

## The Components of Psychic Conflict and Its Consequences in Mental Life

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# THE COMPONENTS OF PSYCHIC CONFLICT AND ITS CONSEQUENCES IN MENTAL LIFE

BY CHARLES BRENNER, M.D.

*This paper surveys current psychoanalytic concepts of drives, unpleasure related to drives, defense and compromise formation, with special attention to the author's contributions to each subject during the years 1950-1978.*

The subject of psychic conflict is one that goes back to the very beginning of psychoanalysis. As soon as Freud gave up the technique of hypnosis as a method for investigating the origin of psychological symptoms he encountered the phenomenon that he called resistance and that he explained by the assumptions of conflict and repression. His first paper on the subject, *The Neuro-Psychoses of Defence*, appeared in 1894, a year prior to the publication of the *Studies on Hysteria*.

During the many years that have passed since that time, ideas about psychic conflict have evolved progressively. It was first considered to be something that took place in consciousness and that was terminated by a conscious act of the will. Very soon, however, Freud recognized that the most important, indeed the essential, aspects of psychic conflict go on unconsciously and that they have to do with derivatives of unacceptable childhood wishes. Conflict in adult life, in other words, was seen to be an unconscious consequence of what had happened in childhood. In addition, what had been believed at first to be entirely pathological, or at the very least pathogenic, was gradually understood to have the utmost importance for aspects of normal mental functioning as well as for symptom formation. The most mo-

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mentous revisions came in 1925 with the introduction of the current theory of anxiety and its role in the genesis of psychic conflict.

Subsequent contributions by many authors, among whom Arlow (1969a, 1969b, 1973, 1975), Fenichel (1941, 1953-1954), A. Freud (1936), Hartmann (1964), Kris (1975), Lewin (1973), and Waelder (1976) are especially noteworthy, have enriched and enlarged our understanding of psychic conflict. In this paper I propose to give a statement that is as up to date as possible of the components of psychic conflict and of the nature of its consequences in mental life. In doing so I shall include, in addition to the contributions of the authors already mentioned, the relevant contributions I have made in various publications during the past twenty-five years (Brenner, 1953, 1955, 1957, 1959, 1966, 1968, 1971, 1974, 1975, 1976, 1979). These include formulations concerning each of the aspects of conflict that I shall discuss: the instinctual drives and their derivatives, the varieties of unpleasure involved in conflict, defenses and related aspects of superego functioning, and compromise formation, both normal and pathological.

To discuss all these aspects of conflict in detail would take me far beyond the confines of a single paper. I shall feel free, therefore, to abridge and even to summarize where it seems permissible to do so in order to present the essentials of the subject in such a way that the major emphasis is on my own contributions and that I keep to a minimum the repetition of what is already familiar from the writings of other authors. I shall also try to call attention to what is still obscure, to questions that are as yet imperfectly answered, and to areas for future research.

Let me turn now to a definition of psychic conflict. Psychic conflict can be advantageously defined in terms of its several components. The first of these is an instinctual derivative, that is, a wish for instinctual gratification of whatever sort. When such a wish gives rise to too great a degree of unpleasure, the preconditions for conflict exist. The unpleasure aroused by or

connected with the instinctual derivatives in question is the second component of psychic conflict. Anxiety and guilt, that is, superego condemnation, are the forms of unpleasure most often discussed hitherto and, hence, best known at present. The third component of conflict is defense—the effort to obviate or to minimize the unpleasure just referred to. Defense aims at preventing anxiety, guilt, or other unpleasure altogether. The consequence of the interaction of these various factors is a compromise formation. When we are dealing with a patient in analysis, it is this compromise formation that we try to analyze, that is, to dissect, into its various determinants, whose origins we hope to trace back to the instinctual life of childhood.

In summary, then, psychic conflict can be defined as follows. When an instinctual derivative, pressing for gratification, arouses unpleasure, defenses come into operation to reduce or eliminate the unpleasure. The final result is a compromise formation among instinctual derivative, unpleasure, and defense. This complex psychic constellation is what I call conflict.

Let me try now to give more meaning to this summary definition by discussing each of the components of conflict at somewhat greater length. I shall begin with the derivatives of the instinctual drives.

Freud was slow in formulating his ideas about the drives. By 1900, in the seventh chapter of *The Interpretation of Dreams*, he had already put forward a rather clearly formulated theory of the structure and operation of the mental apparatus, but it was not until five years later—in 1905—that he published his first approach to the theory of the drives. This was the *Three Essays on the Theory of Sexuality*, but even this work was much expanded later, so that it did not attain the form familiar to us now until 1915, fully fifteen years after the publication of *The Interpretation of Dreams*. All his other contributions to the subject appeared in 1914-1915 or later, the last major one being in 1920.

Drive theory presented major difficulties to Freud, difficulties

that he resolved only after many years and even then not wholly to his own satisfaction, although eventually he did declare himself fully persuaded of the validity of the concept of a death drive. He gave as a principal reason for the difficulties he experienced in formulating a satisfactory drive theory the fact that he believed psychoanalytic data alone are inadequate to the task. Psychoanalytic data must, he believed, be supplemented by or combined with data from other, nonpsychological branches of biology if one is to be in the position of being able to formulate a satisfactory theory of the instinctual drives of man. The reason for this conviction lay in his concept of a drive as something “. . . on the frontier between the mental and the somatic . . . a measure of the demand made upon the mind for work in consequence of its connection with the body” (1915, p. 122).

One great virtue of this concept of drives is that it emphasizes the importance of the body or, to be more exact, of the endogenous zones in sexual life. It compels analysts to remain constantly aware of the importance of mouth, anus, and genitals, despite the strenuous efforts that everyone, including one's patients, unconsciously makes to deny and disprove their importance and to shift attention to other, less frightening, less depressing, less guilt-laden subjects, such as identity crises, alienation in modern life, social value systems, and so on. Psychoanalytic libido theory as Freud developed it never loses sight of the factors of importance in psychosexual life and psychosexual development that are most likely to be pushed aside—to be repressed or otherwise defended against.

Freud's drive theory, however, with its emphasis on the idea of a frontier between mind and body, has its drawbacks as well as its virtues. For one thing, it has led to endless, futile controversy about the aspect of drives that Freud called psychic energy. Psychic energy is the capacity of a drive derivative—an instinctual wish—to set the mind working. It is called energy only by analogy to the definition of physical energy as the capacity to do physical work. It is not a form of physical energy. Yet the belief persists, sometimes openly, sometimes in a half-acknowl-

edged form, that there is not all that much difference between psychic energy and physical energy—that psychic energy really is one of the forms of physical energy, like kinetic energy, chemical energy, potential energy, thermal energy, radiant energy, etc. This is a belief that leads to such absurdities as trying to apply the law of entropy to psychology, for example, or to questioning whether the mind is what physicists call an open energy system or a closed energy system.

Still, undesirable as is this consequence of defining the instinctual drives as partly psychic and partly somatic—on the frontier between the two—such disputes and misunderstandings as those I have just mentioned about entropy and about open or closed energy systems really interest only a handful of analysts, and the difficulties that they cause are, for that reason, less serious than some others. A more serious difficulty has to do with the separation of mind and body. Another one has to do with the source of the aggressive drive.

To say that a drive is, to use Freud's words, on the frontier between mind and body is to imply that the two are somehow separate except for the bridge between them that is furnished by the drives. That is to say, it implies that psychic elements other than drives are somehow not as somatic as the drives are—that there is some separation between psyche and soma, even if it is but a partial one. There was a time when the separateness of mind and body was arguable—a time when one might maintain that they are separate. That time is long since past. Mind, psyche, or whatever synonym you prefer is altogether an aspect of cerebral functioning. The part of the body we call the brain is the organ of the mind quite as much as the lungs are the organ of respiration and the heart, the organ of circulation. Mind is impossible without brain. It is a somatic phenomenon just as much as respiration and circulation are, even though we know so much more about how the heart and lungs cause circulation and respiration than we do about how cerebral activity causes psychological phenomena.

There are important practical consequences of not keeping

the unity of mind and body clearly in focus. For example, the assertion one hears often nowadays that depressive symptoms are caused by neurochemical processes in the brain only asserts the obvious. It is no more than a truism. It has no explanatory value whatsoever. All symptoms and, for that matter, all normal psychic phenomena are caused by neurochemical processes. Every thought, emotion, fantasy, plan, wish, fear, or dream is caused by or due to the neurochemistry of the brain. It is not only the drives that are caused by neurochemical processes; everything psychological is somatic. The drives are no more somatic nor any less somatic than the rest. To describe the drives as “on the frontier between mind and body” has contributed considerably to the misconception that in some mental illnesses—the psychoses, for one example, or depression, for another—there are neurochemical disturbances that are causative factors, while in others—the neuroses—there are not. And the fact that this sort of formulation currently dominates neuroendocrinology is detrimental in every way. The psychological disturbances found in neuroses are just as much related to neurochemical processes as are the disturbances found in psychoses. Whether the neurochemical processes are identical in the psychoses and the neuroses is something we do not yet know. But there is no doubt whatever that psychological phenomena, whether normal, neurotic, or psychotic, are a part of, or due to and inseparable from, neurochemical processes in the brain.

As stated earlier, the other consequence of the idea that drives are on the frontier between mind and body, that they are on the frontier of a putatively separable mind and body, has to do with the theory of aggression. It was Freud’s need to anchor the aggressive drive in physiology, in the soma, that led him to relate it to a protoplasmic death drive. This was the idea he set forth in *Beyond the Pleasure Principle* in 1920. The concept of a protoplasmic death drive that was advanced in that monograph is a concept that is neither useful nor defensible. It is, moreover, wholly unnecessary as far as psychoanalytic psychology is con-

cerned. The only data that are necessary for the concept of an aggressive drive are the ones that are available from the application of the psychoanalytic method.

The argument to support this statement goes more or less as follows in summary form. As its name implies, a drive is a motivation that involves a wish for pleasurable satisfaction. Analysts are generally agreed, on the basis of their observations, that the most basic of human motivations fall into two broad categories, libidinal and aggressive. I know of no analyst who denies that libidinal wishes are of basic importance in mental life and development. There are some, of course, who deny that aggression, as a motive in human mental life, deserves a position of equality with that of libido, who believe that aggression should not be counted as a drive. It is not fundamental enough as a motivation, in their opinion. However, the great majority of analysts do classify human motivations for gratification into the two categories, libidinal and aggressive. In other words, it is the opinion of most analysts that psychoanalytic data, which are the only reliable data now available on which to base a classification of drives, do support a separation of the drives into these two categories.

The conclusions to be drawn from all these remarks on drive theory can be summarized very briefly. First, drives are psychological phenomena that are basic or fundamental motivations in human mental life. Like all other psychological phenomena they are an aspect of cerebral activity. Second, the measure of their capacity to drive or impel the mind to activity is what is called psychic energy. Third, drives are best classified under two headings, libidinal and aggressive.

There are certain other aspects of the theory of the drives that must be kept in mind in connection with the role of the drives in psychic conflict. Since they have all been dealt with elsewhere, I shall do no more than list them here.

First, drives appear as drive derivatives. One does not observe libido or aggression. One observes derivatives, each of which is



specific for each individual and experientially shaped and modified for each person. I may say in passing that what is valid in so-called object relations theory seems to me to involve substituting a new term—object relations—for a familiar one—drive derivative.

Second, drive derivatives are regularly mixtures of libido and aggression. Neither drive is present without the other.

Third, instinctual conflict never arises between drive derivatives because their aims happen to be disparate. Instinctual wishes as such never conflict with one another. The conflicts one so often sees clinically, in which drive derivatives are in conflict, occur because one drive derivative is being used defensively, that is, to ward off the unpleasure—the anxiety or depressive affect—associated with another.

Fourth, there is no inherent opposition between drive derivatives and ego. The ego functions as the executant of drive derivatives except when a drive derivative arouses unpleasure. Only then are ego functions found in opposition to drive derivatives; only then is the ego in opposition to the drives.

Fifth, anxiety is not exclusively related to derivatives of aggression. Libidinal derivatives can also arouse unpleasure and thus initiate defense.

Finally, oral and anal instinctual wishes do not disappear with the onset of the phallic phase. It is therefore not easy to distinguish between displacement and regression with respect to oral and anal derivatives during and after the phallic phase.

I turn now to the second component of psychic conflict, namely, the unpleasure associated with the instinctual derivatives. In 1925, in *Inhibitions, Symptoms and Anxiety*, Freud called attention to the fact that this unpleasure has a specific ideational content, a content that can be subsumed under four main headings: object loss, loss of love, castration, and superego condemnation. He noted also that these constitute a developmental sequence: object loss is the first to appear and superego condemnation is the last.

For convenience I shall refer to object loss, loss of love, castra-

tion, and superego condemnation as the typical calamities of early childhood. The following points should be kept in mind about them, since all bear on the subject of psychic conflict.

Despite the fact that these calamities appear sequentially in the course of development, each persists even after the next has appeared, each retains great importance in mental life, and there develops such a close interrelationship among them as to render them separable only schematically.

Thus, object loss and loss of love are still of great significance in the mental lives of children in the phallic-oedipal phase, for example; so much so, that if it should actually happen that a child loses a parent at that period of his or her life, object loss may well occupy the very center of the stage. And by the same token, if even as late as the phallic-oedipal stage a parent truly turns away from a child for whatever reason, whether because the parent falls ill, or because someone else's life becomes all-engrossing to the parent, then for that child, even in the phallic-oedipal phase, loss of love becomes the calamity that is the most important—the most traumatic, to use Freud's term.

For a parent to disappear or turn away from a child is an exceptional event, to be sure. It happens relatively seldom, or so, at least, we like to think. But there is no child at whatever stage of development to whom object loss and loss of love are matters of indifference, simply because castration or, later, superego condemnation, has come to occupy the position of principal importance. All children's fantasies guarantee that this is so—that whatever may be the actual circumstances of their lives, their fantasies make it inevitable that every one of the four calamities retains an important position with respect to psychic conflict throughout childhood as well as in later life.

As for the interrelationship of the four calamities, I shall content myself with a brief reference to it since I have discussed it elsewhere (Brenner, 1979). The most familiar examples are afforded by girls who attribute the fact that they have no penis to loss of mother's love, but there is no case that fails to show similar interconnections among the four calamities, just as there

is no case in which all do not play significant parts in the genesis of psychic conflict.

One can see, therefore, that the unpleasurable affects that may be aroused by an instinctual derivative have an ideational content that can be subsumed under four main headings—the four calamities I have been discussing. But there is another aspect of the ideational content that must also be taken into account in any discussion of the subject of unpleasure associated with derivatives of the instinctual drives. This aspect may be called a temporal one. That is to say, in some cases a calamity is perceived as a danger, as something impending, something of the future. In others, it is perceived as something that has already happened—as an established fact of life. To the first of these belongs the familiar term, anxiety; to the second, the less familiar one, depressive affect.

To do more than mention here the role of anxiety in psychic conflict would be to repeat the familiar. About depressive affect the following remarks are in order. They will be brief, since this is also one of the topics I have discussed at length elsewhere (Brenner, 1975, 1979).

Depressive affect is related to all four calamities, just as anxiety is. Castration, for example, is not invariably or only perceived as a danger. There are times when it is perceived as a fact of life. In the first instance, anxiety is the affect experienced; in the second, depressive affect. Similarly, object loss may appear to a child either as a danger or as something that has occurred. Consequently, just as there can be either castration anxiety or castration depressive affect, so can there be either anxiety or depressive affect over object loss. The same is true for the other typical calamities: loss of love and superego condemnation. Both anxiety and depressive affect can be related to any of the four calamities of childhood. In fact, such is the nature of mental life in childhood that each of the two affects is related to all four calamities in every individual. To put it more simply, in every individual both anxiety and depressive affect with relation to object loss, to loss of love, to castration, and to superego con-

demnation play important roles in psychic conflict. All are inter-related. All are important. None is ever wholly absent.

It should also be mentioned that, just as there is a gamut of emotions under the heading, anxiety, that range from mild apprehension to panic, depressive affect is also a heading under which many affects are to be included. Any affect aroused by an instinctual derivative that combines unpleasure with the idea that a calamity has occurred is to be included under the heading of depressive affect. Thus shame belongs quite as much to depressive affect as do sadness, misery, and despair.

I come now to the pleasure principle. Its role in psychic conflict is central. As in the case of anxiety, however, I need do no more than mention it, since it is so familiar to all analysts. It is because the mind is governed by the pleasure principle that it operates in such a way as to avoid, to eliminate, or to keep at a minimum whatever unpleasure is aroused by instinctual derivatives that press for gratification. Unpleasure initiates defense because of the pleasure principle.

Defense, the third component of psychic conflict, is also a familiar word, yet I think there are some things to be said about the concept of defense that are worth saying. The first is that it is much more in accord with observable psychoanalytic data to define defense in terms of function or purpose than in terms of specific mental mechanisms. The reason for this is that clinical observations show that any aspect of ego functioning can be, and at times is, used defensively. Moreover, the converse is equally true. All the aspects of ego functioning that are traditionally associated with defense have, at times, as much to do with furthering instinctual gratification as with blocking it to avoid unpleasure. I refer here to the familiar list of defense mechanisms: repression, regression, reaction formation, isolation, identification, projection, altruistic surrender, identification with an aggressor, denial, displacement, turning against oneself, substitution of active for passive, and negation. All are at times in the service of instinctual gratification rather than of defense. One must conclude, in other words, that ego functions are all-

purpose. They serve at times to further instinctual gratification as executants of the drives. At other times they serve to ward off drive derivatives when the latter arouse too much unpleasure. Indeed, it may be added that they also serve the aims of the superego to reward or punish. "A defense" can properly be defined only with reference to its function. Whatever mental activity serves the purpose of avoiding unpleasure aroused by an instinctual derivative is a defense. There is no other valid way of defining defense.

Very often a defense is directed at warding off or interfering with gratification of the instinctual derivative that is responsible for the unpleasure in question. If the derivative can be adequately opposed by a defensive counteracthesis, unpleasure is avoided. This is the best known, the most familiar type of defense. For that reason I shall not discuss it further.

Less familiar are defensive efforts aimed not at an instinctual derivative, but at the unpleasure aroused by it. I believe that Fenichel (1939) was the first to recognize this type of defense when he described the counterphobic attitude. At any rate, it is not rare for unpleasure, whether anxiety or depressive affect, to be warded off directly. There are individuals who never feel consciously frightened despite the fact that it is obvious to everyone else that they are afraid, just as there are those who are perpetually cheerful. The normal phenomena of courage must be relevant to this type of defensive activity, as are also such pathological phenomena as elation and apathy.

I think that not much more than this can be said at present about defenses against unpleasure as distinct from defenses against instinctual derivatives that arouse unpleasure. I believe, in short, that such defenses are used, but that at present we know very little about them. Here, it seems to me, is a fruitful topic for research.

The final component of psychic conflict to be discussed is the superego. I have kept it for last because it enters into conflict in such different ways. For one thing, it is so closely related to the defenses that Freud at first attributed defense to the superego.

For another, it is a source of unpleasure, of guilt and remorse. For still another, its demands may arouse unpleasure and be warded off or defended against as if they were instinctual derivatives. Thus the superego can play many parts on the stage of psychic conflict. What can be said about its varied roles?

First come those cases in which superego demands and prohibitions are on the side of defense against an instinctual derivative in a psychic conflict. Such cases offer no difficulties in comprehension. We understand that after superego consolidation has taken place, i.e., after the period of latency is well under way, an instinctual derivative may arouse not anxiety or depressive affect but instead superego condemnation. Defenses then come into operation to avoid or minimize superego condemnation, just as they operate to avoid or minimize anxiety and depressive affect that have been aroused by instinctual derivatives. Nor do we draw too sharp a line in attempting to separate anxiety and depressive affect, on the one hand, from superego condemnation on the other. In many cases it is not possible to distinguish sharply between fear of retaliation and fear of punishment—between anxiety and guilt, in other words; and we feel justified in including that aspect of superego activity—fear of punishment—under the general heading of anxiety, just as the related one of remorse is subsumed under the heading, depressive affect.

But what about the instances in which self-punitive impulses are treated just as are the instinctual derivatives that give rise to unpleasure? What about the times when an impulse to banish, to reject, or to castrate oneself becomes itself a powerful enough source of unpleasure to be warded off by vigorous defenses just as though it were a drive derivative? In other words, how can a sense of guilt become unconscious? You will recall that this was one of the observations that moved Freud to introduce the structural theory. It made clear to him that it is not correct to equate what is inaccessible to consciousness with what is instinctual and to relate what is anti-instinctual with what is accessible to consciousness. There can be no doubt that anti-

instinctual, self-punitive impulses can themselves be warded off or defended against and thus made as inaccessible to consciousness as a warded-off instinctual drive derivative.

I have a feeling—no more than a feeling or a guess at the moment—that here too are questions that await an answer, i.e., topics for future research. Superego demands and prohibitions are, after all, a consequence of powerful instinctual wishes. They are identifications with aspects of parental functioning and as such must partake of the intense and violent passions of the oedipal phase. Does the close genetic relationship between superego and oedipus complex somehow account for the fact that superego demands may be treated as are instinctual derivatives? I think so, although I confess that I do not yet see how. Perhaps it is pertinent that in severely pathological cases one sees clearly that the self-punitive trends that are strongly warded off or defended against are allied with masochistic wishes, that is, with openly instinctual derivatives. All of this must be the subject of further investigation before we shall be in a position to see more deeply into the problems it presents to us.

Childhood instinctual wishes, superego demands, real or fantasied calamities associated with anxiety or depressive affect, and defenses to avoid or minimize these affects—these are the components of psychic conflict. Their consequence is a compromise formation in which can be discerned the influence of each of the several components. What can be said about such compromise formations?

Freud at first limited the role of compromise formation to pathology. He described obsessional symptoms as compromise formations, for example, but he did not describe dreams, jokes, or parapraxes in the same terms, nor did he, at first, even include hysterical symptoms under the rubric of compromise formation. It was only after many years had passed that the concept of compromise formation began to gain in importance as an explanatory concept in psychoanalytic theory and then only slowly. Waelder (1930) pioneered in this direction with a paper

in which he introduced the term "multiple function" to the analytic literature. In it he said explicitly for the first time that id, ego, and superego are all codeterminants of normal mental functioning as well as of neurotic symptoms and neurotic character traits. What Waelder saw in all of this was not compromise formation, however, but rather overdetermination. That is to say, he did not relate multiple function to conflict and its consequences, but rather to the synthetic capacity or the synthetic tendency of the ego. In his view, anxiety played no special role in multiple function.

Nevertheless, Waelder's article has the merit of having been the first to call the attention of psychoanalysts to the ubiquitous role of multiple determination in mental life. In 1959 I applied Waelder's formulation with suitable modifications to the problems of the dynamics and genesis of masochistic character disturbances, and I believe it is fair to say that at the present time the principle of multiple function is widely accepted as a factor of great importance in mental life.

In truth, whatever in mental life is importantly related to psychic conflict is of necessity a compromise among the several constituents of conflict that I have just reviewed. As I have said elsewhere (Brenner, 1973, Chapters 8 and 9), this includes not only the entire gamut of neurotic symptoms and characterological disorders but also an extremely wide range of normal mental phenomena as well. Psychic conflict is importantly involved in dreams, in parapraxes, in jokes, in fantasies, plans, thoughts, object choice, vocation, avocations, creativity—in a word, in the entire range of what constitutes consciously accessible mental life and planned activity in later childhood and adult life. It is only a slight exaggeration to say that the entire surface of mental life, at least after the period of early childhood, is consequentially related to psychic conflict. And I believe it is no exaggeration to say that every aspect of mental life that is of interest to us as analysts is a consequence of conflict.

The knowledge that this is so has many implications for clinical practice. Some of these need only be mentioned: for exam-



ple, the fact that it is incorrect, often misleading, to speak of any symptom as a defense, or the fact that it is equally misleading to attribute symptomatic, conscious anxiety or depressive affect to a symptom or even to current life circumstances. A symptom is always a compromise among defense, calamity, and drive derivative. It is never purely a defense. Conscious anxiety, guilt, and depressive affect as part of a neurotic syndrome are always aroused by drive derivatives of infantile origin, not by conscious symptoms or by current events.

A. Freud's (1936) recommendation to analysts that they occupy a position equidistant from id, ego, and superego is another well known corollary of an understanding of the nature of psychic conflict.

There is still another, less well known concept that I shall only mention here, namely, that what psychoanalysis accomplishes when it is successful is to substantially alter the outcome of psychic conflict. To put the same idea in other words, the goal of psychoanalysis is to alter conflict so that the resulting compromise formation is a normal one, rather than a pathological one, as it was before analysis began. Of greatest clinical importance, I believe, is the light shed on the distinction between normal and pathological by an understanding of the consequences of psychic conflict for mental life.

What is it that justifies the statement that, speaking psychologically, a series of minute gradations connects the obviously normal and the equally obviously pathological, connects neurosis and normality? It is the knowledge that both the normal and the pathological arise from psychic conflicts that originate in the same childhood instinctual wishes—that both are vicissitudes of the same drive derivatives. If the resulting compromise formation permits a substantial degree of pleasure, a minimum of inhibition of function, little or no unpleasure, and does not involve the individual in any serious difficulties with his or her environment, both human and nonhuman, it qualifies as normal. If the pleasure is too little, the inhibition of function too great, the unpleasure onerous, or if serious difficulty results with the

people or things about the individual, compromise formation, whatever it may be, is pathological—in the usual clinical terminology, neurotic. It is not the fact that something in mental life is related to psychic conflict that marks it as neurotic. All that we enjoy and prize in mental life—all that we rightly call normal—is as closely related to the same or similar conflicts originating in childhood instinctual wishes as is what we call pathological. The normal and the neurotic are different in degree but not in kind. The practical difference to the person involved is immense. The relation to conflict and the dynamics and origin of the conflict to which they are related are identical.

These are facts that have important implications for the classification and diagnosis of mental illness, as the most cursory reflection must show. It is inconsistent with what we know of the nature of psychic conflict and of its relation to normal and neurotic aspects of mental functioning to use as nosologic or diagnostic criteria symptoms of one sort or another, for example, or the presence or absence in consciousness of anxiety or depressive affect. It will surely be a major task for someone to revise nosology by bringing it into conformity with psychoanalytic principles and knowledge, and it is one that someone must undertake some day. What the outcome will be, one can only guess. My own prediction is that whoever does undertake the task will substitute for our present unsatisfactory nosology one that will look rather like the diagnostic profile that A. Freud has developed for use with children.

But all that is for the future. To return to the present, I shall conclude with some final comments about conflict and normal mental functioning.

Freud once expressed the opinion that psychoanalysis has more to offer as a psychology than as a method of therapy, a statement that has sometimes been perverted by those hostile to analysis into a confession—their word—that analysis has little to offer as a form of treatment for mental illness. This is something Freud would never have said, because he believed just the opposite. He considered psychoanalysis to be the treatment of

choice—the best therapy available—in those cases for which it is suitable. Even so, said Freud, it has more to offer as a psychology than as a therapy.

Whether one agrees or not depends on one's point of view. Such statements, by their very nature, can never be verified. They can at best be argued pro or con, since the only test to which they can be put is the test of opinion. To a sick and suffering patient who is rescued and restored by analysis, its therapeutic value might well seem far more important than the value of its contribution to our understanding of the mind and works of man. But if comparisons are left aside, all who have an interest in the subject can agree that the contribution of psychoanalysis to human psychology has been immense: the importance of unconscious mental processes, psychic determinism, the instinctual drives, infantile sexuality, the agencies or structures of the mind, the meaning of dreams, the whole of psychopathology—the list is too long to do more than begin it. And high on the list is the role of psychic conflict.

Many years ago E. Kris (1947) remarked that psychoanalysis is the psychology of human conflict. Granting that such a concise definition can never be more than epigrammatic, this seems to me to be one that deserves wider currency than it has as yet enjoyed.

It has been truly said that a knowledge of psychoanalysis gives one another window through which to view the works of man. The perspective it affords is not only unique, it is essential to an understanding of what would otherwise seem to be fragmentary, disconnected phenomena. Just as a telescope trained on the starry sky resolves the blurred and condensed images that are visible to the naked eye into components whose existence and connection with one another were formerly unsuspected, so psychoanalysis resolves behavior and conscious mental life into its unsuspected, apparently unconnected components. It demonstrates the interacting forces or tendencies that are the component elements of psychic conflict, and it shows their relation

to the myriad features of conscious mental life that are its consequences.

### SUMMARY

This essay offers a definition of conflict and proceeds to discuss relevant aspects of the concepts involved in the definition. The concepts are drives, unpleasurable affects that trigger conflict, defenses, superego, and compromise formation.

