal of evidence that this cathexis re-enforces group solidarity and the inhibition of intragroup aggression. The early libidinal tie to the mother is transferred to the group. The habitual response pattern within the tribal organization provides for substitutes, often on the basis of the age-group system, which then puts 'identificatory counterparts' at the disposal of the individual. In many societies, the institution of the 'best friend'—frequently a co-initiant who remains a life-long companion—is common (Muensterberger [25]). But these relationships, from our point of view, do not appear to be object relationships. Rather, they serve as an auxiliary ego and reveal the need for mutuality.

This, then, brings us back to some psychoanalytic thoughts regarding ego differentiation and individuation. Jacobson (15) finds that 'by the age of two or two-and-a-half years the child's maturation, his ability to walk and talk, the ever-widening scope of his perspective and locomotor functions, his increasing manual accomplishments, his weaning and toilet training, etc., have advanced enough to bring about the startling discovery of his own identity, the experience of "I am I" ' (p. 59). In view of what we have learned from non-Western cultures, it appears that some of our psychoanalytic assumptions have been necessarily influenced by the manner in which children are brought up in the Western world. It seems clear that types and timing of nursing and weaning, of toilet training, of walking and talking, and so on are subject to sociocultural variables of a rather significant order. On the other hand, there is no doubt that certain rudimentary ego functions, such as perception and reality observation, avoidance of unpleasure, and

control of motility develop under any environmental condition.

I suspect that among primitive people the transition from dependence to independence, from the symbiotic existence to individuation and autonomy, from primary process thinking to secondary process integration, has never been completed *in the same way* as we should expect from Western models. Let me stress once more that I am speaking of a series of interlocking, multidimensional determinants and variables: the extended oral-anal-synesthetic dual unity; the temporary exclusiveness of this two-person unit; the gradual and non-moralistic period of bowel training and the subsequent reaction-formations which allow—among other things—for a quick succession of positive and negative feelings without visible conflict; a certain degree of unpredictability; a relaxed attitude toward time and timing; the fact that phallic expressions seem to be permitted or even encouraged. Moreover, there are the general habitat and living conditions. These, too, give us some perspective on the child's exposure to a variety of stimulations. The total picture may provide us with an idea of the prevalence of regressive moves which, although reflecting a preponderance of pregenital devices, are not pathogenic in their distribution of psychic energy. The comparatively undifferentiated experience of a prolonged symbiosis leads to relative unconcern with definitive distinctions, to the magic-projective confusion between sign and instrument, between mind and matter.

It should be stressed, however, that in dealing with primitive peoples we are not dealing with infantile human beings. Side by side with manifestations of grandeur and omnipotence, of animistic projections and magical thinking, are reality-syntonic actions and potentially adaptative and elaborate thought patterns. And yet, because of the lasting imprint left by the extended dual unity, ideational development, neutralization of psychic energy, and objectivization of reality do not seem to emerge in accordance with the timetable to which we are accustomed. I am inclined to believe that adaptive pursuits and drive organization are directed largely by identificatory, nar-



cissistic-dependent fixations rather than by autonomous regulations and by the use of innate potentials to balance conflicting pressures.

Since the determinative instinctual gratifications are connected primarily with the oral-synesthetic level, we find not only strong fixations of phase-bound features, but an interference with the development of the neutralization of aggression and the secure establishment of mental representations, and thus a limited capacity for differentiation and abstract thinking. The collective identifications or identificatory counterparts provide both substitutes for the original object of the dual-unity period and a binding force for instinct control as a regulator of internal threats. After all, we are dealing with sociocultural conditions which can support individuation only within their own frameworks.

In summary, then, it appears that the prolonged symbiotic existence, the profuse oral-synesthetic satisfaction, the taboo on sexual relations for the mother, the late and casual toilet training, the sexual-visual stimulation, and the comparatively late and sometimes abrupt weaning all have a lasting effect on ego and superego structures and on the management of instinctual demands, reaction-formations, thought organization, and secondary autonomy.

Certainly a number of other related factors play their parts—factors which had to be put aside for the purpose of this study. As so often happens in scientific endeavor, the more deeply we probe into the web of forces involved, the more we realize how little we know, and how wide the range of inquiries is that awaits our attention.

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## The Mother as Source of Power

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# THE MOTHER AS SOURCE OF POWER

## A PSYCHOANALYTIC STUDY OF THREE GREEK MYTHS

BY LEON BALTER, M. D. (NEW YORK)

*Psychoanalysis has a greater contribution to make to the study of mythology than demonstrating, in myths, wishes often encountered in the unconscious thinking of patients. The myth is a particular kind of communal experience. It is a special form of shared fantasy, and it serves to bring the individual into relationship with members of his cultural group on the basis of certain common needs. Accordingly, the myth can be studied from the point of view of its function in psychic integration—how it plays a role in warding off feelings of guilt and anxiety, how it constitutes a form of adaptation to reality and to the group in which the individual lives, and how it influences the crystallization of the individual identity and the formation of the superego.*

—JACOB A. ARLOW (3)

### INTRODUCTION

Psychoanalysis is the science of intrapsychic phenomena. Yet its principles and insights illumine areas of social significance such as mythology. The analogy between myths and dreams made possible the early psychoanalytic investigation of myths along the principles of dream analysis (1, 31). But the use of analogy had only limited value. It elucidated the symbolism of myths but gave no further psychological insight into them. The dream-myth analogy led to attempts at the social interpretation of myths. Some made a further analogy between the group espousing the myth and the individual dreamer. The myth was seen as reflecting actual historical events or conditions in the early life of the group (15, 16, 35). Others

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saw myths as reflecting and alleviating certain anxieties prevalent within a society, just as dreams concern themselves with unresolved personal problems of the previous day (6, 40). In the last analysis, dream psychology applies only to dreams; dreams cannot serve as a model for myths. Only recently, Arlow (3) ingeniously demonstrated unique psychological qualities and specific social functions in myths. He showed myths to reflect particular 'psychic moments' in ontogenetic development. They allow for instinctual gratification through fantasy and indicate culturally adaptive solutions to developmental conflicts through identifications with the mythical characters.

The purpose of this paper is to investigate the psychological determinants of three Greek myths: 1, *Œdipus* and the Sphinx within the *Œdipus* cycle; 2, *Perseus* and *Medusa* in the *Perseus* legend; and 3, *Jason* and *Medea* within the saga of *Jason* and the *Argonauts*. These myths, each of which exists within a larger myth cycle, have a common theme: a mother-figure as a source of power.

### SYMBOLISM IN MYTH

Flügel set down principles by which to interpret the symbolism of mythological characters.

. . . In the early stages of his life the child has . . . a strong motive for projecting his own painful feelings and the accompanying aggressive drives upon the outer world—and most naturally, of course, upon the outer objects or persons that are, in virtue of temporal and spacial contiguity, associated with these feelings. . . . The qualities projected onto the (outer) bogies depend upon the stage of development at which projection occurs in much the same way as the manifestations of sadomasochism depend upon the level concerned. Thus at the earliest or oral stage the projected figures suck, bite, tear or rend; at the anal or urethral levels they are liable to flood the world with filth or water or indulge in other forms of widespread and fierce destructiveness; while at the phallic level they castrate, mutilate and maim—all of these stages finding expression not only in individual childish fantasy but in frequently recurring themes of fairy tale and myth. Pro-



jections of this type are responsible for the weirder forms of childish phobias, which people the world with strange and sinister figures liable, as it seems to the child, to attack him in queer, malignant and terrifying ways (13, p. 112).

Thus, each mythical character may represent a specific member of the nuclear family as perceived through the coloring of a specific stage of psychosexual development. This scheme will form the basis of the analyses to follow.

### 1. *Œdipus and the Sphinx.*

Before his birth the Delphic Oracle prophesied that Œdipus would kill his father, Laius, King of Thebes, and marry his mother, Jocasta. To avert the hand of fate, the two parents bound and pierced the feet of the newborn child and cast him out upon a mountain. A shepherd rescued him and took him to Corinth where the king raised Œdipus as his own son. Suspecting that something was amiss about his relationship to his supposed parents, Œdipus went to the Delphic Oracle to ask about his fate. The Oracle told him that he would kill his father and marry his mother. To avert this horrible fate, Œdipus does not return to Corinth but sets out for Thebes. On the way, he meets his real father, Laius. They clash and Œdipus kills his father, neither man knowing their blood relationship. As he reaches the outskirts of Thebes, Œdipus is accosted by the Sphinx—a female monster with a woman's head and bosom, a lion's body, a serpent's tail, and an eagle's wings. She throttles and devours anyone, particularly a youth, who does not answer her famous riddle. She puts the riddle to Œdipus, who gives the correct reply. The Sphinx throws herself down (some say into the sea) and dies. Œdipus thus delivers Thebes from the scourge of the Sphinx. He enters Thebes a hero and weds the newly widowed queen, his mother, and becomes king. After an indefinite period of time, a plague settles over Thebes. As is shown so beautifully in Sophocles's *Œdipus Rex*,<sup>1</sup> Œdipus

<sup>1</sup> It is proper to use the great poet's rendition of the myth in dramatic form. One can trust the intuition of the poet to render the latent meaning of the myth faithfully, though Kanzer, who has written extensively on Sophocles's

tries to find out its cause. His investigation leads to Jocasta's hanging herself, the realization of his own incestuous condition, and the conclusion that he himself is the cause of the plague. He blinds himself and goes into exile. During the time of his wanderings he is hounded by the Erinyes or Harpies who accuse him of causing his mother's death. Ultimately he dies at Colonus in Attica by disappearing into a hole in the ground. Thus are the Erinyes appeased (22).

The manifest interrelations of Laius, Jocasta, and Œdipus indicate that they symbolically represent the father, mother, and son of the œdipal stage. However, the symbolic meaning of the Sphinx is less obvious. Reik (33) and Flügel (12) see the Sphinx as a condensation of maternal and paternal imagos of œdipal and reverse œdipal significance. Kanzer (26) sees in the Sphinx all the negative maternal imagos deriving from the ambivalent, preœdipal stages of development. Shengold (37) recently demonstrated in clinical data that the Sphinx represents the maternal imago of the oral-sadistic stage, 'the cannibalistic mother'. This last interpretation seems to be the most cogent and fruitful. In Greek, 'sphinx' means 'strangler', indicating a relationship to oral frustration and oral hostility. Further, the various animals whose parts compose her are all strongly carnivorous. Indeed, the Sphinx devours her victims.

Thus, one may state that Laius and Jocasta represent the father and mother of the œdipal period and the Sphinx represents the mother of the oral-sadistic stage. Œdipus represents the male œdipal child.

## 2. *Perseus and Medusa.*

Perseus, though born of a mortal woman, claimed Zeus as his father. It was prophesied that Perseus would kill his ma-

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Œdipus Trilogy, would disagree with this approach. He believes Sophocles's plays to have been 'tendentious and written with a contemporary audience in mind rather than to preserve an ancient chronicle' (39, p. 151).

ternal grandfather, the king of the realm. And so the latter casts him and his mother upon the sea in an ark. They come to a distant land. A fisherman takes them to the king, Polydectes. Perseus grows up in that distant royal household. Polydectes has sexual designs on Perseus's mother and tries to get Perseus out of the way by declaring that he will marry another woman if Perseus brings back the head of the Gorgon, Medusa. Medusa has protruding eyes, a protruding tongue, huge teeth, and snakes in place of hair, and turns anyone who looks at her into stone. Perseus plans to decapitate Medusa and enlists the aid of Athene and Hermes, who advise him how to go about the task and give him various paraphernalia to accomplish his goal. Perseus kills Medusa, cuts off her head, stuffs it into a wallet—to look at it would petrify him—and embarks upon his return journey. On the way he comes upon a young and beautiful maiden named Andromeda who is chained to a rock. A dragon, who had forced her parents to do this to her, even then was approaching the girl to devour her. Perseus asks Andromeda's parents to give her to him in marriage if he kills the dragon and so saves her. He then beheads the dragon, using the equipment given to him by Hermes. Andromeda's parents arrange a wedding feast to celebrate the union, but prove to be untrustworthy and incite another man to take the girl for himself. This man sets upon Perseus with a host of armed men. As he is outnumbered, Perseus uses the Medusa-head to vanquish his foes by petrification. Returning home, he uses the Medusa-head again and in the same manner against Polydectes, whose true intentions, by this time, have become quite apparent. Perseus thus triumphs over all his enemies. Later on, he kills his maternal grandfather, as had been prophesied, but this is accidental. He eventually ends up with his own kingdom, his wife, and his mother. When he no longer needs Medusa's head as a weapon, Perseus gives it to Athene, who henceforth wears it upon her shield (22).

This myth contains a series of triangular relationships, all of which involve the hero as the œdipal child. They are: Per-

seus, his mother, and maternal grandfather; Perseus, his mother, and Polydectes; Perseus, Andromeda, and the dragon; Perseus, Andromeda, and her suitor. Perseus's mother and Andromeda symbolize the œdipal mother. Perseus's grandfather, Polydectes, Andromeda's suitor, and the dragon represent the rivalrous œdipal father.<sup>2</sup>

However, Medusa does not fit into the œdipal pattern and her identity in the nuclear family is not immediately clear. Very few writers have actually discussed her meaning as a mythical character. Rather they have interpreted the symbol of the Medusa-head. Freud (18, 20), Ferenczi (11), Flügel (12), and Reik (34) saw the Medusa-head as representing the female, or maternal, genitalia. It represents the object of horror when a male child realizes that a woman (mother) does not have a penis. It testifies to a genital mutilation. Yet, this does not clarify the significance of Medusa particularly as the mythical character whom Perseus slays.

This qualification is necessary, for, as Miller (30) points out, Medusa has a prehistory. In it she is not a monster but a beautiful maiden. Athene changes her into a hideous monster because of rivalry. Miller rightly concludes that the premonster phase of Medusa's history rests upon a completely different psychological basis. Our inquiry is concerned with the monster phase.

The monster's physical characteristics give a clue to her psychological significance. She has snake-hair and protruding eyes, tongue, and teeth. All these show a phallic quality. Her ability to petrify, that is, render men stiff, also has phallic—and malignant—significance. Certainly Freud and Ferenczi are correct in stating that petrification represents castration through its opposite. Thus, Medusa represents a maternal imago of the phallic period of child development.

Ruth Mack Brunswick (7) discusses the phallic mother—that is, the maternal imago of the phallic phase—who 'is vested

<sup>2</sup> The dragon seems to have preœdipal significance also—by virtue of its carnivorous qualities.

with the authority to restrict, prohibit, and command, according to the requirements of the situation and by virtue of the fact that, until her subsequent depreciation because of her castration, she is not only active, phallic, but *omnipotent*'.<sup>3</sup> Here Brunswick only hints at the hatred and fear which must underlie this view of the mother. Medusa seems to represent the negative aspect of the essentially ambivalent imago of the phallic mother. And since decapitation symbolizes castration, Medusa's decapitation signifies the castration of the mother with a penis, the phallic mother.

Brunswick's description of the phallic mother's positive aspects fits Athene perfectly. She is the warrior-maiden goddess who always wears a helmet and carries a spear. She will never accept a male as lover or mate. She has many benign qualities, though she is ferocious in combat. It is significant that Perseus gives the Medusa-head to Athene. This act reverses the symbolic castration of the phallic mother; it represents the return of the penis to the phallic mother, now benign.

Thus, Perseus represents the œdipal boy. His mother and Andromeda represent the mother of the œdipal stage. Polydectes, Andromeda's suitor, and the dragon represent the œdipal father. Medusa is the figure of the malignant phallic mother; Athene, that of the benign phallic mother. The Medusa-head, as such, is the penis of the phallic mother.

### 3. *Jason and Medea.*

Before Jason's birth, his father's half-brother, Pelias, seized the throne of Iolcus, which belonged to Jason's father. The oracle prophesied that a kinsman of Jason's father would kill Pelias. Pelias thus set out to kill everyone in this category.

\* Some writers feel that the concept of the phallic mother derives from the assumption of little boys that their mothers each have a penis, just as they do. Their disillusionment comes later. Brunswick, however, feels that the concept of the phallic mother comes into being after the realization that women (mothers) do not possess penises. It would thus be a 'compensatory' fantasy to calm the male child's fear that he may lose his penis. For the purposes of this paper it is immaterial whether the concept of the phallic mother is primary or compensatory. What is of importance is its psychic reality and its universality.



Jason, then an infant, escapes death because his mother smuggles him out of the country. Later, a second oracle prophesies that Pelias should beware of a man wearing one sandal. Still later, Jason, now a man, returns to his land wearing one sandal and claims his father's throne. Through the intervention of Hera, Pelias agrees to relinquish the throne if Jason would bring back the Golden Ram's Fleece from Colchis, where an unsleeping dragon guards it. Jason has a great ship, the *Argo*, built for the voyage. Jason calls upon other Greek heroes for aid and together they all set sail for Colchis. On the way, they have many adventures, including a collective orgy with the women of Lemnos who have killed their husbands. In another adventure, the Argonauts rid Phineus of two Harpies who snatch and befoul his food. In gratitude, Phineus tells them how to navigate through the Symplegades, but even with Athene's aid, they barely make it.

The Argonauts finally arrive at Colchis. Meanwhile, Hera, Athene, and Aphrodite decide to help Jason by causing Medea, the daughter of Colchis's king, to fall in love with Jason. When the king demands that Jason yoke fire-breathing bulls in order to get the Fleece, Medea proposes to aid Jason if he will take her away and marry her. Jason gives such an oath to the gods and Medea gives him a salve to protect him from the fiery breath of the bulls. She also betrays her father's intention to kill Jason, leads the Argonauts to the Fleece, uses incantations to calm the dragon, administers certain eye drops to make the dragon sleep, heals the Argonauts' wounds after the ensuing fight with her father, murders her younger brother and drops him piecemeal into the sea to impede the pursuit of her father—thus she and the Argonauts escape.

When they reach Corcyra, the Colchians finally catch up and demand Medea's return from the king of Corcyra, who decides that Medea will be returned only if she is a virgin. Medea learns of this from the king's wife and tells Jason. He marries her forthwith, thus foiling the Colchians. The Argonauts give the pair a sumptuous wedding feast, and the

Fleece is spread over the bridal couch. On their way to Iolcus, Medea helps the Argonauts out of many predicaments by using her magic powers. At Iolcus she disguises herself as an old crone, enters the city, and claims to Pelias that the goddess Artemis sent her to rejuvenate him. She convinces him of her power to do so by dissolving her own disguise and also by cutting up an old ram, boiling it in a cauldron, and then producing a young ram, hidden all the while. Pelias agrees to undergo the same treatment. Medea thus conquers Iolcus for Jason.

At that point, the ruler of Corinth dies. As that throne happens rightfully to belong to Medea's father, she claims it for Jason. He rules it for ten years, during which time Medea bears him fourteen children.<sup>4</sup> However, Jason begins to suspect (probably correctly) that Medea poisoned the former ruler in order to obtain his throne. He proposes to divorce Medea and marry the daughter of the king of Thebes. Medea, enraged, sends her rival a robe and a crown which burn her and all those around her (including the Theban king) with unquenchable fire. Then Medea kills all her children. Some say she did this because Hera promised to make them all immortal; others, like Euripides, say it was to revenge herself on Jason. She then leaves Corinth and goes to Thebes, at Heracles's invitation. But the Thebans will not abide her there, as she has killed their king. She then goes to Athens to marry King Ægeus, who, thinking himself sterile, has invited her after she promised to cure him of his supposed affliction. Later, she tries to poison his long-lost son, Theseus, and so she is banished from Athens. She wanders around until, hearing that her father has been deposed, she returns to Colchis, restores his throne, and even enlarges his kingdom. Jason, because he broke his vow to Medea, is despised by the gods and all men. He wanders homeless and dies ignominiously before he can fulfil his intention to kill himself. Medea never dies but be-

<sup>4</sup> Mathematical calculation demonstrates that Medea, during her marriage to Jason, is constantly in a state of pregnancy.

comes immortal and reigns in the Elysian Fields. It is said she marries the hero, Achilles, there (22).

Jason's early history follows the pattern of the previous two œdipal heroes, Œdipus and Perseus. Like them, he has a pre-ordained enmity with a father-figure, Pelias, escapes as a child from the latter's murderous designs, grows up far away, and returns as a man to defeat him and claim the throne. Jason also manifests an œdipal character in triumphing over Medea's resistive father and attaining Medea. Thus, Medea represents the œdipal mother.

The quest of the Fleece also has œdipal significance. Here is the œdipal theme of a father-figure or dragon guarding a highly desirable object against the hero. Medea's father and the dragon represent the rivalrous œdipal father. The Fleece represents the œdipal mother.<sup>5</sup> And so Medea and the Fleece represent the same thing. The myth bears out their equivalence in that Jason must attain them together. These are Medea's conditions for aid. Further, both Medea and the Fleece share Jason's couch on his wedding night, thus emphasizing their common unconscious identity as the œdipal mother.

Though Jason represents the œdipal boy, Medea is not that simple a character. While she symbolizes the œdipal mother, her other qualities demonstrate her highly ambivalent nature. She is at one time passionately in love, at another viciously hating and wreaking revenge. She seems to have magical powers but is also a trickster. She heals but also murders. In this respect, the salve she gives to Jason for protection from the bulls' breath balances the robe and crown that burn their bearer to death. She is at one time the rebellious daughter, at another, a dutiful and helpful one. The myth pointedly calls attention to her virginity, but also to her sexual passion and

<sup>5</sup> One might speculate that the Fleece represents not only the œdipal mother but, more specifically, that anatomical region of the mother most attractive to the œdipal boy: the vulva with its pubic hair.

fecundity. The myth also ascribes to her two contradictory motivations for killing her children: one heartless and ruthless, the other loving and maternal. Even so, her child-killing tendencies are pronounced, for she butchers her younger brother also. Yet she promises Ægeus children. In her relationship with Jason she is ominously powerful and yet at his service. One sees her as all too human, but in the end she is immortal.

This group of characteristics does not derive from the œdipal stage of development. For in that period idealized images obtain, in accordance with its 'postambivalent' libidinal orientation (2). These qualities of Medea are certainly not idealized. Indeed, their essentially self-contradictory nature bespeaks an ambivalent orientation which suggests a preœdipal coloring to Medea's primarily œdipal nature. In contradistinction, the Theban princess Jason aspires to marry is an idealized female figure. She represents the œdipal mother in pure form.

Thus Jason symbolizes the œdipal boy. Pelias, Medea's father, and the dragon represent the rivalrous œdipal father. The Golden Fleece and the Theban princess signify the œdipal mother. Medea represents the œdipal mother with pre-œdipal coloration.

### ANALYSIS OF MYTHS

The main characters and their imagos having been presented, there still remains the task of deciphering the significance of their interactions. To do this, it is necessary to introduce a theory of myth analysis. We shall use the method supplied by Arlow (3), whose contribution is the most important milestone in the psychoanalysis of myths since Freud noted their infantile nature.

Arlow views the myth as 'a particular kind of communal experience [and] a special form of shared fantasy'. He starts with unconscious fantasy thinking as a basic concept—'one level of the ego's integration of instinctual demands of the id'. It manifests itself in many ways, two of which are conscious fantasies and conscious communal fantasies (i.e., myths). Fan-

tasies cluster around certain basic instinctual wishes. Each cluster relates to a particular instinctual wish and comprises 'different versions or different editions of attempts to resolve the intrapsychic conflicts over [that wish]. Each version corresponds to a different "psychic moment" in the history of the individual's development. It expresses the forces at play at a particular time in the person's life when the ego integrated the demands of the instinctual wishes in keeping with its growing adaptive and defensive responsibilities.' Each fantasy reflects a particular stage in the ego's development through the manner by which it handles a certain id impulse (pp. 375-77).

By applying the insights concerning fantasies to myths Arlow concludes: 'Different mythological expressions on the same basic theme correspond to the different defensive editions of the unconscious fantasy in the life of the individual, externalized and artistically altered in correspondence with needs from various levels of psychic integration of the individual members of the group. . . . From the psychoanalytic point of view, a study of comparative mythology can be based on how the dynamic forces of the instinctual wish are modified by the operations of the ego' (pp. 379-380). Thus, one may classify and compare myths according to two variables: first, the basic id wish and second, the stage of development of the ego operations brought to bear upon that wish.

Arlow goes on to show that myths are socializing instruments which strengthen and solidify cultural groups. The shared fantasy leads to a sense of mutual identification on the basis of common need. The myth presents 'ready-made and communally acceptable versions of wishes which heretofore were expressed in guilt-laden private fantasies' (p. 378).

### THE BASIC ID WISH

The first step in applying Arlow's theory of myths is to search out the basic instinctual wish inherent in each myth under discussion. To do this for the myth of *Œdipus* and the



Sphinx requires an examination of their relationship and its ramifications. Before Œdipus destroys her, the Sphinx plagues Thebes by killing her young men as they pass on the road. Œdipus acquires great prestige among the Thebans by virtue of slaying her. Indeed, the magnitude of his prestige corresponds to the awe and dread the Thebans had for the Sphinx. Further, Œdipus causes a plague to fall upon Thebes after he is king, just as the Sphinx is herself a plague on Thebes before Œdipus kills her (24). Also, the behavior of Œdipus as king bears an uncanny resemblance to that of the Sphinx: Œdipus terrorizes and sometimes destroys those around him with his ferocious pursuit of purpose; he harrasses those around him with dangerous questions, the answers to which lead ultimately to his own undoing and fall. Thus, the relationship between Œdipus and the Sphinx is twofold. On the one hand, he is her destroyer; on the other, he becomes like her in her sinister, destructive, and ultimately self-destructive questioning, in her dreadfulness, and in her plague-producing power.

Psychoanalysis is familiar with the associative connection between destruction and 'becoming like'. Adults unconsciously equate these two phenomena; infants and savages equate them consciously. This equation derives from the concept of oral incorporation. It refers to the infant's mode of relating to the world of objects while in the oral-sadistic stage of development. At that time, from the infant's point of view, devouring (destroying) is the same as 'becoming like'.

According to this formulation, the interaction of Œdipus with the Sphinx manifests the qualities of an oral incorporation. Specifically, it is the wish to orally incorporate the mother as perceived in the oral-sadistic stage, the 'cannibalistic mother'. Œdipus takes on the Sphinx's characteristics in his whole being. The instinctual wish is for total oral incorporation. In the same way Perseus becomes like the monster he destroys. He becomes someone who petrifies, albeit using Medusa's head. However, this is the only way he becomes like Medusa. And although he destroys Medusa, he only takes a part of her. Ac-

cordingly, the instinctual wish in this myth is for partial oral incorporation—of the phallic mother's penis.<sup>6</sup>

Unfortunately, the same line of reasoning is not applicable to the Jason-Medea myth. Jason does not destroy Medea. Indeed, their relationship does not have the intrinsic hostility and destructiveness found in the other two relationships. However, Jason acquires power through Medea, just as Œdipus does through the Sphinx and as Perseus does through Medusa. The acquisition of power in these latter two myths corresponds to fantasies of oral incorporation. Jason's acquisition of power is by passive association with Medea. This gives no obvious clue to any sort of id wish upon which to base a fantasy. However, an examination of the psychology of 'the will to power' will clarify this problem.

Fenichel (10) wrote the most insightful discussion of this subject. He stated that the impetus behind the will to power is the desire to feel again the omnipotence of infantile narcissism. The child gives this up to parental figures when he takes on object relations. In so doing, he views the parents as omnipotent and bases his own self-esteem upon 'participating in their power' (pp. 141-142). At first, to participate in this power means to eliminate the parent and take his place. Later, the child conceives of participating in parental power as robbing the parent of his power or the substance in which it is embodied. With the development of anxiety and guilt over

<sup>6</sup> One may arrive at this conclusion using another line of reasoning. Perseus uses the Medusa-head as an instrument or tool. To follow Edoardo Weiss (44), one 'extends the ego' over the object or instrument. Weiss calls this process 'egotization', which means making the object an extension or part of the ego. Weiss defines the ego to include the structure ego and the self, as Greenson uses the terms. It is clear from the way Weiss uses the concept of egotization that it corresponds exactly to Greenson's definition of introjection (23). Thus, using an instrument or tool so that it is an extension of the self implies a process of introjection, the psychological equivalent of oral incorporation.

This sort of fantasy becomes manifest in the 'voodoo' culture of recent immigrants to the United States from the Caribbean area. In it one may influence another person by arranging for him to use an article. If he does, the spirit of the original owner enters into the body of the user.

sadistic impulses, participating in parental power comes through 'partial identification, and even through mere contact' (p. 144). Fenichel stated, 'This last is a compromise between the craving for power on the one hand and, on the other, fear of the powerful being and passive love for him' (p. 144). He went on to say that no matter what form the fantasy of power acquisition takes, it is always of oral incorporation. ' . . . In accord with the *oral* origin of the regulation of self-regard by external supplies,—the [power substance] that was obtained by robbing, stealing, or trickery, or by voluntary admittance to participation, is in the final analysis always thought of in all these as having been acquired orally by swallowing' (p. 149).

