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To cite this article: Anna Maenchen (1985) Anna Freud: The Vienna years, The Psychoanalytic Quarterly, 54:4, 523-536, DOI: [10.1080/21674086.1985.11927118](https://doi.org/10.1080/21674086.1985.11927118)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927118>



Published online: 28 Nov 2017.



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ANNA FREUD: THE VIENNA YEARS

BY ANNA MAENCHEN, PH.D.

This paper, which is largely drawn from personal recollections, provides a brief chronicle of Anna Freud's life, beginning with her early family years and extending to her professional contributions to the field of psychoanalysis. The role of continuity in the practice and experience of psychoanalysis is explored within the framework of theoretical models configured by Anna Freud. The consistent development of her career at a rapid pace provides a model for the promotion of good theory through useful and relevant work.

INTRODUCTION

Anna Freud, the youngest of Sigmund Freud's six children, was the only one to follow in his footsteps. As his co-worker, she helped him to develop and extend his ideas. As an analyst and theoretician in her own right, she added enormous depth and knowledge to our profession. In this paper I will look at some of the early influences on Anna Freud and her work and at some of her contributions. This will be set in the framework of my own recollections of psychoanalysis and its development in Vienna from 1920 to 1938. Much has been spoken and written on Anna Freud's work. One cannot avoid repetition. Neither can one exhaust the subject. The approach has to be either biographical or that of evaluation of the great contributions. I shall try to combine both.

I first met Anna Freud in 1921 or 1922—more than sixty years ago, when I started my personal analysis with her. I was a student at the University of Vienna, taking psychology, and

Presented at the Anna Freud Memorial Tribute Meeting of the Regional Council of Psychoanalytic Societies of Greater New York, September 22, 1984.

historically, this was a revolutionary time. Three empires fell, and the youth inevitably were caught up in this movement. Siegfried Bernfeld gave courses on psychoanalysis for students and teachers, not at the University, where it was taboo, but in a dilapidated house in Vienna. Psychoanalysis was a revelation to our group, for this was a *revolution in thought*. No wonder that the lectures at the University became boring in comparison! (Bernfeld was the best speaker I knew; he was jokingly called the Caruso of the psychoanalytic movement.)

It was Bernfeld who referred me to Anna Freud. At that time I was twenty-two; Anna Freud was twenty-nine, but because of the power of transference and her already significant achievements, she seemed middle-aged to me.

After two years I interrupted my analysis, to resume it later on. I got my Ph.D. degree when I was twenty-three, got married to an orientalist at age twenty-four, went traveling with him, and then stayed with our son for three years. I picked up my training again, this time in Berlin (seminars and supervision), where my husband got his first professorship. (Berlin had a better organized institute than Vienna. It even had a business-like brochure which included a "seminar on perversions—for the advanced.") We moved back to Vienna when the Nazis came to power in 1933. Anna Freud was in Berlin often to visit the psychoanalytic sanatorium (Dr. Simmel's "*Tegel*") where Freud went for cancer surgery or to recuperate.

The time from 1933 to 1938 in Vienna was a most *exciting* one. Anna Freud had been chairperson of the Psychoanalytic Society from the time she was twenty-six. She was working on her book, *The Ego and the Mechanisms of Defence* (1936) and we, a small group around her, presented our child analytic cases in her weekly evening seminars held in Freud's waiting room, shared by Anna Freud. We discussed our cases, looking everywhere—under the table, practically—for new mechanisms of defense. I remember the small crowded waiting room where in those days the gallant young men had to stand. Who were they? Redl, Erikson, and others. We were absorbed in publications of new findings. After a seminar, Edith Buxbaum and I continued

talking on quiet streets from Freud's house to my house, then to hers, and again to mine, still discussing.

Some writers or speakers emphasize Anna Freud's role as a "conservator" of "orthodox" Freudian ideas. This is so, of course, but Anna Freud as an innovator and developer of *new* theories seems to me to be more important. Her capacity for work and the sheer amount of it is incredible. There was rarely a year with only one publication; often there were up to ten publications.