With respect to the drives the following points are made: (1) the basis for the psychoanalytic concept of the drives is psychological; (2) analytic observations concern not drives, but drive derivatives, i.e., specific, individual wishes for satisfaction; (3) drive derivatives are always simultaneously libidinal and aggressive; (4) disparity between goals or aims of drive derivatives does not cause instinctual conflict; (5) there is no inherent conflict between drives and ego; (6) anxiety is related to both libido and aggression, not exclusively to the latter; and (7) oral and anal wishes do not disappear with the onset of the phallic phase, but persist throughout the phallic phase and into later life.

With regard to unpleasurable affects it is suggested that: (1) unpleasure aroused by drive derivatives triggers conflict in accordance with the pleasure principle; (2) the ideational content of unpleasure is one or more of the four familiar danger situations of infancy and childhood (object loss, loss of love, castration, and superego condemnation); (3) each situation persists throughout life; (4) all are interrelated; and (5) unpleasure that triggers conflict can also be categorized temporally as anxiety (future) and depressive affect (past and present).

With regard to defenses, the only useful definition of defense is a functional one, since all ego functions serve the purpose of drive satisfaction and superego function as well as of defense. Defenses may be aimed directly at anxiety or depressive affect as well as at drive derivatives that give rise to either or both.

With regard to superego, its role as an ally of defense is noted

and a possible basis for superego demands becoming a target of defense is suggested.

Compromise formation is discussed in terms of the principle of multiple function and its consequences. Finally, some remarks are made about a nosology based on psychoanalytic principles.

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## A Device for Teaching the Theory of Technique

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## A DEVICE FOR TEACHING THE THEORY OF TECHNIQUE

BY DONALD J. COLEMAN, M.D.

*The usefulness of comparing dream psychology and neurosis psychology is demonstrated in the teaching of a course on the theory of technique at the Pittsburgh Psychoanalytic Institute. Candidates are assigned the task of writing a five-minute segment of free associations using assigned background material, resistances to be demonstrated, and assigned current and past conflicts. The candidates then present their free associations to the class for analysis. Explication of educational and developmental issues is given.*

Although practicing psychoanalysts spend many important hours in the classroom, few papers in the literature are concerned with the "classroom situation." An outstanding exception to this curious dearth of psychoanalytic writings about pedagogic issues within the various institutes, of course, is the work of Helen Ross and Bertram Lewin, to whom this paper is dedicated. In it, I will discuss a teaching device I used as part of a fourth-year course on technique at the Pittsburgh Psychoanalytic Institute. Each candidate was asked to synthesize a five-minute portion of a psychoanalytic hour. Background material for the fictive analysis was given, resistances to be demonstrated were assigned, and different childhood wishes were drawn from an envelope by each candidate.

Lewin has reminded us that with *Mourning and Melancholia*, Freud dropped the explicit comparison of dream and neurosis. Lewin (1954) wrote:

Subsequent studies were to continue the new direction, so that dream psychology and clinical psychopathology developed as

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two separate interests with two separate literatures. The two fields that Freud was eager to unite in the *Metapsychological Supplement* were divorced. Dream interpretation became subordinated to technique—'gehandhabt'. Freud's statement in *The New Introductory Lectures*, that analysts in the main were neglecting the dream, is true enough so far as it refers to this particular point—the bringing together of neurosis and dream (p. 229).

Frank and Trunnell (1978) presented an experiment in pedagogy by using conscious dream synthesis as a method for learning about dream formation. Each student was given a dream wish and was asked to synthesize a dream demonstrating prescribed elements of dream work. The work of Frank and Trunnell suggested to me that if the psychoanalytic situation could be usefully compared to the dreaming situation, then one technique, not two, could be taught. A teaching device, enlisting the student's active participation, might be devised to highlight the comparison of dream psychology and neurosis psychology.

Freud (1900) wrote that by synthesis of the dream he meant the reconstruction of the dream from its interpreted and now known latent meanings.

I cannot disguise from myself that the easiest way of making those processes clear and of defending their trustworthiness against criticism would be to take some particular dream as a sample, go through its interpretation (just as I have done with the dream of Irma's injection in my second chapter), and then collect the dream-thoughts which I have discovered and go on to reconstruct from them the process by which the dream was formed—in other words, to complete a dream-analysis by a dream-synthesis (p. 310).

The *analysis* of the dream need not be complete to convey to the reader a sense of clarity and trustworthiness in the processes of dream interpretation. The *synthesis* of the dream, however, demanded a complete accounting of the latent dream ideas.

In a comparative way, the analysis of the "psychoanalytic situation," now to be treated in my course as if it were manifest

dream, need not be complete to convey to the candidate a sense of trustworthiness in the process of defense analysis. The synthesis of the psychoanalytic situation does, however, make more demands upon the candidate or the working analyst. There must be an ever-recurring, more or less complete accounting of the structural, dynamic, topographical, genetic, and developmental elements. The literature on reconstruction speaks to the work of synthesizing psychopathology as played out within the transference neurosis. The Kris Study Group (*cf.*, Fine, et al., 1971) on recollection and reconstruction wrote:

It is apparent that Freud attached vital importance to reconstruction in the therapeutic efficacy of psychoanalysis. This may be gauged further from his paper on the subject. . . . Speaking of the aims of analysis, he wrote “. . . we are in search of . . . a picture of the patient's forgotten years that shall be alike trustworthy and in all essential respects complete” (p. 258).

And the analyst's task “is to make out what has been forgotten from the traces which it has left behind or, more accurately, to construct it” (p. 81).

Kern (1978) has reviewed the literature on reconstructions, screen phenomena, empathy with its vicissitudes, and the analyst-analysand's sleep-wake continuum. Beres and Arlow (1974), Blum (1977), Greenacre (1949), Greenson (1958), Kanzer (1958), McLaughlin (1975), Reider (1953), and Warren (1961) have made important contributions to this synthetic attempt of analyst and analysand to gain a clear and trustworthy “picture of the patient's forgotten years.” It is remarkable that, in translation, the adjectives “trustworthy and in all essential respects complete” appeared both in *The Interpretation of Dreams* and in Freud's (1937) paper, “Constructions in Analysis.” These same adjectives were discussed by Arlow (1969) in his paper, “Fantasy, Memory, and Reality Testing”: “What we think was real, or what we think really happened, is a combination or intermingling of fantasy with perception of reality. When memory and perception offer material which is in consonance with

fantasy thinking, the data are selectively perceived and memories are selectively recalled and used as a vehicle for the unconscious fantasy" (p. 39).

Frank and Trunnell noted that the intuitive synthesis of dreams by a creative writer was a major theme in Freud's *Gradiva* paper. Instinctual derivatives, ego, and superego functions all play a part in the adaptive, synthesizing, and sublimatory powers of the writer. The unseen and silent reader is with the writer consciously, preconsciously, and unconsciously. Sandler (1976), in writing about actualization both within and outside the psychoanalytic situation, commented: "The whole concept of sublimation falls into place here—we can view it simply as a concealed wish fulfillment through a symbolic actualization in which the patient (or his unconscious ego) understands exactly what is being fulfilled" (p. 68).

The writer wishes to actualize a fantasy, with the unseen reader being manipulated into some role activities specifically designed for the writer's wish fulfillment. Greenacre (1971) cited Thomas Mann's creative effort to portray the impostor in *Felix Krull, The Confidence Man*. Here she felt that something impeded her state of suspended disbelief. The wishful object relationship between Mann and his reader, i.e., the playing out of an unconscious fantasy between Mann and Greenacre, had been disrupted. Upon further reading, Greenacre discovered that Felix Krull, who tells the story in the first person, was aware of all the insights that Greenacre, the reader, ascribed to the unconscious processes of the impostor. Outside the psychoanalytic situation this might be referred to as an artistic flaw. Inside the psychoanalytic situation this is "transference." Stefan Zweig, in writing a short story, may have been actualizing an unconscious wishful collusion between himself and his reader. Freud (1927) was interested in Zweig's story, "Four-and-Twenty Hours in a Woman's Life." He reconstructed genetically the gambler's masturbatory fantasies and presented his work to Zweig. The author replied that the interpretation was "completely strange to his knowledge and intention, although some

of the details woven into the narrative seemed expressly designed to give a clue to the hidden secret" (p. 192).

Barchilon has most firmly placed the study of creative writing within the psychoanalytic educator's body of pedagogic techniques. Barchilon and Kovel (1966), in their paper, "Huckleberry Finn," present a method of teaching by the use of great novels. The group began by determining the affects experienced by the seminar members while reading the novel. After distinguishing empathic from defensive affects, they discovered affective themes. The analogy that came to mind was the concept of the "musical idea." Next was a delineation of the manifest plot and characters. Repeated and refined interpretations and reconstructions led to a convincing sense of meaning latent to the manifest data.

Although Lewin never wrote about this, I believe he felt that in his "free association exercise," as in Barchilon's study group, the class resonated to the manifest symbolism of the analysand as presented, phrase by phrase, to the group. How the analysand had unconsciously and preconsciously influenced his or her symbolic transformations became more apparent as the exercise proceeded.

Besides the therapeutic and creative goals, another purpose of inventing a psychoanalytic hour can be the attainment of a deeper understanding of the process itself. What is discussed within a conceptual framework and received in the passive mode can be actively applied to a circumscribed task with specific goals. The exercise that I will present occupied a fourth of the teaching session, and in the remaining time the candidates spontaneously brought their own clinical vignettes to the class discussion.

The bringing of the questions and problems around countertransference was a desired goal in the course, but their unsolicited nature raised questions. In the latter part of their educational program candidates have to bridge the gap between two states. In the one they are working privately with their analysts, supervisors, and analysands. In the other they are pub-

licly sharing their private experiences with their peers and teachers, and later, by presentation and publication, with their colleagues. The difficulties of the “cocooning” issue, as I call it—i.e., of the often cited situation of the ideal candidate with his or her idealized analyst—come to mind. This developmental task carries echoes of the practicing and rapprochement sub-phases in developmental theory. The psychoanalytic educator has come to recognize the candidate’s learning problems and writing inhibitions during this stage of development. Each candidate must learn to acknowledge publicly the influence of countertransference on the course of any given analysis. Candidates in the class must learn tolerance and tact in the acknowledgment of their own and their classmates’ countertransference, ignorance, or lack of training. This is a difficult task. The candidates’ spontaneous discussion of their clinical work in my course, especially as it pertained to countertransference issues, raised questions about whether the teaching device, among many variables, played a role in the desired educational goals. This is problematic and stands in need of further testing.

Following is the protocol that was distributed to the candidates in my course:

Please write a five-minute segment of an analytic hour. In other words, invent the verbatim (include the relevant body movements, changes in speech patterns, etc.) material of the analysand. For this exercise you will use the material provided below. In addition, each of you will individually “draw” a unique pair of wishes and fears from an envelope. Do not talk about these to your classmates. These wishes and fears will be held unconsciously and preconsciously by the analysand whom you invent. Neither your classmates nor I will know what these wishes and fears are. You are being asked to make up a five-minute segment of analytic material from the couch with the wishes-fears and assigned resistances embedded in the material.

We will attempt to analyze this material, determine the resistances, and come up with the wishes and fears. Be prepared to present associations leading up to this segment, the circumstances in the analysis, the day of the week, the state of the trans-

ference, current life situation, recent dreams, a bit of acting out, or whatever.

The segment should demonstrate:

1. The use of “resistance against resistance.”
2. The use of a slip of the tongue or parapraxis.
3. An episode of silence or drowsiness.
4. A resistance that will be written in by me and will be yours alone.
5. A resistant formation of your choosing.

All of you are asked to demonstrate the same first three resistances. The fourth is uniquely yours just as the pair of wishes-fears are yours. What you are doing here is working from the inside out to the “material” (as you might work in the office by transient identification and empathy). You are creating the wakeful compromise formations of the five-minute segment just as you would create the “dream work” if I had asked you to make up a manifest dream to match the wishes and fears. If you want to include the analyst’s interventions, feel free to do so.

### *Material*

You are a thirty-nine-year-old woman living with your two children: a thirteen-year-old daughter and a ten-year-old son. Your husband unexpectedly left you and the children a year ago. He is studying transcendental meditation in California and currently living with his young instructress. You entered analysis shortly after your husband left because of shock, insomnia, and a painful sense of inadequacy and failure. You work as a social worker and you are a weekend sculptress. You have a brother three years older—a doctor. You have a sister four years younger. She is a speech therapist and happily married to an engineer. She has just been told that she needs a hysterectomy. She has one daughter.

Your mother died when you were four years old. Your father remarried three years after your mother died. He married a silly and self-centered woman. The marriage lasted two years. During your senior year of high school your father suffered a stroke. Near the time of your leaving for college, he died.

Last week you remembered dreaming about going to your gynecologist, only he wasn’t your gynecologist. He looked like

a supervisor you had in graduate school in Boston. You earned your Master's in Social Work in Boston. Maybe you were dreaming about your analyst. Both your supervisor and analyst seem kind and patient, but you have a nagging feeling that men see you as a bore.

After distribution of the protocol each candidate drew from a circulating envelope a pair of wishes written on a small piece of paper. In my effort to compare dream work and waking compromise formations I had written out an unconscious wish and fear plus a preconscious wish and fear. I instructed the candidates to think of the unconscious wish-fear as in some way analogous to the "capitalist" in the seventh chapter of *The Interpretation of Dreams*. The preconscious wish-fear, with its transference potential, was to be considered the "entrepreneur." As Freud (1900) explained, "A daytime thought may very well play the part of *entrepreneur* for a dream; but the *entrepreneur*, who, as people say, has the idea and the initiative to carry it out, can do nothing without capital; he needs a *capitalist* who can afford the outlay, and the capitalist who provides the psychical outlay for the dream is invariably and indisputably, whatever may be the thoughts of the previous day, *a wish from the unconscious*" (p. 561).

Here are two examples of unconscious and preconscious conflicts drawn from the envelope:

1. Unconscious wish-fear: You wish to masturbate and think that your clitoris will grow into a penis. You fear that if your wish came true your mother would die.

Preconscious wish-fear: You wish to leave your children, "take-off," and take up sculpturing in earnest. You fear that you will lose your creativity in analysis.

2. Unconscious wish-fear: You wish to make a fecal baby with your father. You fear that you will be mutilated and remember how it hurt when your father gave you an enema.

Preconscious wish-fear: You wish your period to start. You fear that you will make a mess on your analyst's couch.

The fourth resistance was written in by me on each protocol before distribution. These were: (1) the use of resistance against transference feelings; (2) the use of resistance by “having a secret”; (3) the use of resistance by forgetting a dream; (4) the use of resistance by feeling bored; (5) the use of resistance by acting in, i.e., “unexpectedly” discovering your period; and (6) the use of resistance by your unusual bubbly and talkative mood. Since there were eight students in the class, the first and second resistances were assigned twice.

Here is one candidate’s presentation:

A Monday 4:00 P.M. hour in mid-April. It is raining. The patient has just started a week’s vacation. In contrast to her usual attire of brightly colored suits and dresses, she appears in black sweater and slacks. On most occasions she smiles and greets you with eye contact when entering the office. Today her eyes are downcast and her walk slow. Her shoulders seem to sag. She lies on the couch crossing her legs at the ankles. She saw the analyst leave the lobby of the office building via a back door on Friday after her 4:00 P.M. hour.

*Hour begins:*

P. Silence—3 minutes.

T. Clears throat.

P. Silence. “I didn’t want to come today.”

T. “You seem to be having some difficulty getting into your hour today.”

P. Silence.

T. “What are you thinking?”

P. Hesitantly. “Nothing worth seeing—I mean saying.”  
Pause. “Psychoanalysis is unfair! I do all the showing and you’re hidden.” Pause. “I just don’t have anything worthwhile talking about.” Long pause.

T. “Go on.”

P. “Well—only crazy things come to mind. Today is the first day of vacation and all it has done is rain. I had to make a round trip to the airport to pick up my son who visited his father. It depresses me. I feel shut out when I’m outside and shut in when I’m inside. I spent all day Saturday



polishing the windows. The dog keeps jumping at the living room windows, which are floor to ceiling, and they become a mess. Since we live in a town house, they are one floor above ground and look out over the driveway. They got so bad I couldn't even see if my son was waxing the car right the other day, so I decided I should clean them. Little good it did! The rain rushed down them so hard and fast I couldn't see outside anyway. The view in the spring out our living room windows is really lovely—but I don't seem to enjoy much—not even the view.

“Reminds me of when I was a kid. Each of us had tasks to do. I was always very crazy—I mean curious about how my brother and sister did theirs. My sister had to clean the downstairs, me the upstairs, and my brother had to do the car. Each week he washed it and periodically had to wax it. He really worked hard at the latter. Out of spite he often put it in the garage and did it inside—especially on rainy days—and wouldn't let me in. I guess he didn't want me around any more than my father or my husband did—or maybe you do. Men never find me interesting but I have interest in them.

“I don't want to talk about you. I often wonder what you are really like. You probably live in a big house, have two spoiled kids, a sexy wife and rarely an unpaid bill.” Pause. “I don't even know the things you like to do, your taste about important things in life. You probably think I'm crazy, but sometimes I just want to wait outside your house or your office to see you come and go. Just so I could know something about you.

“I guess this is all a long way from the rain but well—the rain and all of this makes me feel the same way—depressed, boring, and shut out.”

The class had decided to allow the presenter to read the entire segment first without interruption. Comments were made, and then the presenter read phrase by phrase. Many noted the depressive tone, a sulky kind of envy, and an emphasis on seeing

and being seen. Someone wondered if this mood was defensive against the fantasies of a happy vacation. One candidate offered the comment that the analysand's unusual attire and gait signified resistance against resistance. A sensuous gait and attractive attire would have been too dangerously close to the to-be-resisted transference feelings. Some candidates observed that the unfairness of the psychoanalytic situation had to do with the analyst seeing and the analysand's frustrated wishes to see. Others referred back to the analysand's watching the analyst leave the lobby via a back door. Much discussion centered on the slip, "Nothing worth seeing—I mean saying." One candidate quoted Lewin's paper on the meaning of nothing. Another candidate, familiar with that paper, said that the analysand wished to see the analyst masturbate, but feared that the analyst would judge her to be crazy. Others pointed out that, unless the analysand was experiencing some psychotic episode, this wish was too primitive for such an otherwise intact person. Discussion drifted to the concept of material stimulating thoughts of projection. Perhaps the analysand was projecting her denigration of her own genitals onto the analyst. Others proposed an idealizing transference with a defensive denigration. All agreed that defensive wishes of the analysand won out in the struggle over her wish to say and her wish to see. One candidate mentioned penis envy but was stymied as to what to do with that piece of intellectual information.

The class finally reached a consensus that the resistance written in by me was the use of resistance against transference feelings. Several candidates evolved and refined a childhood wish to see father's penis, accompanied by the actual or fantasied rejection by father. Upon the reading of the analysand's memory of watching her brother wax the car, one candidate offered a childhood conflict. She wished to watch her brother masturbate but feared that he would call her crazy. Other candidates were uneasy about this reconstruction, joked defensively, and offered some direct oedipal wish. They found evidence supporting their oedipal reconstruction in the last two paragraphs. There was

light-hearted and competitive expression of “schools” of thought now about the nature and content of an unconscious fantasy. When, in the developmental scheme of things, does a wish-fulfilling fantasy become unconscious—and how? It became evident that in some candidates’ thinking the “unconscious” referred strictly to instinctual derivatives, repressed perhaps within the first four or five years of life and subject only to primary process. Conceptually, these candidates knew better. Operationally, when asked to do something with their concepts, they were sometimes in trouble.

The candidate presenting this material had lain on her couch in her office and had dictated the segment used in the class. She was surprised to find the class uncovering the resistance against transference feelings from material other than what she had consciously intended. Candidates found that they were “speaking” dynamic psychology in spite of themselves. She had drawn from the envelope the following:

Unconscious wish-fear: You wish to watch your brother masturbate. You fear that he will laugh at you.

Preconscious wish-fear: You want to wait outside your analyst’s office and see which car he drives. You fear that if you were seen by your analyst or he knew your fantasy he would judge you to be crazy.

Resistance written in: Use of resistance against transference feelings.

During the presentation and discussion I either “dropped out” and became recording secretary to the working group or asked for more specificity. The exercise occupied thirty to forty minutes of a two-hour session. I saw the exercise directing me to areas of theory that might otherwise not have been stressed in the didactic portion of the two-hour session. Although we had discussed reconstructions, “the inner injunction ‘to make a mental note,’” screen memories, and the interrelatedness of these three concepts, no one referred to the analysand’s memory of watching her brother wax the car as a screen memory.

That the content of repression and the repressing wish were both out of awareness seemed to be newly discovered. In the example given above, an old (perhaps an early adolescent) organized wishful fantasy was to watch her brother masturbate. This was, at the time of adolescence, a new step or plan toward a wishful relationship with her brother. It operated under the influence of yet older unconscious fantasies. Both the contents of repression and the repressing tendency were held out of awareness as she consciously watched her analyst drive his car, "forgot" her action during the session, and consciously remembered watching her brother wax the car. I had purposefully used "actuality" in some forgotten events and left others with only the psychic "reality." For instance, in the wish to watch her brother masturbate there was simply the psychic reality of anticipated laughter. As Arlow (1969) wrote, what "really happened" is an intermingling of an active, selective, perceptual process, defensive apperceptive processes, the actualities, fantasies held unconsciously and preconsciously, and the wishes extant at the time of "remembering what really happened" (see also, Basch [1975] on perceptual defense). The candidates could now approach the Kris Study Group Monograph on recollection and reconstruction, as well as Greenacre's and Kris's thinking about screen memories, with greater comprehension.

Another lively controversy—on topographical regression versus structural regression—flowed from the discussion engendered by the exercise. Overlapping this were serious questions about the sleep-wake continuum. Most often the candidates thought of the graduated wish to sleep as, quite literally, changes in physiological state. I had the opportunity to teach the shorthand symbol, "wish to sleep," as comprising a complex set of attitudes *about* sleep. The difficulty with this theoretical and technical concept came to my attention when I saw how the candidates used resistance by silence or drowsiness: they simply used it. When questioned about how and why they used it, they invoked some enactment of the infant's or the child's sleeping with

the hallucinated breast. They could not interweave the drowsiness with their assigned current and past conflicts.

It was quickly perceived by all class members that the consciously contrived segment carried the thumbprints of its maker. This provided another meaningful bridge to assigned readings on countertransference. One paper presented Annie Reich's (1951) definition, i.e., countertransference comprises the effects of the analyst's unconscious needs on his technique. By analogy, within the context of the exercise, it would be the candidates' unconscious needs that were affecting their ability to do two things: (1) empathize with the fictive analysand and creatively use their psychoanalytic knowledge to write the segment within the confines of given conflicts and resistances; and (2) empathize with their classmates' fictive analysands and reconstruct the workings of primary and secondary process.

In the first of these two tasks, the candidate's wishes (dissociated from the writer of the assignment) sometimes intruded into the work at hand. Through the group's interaction, individual candidates understood that what had been experienced as self-syntonic to their writing of a segment was later experienced as a foreign "something" that they had passively suffered. There was an opportunity to discuss papers by psychoanalysts who experienced imagery, fantasy, drowsiness, and shifts in bodily posture as they worked. What the candidates experienced as detached spectators, in retrospect, was then actively connected to the working analyst. The candidates' ability to empathize with the analysand was sometimes disrupted by the introduction of a theme irrelevant to the assignment. Once, a candidate paused in presenting and wondered out loud why he had used a theme foreign to his analysand and her problems. This theme then turned up as the topic chosen by the candidate for a short paper required at the end of the course. The paper was to include a clinical vignette and be illustrative of some countertransference issue. The candidate's unconscious needs affected his ability to listen, get the directions, and begin to

write. Two candidates "lost" the piece of paper on which their conflicts were written. Candidate A called me and I retransmitted the conflicts to A by telephone. Candidate B lost his paper and called candidate A. Still unable to remember his conflicts, candidate B invented his wish-fear and went ahead to synthesize an ingenious analytic situation. Privately we discussed his difficulties. His fictive analysand had written down a dream for her session and had lost it. Candidate B and I recounted the extra-class activities to the group. All were "taken aback" when the parallel was drawn between the candidate's acting out an unconscious fantasy with me outside the classroom and his fictive analysand (outside the analytic situation) losing her paper on which her dream was written. These parapraxes were acknowledged for what they were and presumably were grist for the candidates' personal analytic mill.

In the second situation, the candidates' unconscious needs affected their ability to listen to their classmates' material, resonate to the complexity and richness of the symbolic transformations, and reconstruct the workings of primary and secondary process. Some candidates repetitively analyzed the data a certain way or stereotypically utilized a particular fixation point. One candidate used a superb ability to "decode" metaphors. This intellectual exercise often left him outside the drift of the class. The quick, intuitive "id" guess was initially exciting but gave way as the class began to appreciate how one must "feel with the analysand" and then be able to "think about the analysand."

In addition to illustrating that unconscious needs affected the "creator" as well as the "analyzer," the exercise revealed previously unseen gaps in the candidates' knowledge. A reconstruction made by a candidate, for instance, showed a lack of knowledge about the workings of id, ego, and superego influences. The class was learning that just as they lacked the knowledge and training of the creative writer, so too they lacked knowledge of psychoanalytic concepts and experiences. When the parapraxes were evident, they saw the analogy to countertransference. Just

as the creative writer may be ignorant or lack skills, so they might be ignorant or lack psychoanalytic experience. The “unconscious” was not omniscient and omnipresent: ignorance and lack of training went hand-in-hand with dynamic unconscious needs.

Near the end of the course more discussion centered on the mode of resistance, the specific resistances, and how they fit together into a credible whole. By comparing the analytic situation to the dream situation, the candidate could experience, actively, the task of the analysand, neither fully awake nor fully asleep, attempting to find wishful solutions to current and past problems. Comparing the making up of the segment to dream-work provided the opportunity to teach how the analyst becomes “day residue” for the analysand. In the example given, this was not because the analyst or the car he drove were indifferent material but because they offered some link to the symbolic process of unconscious fantasies. The analysand’s wish-fears were on a hierarchy, and there was fluctuating evidence of primary and secondary process. The exercise and our didactic work helped to break down the dichotomy of primary versus secondary process. Gill (1967) has called this strict dichotomy the “new concept” phenomenon.

My initial misgivings about such a teaching device were twofold. First, I feared that the task was too complicated and arduous: at best, it would be done perfunctorily; at worst, it would be an invitation to “pseudoimbecility.” Second, I feared the artificiality of the exercise. I am in agreement with Brenner, whose recent text (1976) we used in the course, that one learns best with one’s own analytic case. The artificial distance from the candidate’s own analytic experience was repugnant to me. At the end of the course, both fears appeared to have been unwarranted. One might well argue that the candidates learned to eschew their authentic analytic experience and opt for fabrication. This argument has merit and one flaw. In this teaching device, the candidates fabricated, not in the perjorative sense of the word, but authentically. The candidates’ own clinical work

and countertransference problems came unsolicited into the didactic portions of the sessions.

Both in the classroom with an experiment in pedagogy and in the analytic situation with an interpretation and/or reconstruction, I take the position of waiting for more data and evaluative studies of outcome. There is one final "outcome" piece of information here. At the last assigned teaching session the class voted to hold an extra session in midsummer. They arranged to copy and exchange their required papers before this session. They could then, having read the papers and received privately my critique, be better able to jointly discuss their papers. This was a poignant session for me. There were echoes of the excitement and wonderment from a class now "taught" and closed. With these echoes were remembrances of Lewin's "free association" exercise and Helen Ross's chairing gently, but incisively, a seminar on Capote's *In Cold Blood*. The late Royden Astley and the first-year candidate alike delighted in the spell of the teaching game cast by these innovators in pedagogy. It is my hope that the teaching device described in this paper may prove useful to others in the teaching of theory or technique; better still, that it might stimulate other educators to further experimentation in pedagogy.

### SUMMARY

Comparisons have been drawn between the synthesis of a dream, the analytic goal of analyst and analysand mutually gaining a clear and complete picture of forgotten years, and the creative writer in collusion with his reader attempting wishful fulfillment of fantasies. Treating the psychoanalytic situation as if it were a manifest dream, I asked the candidates in a fourth-year course on technique to invent a five-minute segment of free associations. Background material of a fictive analysand was provided. Specific resistances to be demonstrated in the segment were given. Each candidate drew a unique set of past and current conflicts. As the candidate read his segment, the class offered comments, associations, and reconstructions in an effort



to ascertain the resistances and conflicts. One presentation with a synopsis of its discussion is offered in this paper. There were many opportunities to make meaningful comparisons to countertransference and other theoretical concepts. The candidates found this teaching device helpful in furthering their professional development. The experiment appeared to deepen the candidates' knowledge of reconstruction, empathy, the technical management of defense, and countertransference.