This formulation has relevance to the three myths. The Œdipus-Sphinx myth corresponds to the most primitive form of will to power, for Œdipus eliminates the Sphinx and 'becomes' her. The Perseus-Medusa myth corresponds to the next stage in Fenichel's scheme: the hero 'robs' the phallic mother of her 'power substance' and so obtains her power. And finally, in the Jason-Medea myth, Jason participates in Medea's power 'through mere contact . . . through voluntary admittance to participation'. In this case the instinctual wish for oral incorporation is of the œdipal mother with preœdipal admixture.

Fenichel's scheme does not only apply to the Sphinx, Medusa, and Medea. In the Œdipus myth, Jocasta is also the vehicle of the power of Œdipus. She gives him 'voluntary admittance to participation' in the royal power. Further, Jason seeks the Golden Fleece to attain the kingly power of Iolcus. It is a 'power substance' to him, just as the Medusa-head is to Perseus. Like Perseus, he robs another of it.

### EGO DEVELOPMENT

Fenichel's outline also provides a method for ego-developmental assessment of the three myths. He showed that the impulse for oral incorporation of the powerful being undergoes maturational development. The impulse becomes progressively more modified, attenuated, and 'neutralized'. This

process is a measure of strength and maturity of the ego. Fenichel implied that this maturational development also involved the increasing capacity to form object relations. Thus, his description contains a key for assessing two important ego functions: impulse control and object relations. As shown, the Œdipus-Sphinx myth corresponds to the most primitive form of oral incorporation. It is devoid of any instinctual restraint or consideration for the object. Œdipus completely destroys the Sphinx. The fantasy of oral incorporation in the Jason-Medea myth is quite different. Here, the impulse is barely recognizable and in no way destructive. The object remains wholly intact. According to Fenichel, this implies the development of guilt and anxiety over hostile impulses. In the Perseus-Medusa myth the incorporative impulse shows some attenuation. Perseus only partially destroys Medusa. This indicates the rudiments of impulse control and object-relatedness. According to these two ego functions, the Perseus-Medusa myth corresponds to an ego-developmental phase intermediate to those of the other two myths.

Another relevant ego function is the relation to reality. A measure of this ego function is the degree of object differentiation in each myth. The three main maternal objects in these myths vary among themselves regarding the degree to which they are human. Also, the degree of sexual differentiation parallels the extent of their humanity. The Sphinx is human only in so far as she has the head and bosom of a woman. Otherwise, she is an ill-defined animal. Shengold points out that even her sex is indefinite.<sup>7</sup> Medusa is a monster. Nevertheless, she is more clearly human than the Sphinx and more discernible as a woman. However, her femininity is ambiguously tied to her

<sup>7</sup> While Flügel writes of sphinxes being of both sexes, some masculine and some feminine, and while he attributes this phenomenon to his and Reik's contention that the Sphinx represents an amalgamation of both maternal and paternal imagos (12), Shengold's thesis seems preferable: 'I feel that the Sphinx most meaningfully represents what I would call the primal parent (not just primal father or mother, but parent) who emerges in ontogenetic development as the bad mother of the oral sadistic stage—the cannibalistic mother' (37, p. 726).

pronounced phallic characteristics. On the other hand, Medea is ambiguous only regarding her possibly immortal nature. In all other aspects, there is no doubt that she is a human being, a woman of flesh and blood.<sup>8</sup> Thus, the Œdipus-Sphinx myth shows the least object differentiation and relation to reality; the Jason and Medea myth, the most, with the Perseus-Medusa myth in between.

This is the same relative hierarchy as that regarding the other two ego functions, and refers to stages of psychic development and the degree to which instinctual life loses dominance over impulse control, relation to objects, and perception of objects. That is, the hierarchy represents the extent that the ego achieves relative independence from the id in the course of ontogenetic development. From the above discussion it is clear that the Œdipus-Sphinx myth corresponds to an ego stage when the ego is extremely weak and immature. The myth of Jason and Medea relates to a phase when ego development is quite advanced, when there is guilt and anxiety over hostile impulses. The Perseus-Medea myth reflects a stage of ego maturation temporally between the other two.

### AMBIVALENCE

The three myths evince certain similarities in the three maternal power figures. Both the Sphinx and Medusa represent preœdipal maternal imagos. Medea also has a preœdipal cast, even though she is predominantly an œdipal figure. There-

<sup>8</sup> Parenthetically, this discussion may serve to elaborate upon a point made by Shengold. He states that the image of the primal parent 'emerges in ontogenetic development as the bad mother of the oral-sadistic stage—the cannibalistic mother. Cannibalistically penetrative (via tooth and claw), the imago develops into the phallic penetrative parent—by this time usually differentiated as the father—toward whom, in the male, the negative œdipus complex becomes activated' (37, p. 726). From the series Sphinx-Medusa-Medea, one sees that the nonsexual, primal parental image may also differentiate along feminine lines producing a female phallic, penetrative parent (Medusa) and an even more differentiated œdipal mother who has some preœdipal significance as well (Medea).



fore, all three maternal power figures have preœdipal characteristics; all three figures are essentially ambivalent.<sup>9</sup>

Another similarity in the myths is the role of acquisition of power. Œdipus's conquest of the Sphinx gives him his father's place as king and mate. The Medusa-head enables Perseus to secure his mother and his wife from other, rivalrous men. Medea's power achieves for Jason the Golden Fleece and Medea herself, both œdipal maternal figures. In short, in all three myths the ambivalent maternal power figure is instrumental in effecting the œdipal victory.

However, in psychopathology we find that *inhibition* of heterosexual (œdipal) aspirations in males often derives from the persistence of intense preœdipal (ambivalent) maternal imagos.<sup>10</sup> In psychopathological conditions, this is often due to abnormally intense preœdipal fixations. The ambivalent feelings projected onto these maternal imagos color the perception of women in a fearsome manner. The male child (or adult) reacts with anxiety and hostility toward women so conceived and perceived. In like manner preœdipal maternal imagos may stand in the way of œdipal (heterosexual) desires for the mother. The wish is to destroy the preœdipal maternal figures and to 'purify' the maternal object of ambivalent (negative) characteristics as a step toward attaining the œdipal object.

The Sphinx standing before Thebes (and Jocasta) represents the preœdipal deterrent to œdipal aspirations. The removal of this obstacle permits œdipal fulfilment.<sup>11</sup> One may

<sup>9</sup> The term 'ambivalent' does not refer here to the actual attitudes of these figures—say, to the hero; nor to the hero's attitude toward them. Rather, the term refers to the mixture of libidinal and destructive elements in the feelings which ultimately produce these figures.

<sup>10</sup> Of course, such inhibition may derive also from severe superego prohibition, specifically about œdipal concerns. The horror of incest derives from both factors: superego threat resulting in the dissolution of the infantile œdipus complex, and persistence of preœdipal imagos around the figure of the real mother.

<sup>11</sup> As Shengold remarks: 'For his deed (killing the Sphinx) Œdipus is awarded the city and his mother—symbol and the thing symbolized. . . . The

construe in the same manner the injunction upon Perseus to slay Medusa in order to save his mother from the lecherous Polydectes. This formulation also provides insight into Jason's preference for the Theban princess over Medea. The former is devoid of preœdipal characteristics, which mar the latter. Thus, in all three myths the ambivalently perceived preœdipal mother figure must be removed or destroyed in order to attain the œdipal victory.

The position of the preœdipal maternal imagos *vis-a-vis* the œdipal victory is then twofold and contradictory. On the one hand, they contribute to the victory; on the other hand, they obstruct it. This contradiction exemplifies the two-edged quality of ambivalence. These imagos are at the same time awe-inspiring and terrible, magnificent, and fearsome.

#### DEVELOPMENTAL PARADIGMS OF CONFLICT

In the above instances there is a conflict between œdipal aspirations and preœdipal fears. Another conflict present in the three myths also stems from the ambivalence of the maternal figures. Each myth contains a fantasy of incorporating an ambivalent maternal imago. The goal of incorporation is to make the incorporated object part of the physical self, but an ambivalent object must necessarily have negative, hateful qualities. Therefore, its incorporation must make the self negative and hateful. A conflict arises between the desire to incorporate the object and a desire to keep the self good.

As is well known, the desire to keep the self good exists at the earliest stages of ontogenetic development. The child only gradually tolerates the feeling of being bad or hateful. One never completely accepts this feeling, even as an adult. The conflict over this issue must then exist within each of the three myths. Since each myth represents a particular stage of ontogenetic development, the common conflict should assume the form appropriate to each maturational level.

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transition is now possible from the preœdipal relationship . . . to the œdipal relationship to the mother' (37, pp. 728-729).

Three versions of the conflict concerning the introjection of, or identification with, an ambivalent maternal imago epitomize different phases of development. They correspond to the conflicts over the fantasied incorporation of ambivalent maternal figures in the three myths. These developmental conflicts of *introjection* and *identification*, and their resolutions, serve as paradigms by which to understand the conflicts over fantasied *incorporation*, and their resolutions, in the myths.

1. The first experience that a male child has with the conflict surrounding the introjection of an ambivalent maternal imago takes place immediately after the stage of 'the purified pleasure ego'. At this time the ego is sufficiently strong to recognize an external reality and seemingly omnipotent beings in it. However, the ego is still fragile enough to regress easily to the undifferentiated stage of early neonatal life upon experiencing frustration. This regression manifests itself in the crying fits of six- to nine-months-old infants. Benedek writes of these age-specific and universal reactions to frustration.

The crying fit indicates a revival of the neonatal symbiosis. It is up to the mother to make an effort to re-establish the child's ego, and in doing so, she becomes an object of the diffuse, aggressive discharge. In the process of calming down, the infant expresses (projects) the motor excitement (a minimal part of it) onto the mother. This appears evident in the intense grasping, the unrhythmic, hasty sucking of the excited infant. Thus it appears that the infant has developed hatred for the object which he needs to establish his ego, his self, again.

In the next step of the process of being satiated or calmed down, the aggressive impulses disappear; they are 'introjected', and as a result of such introjections, we assume, the memory trace of 'bad mother'='bad self' is established. At this point I want to emphasize once more that when the libidinous state of well-being is replaced by a storm of excitation, the infant is returned to a state in which there is no differentiation between I and not-I, between the self and the external world. With the disruption of the relationship the mother is lost as

an object. In the process of calming down, the infant re-establishes his ego and resumes communication with the mother. With the memory traces of frustration, and with the accompanying diffuse aggression, the infant introjects his own aggressive impulses, which then become a part of his psychic organization. Thus, just as there are memory traces of satisfying, good mother and frustrating, bad mother, so are there also memory traces of good (satisfied) self and bad (angry) self. *By this the core of ambivalence is established within.* This is the psychic representation of the universal biological need for alimentation (for food and succor) (4, pp. 403-404).

Benedek shows that the lability of the emerging ego and its reaction to frustration induce the establishment of 'the bad self' secondary to the introjection of 'the bad mother' (more accurately, secondary to the introjection of the aggression projected onto the 'bad', frustrating mother). However, her description only hints at the vicious intensity of the feelings involved. The extreme weakness of the ego functions and the primitiveness of the impulses indicate the quality of this universal subjective experience. The infant at this time cannot communicate his experiences efficiently. The closest approximation to this experience in adult life is that of psychotic depression, *mutatis mutandis*, where the fury of hostility is directed against the frustrating introjected mother, and thus toward the self. Such an aggression may reach suicidal proportions. One can assume that the infant experiences such self-destructive impulses also. His physical weakness and primitive psychic organization prevent any physical damage, or, as Hoffer contends, the 'pain barrier' and 'libidinization of the body' prevent self-destructive activity by the child at this age (25).

2. The conflict of introjecting, or identifying with, a maternal object that has undesirable qualities occurs later in the life of the male child. The process is usually less 'total'. The introjection involves a quality of the object and not the object itself. Also the resulting modification of the self is less global.

During the phallic period of psychosexual development the male child partially introjects the phallic mother for her power, her penis.<sup>12</sup> However, at this time instinctual needs are so overwhelming that the sexual characteristics of the mother color all of her attributes. Hence, paradoxically, the introjection of the phallic mother's penis may also involve the introjection of her femininity. A conflict arises from this less restricted introjection. The male child wishes to feel powerful but also feels an abhorrence of being feminine which means being castrated. Accordingly both the concept of the phallic mother and the awareness of the mother's 'castration' must antedate the conflict—which would normally occur in the early phallic phase, approximately between the ages of three-and-a-half and five years.

Weiss described this sort of conflict and its resolution.

The male child identifies himself, within the limits of his capacity, not only with his father but in various degrees also with his mother. . . . At a later stage . . . the internalized mother representation is, in the course of normal development, re-externalized. To the extent to which this does not occur, the male individual maintains a feminine identification. However, in the case of re-externalization, a representation of a woman as a described love object develops, having not only characteristics of the mother but also of the individual himself. . . . It becomes quite evident that the internalized image of the original mother does not maintain its original features exactly, but during its stay in the ego it absorbs and integrates features and tendencies of the individual himself. Thus the object representation while included in the ego does not preserve its original features (42, p. 268).<sup>13</sup>

<sup>12</sup> The total introjection of the phallic mother's penis relates to the fantasy of being the mother's penis (28).

<sup>13</sup> Weiss believes the process of re-externalization of the maternal imago takes place 'during or after the latency period'. While this may be so to some extent, it would seem to take place also in the early phallic period, when the little boy becomes acutely aware of the anatomical differences between the sexes and desires to view himself as a male—i.e., intact, noncastrated and potent. The



From the above quotation, it is clear that the resolution of the conflict resulting from the introjection of the phallic mother, who is both powerful and feminine, occurs by giving up the internalized maternal imago and seeking that imago as an external object. Further, the sought object will contain features of the male child. In the specific conflict under discussion, the male child gives up the powerful, phallic, maternal introject and also her femininity, and this manifests itself in the seeking of a feminine object which has some of his own characteristics. Since both of these qualities are re-externalized it is unclear whether the object will be phallic or 'castrated'.

3. A conflict arising from identification with a maternal figure occurs still later in the normal development of the male child. This relates to the formation of the superego at the end of the oedipus complex, at about five or six years of age. Freud pointed out that the child identifies with both parents and that the identification with the parent of the same sex usually predominates, but that identification with the parent of the opposite sex is sometimes pronounced (19). In the male child this would correspond to the mother being the main object of identification of the superego. When this occurs a particular conflict forms.<sup>14</sup>

Grete Bibring describes this conflict as arising in manifest form from a familial situation in which the mother is dominant and the father is weak or absent. Usually the mother seductively concentrates her attention on her male offspring but even if she does not, the boy does not have an authoritative father and thus lacks the resulting dread for the father that

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issue of sexual identity crystallizes at this time around the phallic-castrated dichotomy and only later around that of being male and female.

<sup>14</sup> The conflict exists in any case to the extent that the male child identifies with the mother at all in superego formation. As this always happens to some degree, the conflict is universal, though usually latent. However, where the mother is the more powerful of the two parents, the conflict is manifest. As Freud pointed out, the choice of the superego identificatory object occurs on the basis of that object's *power* (19).

protects him from his own œdipal strivings. In such situations the boy identifies with the powerful mother who replaces the powerful father who would have protected him from the castration threat arising from his œdipal wishes. Bibring states: 'She [the mother] is, therefore, not only the object of this fateful love, . . . she becomes also a forbidding punitive image. . . . This is, in my opinion, the turning point in the boy's relationship to his mother who from then on represents an uncanny figure, the seductive castrator—whereas the father assumes in the boy's fantasy the role of fellow sufferer' (5, pp. 281-282). Bibring adds that regression to preœdipal positions takes place where this conflict is severe. Retrospectively this regression colors the maternal image in a negative (ambivalent) manner and in adult life the conflict leads to a particular orientation toward women that seeks to ameliorate as much as possible the anxieties and guilt attendant upon the conflict, if not to resolve it.

The conflict which exists between the young boy and his mother will be reflected later on in the disturbed relationship of these [men] to women in general: we find it expressed in the preoccupation with the 'dangerous, cold and cutting females' who seem to fill the world and it often leads to putting a premium on the 'simple, and thus safe and warm' women. Coupled with it we observe in such [men] a greater comfort in the company of men, since they appear to be less threatening. This uneasiness with women further accounts for sexual inhibition toward them, and for the frequency of latent or manifest homosexuality as an escape from dangerous objects: there is a marked inclination in later adolescence to flee anxiously from girls and to accept readily the homosexual seduction as the 'minor evil' (5, pp. 282-283).

Introjection of the mother as the predominant superego figure thus may lead to latent or overt homosexuality and the avoidance of women. This process is similar to that described by Weiss: an internalized maternal figure becomes re-externalized and is viewed as an object in the form of 'castrating'

women. Her fearsome and dangerous qualities derive from a particular characteristic of the child himself, namely his new and still primitive sense of morality, his newly formed superego. Weiss has also stated that partial or complete externalization of the superego in relatively strong egos results in a 'quasi-phobic' neurosis and that the same process in weaker egos results in a paranoid psychosis (43).

Weigert has described and explained the presence of masochism and self-destructive tendencies in the male raised in a maternally dominated family.

When the father is thrust into the background in family life, and all the ambivalence of infantile emotional life is concentrated on the mighty mother, there is no other outlet than self-destruction for the aggressive and destructive tendencies of the man, who remains bound in infantile fixation on the mother, or regresses to this stage (41, p. 368).

Thus, according to Weigert, the very dominance of the mother causes her to become an ambivalently perceived figure. The positive (libidinal) elements of this ambivalence cause the negative (destructive) to be reflected onto the self in the form of self-destruction. Weigert elaborates on this in terms of the superego or superego precursors. The ambivalently perceived mother becomes the allowing (good) mother and the prohibiting, punishing (bad) mother. The male child seeks the love of both. Since he already has a tendency to turn aggression onto himself, he easily identifies with the punishing, bad mother. 'Thus, the masochistic mechanism of depression begins, a mechanism that can go so far that the child dare not love actively, in order not to lose' (41, p. 369). Active aggressive loving in the form of genitality becomes dangerous because the more passive and narcissistic tie to the mother is in jeopardy. Hence, 'punishment of castration [is] accepted'.

Weigert goes on to describe what happens to a boy with this orientation but 'in whom all the libidinous forces are overstrung and concentrated on the phallic aim of deciding to

be a man. . . . [The] childish fear of the all-devouring power of the mother causes him to start back in terror before his own phallic activity. . . . Because he desires to remain the child bound irrevocably to the mother, . . . he hates his own procreative power. In order to turn the terrible, passionate woman back into the tender, good mother who cannot be lost in order to pacify her angry jealousy, the reflection of his own disavowed passion', he abdicates procreative genitality and espouses a castrated orientation. He thus fulfils the command of the internalized, punishing maternal imago (41, p. 372).

To recapitulate, the conflict in a young boy resulting from introjecting or identifying with an ambivalently conceived maternal imago occurs at least three times in his early development. *First*, at the period of incipient individuation in the latter part of the first year, the conflict of feeling the self to be 'bad' and the need to feel 'good'. (Resolution of this conflict results in self-destructive desires.) *Second*, in the early phallic stage of development, the conflict of feeling feminine and the need to feel virile and genitally intact. (The appropriate resolution is to seek a female as a love object.) *Third*, at the time of superego formation, a conflict centering around positive oedipal strivings toward the same maternal object who punishes (castrates) such strivings. (The resolution of this conflict is to see women as dangerous, to shun them, to obtain sexual gratification through homosexual means, to adopt a masochistic, self-destructive, castrated orientation.)

These related developmental conflicts in the male child indicate the ontogenetic bases of the myths of Œdipus and the Sphinx, Perseus and Medusa, and Jason and Medea. The developmental conflicts over introjecting and identifying with maternal imagos serve as paradigms for understanding the unconscious fantasies of oral incorporation in the myths.

#### ORAL INCORPORATION

The earlier discussion of the Œdipus-Sphinx myth established that it corresponds to a phase of psychic development when the

ego just emerges as an entity and libidinal orientation is predominantly oral-sadistic. There is a fantasy of total oral incorporation of an extremely archaic 'bad' maternal figure. Benedek describes the corresponding developmental condition where fusion of self and hated object results in self-destructive desires. In the myth, this corresponds to Œdipus 'becoming' the Sphinx which results in his self-blinding and abdication. When Œdipus destroys his eyes, those truest representations of the 'inner self', he destroys the Sphinx within him. He uses Jocasta's brooches in the act. Kanzer points out that the brooches represent the talons of the Sphinx (26). Thus the Sphinx again attacks Œdipus, and herself. This vicious fusion of antagonistic beings depicts the same conflict that exists in the young infant described by Benedek: the self desires to kill the hated introject and, in so doing, wishes to kill itself. The introject, perceived as hating and conceived as attacking, also attacks itself, as expressed in the Sphinx's self-destructive questioning and her ultimate suicide. The same qualities appear in Œdipus after his incorporation of the sphinx.<sup>15</sup>

The myth portrays in concrete terms the intrapsychic condition of suicidal depression, the more mature equivalent of the early conflict (17). Œdipus kills the incorporated object but does not completely destroy himself. This corresponds to the fantasy of many suicides: the self will survive after the suicidal act.

There is a death struggle between Œdipus and the internal and powerful Sphinx. As Kanzer states, 'The action of the play *Œdipus Rex*, as a whole, is a repetitious depiction of the duel between Œdipus and the Sphinx' (26, p. 247). The consequences of this battle follow the inner logic of the situation. Œdipus becomes powerless, and free; he is blind and no longer king, but he is free from internal domination: he wanders abroad after leaving Thebes. Formerly the qualities of power and inherent 'badness', representing the Sphinx within Œdipus,

<sup>15</sup> This interpretation of Œdipus's self-blinding supplements the often expressed interpretation of punishment for incestuous guilt.



existed together in Œdipus; now the qualities of helplessness and redemption representing the Sphinx's destruction, appear together.

The Erinyes, Sphinx-like harpies who persecute in revenge for matricide, hound Œdipus during his wanderings. Their persecution of Œdipus is paradoxical since he does not manifestly cause Jocasta's death either directly or wilfully, but the latent meaning of the myth provides several explanations. First, Œdipus did directly and wilfully kill a mother-figure, albeit not Jocasta. He killed the Sphinx, twice. Thus, the Erinyes punish Œdipus for the murder of the earlier, cannibalistic mother. Second, although Œdipus did not murder Jocasta, there is an unconscious equation between Jocasta and the Sphinx whom he did kill. Like the Sphinx, Jocasta gives Œdipus his kingly power, and also like the Sphinx, she kills herself because of Œdipus's answers. Further, as Jocasta's brooches symbolize the talons of the Sphinx, Œdipus does murder Jocasta through his destruction of the Sphinx. And so the Erinyes punish him for matricide. Third, the close resemblance between the Erinyes and the Sphinx indicates that they are equated. The Sphinx first threatens Œdipus as an external being, then as an internal one. Finally Sphinx-like creatures harass him, again externally. This sequence of events depicts the intrapsychic process described by Weiss in the second developmental paradigm where an internalized object subsequently becomes re-externalized with some modification along the lines of the ego's qualities. Here that object is the cannibalistic, 'bad' mother. The imago in the myth undergoes modification in becoming more benign: whereas the Sphinx devours, the Erinyes only persecute their victims.

As noted, a paranoid psychosis may result upon the re-externalization of a superego figure from a relatively weak ego. The Sphinx and the Erinyes do not represent actual superego figures; they represent 'archaic elements in the superego' (32). But as Kanzer (27) pointed out, the persecution of Œdipus by the Erinyes may be likened to a paranoid psychosis. So

here is a portion of the Œdipus myth that can be found not only in the second but also in the third conflict paradigm. In this instance the superego figure and the moral sense that characterize the third paradigm are both quite archaic, and the paranoid fear is also primitive. All this is consistent with the Œdipus myth corresponding to an early stage in ontogenetic development.

Œdipus comes to Colonus at the end of his life and dies by disappearing into a cleft in the ground. Only then are the Erinyes calmed. Here we see the wish to fuse with the primordial, preambivalent mother: a fantasy of returning to the womb, or, probably more correctly, a fantasy of mutual incorporation of son and mother. In the myth, it is a solution to the problem of persecutory externalized maternal objects; in intrapsychic terms, it is the ultimate regression to the state of selflessness and objectlessness, to the 'oceanic' state (21). The regressive defense against persecutory anxiety derives ultimately from hostile (ambivalent) feelings toward the mother, and characterizes the weak, primitive ego of the 'borderline' psychotic as well as the normal stage of ego development at the time of individuation.<sup>16</sup>

Thus, there are several aspects of the Œdipus myth that deal with problems attendant upon the incorporation of the 'bad', cannibalistic mother: the encounter with the Sphinx before Thebes and his triumph over her, Œdipus's ruinous reign over Thebes and his self-blinding and abdication, his wandering under the persecution by the Erinyes, and his death at Colonus. Œdipus incorporates the 'bad' mother, acquires her power and her malignancy, and then attacks her as an internal being. Just as his self-destruction is incomplete so, it seems, is the destruction of the 'bad' mother. She returns to plague him as an external, though more benign, being. Finally, to escape from these woes, he fuses with her less troublesome but more archaic form, thus abolishing his own existence as well as hers.

<sup>16</sup> Benedek states: 'If satisfaction does not follow, the ego (i.e., the function which maintains goal directed behavior and attention) regresses, the integrative field disappears. The infant (three to six months and older) now being in the throes of a "storm of excitation" has regressed to his earlier "undifferentiated state" of existence' (4, p. 400).

Parenthetically, the earth into which Œdipus disappears is not the only representation in this myth cycle of the primordial, preambivalent mother. A constant and powerful character is Fate, who ultimately causes all of Œdipus's woes. The concept of fate and destiny forms in earliest childhood and is based on the mother-infant relationship, at a time when the child experiences the distant, vague, and powerful force that comprises all things, or 'the world'. If the early mother-infant relationship is good, the psychic representation of this experience is called 'basic trust' (Erikson), 'confidence' (Benedek), or 'hope' (French). If the early relationship is poor we use the terms 'basic distrust', 'bad luck', 'pessimism', all of which appear in the Œdipus legend.

The myth of Œdipus and the Sphinx corresponds to the paradigm of the infant at the time of individuation; the Perseus-Medusa myth corresponds to the paradigm of the male child in the early phallic period, who views his mother as the powerful phallic mother. As stated, the conflict in this second paradigm revolves around the introjection of the powerful but feminine phallic mother on the one hand, and the desire to be virile and intact on the other. Perseus is in danger of petrification by the Medusa-head even after the decapitation and while the head is in his possession. In the language of the unconscious, *possession of the Medusa-head poses the threat of castration to Perseus*. It is obviously a symbol of power, of which the hero is desirous, yet it is dangerous to its possessor. The answer to this paradox is that the Medusa-head is a power-substance.

In discussing the properties of power-substances, Fenichel (10) calls them trophies. They give power upon incorporation; their relationship to their owners is somewhat ambiguous.

... The stolen bit of power is rather like a stolen dog, which out of fidelity to its previous owner may turn against the new one ... (p. 151). As intoxication can be followed by a hang-over, so can triumph be followed by an intensified fear of the trophy's continuing independent existence (p 159).

The castration threat which the Medusa-head continues to pose is an example of a trophy's 'disloyal' attitude toward its captor.

As the power-substance still retains the malignant qualities of its former possessor, including the malevolent attitude toward its captor, Perseus must beware of the Medusa-head as he previously had paid heed to Medusa. Thus, in psychological terms, the phallic mother poses the danger of castration but after her castration by incorporation that part of her still existing in an internalized state may still castrate. To a boy in the early phallic stage, castration is not only a grave narcissistic injury but also threatens transformation into a woman. Hence, incorporation of the phallic mother's penis brings on danger of castration and of becoming a woman by virtue of the castrative danger inherent in the phallic mother. Another reason why this sort of incorporation brings on the danger of castration and feminization is that it implies that the incorporator becomes like that which he incorporates. The phallic mother is a woman, despite her intense phallic nature; the incorporation of any part of her, including her penis, would mean that the incorporator would tend to become a woman. Since becoming a woman and a castrate is reprehensible to a boy in the early phallic period, a conflict results. In the second developmental paradigm, the solution is to re-externalize the feminine object and, in so doing, make it more like the self.