The continuity of her work is remarkable. By 1938 she had taken her rightful place not only in child analysis but in developmental psychology in general. From the very start the whole mental health field benefitted from her carefully researched work, and to look at her simply as the most important contributor to child analysis is too limited.

I disagree with Ronald Besser's (1976) view that only after immigration to London did Anna Freud's work become "specifically her own." London was not an "English exile" for her, but a logical *continuation* of what she had begun in Vienna. She had become a truly international figure long before then. I agree with Raymond Dyer (1983) that among the three prominent child analysts (Anna Freud, Berta Bornstein, and Melanie Klein), "Anna Freud's work is the most comprehensive, psychologically elegant, and scientifically enduring of the three" (p. xv).

For the purposes of this paper I have referred to the book, *Her Father's Daughter: The Work of Anna Freud* by Raymond Dyer (1983), for which I and other early analysts answered questionnaires and contributed information.

EARLY YEARS

How much biographical data do we need? Most of it is known. Anna Freud was born in Vienna on December 3, 1895, and died in London on October 9, 1982. The Freud family home in Vienna remained Bergasse 19 until emigration in 1938. This

house still exists as the Freud Museum and a much used, working library.

The first historical notation we have of Anna Freud is an announcement of her birth in a letter to Fliess (Freud, 1887-1902, p. 136). Freud mentioned her the second time (as an eighteen-month-old child) in *The Interpretation of Dreams* (1900), published when Anna was four years old. *Three Essays on the Theory of Sexuality* was published in 1905 when she was nine or ten. She thought that it was during this period of time that child analysis was born. It was revised, of course, and added to over the next fifty years by herself and other analysts, drawing upon the observations based on the reconstructions in analyses of adult patients by Freud following his work with Charcot.

And the upbringing in Freud's family? It was "progressive," one could say, for those times; lenient, liberal, but also with discipline and punctuality, qualities that stayed with Anna Freud for the rest of her life.

Throughout her childhood little Anna showed an interest in her father's work. By the age of nine or ten she was reading psychoanalytic literature (her close friends were Marianne Kris and Anny Katan) and listening to the adult dinner conversations between her father and Jung, Ferenczi, Ernest Jones, and other notable analysts of that time. When she was ten or eleven, she embarked on a project to improve her English so that she could more fully understand these discussions.

During her adolescence Anna Freud attended the Cottage Lyceum in Vienna, where she later taught for five years. Her work during this period brought her closer to psychoanalysis and deepened her understanding of the field. The foundation of her later brilliant career as an analyst of children and adults, as scholar and innovator, was set during this time.

She also studied in the psychiatric clinic of the Vienna Medical School. In 1922 she presented her first paper, "Beating Fantasies and Daydreams," to the Vienna Psychoanalytic Society (Dyer, 1983, p. 270). She became a member and training analyst

at the age of twenty-six and was chairman of this society from 1925 until leaving Vienna with the family in 1938.

On March 11, 1938, Hitler's Nazis occupied Austria. From that day there was worry: Would Freud be arrested? It did not occur to most of us that we should leave immediately.

On the day the Nazis came to arrest Freud I was working with Anna Freud in her study, arranging the exodus of analysts who were endangered because they were Socialists or Jews or both. As I left, I saw uniformed S.S. men walking back and forth in front of the house, and I ran to a phone to warn Anna Freud. I also saw a diplomatic car with a chauffeur sitting in front and learned later that Marie Bonaparte had arranged for this chauffeur to go into action the minute the Nazis entered the Freud home. The chauffeur notified the American ambassador and the University's Chief of Psychiatry, who appeared on the scene right away. During the Nazi search of the Freud house, they found Freud's safe with approximately 6,000 Austrian shillings in it (about \$840.00), which they took (Jones, 1957, p. 219). Freud's comment was, "How strange. I never got that much for one visit." Freud was not arrested, but Anna Freud was interrogated for hours, mostly about the Psychoanalytic Publishing House, and then released. Several weeks later the Freud family left for London.