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## Studies on Hysteria—Katharina

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## STUDIES ON HYSTERIA—KATHARINA

BY W. W. MEISSNER, S.J., M.D.

*Freud's account of his meeting with the country maid, Katharina, is re-evaluated from a contemporary psychoanalytic perspective. Freud's original explanation of Katharina's hysteria was based on a set of quantitative-economic assumptions and a psychic model based on conflict and defense. A modern analytic perspective would shift the emphasis from the economics of discharge to the aims and objects of sexual activity. The understanding of sensual pleasure focuses more specifically on the related complex of intentions, purposes, meanings, and motives, as well as on the qualities, characteristics, and patterns of interaction with important objects.*

Of all Freud's case histories, there is none so charming and beguiling as the one based on his encounter with the country maid, Katharina. The case has been little commented on in the psychoanalytic literature, presumably because we have no further data about it beyond that provided by Freud in the account in *Studies on Hysteria* (Breuer and Freud, 1893-1895). The purpose of the present study is to re-examine the details of the case in an attempt to determine the extent to which Freud's evolving theoretical views influenced his handling of the case material and to venture a recasting of the elements of the case in terms of a contemporary perspective. This effort will be guided by my previous attempt to compare Freud's early thinking, particularly in his *Three Essays on the Theory of Sexuality* (1905), with a contemporary psychoanalytic frame of reference (Meissner, 1976). An attempt will also be made to refocus some of the elements of the case in terms of the paranoid process (Meissner, 1978).

### THE CASE

Freud met Katharina while mountain climbing during a summer vacation. He had stopped for a brief respite at a mountain

refuge and was approached by a young woman of eighteen. She presented Freud with a complaint of a loss of breath of sudden onset that was accompanied by a feeling of pressure on the eyes, heaviness and hammering in the head, buzzing sensations, a feeling of giddiness almost to the point of fainting, and a crushing pressure on the chest that prevented her from catching her breath. This was accompanied by a squeezing, choking sensation in the throat, an intense anxiety, and a feeling that she was about to die. In addition, there was a hallucinatory vision of a threatening and frightening face that looked at Katharina in a dreadful way. These symptoms had been bothering her for about two years.

Freud had no difficulty in diagnosing this as a hysterical condition, and he pressed on to see if he could find the roots of it. He suggested that the patient must have seen or heard something embarrassing at the time the symptoms began about two years previously. Katharina immediately recounted an event from two years before: she had looked through the window of her father's<sup>1</sup> locked bedroom one day and had seen him having sexual intercourse with the family cook, Franziska. In relating the details, Katharina added that she blamed herself for her parents' divorce, since she was the one who had told her mother that her father was "carrying on" with the maid. She also insisted that when she looked through the window, she had nothing bad in mind; her little brother, who was with her at the time, was afraid, but she looked in anyway. When she saw her father lying on Franziska, she was suddenly overcome by shortness of breath and had to lean back against the wall; at the same time she experienced the hammering and buzzing in her head, just as in the attacks of hysteria. Apparently Katharina's mother suspected something and was later able to find out from her what she had seen. Subsequent arguments between her parents

<sup>1</sup> Freud's discretion led him to cloak the identity of the patient's father by referring to him as her uncle in the account in the *Studies*. In a footnote added in 1924, however, Freud revealed that the events recounted in this case had to do with paternal seduction and incest (Breuer and Freud, 1893-1895, p. 134, n.).

were quite disturbing to Katharina. Eventually the mother moved out of the house with her children and into the inn where they now lived, leaving Katharina's father with Franziska, who by this time was pregnant.

These events had taken place when Katharina was about sixteen, but they carried her back to earlier experiences: for example, when she was about fourteen, her father had made sexual advances toward her. They were on a trip together and had stopped at an inn. Katharina went to bed early while her father remained downstairs in the tavern drinking. She had fallen asleep but was suddenly awakened by "feeling his body" in her bed. She jumped up, frightened, and scolded him. She would not return to bed or go to sleep until he had gone to sleep in his own bed. Freud observed that she seemed not to have clearly recognized the episode as sexual at the time it happened, but she admitted to him that it later became clear to her what her father was trying to do. Freud's conjecture that she had felt her father's erect penis during this experience seemed to be supported by her embarrassed expression when he inquired about it.

An added detail concerns the terrifying hallucination of the head during her attacks of hysteria. She identified it as her father's head, but associated it to later experiences when the disputes between her mother and father had erupted and the family was in considerable turmoil. Her father blamed Katharina for all the trouble, saying that it was her fault because she revealed the truth to her mother. If she had kept quiet, there would have been no question of a divorce. He often threatened to hurt her, and he would frequently chase her in an angry rage. The face in her hallucinatory vision was his enraged countenance.

#### THE VIEW FROM THE THREE ESSAYS

Freud's encounter with Katharina apparently took place sometime in the early 1890's, since it appeared in published form among his cases in the *Studies* (1893-1895). It was only

a decade later that Freud came to formulate his theory of sexuality and its role in the perversions and neuroses. The *Three Essays* (1905) reflected the early stage of the development of Freud's theoretical thinking.

We can remind ourselves of some of the fundamental assumptions that guided Freud's thinking during this period. The basic model with which he worked was topographic and economic, based on the formulations that found their optimal expression in the early physiologizing attempt of the *Project* (1895) and the model of the mind presented in *The Interpretation of Dreams* (1900).

The first assumption was that of causal determinism derived from the influence of Helmholtzian physics. Thus, Katharina's symptoms could be attributed to a form of biological determinism in which libidinal impulses would have come into conflict with more socially acceptable restraints. Along this line, it would seem apparent that the hysterical symptoms that Katharina began to experience on looking through the window reflected an obvious identification with the sexually assaulted Franziska, particularly with regard to the crushing pressure on the chest, suggesting the weight of the father's body. It is an interesting side note, however, that there is no mention of hysterical identification anywhere in the *Studies*, even though Freud soon after was to make this a central aspect of his understanding of the origin of hysterical symptoms (Meissner, 1970).

A second important factor that derived from the *Project* (and was also embedded in Breuer's theoretical chapter) was the assumption of the quantitative or economic point of view based on the notion of constancy in all mental operations. The law of constancy and the correlative discharge of sexual tension gave rise to a model of instinctual pressures for drive discharge as matched against counter-cathetic forces whose operation was reflected in feelings of shame, disgust, horror, or morality. These repressing forces blocked the discharge of libidinal tensions and brought about a rechanneling and a substitute discharge through neurotic symptoms. The result of this repression and

rechanneling was the transformation of libido into anxiety. We can remind ourselves that Freud's understanding of libido at this point was largely physiological and even biochemical, a view that became explicit in the treatment of the actual neuroses. Here Freud believed that the excess of sexual stimulation produced a quantitative accumulation of energy due to inadequate discharge which was then followed by a transformation of this sexual energy into a toxic agent responsible for anxiety. It was only after a score of years that Freud modified this toxic view of anxiety, and, in fact, not until 1932, in the *New Introductory Lectures*, was he able to surrender the idea. Accordingly, Freud's view of Katharina's symptoms was based on an essentially economic notion of sexual tension discharge.

#### KATHARINA REVISITED

From the point of view of contemporary psychoanalytic theory, the model of impulse and defense which dominated the thinking in the *Studies* can no longer be considered adequate. The sexual theory of discharge in itself is unable to account satisfactorily for the clinical phenomena; we have come to realize that the dynamics of sexual experience involve considerably more than the economics of instinctual discharge. Appropriate sexual stimulation and sensual gratification cannot be defined simply in organismic terms: they must be viewed in a context of meanings and motives involving strong attachments to specific objects. My earlier discussion of these issues (Meissner, 1976) put them in the following terms:

As a consequence of this broadened conceptualization of the instinctual theory, there has been a considerable shift towards an emphasis on the aims and the objects of sexual activity. Thus the concept of libido has acquired a nonreductive and specifically motivational aspect. The experiencing of sensual pleasure is not merely a matter of drive-discharge, but rather has a directional component which involves intentions, purposes, meanings, and motives. These components of the sensual experience turn the direction of attention to a diversification and broaden-



ing of the aims of such experience, as well as to the qualities and characteristics and patterns of interaction with specific objects. It is in the interaction with these objects that sensual experience is not conceived so much in terms of the economic and quantitative terms of energy discharge in response to nonspecific stimulation, but rather it is seen in terms of adaptive functions generally, as well as the more specific quality and character of the persisting relationship to significant objects (p. 130).

In the case of Katharina, it is immediately evident that the situation is considerably more complex than Freud's view would allow. The girl's curiosity, her insistence on looking, remains unexplained. We can infer a certain degree of sexual curiosity, but it also seems reasonable to suggest that Katharina may have anticipated what she would see when she looked through the window. Perhaps her curiosity was stimulated by the possibility that her father was doing with Franziska what he had tried to do with her, or that he might be doing with Franziska what Katharina guessed or fantasied he had done with other women, particularly her mother.

The whole scene is familiar enough to us to suggest a reference to primal scene experiences (Esman, 1973). It does not strain the imagination in the least to think that Katharina, given such a father with his sexual proclivities, might have had an earlier primal scene experience. Edelheit (1974) suggested that the "primal scene schema" derived from such experiences gives rise to a set of double identifications that reflect the libidinal-aggressive aspects of the sexual encounter. This double identification may operate simultaneously or alternate back and forth, and it may reflect typical sadomasochistic configurations, or, more specifically, identification with the victim and the aggressor. The question of the extent to which such primal scene schema reflect the influence of a child's real experience of seeing the parents in sexual activity as against its derivation from fantasy remains unresolved.

In any case, the dynamics that enter into the understanding of Katharina's symptoms cannot be divorced from her complex

involvements with significant objects, particularly her parents. Not only are questions raised regarding hysterical identifications in connection with the hysterical symptoms—her identification in the first instance with Franziska and perhaps with her mother in the primal scene experience—but there are also significant introjections that derive from other, nonsexual aspects of the primal scene schema.

We know now that incestuous developments in the family system do not come about by chance. In Freud's account, one is left with the supposition that the father's disordered sexuality is simply a given and that the main focus of concern is on the stimulus effect on Katharina. But today we know from the study of family interactions that the pattern of incest often derives from a disturbed relationship between the parents and that the incest usually takes place with some form of collusion on the part of the mother. In these well-known patterns of incestuous family interaction there is ample room for the motives of victimization and aggressive victimizing to be played out. Consequently, the symptoms in Katharina's case, as well as the manner in which they came about, would direct our interest toward the issue of family dynamics and the patterns of interaction that might lie behind them. Hence it is not simply a question of the patient's libidinal involvement with specific objects and the consequences of that; what is involved is a highly complicated emotional interaction with significant objects that goes beyond the simple one-to-one relationship to a more complicated matrix of familial transaction.

Such a consideration inevitably directs our attention toward a more comprehensive view of the patient's psychological development, reflecting our more complex grasp of the emergence and sequencing of developmental patterns. There is no longer a focus on the predetermined unfolding of inherent biological potentials emphasized in the earlier theory, but rather an appreciation of the intermeshing of innate maturational factors with experiential components derived from interaction with significant objects. Moreover, the perspective generated by this view is

not limited to the economically determined repetition of earlier developmental patterns in later behavior; it extends to the attempt to understand progressive developmental transformations and the influences of earlier forms of interaction with objects on later patterns of behavior (Abrams, 1977).

In Katharina's case, then, questions would inevitably arise about earlier levels of developmental experience that might have contributed to the hysterical reaction. We would have to be concerned about the as yet unresolved issues of adolescent development. These would rest on the course and resolution of latency concerns, and these in turn would carry us back to an attempt to reconstruct the dynamics of the oedipal period. Even this, however, would not satisfy our curiosity about developmental issues. We know that the organization and patterning of oedipal dynamics reflect preoedipal involvements with parental figures; at that early stage, critical components of the emerging personality are laid down that carry considerable weight in the organization of psychic structure. These issues go back to the earliest patterns of mother-child interaction and are concerned with what Winnicott (1965) has described as the "facilitating environment."

My own thinking in this matter tends to focus more directly on the patterns of internalization around which the emerging personality is organized and which reflect the developmental vicissitudes (Meissner, 1978). The question here would focus on the critical patterns of introjection that occur in sequential developmental organization and provide the rudimentary core elements around which the patient's sense of self is organized. To take one element of Katharina's hysterical manifestation, we can focus on her apparently hysterical identification with Franziska as the sexual victim. Here the motif of victimization is sexualized, determined no doubt by unresolved and conflictual oedipal wishes; nevertheless, the more central elements of victimization and the correlative motif of aggressive victimizing seem to carry the pathogenic burden.

From this perspective, specifically that of the "paranoid proc-

ess," a number of interesting possibilities open before us. Let us indulge in some speculation concerning Katharina's family. Even if our guesses are incorrect, they at least illustrate a fruitful way of inquiry into such a case. The so-called "identification with the victim" rests on critical introjections derived probably from the patient's mother. We might imagine that Katharina developed a primal scene schema at various stages in her development from preoedipal levels through adolescence. In this primal scene schema she may have viewed her mother as her father's sexual victim. She also may have viewed her mother as chronically victimized by her father in a wide variety of situations dictated not only by the pathology of their relationship as husband and wife but also by the circumstances and expectations of the society around them.

This powerful introjection, then, would form a predominant core around which Katharina's sense of self would have become organized, providing a powerful motif for her life's direction. At the same time, however, there is a more hidden element in the case that has to do with the ways in which her father too was a victim, particularly a victim of his wife. Here again we would have to wonder about the patterns of interaction between them that drove him to seek illicit and dangerous satisfaction from other sexual objects. In other words, there is enough in the case to suggest that both of Katharina's parents were caught up in a process of mutual victimization that would have provided ample ground for the internalization of a pathogenic sense of victimization in Katharina herself. An important point to note for the understanding of such introjective configurations is that the introjection derives not in a simple one-to-one fashion from a single object of internalization, but can be influenced by multiple objects interacting in intricate patterns to reinforce the central introjective theme.

We know also that the economy of the introjects demands that where there is a victim-introject there is also an aggressor-introject. We can suggest that this element is not lacking in Katharina's case. Here again the aggressive and victimizing as-

pects of the introjective organization can derive equally well from either parent. In Katharina's case, there is evidence to suggest elements of aggressive victimizing and corresponding passive victimization in both parents. Their reciprocal victimization was paralleled by their respective roles as victimizers. Katharina's internalization, by implication, would have included the amalgamation of aggressive and victimized aspects in both of her parents as well as in their interaction.

We have several hints about the victimizing quality of Katharina's own inner self-organization. To begin with there is a phobic, projective quality to the anxiety symptoms she described—particularly the fear of dying and the feeling that there was someone standing behind her about to catch hold of her. The second important projective element in the case is the frightening face that she seemed to see during these terrifying attacks. And finally, there is the sense of guilt she expressed to Freud about having caused her parents' divorce by telling her mother about her father and Franziska.

The phobic element suggests the role of externalization in the development of her symptoms as well as the possibility of an additional projective element in the unknown figure behind her. We may reserve the concept of projection to explain the more specific externalization of introjective derivatives which might account partially for the hallucinatory figure. But we may also postulate that Katharina's broader tendency to externalize inner fantasies about victims and persecutors so as to see herself as victimized operated to contribute to the hallucinatory figure. While this kind of externalization does not necessarily specify the components of the aggressor derivation, it nonetheless creates an external source of imminent danger to the self and serves to reinforce the sense of self as victim. This mechanism is common in all forms of phobic anxiety and is closely related to aspects of paranoid projection.

For Katharina, the paranoid projection becomes explicit in the hallucinatory vision of the threatening head. Freud presented it as a sort of hallucinatory re-creation of the angry face

of the father, but we can remind ourselves that it served the ends of maintaining the patient's victim introject. On this account we would find it necessary to seek further in understanding this particular symptom. The evidence is not available in Freud's account of the case. But clinical experience suggests that, often enough, such a paranoid manifestation (the creation of a persecutory object) is not only related to the dynamics of the organization of the patient's introjects, but, in fact, also reflects by projection one of the more latent aspects of the introjective organization itself. If we follow this suggestion in Katharina's case, the threatening projected head derived from her identification with the hostile aggressive father and reflected an underlying level of unresolved pathogenic ambivalence toward the father: she feared and hated him, while at the same time loving him. Anna Freud (1936) has clearly described this mechanism of the formation of the aggressor-introject and its relationship to ambivalence in her discussion of "identification with the aggressor." Thus, the vision of the terrifying head would represent not only a reactivation of the representation of the father, but would also involve projective elements derived from the patient's aggressor-introject and would thus express more complex developmental and object-related vicissitudes.

Finally, Katharina's guilt over the divorce of her parents suggests that there might have been a latent wish to hurt and even victimize them, as a way of acting out the repressed levels of ambivalence toward them. Here we can only hint at the female child's deep sources of resentment against parents, related not merely to the dynamics of penis envy, but also to the devaluation and disadvantage often associated with the feminine role in certain cultural settings. Certainly in the mid-European Victorian culture of the late nineteenth century these factors were significant. Thus, the patient's hostile and destructive wishes may have found expression in this attack upon her parents' relationship and left her with a resulting sense of guilt and remorse. In such a reflection we cannot ignore the obvious oedipal implications, particularly in terms of the revenge motif directed to-

ward the mother. The wish to bring about a divorce between the parents and to eliminate mother from the marriage bed are well-known and traditional oedipal themes. But here the revenge also includes the father and can perhaps be seen more effectively in terms of Katharina's pathological need to place herself in the position of being her father's victim. This, too, has its oedipal underpinnings, but the issue of victimization, as I have already suggested, is a broader and deeper issue than the question of sexually determined oedipal conflicts.

We may note that the motif of victimization which seems to pervade this material is related to the more traditional concepts of masochism and depression; indeed, the dynamics of victimization may find varying forms of expression in both masochism and depression. But it should be clear from this discussion that the victim motif cannot be simply or reductively accounted for only in terms of the dynamics of masochism or depression. More complicated motivational components and relational aspects are involved than can be explained by instinctual derivatives and vicissitudes. Complex object relations components, internalizations, and self-integrative motivations are at work that call for theoretical integration. Moreover, the discussion here aims at a reconsideration of the introjective processes relevant to the organization of an internal sense of self as victim insofar as these processes pertain to and underlie hysterical processes.

These elements in the case of Katharina, I believe, make it clear that the somewhat simplistic view of the genesis of hysterical symptoms on the basis of underlying sexual conflicts and the somewhat naïve model of conflict and defense yield to a more complex consideration in which the sexual aspect interacts with a broad range of other psychic determinants. If one asks why the sexual impulse is a source of pathogenic conflict, Freud has little to offer by way of explanation other than the restraints and taboos of social mores and morality. However, in the light of this discussion we can infer that there are more complicated intrapsychic determinants that are related to the internal organiza-

tion of aggressive components in regard to the victim and aggressor introjections.

I suggest that integrating the concept of sexual wishes and impulses with the concept of underlying components of victimization and aggressiveness offers a more meaningful explanation for pathogenic development than does the issue of sexual drive and conflict as such. Understanding the pathology, then, requires a more comprehensive grasp of the meaning of these internalizations, their role in the economy of instinctual life—both sexual and aggressive—and also their relevance to interaction with objects. We might add here that narcissism as a motivating force in the patterning of such internalizations plays a critical role in all cases, but that the material in the Katharina case offers little opportunity for speculation in this regard. Nonetheless, narcissism—as well as the other motivating components of the introjective organization—reflects and derives from intricate patterns of object relations.

It should be clear that the shift in perspective suggested by this analysis does not imply an abandonment of instinctual theory in any sense, but rather points toward integration of it with multiply determined models of psychic functioning. In this integration instinctual dynamics are seen as embedded in subtle patterns of interaction with significant objects, which has a profound influence on the organization and functioning of the self. As I have suggested in a previous discussion of this question (Meissner, 1976):

The problem of hysteria . . . can no longer be thought of simply in terms of instinctual striving and repressive counter-cathetic forces. Rather, it involves complex issues of developmental vicissitudes, the emergence of ego strengths, the experience of specific qualities of object relationship, dependence, aspects of ego-functioning, self-integration, the tolerance and mastery of affects, and other significant components (p. 132).

These more comprehensive understandings would shape the course of our therapeutic interests and determine the direction



of our interpretive efforts in any given analysis. It is no longer adequate simply to delineate the sexual conflict and repression in the hysterical patient. The sexual conflicts are embedded in a complex matrix that involves developmental concerns and reflects the progressive patterning of internalizations and the fundamental organization of the patient's sense of self. Until these elements are resolved, we cannot be sure that we have, in fact, reached the core of the pathology of the hysterical patient. It seems, then, that in Freud's beguiling account of his encounter with Katharina, he showed us little more than the tip of the iceberg.

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## Scopophilia and Object Loss

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## SCOPOPHILIA AND OBJECT LOSS

BY RENATO J. ALMANZI, M.D.

*The study of a case of voyeuristic perversion and of some previously published cases of simple scopophilia suggests that fear of object loss early in life may be an important factor predisposing one to a propensity for voyeurism. The increased need to maintain visual contact with the object and to incorporate it visually leads to a hypercathexis of the visual function which is at the base of voyeurism. This need later becomes sexualized, while still retaining its pregenital connotations. Although object loss was apparently significant in the case of the patient described in this paper, it is not necessarily a factor in all cases of perverse voyeurism and, when present, may be considered as only one element in its pathogenesis.*

In his paper on the recovery of childhood memories, Kris (1956) described a patient with scopophilic impulses which represented displacements of oral drives, including the wish to incorporate through the eyes. This patient harbored the contradictory image of his mother as a "beloved stranger," an image that seemed to have crystallized during a period when the mother was depressed and could relate to the patient only through facial expressions. Kris quoted Anna Freud to the effect that depression in the mother often produces in the child a tendency toward searching looks and a need for visual contact. He noted Spitz's (1955) observation that during nursing the child looks at the mother's face, which thus becomes an essential component of the child's total sensory and psychological environment. Kris speculated that the perversions of voyeurism and exhibitionism may have some root in a deficit in the nursing situation.

In an earlier communication (Almansi, 1960), I described a connection between voyeuristic interests and fear of object loss, with feelings of oral deprivation, in three patients whose drive orientation was directed toward the breast. In these patients the

birth of younger siblings and the experience of watching them being nursed gave rise to powerful aggressive impulses. In addition, there was a strong unconscious equation of the mother's eyes with the nipples. A mechanism of incorporation through the eyes was particularly prominent. Similar findings had been reported in another case (Almansi, 1958). This patient, strongly scopophilic, showed evidence of powerful oral fixations. When his wife was pregnant and his financial security was threatened, he began to experience intense frustration and anger toward mother figures, as well as a wish to be attached to the breast and a fear of losing it. During this period, he developed a hypnagogic phenomenon which embodied mnemonic traces of his mother's face as it appeared during the nursing period, according to our reconstructions. This phenomenon was related to his severe separation anxiety and was connected with scopophilic urges.

From the findings of these four cases, it would seem that object loss, danger of separation, threats to security, hostility toward mother surrogates, and separation anxiety, in combination, gave rise to a hallucinatory projection of the need-satisfying object, representing an attempt to recreate the primitive perceptual cluster consisting of the sensation of the nipple in the mouth and the concurrent vision of the mother's face. On the basis of this combination of factors, I suggested the possibility of some genetic relationship between object loss and scopophilia.

Such a connection was reported in a case by Settlage (1971). His patient was separated from an excellent nurse when he was three weeks old. This was followed by a period of three and a half or four months during which the mother was not available as a libidinal object. This sequence of events presumably served as a stimulus for precocious visual, verbal, and intellectual development. These observations further support the suggestion of a possible connection between object loss and the genesis of scopophilia. From clinical experience McDevitt (1971) observed that hypersensitivity to stimuli and intense early separation anxiety were associated with precocious development of certain

ego functions, such as intellectual, perceptual, and linguistic ability. A similar observation was made by Greenacre (1971b) who described a female patient endowed with "remarkable alertness, an outreaching and watchful hold on external reality" (p. 192). This patient tended to develop eye symptoms which had a scopophilic and exhibitionistic significance when "she felt insecure because someone with whom she had felt closeness was retreating" (p. 184).

Two other observations supporting this hypothesis should be cited. Allen (1967) described how thwarting the efforts to establish a gratifying relationship with the mother may lead to ambivalence toward her and to strong exhibitionistic-voyeuristic tendencies. Sours (1973) described a number of patients suffering from false myopia caused by spasms of the ciliary muscles. This resulted in blurred or misty vision and in variations in visual acuity. These phenomena were precipitated by separation from the object—real, threatened, or fantasied—and were associated with sleepiness, depression, listlessness, hypnagogic hallucinations, and dreams related to the oral triad (Lewin, 1950).

Thus it would appear that a genetic relationship may exist between object loss and scopophilia. The present study, accordingly, undertakes to gain a better understanding of the psychological factors and mechanisms involved and to test the hypothesis that there may be a causal relationship between voyeurism as a perversion and severe deficit in the oral phase. For this purpose, I will present clinical data from a patient suffering from a severe scopophilic perversion and intense fear of losing the object. Since the entire case cannot be presented, I will concentrate on those features which bear on the specific theme, namely, the correlation between the patient's very early life experiences, particularly his difficulties during the oral phase, and the development of his voyeuristic inclinations.

### CASE MATERIAL

Mr. J, a businessman in his mid-thirties, was referred to me for analysis by a female therapist after six months of unsuccessful

psychotherapy. The principal symptom was voyeurism, specifically, peeping through windows for hours at a time while masturbating. In addition, he would frequently telephone women he did not know. During such calls, he would try to be recognized by the woman as an acquaintance and would engage her in a complicated game in which he attempted to find out his presumed relationship to her and what sort of person she was. He called this form of play "a way of looking into her mind." He would then try to turn the conversation to sexual matters in an attempt to have the woman describe her reactions to sex, especially to cunnilingus and big penises.

The patient was compulsively fascinated by pornography. He loved to read about women with big breasts or to look at such women either in drawings or on the street. From time to time, he wrote short stories of a pornographic nature centering on polymorphous perverse themes, most commonly female homosexuality, particularly the enslavement of an innocent girl by an old lesbian. He used his skill as an artist to make drawings of sexual orgies, of fellatio, and of cunnilingus between women, who were usually represented as hard-looking, with big breasts and high heels. Despite his technical skill, he had difficulty in drawing female genitals accurately, and sometimes he would tentatively add a penis to the drawings.

Among his other symptoms were fear of death and hypochondriacal complaints and fears, especially concerning cancer of the stomach, rectum, and penis. These fears always appeared after one of his frequent bouts of eating or drinking too much. During such periods the patient would become depressed and would wander about looking for prostitutes. There was also long-standing guilt about masturbation and sexual activities in general.

Mr. J was married to an extremely aggressive, intelligent, but quarrelsome woman. She was frigid and hysterical and at times struck him or berated him in a sadistic way. He desperately wanted to pull away from her, but also felt drawn to her. He felt guilty about his performance at school and his unproductive

and inefficient record at his work. He had accumulated debts and at times had embezzled money from his employer.

Mr. J had been raised on a farm in the Midwest. His father was an alcoholic with paranoid trends, a passive man who permitted his efficient and aggressive wife to run the family. The mother was a big-breasted, intelligent, and active woman who, although prudish, was physically exhibitionistic. The patient masturbated in childhood, for which he was scolded by the mother. Nevertheless, he saw her masturbate while listening to conversations on the party-line telephone. Apparently, she was also a voyeur, because on one of her visits, he saw her spying with binoculars on people across the street. Although the mother preferred the patient to his older sister, she bullied and threatened him. He depended a great deal upon her, but felt unsettled or frightened and indecisive in her presence, much the way he felt with his wife. He had some suspicions, unfounded in fact, that his mother and sister had homosexual interests. The sister, four years his senior, was aggressive and independent. She related to the patient in a seductive and exhibitionistic manner.

The patient recalled voyeuristic and masturbatory activities from a fairly early age. When he was seven or eight, he was aware of his parents' sex life and wished to see them engaging in intercourse. During his teens, he would do his homework in the kitchen while his mother bathed there. She told him not to turn around, but he could see her reflection in the mirror. At other times he would hide and look through the window to see her undressing. Often when he was ill he slept in his mother's bed. He recalled that when he was ten years old he was shocked by seeing the red pubic hair of one of the girls who was living with the family at the time. About this time, there was mutual masturbation with an older boy. This activity made him very anxious because he was unable to ejaculate like the older boy.