The myth represents this intrapsychic process of conflict resolution in objective terms: Perseus gives Athene the Medusa-head. In this highly condensed act he gives up the dangerous power-substance. The previously internal phallic maternal organ becomes re-externalized through an object relationship with the phallic mother in another form. Compared with Medusa, Athene is a much more benign and less inhuman representation of the phallic mother; and the Medusa-head is much less dangerous in her possession. This corresponds to the modification which the internal object undergoes upon re-externalization. The phallic mother is now more like the hero in her benignity and her humanity. However, she is still not

altogether human. This bespeaks the awe which little boys possess for their (benign) phallic mothers.

This same resolution of the conflict appears in another more subtle form. Perseus rescues a female object (his mother and Andromeda) three times in the myth. This appears to be a common variation of the fantasy of œdipal victory. The moral inferiority of the father-figure and the willingness of the mother-figure nullify the œdipal guilt. However, the particular form of the œdipal victory, the rescue, has an added significance. Edoardo Weiss (43) states:

The process of externalization, that is, the transformation of a part of the ego into an object representation, is often expressed in dreams and myths by acts of birth or by a symbolic representation of birth, such as acts of liberation (rescue) of a girl by a young man from an enclosure or from a dangerous situation. In mythology this act constitutes the first heroic act of a growing youth, after which he becomes a mature man. If we consider that an adolescent can assert his masculinity after he has externalized his feminine features, we can understand the deep meaning of the sequence; he frees a girl and consequently he becomes a masculine hero.<sup>17</sup>

Thus the rescue episodes of the Perseus myth represent the externalization of the internal feminine imago and establish the masculinity of the hero.

In the presentation of the second developmental paradigm, which corresponds to the Perseus myth, it is clear that the male child gives up the powerful, phallic object of the mother and her femininity through object relationships. The feminine objects are Perseus's mother and Andromeda. The phallic object is Athene. The former relationships take the form of rescues; the latter, the surrendering of the Medusa-head. Perseus does not lose all his power after the surrender of the Medusa-head.

<sup>17</sup> In this quotation Weiss discusses the process by which an adolescent male develops emotional rapport with women. Nevertheless, the explanation of the myth applies as well to the boy of the phallic period, when sexual identity develops.



Perhaps the rescue fantasies were sufficient to establish the power of virility. A more probable explanation lies in the fact that the myth represents a stage of ontogenetic development, the early phallic period, when figures other than the phallic mother are used as models and identificatory power objects. In contrast to this, the Œdipus-Sphinx myth commemorates a period of life when the mother was all-powerful and her loss meant true and complete helplessness.

### MOTHER AS SUPEREGO-FIGURE

The preceding discussion showed that the Œdipus-Sphinx and Perseus-Medusa myths correspond to the first and second developmental paradigms, respectively. We now turn to the Jason-Medea myth, which reflects with astonishing completeness the third paradigm where the mother is the predominant superego figure of the male child. In Bibring's description of this developmental conflict (5), the father is weak or absent. (Jason's father cannot even keep his own throne, which his half-brother usurps.) In the syndrome as Bibring describes it, the mother is aggressively seductive to the son who is passively stimulated by her. (In the myth Medea is by far the more aggressive of the lovers, while Jason passively accepts the relationship.) As the mother becomes the predominant punitive figure to the little boy, she appears most fearsome in regard to the high probability of his œdipal success. (In the myth Medea shows her dreadful nature just when Jason achieves his œdipal victory on becoming king and seeks to marry a princess.) The mother, as superego figure, becomes a castrator. (Medea kills Jason's children and causes him to lose his throne—both symbolic castrations.) In the syndrome, the son views his father as a fellow sufferer at the mother's hands. (Jason and Medea's father share the same fate; Medea murders their children.) In the conflict described by Bibring there is often regression to preœdipal positions which color the son's view of the mother. (In the myth the predominantly œdipal nature of Medea takes on a sinister, preœdipal shading.) In the syndrome the dominant maternal superego

forces the son to shy away from women. (Medea prevents Jason from marrying the princess.)

Even the 'dangerous, cold and cutting females who seem to fill the world' of the son from the familial setting described by Bibring receive ample representation in the myth: the women of Lemnos murder their husbands; Jason and the Argonauts must travel and endure many hardships on the dangerous ocean—a mother symbol; at several points in their journeys the Argonauts pass through pairs of clashing rocks and only narrowly escape them. Here is a graphic illustration in symbolic form of the danger of cutting females and their maternal prototype, 'the seductive castrator'. The clashing rocks represent the *vagina dentata*.

Bibring states that this syndrome, where there is great fear and hatred of women, leads to a particular resolution: the avoidance of women as libidinal objects and the assumption of a latent or overt homosexual orientation. This serves as protection from the anxieties and guilt of heterosexual love and also provides a mode of libidinal gratification, and it corresponds to Jason and the Argonauts solidifying their comradeship around the dangers of the ocean and their collective orgy at Lemnos. In the syndrome men are the safest objects; in the myth Jason's most positive relations are with the Argonauts.<sup>18</sup>

The third developmental paradigm also contains aspects of

<sup>18</sup> The above discussion of Medea and the third developmental paradigm bears some relevance to Jocasta. Stewart, in his paper, 'Jocasta's Crimes' (38), points out some hitherto unnoticed qualities in Jocasta as portrayed in *Œdipus Rex* by Sophocles. He shows that Jocasta actually engineered and provoked Œdipus's slaying of his father and knew of Œdipus's blood relationship to her when she took him as a husband. In other words, Jocasta was not passive but very active and powerful in bringing Œdipus to his oedipal victory. The resemblance between this image of Jocasta and that of Medea, the aggressive seductress, is clear. Furthermore, Œdipus gets power passively, by association with Jocasta, just as Jason did with Medea. Also Jocasta, in allowing Œdipus to be exposed upon the mountain at his birth, showed infanticidal tendencies just as Medea did. Further, as was shown above, there is a covert equation between Jocasta and the Sphinx, thus giving Jocasta a preoedipal cast, as Medea has. Thus, to some degree the same psychological constellation which obtains in the third paradigm also exists in the Œdipus myth.

masochism and self-destruction described by Weigert (41). This explains the otherwise paradoxical phenomenon of the Jason myth cycle: an unconscious wish-fulfilling fantasy of castration which underlies Jason's fall from power, the death of his children, and his own ignominious death. Bibring's formulation explains why Medea should visit destruction upon Jason who enjoys his œdipal victory. The myth pointedly describes Jason living for ten years in the state of œdipal triumph, while Medea continues to be benevolent. Only when Jason asserts his genital preference for another woman does Medea become malignant, and then the masochistic and self-destructive fantasy of the myth comes to the fore—in accordance with Weigert's formulation.

#### DEVELOPMENTAL HETEROGENEITY

The preceding discussion indicates that various episodes in each myth cycle refer to different ontogenetic stages. For instance, in the Œdipus cycle there are the episodes between Œdipus and his real but unknown parents and the episode between Œdipus and the Erinyes. The former refer to the fourth year of life and the latter, to the first year. Various aspects and episodes exist in this and the other two cycles which refer to disparate stages of development. This is most obvious in that elements from œdipal and preœdipal stages coexist within the same cycle. We might thus conclude that the myth cycles are rather patchy structures, made up of episodic elements which derive from diverse stages of development and deal with various, and probably unrelated, issues.

Following Arlow however, the thesis here is that myths, even complex myth cycles, are on the same order as other psychological phenomena, even the most complex. Thus analysis of myths should follow the same principles used in the analysis of symptoms, dreams, free associations, or works of art. All these products of the mind and its conflicts may attain high degrees of heterogeneity wherein the constituent components vary in their derivations. They are hardly chaotic in their organization however. Rather, psychoanalysis shows them to be highly integrated

phenomena that revolve around relatively few issues (that is, conflicts within and between the psychic agencies) and that attempt resolution of conflicts through the mechanisms available to the ego. These phenomena display in the very texture of their being the conflicts involved, their derivations, and the attempts at resolution. Psychoanalysis has elucidated this in other complex psychological phenomena. It may now do so in myths, and, more importantly, in myth cycles.

The *Œdipus* cycle has the brooding presence of Fate in the background inexorably influencing the course of events in a negative direction. As noted, this corresponds to the earliest imago of the mother, the primordial mother. When the experience with her has been significantly negative, pessimism and self-defeatism tend to color all later development. In essence, this is an early fixation which colors all the *Œdipus* myth cycle. It shows itself first in the oracular prediction that the *œdipal* strivings of the hero will reach fulfilment. In psychological terms, one might say that frustrating early mother-infant relations predispose to inadequate defenses against unacceptable impulses later on at the *œdipal* stage. The cruel hand of Fate, the primordial mother, shows itself again in the rendition of *Œdipus's* earliest childhood experiences. The binding, the bodily mutilation in the piercing of his feet, and his abandonment all refer to the earliest discomforts of the small infant—discomforts minimized by proper maternal handling. All this is, so to speak, a retrospective description of early infancy as seen from the orientation of the *œdipal* stage, colored by pessimism. This section of the myth does not correspond to the ontogenetic stage of early infancy, but, on the contrary, to the *œdipal* stage as demonstrated by the anxiety over *œdipal* impulses.

There is a confluence here in the myth cycle of the family romance and anxiety over *œdipal* impulses. Since in clinical cases the fantasy of not belonging to one's family often defends against *œdipal* anxiety, one may infer a defensive relationship in the myth between the two (29). The early separation of *Œdipus* from his real parents and his upbringing in a different, though equally royal, household occurs in the myth to assuage

the œdipal anxiety, as represented by the parents' anxiety. The foster parents also represent the parents of the œdipal stage.

A sharp turn in the Œdipus myth cycle takes place when the hero becomes increasingly aware of disturbance in his relations with his foster parents. This represents the growing awareness of œdipal issues in the child of about three-and-a-half years. These issues relate in vague and unsettling ways to the origin of children, ways that disrupt quite dramatically the relationship of the child with his parents and force him to view that relationship in a new, more 'enlightened' manner. The myth depicts this process of entering the œdipal stage by Œdipus's beginning to question his actual relationship with his foster parents. As this questioning tends to undo the ignorance of Œdipus, which has defensive significance in the myth structure, it represents a threatened breakdown of a defense. Accordingly, the hero leaves his foster parents' home. This corresponds to the avoidance of conflictual objects under the impending breakdown of defenses. The negative influence of Fate is the ultimate cause of the impending disaster, just as improper maternal handling predisposes to subsequent psychological woes. This breakdown of defenses finds symbolic form in the revelations of the oracle. Here is the blatant statement of œdipal strivings as embodied in the hero. Its naked formulation bespeaks a virtual failure of defenses. The hero reacts with horror and the myth cycle defensively regresses into a more primitive operation.

This regression, then, occurs in instinctual orientation as well as in ego functioning. It is a dual regression from which the myth cycle never again emerges. All subsequent mythical phenomena in this cycle bear the stigmata of an oral-sadistic libidinal orientation and of rudimentary ego functioning. This regression shows itself in Œdipus's heading toward Thebes instead of returning to Corinth. The hero returns to the site of his infancy to avoid incest and parricide, just as the mind returns to the impulses and ego functioning of its infancy in the corresponding psychic regression to avoid the guilt and anxieties of the œdipal conflict.

Tragically, the instinctual and ego regressions of an already



weak psyche do not provide adequate resolution of the conflict. The œdipal figures return in forms and situations highlighting defective impulse control and poor object relations. In the Œdipus cycle the œdipus complex itself becomes degraded into a series of dyadic relationships between the hero and both parents. The two encounters between the hero and each parent occur as the meeting of strangers. Thus does Œdipus meet his father on the road from Delphi to Thebes; thus also does he meet his mother upon entering Thebes.<sup>19</sup> In the myth cycle this evinces the most primitive defense mechanism of the ego—denial.

Besides the reduction of the œdipal configuration to several dyadic relationships, the tendency toward simplification of object relations is expressed in the murder of Laius. After that, the only significant relationship is with *one* parent, the original significant one, the mother. Killing the father is the hero's first act after the dual regression of the myth cycle has occurred. This act condenses two tendencies: 1, it partially accomplishes the still recent œdipal aspiration, and 2, it establishes a purely dyadic mother-child relationship. It is appropriate that this act occurs at the turning point in the cycle between œdipal and preœdipal functioning.

Even in a framework of an intensely inchoate psychological orientation, the myth cycle still retains the awe of the incestuous act. Hence, the hero needs power to accomplish it. It is here that the Sphinx comes to the fore as well as the fantasy of power acquisition. The preceding discussions have already elaborated upon this and the resulting conflicts which

<sup>19</sup> The third 'side' of the œdipal triangle, viz. the relationship of the father and the mother, also achieves regressive and primitivizing transformation into one of estrangement. In a version of the myth not described here, the parents vow not to have intercourse with each other (i.e., become strangers) when they learn that any future child of theirs will kill the father and marry the mother. They only have intercourse when Laius is drunk. Thus, they have their unwanted child. A sexualized edition of this story makes Laius a homosexual, i.e., not interested in heterosexual relations, unloving to his wife, and not wanting children.

attend the fantasy of incorporating the bad, cannibalistic mother.

Another facet of the regression to the oral-sadistic stage is the regressive transformation of the classical punishment of incest from castration to enucleation of the eyes. For vision is one of the most primitive libidinal partial instincts of the first months of life. Only later does it come under the dominance of the genital modality and also, perhaps, achieves some degree of autonomy. As genital mutilation is the appropriate punishment for incest, so is mutilation of the more primitive pleasure organ, the eye, its regressive equivalent.

Only the form of Œdipus's demise remains for comment. As stated, this death represents the intrapsychic process of ultimate regression to a preambivalent state of being. Inferred here also is a defensive regression at work. For the myth cycle states that this death is to escape the torments of the Erinyes, to placate them. The corresponding intrapsychic phenomenon occurs often in psychosis where the persecutory delusions and hallucinations themselves cause further regression into 'non-being'. It is significant that this development occurs often in those psyches already weak and ill-formed, prone to regression as a form of defense. This concept ties the very beginning of Œdipus's life with its end. In both, the primordial, preambivalent mother is dominant. The very being (imago) that has subtly but persistently caused Œdipus's suffering is exactly that being (imago) to whom he ultimately returns, with whom he ultimately fuses and becomes reconciled.

A similar line of reasoning applies to the Perseus cycle. There is an initial statement before the birth of the hero; he will kill his maternal grandfather (commit parricide). Therefore he and his mother are put into an ark. They end up in a distant household, where the œdipal situation unfolds with Perseus, his mother, and Polydectes. It is important to note that Perseus's infancy, like that of Œdipus, is colored by œdipal concerns. His father is Zeus, who is mighty, and distant, minimizing actual confrontation between the father and the newborn, but

œdipally perceived, boy. Furthermore Perseus's expulsion from his homeland takes place with his mother. There is no abandonment. In contrast to Œdipus's story, there is no retrospective negative coloring of infancy; it is itself an œdipal victory, for the boy has his mother all to himself. Hence this initial phase of the Perseus myth cycle corresponds to the œdipal stage of development. It is a fantastic version of early infancy as entertained by a boy in the œdipal stage.

The œdipal confrontation takes place in the palace of Polydectes. It is Polydectes who has the illicit sexual designs on Perseus's mother. Perseus, the hero, does not evince any such unacceptable desires, even though he embodies the œdipal strivings of the cycle. Here is a mechanism analogous to projection which takes the unacceptable impulses away from the hero and places them upon his adversary. Although the moral onus is lifted from the hero and placed upon the father-figure, the most pressing issue is the immediate conflict of wills between the hero and the rivalrous father-figure.

At this point the myth cycle takes a turn. A different, though related issue arises from Polydectes's initiative. He will bow to Perseus's demands if Perseus obtains Medusa's head. Behind this proposal is the issue of whether Perseus has the power (i.e., potency) to win out over Polydectes. The recourse to the phallic mother-figure is thus more a concern of the œdipal boy (hero) than of the paternal antagonist. Again projection finds representation in this myth cycle, to defend against castration anxiety in the confrontation with the father-figure.

The need to have a powerful and dangerous phallus is a primary concern of the immediately preceding stage of development, the early phallic period. The primary concerns of the œdipal period, sexual impulses and rivalry, have now become that of phallic-narcissistic potency. Implied here is regression from the œdipal (triadic) stage to the early phallic (dyadic) stage of development under the impact of castration anxiety. Confrontation between father and son over the mother has become confrontation between son and phallic mother. Such re-

gression is facilitated by the œdipal conflict having a strong phallic, i.e., rivalrous, quality as opposed to a more sexual, i.e., genital, quality. Even in the œdipal orientation, a strong phallic component is implied; that is, a strong early phallic fixation. Regression to a purely early phallic position due to castration anxiety thus becomes highly probable.

At this point the psychological orientation of the myth cycle corresponds to the early phallic period of development. The invocation of Hermes and Athene for help is an expression of this new instinctual position, for they are phallic gods.<sup>20</sup> Perseus does not call upon Zeus, the very sexual and royal god. He is a representation of the œdipal father, the cause of castration anxiety and defensive regression.

Earlier discussion describes the encounter between Perseus and Medusa, its psychological meaning, and the conflict secondary to it. Of importance here is the fact that Perseus enters immediately into the lists of œdipal combat upon acquisition of the Medusa-head and triumphs through its use. This indicates that the regression in the myth cycle is not only minimal but also reversible. The reversibility shows itself in the resumption of œdipal concerns and also in the renunciation of the Medusa-head. The specific discussion of Perseus's relation to Medusa shows in closer detail how and why the Medusa-head has to be relinquished.

In the Jason legend it was pointed out that one psychological constellation underlies the myth cycle in its entirety. This is the psychological orientation, described by Bibring and Weigert, that stems from a familial situation where the mother is the dominant parental figure and the father is weak or absent. The son's psychological orientation resulting from the resolution of his œdipal conflict under these conditions is characterized by a predominantly maternal superego, latent or overt homosexuality, phobic fear of women, regressive distortion of the œdipal

<sup>20</sup> Athene's phallic qualities have already been commented upon. Graves (22) points out that the early myths and cults of Hermes showed profound phallic aspects.

mother image along preœdipal lines, and severe masochistic and self-destructive tendencies. All find ample representation in the myth cycle. There is no other orientation due to defensive regression, as in the other two myth cycles.

However, there is a progressive shift in the myth, be it ever so weak and shortlived. It takes place when Jason attempts to leave Medea, when he embodies in the myth cycle virile assertion and active genitality. This is a strictly œdipal impulse devoid of secondary, preœdipal coloring that characterizes the rest of the myth. But by the inner logic of the myth, such strictly œdipal strivings cannot escape the strong passive-dependent orientation within the myth. Such a shift must be temporary and doomed to failure, as we have seen before.

Another shift does occur at this point but it is neither regressive nor progressive. It is not along the ontogenetic continuum but from a positive to a negative charge in the inherent preœdipal ambivalence of the myth. Up to this point, Medea's benevolent nature radiates upon Jason. Now, only her destructive influence comes forth. Correspondingly, Jason's fortune changes from consistent success to consistent failure. This indicates that the myth has taken on a masochistic coloring that ultimately gratifies self-destructive impulses. Weigert's formulation shows that the reason for the change is the reaction to pure œdipal strivings.

In summary, the three myth cycles show the effects of regression, though in three different ways. The first two manifest its effects in actual shifts in the ontogenetic stages which various parts of each cycle may represent. The third myth is homogeneous in respect to the dating of its various episodes. Irreversible regression has already taken place in the psychological orientation from which this myth cycle derives. Among the first two cycles, that of Œdipus shows two regressions, each to a yet earlier stage of development and both irreversible. That of Perseus shows only one regression and it is reversible. The regressions in the Œdipus cycle are both instinctual and ego



developmental. The regression of the Perseus cycle is predominantly instinctual. The first regression of the Œdipus cycle, that of the Perseus cycle, and the one inherent in the Jason cycle are all in response to the œdipal conflict.

### MYTH AND CULTURE

The role of mythology in psychic differentiation and in character structure is most important in the development of the individual and of his integration with the ideals of the community. Bruner says, 'In the mythologically instructed community there is a corpus of images and models that provide the pattern to which the individual may aspire; a range of metaphoric identity'. The mythology of a particular culture or society points the direction to the younger generation for solutions for the infantile instinctual conflicts. . . .

Anna Freud has pointed out how each society tries to fashion the younger generation in consonance with the ideals and goals of the particular society. Through its mythology, the society tends to induce a climate favorable to the realization of appropriate identifications. Every society interprets and reinterprets its history and its heroes in keeping with the need. What makes this technique so effective is the powerful, motive force of the childhood instinctual wish through the medium of the vicarious (unconscious) gratification which comes from identification with the hero and the myth. The path is prepared for identification and subsequent character transformations in keeping with the idealized qualities of the hero (3, pp. 386-88).

This quotation from Arlow suggests that the social function of the myth is mediated through its relation to the instincts and their gratification. The peculiar manner of resolution of universal instinctual conflicts marks a specific culture from all others; it provides the link between societal mores (i.e., morals) and ethnic character. To understand the three Greek myths from this point of view, the social and historical circumstances of ancient Greece must be considered.

About 2000 B.C., the Hellenic (Indo-European) invasions of

the Greek peninsula began. These northern conquering peoples came into conflict with Mediterranean folk. By 1800 B.C., the power of Crete already exercised considerable political and cultural hegemony over the Greek mainland and its mixture of peoples. About 1400 B.C., Crete fell as an empire and Mycenae of the mainland rose to dominance but was itself predominantly Minoan in its cultural style. Finally, the last great Hellenic invasion took place about 1100 B.C., crushed Mycenae, and put an end to the series of cataclysmic cultural changes that occurred in this relatively short period of ancient history and in this rather limited geographical area. The cultural elements contained in the conglomeration of indigenous peoples, Minoan dominance, early and late Hellenic conquests, all went into what eventually became ancient Greek civilization.

The indigenous peoples and the Minoans who later extended their rule over the mainland were matriarchal and worshipped the Earth or Mother Goddess. The conquering Hellenes were strongly patriarchal and worshipped the sky-gods, primarily Zeus. The mainland of Greece thus became the interphase where successive encounters between matriarchal and patriarchal forces took place, where they remained in a state of mutual conflict and interpenetration until the development of Greek culture reached a stage of relative equilibrium. These forces found expression in the Greek religion with its non-Hellenic matrilineal base in local, superstitious beliefs and customs and its patrilineal superstructure, the Olympian pantheon (24).

Bernice Engle believes, with some justification, that the hero myths of ancient Greece (in contradistinction to the god myths) arose during the extremely tempestuous period between the sudden fall of Crete as a power around 1400 B.C. and the last Hellenic (Dorian) conquest around 1100 B.C. (9). At that time cultural admixture had taken place to the extent that the expression of matriarchal and patriarchal orientations did not exactly correspond to political and communal distinctions. Nevertheless, these diametrically opposed orientations were still quite distinct as ideologies and were manifested in opposing

sets of customs, beliefs, and ultimately temperaments. Engle states:

... how tenaciously the mother cults persisted in Asia Minor and Greece, how deeply the worshippers of the Great Mother feared loss of fertility and death. They were concerned with birth and conservation of resources; they dreaded commercial and military expansion. Matriarchal influences predominated.

Such worship must have both appalled and fascinated Hellenic invaders. As they pushed down into Greece in ever larger numbers, bringing with them their dynamic god of light, Zeus-Father, they must have felt their onrushing vigor to be threatened by the mother's desire to hold her children and the children's desire to be held close to the fostering breast. . . .

But the old [matriarchal] gods die hard. Continually the mother-goddesses reappeared in places least expected. The conflict was long, the struggle complex (9, pp. 529-30).

Following Engle, we may conclude that the three hero legends under investigation originated during the period of most intense conflict between the matriarchal and patriarchal elements of the population in the Greek peninsula. Viewing the myths as vehicles for the integration of the individual with the ideals of his community, as Arlow suggests, it seems probable that these myths represent attempts at the individual's integration with the ideals of matriarchal or patriarchal communities within the context of the open conflict between the two.

The Perseus legend embodies the ideals of the patriarchal orientation. The hero is aggressive, resourceful, and brave—the ideal Hellenic youth. In general, men in this myth are active, potent, and dangerous. Women are, at best, formidable, but usually passive and weak. The gods, and also Athene, are patriarchal in cast.<sup>21</sup> The myth cycle idealizes a hero who conquers

<sup>21</sup> Much has been made in mythological studies of Athene's 'defection' to the forces of patriarchy. Before the invasions, she was one of the many forms of the Great Mother Goddess. However, with the drastic political changes in Greece after the Hellenic conquests, she became transformed into a warrior maiden. The story of her birth from the head of Zeus, without the participation of a mother, indicates how completely Athene became a patriarchal goddess.

through his manliness in the field of combat. In this way, the patriarchal forces of ancient Greece tended 'to induce a climate favorable to the realization of appropriate identifications'.

However, in the encounter with Medusa the cycle displays a timely concern about the matriarchal elements in the prevalent culture. For Medusa is a representative of the matrilineal base of Greek culture and refers to figures drawn from the pre-Hellenic culture of the indigenous population (24). At the time of incipient cultural admixture, the patriarchal elements of the population must have accepted at least some of the awe with which the matriarchal elements viewed the Medusa. Because of this, the Medusa and similar bogies presented a danger to patriarchal dominance. Accordingly, a myth that holds up a hero as the patriarchal ideal should also portray his triumph in combat against a fearsome matriarchal figure. The victory of Perseus over Medusa idealizes the victory of the patriarchal over the matriarchal principle. This desired triumph of one principle over the other first took the form of political dominance and later of cultural dominance.

The injunction of Polydectes on Perseus to kill Medusa and bring back her head embodies that same attitude found in pubertal initiation rites of so many patriarchal cultures where the youth must prove himself in a situation producing castration anxiety. His mastery of this castrative situation makes him a man. The myth cycle shows great economy in condensing this initiative aspect with the victory of the patriarchal youth over the matriarchal bogey. In one stroke the hero idealizes patriarchal virility and defaces matriarchal magic. The myth is both partisan (for patriarchy) and polemical (against matriarchy). Still, the power of matriarchal forces is recognized.

This myth shows how the identification with the hero harnesses the 'motive force of the childhood instinctual wish' to induce a stronger and more confident patriarchal attitude in the youth. For it uses the universal instinctual wish to incorporate the penis of the phallic mother to produce in the boy, through identification, an attitude of confidence and to pro-

mote the goal of virility, in regard not only to other, older men but also to women.

While the Perseus legend is patriarchal in orientation, the Jason saga is matriarchal. The divinities portrayed are consistently goddesses, all of them derivatives of the Mother Goddess. No male god appears. Even the more primitive denizens of the matriarchal spiritual underworld find expression in the Harpies. These are 'the Snatchers, winged women-demons, hurrying along like the storm wind and carrying all things to destruction' (24). Harrison shows them closely related in nature to Medusa. In the cycle mortal women are influential in affairs, such as the Queen of Corcyra. But they may also be savagely murderous, such as the women of Lemnos. Even if they are murderous, they are acceptable to men in principle and cohabitable in practice. The most clearly defined conception of women lies in the character of Medea. She is all-powerful and all-knowing. She brings life and death, fertility and childlessness. She is, in fact, the human incarnation of the Mother Goddess. Her ultimate immortality points this up. Her positive relation to the principle of matriarchy shows in her attempted murder of Theseus, that most sturdy and successful protagonist of patriarchy.

The Jason myth cycle is replete with references to matriarchal mores and customs. They describe a generally matriarchal world. Again and again the theme of human butchery by Medea appears. It refers to the custom of human sacrifice, thought to characterize the primitive stages of matriarchal culture and atavistic recurrences in later stages (24, 41). The ruse whereby Medea butchers Pelias actually portrays such a sacrificial rite not only in its early homicidal phase but also in its later development when animals (e.g., rams) substituted for humans. The motive Medea gives and Pelias accepts for such a procedure corresponds to that of the human sacrifice, namely rejuvenation. Early matriarchal human sacrifices were to ensure renewal of the vigor of the soil with each new planting of crops.

Another related matriarchal institution appears in the myth



and is of central importance. It is the role of the king in matriarchy. In this situation, the king ruled only as the queen's consort. Succession was matrilineal. The myth pointedly states that Jason rules in Corinth because Medea's family legitimately had the throne. Jason is the king because he is Medea's husband. Moreover, another quality of the matriarchal kingship comes to the fore. After a prescribed length of time, the king is ritually killed, possibly to ensure soil fertility, and the queen takes another man as husband.<sup>22</sup> Jason's concern whether Medea poisoned his predecessor on the throne assumes grave significance. For now Medea becomes a danger to Jason's kingship and to his very life.

At this point in the saga the hero changes his ideological coloring: he has been the passive recipient of matriarchal bounty; now he becomes an active partisan for patriarchal reforms. He seeks to divorce Medea, obtain a queen of his choosing, and establish a patriarchal state. From the matriarchal viewpoint, the hero becomes an anti-hero. The myth, as a vehicle of matriarchal ideals, has Jason fall from power amid shame and destruction.