At about the age of thirteen he changed from an active, helpful worker around the farm to a lazy, inefficient daydreamer. He masturbated a great deal while looking at pictures and

peeked at the boarders in the house. He would rub his genitals against those of the cows, and he trained a calf to suck his penis. About this time, one of the farmhands ordered him at rifle point to drop his pants and tried unsuccessfully to penetrate the patient anally. When he was sixteen, he was seduced by an older girl who straddled him. He was shocked and terrified because she bled profusely.

There were two important themes that played a major role in the development of his neurosis and his voyeuristic perversion. These themes centered on traumatic events that were reconstructed during the analysis through dreams and associations.

The first of these was a nearly fatal intestinal illness which started after the patient was weaned at the age of eight months and given cow's milk. The illness lasted until the patient was eighteen months old. The event was discussed frequently in the household because it represented a turning point in the family's life. On the advice of the patient's pediatrician, the father left his job in the city and bought the farm. During his illness, the patient had severe attacks of bloody diarrhea and crying fits, and from time to time he fell into a semi-stupor. A photograph taken of him during this period shows him to be extremely emaciated, with a large protruding belly. Just to look at the photograph would send shivers through the patient. Material relating to this illness appeared many times during the analysis, usually during periods when he felt discouraged, depressed, or hypochondriacal. These periods usually coincided with times of financial difficulties and set-backs in his work. The pervasive image that emerged from this material was that of a feeble, emaciated, famished, and depressed child, sometimes screaming and angry, sometimes lying passively, but always intently watching his parents and feeling lonely in their absence.

The second set of reconstructions concerned experiencing the primal scene, something which must have happened many times between the ages of two and three and a half, when he slept in his parents' bedroom behind a screen but was able to see them in a mirror. It was possible to reconstruct his excitement and



curiosity, as well as his admiration for his father's phallus and his mother's body. It seemed that he identified with both parents during the act and that he felt frustrated because he was unable to participate. There were also clear indications that he felt very lonely during these experiences. Fecal play and possibly uncontrolled discharge of urine may have occurred in connection with the primal scene stimulation.

When this material began to emerge, the voyeuristic tendencies recurred with great intensity, and phenomena indicating resistance to analytic investigation were very strong. Resistances became attenuated after the patient was able to associate the wooden frame of his parents' mirror with the window frames through which he would regularly peek. In this connection he suddenly remembered tooth marks on his crib, and in a hypnagogic state he saw himself, an enraged young child, biting at the bars.

These two themes—the intestinal illness and the primal scene—kept reappearing throughout the analysis, each time bringing new details to the fore and carrying an ever-increasing sense of conviction for the patient. Thus, throughout the analysis there was a continuing correlation between orality, fear of object loss, and scopophilic impulses. Material illustrating this correlation follows.

The relationship with his former therapist, Mrs. D, who had initiated the termination of treatment and the transfer of the patient to the author, exemplified with utmost clarity the connection between the fear of object loss and scopophilic impulses. The patient reported that he had fallen in love with his former therapist and had depended upon her and trusted her more than any other woman in his life. While he was her patient he often spied for hours at her windows which he could see from his apartment. He was overcome by anxiety and fear that he would be detected, and he never dared bring the material into therapeutic sessions. The separation from her had been extremely painful, and during the analysis with the author the patient kept longing for Mrs. D and dreamed of seeing her. On one occasion

following a visit from his mother, during which she had provocatively and exhibitionistically sat with her legs open so that her genitals were visible, the patient reported the following dream.

I was on a sailing trip with my wife, my child, Mrs. D, and her husband. I wanted to see Mrs. D naked and looked at her legs when she crossed them. She was holding my infant son and then took her breast out of her blouse to nurse him. I quickly pulled my son away and went to suck on her breast.

In connection with this dream he said that he had gotten strength from Mrs. D, that she was good for him, and he could not get her out of his system. He had felt in a panic when she discharged him because he felt that she was abandoning him. He concluded the associations by complaining that there was no strength to be had from a dream.

In the following session he complained of severe depression, extreme inactivity, and fear of death. He referred back to the previous dream, noting that he had always been afraid of being discarded by a woman. He complained of being weak, of being unable to stand on his own feet, and of his wife's not giving him the things he wanted. Often, he said, he felt terribly alone.

A few sessions later he related a hypnagogic hallucination:

I saw a naked woman. I particularly remember her breasts, which were very distinct. She had her legs spread apart and a man was kissing her between her legs.

At another time he had the following dream:

I was in a delicatessen and asked for bread for a sandwich. They opened a large, round, cylindrical container, like those used for cheese, and a man pulled out slices of rye bread. I suspected it might be stale, but to my great surprise and pleasure I found it to be very soft, and I bit into it with delight. Then I went to another store to look for meat, and there I met Mrs. D. I remained outside. She came out, greeted me, and said I looked very attractive. Then I found myself in an apartment across the street from the store and was peeping through a window to see

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Mrs. D who came in. She saw me peeping, pulled her dress up and exposed herself, but she had her panties on.

In his associations to this dream, the patient revealed a wish to be fed by Mrs. D. He considered her his "lady bountiful." He also associated a number of voyeuristic themes—naked statues, pictures in a magazine, sex books, etc.—and then recalled the dream that he had while he was a patient of Mrs. D's:

I was peeking at her through a glass window and wondering about her underwear, but the window was closed.

An intermingling of oedipal and preoedipal themes is recognizable in this material. The disappointment of the oral phase became fused with the feelings of oedipal defeat so that the wish to penetrate the transference figure, Mrs. D, reverberates fantasies of being reincorporated into the mother. This would be in keeping with Lewin's (1933) formulation concerning the fantasy in which the whole body represents the phallus.

A period of financial difficulty exacerbated the patient's jealousy over his sister. The mother invited the sister to her home and not the patient. The patient complained about how the mother had lent money to the sister but never to him. And he felt that he had been exploited by his parents from childhood on: he had had to carry the heavy buckets of milk; the sister had been nursed, but not he. In fact, the mother had given him cow's milk which had made him sick. With these memories he associated an episode that had occurred shortly before the analysis began. While his mother was in the hospital suffering from a mild stroke, the patient knelt at her bedside, crying. He started to kiss her arm, which was protruding from under the covers, and then found himself, much to his surprise, sucking on her arm. After relating this episode, he concluded that he apparently could not stop sucking, even at his age.

Stimulated by what he had been discovering in his analysis, the patient took the opportunity to ask his mother about his intestinal illness. She reported to him how they moved to the country because of his illness and that during the move the car

had been mired in the mud. She commented on his emaciated condition and the weakness he experienced because of the protracted diarrhea. She admitted that she had had a terrible reaction to the foul odor that came from him. These revelations left the patient terribly depressed. He went on a spree of excessive eating and drinking and took some nude pictures of his wife, the latter having the significance of a visual, oral assault on her. In the transference he began to idealize the analyst and expressed the wish that I should look after him. In further material he expressed resentment toward his mother for her attitude about the way he smelled and said that his illness had been her fault. She had weaned him at eight months because she no longer wanted to nurse him. The day following the material just reported he related this dream:

I was going to a picnic and was given money to buy beer and liquid refreshments. A woman refused to give me beer on a technicality, but took my money.

Part of the day residue for the dream was his continuing ruminations about his mother's rejecting him. In his anger he had begun to think about picking up some woman with whom to have intercourse. He then corrected himself to say that he really wanted to lick the woman's breast. Instead, he had called a woman on the telephone and tried to involve her in a discussion utilizing a play on words about the sexual significance of eating. At the end of the session, he said in a defiant tone, "So, I wanted to gobble a woman."

The theme of being abandoned appeared regularly in the transference as well as in his marital and business life. Before each vacation period, he would become negativistic and hostile and would express these feelings by coming late for sessions. Just before one summer vacation he began to complain about how awful he felt because his wife had gone out the previous night. In his anger he did a lot of window peeking and had fantasies of licking women's genitals. Left alone, he always had the desire to peek through windows or to telephone women and

masturbate while talking to them. He recalled that between the ages of nine and eleven, whenever he was lonely he would indulge in similar activities, either peeping into the windows of empty summer houses or searching through magazines for nude female figures.

While away alone at a convention he made a half-hearted attempt to seek out a prostitute. He drank and smoked to excess and was obsessed by a need to peep through windows. He had vivid fantasies of buying women, having them undress, and "filling his eyes" with them. He imagined enslaving a woman through cunnilingus and seeing women licked by dogs as well. He also had sadistic fantasies of small women being enslaved and tortured by men with large penises.

Conflicting tendencies between the wish to be close to people, the need for people, and the wish to abandon people were pervasive throughout analysis. He had entered treatment in part because of his inability to decide about leaving his boss and his wife. After he had made sufficient progress in the analysis, he left his boss, and when he felt secure with another woman, he left his wife. He had always wanted to separate himself from his parents but was never really able to do so.

Progress in the analysis came about when he was able to establish, by way of the transference, a relationship with a healthy father figure and a giving, bountiful mother. During the termination phase of the treatment, he had a dream in which he was literally devouring the analyst, a condensation of his wish to identify with the analyst as well as to undo the danger of separation by keeping the analyst with him forever.

In addition to the well-established need to overcome castration anxiety, his scopophilic perversion served as a vehicle for the gratification of all impulses, reassurance against object loss, and also as a means of controlling his aggression against a disappointing mother. In fact, the telephone perversion began on a day in which he was in bed with a cold. He was alone in the house because his wife had been hospitalized for an emergency appendectomy. This was at a time when she was pregnant with

their second child. He became extremely anxious, feeling that she might die. This became the pattern of circumstances which would precipitate the impulse to call women on the telephone. He would try to make the woman believe he was someone she knew; then he would try to guess what their supposed relationship was. Next he would steer the conversation to a report of fictitious difficulties with his wife, embellishing the details in order to make the woman curious. He would complain that his wife had insatiable and unnatural sexual appetites; that she wanted cunnilingus every night and that he did not feel like complying with her request. If he were able to get the woman to reveal her feelings about cunnilingus and large male organs, he would become very excited and would ejaculate. If the woman at the other end of the telephone seemed to be an older woman and implied that she had had younger lovers, the patient would become enormously excited. He called this combination of circumstances his "old mistress fantasy." This had oedipal overtones as well as a definite nurturing, oral connotation. Once, having observed the breasts of a waitress who had bent over to serve him, he felt an uncontrollable urge to telephone some woman and to talk to her about breasts. To this he associated recollections about an old friend of his mother's who was often a guest in their home. When she stayed overnight, he and his sister used to get in bed with her in the morning, reveling in the warmth of her body and fascinated by her white skin, her silky undergarments, and her perfume. He added that he had recently seen a man on the beach clutching his girlfriend's breast. He concluded his associations by commenting on his own apparent need to keep on sucking on his mother's "sugar tits."

At times the aggressive component of his telephone perversion would be foremost in his behavior. On such occasions, when talking to the woman, he would suddenly break into a string of grossly obscene sentences in order to shock the woman. On one such occasion the woman dropped the receiver, and the patient had the impression that she had fainted. This made him feel like a murderer. After describing this episode, he added that during

sexual activities he often had fantasies of strangling or torturing women.

The other, more usual determinants of sexual perversions of the kind that patients suffer from will only be noted here. He had great castration anxiety and a classical fear of the *vagina dentata*, which he expressed in the phrase of being afraid to get his "head into the lion's mouth." Homosexual inclinations and feminine identification were noted: there were frequent fantasies of anal penetration connected to memories of early enemas, and during one period of strong erotic transference to the analyst, the patient experienced an intense wish to put on a woman's panties. Castration anxiety derived from the conflicts of the oedipus complex was outstanding, and in the main, the perversion was used to fend off sexuality and attendant castration anxiety. Indeed, with his telephoning, he could excite women, but at a safe distance: he could be safe and sexual at one and the same time. One of the advantages of cunnilingus in his system of defenses was that it enabled him to excite a woman without using his penis. Fantasies of phallic women were connected with the need to deny the possibility of the loss of the penis, and to compensate for his sense of vulnerability and weakness, he tried to view himself as fearless and highly endowed sexually. The identification with the woman during the perversion may have been facilitated by memories of watching his mother masturbating while she listened in on the party-line conversations.

In what follows, special emphasis will be placed on preoedipal factors, object loss, and hostility toward the ungratifying object in the genesis of scopophilic perversion. Although the patient was weaned at the age of eight months, the process appears to have been traumatic primarily because of the mother's repudiation of the patient. This was followed by a period of protracted illness characterized by diarrhea, emaciation, and prolonged weakness. The mother further rejected the patient because of the foul odor accompanying his diarrhea. We may assume that during the long period of confinement to bed he felt lonely, unloved, and physically depleted. Added to the mother's revul-

sion because of the diarrhea must have been anger over the need to spend long periods of time taking care of the patient. Several authors have commented on the feeling of loneliness attached to physical illness. Moreover, the restriction of food during an illness is often experienced by the child as evidence of being unloved, while the pain and the altered bodily sensations concomitant with illness are frequently experienced as punishment or as threat of annihilation. Anna Freud (1952) pointed out that the withdrawal of cathexis to the body and its needs and the correlative loss of ties to the object world may bring about listlessness and withdrawal. Bak (*cf.*, Arlow, 1956) indicated that prolonged illness, constitutional factors, and disturbances in the early mother-child relationship heighten separation anxiety and lead to an exaggerated need to cling to the mother. He viewed these factors as important in the later development of certain perversions—e.g., fetishism, homosexuality, and transvestitism. According to Bak, the development of perversion represents a defensive maneuver motivated in part by the need to retain the mother in response to separation anxiety.

The role of the visual function seems to have been very important in the development of my patient's character psychopathology. The material suggests a connection between illness, intense orality, fear of object loss, and a compensatory need, in consequence of the foregoing factors, to maintain visual contact with the object. One may suspect that this may have led to a hypercathexis of the visual function. This became apparent not only in the perversion but in many of the patient's other activities. In the analysis proper, it was indicated by his darting glances at the analyst on entering and leaving the session. In addition, the dreams were exceptionally vivid and some of the hypnagogic fantasies were characterized by very strong visual content. Ernst Kris (1956), quoting Anna Freud, commented on the influence of separation from the object and a fear of object loss on the infant's visual function.

Mahler, et al. (1975) found that "symbiosis was optimal when the mother naturally permitted the young infant to face her—



that is, permitted and promoted eye contact, especially while nursing (or bottle-feeding) the infant or talking or singing to him" (p. 45). Greenacre (1971a) mentioned that in those cases in which the mother is unwilling to permit the child its separateness, the interplay by mutual visual communication leads to increasing scopophilia. Also, in a paper on fetishism Greenacre (1953) pointed out that even a mother who handles her child very little, or handles the child as if it were a contaminating object, may feel compelled to watch it continuously. In these cases visual activity is substituted for the experience of being touched. The visual function then becomes hypertrophied, and an uncanny, persistent reaching out with the eyes develops in the child. This is very similar to what happened in the case of my patient.

Along similar lines it has been found that visual impairment interferes with the development of certain social responses that are derivatives of eye-to-eye contact (Robson, 1967). Freedman (1964) found that "prolonged social smiling seems to require visual regard as a maintaining stimulus" (p. 177), and Selma Fraiberg noted that in blind infants, she was unable to carry out a normal "dialogue" with her subjects (*cf.*, Robson, 1967).

Mahler and McDevitt (1968) stated that in the second half of the first year the infant responds to brief separations from the mother by withdrawal and diminished interest in the surroundings, as if concentrating on the memory of the previous state of oneness with the mother. The visual inspection of the human face at this time facilitates the differentiation of the mother from other persons, which leads to both confident expectation and its opposite, stranger anxiety.

My findings in the case of my patient seem to coincide with Kohut's (1971) views regarding the dynamics of certain perverse manifestations. According to Kohut, perverse activities may represent attempts to re-establish union with the narcissistically invested lost object through visual fusion and other archaic forms of identification.

The correlation between object relations and the visual func-

tion have been investigated by Kaila (1935), Spitz (1946), and Ahrens (1954), whose observations have revealed that the infant, while nursing, looks unwaveringly at the mother's face. Visual images are therefore an essential component of the perceptual cluster which exists during the nursing situation and which leads to the perceptual equation of the nipples with the mother's eyes. It is around the age of three months, when children are deprived of the nipple, that their eyes deviate from the mother's face to the general direction of the breast (Almansi, 1960).

On the basis of the clinical material and the other considerations presented here, it is permissible to hypothesize that the hypercathexis of the visual function brought about by the patient's infantile trauma, which strongly increased his need to keep the object within sight and actually to incorporate it visually, may have constituted an important predisposing factor in the genesis of his general propensity to voyeurism (as distinguished from the perversion). It also seems probable that the severe trauma of repeated primal scenes to which the patient was subjected at an early age, his strong oedipus complex, and his mother's exhibitionism may have given to his sensitized visual function its final erotic aim. The constant admixture of pregenital and genital motifs in the material presented here suggests that when the genital drives emerged they too may have become a tool in the all-important defensive struggle against object loss. Indeed, genital urges seem often to have subserved the patient's need to be close to the pregenital maternal object.

Besides its role in the general activation of the visual function, object loss may also have played some part in the pathogenesis of some of the patient's perverse symptomatology. The association between his feeling lonely and his telephoning, the enormous importance of the cunnilingus motif in his telephone conversations, the "old mistress" fantasy with its dual oedipal and oral connotations, all point to the possible participation of pregenital elements and object loss in the pathogenesis of this perversion. It is also probable that the unusual severity of the pregenital trauma and the early age at which it

occurred may bear a causal relationship to the strongly compulsive character of the perverse activities.

The findings in this case cannot be interpreted as indicating that object loss was the only or even the essential cause of the patient's condition. As indicated, these pregenital antecedents of and by themselves could not possibly be solely responsible for the origin of the perversion. Indeed, it is necessary to emphasize that, irrespective of its importance, object loss can be considered as only one element in the complex and multidetermined pathogenesis of this patient's disorder, in which ego and superego factors, as well as problems of sexual identity and the vicissitudes of aggression, played a very prominent role.

It should be emphasized that the association of object loss and voyeurism does not necessarily represent a mechanism which applies to all cases of perverse voyeurism. Since many factors play a role in the etiology of these conditions, we may expect that in different patients, they are combined in varying constellations, so that in some cases, object loss may not be a particularly significant element. Furthermore, comparing the patient discussed in this report with other patients whose voyeuristic interests did not eventuate in perversion suggests that the degree of trauma is an important factor. In the milder cases, the trauma had been limited to seeing siblings fed by the mother, and there had been no severe disruption of the early mother-child relationship. In addition, the trauma had occurred at a much later age. It is possible to speculate that when fear of object loss and other pregenital factors are less prominent, only mild forms of disturbance of the voyeuristic impulse may develop, whereas in cases of early and severe disruption of object relationships, a tendency develops that predisposes the person toward a voyeuristic perversion. Similar combination of elements was suggested by Bak (*cf.*, Arlow, 1956) in the pathogenesis of other perversions.

Finally, it should be mentioned that the correlation between object loss and voyeurism may have important therapeutic implications. In the case that was presented, the perverse features

did not subside until after the patient had been able to establish a solid bond with me and after his object relations had substantially improved. This suggests the possibility that when object loss has been a significant etiological factor, it may not be possible to expect a successful therapeutic outcome until after the analysis has been able to breach the very early difficulties in the mother-child relationship.

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## On Nothing and Nobody with an Addendum on William Hogarth

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## ON NOTHING AND NOBODY WITH AN ADDENDUM ON WILLIAM HOGARTH

BY JOSEPH W. SLAP, M.D.

*While phase-related traumata are often accepted as sufficient explanation of patients' reporting that they feel like "nothing" or "nobody," it is the thesis of this paper that such feelings often derive from intrapsychic conflict and that the working through of such conflict leads to significant therapeutic benefit. In support of this thesis, two cases are presented, together with an addendum on Hogarth's Mr. Nobody.*

In psychoanalytic practice it is common to hear patients complain that they are or feel like "nothing" or "nobody." Such feelings are readily ascribed to traumatic factors and experiences which leave an indelible impression of inferiority and inadequacy. The traumata may be related to specific phases of libidinal development. For example, an infant who is repeatedly subjected to long periods of unrelieved pain or separation anxiety is likely to feel powerless in adulthood as a result. The effect on the little girl of the discovery of the anatomic differences between the sexes is pertinent here, as is the impact on the boy of the perceived differences in size, appearance, and functioning of the adult penis as compared to his own. Aside from such phase-related traumata, there is the effect of such factors as body defect and ridicule from parents and older siblings. Such traumata, along with the structural pathology they are understood to cause, are often accepted as sufficient explanation for these painful feelings. One needs only to think of Freud's (1937, p. 252) characterization of penis envy as the biological bedrock of neurosis in women.

Two cases, one of a "nothing" and one of a "nobody," are presented below in support of the thesis that such feelings, at least in many cases, derive in important measure from intrapsychic conflict; further, recognition and working through of

such conflict lead to significant therapeutic benefit, whereas failure to recognize the contribution of conflict to these feelings leads to therapeutic pessimism and stalemate.

No attempt is made to make a sharp distinction between *nothing* and *nobody*. Lewin (1948) regularly found that *nothing* stood for the female genital, and the case that follows is consistent with this view. Abrams and Shengold (1974) discovered additional meanings. *Nobody* can also symbolize the female genital, but can have other significance as well. This paper does not assign universal symbolic meanings to *nothing* and *nobody*; it is an effort to demonstrate that these painful feelings derive from conflicts which may be analyzed. Thus while *nothing* and, to a lesser extent, *nobody* frequently symbolize the female genital, other meanings are not precluded.

#### A NOTHING

A fifty-year-old woman entered analysis because of an agitated, depressed state and severe back and neck spasms of psychophysiological origin. The patient was an only child. Her father was a self-made millionaire who had a reputation for ruthlessness in business affairs. He had ruled the home with an iron hand; the mother was subservient and the daughter was expected to be the same. It became evident that she was guilty over and defended against intensely held wishes to castrate (or kill) the father and take possession of his power. She found that she was constantly being manipulated by men: refusal of their demands, however unreasonable they were, would have the unconscious meaning of castrating them; guilt over such fantasies forced her to give in to the demands.

For example, after partial working through of her phallic aggressive strivings the patient enrolled in a degree-granting university program. (She had dropped out of an ivy league college after one semester and in subsequent years had taken innumerable courses at various universities for which she could not get credit, as she had not bothered with transcripts or with keeping records.) Her husband, an extremely self-centered man,



was antagonistic toward her return to school, as it robbed him of her undivided attention. One evening, without consulting the patient and with full knowledge that she was planning to study for an important examination the following day, he made arrangements for dinner with another couple, people she disliked. This was not the first time he had presented her with such a *fait accompli*; this practice of his had already been the subject of heated discussion. Still, fearing that she would embarrass him and damage his relationship with a client, she was unable to refuse to go. She went, had a violent headache, and broke up the evening early.

From time to time the patient complained bitterly of feeling like a nothing. These feelings arose during periods of intense conflict with her father. She stressed a traumatic source for these feelings. After all, she reasoned, he had brutalized her and her mother, making “nothings” of them. Efforts to demonstrate a conflictual basis for these feelings were not convincing. Then a situation arose in the family which led the father to feel that he had mistreated his daughter and, whereas she had been omitted from his will, he now changed his will making her the only heir save for charitable bequests. A rapprochement ensued. Her father served on the board of a philanthropic foundation. His behavior became erratic, and he made accusations against an administrator of the foundation which exposed him to the danger of a suit. Family lawyers discussed with the patient whether they should encourage her father to resign in her favor. The patient became profoundly depressed. She went over how cruel her father had been to her. She felt “like a nothing—easily pushed around.” She was “left out, not part of it. Something is wrong, something is not there.” I pointed out to her that these feelings arose at a time when she was actually gaining control of her father’s wealth and power and that her impulses to castrate him had been fanned by his vulnerability. She had reacted by stressing *his* cruelty to *her* and by experiencing in fantasy the fate she wished to inflict on him. The patient’s depressed mood lifted, and she decided that there was no urgency for a decision

about her father's position on the board. Thus it became clear that her painful feeling of being a nothing derived from conflict over her castration wishes.

#### A NOBODY

A middle-aged woman who complained of being a "nobody" (and at times a "nothing") aspired to a more cultured and affluent life-style than her husband was willing to provide. Her behavior was affected, and she was prone to use malapropisms. Her husband ridiculed her pretensions. Having joined a number of museums and historical societies, she enrolled in courses given by these institutions but failed to follow through on them. She attempted to become a museum guide or docent but was inhibited from doing the necessary study. She was able, however, to persuade her husband to send their only child to a fine liberal arts college away from home rather than to the local branch of the state university as her husband wished; the son went on to a prestigious professional school and has embarked on a promising career.

The patient's father had trouble providing for the family during her childhood. When she was four she developed rheumatic fever; she remembers her mother complaining about the fees charged by a cardiologist. She spent months in a charity hospital for children with heart disease, regarding the experience as a punishment. When she was five, her mother contracted tuberculosis. The patient remembers making clinic visits with her mother and sitting for long periods on benches waiting for her mother to be seen. The mother was hospitalized and the patient, her father, and her older sister lived as unwelcome guests with relatives. The patient and her father shared a bed. A male cousin about her age was the darling of the household, while she was regarded as a nuisance. After being released from the hospital, her mother played the martyr and became an active supporter of a charity hospital for chest disease.

The patient describes herself as having been a bright, vivacious girl who was unappreciated. She felt tarnished by the

emphasis on charity, her treatment by relatives, her not being a boy, and the sense of defect occasioned by concern over her heart. During her latency a general practitioner made a great fuss over her. His behavior became a topic of family discussion, and, whatever the substance, the patient came to believe that he wished to adopt her but that her parents refused to let her go. She had daydreams that her parents would die and that she would be adopted by this physician. During early adolescence she formed a friendship with a girl from a refined home. Rejecting her own home, she spent as much time as she could with this family.

In her adult life the patient rejected her parents, her sister, and her husband, as they reminded her of the impoverished life of the past. Her seeking culture was contaminated by fantasies of killing her parents and being adopted by the physician or by her friend's family. Guilt over these fantasies ensured failure and the accompanying feeling of being a nobody, an absolutely worthless person, which reflected the opinion she held of her parents. Both the fantasies of killing the parents and the punitive nature of the nobody feeling were unconscious, and her failures were rationalized as an objective assessment of her abilities. Throughout her son's school days she had unconsciously seen him as an extension of herself. She reacted angrily to his graduation from professional school, as he had begun to assert an independent attitude. She associated this episode to the envy she felt for her male cousin. During this period her nobody<sup>1</sup> feelings were determined by guilt and punishment for impulses to castrate her son.

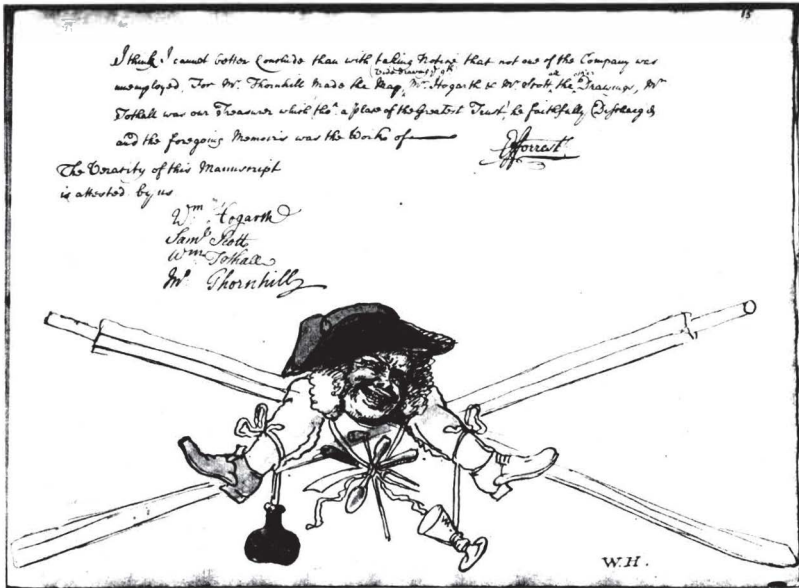
Analytic attention to the patient's murderous feelings toward her family members and to her self-punitive reactions to these feelings led to increased freedom to pursue her cultural interests. The affected behavior disappeared; she chaired committees

<sup>1</sup> At this juncture and at others her nobody and nothing feelings derived from punitive feelings of being castrated. At other times they seemed to signify death (nonbeing), talion punishment for her murderous impulses toward various family members.

and served as docent. No longer susceptible to manipulation by her family, she was treated with more respect. She felt better about herself and no longer complained about being a "nobody."