This part of the Jason cycle indicates the concern of the matriarchal elements in the ancient Greek population over the influence of patriarchal ideals in the land. During the period of incipient cultural admixture when this myth cycle arose, matriarchists must have worried, probably with good reason, that ambitious king-consorts would use the patriarchal ideology to seize complete power. The matriarchal population must have viewed such an act as politically disastrous as well as morally and religiously heinous. It would be an act deserving of Jason's punishment. The cycle encourages the young Greek male to identify with Jason by gratifying through unconscious fantasy the universal wish to participate passively in the mother's omnipotence. Such gratification is the basis of male coöpera-

<sup>22</sup> Often this is the first young stranger to appear before the city. This aspect of the choice of the matriarchal king becomes significant in the *Œdipus* cycle.

tion in a matriarchal society. In this way the story strengthens the matriarchal orientation of males.

The legend derives from the shared anxieties and conflicts of the matriarchal males. For this reason it cannot ignore the inherent ambivalence these males must possess toward the system and the women who dominate it. Rather, the myth must express this ambivalence and attempt to resolve the resulting conflict. Thus upon identifying with Jason's rise to power through a matrilineal process, anxiety must inevitably arise over the full implications of such development, namely over the necessary sacrifice of the king-consort. Jason's turn to a patriarchal orientation is a mythical element with which the boy could well identify under the impact of anxiety.<sup>23</sup> Such an identification through fantasy, however, violates his most important moral value and so he must go on to fantasy a punishment for the hero. In so doing he not only relieves himself of guilt but also identifies with the punishing agent. Thus through the morally masochistic gratification derived from the unconscious punishment fantasy of the myth, the maternally dominated superego of the boy becomes even more intense and sure. The myth safeguards the youth's matriarchal morality against the seductive enticements of patriarchism, toward which all males are susceptible.

The *Œdipus* cycle has a definite matriarchal orientation. As in the Jason saga, it describes a world seen through matriarchal eyes. Neither gods nor goddesses populate this world. But its matriarchal sprites and bogies are very much present and figure in events. These are the Sphinx, the Erinyes, and Fate.

Harrison (24) writes of the Sphinx as a form of 'Harpy carrying off men to destruction, an incarnate plague'. She has mantic qualities as well, and these relate to her destructive questioning of *Œdipus* and other youths. Her Harpy nature is of particular importance, however; she is not only a destroyer

<sup>23</sup> The victory over the Harpies by Jason and the Argonauts early in the myth cycle may be considered a prodromal manifestation of an antimatriarchal orientation.

of men but an eater of raw flesh. These two qualities refer to a primitive stage of matriarchal culture when human sacrifice was an institution. Harrison shows the Erinyes to be angry, avenging spirits of the dead. They especially haunt the murderer of the person who died. Like the other bogies, they derive from the matriarchate and are generally related to the Harpies and Medusa. Indeed, the Erinyes appear in various forms, some of which have qualities in common with the Harpies and Medusa.

Related to these matriarchal spirits and bogies were the 'fates', each within a man, guiding his destiny. Harrison states, '... the idea seems to be that each man has a [spirit] within him, a thing that nourishes him, keeps him alive, a sort of fate as it were on which his life depends. [It is] something like [being] mortal, subject to, depending on fate. . . . It looks back to an early stage of things . . . when it was more a man's luck than his fate, a sort of embryo Genius' (24, p. 185). This concept is eminently applicable to the necessary relationship of *Œdipus* with the events of his life.

As the spiritual world of this cycle is matriarchal in cast, so is the human world. The personal relations of the main characters actually portray well-defined matriarchal customs. The king-consort often died a ritual death. The city and the queen took as his successor the first youth to appear before the city. A specific form of this custom had the old king and the strange youth fight to the death.<sup>24</sup> In the *Œdipus* cycle, *Œdipus* kills the king on the road, receives the city's homage, and the queen takes him as husband. Even though the myth cycle gives these events as spontaneous, i.e., nonritualistic, their sequence and significance show them as an exact duplication of a matriarchal custom of transition from one king-consort to the next. The ancient Greeks were not blind to this significance in the myth.

Another highly stereotyped matriarchal feature appears in *Œdipus*'s wandering abroad, self-blinded and helpless, depen-

<sup>24</sup> Mary Renault portrays this ritual combat in a brilliant and scholarly novel of ancient Greece (36). As she points out, the contest had only one rule: the king must die.

dent upon the charity of others. This represents the traditional conditions of the Galli, the serving priests of the Great Mother Goddess. They would cut off their own genitals in religious ecstasy. Henceforth they 'wandered through the country as begging monks, performing their ecstatic dances and scourgings, and breaking into prophecy in their ecstasy. The onlookers gave them presents and fed them . . . they were excluded from the masculine struggle for life. To be filled with the Great Mother, to be possessed by her, was the only form of life they desired' (41). Œdipus participates in yet another matriarchal custom. At his death, he enters the earth. Interment was one of the many religious customs which separated the matriarchal from the patriarchal elements in the ancient Greek population. The followers of patriarchy did not bury their dead but cremated them. The two groups expressed in this difference the essential contradiction between their theologies. In both customs, the dead go to, or return to, the place of the deities. But to one group this is the earth; to the other, it is the sky. At Œdipus's death, the matriarchal form prevails.

With all this, it cannot be said simply that Œdipus is a matriarchal hero. On the contrary, until the denouement of his life he acts in obvious contradiction to matriarchy. He kills the Sphinx, a blow against the matriarchal order. Later, the Erinyes punish him, not for his condition at the time but for his previous condition. But what in his previous condition deserves the punishment? Œdipus does not actually kill his mother. The avenging Erinyes thus do not hound him for that. Nor, from the logic of the bogies and the myth, do they punish him for incest and parricide. There is evidence that Œdipus's real crime is that he is a patriarchal protagonist. His incestuous condition and his parricide only highlight the fact that he is 'unnatural' and 'contrary to common decency'. It marks him as thoroughly bad. He is bad from any point of view, but especially according to matriarchal standards.

Devereux, in his important paper on the sociopolitical functions of the Œdipus myth, classified Œdipus as a patriarchal

hero, though perhaps too globally. He shows striking parallels between the story of Œdipus and that of staunchly patriarchal Theseus (8). Sophocles hints further at Œdipus's patriarchal tendency by portraying an active antagonism between Œdipus and Creon, Jocasta's brother. The brother of the queen in the matriarchate was her strong and permanent right hand, her executive. As the active male embodiment of matriarchism, Creon would naturally be antagonistic to the patriarchal king, and vice versa. Besides appearing in the punishment by the Erinyes, Œdipus's patriarchism also comes out in the plague on Thebes—another punishment of Œdipus. Sophocles describes it as a negation of all fruitful issue both in nature and in man. It is the loss of fertility. It is a matriarchal punishment for a crime that must be against the matriarchal order and, ultimately, against the Mother Goddess.

From all this we may infer that before the denouement, Œdipus is indeed a patriarchal protagonist and that he sets up a patriarchal state upon becoming the queen's consort, albeit through a matriarchal custom. This is precisely the act Jason attempts to perform. It must have presented to matriarchists a clear and present danger from the king-consorts during the time when patriarchal ideas became prevalent in the land.

Thus the most immediate cause of the punitive plague becomes clear. Upon assuming dominance over the state, Œdipus of necessity abolishes the ritual sacrifice of the king. From the matriarchal viewpoint, the soil must then lose its fertility; a barren plague must fall upon the land. Œdipus's real 'crime' against the matriarchal order and the Mother Goddess is his refusal to sacrifice his life for the common weal. He is personally guilty but the consequences of his crime are social.

In the Œdipus cycle, there is no direct mention of Œdipus's refusing to die for the good of the realm. His iniquity revolves about the murder of his father and his sexual relation with his mother. These latter crimes are manifested as the cause of his punishment. A question must arise: why do the crimes of incest and parricide appear in the place more appropriate to an offense



of kingly self-preservation? The answer lies in the above-mentioned ambivalence all males must have felt toward the matriarchal system, an ambivalence engendered in the social sphere by their inferiority and in the psychological sphere by the fostering of precœdipal modalities of gratification. The negative elements of that ambivalence would crystallize around the sacrificial death of the king-consort and would tend to make the matriarchal males receptive to the patriarchal orientation. However, in depicting a patriarchal protagonist in a matriarchally oriented myth, the evil of this anti-hero must be highlighted. It would not serve the purposes of the myth to accentuate an issue and an evil with which the matriarchal male would find some sympathy. The issue is resolved by substituting for the 'crime' of self-preservation the universal crimes of incest and parricide. Thus the patriarchal antagonist remains inherently evil and his reasonable unwillingness to die becomes a nebulous issue.

Devereux gives another explanation of the œdipal crimes in the myth. He suggests that the matriarchal orientation presupposes certain legitimizing observances in the manner of kingly succession. These are killing the old king and marrying the queen. However, the patriarchal thesis in the matter is: the son of the king becomes king upon the death of his father. The myth would thus hold that a matriarchally legitimate ascension to the throne by a patriarchal son would necessarily entail incest and parricide—consequences to be averted (8).

Whether the œdipal crimes of the myth cycle are defensive against facing even greater anxiety over total annihilation or, as Devereux asserts, a statement of the moral catastrophe of patriarchy, they serve a matriarchal end. The rest of the myth cycle also has this orientation. After acknowledging his guilt and mutilating himself in punishment, Œdipus gives up the kingship to Creon, the representative of the matriarchal order. Œdipus wanders in the same manner as the Galli, and with the same significance. He is henceforth a devotee of the Mother Goddess. The Erinyes hound him but, by the inner cultural

logic of the myth, they are justified in doing so as punitive representatives of the Mother Goddess. Finally, after cleansing punishment, Œdipus is like one of the Galli—passive to his fate and his death, ready to merge with the Mother Goddess. He does so and, in the doing, reaches the highest consummation of the matriarchal male. The career of Œdipus is that of the arrogant renegade who, through the process of purgation, reaches the heights of religious fulfilment, fusion with the deity.

Such a myth is a cautionary tale against patriarchy, as Devereux correctly observes (8). The political and cultural conditions at the time of the origin of the myth made the issues embodied in it grave indeed. It is a forceful story. Its impact lies in its use of vivid instinctual gratification on the part of the hero, both in the hedonistic and in the masochistic modalities. The instinctual gratification through fantasy induces a strong identification with the hero. This makes the tendentious qualities of the myth all the more persuasive. The universal male desires for incest with the mother and murder of the father and also the more primitive cannibalistic impulses toward the mother reach fulfilment through this myth. The intensity of the vicarious gratification of these impulses elicits a comparable degree of anxiety and guilt. The former must be calmed through fantasies of close contact with maternal figures; the latter must be assuaged through fantasies of suffering. As in the Jason saga, there is not only identification with the rebellious hero and his woes but also identification with the punishing agencies. The latter serves to strengthen the moral sense, even on the most primitive level. All this occurs in the fantasy underlying the punishment of Œdipus by the Erinyes. Anxiety and guilt disappear through the fantasy of death by fusion with the primordial mother.

Assuming that a real danger did exist within matriarchal states concerning the patriarchal and thus revolutionary tendencies of the king-consort and those other males who identified with him, this myth is addressed directly to the danger and to the males who would be susceptible to the influence of patriarchy. It not only shows the moral culpability of such a

position but also holds out a promise of true redemption through the Mother Goddess.

The three myth cycles reflect the political and cultural issues at the time of their inception. The conflict between matriarchal and patriarchal factions within the Greek population affects the content of the cycles not only in their general tendentious qualities but also in the details depicted. The partisan aspects of the myths derive from the general functions of all myths, i.e., to educate the population according to certain norms of conduct and values. This is done through identification with the hero of the myth. The instinctual gratification through fantasy induces and ensures this identification and thus effects the myth's persuasion for a particular ideology.

The Perseus myth cycle is a purely patriarchal myth seeking to establish virility and confidence in the patriarchal boys and young men, even in the light of the potency of matriarchal magic. The Jason legend is of the matriarchal tendency and seeks to show the value in accepting the matriarchal system and the evil in trying to overthrow it, as the patriarchism current in the land would suggest. The *Œdipus* cycle also has this moral. However, the Jason and *Œdipus* cycles are 'mirror images' of each other: The Jason cycle tells of a docile, matriarchal king-consort, who turns into a rebel against the matriarchal order and thus deservedly finds ignominy. The *Œdipus* cycle is of an arrogant and really patriarchal king-consort, who successfully rebels and sets up a patriarchal state but is brought low. With repentance he becomes reconciled with the Mother Goddess.

### SUMMARY

The investigation of the psychological determinants of three Greek myth cycles brings out that each had an episode in which a mother-figure is a source of power. The myth cycles are those of *Œdipus*, Perseus, and Jason; the maternal power figures are the Sphinx, Medusa, and Medea. The method of myth analysis used is Arlow's. In all these myths of acquisition of

power the id wish is to incorporate orally the mother. Each myth refers to a different ontogenetic stage: 1, Œdipus-Sphinx (incipient individuation in the latter half of the first year), 2, Perseus-Medusa (phallic period), 3, Jason-Medea (during superego formation).

In all three myth cycles there is a common conflict deriving from some undesirable qualities of the maternal power-figures. Thus the fantasy of oral incorporation is problematic in itself, for the self would also possess the undesirable qualities. In the Œdipus cycle, it takes the form of Œdipus's becoming inherently evil, necessitating purgation and redemption through suffering. In the Perseus cycle, the problem takes the form of the hero's being in danger of castration and feminization, causing him to give up the power substance. In the Jason saga, it takes the form of Jason's guilt over abandonment of Medea and his punishment. In all three instances, the form and resolution of the problem are appropriate to the ontogenetic stage of development each myth represents. The fact that ontogenetic stages are represented in each myth cycle is demonstrated, but the shiftings from one stage to another transpired as responses to conflict generated by the content of the cycles themselves.

Following Arlow, the myths are treated as socially educative mechanisms whereby the instinctual gratification inherent in the identification with the hero serves to promote the social values embodied in the hero's career. In the setting of the conflict between patriarchal and matriarchal factions of ancient Greece, the Perseus cycle promoted the patriarchal orientation. The Œdipus and Jason legends, however, propounded the matriarchal orientation for the male youth in general, and the king-consorts in particular. In these legends is found a special tendency to revolt against the matriarchate due to the influence of patriarchism current at the time.

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## Schizophrenic Blocking and the Blank Dream

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## SCHIZOPHRENIC BLOCKING AND THE BLANK DREAM

BY ROBERT ST. JOHN, M.D. (BRIDGEVILLE, PENNSYLVANIA)

Blocking is one of the clinical manifestations of schizophrenia in which a narcissistic withdrawal of the libido can be observed during the interview. Bleuler (1), who credits Kraepelin with first describing this symptom, writes that blocking 'is of fundamental significance in the symptomatology and diagnosis of schizophrenia. . . . All of a sudden, in the middle of a sentence or in passing to a new idea, the patient stops and cannot continue any further. Often he is able to overcome the obstacle by repeating the attempt. Another time he succeeds in thinking in a new direction. Frequently, the blocking cannot be overcome for quite a long interval; in such cases it can spread over the entire psyche, the patient remaining silent and motionless and also more or less without thoughts.'

In my opinion, blocking should not be used to refer to all interruptions in speech or periods of silence; for example, speech can be consciously interrupted and thinking can go on during silence. I shall try to give some of the characteristics of the silence in which I feel the patient is blocking. Blocking can most easily be discerned when it occurs in the middle of a chain of thought. For example, a schizophrenic patient was telling me her dream: 'I dreamt I was in a house and I saw—'. As she began the dream the patient's attitude was rather blasé and she in no way signaled the sudden stop. It was as if someone had suddenly and without warning turned off a radio. At other times I have noticed that blocking occurs in response to some external movement or action on my part. As I was listening to a woman who had been psychotic for years, she suddenly stopped talking when I tossed an empty cigarette pack away. An acutely psychotic young man was telling me his life history. I crossed my legs so that the leg closer to him was crossed over the opposite leg. He stopped suddenly, and when I asked

him what had happened, he told me I had 'blocked him out'. In vis-à-vis interviews with a patient, along with the stoppage of speech, the patient's face becomes expressionless and the eyes seem to drift away, assuming a glassy look. When blocking persists, the patient often turns the head and body away from the therapist.

I shall first examine blocking as a narcissistic withdrawal in terms of the changes that occur in libidinal cathexes. In his paper, *On Narcissism* (4), Freud summarized his position concerning narcissism and schizophrenia; he postulated that in schizophrenia 'the libido that has been withdrawn from the external world has been directed to the ego and thus gives rise to an attitude which may be called narcissism. But the megalomania itself is no new creation; on the contrary, it is, as we know, a magnification and plainer manifestation of a condition which had already existed previously. This leads us to look upon the narcissism which arises through the drawing in of object cathexes as a secondary one, superimposed upon a primary narcissism that is obscured by a number of influences' (p. 75). Further on he writes that in schizophrenia 'the libido that is liberated by frustration does not remain attached to objects in fantasy, but withdraws on to the ego' (p. 86).

Hartmann (6) points out that Freud's paper *On Narcissism* was written before Freud developed the structural theory; consequently, 'ego' as he uses it in this paper is not the same as 'ego' as we use it today. Moreover, Hartmann suggests that narcissism is a puzzling problem which needs redefinition in terms of today's structural theory, and he goes on to state: '... the opposite of object cathexis is not ego cathexis but cathexis of one's own person, that is, self-cathexis...'

All cathexes occur within the psychic apparatus, if not within the ego. When we speak of a libidinal object cathexis, we imply that the percept of the object is invested with libido; and it is by way of various patterns of motor discharge that we indicate to the object that he or she has been perceived and is cathected. In discussing the withdrawal of the libido from an

object, we are describing cathectic shifts and changes that occur and are going on within the ego itself. In schizophrenic blocking and states of withdrawal, I have been impressed with the patient's tendency to avoid confrontation. I therefore suggest that blocking implies that a patient not only stops talking but has lost interest in the object world.

Greenacre (5) described the importance of visual impressions in establishing body-ego image during the early years of life, and Elkisch and Mahler (3) extended Greenacre's concept by stating that distance perception (vision, in particular) seems to facilitate separateness from the mother's body and demarcation of the body image from its environs. Furthermore, in observing the interaction of psychotic children with their mothers, the authors found an overstimulation of contact and kinesthetic perceptions with an almost total elimination of distance-perceptual experiences. It would then seem that narcissistic withdrawal involves a relative decathexis of those ego perceptual apparatuses having to do with distance perception and an increase in the cathexes of those systems having to do with contact and kinesthetic perceptions.

Bleuler (1) quotes some remarks made by patients concerning blocking. One patient felt as if he 'died away'; another complained of 'tightness in his head as if his head were drawn together'; another described blocking 'as if someone drew a rubber sack over him'. A peasant woman said it seemed as if 'something was being pressed against my face and chest, it is as if my mouth were being held closed . . .'. These comments bring to mind the hypnagogic phenomenon, described by Isakower (9). Isakower also explained this phenomenon by referring to changes in cathectic distribution within the ego; he postulated a dissociation between the investment of libido in the body ego and the system perception-conscious. He saw in this phenomenon a regressive revival of ego attitudes which stem from the nursing situation.

In his papers on the blank dream and the dream screen, Lewin extended Isakower's concept. In 1946, Lewin defined



the dream screen as 'the surface onto which a dream appears to be projected. It is the blank background present in dreams though not necessarily seen, and the ordinary manifest dream content takes place on it or before it' (11). Lewin's findings add support to the proposition that cathexis of the visual perceptive system involves separation. In 1948 he said that visual representation in dreams is a manifestation of the wish to wake, and the screen itself represents the breast or wish to sleep (12). Not all blank dreams have a visual quality; in 1953 Lewin described nonvisual classes of the dream screen, some of which are composed of 'deeper tactile, thermal, and dimly protopathic qualities not easy to localize . . .' (13). Moreover, in the same paper, he described a form of dream screen in which some patients become part of or swallowed up in the oceanic feeling of oneness with the breast. This feeling of oneness or fusion with the breast represents a deeper regression than one in which the screen has visual qualities on which a dream may or may not be projected.

In 1954 Lewin stated: 'I should like to use the blank dream which represents the nursing situation as the concrete indicator of such a regression (i.e., to narcissism)' (15). He expounded further on this idea in 1955, when he wrote that narcissism has its origin in sexuality, but is a representation of an object relationship, and pointed out that sleep and death are equivalents of narcissism of which the blank dream is a concrete representation (16). If we, then, accept Lewin's hypothesis in regard to the dream screen, it would appear that it is not the ego nor the self that is cathected in narcissism; rather it is the preverbal, nonvisual memory traces of the nursing situation that are cathected.

I suggest that in blocking there is an analogous recathexis of the dream screen. That such a phenomenon can occur in waking life has been shown by Kepecs (10) who described a patient who felt a screen between himself and the outside world and who in analysis related this screen to his mother's breast. Kepecs found that this screen served a defensive func-

tion as it kept him asleep during waking life, and served as a barrier to his perception of reality. Several years ago a bright and highly verbal schizophrenic young man described to me how, during his psychotic episodes, reality seemed two dimensional; to him, the world appeared to be seen on a motion picture screen.

Lewin (11) felt that the visual component of the screen represented the breast on which the infant dreams while he is nursing. Spitz (23) argues that the infant does not look at the breast but at the face of the mother while he feeds. I would suggest that in the schizophrenic's narcissistic withdrawal, it is not the visual percept of the breast that is recathexed but rather it is the contact, perceptual and kinesthetic experiences of the nursing situation. I concur with Scott (21), who suggests that 'the mouth as well as the breast is represented in the "dream screen"'. 'Or put in another way', he continues, 'part of what becomes the ego as well as part of what becomes the object may be internalized and may appear in the narcissistic dream.' These most regressed states, then, represent a reviving of memory traces of fusion between an ego nuclei (mouth) and a part object (breast).

How can we explain the visual quality of the dream screen if it consists, as I suggest, of nonvisual memory traces? Helen Schur (20) pointed out how 'recall of a memory trace of a visual perception may include information of a higher order of abstraction acquired subsequently to the original perception'. In a similar manner, I suggest that the visual aspect of the dream screen is a later addition. That is, the pictorial aspect is a later accretion to the earliest memory traces from those areas of the body directly involved with feeding. The screen, then, would represent neither the breast nor the mouth, but the fusion between the two not totally within or totally without the individual.

In 1953 Lewin (14) stated that the forgetting of words implies a regression to pictorial thinking, and the forgetting of pictures implies a regression to memory traces associated with

feeding and located near the perceptive apparatus itself. In the schizophrenic's narcissistic withdrawal, as represented here by blocking, there is a decathexis of those ego functions and perceptive systems involved more closely with external distance and perception and an increase in the cathexis of those functions involved with perceptions from the body and its insides. This regression is an attempt on the part of the patient to regain, to revive, and to reunite with the blissful oneness of the breast and to deny the existence of an external object, the acknowledgment of which would give rise to separation panic.

Spitz in 1946 described anaclitic depression in infants, and his description of these infants is remarkably similar to these states of narcissistic withdrawal in schizophrenia. 'Then the weepiness subsided, and stronger provocation became necessary to provoke it. A sort of frozen rigidity of expression appeared instead. These children would lie or sit with wide-open expressionless eyes, frozen immobile face, and a far-away expression as in a daze, apparently not perceiving what went on in the environment' (22). Schizophrenics in such states of withdrawal talk often about their mother, but they talk of her not as a person but more as an omnipresent gratifier.

Charlotte has been a patient at a state hospital for twenty years; she is tall, obese, and sits daily on the ward staring off into space. During the first three years of my contacts with her, Charlotte would answer my questions to her with one or two words, saying she had no thought; however, gradually she has become more verbal. Recently, when I interviewed her, she told me the following about herself. She said that there are two of her. There is the dead Charlotte who sits on the ward and who is not real, and there is the Charlotte in the air in Queen Mod. Charlotte, who knows that her mother has been dead for many years, says that Queen Mod is her mother. Queen Mod rules the universe and is everywhere. She can feel Queen Mod speak to her on her body. She cannot see Queen Mod, but she says that I can. She says Queen Mod knows a way to end all starvation.

Charlotte in her way, and I in mine, are both trying to put into words what this state of blankness, this narcissistic withdrawal, is like. At the level of object relations, the schizophrenic and the motherless infant seem to be denying the loss of the mother by regressing to the state of hallucinatory wish-fulfilment. Hoffer adds to our understanding of the defensive aspect of these states in his discussion of negative hallucination which he defines as an attempt to gain relief through the temporary abolition of a stimulus and not by the abolishment of the mental representation of such a stimulus as occurs in repression (7). In a later paper he says that negative hallucination can be conceived of as a kind of sensory and affect deafness which functions by raising the threshold to stimulation. 'In infant psychology [negative hallucination] has been used to explain the affective experience of need fulfilment in a nonreal manner as if the instinctual drive had reached its aim on the body organ in conjunction with an hallucinated, not an existent object' (8). What on the surface, then, appears to be a longing for the mother, should be conceived of as the fulfilment of the longing for comfort, satiation, or bliss. Elkisch and Mahler (3) postulate that the psychotic child totally incorporates the mother; cathecting this inner image depletes the more peripheral receptors of cathexis. It is this introjected image to which the patient clings and from which he fears separation. However, I propose that it is not the image of the mother per se that is clung to, but the fusion with the mother. By clinging to this memory trace or introject, the individual depletes the peripheral receptors of cathexis, thus protecting himself from painful stimuli from without and within.

Yet such patients do cathect outside objects. Rochlin (19), in discussing loss in childhood, says that in states of narcissistic withdrawal, cathexes are still put out but toward inanimate objects which are not so apt to be lost. The infantile ego fixes upon a part of the object that it can have and hold. And objects which seem to be animated, changing, and unpredictable are converted to a lifeless state over which control can

be exerted. In therapy then, the schizophrenic will attempt to deanimate the therapist.

Elkisch and Mahler (3) write that although external stimuli can be easily denied or deanimated, endogenous stimuli, which are generated by physiological processes in the organism and which are very close to the instinctual drives, cannot be handled in this manner. These drives, 'which have a predominantly aggressive momentum', determine the psychotic child's concept of the self and through his projection his concept of the object world. The schizophrenic not only is afraid of eating the therapist up, but through his projection is afraid of being devoured by the therapist. In his regression to the fusion of breast and mouth, the patient identifies himself and others simultaneously as the hungry devouring mouth and the breast on which others wish to suck.

A schizophrenic patient frequently asks, 'If you took ammonia, would it kill you? I know ammonia eats your stomach out, doesn't it?'. These remarks I see as a graphic condensation of the above. The impersonal 'you' indicates a confusion between self and object, and what you eat from others in turn will eat you. In clinging to this lifeless breast-mouth introject, the patient protects himself and others from the oral sadistic forces which he fears will destroy not only himself but the world. However, in his defense of regressing to the state where he is fused with the breast, he annihilates himself and the object world, bringing about the very result he wishes to avoid—deanimation. Elkisch and Mahler state: 'Indeed, the endlessly repetitious preoccupation with quasi-animated machines, so obviously identified with dehumanized, devitalized, representations of his oral, anal, and phallic functions, the split-up ego-alien introjects, expressed this child's struggle for finding a self-identity and some self-orientation and integration of internal versus external reality' (3).

I submit that the psychotic individual's devitalization of his own needs and impulses is determined partly by the mothering care he received as an infant. Ritvo and Solnit write: 'In



the interaction of mother and infant, the mother serves as organizer and regulator of the child's instinctual needs. How she influences the balance between discharge and maintenance of tension may be critical for the child's ability to substitute ego aims for instinctual aims' (18). From his observations of schizophrenics and their families, Brodey (2) says that parents who have not resolved their own fears of abandonment cathect the child as part of themselves; the child is responded to as an as-if child, that is, he is only a person when he validates the mother's perception. The child must conform to expectation to prevent severe decompensation in the parent. Nonconforming behavior is punished by a real threat of abandonment or annihilation, as the mother, herself threatened with separation, clutches to her own image by narcissistically withdrawing. I would suggest that in a sense the psychotic child becomes the mother's transitional object.