### AN ADDENDUM ON HOGARTH'S MR. NOBODY

The thesis that "nobody" may signify castration suggests a line of reasoning about the unconscious meaning of a drawing, *Mr. Nobody*, by William Hogarth.<sup>2</sup> The drawing is a tailpiece



"MR. NOBODY"

for *Five Days Peregrination* (Mitchell, 1952), an account of an impromptu ramble by Hogarth and four friends through the English countryside in May of 1732 when the painter was enjoying the fame brought him by the publication of the engravings

<sup>2</sup> A more extensive treatment of the material on Hogarth has appeared in a previous communication (Slap, 1978).

of *The Harlot's Progress*. The *Five Days Peregrination* was a parody of antiquarian works in which learned travelers described and drew ancient fortifications, castles, tombs, churches, and the like. The text, written by Ebenezer Forrest, a lawyer, mixed mock erudition with an account of the travelers' eating, drinking, practical joking, and fighting with water, sticks, stones, and the dung of cows and swine.

Hogarth's *Mr. Nobody* consists of a smiling, mocking head with legs sticking from either side, a visual pun as there is "no body." Behind the figure there are crossed oars, and from the legs and round the neck hang a wine bottle and glass, a pipe, and a knife, fork, and spoon, the entire illustration looking like a parody of a coat of arms—the coat of arms of the peregrinators since it appears on the last page of the manuscript just below their signatures. The spread-eagled legs with the head between suggest that the face has been substituted for a genital, more specifically a vagina, since the delights of the table, the bottle, and the pipe enter through the mouth. Roth (1959) has pointed out that while symbolic equations between individual facial features and the genitals are well recognized, the representation in the unconscious of the entire face as a symbol for the genitalia is less familiar. He wrote: "This has numerous determinants, the most important one being [the face's] expressive and mimetic functions which serve a purpose closely related to the sexual function of the genitals—the display and release of feelings, and the discharge of libidinal tensions" (p. 493). (See also, Arlow, 1951, pp. 387-388.) Such an understanding is consistent with the views of Annie Reich (1949) who regarded this sort of face-making as caricature. She cited Kris as having stressed that in caricature, aggression is expressed against the object by deformation of his picture. In making faces the aggression intended for the object is demonstrated on the subject's own visage. She noted that a child making faces at another child is indicating that this is the way he will make the other look. She concluded that in grotesque-comic acting the exhibited "disfiguration is based on the actor's previous fear of castration

which he can utilize now for his aggressive purposes by raising himself high above his rivals and by destroying them by magic means. The success of the performance itself serves as the reassurance that the original castration fear is unnecessary, and as a gratification of exhibitionistic impulses" (p. 168).

### SUMMARY

Feelings of being a "nothing" or a "nobody" are readily attributed to traumatic experiences which have left a strong impression of inferiority. Analysis reveals, however, that occurrences of such feelings derive in important measure from intrapsychic conflict. This finding has important therapeutic implications. Failure to recognize the contribution of conflict to these feelings leads to therapeutic pessimism, while analysis of the situations in which they arise often leads to significant therapeutic benefit. Two cases are examined in support of this thesis, and *Mr. Nobody*, a drawing by William Hogarth, is studied in light of this thesis.

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## On Evidence and Inference, or the Babel of Tongues

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## ON EVIDENCE AND INFERENCE, OR THE BABEL OF TONGUES

BY AARON H. ESMAN, M.D.

Psychoanalytic theoretical literature is in a state of ferment at the present time. Criticism, often of a fundamental nature, has been leveled from within the field at certain long-standing usages and at certain established bodies of doctrine—most notably, at metapsychological concepts that are, it is contended, inadequately derived from the data of observation and even irrelevant to them (*cf.*, Gill and Holzman, 1976). In particular, Klein (1976) has proposed a return to a clinical theory dealing with reportable phenomena such as wish, purpose, and intention, while Schafer (1976) has advocated an even more radical turn to a “new language for psychoanalysis” based on action as a determining principle.

It seems clear that something is, at times, amiss with the language in which psychoanalytic propositions are being formulated, or the manner in which the data are being transformed into theoretical propositions. It is, at the least, likely that such defects, where they exist, will leave the theory and even the data exposed to attack from outside the field, particularly from those of a scholarly or philosophical cast of mind. More significantly, they may, as Glover (1966) pointed out in another connection, seriously impair the growth of psychoanalytic science.

One of the commonly observed flaws in psychoanalytic writing is the confusion between evidence and inference. Consider the following examples, drawn more or less at random from recent papers:

1. “In a child with marked oral endowment, for instance, we would expect more sucking activity; in a child with marked aggressive endowment and externalization needs we would expect more motor activity.”



2. "We recognized that an important source of narcissistic libido, the quantity and quality of libidization of the body ego or body self, is dependent upon early narcissistic supplies."
3. ". . . a 13-year-old boy might attempt to achieve a temporarily compensatory hypercathexis of the self via polymorphously perverse regressed masturbation fantasies. . . ."
4. ". . . the idealizing function again begins to work steadily and continuously so that the individual can set goals and feel good when they are approximated instead of feeling constantly disappointed and mortified with himself."

In each of these cases, the relationship between data and theory, between evidence and inference, is reversed. In the first, the author seems to mean that if a child shows a disproportionate amount of sucking activity, one might infer a "marked oral endowment," while in a child whose motor activity is high, one could infer, among a number of possibilities, a "marked aggressive endowment" if one elected to do so. Similarly, it is difficult to understand how the writer of the second example could "recognize" anything about so abstract a concept as "narcissistic libido," however defined and qualified. One could, perhaps, say that when a "five- to eight-month-old infant, surrounded by approving and . . . friendly adults, seems electrified by this reflecting admiration," this could *imply* something about "narcissistic libido" if one's theoretical bent is in that direction.

Confusion of subjective experience and theoretical postulation is exemplified by the third quotation. It is hardly likely that anyone, early adolescent or not, has ever "attempted to achieve a temporary hypercathexis of the self." One can readily imagine someone trying to achieve an intensification of self-awareness or of pleasurable excitement, or relief of boredom and feelings of detachment—but the notion of "hypercathexis of the self" is a theoretical formulation based on a complex system of propositions far removed from subjective experience, supposedly explanatory but in no way confirmable by appeal to the data of observation. Reversed, too, is the suggestion that the individ-

ual's ability to set realizable goals for himself is explained by the efficient workings of an "idealizing function." One can, if one wishes to do so, infer the existence and operation of such a "function" from the observation or experience of realistic goal-setting, but the two are at totally different levels of abstraction, and the latter bears no evidentiary relationship to the former, which could be criticized as a mere reification without explanatory value.

The illustrations cited, all from the work of respected analysts, are by no means atypical. Like the "hybrid concepts" described by Slap and Levine (1978), they reflect a pervasive tendency in the literature, one that warrants judicious consideration if psychoanalysis hopes to be taken seriously as a scientific discipline. Whatever one's view of current revisionist criticisms, it is a fundamental principle of scientific discourse that evidence must precede inference and that data are the foundation for inference, rather than the reverse. Jacques Lacan is famous for his dictum that "the unconscious is structured as a language." We should take care that our literary language not be as unstructured as "the unconscious."

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Brian Bird

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## BOOK REVIEWS

PSYCHOANALYTIC EDUCATION AND RESEARCH. THE CURRENT SITUATION AND FUTURE POSSIBILITIES. Edited by Stanley Goodman, M.D. New York: International Universities Press, Inc., 1977. 407 pp.

This volume is a public record of the American Psychoanalytic Association's 1974 conference on what the subtitle terms the current situation and future possibilities of psychoanalytic education. Because I was not a participant and did not read its voluminous material, the conference is known to me only through this book, a representation made easy by Stanley Goodman's editing. The conference involved one hundred and sixty-eight invited analysts deployed into nine "commissions," each asked, well in advance, to study and report on a different aspect of analytic training. These nine reports and the discussion they stimulated at the four-day conference became the basis for the nine principal chapters of the book.

The first chapter, "Tripartite System of Psychoanalytic Education," is also first in importance, its title referring to the three essential elements of psychoanalytic education: training analysis, courses, and supervised analysis. I am puzzled that this commission did not use its opportunity to attempt to create a bold, viable analytic prototype that might have spread its coordinating image throughout the conference. An impossible task, to be sure, but an account of how and why the attempt failed might have led to an exciting, challenging, entirely pertinent contribution. Instead, the commission seemed to lean toward brief and conclusive statements regarding secondary considerations. The following are a few examples from the portion on training analysis.

On whether training analysis should continue to be required, the answer comes across as a short and easy "Yes." On the difficulties contributed to the training analysis by the training analyst, the response seems firm that this factor is overemphasized. On problems caused by the analysis being conducted in an institute setting, the answer is brief—problems thus caused are not insurmountable and may even be constructive. Unfortunately, concise responses offer little access to the arguments that led to them, arguments that may have embraced, on both sides, basic analytic concepts.

On the other hand, the Tripartite Commission's arguments are

helpfully developed in relation to the much debated question of "reporting." Discussion started with a convincing and apparently unanimous argument that the training analyst, whether reporting or not, should always make evaluations of the analysand's progress as a candidate. About the nature of this evaluation, however, some members seemed to think it should be an academic study, while others apparently regarded evaluation as a regular part of the analytic work. Even greater differences developed about what should be done with these evaluations. Persuasive arguments suggest that they remain entirely within the analytic situation and that no reporting of any kind be done. Other arguments suggest just the opposite: that the analyst must report evaluations to appropriate members of the institute so that essential ingredients can be added to decisions regarding progression and data can be provided for collective studies on how analysis works to effect change.

Further complicating the issue are conflicting views about confidentiality. One stresses the need for absolute confidentiality. Another reads, ". . . a training analyst's report need not involve secrets or confidential matter" (p. 17). Still another suggests that the debate on reporting "revolves around an essentially spurious issue" (p. 22).

Although these contradictory views may seem confusing, they do not diminish the value of the report. Rather, they enhance it. Presenting these conflicting positions clearly renders more evident the difficulties this commission was up against and, for that matter, what we as analysts are up against. Dealing with conflict is the analyst's particular business, and, to me, dealing with conflict is not a matter of smoothing it over, "resolving" it, or making it go away. Conflict as such is not resolved; only its troublesome fruits may be.

Both the reports on the theoretical phase of the tripartite system (i.e., the curriculum) and on the clinical phase of the tripartite system generate little enthusiasm. It is often difficult to get excited about discussions of coursework. But the supervised experience is where the training analysis, the lectures, the seminars, the journals, the books, and, above all, the candidate's native talent are all called upon to pull together and create a functioning analytic situation. This is the time and this is the place where analysis is taught and analysis is learned, where learning becomes analytically measurable and analytically accountable. Why does the report of its discussion evoke so little of the enormous interest of the experience itself?

The Child Analysis Commission prepared a report quite different from any other. One of the longer sections of the book, it also stands out in being written in a clear, lively, and vigorous style. The main difference, however, is that the report marches to its own drummer, focusing solely on one theme, the developmental point of view. In effect, the report proposes that developmental psychology become the basis for teaching psychoanalysis. The only significant challenge comes from the formal discussion in which alternative points of view are offered.

The most interesting contribution by the Commission on Psychoanalytic Research is its controversial report on "Research into Psychoanalysis" (p. 108). The report states that although psychoanalytic literature consists largely of studies of the analytic process, these studies are not systematic, reproducible, or comparative, and their conclusions stem more often from assertions than from evidence and reasonable inferences. As a consequence they do not persuade others, especially those from different disciplines. These limitations can be overcome, it is argued, only by enabling uninvolved observers to review raw analytic data. Acknowledging the claim by many analysts that electronic recording so affects the analytic situation that it is no longer analysis, the report points out that other analysts disagree. In any case the commission insists that "we should allow no less a methodological advance" than the study of raw data (p. 111). This bold statement then evokes the opposing view in which ethical issues, the uniqueness of analysis, the rights of the patient, informed consent, confidentiality, anonymity, and more are briefly but seriously considered.

The Ideal Institute Commission understandably had a difficult time getting beyond the issue of what "should be." Everyone seemed to agree that although the present institute structure serves fairly well, changes are needed. Some favored evolutionary change, others more radical ones—for instance, setting up analytic departments within medical schools and analytic schools within universities. The latter particularly would enable psychoanalytic education to reach and be reached by academicians, scientists, and researchers. Overall, however, no one seemed convinced that the end of the present system was near.

Among other things, the Commission on Age and the Psychoanalytic Career considered a proposal to reduce the ages of candi-

dates from the thirties to the twenties. This suggestion, made many times before, was in this instance given a closer look. The problem, it seems, is not simple. Delay in training is not caused merely by institutes being unwilling to accept younger applicants; by candidates being unduly held up in their progress; by medical-psychiatric admission requirements; or by the money shortage of those in their twenties. In addition, it was said, most of us may become psychologically ready to use analysis and analytic training only in our late twenties and early thirties. Regarding "aging" and its vexing corollary, when to retire, the commission's handy and possibly correct recommendation was that The American Psychoanalytic Association's 1961 guidelines on retirement should be closely followed.

The Commission on the Relationship of Psychoanalysis to Current Changes in Medical and Psychiatric Education lists several changes harmful to psychoanalysis: the reduction in the number of psychiatric residents; the shift to nonanalysts as department chairmen; and the emphasis on short-term treatments by third party payers. This gloomy statement is then mitigated by a brighter one: "psychoanalysis continues to be a major influence in . . . psychiatric education," and this influence is due "almost exclusively to the efforts of individual analysts" (p. 201). Surprisingly, in view of the apparent success of individual analysts, the commission urges institutional participation in medical and psychiatric education by the Association and the Institutes. The reason for this urging is not clear and seems appropriate only for the purpose of teaching psychoanalysis or establishing psychoanalytic residencies or departments. An alternative idea, spelled out in the discussion, is that analysts should simply teach the contributions psychoanalysis can make and has made to the principles and practice of good patient care.

The report, "Relationship of Psychoanalysis to Universities," considers the only currently existing form of relationship, institutes affiliated with departments of psychiatry, and a proposed relationship, schools of psychoanalysis in universities. The main purpose of the latter would be to bring analysts and university scholars together in order to advance the development of psychoanalysis as a science. After discussing pros, cons, and feasibility, the commission seems to accept the probability that schools of psychoanalysis are a long way off.

The Commission on Psychoanalytic Education and the Allied Dis-

ciplines, after reviewing the very limited success of past attempts to recruit nonmedical scholars for analytic training, outlines yet another proposal, to broaden institute programs to make them more useful and more appealing to those disciplines. Specifically, all applicants, from medical and allied disciplines alike, would be offered a choice between two tracks, both leading to certification, one for clinical competence in psychoanalysis and one for academic competence in psychoanalysis.

The need for "allied disciplines" is based on the commission's conclusion that although "the institutes have been relatively effective" in the first of their two functions, training "clinical psychoanalysts," they have not been effective in their second function, fostering "the growth of psychoanalysis as a science" (p. 250). From this position the commission sees "the increased recruitment . . . from allied disciplines as one . . . means of enhancing an atmosphere of scholarship and research . . ." (p. 251).

The Commission on the Relationship of Psychoanalysis to Social and Community Issues seems to have had yet another difficult assignment. For one thing, much of what the commission proposed runs counter to the low-keyed, nonproselytizing position carefully and purposely maintained by most analysts, a contradiction the commission repeatedly acknowledges. For instance, "to increase . . . minority analysts will require active recruiting, which many analysts have been reluctant to undertake" (p. 280). At another point, the commission questions "whether it is appropriate for psychoanalytic societies to participate directly in planning programs for the relief of social ills" (p. 280).

After reviewing these nine separate sections I suspected that splitting up the conference in this way had been a mistake. As a consequence of the splitting, all groups worked under constraint, and none seemed able to take a really hard look at the two major issues, psychoanalysis and psychoanalytic research. Of the two, the aim of research was most forcefully emphasized, with repeated pleas for more and better research of a particular kind, not research using the analytic method, but research consisting of studies of analytic theory, of analysis as a science, a body of knowledge, and a general psychology. This kind of research, most seemed to agree, cannot be done by analysts trained only to analyze, but is dependent upon the skills, help, and intimate presence of research scholars and scientists from



allied disciplines and upon psychoanalysts thoroughly trained in the ways of scientific research. The need for these special skills emerged over and over again and accounted for many of the principal recommendations produced by various commissions. For example, institutes should affiliate with universities; institutes should introduce strong, effective educational programs in research; and research scientists from other disciplines should be more freely admitted to institutes as candidates and as teachers. These and other changes must be made, it seems widely believed, if analysis is to grow and develop as a science and take its place alongside other sciences. Although always sincere, this belief and these proposals in some instances had a wistful quality, a hope, perhaps, that introducing these elements to analysis will make scientists and humanists of us all.

Possibly as a counterpart to the emphasis on analysis as a science was a particular concern, spelled out by several commissions, about analysis as a procedure. The Ideal Institute Report put it this way: "The commission . . . wished to affirm strongly the importance of clinical competence and the need for continued clinical experience whatever the intended psychoanalytic specialization" (p. 156). Although these expressions of belief in analysis as a procedure are significant, they occurred as rather isolated statements that went no further. Very little concern was expressed, for instance, for the "present situation and future possibilities" of so-called full-time analysts, those analysts whose major commitment in time and dedication is to analyzing, to using, studying, teaching, and preserving the classic analytic method, the method described by Freud in 1922 as "a procedure for the investigation of mental processes which are almost inaccessible in any other way."<sup>1</sup> How are these full-time analysts doing, and what are they doing? Are they thriving, or are they disappearing? And does it matter? No one seemed to wonder.

Nor apparently did anyone openly wonder about divergent schools of analysis, those large and small differences among and within institutes as to what comprises analyzing. A tricky and unpleasant issue to be sure, but must it be so studiously ignored?

Also ignored, by me and, I suspect, by others, is the extent to which we expect too much of conferences. We tend to regard a conference as a *thing* and to assume that it has the power to produce

<sup>1</sup> Freud: *Two Encyclopaedia Articles. (A) Psycho-Analysis*. Standard Edition, XVIII, p. 235.

change or a new direction. Rarely, it seems to me, does a conference have this kind of impact; rather its impact is on individual participants. The stimulation, challenge, satisfaction, frustration, and the overall experience of conferring may bring about significant changes in the members, changes that may stay with them and that may go on in various ways to affect others.

Reading Goodman's book leads me to guess that many of the one hundred sixty-eight participants in this conference may have had such an experience. It is to be hoped that they will in some personal fashion pass it on.

BRIAN BIRD (CLEVELAND)

MODERN PSYCHOANALYTIC CONCEPTS IN A GENERAL PSYCHOLOGY. By Allan D. Rosenblatt and James T. Thickstun. *Psychological Issues*, Vol. XI, No. 2/3, Monograph 42/43. New York: International Universities Press, Inc., 1977. 348 pp.

Essentially, this book is a clear, well-written, and detailed attempt to translate psychoanalytic data into the language and concepts of information processing. The authors consider this the necessary first step if psychoanalysis is to join with other disciplines and become part of a general psychology. Inasmuch as the present monograph is but a portion of a planned eight-part work, the reader expects later portions to fill in whatever is not covered here.

In the context of a discussion of methodology and scientific explanation, the authors provide a neat review of standard analytic theory which they compare with their own modern version of the theory. Their argument is persuasive and well presented. It will come as no surprise to anyone who is familiar with the previous writings of Rosenblatt and Thickstun to follow their pursuit of the villain of psychic energy once again, and once again to see the enemy vanquished. However, I wonder why the authors have chosen to ignore a wide range of writings on alternative approaches to their proposed scientific methodology. While they agree that our data arises from introspection, they insist on its organization into "meaningful hypotheses" and thus rely on the usual rules formulated by E. Nagel for theory construction. I believe that a significant enough countervoice has been raised by a variety of social scientists to stimulate psychoanalysis to consider the contributions of other schools of thought.

The second section of the monograph deals with motivation. Much of it is tedious reading, but that is probably because the authors perform a difficult but necessary review of both the definitions and major ideas in the field. Their own contribution is to use systems theory and information-processing concepts to reformulate the psychoanalytic process. In this way, they move from the instinct-driven psyche of Freudian theory to a modern concept involving a network of communications.

Rosenblatt and Thicstun summarize their work by offering a "motivational system" which they say is a cognitive-incentive one, i.e., one based on the organism's thinking about (evaluating) the nature of the goal to be sought. The goals of their different motivational systems involve basic need satisfaction, defense against injury, etc. Motivation becomes the composite of the appraisal processes of all currently activated motivational systems. Their excellent summary statements appeared to me to be little different, in essence, from that offered by S. Tomkins in his work on affects, or from the TOTE system of G. A. Miller, E. Galanter, and K. Pribram, who propose that behavior results from an inner program.

Other than their allowing an absolutely dreadful index and appearing to confuse the Rat Man with the Wolf Man (p. 22), I cannot fault the careful work of the authors in spelling out the particulars of their theory. But I found myself left with the feeling that much of this theorizing seemed to be irrelevant or alien or just plain uninteresting. Inasmuch as this is such an excellent current example of an exposition of theory, an examination of the basis of this feeling may shed some light on what I believe is a prevalent ennui in our field.

Although the word is not to be found in the index, the authors tell us in a footnote (p. 291) that the outcome of information processing is *meaning*, and this is what they are really after. We should realize that the mere exchange and processing of information is not communication. The latter results only if an exchange of complex intentions and beliefs between sender and receiver takes place. Similarly, we should know that communication is not equivalent to meaning(s). Some would say that any attempt to move from the very clear mathematical conceptualizations of information theory to one that considers information as ideas or facts to be pondered over and

evaluated would be a move into a new field, that of semantics or the study of meanings. Such a step may account for the comfort most analysts feel when they study what something or someone means to a patient and the relative uneasiness they experience when these ideas are presented as part of a broader theory of information processing.

These comments are not to be taken as a criticism of the authors' intention to clarify analytic theory, but perhaps as a call for a reappraisal of just what kind of a theory or theories psychoanalysis, as a psychology of meaning, requires. The study of meaning involves an investigation of metaphor, rhetoric, interpretation, and a host of concepts dealt with in a frame of reference or universe of discourse entirely different from the study of the processing of information.

Once embarked on a reconsideration of the theories in psychoanalysis and a parallel scrutiny of the terminology, there may be no easy shut-off point. To emphasize the discontent with the framework of psychic energy is fairly easy, but it seems to many others that terms such as "ego" are equally untenable. A radical examination of most of analytic theory demonstrates that it is simply not as substantial as many of the so-called natural science theories: the constant emphasis on empirical evidence seems to falter when we agree that our data relies on subjective experiences that somehow seem different from objective facts. Philosophers of science still struggle over the differences between the subject-object scientific perspective and the subject-subject one.

Rosenblatt and Thickstun have long been dissatisfied with the concept of psychic energy. Save for that small band of scholars who feel that the brain gets hotter when we think harder, no one really believes psychic energy is like any other energy, and yet the term keeps sneaking back into our language. Rather than joining in the many attempts to cleanse our language of erroneous terms, we may more appropriately reconsider why the language of psychic energy has become so significant for us. Rosenblatt and Thickstun have a nice joke of asking where all that energy goes to and wondering if it vanishes or if we swim in a sea of it. Of course, it goes to the same place that their words go. We should not need to turn to Piaget to show that a persistent use of concrete thinking will not enable us to utilize the richness of metaphor. And before we dismiss anything as mere metaphor, it may be necessary to determine if the scientific

standards claimed by the authors to distinguish metaphors, models, and theories are really applicable to the analytic process. The wealth of writing on the varied ways that the science of psychoanalysis can be approached is not attended to in this book.

The promised rescue in terms of this deficit lies in the authors' forthcoming work on symbolic transformation. They lean heavily on the work of Langer in coming to grips with the problem of consciousness and feeling, and one can only wonder how they will handle that momentous shift to symbolic thinking which Langer insists is uniquely human. Such a shift may well require either a change in theory or a duality of theories for psychoanalysis. I look forward to the authors' promised solutions to these unresolved issues in forthcoming chapters of their major work.

ARNOLD GOLDBERG (CHICAGO)

**THE ANATOMY OF CHANGE.** A Menninger Foundation Report on Testing the Effects of Psychotherapy. By Stephen A. Appelbaum. New York and London: Plenum Press, 1977. 308 pp.

The Menninger Foundation in Topeka played a unique role in the development of psychiatry and psychoanalysis just before—and for about two decades after—World War II. It is still a very special place. Among other things, this arid geographic center of the United States became the mainspring of psychodynamic psychological testing and its extensive use by psychoanalysts and psychiatrists. It is a measure of the Foundation's achievement that one can only wish that the majority of the profession, including psychologists, would do as well today.

This volume on testing the effects of psychotherapy (by psychological testing and a rigorous examination of concepts and hypotheses) is part of the already variously reported Psychotherapy Research Project of about twenty years' duration. In the psychotherapy project, these tests were used mostly as control for clinical judgments. In all, twenty-six patients were tested at the initial evaluation, at termination, and again at follow-up. In essence, the test data were used for the formulation of intrapsychic variables, for the assessment of the therapeutic process, and for predictions of outcome and assessment of outcome. In order to do this, a rigorous examination of the concepts used was necessary.

For psychologists, the use of the test battery in this study still stands as a major didactic example. For psychoanalytic clinicians, who are often not sufficiently inclined to use psychological testing of their patients before beginning treatment, this study should serve as convincing evidence of its value. The detailed accounts of the test data and their evaluation are excellent learning experiences, although the style is at times a bit stiff or even pontifical. In only one instance do I have to take exception: I do not agree that the difference of four points between the verbal IQ and the performance IQ is dynamically or statistically significant (p. 26).

The findings confirmed that psychological test data showed predictive validity, in fact, had more validity than nontest findings. Assessment of ego strength was the main source for this result. The overall treatment results were within realistic clinical expectations. The fact that the patients with a stronger premorbid personality gained more from psychotherapy than those less well-endowed does not impress me as much as it does the author; it does not seem to me to need such soul-searching as he engages in. The same findings hold true for other treatment modalities, even electroconvulsive therapy and lobotomies and placebos.

What the study does show is that careful conceptualization generally, and refined psychological testing specifically, permit optimal planning of treatment. The brief clinical reports used at some points in the study were as useful as the lengthy reports employed at other points. Thus, it should be possible for clinicians in private practice, and without the facilities of an institution like Menninger's, to utilize such brief reports for conceptualization and for research purposes.

One can only share the hope expressed by Otto Kernberg in his Foreword that this study will encourage further development of psychodynamic psychological testing.

LEOPOLD BELLAK (LARCHMONT, N.Y.)

THE UNCONSCIOUS: INVENTION OR DISCOVERY? A HISTORICO-CRITICAL INQUIRY. By D. B. Klein. Santa Monica, Calif.: Goodyear Publishing Company, Inc., 1977. 239 pp.

Although much has been written about the history of the concept of mind as unconscious, the present volume attempts a critical review

and ranges widely over many interlocking and related concepts. That the author is admirably qualified for such a project is evident from the wealth of information at his command, already demonstrated in his earlier work, *A History of Scientific Psychology. Its Origins and Philosophical Backgrounds*.<sup>1</sup>

The present work contains a sophisticated discussion of the historical antecedents and subsequent evolution of numerous conceptualizations of mental functioning, ranging from the conscious to the dissociated. There is valuable information on such topics as the origins of the concept of empathy; the philosophical background of an unconscious mind in the contributions of Kant, Hegel, Schopenhauer, Leibniz, Hume, Fichte, Herbart, Fechner, Wundt, and others; William James's cogent reasoning regarding compartmentalized or dissociated thinking, the basis of posthypnotic behavior in determining tendencies and delayed reactions, the fallacies of division and of sensationalism, and much more; Herbart's concept of apperceptive mass and Helmholtz's of unconscious inference (with comments on his later recantation); the concept of subliminal consciousness as elaborated by C. S. Myers, James, and others; various theories of motivation and of emotions, including the shift from instincts to drives (with references to R. S. Woodworth and W. MacDougall on functional autonomy); the distinction between determinism of means versus determinism of ends (deriving from Spinoza's thinking on desires and causes); comments on endogenous versus exogenous motives; and, in an attempt at a synthesis, the views of the Würzburg group on nonsensory ideation.

Yet, despite the author's erudition, his apparent intention to be fair and to consider all viewpoints and arguments, and his careful attention to detail, this book is fatally flawed in a most fundamental consideration: its presentation of Freud's concepts is inadequate and contains errors, omissions, and distortions. Although such care is taken that the original German text is given in places, the references to Freud's works are limited to those of the 1900 period, the 1914-1915 metapsychological papers, and later abstracts from the *Outline, A General Introduction, New Introductory Lectures*, and related summarizations. Although the 1925 *Inhibitions, Symptoms, and Anxiety* is referred to, the formulations of structural theory and

<sup>1</sup> Reviewed in This QUARTERLY, XLI, 1972, pp. 464-470.

of signal anxiety are ignored, so that the essentials of Freud's evolving concept of the unconscious are omitted. The author quotes Freud, "It is not the repression that creates the anxiety, but the anxiety is there first and creates the repression!" (p. 147). And he continues: "Precisely how anxiety 'creates' this was not explained. Apparently Freud was more concerned with indicating what he took to be the *sequence* from anxiety to repression than he was with the *mechanism* of the sequence" (p. 148).