In 1951 Winnicott (24) set forth the characteristics of a transitional object, summarized as follows: it is an object over which an individual assumes complete rights; it may be affectionately loved and cuddled or mutilated; it is unchangeable unless it is changed by the individual who 'owns' it; it must survive instinctual loving and hating; it must have some vitality of its own; it is found neither within nor without the individual; it is gradually decathected but not mourned, rather, it is delegated to limbo. In 1967 Yahalom said of a psychotic child he analyzed: 'the transitional stage becomes anchored in a concrete undifferentiated object . . . that serves as an image but not a symbol. . . . The disturbed child is continuously driven to search for a concrete image, a false sense of security which ineffectively stands for the ultimate safety he lacks (the absolute safety of a good mothering element as typified by the breast image)' (25). In 1966 Mahler and Furer wrote: 'The psychotic child does not cling to an adequately perceived whole person. . . . Instead . . . , the child clings to a greatly reduced, "burned-out" often deanimated pattern-symbol, a representation of the part object. It is not the mother he clings to but a

psychotically hypercathected, yet at the same time devitalized and deanimated concrete symbol which he substitutes for her—a psychotic transitional object to which he constantly resorts in an endlessly stereotyped fashion. This stereotyped gesture or object does not, as transitional objects do, facilitate object constancy. It serves instead as a psychotic fetish drawing all or almost all available libido and aggression upon itself, as if the psychotic child's life and death depended on it' (17).

If, then, as Ritvo and Solnit (18) state, the mother serves as organizer of the child's psyche, it appears that the mother of the psychotic child relates to him and thereby organizes him as if he were an inanimate transitional object. The child is used by the mother to gratify her needs, while the child's own needs are for the most part denied by her. Blocking or narcissistic withdrawal in schizophrenia could then be conceived of as a stereotyped act which stands for this mother-child relationship; by deanimating himself, the schizophrenic, in a sense, plays the part of the transitional object he was for his mother. In other words, blocking is a form of acting out in the transference of the early mother-child relationship. The schizophrenic identifies himself with the nebulous oceanic blank of the most primitive breast-mouth fusion and allows his mother to dream on him while he in turn dreams upon her, thereby maintaining a delusional state of satiated unity.

### SUMMARY

From clinical observations and from discussion of some of the literature I have suggested that blocking in the schizophrenic patient represents a narcissistic withdrawal, a regression to a state in which the preverbal nonvisual memory traces of the nursing experience are cathected. That is, schizophrenic blocking may be a manifestation of rapid regression to a blank dream state. This narcissistic withdrawal is fostered by a mother who has related to her child as if he were an inanimate transitional object.

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## Mental Retardation and Emotional Acrescentism (Deprivation)

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## MENTAL RETARDATION AND EMOTIONAL ACRESCENTISM (DEPRIVATION)

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When Dudley Potts was admitted to a state institution for the mentally retarded at age eleven his record stated: 'Mental Status: Imbecile; I.Q. 43. Highest grade: 1st. Expression dull, mouth breather. Incorrect answers to even simple questions. Father and Mother Mental Defectives.' Ten years later there is an entry in the chart: 'This is a dull, slow boy . . . he requires supervision. He does not enter into games, associates little with the other boys.' Twelve years after admission another entry reads: 'Moderately bright. . . . His work has to be closely supervised. He attempts to fabricate to make up for his lack of knowledge as well as his physical deficiency. . . . Inclined to be expansive. . . . Claims that he had been in the Institution 6 years and reached 5th grade outside.' Thirteen years after admission, there is an entry in the chart: 'Said he was sent here for playing truant from school', and fourteen years after admission: 'States that he is 15 years of age (actually 25 years), cannot give his date of birth. Oriented for place but not for time.' Another entry twenty-seven years after admission reads: 'Dudley was placcd on outside work. Talked of how happy he was to go out. . . . Employer complained about slowness and that he had to be with him constantly and tell him what to do (routine work). He also stated that Dudley resents to be told what to do.' It states that 'the employer was disappointed in patient, wanted to let him go same month (but the social worker apparently was able to talk him into keeping Dudley a little longer). He says he has done something and when he checks on it, it is not done. He may give one cow four times as much

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<sup>1</sup>I wish to express my thanks to Dr. Jacob Schneider for permission to use the patient's chart.

fodder as the cow should have and another will get none. Leaves some of them (cows) unfastened. Slow and sloppy, ten times as much time as should be taken. However, occasionally he can do job well and quickly. Employer feels Dudley is lazy. Most of the day he is half asleep.' The farmer returned the patient to the institution within a few months. But Dudley complained that he could never please the farmer who, he said, 'was constantly criticizing him and calling him names. He feels he would like to work for someone who is kinder to him.' A few months later Dudley was again sent to work outside the institution. The chart reads that he was 'very unsatisfactory, more lazy than incapable' at this second job. He was promptly returned to the institution. The authorities decided against sending him out to work after these two unsuccessful attempts. Though he did so poorly working for these two farmers, there are several notations in the chart, before and after the outside placements, that he was a good, dependable, steady worker in the horse barn that was run by the institution as part of the agricultural program and that he handled his team of horses well. On several occasions about this time he is described in the chart as 'quiet, does not mix well, seclusive, no interest or hobbies'. Thirty-seven years after admission to the institution (patient was forty-eight years of age then), a notation states: 'Age and long period of institutionalization speak against outside adjustment'. The decision was made not even to send him out on day work. But five years later—Dudley was fifty-three years old by now—we find: 'Last I.Q. 47. New chance at day work is proposed.' Apparently after that the patient received permission to go out on day work.

Besides these entries, a report by the Social Service Department titled 'Pre-Placement Summary' states: 'I.Q. 40. Religion unknown, committed through the poor laws. His parents were poor, slovenly people who maintained low standards of living, were unable to supervise patient. The ancestry as a whole is of poor people with low social standing. Alcoholism and promiscuity present in family history. Patient walked and talked

at 3 years of age.' It is not clear from whom this information was obtained, and we can only guess that it was written shortly before he was placed with the two farmers; that is, when he had been approximately twenty-seven years in the institution and was thirty-eight years old.

The statement 'religion unknown' and the lack of any interview with a relative in the whole chart suggests that Dudley was right in his insistence that all his papers were lost on his initial trip to the institution and that his religion was therefore changed from Catholic to Protestant. He also has a distinct memory of going to a party where spoiled food was served, from which members of his family died, before he entered the institution. He remembers and speaks about it often—how he went to the funeral parlor wearing a black tie and how he 'cried and cried'. A letter in the chart from a woman states that Dudley's mother died a year before he entered the institution, and there is a statement nine years after his admission that Dudley's grandfather 'did all the corresponding'. A letter from a funeral director states that he knew the family well, that he buried them all, and would like to give Dudley a dignified burial on his demise without charge. The letter sounds affectionate. He also states that he does not know the father's religion, but that Dudley's mother and her family were all Protestants. Apparently the letter was written in response to a question by the institution as to Dudley's religion. The letter was probably directed to the family's funeral director because there was no next of kin. We do not know when the father died or left; from the undertaker's letter it appears that the father was gone by the time he (the undertaker) got to know or to bury the mother and her kin.

When I saw Dudley first—he was then fifty-four years old—he was a middle-aged, short, slightly built man with a protruding abdomen, walking hunched over with a pigeon-toed gait, slightly bow-legged. His hair was very sparse and grayish. His skin appeared ruddy. His eyes were deep set, close to each

other and slitlike, slightly slanted upward on the outsides, especially the left eye. His nose, his mouth, and the shape of his head were not remarkable. His clothes were ill-fitting and sloppy.

We met Dudley by chance. We had bought a country cottage near a state school for mental defectives. Men to work in the garden were hard to find. We had heard that this state institution sent some of its patients out on 'day work'. Patients were assigned to persons applying for day workers. Each week we made a new application and a different man was assigned to us. They differed in age and looks, but somehow they all had the same disposition: slow, uncommunicative, grumpy when approached.

Dudley was no exception. As a matter of fact, he was harder for me to handle than the others. He showed more dislike for me than the other patients, and they all showed some dislike. When I spoke to him, he did not react at all, not even turning his head or his eyes to me. He did not speak except for an occasional grunt that was unintelligible. My husband was only slightly more successful with him, perhaps because he spoke louder, more clearly, and more slowly, or because Dudley had more resentment toward the mother-figure who had abandoned him. The only time Dudley came to life was when food was served to him. His face lit up and he grabbed whatever was to be had. He ate everything, but sweets came first and were devoured fastest. Before starting the dessert, he would ask: 'Do I get seconds?'. And then came the second portion and the request for a third. There were sweet midmorning snacks and midafternoon snacks besides the regular meals. But it was not enough. Very little work was accomplished, and only on my husband's request, never on mine. This was unsatisfactory. I asked the social worker in charge of day workers to send me a different patient who might work out better, but was told that in the middle of the season no other patients were available. The better workers all had steady jobs; that is, they worked for the same family every week.

So not by choice, but by circumstance, Dudley became our steady day worker. When he became aware that he was our 'regular' (he had by now spent nine or ten silent, grumpy, hungry days with us), he walked over to me and asked if it was true that from now on he would come to our place every week. He then said, 'Goody, goody'. He seemed pleased. From this time on he began to talk to me. He told me that he wanted me and nobody else to supervise his work, that I was a 'good lady'. He became quite talkative when I sat or stood by him while he weeded or swept the driveway. He talked of how meanly some of the cottage matrons had treated him throughout the years, how he hated the institution, how bad the food was, how noisy and argumentative the patients were at night, and how he suffered. He verbalized much anger against Governor Rockefeller because, Dudley supposed, he had given up the farm of the institution, so that Dudley lost his two horses. 'I am mad at him for that', he would state. 'He is no good.' He would repeat over and over again that he had no mother, no father, no brother or sister. Nobody ever visited him, nobody ever sent him a card, nobody cared. While he poured out all his woes, he did better work. The minute I left his side, though, he stopped working. Gradually Dudley became less grumpy and morose, and he would smile at times. He would tell me that our garden was 'very pretty' and so was the house. In the afternoon he would complain that soon 'the good day was over' and that he hated to return to the institution. He asked to stay over a little longer, 'a little, little longer', he would beg. He said repeatedly that he would like to live with us forever and was bitterly disappointed every time we told him that this could not be. He spoke in short sentences, often using the wrong word, for example calling a window box with flowers 'the frying pan for flowers' and a garbage pail 'a barron' (probably derived from barrel).

One day—it was in the second year of our association with him—he came running and skipping over to me. 'I knew it', he said, out of breath, 'I knew it. I knew I would find my room.'



He then pointed to a small room that was situated behind the garage and not in use. He seemed happy as I had never seen him before. He begged to be allowed to sleep there overnight. We just could not refuse his pleading. We approached the social service at the institution and received permission to keep him every week for two days, including one night. When Dudley was informed of this, he clapped his hands, went into an Irish jig, and repeated over and over again, 'I knew it, I knew I would get lucky'. He said that he really had a home now, that he had found a 'mommy and daddy'. From then on, Dudley was smiling, talkative, and pleasant, especially in my company, while he more or less ignored my husband. He still was quite demanding of me, never of my husband. He still wanted a great deal of food, as well as entertainment and many gifts. There was an amusement place nearby that he adored. Every time he slept over with us he begged to be taken there; when we took him, he looked at a mechanical rocking horse and said: 'It would be so good to sit on that horse'. He could not tear himself away. Finally, though, he decided against a ride because he thought he was too heavy for the horse. He loved to watch how, when you threw a coin into a slot, two dolls behind a glass window, dressed as ballroom dancers, would dance for five minutes. He called the dancers 'Mommy and Daddy'. He asked for candies, popcorn, marshmallows, popsicles while at the amusement place. He loved to look at such things as shining pins and rhinestones. He asked us to buy them for him and he attached them to his cap and shirt. He looked longingly at balloons, but decided against them because he could not take them back to the institution. He believed the other patients would puncture them immediately.

The only time he showed anger now was when we had guests and paid less attention to him. He showed it in his facial expression and said: 'You were too busy again; you did not give me my soda and cake on time'. Or he would say, 'I don't like all these people that come. They ruin my lawn, they ruin my flowers.' 'Send them home', he demanded. The

only thing he liked about guests was the fact that I introduced him as 'Mr. Potts'. He beamed and never forgot to thank me for calling him 'Mister' each time I did so. He then confided that it was the first time in his life he had been called 'Mister'. 'It makes me feel so good', he would say smilingly. The first time I introduced him he corrected me, saying, 'It's Potts, Dudley', evidently because on roll call in the institution they use the last name first.

It was in the beginning of the third year of our association with him that, when we were alone with him, he became extremely courteous to me. He would address me as 'Madam' or 'my good lady' and would pull out the chair for me, offer me bread, butter, toothpicks, ketchup, mustard, or paper napkins when we were out with him in a diner. He remembered that I had once said that I liked a certain type of straw for sipping cold drinks, and wherever we went he collected them for me. He handed them to me after leaving the diner, usually with a ceremonious little speech: 'I know you like them. I tried to get as many as I could. I could not take too many; that would not be nice. I hope you will use them.' He observed that my husband usually helped me out of my coat. Once Dudley rushed to be first, took the coat, and hung it up. He beamed. Later, he whispered guiltily, 'I hope he is not angry at me for the coat'. Next day he mused, 'I was lucky, I was faster than he; I took your coat'. He told my neighbor that he thought I was beautiful, that my clothes were beautiful. The neighbor finished the report by saying, 'In short, he is in love with you'.

Dudley now brought me many gifts—old dishes that he probably picked out of somebody's garbage can and all kinds of useless things that people had given him when he worked for them as a day worker. His gifts were always accompanied by a little speech in which he wished me to enjoy them and use them in good health. 'And make sure to use it and not just leave it in the cupboard', he would admonish me. Sometimes Dudley would say that he felt bad because he could not find a gift

for 'Daddy'. And he would giggle and apologize for having talked of him as 'Daddy'. At no time would he address us as Mom or Dad, though he often referred to us that way, mainly when talking to one about the other. Once when my husband drove away he said, 'Don't worry, Daddy won't be gone for long and I'll protect you. Just let any robber come in and I'll give him a kick in the shins. He would not get up any more.' Often he assured me that he would protect me against any evil force. He bragged about how strong he was and flexed his biceps for me or lifted big boulders to convince me of his strength and protecting powers. When my husband did not come home exactly at the time Dudley expected him, he would muse, 'I hope he had no accident. The roads are so dangerous; they drive like maniacs.' Once he said, 'Kennedy was a good man. He got killed. I hope Daddy is not going to be killed. New York is full of bad people.' I saw him walk back and forth in front of the house one day, wringing his hands agitatedly. 'He is not back yet', he would say over and over again. He reported a dream: the lake rose, entered his room while he was asleep, and he drowned.

This was Dudley in the third year of our association. He seemed to be so full of spirit and so well that I thought he would be able to learn such simple tasks as differentiating left from right, or the days of the week. When I suggested them, he looked at me in amazement and dismay for showing so little understanding and said: 'Here I am having such a good time the first time in my life and you want me to learn'. The pleasure principle had not yet given way. I realized that I had made a mistake in trying to push him into something he was not ready for; I never tried it again.

Food played a less prominent role now. He told me again and again that I made the most delicious sandwiches, but he now never ate more than three for lunch. Once, to our great amazement, he responded to my giving him a large portion of ice cream by saying, 'It's so nice that you always buy my favorite vanilla ice cream, but you really don't have to give me

that much'. This was a remarkable change from earlier days.

It was also in the third year of our association with Dudley that an American Indian came to our house, offering garden chairs made on her reservation. She spoke to Dudley. Probably in an effort to sell, she described the primitive conditions on her reservation, the need for better housing and schools. Dudley listened to her and then described his hardships to her, saying, 'I can't even sleep at night. The other men talk and cough and walk around. They make noise and they steal everything from me.' In spite of this sad tale, he appeared quite cheerful. He explained to me that he told the Indian woman his sad story so she would not be so sad about her own life. The Indian woman left, expressing feelings of pity for him. Dudley took the chairs we had purchased from her, clowned about, putting them on his head to show off his strength, then finally placed them under a big tree. He called this area his 'Indian Terrace'. Later, as his vocabulary grew, he renamed it 'Indian Territory'.

At the beginning of the fourth year of our association, I told Dudley that unfortunately the amusement place had gone out of business during the winter. He consoled me, saying, 'Don't be unhappy, Madam, I don't miss it. No more of that kid stuff. I am a man.' He indicated that he would rather go to the stores to shop for clothes than to the amusement place. The clothes that he became interested in now and which he bought had to look exactly like those of my husband in color and style. 'Yes, Sir, someday I'll look just as dandy as you', he declared. He would ask me if his clothes now were 'just as fancy' as my husband's and if I really liked them. Once he asked me, 'Who has better clothes, he or me?'. He bought a ring and a pocket watch and chain just like my husband's from money he had earned from day work. 'My ring is an initial ring, but it looks almost like a marriage band.' He went to a great deal of trouble to persuade the blacksmith in the institution to cut him a little gold-colored square metal piece that he attached to his watch chain (his Phi Beta Kappa key). He now liked

to eat fish, my husband's preferred food, which he had detested all his life. He would often sing or whistle or joke or go into an Irish jig when something pleased him. He was quite talkative now. He told our friends and neighbors how happy he was now that he had found a 'mommy' and a 'daddy'. He told us how kind and good his cottage matron was and how he had to protect her from those 'rough, fighting fellows' in his cottage, how often he laid down the law and broke up fights between them when they would not listen to the cottage matron. 'She's a good woman, and I don't know why they give her such a hard time.' Then he would add, referring to their degree of mental deficiency, 'They are just low-grades, that is all'. There was disdain in his voice. He now produced happier memories of bygone days. 'I loved my two horses, I shined them up, I took them to the parade of the firemen, I was proud of them.' Dudley would blame Rockefeller quite gently now. 'That Rocky, he took my horses away.' There was no venom in this statement any more.

It was in the fifth year of our association with him that he turned from the family setting to the outside world. We had not seen him for four winter months when we called for him at the institution, though we had kept in touch with him through cards and gifts. My husband asked him how he had been during the winter and he answered, 'Very well indeed, Sir, and very proud'. To my husband's question about what he was proud of, he responded, 'It's just a feeling inside, a mighty good feeling, though'. Then he went on to tell us how many friends he had made in the institution lately. He named men who work in the blacksmith shop, in the carpenter shop, attendants on duty in his cottage, and other institution personnel. He told us that one of the men had promised to take him 'out' for a few days to visit his wife and children, 'not for work, just as friends, would you believe it?', he said happily. Then he added, 'Of course, I will help his wife with the dishes'. When the institution did not give him permission to visit, he was quite unhappy, but he took it in his stride. 'Would you believe it',



he said, 'they would not let me visit because they are afraid I would run away. . . . I guess that's the way they run the institution and I can do nothing about that. It would have been so good to go on a vacation, the first time in my life.' Later that day he asked me if I was afraid he would run away. I answered that this thought never entered my mind. He beamed. 'That makes me very happy', he said.

'I like people', he would often say, and, 'I like to talk to people'. He would talk a great deal about his two friends, Pete and Joe, who lived in the same cottage with him. 'They are good friends; we trust each other. We are high-grades, not low-grades like the others. We go out on day work; they don't. We make money. That makes them jealous. They steal from us.' He would ask us to buy frankfurters, soft drinks, and popcorn so that he could have picnics on the institution grounds with his two friends on Sundays.

More and more often he would talk about our friends and ask about them. He showed no further anger on their arrival; instead, he was pleased to see them and proud when they made small talk with him or brought him little gifts. Once, holding such a gift to his chest, he said radiantly, 'It makes me so happy'. Our friend pointed out that he had not yet opened the gift box and had not seen or approved the gift. Dudley replied with dignity, 'I don't have to see it. I know when you give me a gift that you like me, and that makes me happy.' Often, after receiving a gift from some of our friends, he would whisper to me, 'See, three gifts, three people who like me'. He would say, 'I told the attendant in my cottage that you are like Mommy and Daddy to me, and your friends are my friends too. I am polite, I have good manners, that's why they like me, and I am full of jokes.' When our friends told him that he kept the garden neat and clean, he would beam: 'Yes, I know, Dudley is a good man'. He asked permission to pick flowers, and then gave them to our neighbors and friends. Some he took home for the cottage matron and the woman cook in the cottage; others he picked for the dining room table in his own cottage. 'To make

it look pretty', he said. He asked us repeatedly to bring him stamps, for he wanted to start a stamp collection.

While a year earlier he had loved to talk to the seven-year-old son of our friends, he now treated him quite condescendingly. Instead, he tried to associate with a fifteen-year-old neighbor's son and this boy's friends. Now Dudley stopped going in for the sedate clothes of my husband, but bought instead 'sharp' clothes, a red shirt, red socks, a white shirt with 'real gold stripes', and loudly flowered ties, outdoing even the neighbor's son. He would buy hair pomade and men's cologne. He would complain that the barber in the institution cut his hair too short. 'Longer hair is more stylish, and I like a wave in my hair.' He prided himself on taking a shower as often as he was permitted. For quite a while he had been careful of his personal hygiene. Instead of toys, he now was interested in transistor radios, cameras, record players, field glasses, slide viewers. Dudley made a very specific request. 'I know you will give me a Christmas gift. Could it be a camera? But make sure it has flashbulbs and color film. Buy it only if it is not too expensive for you. I feel bad that you spend so much money on me.' He acquired field glasses to watch the birds and the boats on the river. He bought himself a record player and many records from his day work earnings. 'The jazzy kind', he would explain, 'are best'. He surprised us by knowing the names of Caruso and Galli-Curci. The fifteen-year-old neighbor's son walked around with his radio in his pocket, the radio blaring away. Dudley did the same. It was hard for us to make him realize that this was annoying to us. 'Johnny does it, why can't I do it?', he would complain.

He now surprised us with much new knowledge that he had acquired. On a drive with us, he read aloud a sign, 'Bowling'. 'Let's go there', he said. When we questioned him, he explained that for quite a while he had been spending his Sundays sitting under a tree, trying to learn to read. He read the alphabet in block letters with one or two mistakes, then became embarrassed and said that learning to read (to sound

out words) was too hard, that he would rather work with his hands. He showed us proudly that he knew his right hand from his left, but he refused to tell us how and from whom he had learned it. He spoke of the door of his room being ajar 'about one or two inches'. He said that when he cut the grass he never started from 'the center' and he left 'a few feet' on the outside to be cut by hand. He also spoke of the 'base' of a cement fence. He surprised us by suddenly being able to read time correctly. Before this, he always had faked reading time. He suddenly knew the days of the week and understood that holidays can fall on different days of the week, something that I had tried in vain to explain to him a few years earlier. He showed off with big words: 'I know what a tornado is. Like a hurricane, nothing but a big wind. But a volcano, that is different; that is a high mountain that spits hot mud. Sometimes people who are close by get killed by it.' He now used such words as 'impossible', 'important'. He spoke of being 'transferred' from one cottage to another and showed pride when praised about his vocabulary. Once I asked him to untangle the water hose. Later I asked him if it had been a difficult job and he said, 'Not at all, Madam', with a straight face, 'I cut the hose up like spaghetti'. He giggled happily, hoping he had fooled me.

After work he would join us in the garden. He would sit down in a comfortable chair, his feet stretched out, puffing on a big cigar and blowing rings into the air. He would make conversation. 'Well, Sir', he would say to my husband, 'did you hear that they moved the Statue of Liberty out of the Island in the ocean?' He would shake his head in mock concern. 'Things nowadays aren't the way they used to be. People aren't the way they used to be. . . .' When we laughed he was delighted. 'I fooled you, didn't I?', he would giggle. 'I am a box of crackerjacks, ain't I?' He would then spin another yarn. 'You know where I went last week? I took a jetliner to Paris. A beautiful city.' Or, 'The other day a friend of mine picked me up for a ride to Texas. We had a great time there.'

Then he asked earnestly how long it takes to fly to Paris or to Texas, or if one can get there by car or boat as well. He added sadly, 'I know I'll never get to all those places'. He gave us a riddle: 'What do a she-monkey and a he-monkey do when they are alone?—monkey business'. Or, 'Do you know an animal that is as big as your foot but is stronger than a man? It's a chipmunk. It can crack a nut with its teeth, but a man cannot.' He asked us to take him to an airport. He admired the small private planes on the ground, looked into the cockpit, and said, 'Just like a big car or a bus'.

He had always watched television and listened to the radio without learning much from it, but now he eagerly gathered a great deal of information from these media. He would tell us news he had heard in the morning over the radio, especially news pertaining to New York, where we live. He became very much interested in this city, wanted a description of the streets, and was delighted to see Rockefeller Center on television. He imagined that we live in a skyscraper in a penthouse with gold and silver rugs and curtains and that we overlook the whole city, 'watching all the parades on Fifth Avenue'. He asked many times to be taken to our city dwelling, though he regretted that we had to live in a city with so much crime. 'Killings, killings every day, it's too bad', he would say sadly, 'too many hoodlums, too many hobos'. We remarked on his vocabulary and asked him what a hoodlum was. 'A wild guy, a bad one', he replied. Once he said, 'If I were Rocky [Governor of New York], I would let people get free [release from the institution], let them do what they want, but if I would catch anybody doing something wrong, oh, boy, would I get him'. Once we took him to the movies. Two adolescent girls were sitting next to him. He was delighted when they talked to him, and he spoke proudly and excitedly about this on the way home. He said talking to the girls was 'more important' than watching the film.

He appeared interested in a pretty young waitress in the diner to which we often took him. He started to order his food

from her himself, while previously we had to do the ordering. When we joshed him about the young waitress, he blushed and grinned, saying, 'She's too young for me, and anyway, I don't want to go too far with her—just polite, that's all, otherwise it might be trouble'. On a later occasion, when the same pretty young waitress spoke to him, he blushed and whispered to us, 'I wish she would go to a dance with me'. My husband pointed out that the waitress wore a marriage ring. 'O.K.', he said, 'I wouldn't mess around with a married woman. I don't want to take anybody's wife away.' Nevertheless, the idea of taking the waitress to a dance came up later. He told us that he danced with the 'girl students' (apparently social work students), 'coeds' as he called them, in the institution. Some of them were married. 'They danced with me, why shouldn't she?', he asked. Then he went on to tell us that he had heard of a man who had fifty wives. 'That would be very, very nice.' He smiled broadly.

Dudley no longer has the slow, dragging, hunched-forward gait of the patients in his cottage. He walks fast, erect, with a spring in his step. When somebody complimented him on his work in our garden, he now said in a matter-of-fact tone, 'I know I do good work, thank you'. He mingled more and more with the employes of the institution and was proud that they treated him as their equal and not as mentally retarded.

He now did not demand my constant presence and supervision while doing routine chores, such as sweeping the driveway or picking leaves. On a cold and windy day he told me that this was no weather for ladies and that I should go into the house. Food became less and less important to him. One day Dudley announced that he was going on a diet because 'it's not good to have a belly', and in fact within a few months he lost a considerable amount of weight, no longer appearing obese. (My husband had been successful in reducing his own weight by dieting.) One day he said that we were spending too much money on his midmorning and midafternoon snacks, so that he now brought his own cake for these times. He bought it with money he had earned in his day work. It was about this



time that he told us that he felt bad about the fact that we always paid for his meals at the diner and he would much rather pay for all three of us. 'I would like you to be my guests', he insisted.

When his best friend in the cottage suddenly died, Dudley became quite depressed and stayed that way for several weeks. He said that his 'friend is all the time on his conscience'. He described the funeral, how he cried, how the dead friend's sister sobbed and leaned her head against his shoulder during the funeral services. He then said that next week there would be a party in the institution and that he would ask his dead friend's sister to dance with him, saying, 'That will make her feel better'. Later on he told us that he had decided to act 'like a brother' to this girl, so that she would be less unhappy over her loss. Once he used the word 'guilty'. He explained it to us on being questioned. 'That means you are bad. You never get away with things. I saw a movie of the FBI. They always catch the bad guy, and that is good.'

Once during the fall of the fifth year of our association with Dudley, we had to leave town for a few weeks and decided to close up the country place. Dudley was distraught. His first reaction was, 'I kind of felt that would happen. I felt it in the air.' Then he turned away and said as if to himself, 'But I didn't do no wrong, I sure didn't'. He was quite unhappy that afternoon and asked again and again if he had to remove his belongings from the room he occupied when he stayed with us, and if he had to 'quit'. The next day and after much effort on my part to explain to him that our leaving town was in no way related to his performance, he quieted down. 'Now I'll have more time to work on my church. It will be done for sure before Christmas. It will be beautiful.' He had built a church a year earlier and another one two years earlier. The first one that we saw was a primitive little box built of old discarded wood. The second one was larger and better built. It had openings representing windows and a door. There was an altar. It was painted in white with green dots. He asked us to

buy him angels and a giant-sized Rudolf the Red Nosed Reindeer in styrofoam for the church decoration. The third church, which he built in the fifth year of our association, was quite different. It was built much more intricately. The church was surrounded by a fancy fence and gaily painted in red. There were steps with banisters leading to the door, and real glass windows with curtains. Inside there were an altar and pews. He tried to persuade a radio repairman to help him put a loud speaker in the church so that he could play Christmas carols on his record player in the house which could be heard when the church was placed outside on the front lawn of his cottage in the institution during the holidays. He also wanted to place electric wiring inside the church so that it would light up. He begged us to buy him 'real people, married people with children' for the new church. 'A church is no good if there aren't real people in it.' He also asked us to buy 'a manger and all the animals as well as a bell—something like the liberty bell with the crack, you know'. He called his work on the church his 'biggest hobby' and said that it was his 'brain work'. He showed considerable pride in his accomplishment. 'Pretty good for a man who is supposed to have half a brain.'