To thus overlook the formulations of the signal function of anxiety (as a warning against the danger of a repetition of the traumatic experience of physiological and psychical overload modeled on the birth experience, with successive developmental phases determining which dangers are perceived to derive from the drives, conceptualized as imminent need tension in the absence of the need-satisfying object) is to remain ignorant of the basic element in Freud's motivational psychology, i.e., the pleasure-unpleasure principle rooted in the principle of constancy. The author's basic criticism of the concepts of psychic determinism, of an unconscious substrate which determines conscious and preconscious derivatives, and of the mechanism of sublimation is consequently sadly lacking in knowledgeable depth. Furthermore, the total neglect of transference phenomena as manifestations of unconscious functioning is notable.

It is not difficult to recognize the reason behind the author's repeated insistence that the unconscious mind is a derivative of the conscious, rather than the other way around. As he sees it, psychology is to be safeguarded as a science by being able to subject mental processes to measurement. In consequence, one finds abundant references to authors (with longstanding biases against psychoanalysis) who have attempted to test the validity of psychoanalytic teachings by experimental means and who have, predictably, found lacking any scientific basis for psychoanalytic concepts. Another bias, incidentally, appears in an unnecessary reification of the unconscious as some mysterious realm. Surely this sets up a straw man that could have been avoided by a discerning presentation of the structural hypothesis and the theory of anxiety that is an integral part of it. Further, there are no contributions from the vast psychoanalytic literature validating the fact of unconscious functioning on the basis of the level of clinical observations.

One is reminded of Robert Waelder's brilliant clarity in discuss-



ing levels of discourse and in assessing the application of criteria of scientific methodology to psychology. It is appropriate to quote Waelder's closing statement in that essay: "To me, experiences such as these highlight the greatness of Freud. For, if it is so immeasurably difficult for men of wide learning to understand Freud's ideas sixty years after he presented them to the world, how difficult must it have been to conceive them for the first time?"<sup>2</sup>

DANIEL S. JAFFE (WASHINGTON, D.C.)

LE CELESTE ET LE SUBLUNAIRE. LA CONSTRUCTION DE L'ESPACE ANALYTIQUE, II. (The Celestial and the Sublunar. The Construction of the Analytic Space, II.) By Serge Viderman. Paris: Presses Universitaires de France, 1977. 470 pp.

This is the second volume written by Serge Viderman to deal with the relationship between theory and clinical practice. In his earlier volume<sup>1</sup> he used a metaphor, the so-called analytic space, to describe the physical set-up as well as the forces at work and basic rules which allow the development of a uniquely psychoanalytic process. The present volume is concerned primarily with problems of epistemology. From other areas of knowledge, from history and literature, Viderman draws interesting analogies between interpretation in analysis and in other fields.

His basic postulate is that it is impossible to reconstruct a single historical truth in analytic work. Rather, the reconstruction becomes in fact a new creation which then has an organizing effect. According to this view, "Transference allows the coming together of manifestations of libidinal drives and their acquiring a meaning; the space in which the affects are experienced and are given birth by the interpretive word has literally created them" (p. 367). The American point of view on the other hand, would emphasize that while the transference neurosis (broadly speaking) is a re-creation brought about by the analytic process, it is always present in a latent way in the patient. Viderman's thesis is that the past is essentially a figment of the patient's imagination. Real events are reduced to "*agents provocateurs*." What is alive are only fantasies—themselves elabora-

<sup>2</sup> Waelder, R.: *Psychoanalysis, Scientific Method, and Philosophy*. J. Amer. Psyc. Assn., X, 1962, p. 636.

<sup>1</sup> Viderman, S.: *La construction de l'espace analytique*. Paris: Éditions Denoël, 1971. Reviewed in *This QUARTERLY*, XLII, 1973, pp. 129-131.

tions—and screen memories, referable only to prior fantasies.

For Viderman, the analytic space and the analytic process become the locus of an entirely new creation—through speech which interprets it—of an invented past. Its reality is illusory; the outcome of the process, the created myth, is more congruent with psychic reality (in its reductionistic aspects) than the chimeric search for a reconstructed past. The latter, in the course of the analytic evaluation, has become, so to speak, “dialectically dissolved.” The myth created in the analytic space becomes the abstract representation of a parameter which simplifies the complexity of historical facts in order to evolve purified schemata, “*illusions vraies*” (“real” illusions). At the end of an analysis, the patient no longer feels the need to attain “the truth.” These so-called illusions serve as an organizer of the patient’s psychological reality.

To amplify his thesis and to illustrate its many ramifications, Viderman studies the process of creation in literature and the problem of reconstruction in allied disciplines. Much of his book deals with literature and the structuralist criticism of Roland Barthes whose approach to a text is in many ways similar to that of Viderman: Barthes does not “read” the text (i.e., explain it). This would imply a preordained, fixed text with certain clear-cut meanings. On the contrary, Barthes approaches a text the way Viderman would approach a patient. The text becomes *invested*; a relationship is formed, and the reader resonates like a prism to the multiple meanings and levels of the text. According to this view, a text is a galaxy of signifiers rather than a structure of signifieds. To the degree that this is true, authors who read their own texts are like any other readers who are unable to reach the “true” meaning of the text once it has been composed.

A corollary thesis is that facts in themselves are meaningless. They take on significance only because we choose to interpret them according to our preconceived system or theory. Viderman shows that, in this sense, the analyst’s mind does not really function in a free-floating way. Rather, it approaches data with many complicated assumptions and hypotheses. Our theory determines what we observe.

It is difficult in such a brief review to do justice to Viderman’s interesting approach which affords a central role to language.<sup>2</sup> His

<sup>2</sup> See, however, Viderman’s paper, *The Analytic Space: Meaning and Problems*, *This Quarterly*, XLVIII, 1979, pp. 257-291.

approach is obviously at the opposite end of the spectrum to the point of view exemplified in the writings of Greenacre and others who attempt to methodically reconstruct aspects of the patient's historical past. A careful reading, however, suggests that these points of view may be approaching common ground in writings on screen memories and imagination and creativity, subjects that Greenacre has explored extensively in many papers.

FRANCIS BAUDRY (NEW YORK)

**BETWEEN FANTASY AND REALITY: TRANSITIONAL OBJECTS AND PHENOMENA.** Edited by Simon A Grolnick, Leonard Barkin and Werner Muensterberger. New York: Jason Aronson, Inc., 1978. 581 pp.

Of all of his clinical and theoretical contributions, Donald W. Winnicott's recognition and delineation of transitional objects and phenomena and of some of their potential implications has proved to be the most stimulating to social scientists and philosophers. *Between Fantasy and Reality* is a collection of thirty-one essays written by a fine selection of European and American authors. It serves as a fitting tribute to Winnicott and goes far toward placing his seminal ideas into proper perspective in terms of child development and clinical and applied psychoanalysis.

The book provides highly educational, thought-provoking, and even fascinating reading from beginning to end; yet each contribution is so meaty that perusal of the book must be discontinuous. The volume is divided into six sections: "Introduction," "Origins and Concepts," "Clinical Studies," "Applications to Other Fields," "Critiques," and "Concluding." The concluding section, Leonard Barkin's "The Concept of the Transitional Object," should be studied first and the other five sections then perused in their given order. In a relatively brief review, I can do no more than to point to some highlights and indicate general continuing and overlapping themes, although almost every contribution would justify individual review.

The "Introduction" is touching as well as informative. Werner Muensterberger places Winnicott's contribution in historical perspective and calls attention to prior, although essentially ignored, literature which dealt less systematically with similar concepts. Winnicott's widow, Clare, and Marion Milner, a close personal friend, provide moving accounts of how this sensitive and perceptive clini-

cal observer, a pediatrician turned psychoanalyst, was able to contemplate transferential data and his own emotional responses with a degree of insightful objectivity that enabled him to be among the first who could work analytically with severely regressed patients without including undue parametric or anti-analytic tactics and techniques. Mrs. Winnicott and Dr. Milner ably illustrate how Winnicott could contemplate the data which emerged from the analytic situation and from his study of his idiosyncratic conflicts and uncertainties, synthesize elements from both, and use the amalgam creatively to enhance both the clinical and theoretical aspects of psychoanalysis.

In "Origins and Concepts," Susan Deri introduces a thesis which pervades the writings of many other contributors, namely, that it was Winnicott who, within the framework of psychoanalysis, first appreciated the human urge for creativity from its earliest infantile manifestations to its highest forms in cultural life. Whereas Freud stressed the necessity to accept and to adapt to reality, Winnicott showed how the enjoyment and love of reality come about. Both Freud and Winnicott were concerned with the question of inside-subjective versus outside-objective reality; Freud concentrated on ascertaining the most effective methods of discriminating between the two, but Winnicott demonstrated how the two universes harmonize, "intermingled within the same act, the same perception, or the same physical object" (p. 46).

Several contributors are concerned with the intermediate zone between psyche and soma. Judith Kestenberg finds that holding, possessing, and acting on the transitional object helps children who have a feeling of loss of body integrity to recoup their losses and recreate themselves and their mothers. Kestenberg offers a physiological base for "this type of creativity," finding it "in the intermediate zone between mother and infant" (p. 71). It is

the activation of the GNS [gamma nervous system], which, through its hypothalamic connection, regulates the hormonal, stimulating, and sleep-making centers, as well as all other rhythmic regulators of body needs. Through its connections via the hypothalamus to the cortex, the comfort-giving, body-image building creativity becomes transformed into play and art—the individual's gift to society. Transsensuous, the ideomotor, affective component of body-image making, remains the core of all relationships (p. 71).

In a more clinically oriented paper, Kestenberg and Joan Weinstein

find transitional objects to be created in loneliness and find that "the essential loneliness of the creative experience is derived from the experience of the infant who has lost touch with his mother" (p. 90). Relationships between transitional objects and phenomena and creativity are discussed in many chapters and constitute a dominant theme of the book.

The interest of David R. Metcalf and René A. Spitz in the subject stemmed from work on the inception of dreaming during infancy and on the emerging knowledge about the physiology of sleep and dreaming. Their paper presents another theme which pervades many authors' contributions. The critical period for transitional phenomena provides a necessary and unique bridge between the inner and the outer, between fantasy and reality:

. . . prior to this period the differentiation between outer reality and inner perception is indistinct and imperfect. After the inception of this period, reality testing matures and transitional objects become the vehicle for the development of fantasy, symbolization, and myriad substitutions, displacements, and condensations which are the stuff of dream work. . . . The beginning of dreaming and the flowering of the period of transitional phenomena also form a landmark in the development of psychic structure because it is in this complex and intertwined developmental line that creativity, under ego direction, has its origins. It is with the dream and with the cathexis of transitional objects and phenomena that "regression in the service of the ego" originates (p. 106).

The relations between the transitional phase and dreaming are referred to by various authors; in one of his contributions to the book, Simon A. Grolnick writes specifically of dreams and dreaming as transitional phenomena.

Renata Gaddini also focuses on the elusive bridge between psyche and soma. It is her thesis that the development of the transitional object in infancy is the sign of a positive mode which can occur when adequate mothering exists, but that the development of the psychosomatic symptom is the sign of a negative mode and occurs in the presence of defective mothering. Gaddini does not refer to the work of E. Galenson and H. Roiphe, who have found that after young children rejoin their parents after a separation, they often develop transient psychosomatic symptoms.

In dealing with the difference between the transitional object and the fetish, Samuel Abrams and Peter B. Neubauer find that "an early, intensified and frequently protracted relationship to a central,

selected object can become a vehicle for pathologic tendencies and serve dynamic, symbolic, and strategic expressions" (p. 136) when the child's environment is less than optimal. They also find that transitional objects may function as bridges of expansion both from the animate to the inanimate and from the mental representations of others to that of the self. Several other authors also treat differences between transitional objects and fetishes; Robert Dicks devotes a chapter to the subject.

The concept of the use of space by the growing individual and the adult constitutes yet another ongoing theme of the book. Anni Bergman and André Green write specifically about it, and it is an important aspect of a chapter by M. Masud R. Khan. Bergman notes that during nursing there is no space between infants and their mothers and that as the infants begin to differentiate themselves from their mothers, space between them has to be created and bridged. Exploration of different spaces eventually results in cognitive awareness of separation and relative helplessness; at the same time, the space between the child and the mother becomes a valued possession, and internal space becomes a reality reinforced by toilet training and the ability to retain or deposit bowel and bladder contents. As the realization of the irreconcilability of home and outside space becomes a reality, transitional space becomes a necessity for comfortable functioning.

Green likens the analytic situation to the development of the transitional object and transitional space (although he does not use that term). He states that since the transitional period facilitates symbolization, the only acceptable variations of classical psychoanalysis are those whose aim is to facilitate the creation of optimal conditions for the growth of symbolization. Green focuses on the influence of countertransference in determining the degree to which the analytic experience can serve as a healthy transitional period in both the patient's and the analyst's lives.

Khan's patient hid herself in symptoms and absented herself into a secret which provided a potential space where an absence was sustained in suspended animation. Her secret, concealed by random speech, even *pseudologia fantastica*, helped her "consciousness *escape* its own past" (p. 267). Having absented herself into a secret when her ongoing life with her mother broke down, she gradually linked up with it in her analysis.

Various authors in the section entitled "Clinical Studies" also deal, either in passing or specifically, with the role of countertransference in enhancing or hindering the development of the analytic experience into a healthy transitional period (see especially Peter L. Giovacchini's contribution). Ralph R. Greenson focuses more on the development of transference and finds "for some patients in the course of a successful analysis, the analyst evolves from a symbiotic self-object to a transitional object and, finally, to a real person" (p. 209). Joseph Solomon finds clinically that the transitional object can become an end in itself and that this is of particular importance in the understanding of obsessive-compulsive adult personalities. He sees two main therapeutic tasks: "to tease away the defensive, fetishistic cocoon and to encourage the establishment of a true transitional world in the person of the therapist. Therapeutic failure occurs when too much effort is devoted to the origins of content and less to the patient's use of disclosures to prevent object closeness" (p. 255).

David Parrish writes of the role of a dizygotic twin as a transitional object, and Vamik D. Volkan and James G. Kavanaugh tell of three cases in which a cat was used as a reactivated transitional object during therapy when patients were dealing actively with the resolution of psychic separation from mother/analyst. Others, too, have noted the use of cats as transitional objects. Henry Kaminer's patient brought a doll and a toy turtle as transitional objects into the treatment situation at a time when she feared impending separation from the therapist. Kaminer writes,

Some of the determinants of regression to the use of a transitional object are related to a prolongation of the symbiotic state in childhood, and to a mother-child relationship in which the mother insinuates herself into the child's awareness and totally controls the process of coping with separation. This is not the total perpetuation of a symbiosis but a state in which separation and reunion, which occur repeatedly, must be totally controlled because the painful effect of loss and loneliness is unbearable (p. 242).

In the section entitled "Applications to Other Fields," Gilbert J. Rose, treating the creativity of everyday life, deals with what he terms the transitional process between primary and secondary process. He believes that the adaptations of everyday life and the originality of creative imagination both represent a continuing "transitional" interplay between a relatively fluid self that continues into adulthood and reality. Adaptation may be thought of as creative and

creative imagination may be seen as adaptive; in both, the individual abstracts an *Umwelt* of his own, a synchronous and contemporary but necessarily selective reality.

Rosemary Dinnage, agreeing with Deri, argues that creative and imaginary powers, and especially their great artistic products, were misrepresented in Freud's model of the mind and asserts that Winnicott's ideas give us indications of how they may be restored to their proper place. Like Rose, she seeks to show that truth and illusion are less simple than Freud assumed.

Grolnick and Alfonz Lengyel examine Etruscan funerary fragments and analyze their images in the light of what is known about this mysterious people and the transitional object concept. Treasured objects are often placed with the dead to reduce the projected separation anxiety of the living. Some Etruscans believed that those objects aided the journey of the deceased into the land of the dead. The trip itself may be said to resemble the birth passage, with a new beginning on the other side. The art objects correspond to Volkan's linking objects, mementoes to which mourners remain deeply attached; these are used as transitional objects and serve to undo separation. As do other authors, Grolnick and Lengyel note that evocative symbols bridging subject and object are developmentally derived from an earlier "protosymbolic" phase in which only partial differentiation exists among the triangular components: the symbol, its referent, and the symbolizer.

Anni Bergman notes that with language and speech, as with vision, it is possible for the child to separate and yet remain close to the mother, so as not to feel alone. Winnicott indicated that the infant's vocalization can be used as a transitional phenomenon. Martin J. Weich discusses the infant's developing language function and introduces the terms, transitional language, transitional fetish, and language constancy, all of which aid conceptualization of the infant's language development. He sees the internalization of the language function associated with transitional language much as does Tolpin<sup>1</sup> in her paper on structuralization of the soothing function of the transitional object.

<sup>1</sup> Cf., Tolpin, M.: On the Beginnings of the Cohesive Self. An Application of the Concept of Transmuting Internalization to the Study of the Transitional Object and Signal Anxiety. In: *The Psychoanalytic Study of the Child, Vol. XXVI*. New York/Chicago: Quadrangle Books, 1971, pp. 316-352.



Emilie Sobel and Ruth Miller apply the transitional phenomena concept to the poetic process. Sobel shows how a poet's use of language, rhythm, and imagery is rooted in a transitional mode of experience involving the presymbolic period of childhood. Winnicott had suggested that the infant's babbling and humming are potential transitional phenomena; Sobel, drawing on Kestenberg's work, shows the influence on creativity of play and oral rhythms deriving from the nursing situation. Miller, a poet, finds that the poems of Emily Dickinson not only traverse the space between inner and outer, but also cross the boundaries of time, linking her to future generations and immortality, an endless, cosmic, eternal space. This transitional space is a derivative of the protosymbolic space associated with Winnicott's indeterminate area.

In the section entitled "Critiques," Alfred Lorenzer and Peter Urban are concerned with the sensorimotor interface with the representational, and they stress the interactions with the external world that lead to more stable "interaction forms" analogous to Piaget's schemata. Their discussion approaches that of Metcalf and Spitz in conceptualizing the transitional object as another psychic organizer, an indicator of a certain level of self-object differentiation, and a catalyst to that very process.

A fascinating presentation by Anthony Flew uses essays on the philosophy of psychoanalysis as a background for his warning that both other psychoanalysts and Winnicott himself have generalized unduly from his original ideas. Alfred Flarsheim's careful and erudite rejoinder is too closely reasoned for easy abstraction.

This is a fine book, and its perusal by all of those who are interested in personality development and the mental health sciences is strongly recommended.

L. BRYCE BOYER (BERKELEY, CALIF.)

**PRIMITIVE INTERNALIZED OBJECT RELATIONS: A CLINICAL STUDY OF SCHIZOPHRENIC, BORDERLINE, AND NARCISSISTIC PATIENTS.** By Vamik D. Volkan, M.D. New York: International Universities Press, Inc., 1976. 344 pp.

In this volume, Volkan attempts "a systematic study of the clinical correlation of the theory of internalized object relations" (p. 317). Insofar as *theory* is concerned, Volkan relies considerably on Otto F.

Kernberg's formulations while also synthesizing ideas from other authors. In his Foreword to Volkan's book, Kernberg says of Volkan: "His approach is a flexible one and encompasses contributions from authors other than those included in my theoretical frame. He is, hence, his own man" (p. xv). Particularly in the chapter on emotional flooding and on transitional phenomena, Volkan has demonstrated his originality in making penetrating analyses of the similarities and dissimilarities among abreaction, affectualization, and emotional flooding and among the concepts of transitional object, fetish, and linking object.

Accepting Kernberg's postulate that internalization of object relatedness proceeds in four stages, Volkan conceptualizes the group of patients he describes in the book (i.e., those with acute type of adult schizophrenia, borderline and narcissistic personality organizations) as being arrested developmentally at stage two or three.

In the second stage, primary undifferentiated self-object representations of "all good" type are established as a result of the multiple perceptions activated by the need-satisfying behavior of the mother. Any painful psychobiologic experiences build up correspondingly "all bad" undifferentiated self-object representations at the same time. The fixation of internalized object relations at this level is likely to impair the subsequent ability to test reality, and to preclude awareness of ego boundaries (p. 43).

In the third stage, in which "good" self- and object representations and "bad" ones are separated by primitive splitting from one another, there exists as yet no integrated concept of the self. . . . Integrated conceptualization of human beings is not yet possible (p. 45).

Because of developmental arrests, these patients exhibit in treatment certain specific patterns of behavior: introjective-projective types of relatedness, splitting of self- and object representations into "all good" and "all bad," emotional floodings, and holding onto the analyst/therapist or other animate or inanimate objects as transitional objects.

Correlating the above theory of internalized object relations with clinical practice, Volkan notes:

Since it is usual to see in psychoanalysis and psychoanalytically oriented psychotherapy neurotic persons whose primary defense mechanism is repression, we may consider the patient's repressive forces as an essential issue with which to deal from the beginning of the treatment. Accordingly, we may have a tendency to apply to psychotic patients and to patients with borderline or narcissistic personality organization the same techniques we are accustomed

to using with neurotics. I have tried to demonstrate in this book that success in treating the kinds of patients I describe in it depends on a focus, at the beginning of their treatment, on primitive splitting and its accompanying defenses, rather than on repression (p. 319).

By focusing on primitive defenses, Volkan observes that a mending of the split self- and object representation may be facilitated. Following this healing, a renewed thrust toward growth-health can then occur. But, "before primitive splitting can be successfully mended it must be worked through thoroughly in the transference" (p. 133), and in order to allow a thorough working through, the analyst must avoid premature confrontation of the patient's defensive use of primitive splitting. "It is only when primitively split transference toward the analyst develops fully that the analyst's interpretation of the defensive functions of the primitive splitting will be perceived by the patient as authentic" (p. 135). The implication is that only on such occasions would the interpretation have a mutative effect.

Volkan states that "the emphasis on primitive splitting, and the accomplishment of its mending as therapy progresses, require detailed clinical exposure in order to indicate how important the theory of internalized object relations is to clinical technique" (p. 319). In various illustrative cases, he presents this viewpoint succinctly and convincingly, demonstrating the success of his approach. However, in order to encompass many theoretical and clinical ideas into a single, compact volume, Volkan has necessarily had to "focus on specific aspects of treatment to show the patient's attempt to create for himself an integrated internalized world. Obviously, such patients as I write about present many manifestations that deserve consideration, but I choose to make a systematic exploration of their primitive internalized object relations with little reference to other phenomena" (p. xxi-xxii). Unless his readers keep reminding themselves of Volkan's selective "focusing," they may begin to conclude that the interpretation of the defense of primitive splitting, and of other aspects of so-called primitive internalized object relations, constitutes the only activity in the therapy.

Confronting a schizophrenic, borderline, or narcissistic patient, analysts, I believe, must make use of their empathic capacity and try to "tune in" to the patient's need at any given time. While analysts must be alerted to Volkan's advice to "focus on primitive splitting and its accompanying defenses, rather than on repression," they must

also remain flexible so that their techniques will not be restricted to a limited repertoire. As much as comments on the defensive attitude which the patient adopts or on the resistance which the patient puts up may be necessary, at other times analysts may find it necessary to leave these alone and untouched. While sometimes allowing themselves to be the receptacle or the container of the patient's emotional discharge, at other times they may have to discourage the "affectualizations." Whether analysts should be passively listening or actively exploring must be determined by their empathic understanding of the patient's need, which tends to change from moment to moment (e.g., from a need to be alone to a need to be with someone or from a need to be dependent to a need to be independent). In addition to the frequent rapid changing of needs, such a patient's ego organization also undergoes fluctuation constantly (e.g., a sudden hostile impulse may cause ego disorganization). The ego functions differently according to the degree of anxiety experienced and tends to resort to different defense mechanisms. In a situation of acute anxiety the patient may reactivate primitive defense mechanisms such as splitting, while when tension is lower, the patient may be able to use higher order defense mechanisms such as repression.

Volkan proposes a selective "focusing on specific aspects of treatment." In his discussion of this approach of selective "focusing," he tends to overstress the importance of the primitive defenses and of their management. In his illustrative cases, he presents a more balanced viewpoint and demonstrates clearly that the success of his therapeutic endeavor is determined at least as much by his empathic understanding of his patients as by his theoretical position.

Volkan's book is well-written and readable. As Kernberg says in the preface, it "constitutes a significant enrichment of the general field of treatment of borderline conditions and psychosis" (p. xvii). It will be useful to all who are interested in the treatment of acute types of adult schizophrenia, as well as borderline and narcissistic personalities.

Here and there in his book, Volkan hints that he has more to say on certain topics. I shall look forward to his sharing with us such knowledge and experiences in the treatment of the kinds of patients who, until recently, were not included among those suitable for psychoanalysis.

LATENCY. By Charles Sarnoff, M.D. New York: Jason Aronson, Inc., 1976. 402 pp.

Charles Sarnoff is an acknowledged authority on the study of latency. The present book, a further valuable contribution to an area which has not been adequately explored, expands on the author's earlier work which dealt with the use of fantasy as a defense in latency.

Latency children are afraid, says the author, to permit expression of their sexual and aggressive feelings which might enrage their very much needed parents and other authority figures. Elaborate fantasies serve as substitutes for action or as defenses against it. The therapist's task, therefore, is to help the patient explore latent and suppressed fantasies.

Sarnoff's conceptualization of the structure of latency dictates the recommended technique. In one typical example, instead of concerning himself with the present complaint and its origin, he ascribes a latency child's problem to inadequate symbol formation and suggests methods of enriching the patient's fantasy life. In another instance he attributes failure to enter latency to a repressed symbolizing function and suggests therapeutic stratagems to allow the development of fantasy to proceed appropriately.

A minor criticism: No distinction is made between dynamically oriented psychotherapy and analysis. Since the approach described here might best be termed therapeutic, it is to be hoped that in future contributions Sarnoff will extend his exploration into the psychoanalytic treatment of latency children and will include phenomena of transference and countertransference encountered in an analysis conducted at this developmental state.

This book is a valuable aid in the understanding of latency. It is highly recommended to therapists and for use in seminars on child development.

KATO VAN LEEUWEN (LOS ANGELES)

SPEECH AND REASON: LANGUAGE DISORDER IN MENTAL DISEASE. By D. Wilfred Abse, M.D.; THE LIFE OF SPEECH. By Philipp Wegener. Charlottesville: The University Press of Virginia, 1971. 310 pp.

In 1885 Philipp Wegener published his book, *The Life of Speech*, which may be regarded as the first study to approach language as a

system of communication for transmitting thought, feelings, needs, and strivings from one human being to another. Since linguistics in the 1880's was concerned mainly with the physiological aspect of speech production on the one hand, and the formal structure of words and sentences on the other, Wegener can be regarded as the pioneer of the study of language from the psychological point of view. His assumptions regarding the ability of language to convey needs and wishes and his attempts to follow the developmental path of language from its beginnings in early childhood, as well as from the dawn of human history, contain some basic concepts which are so close to the conceptual world of psychoanalysis that the reader gains the impression that Freud read this book and integrated its views into his own formulations of language.

Abse's translation from the original German into English is supplemented by a long introduction which discusses the relevance of Wegener's ideas for psychoanalysis today, especially for the understanding of such mental disorders as hysteria and schizophrenia. This "Introduction" (comprising 110 pages) is much more than a scholarly discussion of Wegener's ideas and may be regarded as a worthwhile independent study of language and psychoanalysis, leaning loosely on Wegener's basic assumptions.

Abse presents theoretical and clinical material to support Wegener's central assumption that "the purpose of speech is always to influence the mind or judgment of a person in a way that seems valuable to the speaker" (p. 174). The origin of speech is in children's attempts to influence those who care for them, to inform them about their pressing needs, to convey their feelings or to indicate how they want their wishes to be fulfilled. At first, this is done through "sentences" composed of a single word. An adult example would be a person entering a restaurant and saying to the waiter, "Coffee." This one-word sentence can be understood only if the context in which it is spoken is as clear to the listener as it is to the speaker. As communication becomes more advanced and complex, the context can no longer be assumed to be clear to the listener, and growing children have to supplement their original one-word sentences with more and more "auxiliary" words in order to construct the context which would make the words intelligible. By this process of *emendation*, the primary utterances of primitive peoples or of children gradually grow to become a language:

These corrective forms become established forms of speech, whose origin the consciousness of language has completely forgotten. Originally sketches, by which the distorted picture was improved by supplementation, they become the established and basic contours whereby a later consciousness of language can have the logically pleasing feeling of clarity, and the aesthetic-ethical sensation of beauty and nobility (p. 168).