He developed other interests. He would look again and again at children's books with pictures explaining missiles and space ships, and another one on prehistoric animals. Another children's book that he found in my bookcase dealt with birds and showed different species in colored pictures. This, too, fascinated him. He now became an expert on birds. He watched them with his field glasses and recognized them by pictures as well as by their singing. He outdid us in this. He also developed a love for the outdoors. In the beginning of our association he had often stated that he hated to look at 'the same old trees and the same old grass', but now he gradually developed a distinct pleasure in nature. He admired a rainbow. 'It's so beautiful', he said pensively. 'But there is no pot of gold at the end of it. At least not for me.' Or, 'Look how beautiful the lake looks today. It's just like a shiny mirror.' He would admire the

beauty of a flower. 'It's lovely. A lady should wear it in her hair.' The bright colors of the changing leaves interested him. Once in the fall of the fifth year of our association he took a red leaf, a gold-colored leaf, and a green one, put them in the palm of his hands, and said to me, 'Look what I have, aren't they beautiful like a rainbow?'. He would make many jokes about the falling leaves such as, 'I just spoke to the guy upstairs and he said he would glue the leaves to the trees again so I would not have so much work', or, 'I have a secret panel with buttons. I just press the right one and up go all the leaves from the ground to the trees where they belong. That would be good, wouldn't it?' He added that he was going to sell leaves, a penny a piece to anybody who was dumb enough to buy them, 'though my horses would have loved to lie in them', he mused. While working in the garden he now gave me little lectures, imitating us, I suppose, during earlier times. 'Never leave the root of a plant in the sun or it will die', or, 'You think a stone is dead and cannot grow. I heard on T.V. it can grow, only it takes a long, long time.' Looking at a pebble, he would muse, 'This little pebble, some day it will be a big rock'.

One day he came running over to us exclaiming breathlessly, 'Hurrah, I found a secret safe, built into the wall in my room. Now I have a safe all for myself, a secret safe. I am so lucky.' My husband looked up from his book. 'Stop it, Dudley, secret safes are not built into our house.' But he insisted. 'Oh yes, it's there, Sir, behind the mirror above the wash basin; it's there all right.' He was obviously referring to the medicine cabinet. In this he showed a desire for secrecy that we often encounter in early adolescence.

Once during the fifth year of our acquaintance, when we discussed the American Indian woman who had sold us the garden chairs, he said, 'I don't know why she had to be so poor, just because she is an Indian'. Then he added pensively, 'I like apples and bananas'. We asked him what he meant by this remark, and he explained, 'I like all people of all colors'. He stated that he prayed every day that the war in Viet Nam

would end and 'our boys' would come back home. Two years earlier, when questioned about a conflict in Asia, he had answered, 'Not that I know of. Perhaps the war in Korea is still on, who knows?'

It was a bit later that he made, for the first time, a statement that implied that he thought of leaving us. He said, 'In case I go on parole (i.e., living away from the institution in an employer's home), with another family, you will have to look for another day worker. I just want to warn you, never get a man from X cottage. They are too wild, too much trouble.' While previously the thought of separating from us had made him quite distressed and panicky, he now was apparently adjusting himself to such a new situation, even looking forward to it with pleasure.

On the last day of the fifth year of our association, Dudley mused, 'I'll be lonely without you for the winter. But the Lord is with me all the time.' Later on he said slowly and with concern, 'I'll be all right. I have my days away from the institution [when he goes on day work] and I have my work at the blacksmith's and the carpenter's [in the institution] and I have my hobbies and I have my friends [referring to one patient, and especially to the many employes of the institution who befriended him now]. But with the other patients it's different. Most of them just sleep all day, or they sit and look at each other. And the next thing you know, they start a fight, they argue and holler all day long. For them it would be much better if we still had the farm to work on. That would do them a lot of good.'

In earlier times Dudley had been concerned only with the farm in relation to himself, what it had given him and what he had lost when it was closed. He was now able to concern himself with the needs of others, a phenomenon that we see in the adolescent's idealistic endeavor to improve the world.

Dudley had changed a great deal since he first started to work for us five years earlier. He himself was aware of the change. 'When I look in the mirror, I look like somebody else, not like

myself any more.' On being questioned, he first tried to lend more weight to his statement by saying that many people in the institution had said so too. My husband insisted that this is unrelated to his own view of himself (though this is probably not quite so). He finally admitted, while embarrassedly looking down to his shoes, 'It's all because I found a home here, Sir'.

### DISCUSSION

There have appeared a large number of publications on the subject of mental retardation. Powerful parents' groups have been formed. New interest in this condition was created when the late President John F. Kennedy established a special commission to study the problems and funds from different sources were made available to support numerous research teams. The vast majority of articles on this subject, however, deal solely or mainly with the intellectual aspect of this condition. Stevens and Heber (17) state, 'The limited nature of the literature concerned with this relationship [intellectual defect and personality] attests to a traditional tendency to regard all behavior of the mentally retarded as attributable to intellectual defect. Theoretical formulations of personality have given minimal consideration to the mentally retarded while personality researchers have usually restricted their investigation to subjects of normal intelligence.'

Yet it has long been known—even among lay persons—that there is a relation between intellectual development and that of the personality. In *Little Dorrit* (4) Charles Dickens describes a twenty-eight-year-old retarded woman named Maggy. Though she thinks like a ten-year-old, she develops into a happy, self-supporting person 'as trustworthy as the Bank of England' through the tender, loving care of a girl named Dorrit, who acts as her 'little mother'.

In the psychoanalytic literature we find a case published by Chidester and Menninger (2). The eleven-year-old boy had in effect been deserted by his parents and handed over to his grandparents.



His psychosexual development was almost completely arrested in the anal stage, so that there was early a strong inhibition of his emotional and consequently his intellectual development and hence an incomplete and distorted sense of reality. . . . In this case learning or intellectual development seems to be dependent upon emotional development. The learning inhibition was but one manifestation of his total personality disturbance, which in turn seems to have resulted from early psychic traumata which partially arrested his psychosexual development and resulted in an incomplete and distorted sense of reality. In particular, his inhibitions seemed always to rest upon his belief that he was unloved. When during treatment he was given love of a form and kind that he could accept, he was helped to accept reality, bit by bit, and surrendering his defense mechanisms, began to learn.

The I.Q. of this boy rose in four years of treatment from sixty-two to ninety.

Spitz (16), in presenting the disease he calls hospitalism, sees retardation as a sequel of emotional starvation. Bowlby (1), Goldfarb (5), Piquer y Jover (11), and others came to the same conclusion. In my own observations (13) of emotionally deprived children between three and sixteen years of age in a large city hospital, low I.Q.'s were concomitant with emotional deprivation. The I.Q.'s ranged from seventy to ninety and learning disabilities were the rule. Gerald Pearson (9) has interpreted mental retardation from a psychoanalytic point of view. He regards retardation as a defect in ego functioning which results in malfunction of the superego. Weisskopf (18) cites lack of rewards by parents and the child's desire to punish the parents as causes of intellectual malfunctioning. Hirsch (6) states, 'The major difference between the retarded child and his normal peers rests in the retarded child's ego limitation'. Davis (3) expresses the following view:

Experiences disturbing the attachment of young mammals to their mothers, and of the mothers to the newborn, tend to de-

lay and distort development in many respects. Does mental retardation in early childhood result from similar disorders in social behavior? Observations made in a series of 'undifferentiated' cases suggest that it does when the security system provided by the family has failed to protect the infant from stress.

O'Connor and Tizzard (8) state, 'Foulds suggests that the parent-child relationship determines how both mental defectives and normal children will respond in frustrating situations. . . . Apparently, even in the case of defectives, performance is influenced by emotional stability.' All these authors are quoted here because they do not regard mental retardation as purely an intellectual matter, but rather they see personality factors involved in it.

One way of interpreting Dudley's progress after he came to work for us at the age of fifty-four is to consider it a late progression through some of the phases of the child's psychosexual development. It may be objected that such development is impossible fifty years after the time when it normally occurs, and, moreover, that this development normally occurs in close association with maturation of erotogenic zones. Many writers, however, have represented the young adolescent as recapitulating his precædipal history by showing a succession of oral, anal, and other traits. Perhaps this is what happened to Dudley late in life. Then we may suppose that as a small child he managed to achieve oral, anal, phallic, and ædipal levels, though probably he did not achieve them very solidly or very well. Are we then to suppose that he regressed and had to begin all over again? Or that he failed, as seems more likely, to recapitulate them properly in adolescence? Or did he never before go through these stages? I do not know. I can only offer the rather striking evidence that suggests that he did indeed go through such a development at fifty-five, whether or not he had already done so earlier in his life.

When Dudley first started to work for us, he was sullen and angry, and he hated everybody and everything. Anal qualities were apparent in him. His oral behavior at that time (for ex-

ample, his grabbing vast quantities of food, especially sweets) could be viewed as a regression taking place at the time of finding a mother substitute. He wanted to be filled up with sweets, with the good stuff, after having given up the bad, his anger at the deserting mother. There may, of course, have been oral features all along, though in the farmer's long, detailed complaints about Dudley, nothing points to oral fixation, but everything to marked anal negativism and anaclitic depression.

His frequent complaints about the cottage matrons and his initial hostility toward me really represent his anal anger at his mother's abandonment of him. (Death of a parent is in a child's mind often equated with hostile abandonment.) Also, emotional abandonment by his mother may have taken place long before her death. As he found in me a mother substitute, and was delighted to do so after so many barren years, he was able to give up the anal anger rapidly. In the beginning, I represented the preœdipal mother to him. He was relating only to me, quite clinging and possessive, with many oral demands, as children do when they are starved for affection. My husband was ignored completely at this time. Then, gradually, my husband became more important. The triangular œdipal situation became clearly established. I became Dudley's œdipal love object as expressed by such things as his admiration of my looks and clothes and his gifts to me. The overestimation of the love object showed clearly. His fantasies about my husband having an accident are classical œdipal desires expressed consciously in the form of fears. His guilty feeling after taking my coat off my shoulders points to neurotic guilt in the œdipal conflict. The dream of drowning also might be related to his œdipal guilt. The next period, that of identification with the father-figure in habits, clothes, and attitudes, introducing the resolution of the œdipal conflict, was especially marked. It was followed by the period of turning to the outside world and making friends with people outside the family, at first with a seven-year-old and then with our friends. Especially important was the appearance of the desire to acquire knowledge,

to learn, to have hobbies, which is observed in the latency child. At the very end of our five-year association he made friends with an adolescent and the men working in the institution. Then there came the statement that he planned to leave us, not in anger, but with eagerness. (He advised us about getting a good substitute.) He is an adolescent ready to leave home. He tells me to go into the house; he no longer needs my supervision for routine work in the garden. His desire to have a secret safe and to pay for his and our meals points to a tearing away from the parents to the adolescent phase. The desire to improve the lot of his fellow patients, his interest in racial equality, and his concern for the ending of the Viet Nam war all show Dudley's maturing. His interest in the girls, especially the waitress, his frequent blushing when talking to and about her, certainly suggest adolescent behavior.

A few words on his superego development are in order. In the beginning of our association, his behavior was very similar to the way he had acted when boarded out with the farmer. The chart tells us that Dudley assured the farmer that all the cows were tied up when all of a sudden they all came out, running about, breaking down fences, and upsetting the neighbors' property. In the first year of our association, whenever I asked him if he had done a routine task such as sweeping the garage, he would say, 'Yes, Madam', even though he had not even touched the broom. When confronted with this, he would not seem ruffled at all. 'I forgot', he would say airily, shrugging his shoulders. There was no guilt or shame on being caught in a lie. Gradually this changed greatly. When caught in such a lie later, he would apologize and assure me over and over again that he would never do it again. In the third and fourth year of our association, he did not lie to us at all but frankly admitted the truth. When he entertained us by spinning a yarn, he would always assure us that he had just 'made up the story for fun' and that it was not true.

In the last two or three years we considered him absolutely trustworthy and honest. The matrons in his cottage feel as

we do about him. 'He is a rare one you can trust', said one of them to me. The steady growth of self-esteem (as part of his growing ego strength) is seen clearly. It shows when he praises himself for doing good work, when he tells us that he feels 'proud', when he offers to take us out to eat and gives us advice on planting, or choosing another day worker. Gradually the pleasure principle gives way to the reality principle.

There is a statement in the chart that the father and mother of the patient were mentally defective. But since no interview is quoted and there are no other historical data whatsoever, we cannot give too much credence to this statement, especially since the patient insists that all papers were lost on his way to the institution. This scepticism is borne out by the fact that the institution wrote to the undertaker who had buried the patient's mother asking what her religion had been; so if we do not give full credence to the statement that father and mother were defective, we have to consider the possibility that the patient acquired his condition not genetically, but either *in utero* or after birth. How much emotional neglect (with or without the parents being defective) in rearing the child was involved in producing this condition in the patient is impossible to determine without a history. But the way the patient changed when transplanted into a better emotional climate makes me believe that emotional neglect must have played a significant role in bringing about his condition, which could be due to general emotional neglect by his mother, by both parents, or by the absence of a father-figure. All these possibilities could produce fixation on the anal level.

This case has been reported for several reasons. In the first place, it demonstrates how a fifty-four-year-old man may be seen to progress from the anal level (with even some oral features present) into the œdipal stage and then out of it into latency, even reaching adolescence in his fifty-ninth year. Obviously, to judge from this case, the maturing of a person can take place even late in life. This should encourage us not to give up the older patient as hopeless and incurable. Of



interest is that this œdipal conflict at age fifty-five does not appear different from that in a young child (12).

Another reason for reporting this case is that the maturing of this patient took place without the help of formal psychotherapy. I must make it clear again that this patient was not taken in by us to be the subject of an interesting psychological study or experiment but with the sole idea of having a worker. With the shortage of psychotherapists and the abundance of preœdipal patients—their number constantly increasing, especially in big city slums—the hope for formal treatment of all these cases is vanishing. Also, these patients often do not willingly go into therapy and when forced to do so (by courts and in residential treatment centers), they often do not benefit from it, motivation being absent. If we could encourage the creation of situations similar to the one described here, thousands of shiftless, unproductive, and even delinquent cases of preœdipal behavior disorders could be helped into useful, productive, and happier lives.

The most important reason for presentation of this case is that the patient improved intellectually as he progressed emotionally. This showed in his vastly improved vocabulary as well as in the learning of many new concepts. The question arises whether this patient's I.Q. (on three occasions tested as being in the forties) was his native I.Q. or was depressed by his emotional state and lack of experiences. It would be interesting to know if his I.Q. actually has risen during the last five years, but, unfortunately, he has not been recently tested.

Once we are aware that at least some cases of mental retardation are entirely or partly due to lack of psychosexual maturation, we do not have to be so totally pessimistic about the outcome of this condition. We may take a less dim view than Sarason, Pearson, Shaw, and others. Sarason (14) states, 'It is generally assumed that the mentally defective individual is unable to benefit from a psychotherapeutic relationship. The paucity of studies in this area is witness to this assumption.' Shaw (15) believes that 'treatment of the mentally retarded

child is primarily in education and thus the concern of the education profession'. Pearson (10) states, 'Once the mental deficiency is established, treatment is not likely to bring about a reversal'.

In my publication on Emotional Acrescentism (13), I wrote:

It would be most desirable to have these children live in a cottage arrangement where they could form long-lasting relationships with benevolent parent figures, such as cottage mothers and fathers, social workers, and teachers. I believe that these children could benefit from 'relation therapy' rather than intense psychotherapy. In other words, they should be exposed to an emotional climate that favors emotional growth. In these centers they might be taught simple tasks, and, when older, while continuing to live there, might be sent out to work in the community so that they could learn in this way to support themselves. This growing independence would raise their self-esteem, prevent their becoming community problems or public charges in a state hospital or state school, and lessen their antisocial acts.

When that was written, I derived my proposal chiefly from theoretical dynamic considerations. Dudley Potts clearly shows it can work in practice.

This case makes me feel that perhaps less money should be spent by the government on educating the uneducable person (7), and more on developing his personality first to a higher emotional level so that he will have the desire to learn. Instead of expensive Headstart Programs and reading clinics with purely educational orientation, these patients should be subjected to a family setting where an emotional maturing is possible and probable (13).

Ideally, of course, these maturing processes should take place in the patient's own family. This is only possible if a father or father-figure is present in the family. In many cases fathers desert the family. There, perhaps, is where we should start to work on this problem. Instead of building impersonal pro-

jects in slums, settling families in suburbs in individual homes with some surrounding land would keep at least some of these families together, with a better chance for the children's emotional development. I am convinced that it is easier for a father to walk out of an apartment he does not own than out of his own home and garden in which he has invested many hours of pleasurable work.

The preœdipal personality does not spend psychic energy on learning as does the older child. The motivation is absent. There is no desire to please. There may also be an anal desire not to please. The œdipal personality is more inclined to please and therefore to undergo the learning process; but the œdipal conflict absorbs much psychic energy that is therefore unavailable for study. It is only the latency child, with his instinctual drives well repressed, who really and fully wishes to learn. And only the person who really wants to learn will benefit from even the best educational program. This is probably the reason why all over the world the majority of schools find it most profitable to start teaching children the three R's not before age six, when the healthy child has entered latency.

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**On Human Symbiosis and the Vicissitudes of Individuation: Volume I, Infantile Psychosis. By Margaret S. Mahler, M.D., In Collaboration with Manuel Furer, M.D. New York: International Universities Press, Inc., 1968. 271 pp.**

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## BOOK REVIEWS

ON HUMAN SYMBIOSIS AND THE VICISSITUDES OF INDIVIDUATION: VOLUME I, INFANTILE PSYCHOSIS. By Margaret S. Mahler, M.D., In Collaboration with Manuel Furer, M.D. New York: International Universities Press, Inc., 1968. 271 pp.

This volume holds much more than the title promises. It is not only an investigation of infantile psychosis but also of normal human development, illuminated through pathological deviations. The concepts, derived from the study of childhood psychosis, help us to understand severe neurotic and borderline conditions in adults and schizophrenic regression in the adolescent and adult.

The book is the outcome of observations made over a period of more than thirty years. As it combines material previously published with new findings, it is occasionally repetitious. But it allows the reader to watch the process of sharpening concepts through the accumulation of experience and increasingly subtle differentiating observations. A lively presence of ongoing thought provides a critical survey of the literature, especially of ego psychology.

In considering the etiology of infantile psychosis, Dr. Mahler regards the old controversy of constitutional versus experiential causation a moot issue. She believes the essential etiologic factor to be a predispositional deficiency which does not allow the infant to utilize his mother for homeostasis. In less vulnerable infants, chronic or recurring traumatization through organismic distress may make it impossible to experience the mother as the source for relief of discomfort. Mahler's studies do not bear out theories that implicate a 'schizophrenogenic' mother. She has found variations in types of parents and home climate, ranging from the 'average expectable' to the 'frigidaire' atmosphere (Kanner) and the psychotically violent. It is the type of interaction rather than the pathology of the mother that interferes with the essence of mothering. The infant's constitutional deficiency leads to the vicious circle of a pathogenic mother-child relationship. When psychosis has become manifest, the mother, of whatever type, has to give up her normal mothering function. Often the mother of an autistic child shows a withdrawal similar to that of the child, with varying degrees of bewilderment and hostility. The psychotic child's mother is often adept in explaining his enigmatic behavior. This understanding, however, is

not matched by appropriate responses. Since real separation from the mother is conspicuously absent in the awareness of the psychotic child, Mahler concludes from her studies that actual object loss is not an etiologic factor.

Originally Mahler made a sharp distinction between two types of childhood psychosis: infantile autism (Kanner 1944) and the symbiotic syndrome (Mahler 1952). She has modified this distinction in terms of the predominance of one or the other and has introduced the concept of a secondary autism as a defense mechanism. Both types of childhood psychosis can be understood as psychopathological distortions of normal phases of ego development and its functions within the early mother-child relationship. In the predominantly autistic child, the mother does not exist 'as a living beacon of orientation'. There is no anticipatory posture at nursing, no reaching-out gestures, and no specific smiling responses. At a later stage the adult is used by these children as an executive extension, like a switch or a lever of a machine. Characteristic of the autistic child's behavior is an obsessive desire for the preservation of sameness and a stereotyped preoccupation with a few inanimate objects, as described by Kanner. Mahler complements the description with understanding of the underlying dynamics. She regards these attitudes as maintenance mechanisms in a child who, devoid of emotional ties, is unable to cope with the ever-changing external stimuli and inner excitations. The child therefore can exist only within an utterly restricted world of his own. The frequently observed auto-aggressive activities seem to constitute a pathological attempt to feel alive. The symbiotic syndrome, on the other hand, represents fixation at, or regression to, a more differentiated stage of personality development. In the awareness of these children, one finds extreme reactions to the small failures that normally occur with the beginning of locomotion. They often have been oversensitive as babies, but the disturbance is not manifest before the individuation phase challenges the maturational demand of independence. At that time, the threat of separation from the mother leads to panic; the symbiotic syndrome appears as primarily a response to separation panic.

By the age of four, both autistic and symbiotic patterns seem to be present in the majority of cases. After symbiotic manifestations, a secondary autistic picture may develop. Mahler arrived at this concept of autistic withdrawal as a 'restitutive mechanism' in order

to ward off the threat of panic. The symbiotic position carries with it the potential for an organismic panic additional to the threat of separation, namely the fear of re-engulfment as a dread of dissolution of the self. Withdrawal from and deanimation of the human partner then serve as secondary defenses.

The author's method of investigation of infantile psychosis has been a therapeutic action approach—a most fruitful method, abolishing the artificial distinction between 'objective' observation versus therapeutic involvement. This is clearly demonstrated by impressive vignettes of children in therapy—which always includes the mother, often in the tripartite approach of mother-child-therapist working together simultaneously. The first requirement for treatment of the autistic child is contact with a human love object. He must be lured into a tangential (not 'head on') contact with a person—through music, rhythmic activities, or with the help of inanimate objects, avoiding direct bodily contact but offering a nonintrusive attentive presence, as a soothing atmosphere. Simultaneously, a supportive treatment of the mother is imperative. The later stages of the long-term therapy, painfully slow but often astonishingly rewarding, are described step by step. In both types of infantile psychosis it is essential to involve the child in a 'corrective symbiotic experience'.

Thus the reader ends this book of investigation into the most severe psychological disturbances with a sense of hope and with fascination. It contains a wealth of insight about the development from the original dual unity of mother-child into a human being.

LUCIE JESSNER (WASHINGTON)

HOOFDSTUKKEN UIT DE HEDENDAAGSE PSYCHOANALYSE (Chapters of Present-Day Psychoanalysis). Edited by P. J. van der Leeuw, E. C. M. Frijling-Schreuder, and P. C. Kuiper. Arnhem: van Loghum Slaterus, N. V., 1967. 311 pp.

These essays were written in honor of the seventieth birthday of Dr. Jeanne Lampl-de Groot on October 16, 1965.

Heinz Hartmann: *Notes on Psychoanalysis and Science—The Concept of Structure.*

In a discussion of Dr. Samuel A. Guttman's paper at the twenty-fourth International Psychoanalytical Congress in Amsterdam

(1965), Heinz Hartmann describes the importance of concept formation. He differentiates historical study in analysis from its use as formulation of laws as in natural science. He gives Freud's speculative idea of the life and death instinct as an example that hypotheses should not be presented as clinical findings. In Guttman's paper Freud's tripartite structure of personality—ego, id, superego—is part of what he considers structure. Hartmann widened the concept by including aspects of ego such as automatisms. The question mentioned by Dr. Guttman as to whether to divide the world into a set of structural systems, 'scientific knowledge and artistic vision', should not, Hartmann felt, be decided on the basis of psychoanalytic thinking. Hartmann concludes by describing the difference between psychoanalysis of total personality and the 'holistic' approach.

Willi Hoffer: *Remarks on the Defense System.*

Hoffer describes the origin of the concept of defense and its historical development in Freud's paper, starting as a single effort of repression and ending in the whole complex of defense mechanisms. The concept of defense in modern psychoanalysis is often applied as a direct derivation of Freud's observations in 1894. Hoffer describes the defense process serving the safety of the organism, a protective barrier directed inward as our sense organs function outward. The question about the defense mechanism, what is innate, developed, or acquired, is unanswerable. Glover and Hartmann both deny a possible reduction of a 'mechanism' to more simple elements. A premature defense due to a premature superego development can be the precursor of intensive self-criticism, consequently turning narcissism into masochism (Jacobson). Hoffer finishes his essay with remarks about defense organization being not identical with ego-pathology.

P. J. van der Leeuw: *Concerning the Formation of Freud's Theory.*

The historical development of Freud's own ideas and conceptions are compared with conceptions of other sciences. Metapsychology and structure are used by Freud for a very special way of thinking, the nucleus of which van der Leeuw calls multidimensional thinking. This multidimensional quality reflects another aspect of Freud's theory formation, the idea of space and depth, in contrast to the idea of quantity. Van der Leeuw describes the origin and development of the conception of Freud's metapsychology, comparing

Freud with Galileo and Hughlings Jackson. Biology has mainly a functional meaning, but via the substitution of forces by instinctual drives the organic-biological factor enters the psychoanalytic structure. As in thermodynamics the conception of force is amplified by labor and energy. It is interesting how the idea of labor relates Freud to Marx. Van der Leeuw furthermore describes the relationship of Freud's way of thinking to that of Darwin and Lamarck. The importance of this excellent article lies in the comparison of psychoanalytic theory with changed conceptions in other sciences.

H. G. van der Waals: *On Narcissism*.

The theory of narcissism is and was a source of confusion. Man wants during his lifetime an image of positive self-esteem. Joffe and Sandler describe narcissism from a biological point of view. In contrast to Ferenczi and Piaget, Freud's hypothesis of the origin of the belief in omnipotence is to be found in self-love. The ego development creates the possibility of loving one's self; primary narcissism becomes secondary narcissism. Van der Waals describes clearly how the child is capable not only of being himself but of having a self. Freud's next step is the formation of the ego ideal, which forms the nucleus around which narcissism grows and develops. In the beginning there is no internal or external world; for the child everything is one reality; he *is* the world.

Abraham's hypothesis that the regression of object love to narcissistic cathexis is a basic schizophrenic quality is not justified by psychotherapeutic experience with schizophrenics. The schizophrenic patient only replaces later objects by very early ones. The break with reality is only partial. The degree of traumatic experience by the transition of omnipotence into dependency on the outside world reflects the behavior of the mother in this respect. The healthy outcome of the developing child occurs if 'the ego-ideal furnishes the growing form of the searching ego a suitable matrix'. The ego-ideals representing different life spans have to model themselves on future life situations such as the aging process, the narrowing of the menopause, etc. This evenly written article has a certain kind of sober wisdom, a global view, and great depth.

R. le Coultre: *Splitting of the Ego as the Central Phenomenon of Neurosis*.

The splitting of the ego is a part of every neurosis as was shown



by Freud in a case of fetishism and another case of death denial. Le Coultre asks the question whether the denial of reality is a condition *sine qua non* for this splitting process. He discusses a case which concerns the hidden idea of grandeur. Sometimes during the child's development ego-identifications which are not realizable are transformed into a pathological fantastic ego formation: a hidden delusion of grandeur with the function to compensate for a bad part of the ego. The ego is split. Le Coultre gives a beautiful example: 'There are the patients who sit in the analyst's chair and analyze with him "this neurotic patient"'. The same phenomenon of ego-split is the so-called œdipal attachment to the mother in an older man living with his mother. Le Coultre does not make a sharp distinction between id and ego, especially concerning conflicts during development. The real conflict exists between a mature but weak ego and a primitive infantile ego. Freud describes the same conflict in the neurosis between a traumatized ego part and a part of the ego that is reality adapted.