All discourse, therefore, involves two elements: many words are presented to construct the necessary verbal context, and a few words convey that which is "novel." If no precise word to convey the "novel" can be found, the speaker must use a *metaphor*:

This word usually already denotes something else. A word symbol, already a symbol for a thing, a process, or a relation, is used for this new purpose, on the basis of some suggested analogy. The context makes it clear that the word is not referring to the first thing, process, or relation, that this is not literally denoted; hence the word must mean something else (p. 20).

Metaphors are naturally used for expressing those meanings that ordinary words fail to express—feelings, states of experience, etc.—and the ones that succeed best in expressing the inexpressible tend to become, with time, accepted coins of language, or what Wegener called "faded metaphors." Language continually grows and expands through the creation of new metaphors (a "job" undertaken by creative artists, especially writers and poets) and through their addition to the body of ordinary language after they have passed the process of "fading."

Using these basic assumptions, Abse attempts to explain such mental disorders as hysteria and schizophrenia, from the point of view of linguistics, as processes of faulty emendation and disordered metaphoric symbolism. The two chapters devoted to these two disorders are most interesting for any psychoanalyst, illuminating the underlying pathological dynamic processes from a new angle. The chapter, "Hysteria and Metaphor," should to my mind be included in any basic course on hysteria in our psychoanalytic institutes. Equally interesting is the chapter, "Dreams and Speech," which includes a comprehensive survey of the pertinent psychoanalytic literature, in addition to Abse's many interesting and original ideas. The chapters dealing with more general issues of mental representation, such as "Metaphor, Thought, and Language," "Symbolism," and especially the chapter, "Imagery," are somewhat weaker. These issues require a thorough discussion of many general problems of cogni-

tion, perception, primary-process activity, etc., and Abse's approach to these topics seems somewhat simplistic. The reader, although confronted with many interesting and stimulating ideas, is sometimes left with the feeling, "And is this all that can be said about it?"

The original contribution of Abse, on the whole, is not only a scientific study about language, but also a good demonstration of how language and metaphors should be used. It is well written, presented in a lucid and vivid style, and encompasses much relevant material from disciplines such as philosophy, physiology, and the history of art. Its eloquent style and the author's wide scholarship make the reading of this book a pleasurable intellectual experience. Busy practicing psychoanalysts, even if they are not particularly interested in studying the historical work of Wegener (not one of the easiest tasks), will certainly benefit from Abse's "Introduction," which can well be read and comprehended as an independent study.

PINCHAS NOY (JERUSALEM)

**BEETHOVEN.** By Maynard Solomon. New York: Schirmer Books; London: Collier Macmillan, 1977. 400 pp.

"Maynard Solomon has given us a modern discussion of Beethoven's music, and the complete story of his life—as it has never before been told." This quotation from the book's jacket is, I believe, essentially accurate, and for that reason Solomon's biography can be unreservedly recommended to anyone who wishes to read a well-documented account of Beethoven's productions and the events of his life. Solomon, however, aims to accomplish more than this traditional biographic task. In the preface he states, "My book is an essay in interpretation and meaning: I will try to discover the meaning of several of the ambiguities and delusions in Beethoven's life and to offer some indications of their possible significance for his creative quest" (p. xiii). He promises the reader to utilize "aesthetic, historical, psychoanalytic, sociological" (p. xiii) categories of analysis. Throughout the book he makes references to specific psychoanalytic formulations by Freud, A. Freud, Abraham, Fenichel, Glover, Greenacre, Rank, Sachs, E. and R. Sterba and utilizes the oedipus complex, internal conflict, splitting, ambivalence, idealization, denial, unconscious fantasy, identification, homoerotism, castration fears, etc., to explain



Beethoven's "ambiguities and delusions." The psychoanalytically informed reader is therefore invited to evaluate Solomon's book as an example of applied analysis—a psychobiographic study—and to compare it to those by psychoanalysts, such as Eissler's Goethe, Meyer's Conrad, Mack's T. E. Lawrence, and those by nonanalysts, such as Edel's Henry James and Sheaffer's Eugene O'Neill.

Solomon, an Associate Editor of *American Imago*, attempts to synthesize knowledge from musicology and Beethoven scholarship with that derived from psychoanalysis. The result, to this reviewer, is disappointing. Solomon is admirable when he writes "about" Beethoven. He is less successful when he attempts to draw a living portrait of the man and convey the human qualities of the genius whose creative legacy the world shares. Facts about Beethoven are well researched and selected, at times brilliantly so. Psychological conclusions *about* Beethoven are thoughtful and often expressed with considerable sophistication, but Solomon does not capture Beethoven's soul. He does not achieve or transmit the sense of a deep empathic contact with his subject that we would hope for.

The author's perceptive skills are best demonstrated in the chapters in the middle of the book in which he explains Beethoven's idealization of and disillusion with Napoleon and in which he solves the riddle of the "Immortal Beloved." Beethoven's philosophic grounding in the Enlightenment, his belief in the heroic Prince, his great enthusiasm for Bonaparte, his personal predilection for ambivalent reactions to father figures, and his desire for the material rewards to be derived from Napoleon's approval all come together in the famous dedication of the *Third Symphony*, and its eventual cancellation. It is a complex and dramatic story which Solomon tells with discretion, carefully weighing the factors involved.

The real tour de force of the book is Solomon's uncovering, after one hundred thirty-five years, the identity of the recipient of Beethoven's famous letter to his "Immortal Beloved." It is a biographic detective story, replete with the evidence, the false clues others followed, and finally the correct path (map included) that led Solomon on the successful trail to Antonie Brentano. He then cements his evidence by revealing the psychological fit between Antonie as the troubled (hysterical) woman in distress and Ludwig as the pseudo pursuer of a consummated love relationship. Solomon asserts that the confrontation with a willing, eager partner had a shattering effect

on Beethoven's "illusions that he could lead a normal sexual or family life" (p. 188). Solomon breaks off his narrative at this point. When he returns to it, he describes a period of regression marked by a suicide attempt, a full stop in creative output, a serious deterioration in Beethoven's dress and personal hygiene, depression, and the open, active pursuit of prostitutes.

As a clinical analyst, perhaps I can fill in some gaps in the author's explanation of the terrible consternation evidenced by the forty-two-year-old bachelor confronted with the full force of the sexual and emotional demands of a woman who viewed Beethoven as the reincarnate image of her father. For many years, Beethoven had maintained a delicate balance by selecting "safe" women, those who were securely married, as Antonie appeared to be, and those who did not respond to him. Now he was threatened by the possibility and the active potentiality of mutually desired sexual passion with a noble lady. And this time he could not retreat to a comfortable harbor sheltered by a mixture of ethics and sublimation; he had been erotically "turned on." His ethical defenses derived from a deferential identification with his respected grandfather crumbled and a latent unconscious identification with his libertine father became dominant and threatening. The helplessness he must have experienced from this inner onslaught of uncontrolled drives and primitive guilt, this inner hurt, confusion, and terror, Solomon does not effectively recreate for his reader. To be unable to produce music even for a day must have been overwhelmingly terrifying for this turbulent titan.

Solomon's psychological formulation falters in his central premise: that a series of "delusions" about his birth (believing himself two years younger than he was) and his family (believing he was of noble origin) adversely shaped many of Beethoven's emotional attitudes and actions. Solomon never fully explains the first "delusion," relating it inconclusively to many sources, including the death of an older sibling also named Ludwig. The second "delusion" he connects to the family romance fantasy and states that this "fantasy can take deep root . . . only when the child is (or imagines himself to be) neglected, maltreated, and unloved" (p. 24). "All of his fantasies, then, may have a single, transparent source: they may be the expression, denial, and symbolic transcendence of the feeling that he was unloved and unwanted" (p. 24). Solomon follows this theme through-

out his book, coming at the end to the conclusion that the courtroom revelation of Beethoven's lack of any claim to a title of nobility (to a "von" rather than the Flemish "van") was a curative shattering of his delusions. Johanna, the mother of Beethoven's much-fought-over nephew, is seen by Solomon as the heroine whose "steadfast defense of her rights as a woman and mother had prevented him [Beethoven] from altogether giving way to pathological tendencies" (p. 263). It seems to me, rather, that her understandable opposition inadvertently triggered in Beethoven a complete rekindling of his preoedipal and oedipal struggle with his often withdrawn and neglectful mother and led to severely regressive behavior and to progressive alcoholic cirrhosis during this period. When Solomon states, "Beethoven's birth fantasies barred him from fully acknowledging, accepting, and loving his own family" (p. 22), he seems not to consider that an artist's love affair is with the world at large (Greenacre's "collective alternates").

Solomon quotes the following from Beethoven's diary: "For thee there is no longer any happiness except in thyself, in thy art. O God, give me strength to conquer myself, since nothing must tie me to life. In this way with A., everything goes to ruin" (p. 167). I would interpret these words as Eissler did in his essay on the creative genius. Eissler stated:

The creative artist needs the outer world. He constantly receives stimulation and inspiration from it. But at the same time that world . . . is a source of a great danger. If he really fell in love, if he really made a complete turn toward objects, what then would impel him still to depict reality in his creations? If all his impulses flowed toward an object how could he still have energy left for the superior effort to give artistic form to his experiences in and with the world? <sup>1</sup>

And when the fatally ill Beethoven called out "with indescribable dignity and self-consciousness . . . 'I too am a King!'" (pp. 288-289), I cannot agree with Solomon that it was "the final and poignant efflorescence of Beethoven's family romance fantasy before it yielded to the importunities of reality and to the gathering harbingers of mortality" (p. 289). Rather, it reflects the proud narcissism of the man who had completed, in a final unbelievable burst of cre-

<sup>1</sup> Cf., Eissler, K.: *Tentative Notes on the Psychology of Genius*. In: *Goethe: A Psychoanalytic Study 1775-1786*. Two Volumes. Detroit: Wayne State University Press, 1963, p. 1385.

ativity, the four last quartets and the *Ninth Symphony* with its incomparable "Ode to Joy."

JOSEPH D. LICHTENBERG (WASHINGTON, D.C.)

HAMLET'S ABSENT FATHER. By Avi Erlich. Princeton, N.J.: Princeton University Press, 1977. 308 pp.

Professor Avi Erlich, like Hamlet himself, seems to struggle with an inability to act decisively and get to the heart of the matter. Hamlet knows what he must do but by the time he finally does act to kill Claudius the stage is littered with corpses. Of course, if he had simply killed Claudius and been done with it, we would not have Shakespeare's great play, since it is not, in fact, a story of revenge, but a complex struggle between grief and anger, indecision and passionate certainty.

Like the play *Hamlet*, Erlich's text is littered with corpses of literary and psychoanalytic critics with whom he spends too much time dueling intellectually. This scholarly dueling is a time-honored tradition in the annals of literary and psychoanalytic criticism; it is expected in academic circles that a scholar will address himself to the thoughts of his colleagues before making his own contribution. Usually this tribute is done with a heavy hand—with copious footnotes and a talmudic obsessiveness—which puts all but the driest minds and most technically oriented parties to sleep. It is to Erlich's credit that his muscular prose and conversational familiarity with other scholars' ideas is personal enough for the text to be breezier and more readable than is usual with such academic preambles.

But like the character Hamlet, the author stalls. He does not make the original contribution he promises at the start of his book. That contribution—stated as simply as possible—is to formulate a clear, psychological portrait of the *author* of the play, an author who lived hundreds of years ago and wrote plays for a living. It would be of interest to know if he had any favorite approach to writing. Did he like to write plays sitting around in his underwear? Or did he prefer to write fully clothed and lying on his belly over the edge of a bed? Of course, these are facetious questions, and I mention them only to remind us that the plays were written by a flesh and blood man.

This approach to Shakespeare as a gifted but real person does not

merely reflect this reviewer's personal aesthetic prejudice. At the start of his book, Erlich makes the same assertion: the play was written by a living, real man, and by studying the man's play, he will make some guesses about its creator's psychology. At the same time, Erlich points out the limitations of conjecturing about the psychology of fictional characters, since in that exercise we are text-bound and therefore reach a dead end. He promises the reader that he will avoid this pitfall and give us something more exciting—he will give us his best guesses and hunches about the personal psychology of W. Shakespeare.

Erlich aroused my interest, and I read on expectantly, but after about one hundred pages I wanted to sue him for breach of promise. Instead of telling me about the Elizabethan author, Erlich was busy dueling with Ernest Jones, Kurt Eissler, and even Freud. The verbal footwork was interesting, but he was dueling with men who were not there to fight back, with their texts and commentaries, and he was pointing out the limitations in their readings of the play's text. In other words, he was disputing their understanding of Hamlet's psychology, *not* Shakespeare's. He was on the shakiest grounds with Eissler, since Eissler's ideas about Hamlet's psychology are very close to Erlich's own. Both he and Eissler believe the play has something to do with Hamlet's disillusionment with his father and his search for alternative fathers in Polonius, Claudius, Fortinbras, etc. Erlich's thesis is that Hamlet suffered from having had a weak or absent father from the start and therefore could not act decisively. It is a plausible notion, and I have no argument with it.

There are two problems, however, with Erlich's approach. One is the breach of promise I have already mentioned; the other is that he distracts himself in his exhaustive review of the work of previous psychological thinkers. Since the turn of the century when Freud first wrote of Hamlet and Oedipus in *The Interpretation of Dreams*, we have come to entertain more complex formulations on child development, identity, family structure, and narcissism, to name just a few concepts. Typically, as each generation of analysts has brought new concepts to light in their work with patients, these ideas have been placed in a theoretical framework which has then been used to reinspect classic works of literature. Given our current understanding of psychological motivation, Erlich's arguments with Freud's oversimplified summary of Hamlet's oedipus complex seem facile.

True, they are not offensive or condescending, nor do they arrogantly ignore the limits imposed by Freud's historical context on his intellectual understanding.

What is finally disappointing is Erlich's lack of daring in carrying out his initial intention. His summary of Shakespeare's psychology is meekly confined to a paragraph in his conclusion, in which he states that Shakespeare's father was either recently dead or in the process of dying when he wrote the play. Presumably, according to Erlich, the play was the expression of Shakespeare's grief and disillusionment with his father. All well and good, but if the author meant his promise of using the text to shed light on the writer, this statement belongs at the start of his book, since it raises a host of questions about Shakespeare the man which Erlich never explores, much less attempts to answer. To name a few: What kind of father does he think Shakespeare had? What kind of relationship does he think Shakespeare had with his father? How does he resolve the paradox of a writer having the courage and personal daring that it must have taken for Shakespeare to write such a play as this at a time when he was going through such a tragic personal loss of his own? Did he originally get those strengths from his father, and if not, where and how did he learn to father himself so well that he could write something as great as *Hamlet* while he was in the midst of such a loss?

STEVEN M. WEISSMAN (WASHINGTON, D.C.)

## The Annual of Psychoanalysis. IV, 1976.

James F. Bing

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## ABSTRACTS

**The Annual of Psychoanalysis. IV, 1976.**

**Schreber and the Paranoid Process.** W. W. Meissner. Pp. 3-40.

The author first outlines Freud's classical explanation for Schreber's paranoid delusions. He then uses further material from Schreber's *Memoirs* as one of the bases for redefining the dynamics of Schreber's paranoid process and the development of paranoia in general. Meissner discusses the relationship of masochism and of depression to paranoia, particularly emphasizing how paranoia acts as a defense against depression. One of the roots of paranoia is found in the individual's early narcissistic development. Meissner's theory of paranoia involves a complicated concept of introjects in which Freud's theories of homosexuality do not play a role. Important in the development of Meissner's ideas are Schreber's unusual parents, a very sadistic, dictatorial, unremittingly cruel father and a submissive, masochistic mother.

**Psychic Energy: A Historical Perspective.** Robert M. Galatzer-Levy. Pp. 41-61.

This article attempts to invalidate the arguments that have been used to dismiss the concept of psychic energy. The author reviews the scientific and philosophical developments that influenced Freud. Although Freud's concepts were a natural outgrowth of "vitalism" and "*naturphilosophie*," this does not in any way invalidate his theories. The paradigm of a physicalistic physiology that included the universal principle of energy conservation had a marked influence on Freud's thinking. Goethe's influence on Freud is also discussed. Freud's views regarding psychic energy did not have an empirical origin as is so often claimed. To compare the concept of physical energy today with psychic energy is a fallacious exercise. Although there may be gaps in the theory of psychic energy, this is insufficient justification for dismissing the concept.

**Narcissistic Personality Disorders and the Oedipal Fixations.** Max Forman. Pp. 65-92.

Narcissistic personality disorders are differentiated from oedipal fixations. Three clinical cases of narcissistic disorders are presented. The author states he has never seen a patient who illustrates dominant narcissistic fixations with important object transference pathology. In the cases described, the typical picture is that seen in Kohut's *The Analysis of the Self*, with the development of mirror transference and of temporary fragmentations occurring in the patients after leaving the analyst. Basically, each exhibited a similar pathology, namely, a poorly cathected and noncohesive development of the self, resulting in the ever-present potential for temporary fragmentation. In conclusion Forman lists nineteen criteria for the diagnosis of oedipal character neuroses.



**Empathy and Metaphoric Correspondences.** Stanley L. Olinick. Pp. 93-100.

The perception and transmission of covert meanings not really evident to each of the two people in a dyadic psychoanalytic situation presents a problem involving the conveying of meaning from one intrapsychic system to another. In short, "metaphor" constitutes the analyst's principal way of catching the drift of the patient's unconscious with his or her own unconscious. The psychoanalytic "work ego" receives and validates communications through synesthetic correspondences.

**Ambience and Abstinence.** Ernest Wolf. Pp. 101-115.

This article involves the problem of establishing the optimum ambience to produce an efficient psychoanalytic process. Wolf cites the case of lateness in a specific patient, giving many of the usual interpretations, but noting that these would be felt by this patient as assaults. The interpretation instead should be that the patient is late because he cannot stand the idea that he will be deserted, which would result in his disintegration. Freud's concept of abstinence was not intended to create a cold, inhumane, "scientific" atmosphere. Wolf implies that in certain patients who present predominant narcissistic difficulties, analysis will be a failure.

**On the Psychobiology of Gender Identity.** Therese Benedek. Pp. 117-162.

The complexity of the subject and the richness of the late Dr. Benedek's observations over so many years of experience make this a particularly worthwhile article. The format is rather unique. First, the author reviews in detail J. Strouse's book, *Women in Analysis: Dialogues on Psychoanalytic Views of Femininity*. Second, she gives a lengthy presentation of psychobiological factors in the psychology of women, much of which has appeared in her other writings. Third, she discusses sexuality, and fourth, the polarity of the sexes. Among the many topics covered are the physiological and psychological components of sexuality: what motherliness is, how one differentiates motherliness from mothering, how the changing role of the father affects the development of his children which in turn influences the constellation of the family situation in general. Finally, the origin and the significance of the polarity of the sexes is discussed. Benedek makes a plea for the continuation of the polarity of the sexes despite current cultural pressures.

**Acting Out, the Psychoanalytic Process, and Interpretation.** Harold P. Blum. Pp. 163-184.

Blum reviews the relationship between acting out and the psychoanalytic process, focusing on the goal of psychoanalytic interpretation in acting out. He restricts the terms "acting out" and "acting in" to the analytic situation. Acting out is always a compromise, just as symptoms are; it functions not only as a resistance but also as a communication. In a successful analysis, previous forms of acting out will be brought into the transference and will eventually be translated into verbal memories, thus leading to a strengthening of the ego. Acting out provides certain kinds of information which are not available in any other way. Blum differen-

tiates between acting out that may take place outside of the analysis and "acting in" kinds of behavior that may take place in the analysis. He also describes the type of patient who tends to act out more frequently. Under certain circumstances, a correct interpretation may precipitate acting out which may be useful in the treatment. An incorrect interpretation may also precipitate acting out, but it will have to be corrected by the analyst.

**A Conceptual Approach to the Understanding of Generous Acts.** Arnold Goldberg. Pp. 185-199.

Some acts of generosity are based on something other than a genetic origin. Since generosity is something that does not really appear until the postoedipal or postadolescent behavioral level has been reached, it is a higher form of development and is therefore related to a regulatory principle which is subsumed under the heading of the creative principle. The author does not deny the conflictual origins of generosity, but he calls attention to its further developmental aspects which are autonomous. To summarize, "object directed individuals can be both generous and creative."

**The Endangered Self: A Contribution to the Understanding of Narcissistic Determinants of Countertransference.** Meyer S. Gunther. Pp. 201-224.

The areas of countertransference that have not been fully explored are related to those areas which touch upon the analyst's own narcissistic difficulties. The author uses much clinical material to justify this position. He cites two sources of the analyst's discomfort in the analytic situation which have been neglected. The first is that the practicing clinician does not recognize that there are many different models of the mind, assuming the presence of only one model with which he or she is familiar. The second source of the analyst's difficulties is the inevitability of constant narcissistic threats or wounds to which he or she is subjected. As a means of combating the difficulties that occur when the analyst feels uncomfortable, Gunther suggests that the analyst use what he calls "selective empathy," a kind of trial and error procedure.

**Manifestations of Abnormal Mourning: Homicide and Suicide Following the Death of Another.** George H. Pollock. Pp. 225-249.

Pollock has divided his article into two sections. The first cites historical examples of the universality of ritualized homicide and suicide in the past: in certain societies servants or wives or special pets of the deceased have been killed or have permitted themselves to be killed. Thus, in their reunion with the deceased, their own immortality as well as that of the deceased was preserved. The second section provides many examples from modern news media showing how the suicides of certain individuals had "anniversary" significance, which indicates that the need to be reunited with the deceased and the avoidance of the mourning process are factors in the suicide. In addition, there are narcissistic determinants.

**Freud, Piaget, and Human Knowledge: Some Comparisons and Contrasts.** E. James Anthony. Pp. 253-277.

This article thoroughly discusses the differences and similarities in Freud's and Piaget's thinking, focusing on the problem of epistemology. As an example of similarity, both Freud and Piaget were intrigued by the phenomenon of not knowing what was knowable. The author also points to deficiencies in each of their systems and urges that these deficiencies be corrected in psychoanalysis. He describes in detail the differences in their understanding or conceptualization of the unconscious. Whereas Piaget suggested that there was an intermediate mode of thinking which existed between primary and secondary process, this was omitted in Freud's concepts. There is an interesting section dealing with the differentiation between egocentric children and what might be called narcissistic children. The former are those who cannot differentiate themselves from the world—they are the world; the latter love only themselves. These two processes go on simultaneously in the course of maturation. Another example of how Freud and Piaget approach a problem along different lines and yet arrive at similar conclusions is in the area of the development of the conscience. A pervasive theme in the paper is the comparison of cognitive and affective approaches and the different ways these are dealt with by Freud and Piaget. The author makes a plea for a discipline in which both cognitive and affective approaches can be broadened and deepened, thus allowing the observer to view the patient from a much fuller perspective.

**Postencephalitic Syndrome: Clinical Entity or Incorrect Diagnostic Label?** D. Clifton Wilkerson. Pp. 281-303.

The author makes a very good case for no longer thinking in terms of a post-encephalitic syndrome as a clinical entity in itself. Rather, the organic illness produces a psychological reaction which is specific to the personality of the child but not specifically related to the neural damage. First, he indicates that operations, chronic physical disorders, or other brain diseases act as stimuli for the psychological behavioral problems. This is illustrated by the analysis of a girl who had a very severe meningoencephalitis from which she almost died and after which all the classical behavioral symptoms occurred. The analysis lasted for somewhat less than three years and was successful in that her behavior changed completely and none of the previous behavioral problems persisted.

**Chicago Selection Research: The Selection Process and the Selector.** George H. Pollock. Pp. 309-331.

This is a detailed consideration of the factors involved in the selection of candidates, including the traits of the selector. The most important part of the selection procedure is the individual interview. The assessing of analyzability of an applicant for training is essentially the same as that of a patient for analysis.

**Chicago Selection Research: The Individual Interview as an Instrument for the Selection of Candidates for Psychoanalytic Training.** Therese Benedek. Pp. 333-346.

This is a discussion of the use of the individual rating sheet which consists of eight categories: (1) overall rating; (2) capacity for communication with others; (3) capacity for communication with self; (4) integrative capacity; (5) superego: (a) flexibility, (b) non-corruptibility; (6) ego ideal; (7) potential for learning: (a) intellectual learning, (b) emotional learning; and (8) potential for maturation.

**Chicago Selection Research: The Group Interview.** Joan Fleming. Pp. 347-371.

The format of the interview is described as well as the rating process and the procedure for obtaining the data. An interesting example is presented which shows how the structure of the group changes during the interviewing process. The stresses on the interviewers as well as the interviewees are considered. The interviewers developed a routine they called "projective questions" in which the applicant was asked to associate to a Bible story or a Shakespearean play or a childhood fairy story. Comparisons between the one-to-one interview situation and that of the group interview are made; the advantages of the latter are stressed from a psychoanalytic viewpoint.

**Chicago Selection Research: The Post-Group Interview.** Joan Fleming. Pp. 375-382.

It was felt that the previous interviews were traumatic for the individuals involved and therefore a "decompression" talk was instituted. At the outset the applicants were unaware of this. This interview, it was believed, would produce valuable additional information in regard to the assessing process itself. The interviews were first conducted by a number of people, but finally by only two, at which point they became quite structured. By virtue of the nonevaluative atmosphere of the final interview (usually thirty minutes) different kinds of data are obtained, and an attempt is made to correlate these data with that of the preceding stress situations.

**Psychoanalysis and Communication Science.** Michael Franz Basch. Pp. 385-421.

This extremely complex article on the one hand maintains the importance and significance of psychoanalysis, and on the other differs radically with the attempts of Freud and his followers to keep psychoanalysis within the framework of the natural sciences, including its metapsychological framework. Basch attempts to debunk the concept that there is a mental apparatus or a mind-brain dichotomy. He prefers the language of communication and general systems theory, an orientation that does away with the distortions of Freud's pseudoscientific orientation which was based on Newtonian physics.

**Aspects of the Dynamics of Prejudice.** Mark J. Gehrie. Pp. 423-443.

The author collected his data in ninety hours of interviews with nine Sansei and notes the differences between this and the psychoanalytic situation. The

conclusions are: (1) the defensive reaction on the part of the Sansei is invariably on the basis of a readiness for such a response because of low self-esteem; (2) the discomforts arising in situations in which prejudice is felt stem from similar deprivations in the individual's development; thus there is an unconscious substitution, the present object being a displacement from an earlier infantile object, i.e., a transference reaction; (3) much of the prejudicial feeling also emanates from projections; (4) the feeling of prejudice constitutes what may be called an attempt at restitution for the early narcissistic injury; (5) the restitutorial role of this feeling is brought about by locating the source of pain outside oneself and by stereotyping those who inflict it.

**The Theme of Incest in the Myth of Osiris.** Gerda Frank. Pp. 447-478.

This is a scholarly compilation of facts pertaining to the derivations of and elaboration on the incest myth of Osiris. The formation of the myth has a dual origin in the need to perpetuate the belief in immortality and in the conflicts over incest. The mythical incest of the gods represents wish fulfillment of the tabooed desires of mortals. The myth is compared with the dream: both the mythmaker and the dream maker attempt a wish-fulfilling device. Each mode is a compromise between the wish and the defense against the wish. Throughout history, incest myths have become increasingly disguised; e.g., the Oedipus myth is simply a repetition of the earlier Osiris myth, as are biblical and Shakespearean examples.

**The Suicide of Richard Cory: An Explication of the Poem by Edwin Arlington Robinson.** Jerome Kavka. Pp. 479-500.

The author attempts to analyze the character structure of the poet, Edwin Arlington Robinson, by means of his poem, "Richard Cory," using primarily Kohut's theories on narcissism. He includes oedipal and preoedipal factors which in combination with the narcissistic development of the poet explain the content of the poem.

JAMES F. BING

**The Psychoanalytic Review.** LXIII, 1976.

**Adolescent Processes in Romeo and Juliet.** Marjorie Kolb Cox. Pp. 379-392.

Instead of being a tragedy or a story of courtly love, *Romeo and Juliet* is a play whose characters are driven by the processes of adolescence. Their elders are unable to understand their adolescent problems because of their own failures in negotiating adolescence. Romeo is shown to be engaged in the process of separation from his parents. His love for Rosalind is seen as a typical adolescent crush on an unattainable object, and his dropping Rosalind when he falls in love with Juliet is viewed as part of normal development rather than as fickleness. Cox points out typical adolescent qualities in others: Benvolio's lack of understanding of his friend Romeo's nocturnal wandering behavior when he is exhibiting ex-

actly the same behavior, and Tybalt's exaggerated masculinity. Juliet is a child under the influence of mother and nurse. Lady Capulet, whose own adolescence was aborted by marriage at age thirteen and the birth of a child at fourteen, is unable to understand Juliet's feelings. The paper nicely documents the author's thesis, providing comparisons with other interpretations of the play.