*Anna Freud: About Losing and Being Lost.*

Anna Freud describes the analytic meaning of losing and mislaying objects in Freud's writings. After discussing the well-known meaning of anal products, she proceeds to describe the understanding of losing and retaining in the first year of life and interactions between infants and mothers. Adolescents withdrawing from the object world or losing a love object go through the same experience. The libido-economic aspects of the interpretation of losing help us to understand the dynamics of why people hold on to their possessions and why losing things is the exception. She reminds us of the symptom of prepsychotic fear of impoverishment and the psychotic delusion of the destruction of the world, both the result of cathexis withdrawal. She draws attention to a reaction to losing: identification with the lost object. This results in castration distress, mourning, or guilt, but in addition the loser projects feelings into the object. Finally identification with this object occurs. Children cling to their possessions as a defense against aggression. They seldom get lost if the clinging to the parent is re-enforced by the parent's love for the child. But if the parents subtract their love, then the child feels lost and gets lost. Losing a loved person through death leads to mourning. It means a withdrawal from the external world as well as an attempt to reunite with the dead. In dreams the

dead person is presented as wanting the reunion with the living. This leads to the ambivalent feelings of joy and guilt. The same loyalty conflict as in the dream can appear in fairy tales, myths, and folklore. The lost souls are 'lost' as symbols of object loss and poor because the survivor withdraws their love cathexes. 'Let them rest in peace' only occurs if the survivor has completed the mourning process.

P. C. Kuiper: *Transference and Countertransference from the Metapsychological Points of View. A Contribution to the Theory of Technique.*

The evaluation of transference and countertransference oscillates between opposite opinions. In a broad definition of transference the genetic viewpoint is expressed that every attitude contains transference elements. Another characteristic is stressed in the adaptive point of view. Kuiper stresses the fact that the different metapsychological viewpoints should not be used in an isolated way but more coherently. In cases where apparently no transference neurosis develops, this in itself is a symptom of the transference neurosis. Kuiper discusses the countertransference by taking the example of 'spoiling the patient' and the inherent danger of this frequent mistake. The same applies if the neutral objective behavior of the analyst is replaced by a certain cool, artificially detached attitude. Another important point in a good therapeutic alliance is the conviction that the analyst does not necessarily have to know everything that is good or bad for the patient. The importance of this paper lies in the description of the interrelationship between the genetic, economic, dynamic, and structural viewpoints expressed in transference and countertransference phenomena. The illuminating examples of this difficult subject are a rarity in theoretical papers.

W. K. van Dijk: *Diagnostics, Clinical Psychiatry and Psychoanalysis.*

The term diagnosis has two meanings: 1, classification or categorization according to a taxonomic system of mental illness; 2, analysis of the pathology of the patient as an individual. The author points out how the reliability of psychiatric diagnosis diminishes the more specific subdivisions are used. The problems increase if the classification is related to prognosis and therapy. For the time being a system based independently upon clinical picture and etiology is the most desirable. The psychoanalytic concepts of ego synthesis, ego strength, ego weakness, and ego defenses are important for the application of a certain therapeutic model.

E. C. M. Frijling-Schreuder: *The Psychiatrist and Death*.

In the anal-sadistic phase there is no expression of real death wishes. In the œdipal phase the questions about death come to the fore together with the ideas of birth. Reality testing introduces the difference between life and death. Death wishes in themselves may create nocturnal anxiety. They cause more serious repercussions if the parents threaten one another or if their aggression turns toward the child. Denial of death is part of our culture. This is specific for the child's reaction toward death. The author describes clearly the characteristics of mourning; hostility and reproach in the child-parent relationship. Disintegration after death can only be resolved if the mourning process is openly accepted. The question at what age a child is able to go through a real process of mourning is not yet solved. One source of guilt feelings after death of a love object is the idea, 'I am still alive'. How is the mourning process with the child? Frijling-Schreuder describes different phases of this process at different ages. The examples are fascinating and instructive. A kind of paralysis of the thinking process develops if death is kept a secret, just as is the case with secrets about important events in the life of the child such as divorce and adoption, etc. In the case of the dying patient, himself, the mourning process of the environment can be a burden for the patient. The returning presence of the physician is a response to the dependency needs of the dying patient.

Th. Hart de Ruyter: *Some Remarks on Psychogenic Disturbances of Learning*.

From the Department of Child Psychiatry at Groningen a hundred nonselected cases of learning difficulties were examined in order to ascertain the magnitude of the part played by emotional factors. This research program was mainly directed toward four groups, but I will mention only the first two. In the first group learning difficulties with psychotic children are discussed. In the second group, the neurotic learning disturbances, the author finds a common denominator to be the inhibition of instinctual development, be it libidinal, aggressive, or both. The seed of inhibition may have been planted early; the bad fruit may develop in puberty or adolescence. He describes the neurotic learning disturbances as a result of inhibited aggression. The latter interferes first with the mastery of reality at an early age. At the latency period the thought processes are inhibited resulting in learning difficulties especially

with mathematics. To think it through is an aggressive act. It is here that inhibition of aggression leads to damage of the learning process. The author finishes this excellent article with some remarks about the therapeutic principles at different ages.

N. Treurniet: *On the Psychoanalytic Theory of Psychosis.*

In his introductory remarks Treurniet describes how clinical experience and theoretical concepts are not contrasting elements. He compares the similarity and differences of the development of the psychotic and the neurotic personality. The object relations in the schizophrenic have a narcissistic quality, a reunification with the almighty mother (Katan). The author describes the well-known cathexis of the homosexual object, the loss of object, and the attempt to reconstruct reality via a delusion. Treurniet reviews the importance of preœdipal experience in the psychotic development, as seen by different authors. He discusses at some length his own views as well as those of Hartmann, Klein, Federn, Sullivan, and the transactionalists. At the end of the paper Treurniet discusses the well-known limitations of psychoanalysis for treatment of the psychoses.

H. Kits van Heyningen: *Concerning the Indications for Admission in the Medical Day Care Center 'T Kaboutershuis' in Amsterdam.*

This is a day care center for two- to seven-year-old children. Four aspects are important for admission: 1, acceptance of partial separation from the mother, 2, emotional relationship with the worker, 3, adaptation to the child's own group, and 4, the general aspect during the first admission phase. In the first phase separation reactions appear mostly after a couple of days. The second phase of real adjustment can take three to four months. Progress is expressed by instinctual development according to the age phase, ego-object relationship, instinct regulation, and superego development. Different cases illustrate this clear paper.

D. J. de Levita: *Unhappy Love in Adolescence.*

The author discusses the possibilities of the development of the establish a love relationship; second, the failure to join the peer group. The adolescent has to enter the new life phase. It is a repetition of the start of the latency period. The great difference is the search for new identity in a kind of vacuum. It is made dramatic with extreme overtones around two nuclei: the first love and the

group. These patients often show in their treatment the special role they had to play for the libidinal gratification of one parent. The death of one parent enhances this constellation. A harmonious transition into adolescence depends on sufficient internalizations in the previous developmental phase. The author compares the vertical development of progression into the next phase with the horizontal development in each phase. Adolescent love can have the abnormal quality of total absorption or chronic rejection ending in depression and isolation. De Levita illustrates his article with convincing case histories.

E. Isaac Edersheim: *Adaptation*.

The author describes the influence of external circumstances, cultural and educational patterns, on adaptation. This includes the biological, sociological, and psychological viewpoints and their interaction. She discusses active and passive adaptation, especially passive adaptation in a nondemocratic society and in a concentration camp. Under these circumstances, masochism can become fatal. Adaptation in totalitarian or unfree societies requires special sacrifices for the conforming or nonconforming individual. Adaptation is by no means always an expression of normality; the price may very well be a disarranged personality. The survival of outlived adaptation patterns can lead to neurosis. The author describes the relativity of social or asocial conceptions during war and occupation. This counts also for life under a totalitarian ideology. The taboos of old and modern cultures are diluted forms of conformity. The extreme of conformity re-creates, via regression, childish dependence. Complete conformity and submission take place through identification sustained by sexuality and colored by sadomasochism. Adaptation problems of minority groups are discussed at the end of this well organized article, written with great wisdom.

Alexander Mitscherlich: *The Social and Individual Ego*.

The author discusses the possibilities of the development of the individual ego in contrast to a social ego and the ways in which the individual ego attempts to transform the social ego. The author explores how the social ideological mass ego paralyzes the individual ego. This 'thought reform' confirms the psychoanalytic theory of the superego developing out of the ego. He uses the example of brain washing in China as a typical case of extreme



individual regression put at the service of a totalitarian social (super) ego. The pleasure principle preserves conservatism against the threat of progression. The author discusses the importance of a strong ego for protest against society; rebellion of a weak, immature ego bears little fruit against ritualistic tradition.

These psychoanalytic papers are for the most part profound substantiations of well-known psychoanalytic subjects. Their great value lies in the illustration of theory with clinical examples. It is almost as if theory comes to life. In the reviewer's opinion this quality is important enough to suggest strongly that the essays be translated for the benefit of English speaking readers.

SIMON WEYL (NEW YORK)

**THE SECOND LOOK.** *The Reconstruction of Personal History in Psychiatry and Psychoanalysis.* By Samuel Novey, M.D. Baltimore: Johns Hopkins Press, 1968. 162 pp.

Using the history given by patients and the process of gathering such a history as a basis of his book, the late Samuel Novey has written a wide-ranging consideration of the problems of psychoanalysis and dynamic psychiatry. Dr. Novey's many interests are reflected in his discussion of the function and philosophy of history before he approaches the multitudinous problems presented in psychoanalytic practice. Following the introductory chapters, he considers the role of the psychoanalyst as a historian who attempts to ascertain the facts concerning a patient—a life history compounded of external and internal events of reality and fantasy. These discussions lead naturally to considerations of memory, of language, of transference, of interpretations and reconstructions, and of the nature of the therapeutic process itself. Each topic is viewed individually and also in relationship to the others.

This work evinces a breadth of approach ranging from philosophy to law to actual clinical vignettes that illustrate the conclusions presented. There is a range of vision which appreciates that the therapeutic needs of the patient are paramount; the human component is of overriding importance throughout. Thus the social and cultural milieu of both patient and therapist is a subject of discussion as are the hopes and expectations of each in the therapeutic process. Of particular interest is the observation, bolstered

by clinical data, that with certain obsessional patients memory recall and a need to seek out the past in activity are essential to the developing sense of conviction concerning analytic reconstructions and subsequent therapeutic change.

Despite a certain sketchy quality to the final chapters, which are printed as left by Dr. Novey at the time of his death, this book is a worthy addition to the psychoanalytic literature on memory, recall, and reconstruction.

EDWARD D. JOSEPH (NEW YORK)

**THE PSYCHIATRIC DISORDERS OF CHILDHOOD.** By Charles R. Shaw, M.D.  
New York: Appleton-Century-Crofts, 1966. 442 pp.

For many years, those of us involved in the training of young psychiatrists and psychoanalysts had been deprived of a work that would integrate dynamic psychiatry and psychoanalytic concepts with the principles and practices of child psychiatry. Dr. Shaw has essayed this task; regretfully, to my mind, it is both belated and essentially fails in its purpose. Belated because a number of texts have been published in recent years; more especially because Dr. Janet W. Kessler's *Psychopathology of Childhood* has already set a high standard in scholarship, unification of diverse trends and roots, and stylistic excellence. Her book has set a pre-empting standard against which all other books in this field must now be evaluated. I would suggest that the text under review does not meet this standard, perhaps because Dr. Kessler's is organized along a developmental axis and Dr. Shaw's by subject matter.

Textbooks fall into a number of different categories—compendiums, collections of expertise, personalized monographs, and practicums. This book falls somewhere between the monograph and the practicum. It is as though someone said to Dr. Shaw, 'Your knowledge is extensive, your interest wide, and your practice vivid. Why don't you write a textbook?' In reading this book one is able to enter Dr. Shaw's mode of practice and turn of mind. In these matters his volume is pragmatic, empirical, and heuristic. It is also fuzzy, repetitious, and lacks that theoretical delineation, around which clinical data becomes significant, which allows young people a framework from which a creative clinical posture might ensue and the veteran a renewal of his intellectual vitality.

The author uses two principle orientational underpinnings—the ‘physiological-dynamic’ of Lauretta Bender (quoted thirty-nine times), as specified here particularly in approach to learning disorders by Ralph Rabinowitz (quoted on nineteen separate occasions); and, on the psychoanalytical front, the epigenetic formulations of Erik Erikson (also quoted nineteen times). That is, he uses them to impart oversimplified evaluative and therapeutic tools. This in no way gainsays his references to the findings and contributions of other workers in the psychoanalytic as well as those in many diverse fields: neurophysiology, genetics, biochemistry, ethology, sociology, and experimental psychology. In fact, his review of the literature and his ordering of it makes this work an excellent secondary reference source.

My objections enter with its use in training and practice where on the one hand the uncritical and nonintegrative mode greatly lessens the value of the factual data, and on the other hand leads to oversimplistic and superficial guides. For instance, after presenting much pertinent material about the genesis, psychopathology, and psychodynamics of the psychoneurotic child, the author’s views on psychotherapy are summed up in the statement, ‘Therapeutic efforts are directed largely toward developing a relationship with the child, so that he develops some trust and confidence in the therapist and may find strength and support in the relationship’. This narrow formulation, even of relational therapy, de-emphasizes many therapeutically valuable tools such as formulation, insight, mobilization of affects, and goal focused therapy, among others. To cite another example of Dr. Shaw’s loose use of his source material: ‘Piaget has observed that much of the verbalization of nursery school children is simply an expression of the child’s feelings, and not intended to communicate with others’. Piaget in fact stresses that this noncommunicative speech rather than simply expressing the child’s feelings is in fact one of the complex of mechanisms through which the child formulates his identity.

Perhaps this book should be seen in the light of the author’s intent. ‘Every book must have a point of view, this book has two: the scientific and the compassionate.’ Mayhaps the attempted amalgam of these two viewpoints, although so desirable, may not do justice to either. The feeling of an ‘old Doc Brown’ who does not forget the human side, humor, interest, and personal activity, some-

how jars with the 'how to' overreductionism and contrasts sharply with the widely ranging source material.

Texts, in this age of specialization, distrust, and insistence on immediate communication are difficult to write. The *Psychiatric Disorders of Children* contributes by making its author's perspective explicit. It has the virtues of candor, within its framework of cogency, and contains a collation of much of the pertinent data presently applicable to child psychiatry.

STANLEY R. LESSER (NEW YORK)

**CURANDERISMO.** Mexican-American Folk Psychiatry. By Ari Kiev, M.D. New York: The Free Press, 1968. 207 pp.

*Curanderismo* is an ethnopsychiatric study of the Mexican-American subculture of San Antonio, Texas. It was 'conceived to examine in detail the specific aspects of one system of prescientific psychiatry for the purpose of clarifying the therapeutic significance of its culture-bound elements. This study sought to determine the nature of a folk-healer's sensitivity to the nuances and subtleties of psychopathology among the members of his group, and in what ways the care he offered was suitable for the specific psychopathological conflicts created in his own culture.' The study began with the reasonable assumption that within the limits set by biological factors, behavioral patterns are directed by the culture, as are the patterns of disturbances and the institutions to deal with them.

*Curanderismo* is a readable, interesting, and informative book which could be read with benefit by anyone who is interested in social psychiatry or the efficacy of different therapeutic techniques. The discussion of the folk diseases of the Mexican-Americans is especially good. Nevertheless, *Curanderismo* is a less successful book than *Magic, Faith and Healing: Studies in Primitive Psychiatry Today*, an anthology of articles written largely by professional anthropologists and edited previously by Dr. Kiev.<sup>1</sup>

In *Curanderismo*, Kiev presents an overview of aspects of the Mexican-American's history, social structure, socialization practices, and personality organization and data pertaining to his general view of illness and health and his psychological conflicts. Information about the personality of the *curandero*, his assumption of the

<sup>1</sup> Reviewed in This QUARTERLY, XXXIV, 1965, pp. 606-610.

role of the healer and techniques of diagnosis and treatment is followed by a discussion of the therapeutic role of *curanderismo* and of the relative merits of this prescientific system and of dynamic psychotherapy. To the person who is not acquainted intimately with sophisticated anthropological field work pertaining to socialization and personality and culture studies, Kiev's work may appear to be convincing. In my opinion, it leaves much to be desired.

Although the methodology is nowhere spelled out in the text, Kiev obtained his information while serving a tour of military duty. He does not know Spanish well enough to speak with his informants in their mother tongue and his bibliography reflects resultant deficiencies. We do not know how many or how frequently informants were used or what their duties were. Throughout the book, information is given as factual but cannot be validated by the reader. Data concerning socialization and child development are incomplete, exaggerated, and oversimplified. It is obvious that they were obtained by questions directed predominantly to adults rather than prolonged observation of the activities of children and their relations with their families. Kiev frequently fails to cite relevant references. The same criticism must be leveled at the data about the psychological conflicts of Mexican-Americans.

Concerning information pertaining to the *curanderos* and their philosophies and practices, we are likewise left in some doubt. Kiev states that he had continuous contact with four *curanderos*. He saw fortuitously a few curing ceremonies and explains this on the basis of the illegality of *curanderismo* in Texas, a patent rationalization. If he was unable sufficiently to gain the *curanderos'* confidence so that he had relatively free access to ceremonies, it is unlikely that he learned all there was to know about, for example, their belief in the possession of supernatural powers. Using Loeb's much criticized 1929 bases for differentiating between shamans and seers, Kiev relegates the *curandero* to the latter group. There is simply no way for the reader to determine on the basis of the information supplied to and by Dr. Kiev whether a majority of the *curanderos* could be classified as shamans. It would be too far afield to criticize specifically his bases for defining the *curandero* as a non-shaman, however tempting it would be to do so. I am sure that any anthropologist would lift his eyebrows in wonder at Kiev's statement that the *curandero's* personal qualities are irrelevant to his acquisition of the power of the role.



Kiev occupies a number of pages indicating similarities of Greek and Renaissance concepts to some of those of the *curandero* and concludes that the *curandero* received them through diffusion. While it is possible that diffusion did play a role, the assumption is not supportable without the presentation of more detailed, specific historical information. Of like vein is Kiev's assertion that because there was no scalping tradition among the Mexicans, 'lack of this tradition *undoubtedly* accounts for the lack of evidence for guilt of aggression directed against the outgroup and for the absence of special purification rites following aggression' (p. 84, reviewer's italics).

Some statements are startling. Thus we read, 'Aztec religion, like that of the Spaniards, was a solar religion'. No references are given nor is an explanation supplied for why or when Kiev considers the Spanish to have had a solar religion. Although Kiev frequently uses the terms, folk and folk psychiatry, no effort is made to define either term and primitive and folk psychiatry are treated as indistinguishable. A large literature is available and could have been consulted.

Kiev did not make careful use of some of his cited references and in one case surely did not read a mentioned doctoral dissertation. His references to psychoanalysis are frequently loose and ambiguous. Thus we read, for example, without explanation or the citing of a reference, 'Of particular interest in view of psychoanalytic theories of dreams was the *curandero's* observation that insanity was often preceded by disturbing dreams' (p. 96).

Kiev considers the relative merits of *curanderismo* and dynamic psychiatry. He states the *curandero's* approach to be better suited for the neurotically depressed patient because it offers reassurance, support, and promise of help. It is curious to read that dynamic psychotherapy is contraindicated for the treatment of neurotic depression, a condition most psychoanalysts consider to be classically suited for analytic treatment. One must suspect that Dr. Kiev's form of dynamic psychiatry does not include the systematic interpretation of defenses or the transference. It would appear that while he has read selected psychoanalytic literature, Dr. Kiev has but a moderate understanding of psychoanalysis.

References will be made to but two more surprising inclusions in this book. It is unusual nowadays to read in the dynamic psychiatric literature the words *dementia praecox* as a diagnostic term. One is given pause, too, to read that the sole tool of the present-day psy-

chiatrist for the treatment of acute psychosis is the administration of drugs and that the aim of the care of the ambulatory schizophrenic and the person who has a mild paranoid reaction is to make him feel comfortable. It is perhaps redundant to remark that there are dozens if not hundreds of articles in the psychoanalytic literature which support the thesis that much, much more can be done with such patients.

While the aims of this book are laudable and good points are made, and while Dr. Kiev is to be admired for having undertaken such an ambitious project in his spare time and without a research grant, *Curanderismo* falls short of its potential. I believe this to be the result of its having been too hastily written. I think, also, that it would have been vastly improved if Dr. Kiev had sought the supervision of both a competent cultural anthropologist and an able psychoanalyst.

L. BRYCE BOYER (BERKELEY, CALIF.)

NEW DIRECTIONS IN PSYCHOLOGY III. By George Mandler, Paul Mussen, Nathan Kogan, and Michael Wallach. New York: Holt, Rinehart and Winston, Inc., 1967. 289 pp.

This volume is the third in a series that reports, to quote from the forward by Theodore Newcomb, 'new developments of specific interest against older and more familiar backdrops . . . deliberately chosen to range across psychology's broad spectrum'. The book is divided into three main parts. In the first, George Mandler discusses three models of verbal learning. In the second, Paul Mussen reviews recent work on early socialization with particular reference to studies of learning and identification. In the third, Nathan Kogan and Michael Wallach discuss research on 'risk taking'. Earlier volumes in this series have included papers by William Dement on dreaming, Frank Barron on creativity, and Eckhard Hess on ethology. The style of the present volume is moderately popular, and relatively unobtrusive; the references are reasonably current; the papers attempt to fill the gap between the technical paper and the more general review. Unfortunately, an appropriate middle ground is hard to find. For someone who has only a passing interest in, say, early socialization, the chapter by Mussen is too ambitious to be satisfying; on the other hand, a specialist would find it too

discursive and lacking in useful detail. Similar criticisms apply to the other chapters. A more condensed format with specific and detailed references for the expert might have overcome this difficulty. Initial commentaries would also have helped to bring attention to key parts of the text, enabling the layman to pick and choose at will.

In the light of these difficulties, Chapter Three is perhaps the most successful. Concerned in particular with experimental simulations of risk-taking situations, it presents the procedures in considerable detail and adds references to more detailed studies. The authors consider both the situational influences on risk taking (for example, the fact that horse players accept longer odds during the course of an eight horse-race day) and the influence of personality characteristics, with particular emphasis on the role of achievement motivation. The chapter closes with a detailed account of a specific experimental procedure followed by a verbatim account of the group's discussion. As a result of the discussion, the group becomes more risky in their behavior (not more conservative, as might have been expected). The generality and possible explanations of this so-called 'risky-shift' phenomenon are discussed at some length. Of interest is the possibility that group discussion *spreads* the responsibility for the decision and therefore reduces each member's share in the outcome; as a result, he can afford to take higher risks. This chapter will be of particular interest to the psychoanalyst because of the richness of its behavioral observations, both in the field and in the confines of remarkably ingenious experimental procedures. While the procedures may seem artificial, they evoke extremely interesting and repeatable types of behavior.

DONALD P. SPENCE (NEW YORK)

## Journal of the American Psychoanalytic Association. XIV, 1966.

Julian L. Stamm

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## ABSTRACTS

**Journal of the American Psychoanalytic Association. XIV, 1966.**

**That 'Impossible' Profession.** Ralph R. Greenson. Pp. 9-27.

The author deals with the difficulties involved in the choice of analysis as a profession and the necessary qualities of the psychoanalyst. Of great importance is the analyst's own personal analysis; his continued self-analysis; his repeated efforts to recognize his own neurotic conflicts and blind spots. A warm, spontaneous, enjoyable personal life outside his profession is important in helping the analyst to make psychoanalysis a worthy profession.

**The Evolution and Nature of Female Sexuality in Relation to Psychoanalytic Theory.** Mary Jane Sherfey. Pp. 28-128.

This is a significant, scholarly paper dealing with the most recent biological and embryological facts concerning female genital anatomy and physiology, with an attempt to relate these to significant freudian hypotheses concerning female sexuality. It is the author's contention that current research in biology demonstrates conclusively that the concept of initial embryonal bisexuality is erroneous; that all mammalian embryos, including human, are anatomically female during the early stages of foetal life; and that the female's relative lack of differentiating hormones during embryonic life renders her more sensitive to hormonal conditioning in later life and may lead to an enhancement of female sexuality later in life. The work of Masters and Johnson is reviewed. It is concluded that vaginal orgasm as distinct from clitoridal orgasm does not exist and that with full sexual arousal women are capable of several orgasms. The erotogenic potential of the clitoris is greater than that of the lower third of the vagina.

Sherfey states that the rise of modern civilization was contingent on the suppression of the inordinate cyclic sexual drive of women. She stresses that the major portion of psychoanalytic theory will not be changed as a result of these facts with the exception of those concepts on innate bisexuality, the 'rigid dichotomy between masculine and feminine sexual behavior', and the clitoridal-vaginal transfer theory.

**Vaginal Awareness in the Infancy and Childhood of Girls.** Marjorie C. Barnett. Pp. 129-141.

It is suggested that in girls the introitus and vagina represent the third zone following the oral and anal for the discharge of sexual tension. The entire sequence of normal female development may be 'based on orifice and cavity cathexis'. Several reasons are offered in an attempt to explain the repression of vaginal awareness in the developing child: the lack of voluntary muscular control over the vagina poses a threat to body integrity and it is difficult for the girl to incorporate this organ into her body image. Since it is difficult for her to maintain vaginal awareness without anxiety, clitoridal cathexis emerges to aid in the repression of vaginal awareness.



**Forms and Transformations of Narcissism.** Heinz Kohut. Pp. 243-272.

The concept of narcissism is reviewed. The author emphasizes that the therapist is too often engaged in the attempt to replace the patient's narcissistic position with object love rather than transforming narcissism from its more primitive origins into more mature psychological structures. Considerable attention is devoted to two forms into which primary narcissism is differentiated: the narcissistic self and the idealized parent image. 'The fact that the original narcissism has passed through a cherished object before its reinternalization and that the narcissistic investment itself has been raised to the new developmental level of idealization accounts for the unique emotional importance of our standards, values, and ideals in so far as they are part of the superego.'

The evolution of the narcissistic self is an important maturational step. Too early interference with the narcissistic self may ultimately result in narcissistic vulnerability due to the repression of grandiose fantasies, no longer accessible to modifying influences. The significant transformations of narcissism from preformed narcissistic structures are elaborated in relation to their contribution to man's creativity, his capacity for empathy, his capacity to accept his finiteness on earth, his sense of humor, and his wisdom.

**Altered Body-Ego Experiences. A Contribution to the Study of Regression, Perception, and Early Development.** Michael A. Woodbury. Pp. 273-303.

A case of sexual perversion is presented to illustrate the dynamics of altered body ego experiences. The altered body ego experiences are considered to be a 'continuum of regression' with accompanying somatic and visceral phenomena. The tongue is considered as an organizer of the visceral body ego and functions as an *Anlage* for many ego and superego functions. The eyes and hands function as organizers in a similar manner. The author offers the hypothesis that perceptual organizers are formed by body ego nuclei which, in turn, are further influenced by the motor organizers, eyes, hands, and tongue in the final elaboration of whole object and self-representations.

**The Testes and Body-Image Formation in Transvestitism.** Richard V. Yazmajian. Pp. 304-312.

In an interesting case presentation of a male transvestite the author points out how cryptorchidism in childhood and the patient's fantasies about his testes played a central role in the genesis of both body-image conflicts and the subsequent development of transvestitism. The impaired body-image formation was further re-enforced in this patient by faulty self-differentiation. In order to repair the defective body image, total identification with mother was necessary. Mother's breasts were equated with testes and her body proper with the phallus. This culminated in final identification with mother and was acted out in the patient's transvestitism. It is suggested that cryptorchidism may be a more frequent etiological factor in the genesis of transvestitism than has been realized heretofore.

**Problems of Sublimation.** Louis Kaywin. Pp. 313-334.

This is an exceedingly timely and important paper and in scope goes far beyond the problems of sublimation. The author concludes that the term sublimation is an ambiguous one and should be discarded, that there is no valid way of distinguishing sublimated behavior from normal behavior, and that there is no special mechanism identifiable by the concept. The concept of sublimation is shown to be an outgrowth of the '*special* psychoanalytic theories with their untenable differentiated energies . . .'. The concepts of neutralized or sublimated energy are questioned. It is felt that they are confusing, ambiguous, and irreconcilable with general metapsychology. Kaywin offers the following tentative formulation: '*It is the degree of ideational associativeness at certain hierarchic levels that determines the sexualization . . . or aggressivization of any reaction pattern.*' The emphasis is on a structuro-energetic approach rather than on a purely energetic one.'

**On Skill and Sublimation.** Joseph Sandler and W. G. Joffe. Pp. 335-355.

In this paper the authors review some of Freud's theoretical constructs concerning the term, sublimation. It is their thesis that the energy-transformation theory of sublimation is not tenable. Some interesting hypotheses are developed concerning the origin of affects within the ego. These are characterized as non-sensual affects accompanying function, which are present from the beginning in addition to libidinal (sensual) and aggressive affects. Affect cathexes are also involved in the mental representations of objects, self, and activities.

The most important and novel aspect of their paper deals with their concept of sublimation. For them an ego activity or skill in itself does not constitute a sublimation. In addition to an activity bringing about drive reduction in a modified form, in order for it to be considered a sublimation the achievement must not only subserve indirect drive discharge but also must be invested with a constant 'value cathexis', which they liken to object constancy. While the paper provokes considerable thought, there is need for further clinical validation to bridge the gap created by the authors' highly tentative hypotheses.