**Sacrifice, Fire and the Victory of the Sun: A Search for the Origins of Hannukah.** Benjamin Beit-Hallahmi. Pp. 497-510.

Beit-Hallahmi uses a curve attributed to Furlong showing that holidays in all religions tend to cluster around the astronomical events of the vernal and autumnal equinoxes, or of the winter and summer solstices. The major holidays tend to group around the vernal and autumnal equinoxes. Beit-Hallahmi traces the history of the celebration of the sun through holidays that clustered around the winter solstice. Both Hannukah and Christmas are relatively recent arrivals in this group; both have lights as important parts of the ritual. Both are also seen as part of the attempt, as people, societies, and their religions changed, to move from human sacrifice to animal sacrifice to symbolic sacrifice, as represented by the burning candle.

HOWARD F. STOCK

**The Psychoanalytic Review.** LXIV, 1977.

**Thomas Aquinas and Modern Psychology: A Reassessment.** George Mora. Pp. 495-530.

Mora abstracts Aquinas' psychology from his many writings and demonstrates its remarkable resemblance to today's psychology. Aquinas was as learned in Plato and Aristotle as he was in Christianity. Aquinas' psychology originated from the world of intellectual thought in the twelfth century which Aquinas mastered and refined for his own uses. He developed a unified view of man combining mind and body as separate but functionally inseparable entities. He considered data gained from introspection to be valid data. His theories of intellect, memory, feeling, emotion, thought, psychophysiology, pathology of thought and feeling are all explored. Some biographical details are included, and a footnote adds a tantalizing comment that a perusal of Aquinas' life does not illuminate his intellectual concepts, but only leads to contradictions and paradoxes. One could wish for more on this. The paper is extensively footnoted; a bibliography is included in the footnotes.

**The Legitimization of Hippolytus.** Joshua Meyrowitz. Pp. 531-538.

Meyrowitz offers an interpretation of Euripides' play, *Hippolytus*, in which Hippolytus is the central character and the other characters are representatives of fragments of Hippolytus' oedipal fantasies. Hippolytus is chaste and pure—defended against lust. Phaedra, his stepmother, becomes smitten with passionate desire for Hippolytus—a representation of Hippolytus' repressed desire for his

father's wife. Hippolytus denies her and remains pure, but he is nevertheless banished by Theseus—recognition that the lust is (unconsciously) his. Phaedra dies but Hippolytus' guilt remains, and he is punished by death, reconciling with Theseus as he is dying. Meyrowitz elaborates the theme with detail from the play and also offers the general observation that in Greek drama the gods represented the passions (id) and man the tamer and resister of passions (ego).

**Countertransference and the Vicissitudes in an Analyst's Development.** O. Eugene Baum. Pp. 539-550.

Baum follows the life of the developing analyst from the first case in supervision, while still a candidate in personal analysis, through the various stages of progress to training analyst, giving examples of and commenting on the countertransference pitfalls at each stage. Baum uses countertransference in the restricted sense of an interference in the analysis stemming from the analyst's own neurotic processes; he is not concerned in the paper with the process of empathy or "normal countertransference." Examples range from interference due to similarities between the patient's life and the analyst's life, identifications with current figures such as training analyst or an object in the patient's life, current life situations such as the analyst's termination of his or her own analysis, or pre-occupations with major life decisions or nonanalytic activities. Baum advocates beginning the first case after the end of personal analysis to obviate some of these problems, proposing that the student analyst would have a firmer personal identity and superego structure and would be less subject to acting out toward patients, supervisor, and institute. He also advocates that recognized countertransference should be analyzed by the analyst and not shared with the patient, except, very possibly, toward the end of an analysis.

HOWARD F. STOCK

**Israel Annals of Psychiatry and Related Disciplines.** XV, 1977.

The following abstracts appeared in *Israel Annals* and are reprinted with the permission of the journal.

**Some Formal-Logical and Social Specificities of the Obsessive and Paranoid Life Style and Thought-Organization.** G. R. Tamarin. Pp. 1-11.

Outlined are some specificities of obsessive-neurotic and paranoid patients and their modalities of thinking viewed from the standpoint of formal logical operations and socio-ideological stances. The obsessive doubter seems to be trapped in the *hypothetical* premise; thus his thought processes lead to a kind of circular perpetual motion, unresolved by the certainty of a conclusion formulated as a categorical assertion. At best such patients, mobilizing the compulsive isolation mechanism, arrive at a disjunctive classification of reality and a rigid categorization of their social field, its incompatibilities and prohibitions. By contrast, paranoids overcome their basic distrust by the defense of the *absolute* certainty of their delusional idea, which serves as a kind of anti-Archimedean fixed point

assuring stability and a coherent system that is formally logical in its categorical conclusions, albeit built on an erroneous axiom. The quasi self-evident "truth" of the delusion mirrors an element of the basic human condition of potential enmity. A statement which may be judged as of delusional content when formulated in the first person singular is often acclaimed as firm truth when announced as pertaining to the group.

**The Psychologic Determinants of Jewish Identity.** Mortimer Ostow. Pp. 313-335.

Jewish identity is based upon two components. One, the core, is established in the early years of childhood, and much of it may become and remain unconscious. The second, the manifest identity, may vary from time to time in response to external circumstances and the individual's current psychic state. The unconscious core of Jewish identity is established by identification of the young child with the parents, by his or her need for generational continuity, by sensitivity to the distinction between family and nonfamily, by acceptance of group myths, and by the use of sensitivity to language, names, dress, and ritual as a means of establishing identification with family and community. Manifest Jewish identity is determined by the operation of several influences upon core identity. These include the vicissitudes of adolescence, adolescent need for continuity, adolescent need for and fear of commitment, the pluralistic American social environment, the problems of regulation of self-esteem, and the changes of outlook and social expectation after the first two decades of life. On the current American scene, the core identity offered to Jewish children is attenuated in several respects, but not critically so. While one is distressed by obvious problems in Jewish identity exhibited by many deviant young people, their problems should not be confused with the situation prevailing among more wholesome adolescents.

**Dream Translation.** Milton Kramer and Thomas Roth. Pp. 336-351.

Careful examination of only the manifest dream by the psychotherapist is useful in understanding the patient. An example of the methodology is presented. A discussion of the theoretical and experimental background for all work with dreams and for this particular approach is reviewed. Specific guidelines to assist the dream translator are provided, and the method is contrasted with that of psychoanalytic dream interpretation.

**Humor as a "Courage Mechanism."** Masha Mishkinsky. Pp. 352-363.

In this study humor is presented as a device for contending with unpleasant aspects of reality. Humor is defined by the author as the attitude which allows people to modify concepts and beliefs, situations and objects, and to reorganize their meaning on the spur of the moment and in more than one dimension. This attitude, with its polydimensional elements, includes surprise and criticism of what is seen, heard, or done and induces feelings of satisfaction and amusement, expressed in smiling or laughter. Such an attitude depends upon the capacity of the individual to depart from customary or automatic interpretations of stimuli and to interpret them in a novel manner. In different sections of this study,



various elements of humor are discussed, such as the intellectual component (creative thinking) and the emotional component (the convergence of sadness and amusement and its motoric effect—laughter). Humor is presented as a “courage mechanism,” on the model of a “defense mechanism.” The similarity lies in the fact that humor, like any defense mechanism, serves as a weapon in daily conflicts. The difference resides in the fact that humor is based on cognitive elements and neither rejects nor ignores the demands of reality. Humor merely shifts the point of view and illuminates the absurd or paradoxical elements of a given situation. Therefore, humor, unlike a defense mechanism, makes no use of any pathogenic constituents, according to the author.

**The Messianic Psychotic Patient.** Leon Perez. Pp. 364-374.

This clinical study is based on data from psychotic patients with delusions characterized by the belief that they have been elected by a superior power for the execution of a special task for which they have been endowed with supernatural powers. This task is almost always redemptive in nature and has two main objectives: the attainment of universal peace (especially between Arabs and Jews) and the resurrection of the dead. Because of these characteristics, this type of psychotic patient has been called the “messianic patient.” A comparison was made between fifty-seven Jewish patients and twenty Arab patients in relation to the delusional content of the psychotic picture. It was found that neither Jewish patients nor Arab Muslim patients identify with God. The author maintains that this phenomenon may be explained by the common cultural-religious basis, which does not include the transformation of God into man. The psychosis of these messianic patients does not transgress the boundaries of the religious-cultural basis, unless the identity of the patient is profoundly deteriorated.

**Journal of Psycholinguistic Research.** VI, 1977.

The following abstracts from the *Journal of Psycholinguistic Research* are published with the permission of the journal.

**Parent and Sibling Comprehension of Children's Speech.** Richard M. Weist and Betty Kruppe. Pp. 49-58.

In this research, the capacity of parents and siblings to understand the speech of children in early phases of language development was investigated. The utterances of young children were videotape-recorded and presented to family members and to nonparent and nonsibling controls. Family members showed a comprehension advantage over the appropriate control groups.

**The Symbolic Implications of Vowels and of Their Orthographic Representations in Two Natural Languages.** Asher Koriat and Ilia Levy. Pp. 93-103.

Ninety-two Hebrew-speaking subjects judged the magnitude, brightness, and hardness symbolism of orthographic characters designating five vowel phonemes

in Hindi and in Japanese. For both languages and all three symbolic dimensions, the figural symbolism of the orthographic characters was found to replicate very closely the sound symbolism of their phonemic referents. The ranking of the five vowel characters in order of increasing magnitude and decreasing brightness and hardness was as follows: i, e, a, u, o. The results were interpreted to suggest that sound patterns and visual patterns tend to carry cross-culturally consistent connotations and that the symbolic implications of sounds have been embodied in the pattern of orthographic characters in natural languages.

**From Object to Image to Object.** Harwood Fisher. Pp. 105-143.

Images are mental representations accommodated by grammatical structures. These structures order sensory input of information and provide for articulated ways of expressing motor sequences associated with images. The psychological process of perception is reflected in the development of paradigmatic structures. The psychological process of action (behavior and its mental representations) is reflected in the development of syntagmatic structures. Forming and expressing imagery requires both paradigmatic and syntagmatic structuring. The former relates to logical issues of identity of objects and to the formation of concepts. The latter relates to the solution of psychological questions of causality through articulation of grammatical roles in sentences. Two issues affecting the formation of a model to account for imagery are examined: (1) the tendency to explain imagery as a result of motor sequences and to utilize performance grammar; and (2) the impact of ontogenesis on social processes affecting the logical and psychological concerns facing the person at different stages of development. The grammar of imagery is seen as broader than one of performance.

**The Development of Syntactic Complexity.** Andrya L. H. Ramer. Pp. 145-161.

This longitudinal investigation examined the developmental sequence of syntactic acquisition in seven children during the early syntactic period. The collected corpora were analyzed according to a hypothesized simplicity-complexity dimension based on the number of grammatical relations produced and the expansion of these relations. The hypothesized simplicity-complexity dimension was largely upheld and specified a sequence of acquisition which was observed in the data from all children. The application of this dimension, based on the basic grammatical relations, examined developing syntactic complexity independently of but consonant with adult linguistic descriptions. The syntactic constructions were also analyzed according to the semantic categories expressed. The semantic analysis revealed generalized developmental trends.

**Processes and Products of Imitation: Additional Evidence That Imitation is Progressive.** Ernst L. Moerk. Pp. 187-202.

The spontaneous verbal interactions of two children and their babysitter were recorded over the period of half a year. The children were males from middle-class backgrounds and two years old at the beginning of the observation period. Imitated utterances were found to surpass quantitatively spontaneous ones on the

dimensions of grammatical and semantic complexity. With few exceptions, new structures appeared first in imitative utterances and only later in spontaneous ones. Both the higher complexity and the prior appearance of new constructions in imitative utterances suggest that imitation fulfilled a progressive function for the observed children.

**The Conceptual Structure of Aphasic and Schizophrenic Patients in a Nonverbal Sorting Task.** Stephanie Kelter, et al. Pp. 279-303.

Hierarchical and overlapping cluster methods were applied to the sortings of aphasic, nonaphasic brain-damaged, schizophrenic, and normal subjects presented with thirty pictures of animals. The hierarchical structure solutions were most diffuse for the schizophrenics and the fluent aphasics. The structure for the nonfluent aphasics showed more clarity, but was also deviant from the structures of the normals and the brain-damaged without aphasia. Fluent aphasics but not nonfluent aphasics tended to sort pictures which they could not name into smaller groups. For the nonfluent aphasics, there was a significant correlation between the commonality of the sortings and the severity of aphasic disturbances as measured by the Token Test. The relationship between conceptual disorganization and language impairment seems to be functionally different for fluent and nonfluent aphasics.

**Nonverbal Measurement of Affect: The Graphic Differential.** Patrice L. French. Pp. 337-347.

The measurement of affective meaning . . . is easily accomplished via the semantic differential. However, the verbal nature of this instrument prevents its use with many subject groups in which the measurement of affective meaning would be most interesting: members of illiterate cultures, verbally damaged individuals such as anomic aphasics and thought-disordered schizophrenics, and children younger than six years. For these purposes, the present study describes the development of a nonverbal alternative to the semantic differential and assesses the statistical comparability of scores resulting from the use of the two instruments.

**Archives of General Psychiatry.** XXXV, 1978.

The following abstracts appeared in *Archives of General Psychiatry* and are reprinted with the permission of the publisher.

**Psychologic Status of Community Residents Along Major Demographic Dimensions.** Frederic W. Ilfeld, Jr. Pp. 716-724.

In a 1972 Chicago area survey of 2,299 adult community residents the prevalence of several psychologic measures were outlined along major demographic dimensions. Measures of psychologic status included a psychiatric symptom index, number of psychosomatic disorders, recent use of psychoactive drugs, and

indexes of self-esteem and of self-efficiency. Results for psychiatric symptomatology showed it to be decidedly higher among women, those in the lowest socioeconomic level, and those who are separated from their spouses. Blacks and whites showed no differences in symptomatology. Using multiple regression analysis, the combined effects of sex, age, marital status, and income accounted for 7% of the total variance of psychiatric symptoms. In like manner, the prevalence of the other four psychologic characteristics has been viewed in the context of major demographic variables, with each showing a specific pattern of relationships.

**The Nosological Status of Neurotic Depression. A Prospective Three- to Four-Year Follow-up Examination in Light of the Primary-Secondary and Unipolar-Bipolar Dichotomies.** Hagop S. Akiskal, et al. Pp. 756-766.

One hundred patients with "mild" depressive states, variously referred to as "situational," "reactive," or "neurotic," were studied. During a three- to four-year prospective follow-up, 4% had developed bipolar I, 14% bipolar II, and 22% unipolar disorders with predominantly favorable social outcome. Most of the remainder were suffering from nonaffective disorders; in this group, intermittent depressive symptomatology followed a protracted course (paralleling the underlying disorder) with generally unfavorable outcome. Irrespective of diagnostic subtype, a "characterological" component occurring in 24% of the total sample appeared to predict unfavorable prognosis, including three suicides. The diagnostic use of the concept of neurotic depression may no longer be clinically meaningful, since it lacks sufficient phenomenological characterizations and refers to a heterogeneous group of disorders. The data suggest the merits of a biaxial approach to the nosology of depressive disorders whereby phenomenologically based affective diagnoses are qualified as to the presence or absence of character disorder.

**Psychiatric Disorder, Hospital Admission, and Season.** Michael R. Eastwood and Susan Stiasny. Pp. 769-771.

Psychiatric disorder has long been considered to have seasonal variation. The studies to date have frequently suffered from small samples and imprecise terminology, and the results have been inconclusive. This study has attempted to overcome these difficulties by examining hospital admissions to all facilities in the province of Ontario for a six-year period, with each year carefully divided into seasons. Statistically significant seasonal variation, with peaks in the spring and fall, was found overall for neurotic and endogenous depression. Alcoholism also showed a spring peak. No other diagnoses, overall, showed seasonality, although personality disorders, drug addictions, and transient situational disturbances exhibited trends similar to neurotic depression for certain age and sex groups. The findings are discussed in terms of their clinical and research significance.

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**Research Diagnostic Criteria. Rationale and Reliability.** Robert L. Spitzer; Jean Endicott; Eli Robins. Pp. 773-782.

A crucial problem in psychiatry, affecting clinical work as well as research, is the generally low reliability of current psychiatric diagnostic procedures. This article describes the development and initial reliability studies of a set of specific diagnostic criteria for a selected group of functional psychiatric disorders, the Research Diagnostic Criteria (RDC). The RDC are being widely used to study a variety of research issues, particularly those related to genetics, psychobiology of selected mental disorders, and treatment outcome. The data presented here indicate high reliability for diagnostic judgments that use these criteria.

**The Concept of Prevention in Psychiatry. A Re-examination.** David A. Adler; Daniel J. Levinson; Boris M. Astrachan. Pp. 786-789.

Current concepts of prevention are examined and a new approach offered. Prevention has different meanings and functions in the four major task areas of psychiatry: (1) medical tasks, (2) rehabilitative tasks, (3) social control tasks, and (4) humanistic tasks. Constructs of primary and secondary prevention are most useful in the medical task area. However, efforts at primary prevention of mental illness can have only limited effectiveness when we know so little about etiology. Secondary prevention is central to the medical caring tasks, where early diagnosis and treatment may lead to successful outcome. Tertiary prevention of disease and primary prevention of developmental defect are the work of the rehabilitative task area. The application of models of prevention in the social control and humanistic task areas has led to serious confusion.

## Meetings of the New York Psychoanalytic Society

James H. Spencer & Winfred Overholser

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## NOTES

### MEETINGS OF THE NEW YORK PSYCHOANALYTIC SOCIETY

March 14, 1978. THE PROBLEM OF CONFIRMATION IN CLINICAL PSYCHOANALYSIS.  
Benjamin B. Rubinstein, M.D.

Dr. Rubinstein proposed to demonstrate that psychoanalysis as a cognitive investigative method is similar to other scientific disciplines in certain respects. Scientific hypotheses characteristically contain theoretical terms referring to constructs which are not directly observable. Hypotheses are confirmed by deriving predictions from these constructs which can be tested by experiment or by observation of nature. In some instances they are confirmed by postdiction, as in the case of variation and selection in the theory of evolution. Similarly, both prediction and postdiction are used to confirm psychoanalytic hypotheses. When analysts posit unconscious motives, they are forming a hypothesis to explain observations they have made. The motive itself is not observable, but the analyst expects that, if the motive is present, events which qualify as its derivatives will occur. This expectation constitutes an implicit prediction; subsequent observation of such events constitutes confirmation of the hypothesis. Psychoanalytic theorists have usually stressed postdiction, either of phase-specific events, such as those that might have contributed to an obsessional neurosis, or of more general occurrences, as in the assumption that a male patient with an unconscious hatred of his father felt rejected by the father during childhood and was thus unable to emulate him. It is important to note that psychoanalysts predict or postdict that one or more of a *class of events* will occur or has occurred, not a particular event. The theory of evolution also postdicts one or more of a class of forms; it does not state that remnants of a particular animal will be found in the fossil record.

In order to confirm hypotheses about unconscious motives, analysts must assume that there are processes which link them to the predicted derivatives. Traditional theory assumes the existence of freely mobile psychic energy which continually presses for discharge. According to Dr. Rubinstein, if psychoanalysis is to continue as an investigative science, it must replace the energetic hypothesis with something more compatible with current understanding of physiology.

DISCUSSION: Dr. Theodore Shapiro noted that Dr. Rubinstein avoided the problems inherent in predicting particular events by requiring only the confirmation of representatives of a class of events, which makes the rules of confirmation less stringent. Analysts, however, must limit the universe of acceptable derivatives if confirmation is to depend upon the usual laws of probability. He suggested that what Dr. Rubinstein considered causal relationships might better be viewed as empirical entailments. With regard to postdiction, Dr. Shapiro felt that analysts have a reconstructive bias which leads to the assumption that a past event has caused a present derivative. But the data may reflect contingent simultaneous

psychological events, parts of a constellation, rather than parts of a causal sequence. In Dr. Leo Spiegel's opinion, Dr. Rubinstein had effectively demonstrated that psychoanalysis has a place among the sciences, even though psychoanalytic hypotheses must be confirmed within a much broader range of probability than exists for the physical sciences. Dr. Rubinstein's approach provides a corrective to the unhealthy narcissism which allows theories to flourish unchecked by confirmation. Dr. Spiegel expressed disagreement, however, with the idea that analysts must turn to criteria from other disciplines, such as philosophy or biology. Each science must develop concepts which are determined by its own unique data. Thus the concept of psychic energy may still be useful and should be rejected only if it is unsatisfactory to psychoanalysis, not because it is incompatible with other disciplines.

JAMES H. SPENCER

April 25, 1978. PSYCHOANALYTIC CONSIDERATIONS OF BORDERLINE STATES—REPORT OF THE KRIS STUDY GROUP, 1973-1977. Martin S. Willick, M.D., Chairman.

Dr. Martin Willick, summarizing the Kris Study Group's deliberations and conclusions, condensed the scope of the Group's inquiry into the following questions. 1) Does "borderline" define a specific diagnostic entity, or does it refer to a supraordinate group of patients who are more severely disturbed than neurotics but not as impaired as psychotic patients? In either case, can we describe the features common to this group that justify our distinguishing them from patients with other pathological conditions? 2) Can we come to a conclusion about etiology which relates to genetic, dynamic, economic, and developmental considerations? Are there particular kinds of conflicts involved or a particular developmental period that is of crucial importance? 3) Which ego functions are impaired in borderline states? Can we specify the significant pathology interfering with object relations, and can we describe defensive operations in these patients? 4) Can patients who are regarded as borderline be treated by traditional psychoanalysis, and what is the nature of the transference established by such patients during treatment? 5) Is there a general consensus in the literature about the specific attributes of borderline patients, and do these attributes coincide with those found in the patients surveyed by the Study Group? How do its findings compare with those of Dr. Otto Kernberg, who has written about borderline states in the most comprehensive, sophisticated, and careful way?

Dr. Willick indicated that the Study Group responded to these questions as follows:

1) The term borderline does *not* refer to a specific diagnostic entity, whether viewed from a psychiatric or a psychoanalytic perspective. It may be loosely applied to a group of patients who, although not psychotic, are severely disturbed. What unites them are major disturbances in ego functions and a marked but nonspecific disturbance in object relations.

2) Because of the wide variety of pathological phenomena which is observed in such a diverse group of patients, the Study Group was unable to identify



specific etiological determinants. There was no reason to believe that constitutional factors play a particularly important role, but pregenital and phallic-oedipal trauma must be significant. It was not possible to define a particular developmental period or a specific kind of conflict which applies to all of these patients.

3) A number of ego functions may be found to be impaired to some degree, many of them becoming involved in conflict causing regression. These include reality testing, sense of reality, perception, judgment, and various aspects of the synthetic function. There is a greater degree of impairment of the entire ego organization or of ego integration. Object relations, which show a heightened ambivalence and a greater fusion of libidinal and aggressive drive expression, are more infantile in general and are characterized by a greater degree of narcissism. The defenses used by such patients are similar to those used by neurotics, but they are quantitatively different in their pervasiveness, their association with impairments of other ego functions, their instability on the one hand and their rigidity on the other.

4) Some borderline patients can be treated by psychoanalysis; others cannot. Even a careful evaluation may not be sufficient, and a trial analysis may be appropriate. Once in treatment, their transference reactions show the same kind of pathology as do their relationships in general: transference feelings are more immediate and stormy or are so strongly defended against as to appear non-existent.

5) There is, as yet, no general consensus in the literature about the specific attributes of borderline patients. The Study Group felt that at the present time the great variety of clinical phenomena exhibited by these patients cannot be organized in such a specific way as attempted by Dr. Kernberg in his comprehensive object relations theory.

DISCUSSION: Dr. Max Stern expressed the view that the role of preoedipal trauma in the etiology of borderline states was not sufficiently emphasized. Dr. Bernard Brodsky raised questions concerning possible qualitative differences in transference and defenses in borderline patients and asked whether evidence of preoedipal traumata might not be more difficult to discern rather than being of less importance in these patients. Various panelists offered responses which acknowledged the similarity to psychotic phenomena while stressing the transient nature of many of the findings noted. In addition, the regressive nature of the clinical features and indications that gradations of disturbance were involved were also cited. Dr. Willick, responding to Dr. Charles McGann's question about countertransference problems, said that in the analysis of borderline persons, analysts experience a greater degree of confusion, helplessness, and hopelessness than with neurotic patients. Dr. Leo Stone commented on the Study Group's problems in understanding the concept of "projective identification" and cited as an amplification Bowlby's pointing out that a person in mourning who is warding off depressive affects will often find a lonely, forlorn person who then becomes the object of attention. In responding to Dr. David Milrod's question about early object relations and "splitting," Dr. Willick and Dr. Michael Porder noted that the Group found the concept of "splitting" unnecessary even in cases which

Kernberg had considered similar to the ones he had reported. The Group's opinion was that the phenomena involved could be more readily explained in terms of psychic conflict.

WINFRED OVERHOLSER

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#### MEETING OF THE PSYCHOANALYTIC ASSOCIATION OF NEW YORK

March 21, 1977. PANEL DISCUSSION: TERMINATION IN CHILD AND ADULT ANALYSIS.  
Samuel Abrams, M.D., Joseph T. Coltrera, M.D., and Stephen K. Firestein, M.D.

Dr. Samuel Abrams opened his presentation to the Panel with a clinical illustration concerning the termination phase of the analysis of an eleven-year-old boy. The patient was a worried, self-assaultive child, whose parents had been divorced when he was five. He had been exposed to the parents' bedroom quarrelling to which he had reacted with violent, murderous impulses, subsequently disavowed and forgotten. In addition, his curiosity and fantasies about his parents' sexual relations had also been denied. After a date for termination had been set and accepted by the parents, an illuminating dream was presented and worked on by the child and his analyst with extremely productive and integrating results. Dr. Abrams cited this experience as a demonstration of the belief that the development and resolution of the transference neurosis was not a reliable sign of the arrival of the termination phase in child analysis. He suggested as a more useful and applicable approach the examination of four key questions. 1) Are the dynamic issues engaged, oedipal matters as well as pre-oedipal? 2) Have specific drive derivatives become manifest? 3) Has there been psychic restructuring, i.e., more appropriate defenses established? 4) Has the resolution of past conflicts found a more fortunate pathway? Without the satisfaction of these criteria, the analysis should be considered interrupted rather than terminated; indeed, it should be termed analytically oriented therapy rather than analysis. Dr. Abrams concluded his presentation with a discussion of technical procedures involved in the setting of a final date for termination.

Dr. Joseph Coltrera discussed termination in adult analysis, with its focus on the regressive pressures which facilitate the emergence of the transference neurosis. Noting the inappropriateness of the technical approaches involved in adult analysis in the instance of dealing with the frail autonomies of a child's psychic structure, he felt the criteria for satisfactory progress cited by Dr. Abrams could profitably be applied to the analysis of the increasing numbers of patients entering analysis who do not form a classical transference neurosis. Just as termination in a child analysis may be made with the clinical reservation that the child may return for more analytic work, so the work with narcissistic or borderline patients may include the hope that such patients will return in the future for more analytic work, particularly in unresolved transferences. In the case of the child it might be said that the analyst often has a stabilizing role, aiding the patient in dealing with instinctualized developmental phase pressures, rather than concen-

trating on the goal of replacing the overidealization of the analyst with more realistic feelings.

Dr. Stephen K. Firestein spoke of the difficulty encountered in knowing when a transference neurosis is fully developed other than retrospectively, i.e., after termination. He noted that developmental considerations, so paramount in dealing with a child, also play a part in adult life, such as the challenge of parenthood. His discussion stressed similarities between termination problems in child and adult analyses, including the need to deal with negative transference factors in both areas.

BERNARD HOFFMAN

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The Thirty-Seventh Annual Meeting of the AMERICAN PSYCHOSOMATIC SOCIETY will be held March 27-30, 1980, at the Barbizon Plaza Hotel, New York City. For further information, contact: Robert Ader, Ph.D., Chairman, Program Committee, 265 Nassau Road, Roosevelt, N.Y. 11575.

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The SEVENTH INTERNATIONAL CONGRESS OF GROUP PSYCHOTHERAPY will be held August 3-8, 1980, in Copenhagen, Denmark. For information about participation, registration, and travel, contact: Jay W. Fidler, M.D., RD #1, Old York Road, Flemington, N.J. 08822.

## Name Index

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