**On Vengeance. The Desire to 'Get Even'.** Charles W. Socarides. Pp. 356-375.

The author discusses what he considers to be a heretofore unexplored affect, vengeance. Its early forerunners are seen as traumatic in the pregenital period and primarily related to oral frustrations. Vengeance is also seen as an attempt on the part of the ego to destroy the hated object. In addition, the aim is to project undesirable parts of the self onto the hated object. A distinction is made between the origins of paranoia, depression, and vengeance in terms of the vicissitudes of object relations. At times masochistic behavior may be resorted to as a disguise, but the main aim in such cases is to inflict pain and suffering onto the hated object. The author sees the vengeful person reacting to life's losses and disappointments as though they represented the depriving mother. An attempt is made to explore the genital contributions to vengeance and to study its development from the structural point of view. 'Vengefulness constitutes an effort to express and forcibly secure instinctual needs, to assuage guilt, to relieve fear and aggression.'

**Why Some Patients Conduct Actual Investigations of Their Biographies.** Samuel Novey, Pp. 376-387.

The author discusses the tendency of some patients to explore their past by visiting childhood abodes, investigating old documents, or seeing figures from the past. He considers this behavior as a positive instrument in furthering the analytic process, a point of view to which most analysts would subscribe. Such investigating may also constitute acting out.

**Two Dreams and a Childhood Memory of Freud.** Herbert Lehmann. Pp. 388-405.

The author suggests that two dreams mentioned by Freud in *The Interpretation of Dreams* are autobiographical. Freud's identification with the explorer, Nansen, is viewed in the light of his growing ambivalence with Fliess and his earlier repressed rivalry with father. In association to the Nansen dream, an early childhood screen memory is recalled connecting 'traveling (*Reisen*) with pain (*Reissen*)'. It is suggested that the screen memory connected with the Nansen dream reveals genetic material in Freud's self-analysis of his traveling phobia.

**Verbal and Symbolic Processes in Slips of the Tongue.** Richard V. Yazmajian. Pp. 443-461.

The defensive symbolic aspects of slips is abundantly documented by clinical material. Slips may be employed by the ego to serve instinctual and symbolic processes from all psychosexual levels; slips may also be unconsciously utilized for 'the symbolic expression of . . . certain ego identifications and superego demands'. On other occasions the slip may produce anxiety and defensive reactions against the anxiety. They may be 'normal' phenomena of everyday life or assume symptomatic proportions in other instances. In analysis, slips may be used to 'bait' or interest the analyst.

**Speaking With the Second Voice. Evocativeness.** Stephen A. Appelbaum. Pp. 462-477.

The nature of communication between patient and therapist is reviewed. It is suggested that by means of his evocativeness, manner of presentation, or voice the therapist is able to stir and evolve past experiences of the patient along with their accompanying affects during the treatment sessions. Comparison is made between those therapists who can successfully evoke such reactions in their patients as opposed to those who proceed in an intellectualized, stereotyped, mechanical way. Evocativeness is a mutual experience between patient and therapist and the therapist's capacity for evocativeness is likened to the artistic communication between the artist and his audience.

**Mumbling. The Relationship between a Resistance and Frustrated Auditory Curiosity in Childhood.** George Devereux. Pp. 478-484.

An unusual resistance against analysis, mumbling, is described. Analysis revealed that it represented blurred sexual sounds heard in childhood and also provided a defense against the patient's exhibitionism and scopophilia.

**On the Metamorphosis from Adolescence into Adulthood.** Carl P. Adatto. Pp. 485-509.

This instructive paper deals with the analysis of adolescents. Three cases are described to illustrate the adolescent's defense against the working through of the transference. The patients discontinued analysis in late adolescence after developing heterosexual object relationships. Several years later they returned, and it was at this point that the earlier transference relationships to the analyst as well as the infantile neuroses were thoroughly analyzed.

The adolescent's struggle with self, fluctuating identifications, and object relations emanating from a heightened narcissistic core are all discussed.

**The Jewish Orthodox Circumcision Ceremony. Its Meaning from Direct Study of the Rite.** Milton Malev. Pp. 510-517.

Further exploration of the circumcision rite is made. Some original ideas are suggested to explain the overdetermined unconscious significance of this Jewish rite: the father's defense against his own castration anxieties evoked by the birth of his son; the 'symbolic representative of the feared grandfather' in the form of the godfather; the carrying out of the partial castration by a father-figure by sacrificing the prepuce in order to protect the phallus, thereby providing ritualistic recognition and legality for future adult masculinity and paternity. The sucking of a drop of blood from the penis at the end of the ritual is seen as a passive homosexual act also defending against castration; i.e., 'the retaining of the organ on condition that it not be used heterosexually . . .'. Further comment is devoted to the isolation of 'sadistic affect' in the ritual which is ultimately expressed in the service: 'if this act is performed timidly . . . it is null and void'.

**A Reconsideration of Freud's 'A Disturbance of Memory on the Acropolis' in Relation to Identity Disturbance.** Irving B. Harrison. Pp. 518-527.

The author reviews Freud's 'A Disturbance of Memory on the Acropolis' and adds a clinical example. The disturbance is considered to be a disruption in identity based on a revival of oedipal and preoedipal conflicts. Attention is drawn to defensive aspects of this condition as well as perceptual distortions within the ego based on fluctuating cathexes between present and past object relations. A distinction is made between depersonalization for defensive purposes and identity crisis arising out of intrapsychic conflicts.

JULIAN L. STAMM

**American Imago.** XXV, 1968.

**Der Eigene und der Fremde** Gott. Theodor Reik. Pp. 3-15.

This paper was originally published in German in 1923.

The suffering of the Hellenized Jewish people at the time of the oldest Christian reforms was conceived as heavenly decreed punishment and piety was raised to the extreme. Religious practices steadily increased in severity, depriving the people of all pleasure. There arose the reactive wish for the Messiah, the rebel son, who would overthrow Yahweh. This revolutionary tend-

ency found expression in Jesus, the militant son-god, who dethroned and replaced the old father-god. This patricide could not go unpunished and Jesus atoned by being crucified. Judas is understood as a projection of Jesus's unconscious enmity toward Yahweh. Thus he betrays Jesus (the instinct turned on the self) and is blamed for Jesus's crime (murder of god).

**A Letter to Theodor Reik.** L. Szondi. Pp. 21-26.

Reik had written in 1925 that symptoms, in so far as they express forbidden tendencies, have an unconscious confessional character. Szondi claims to have confirmed this point in two patients who had conscious compulsions to confess.

**My Thanks to Theodor Reik.** Martin Grotjahn. Pp. 27-31.

Grotjahn emphasizes the personal characteristics of Reik which he has tried to emulate. These include intuitive understanding, inner truthfulness, patience, and courage. Grotjahn's contact with Reik has been for the most part, if not exclusively, through Reik's published writings.

**Theodor Reik and Ego Psychology.** Edward Frankel. Pp. 32-51.

Frankel makes an attempt, admittedly only partially successful, to provide a metapsychology of free association and analytic technique by reconciling Reik's intuitive approaches with Kris's ego psychological contributions.

**Theodor Reik. A Student's Memoir.** Donald M. Kaplan. Pp. 52-58.

Kaplan's touching account of his contact with Reik during the past decade is written with humility and great love. One senses that these qualities are reflective of Reik himself.

**A Brief Visit to India: Observations and Psychoanalytic Implications.** Gustav Bychowski. Pp. 59-76.

Bychowski describes the backwardness of the peasants and the poverty of the artisans in Indian towns. Cow worship is extreme; cows may enter temples; cows wander in traffic; women carry heavy loads of fresh grass miles to feed cows; men fast unto death in defense of the sacred taboo against cow slaughter. The mystical experience of immersion in the Ganges is recounted. The mythology of the descent of the Ganges from the Himalayas expresses the struggle of the life-bestowing power of the river, personified as a goddess, against the deadly power of the scorching Indian sun. A basic belief is that there is great power in asceticism, renunciation, and self-mortification. This leads to states of withdrawal which Bychowski likens to the extremes of narcissistic regression found in catatonia. Other facets of Indian mentation are analogous to schizophrenic phenomena. Thus while Indians retain the capacity to think realistically in most areas, in religious matters they think in a pre-logical, magical manner wherein the symbol functions as a concrete reality.

**Remarks on Mystic States.** Richard Sterba. Pp. 77-85.

Sterba feels every mystic experience of lasting effect is 'a *tour-de-force* conflict solution'. The basic element of the mystic experience is the loss of the constrictive frame of the self and fusion with objects of the outside world—human,



parts of the Cosmos, or the universe as a whole. Aesthetic feelings are mild forms of mystic experience; they involve transcendence of the self into the outside objects through extension of ego boundaries. An important motivation leading to the mystic state is the denial of mortality through fusion with divinities or the universe and participation in their external existence.

JOSEPH WILLIAM SLAP

**Psychoanalytic Review.** LV, 1968.

**Symptoms of Sexual Deviation: Dynamics and Etiology.** Emanuel F. Hammer. Pp. 5-27.

The sexual offender has intense castration anxiety, a mother who is engulfing, a father who is distant or punitive, and an actual seductive, often incestuous experience in childhood. This background is linked by the author with the tendency of the offender to be concrete in his thinking and direct in action rather than satisfied by fantasy. This leads to disillusionment in the ego ideal and a feeling of exemption from ordinary rules of conduct. The taboo experience is substituted for a taboo object in perversion formation. Two case histories and several brief clinical examples are presented.

**The Devil Within.** Louis Berkowitz. Pp. 28-36.

The author presents brief extracts of material from four Jewish analysts who spoke of a literal devil either inside or outside their bodies. The devil is considered from several different aspects, all familiar. Remarks about transference and countertransference are missing, together with whatever special meanings a Jewish devil might have. The author states that the devil material comes out at a time of crisis in the analysis and in the sexual life of the patient.

**Human Violence Versus Animal Aggression.** Joost A. M. Meerloo. Pp. 37-56.

This is a long and rambling discourse with a good many sweeping generalizations and an imprecise use of the word aggression as Lorenz defines it. Lorenz's book, *On Aggression*, has the title in German, *The So-Called Evil*. Man among all animals has a unique view of the world; his delusional thinking becomes contagious amid ailing social organization and this leads to violence and war so that 'we kill because we are civilized'. This fury has nothing to do with the *real* fury of an animal reacting to a predator of a different species. Man's violence is difficult to comprehend as a simple biological drive. (This differs from Lorenz.) Rather, it is a typical human attitude born of distorted emotion and thinking following feelings of helplessness.

**A Book Review of On Aggression by Konrad Lorenz.** Michel Radomisli. Pp. 57-61.

Lorenz's book is 'must' reading for psychoanalysts. Aggression is defined as the fighting of animals against members of the same species. Aggression confers benefits on the species and occurs only under special conditions. The more aggressive the species, the firmer is the attachment to the mate, the family, or the group.

**Coördinated Psychotherapeutic Approaches to a Familial Dysautonomic Pre-school Boy and His Parents.** Dorothy Semenow Garwood and Bernice Augenbraun. Pp. 62-78.

This is a paper of superior quality about insight therapy with one example of a four-year-old boy. The authors describe the boy's problem as rare and dangerous but they cite references by Niederland and Kramer that concern a similar problem in adults. It seems that the therapy described would apply as well to borderline psychotic patients.

STEWART R. SMITH

**Archives of General Psychiatry.** XIV, 1966.

**Body Image.** Mardi J. Horowitz. Pp. 456-460.

Body image is defined as a 'constant transactional relationship' between the body and its internal and external environment. An attempt is made to clarify two aspects of this ego function: the layering of the components of the body image and the extension of the body image to space around the body. The layering of components and the 'transactional matrix' are concepts used to explain changes in body image and regression. Space around the body or 'the body buffer zone' is seen as an entity in nonpsychotics but is most strikingly observed in schizophrenics. This space is variable and held in high personal regard.

**Psychiatric Consultations.** John J. Schwab and Roy S. Clemmons. Pp. 504-508.

This study provides criteria for the development of a consultation service in a new university general hospital. More than three hundred and fifty medical inpatients, both referrals and nonreferrals, were interviewed. Some of the interesting findings were: 1, Consultation patients could not be distinguished demographically; 2, In those patients receiving psychiatric consultation the co-existence of psychiatric and medical illness was common and not the exception; 3, Referrals were usually positively accepted by the patients, yet about one-third felt that consultation was of little or no help to them. One of the main problems still is identifying the patient needing consultation. Is this related to the unspoken question: for whom is the consultation and what is its goal?

**Amnesia for Homicide ('Pedicide').** Arthur T. Meyerson. Pp. 509-515.

Two case summaries are presented of women who murdered their children and were amnesic after the crime. Hypnosis was successfully used to recover the events and emotions, and the material obtained sheds considerable light on the causes of the crime and the dynamics of the amnesia. (Both patients had 'confessed' to homicide before hypnosis was introduced.) These women experienced mounting rage which, it is postulated, was defended against by the repeated occurrence of dissociative states. The rage was stimulated by a revival of feelings and memories from their own deprived childhoods, their own strong ever-current need for nurture and their chronic disappointment, and the demands of their children for attention and affection. The relationship between these

dissociative states, the fugue-like homicidal event, and the subsequent amnesia is discussed.

**Waking Fantasies Following Interruption of Two Types of Sleep.** Harry Fiss; George S. Klein; Edwin Bokert. Pp. 543-551.

Ten volunteers were studied in the sleep laboratory. Each was awakened twice from both REM and NREM sleep and asked for their fantasies in response to TAT cards. Only afterward were the subjects asked about their dreams. Stories elicited after arousal from REM sleep were longer, more complex, bizarre, emotional, and vivid than those obtained after arousal from NREM sleep. There were thematic similarities between recalled dreams and the stories. From these results the authors suggest that the mental processes characteristic of the sleep stage are carried over into the immediately following waking state.

**Somnambulism: Psychophysiological Correlates. I. All Night EEG Studies.** Anthony Kales; Allan Jacobson; Morris J. Paulson; Joyce D. Kales; Richard D. Walter. Pp. 586-594.

Four known child somnambulists (nine to eleven years) and four normal children (seven to eleven years) were observed, utilizing all night EEG studies and the REM technique of dream detection. Among the significant observations were: 1, all somnambulistic incidence occurred during NREM sleep, or stages three and four; 2, sleepwalking incidence was shorter and less frequent in the laboratory than at home, and there was amnesia for all events; and 3, bursts of delta frequency were characteristically seen at the beginning of sleepwalking episodes. Bursts of this frequency were also seen during stage three and four of sleep without sleepwalking. This EEG pattern was not seen in the normal children. It is reported by Gibbs to be found in ninety-five percent of normal infants between six and eleven months and to become absent by nine years of age. The authors conclude that both organic and functional factors play a role in somnambulism.

**Somnambulism: Psychophysiological Correlates. II. Psychiatric Interviews, Psychological Testing and Discussion.** Anthony Kales; Morris J. Paulson; Allan Jacobson; Joyce D. Kales. Pp. 595-604.

Eleven previously studied somnambulists, seven children (nine to fifteen years) and four adults (sixteen to twenty-seven years) were studied by EEG, complete physical and neurological examination, psychiatric interviews, and psychological testing. This seemed to be a heterogeneous group in terms of intelligence, socioeconomic background, family setting, and psychopathology. Physical and neurological examinations were normal except for one child who demonstrated several 'soft' signs of cerebral dysfunction. No 'somnambulistic personality' was found. There were two significant correlations: 1, a strong family history of somnambulism; 2, paroxysmal high voltage EEG activity seen just before sleepwalking in the eight subjects nine to sixteen years of age.

**An Experimental Approach to Dream and Telepathy.** Montague Ullman. Pp. 605-613.

This is an interesting methodological approach to the study of telepathy. The agent looks at a particular geometric shape or at a famous painting while the receiver sleeps in another room. EEG and eye-movement electrodes are used to determine the stage of sleep and REM. The receiver is awakened at the end of each REM and dreams are recorded. Initially the investigator, but later independent judges, determine if any components of the target material could be found in the dreams. While this pilot study is not conclusive, it is impressive. It is hoped that further work with this approach can be carried out with a more sophisticated design.

**Manifest Dreams from Three Clinical Groups.** Robert J. Langs. Pp. 634-643.

Dreams were collected from thirty-six women inpatients who were diagnosed as having paranoid schizophrenic reaction, hysterical character disorder, or psychotic depressive reaction. The manifest dreams were scored by two persons on a blind basis. On the over-all findings each of the clinical groups could be distinguished and the dream characteristics of each clinical group are described. Similarities in style between first memories and manifest dreams in hysterical and paranoid patients are thought to reflect a structural similarity and a mirroring of the total personality. Comparison is made between the compromise structure of a symptom and a similar process resulting in the manifest dream. The manifest dream is viewed as an overdetermined product which is of value for experimental work but lacks the richness of the latent content with its vast associative network.

PETER BLOS, JR.

**Archives of General Psychiatry.** XV, 1966.

**Body Image Disturbances in Adolescence.** William A. Schonfeld. Pp. 16-21.

The adolescent's body image was studied as a condensation and reflection of familial attitudes and interaction patterns. Parental overvaluation of 'the body beautiful', conscious or unconscious rejection of the youth, projection of a parental sense of inadequacy, the use of a child to resolve parental psychopathology, and parental overconcern about physical and sexual development were all found to be reflected in the body image. The author suggests that often the degree of body image disturbance in adolescence is a better indicator of psychopathology than the behavior itself.

**Aspects of the Treatment of Character Disorders.** John Donnelly. Pp. 22-28.

The author deals primarily with those aspects of treatment having to do with typical ego-syntonic, psychopathic, or sociopathic behavior. He reviews the relevance of superego lacunae and the capacity for rationalization, denial, and manipulation which these patients show. Often treatment can be maintained only by the judicious use of outside authority (e.g., a court), and by a clarifica-

tion of the manipulative process with the parents. Only by skilfully forcing the patient to confront and begin to resolve his own problems, that is, by making his behavior ego-dystonic, will the therapy have a chance of success.

**The Schizophrenic in College.** Theodore A. Kiersch and Arthur J. Nikelly. Pp. 54-58.

A systematic study of one hundred eight students who were diagnosed as schizophrenic by University Mental Health Service over a five-year period is reported. This group was compared with controls who were matched for sex and class standing and who had come to the health service for general medical attention. For the psychotic students, the dropout rate was three times as high as for the control group. In general, these students took longer to graduate, had poor grades, and a greater number did not graduate at all. However, the wide scatter observed in grade achievement in the study group does indicate that some schizophrenics can do very well academically. A larger than expected number of psychotic students were in the graduate divisions of the University.

The professional time required by these students was greatly out of proportion to their numbers. What is not clear in this study is some measure of the effectiveness of the University Mental Health Service in helping these students and what influence this service had on the statistics used. A hint is obtained from the observation that when the mental health service was involved in the decision for readmission following dropout, the returning students did, for the most part, function well.

PETER BLOS, JR.



## Meetings of the New York Psychoanalytic Society

Klaus Angel, Robert S. Grayson & John Donadeo

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## NOTES

### MEETINGS OF THE NEW YORK PSYCHOANALYTIC SOCIETY

January 16, 1968. PRE-ŒDIPAL DETERMINANTS OF AN INFANTILE NEUROSIS. John B. McDevitt, M.D.

McDevitt describes a three-year, two-month-old girl with severe separation anxiety stemming from a disturbed mother-child interaction during the pre-œdipal phase and the parents' handling of separation problems. During the first six months the child was hypersensitive to light, noise, and sudden movement, and cried while being fed. At eight months, feeding became a struggle between mother and child, and marked stranger anxiety developed. Sleep disturbances began at eighteen to twenty months, coinciding with the mother's pregnancy. The dialogue between the mother and child was disturbed throughout the pre-œdipal phase. The mother's emotional unavailability and failure to serve as an auxiliary ego during the child's first year probably created a predisposition to anxiety. Aggression reached an intensity sufficient for conflict and symptom-formation. Provocative sadomasochistic mother-child interaction (and the father's seductive handling) resulted in sexualization of danger situations and anxiety. It was possible to observe development of object constancy in this child through the subphases of the separation-individuation process.

DISCUSSION: Dr. Margaret S. Mahler elaborated on the reconstruction of the subphases of separation-individuation in this case and discussed the persistence and seeming immutability of the child's separation reactions. It is possible that her immutable separation reaction represented not only a fear of object loss but also a more internalized conflict, namely, fear of loss of love and loss of self-esteem. Dr. Eleanor Galenson discussed the methodology and the content of the clinical picture. Dr. Kenneth Calder commented on the child's handling of her anxiety, referring to her genetic endowment as well as to the question whether she would not have to give up an attachment to her environment to get better—that is, to cease to identify with the parents' ways of handling anxiety. Dr. Max Schur noted that the same conflicts found in this child are present in adult cases through reconstruction.

KLAUS ANGEL

January 30, 1968. ON FILICIDE AND ITS MEANING IN THE GENESIS OF ACTING OUT AND PSYCHOPATHIC BEHAVIOR IN ŒDIPUS. Arnaldo Rascovsky, M.D. and Mrs. Matilde Rascovsky.

Filicide, the killing of a child by his parents, is often denied, repressed, and disregarded because of its disturbing implications. It occurs in blatant form as actual murder and the battered-child syndrome, and also appears in many attenuated forms, such as circumcision, abandonment, instinctual prohibitions, cruelty, punishment, and other types of parental behavior that harm the ego of the child.

After discussing the significant role filicide plays in the history, mythology, and religions of mankind, the authors analyzed Sophocles's *Œdipus the King*. The filicidal behavior of *Œdipus*'s parents was the fundamental cause of *Œdipus*'s acting out and psychopathic behavior. Denying the existence of his bad parents, he developed a split between his actual parents and his idealized parents, the rulers of Corinth who reared him. When he became aware that they were not his parents, he regressed to paranoid-schizoid fixation, identifying with the aggressor and, in manic triumph, killing his real father. A second object-splitting took place when he encountered the Sphinx.

DISCUSSION: Dr. Alexander Bromley commented that the authors emphasized only one factor, filicide, in human history, and disputed the thesis that filicide is universally denied and neglected. He summarized the basic theories of Melanie Klein in order to place the Rascovskys' thesis in perspective, noting that in Kleinian theory the *œdipus* complex is regarded as a defense against anxieties arising from the paranoid-schizoid and depressive positions. Dr. Charles Brenner challenged the authors' supposition that a child at birth, or in the first few weeks of life, can comprehend that his parents tried to kill him. After citing three categories of instances of infanticide, Dr. Stuart Asch postulated that most infanticide is between the mother and the newborn, male or female.

ROBERT S. GRAYSON

February 13, 1968. MOTHER-INFANT INTERACTION: FORMS OF FEEDING. Sylvia Brody, Ph.D. and Sidney Axelrad, D.S.Sc.

Drs. Brody and Axelrad demonstrated with films the effects of various types of maternal behavior on infants. They ascribe paramount importance to maternal behavior during feeding because no other single aspect reflects the mother's total relationship to her baby so well. Classification of maternal behavior was based on three clinical parameters: empathy, control, and efficiency; and to their consistency (high, moderate, and low) during the course of feeding. According to these criteria and their assessment, the authors could divide the mothers into seven groups. Mothers of Group I illustrated optimal maternal feeding behavior; mothers of Group II were similarly empathic and efficient but often acted in response to their own needs rather than those of the infant; mothers of Groups III, IV, and V lacked sensitivity to the needs of their infants and showed other inadequacies; in mothers of Group VI, efficiency was emphasized: they satisfied their infants' hunger but with undue emotional neutrality; mothers of Group VII showed unstable empathic behavior, were erratic in their responsiveness, and often inefficient.

DISCUSSION: Dr. Manuel Furer emphasized the difficulties in assessment because of the complexity of the earliest mother-infant interaction. In designating empathy as a descriptive category of maternal behavior, he felt the authors were highlighting a most crucial area of interaction. This study, like others, however, does not make clear the vicissitudes of aggression in these infants as well as those brought up in institutions; how differences in subsequent development

lead to apathy in some and affective outbursts in others. Dr. Albert Solnit maintained that the very complexity of such ego attitudes as empathy, control, and efficiency makes difficult any assessment of their effects in the mother-infant interaction. He felt the film successful in presenting various types of maternal behavior during feeding of infants for classification purposes, but did not think it a useful teaching device for those it is intended to reach.

JOHN DONADEO

### MEETINGS OF THE PSYCHOANALYTIC ASSOCIATION OF NEW YORK

December 18, 1967. *ONCE DOESN'T COUNT*. Leonard Shengold, M.D.

Dr. Shengold has observed several patients who needed to demonstrate that something which happened only once had no meaning. That this attitude is a common one is indicated by the German folk saying, *Einmal ist keinmal*. The principle is seen in two forms: in one, the patient performs a forbidden act once and does not repeat it; in the second, the patient repeatedly attempts to gain permission to do something by swearing that it will only be 'just this once' and then breaking the vow. Both types of patient are counteracting the fantasy of something irrevocable, something that has happened or can happen only once: for instance, defecation, castration, death.

DISCUSSION: Dr. Martin Davis gave further instances of the occurrence in everyday life of the 'once doesn't count' phenomenon, including the light punishment given to first offenders, broken New Year's resolutions, reducing diets, and struggles to give up addictive practices. He suggested that each time patients yield to the compulsion to repeat, they do so as if it had never happened before and they were attempting to solve problems for the first time, so that 'once doesn't count' becomes a denial that the trauma had actually occurred. Dr. Renato Almansì commented on two cases that demonstrated the 'once doesn't count' phenomenon. Both acted out perverse fantasies on one occasion and took the attitude that since it had happened only once, the experience was of no significance. Dr. C. Philip Wilson spoke of the alcoholic patient who uses the 'one last time' vow as a method of dealing with a strict superego. Dr. Max Schur felt that 'once doesn't count' was not only a denial but was also an attempt at undoing; he commented that 'it happened only once' may be a screen memory for other memories.

EUGENE HALPERT

December 18, 1967. *THE COMMON COLD AND DEPRESSION*. Merl M. Jackel, M.D.

A review of the medical literature leads to the conclusion that physical or external factors do not provide a satisfactory explanation of the common cold. The influence of emotion on allergic reactions and on the nasopharynx has been shown in psychophysiological experiments, and a few analytic investigators, including Menninger, Saul, and Ruddick, have discussed the relationship between psychic phenomena and the common cold. For three years the author noted every instance of a common cold occurring in patients in analysis; the

single criterion was the prominent and initial presence of the typical symptom of coryza. The data strongly supported a temporal if not causal interrelatedness between the cold and depression; no other factor was observed with the same consistency. Usually the depression centered around object loss; in most instances the cold followed a separation in the analysis—after weekends or summer vacations, for instance. In several instances the cold developed just before a projected separation. Dr. Jackel believes that certain types of common cold are the result of psychophysiological changes that accompany depression in some individuals.

DISCUSSION: Dr. Robert Dickes pointed out that because of the lack of physical data necessary for validation, it is difficult to evaluate the significance of the cases reported by Dr. Jackel in terms of causal relationship even though there is a temporal sequence. He emphasized the need for accumulating further evidence such as Dr. Jackel's until the information passes the point of coincidence. Dr. Emanuel Klein felt that there is no doubt that many colds are preceded by depression and that in some manner colds are a way of warding off or getting over depression. Dr. Alan Eisnitz reported on two female patients, both with unusually intense pregnancy fantasies, who developed colds during analysis. Dr. Max Schur pointed out that herpetic lesions which are definitely viral may be produced under hypnosis and that the common wart, also viral, can respond favorably to suggestion. He questioned, however, whether some patients did not try to abort a cold by taking 'cold tablets', to which many people respond with mild depressive feelings.

EUGENE HALPERT

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The Ninth Educational Cruise for TRANS-INTERNATIONAL PSYCHOSOMATIC SEMINARS will go to the South Pacific, sailing from San Francisco on December 20, 1969. For further information write: Dr. James L. McCartney, Box 1309, Westhampton Beach, New York 11978.

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The University of Wisconsin Department of Postgraduate Medicine, the Department of Psychiatry, and the Wisconsin Psychiatric Institute will sponsor a conference devoted to the theme, The New Hospital Psychiatry, June 5-7, 1969. For further information write: Dr. Thomas C. Meyer, 307 N. Charter Street, Madison, Wisconsin, 53706.

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Two Workshops in the Rorschach Method will be conducted by Dr. Marguerite Hertz at Case Western Reserve University, from June 16-27, 1969. For further information write Lelia Zamir, M.A., Case Western Reserve University, Cleveland, Ohio 44106.