EARLY WORK

Beginning at age nineteen, and for five years thereafter, Anna Freud was an elementary school teacher. She had said about her work that starting out as an elementary school teacher, she changed to the field of analysis, specifically child analysis. From then on, she moved constantly back and forth, from the theoretical study of these problems to their practical application. She agreed that one had to have special luck to do this and that most people do not possess this. Her analytic training was "broadly based and highly stimulating." She had as teachers

some of the best medical psychologists of the day. Anna felt that she was among the first who had been given a key to the understanding of human behavior and its aberrations and that apart from suggestion and hypnosis her group had no rivals in the realm of mental treatment (Lustman, 1967).

Anna Freud's professional debut came shortly after Freud had published his tripartite model of the mind. This piece provided fertile ground from which Anna's work on the ego could progress. When she became an analyst in 1922, the period Ernest Jones later termed "the new period of the ego" had begun.

April 1923 marked the onset of Freud's ultimately terminal illness. When she got news of the malignancy, Anna became her father's nurse; she remained so until his death in 1939. It is important to note that Freud asked that "no sentiment be displayed." He later noted Anna's complete success with this request.

Between 1923 and 1926, Anna Freud conducted analyses of ten children between six and eleven years of age. These became her ten famous cases, and they allowed her to become fully competent in her developed techniques which set the clinical basis for her later theoretical formulations.

Along with A. J. Storfer, she edited the three volumes of Freud's *Gesammelte Schriften*, which, when published, drew attention to Anna Freud in the psychoanalytic and academic worlds. She continued to evolve new technical views and insights, and three years later, expanded her presentations in regular weekly seminars, to include a series of lectures given for general audiences of the Vienna Psychoanalytic Society.

In 1924, the nucleus of the Vienna School of Child Analysis was formed, and she was also appointed to the all-important training committee of the Vienna Psychoanalytic Society. She was twenty-eight years old. This was the first formal position held by her within the Society. She later served as supervising analyst to many of the early child analysts, including Editha Sterba, Jenny Waelder-Hall, Annie Reich, Marianne Kris, and later on myself.

As Anna began to assume more responsibilities in the Society,

she also assisted her father more and more with correspondence and professorial affairs. She read his papers at congresses and carried his greetings when Freud was unable to attend in person.

During this period, she analyzed a six-year-old obsessional girl, and salient features from this analysis illustrate the psychoanalytic ideas she was working with: the relative dependence of that part of the child's personality on the external adult figures in his or her environment; the relative weakness of the child's superego; the dual role of the therapist-educator who has simultaneously "to allow and forbid, loosen and bind again." From here she continued her work and her integrative role in the continuing development of psychoanalytic ego psychology.

These were exciting years in the development of psychoanalysis, and the pace of the work was relentless. It was not unusual for seminars to continue well into the early hours of the morning. Anna once smilingly feigned ignorance of the meaning of sleep (Sterba, 1982).

I remember that once she and I had a discussion about working *all* the time—evenings, weekends—as she did. But when she read aloud to my husband and myself the pages she was writing about concentration camp children, the work was simply beautiful.

I had the good fortune to begin my association with Anna Freud with my personal analysis. This association continued in a working relationship and friendship that lasted over sixty years. Her letters to me are now safely housed in the Freud Archives of the Library of Congress.

CONTRIBUTIONS

Anna Freud's major contributions to psychoanalysis include eight volumes of collected papers. They include discoveries, new methods, and new ways of looking at analytic data. Dr. Seymour Lustman (1967), whose formulations I could not possibly improve upon, has said this in talking about her many and

varied accomplishments:

Her achievements within psychoanalytic theory, technique and research methodology are monumental, and all the more remarkable in that they are so useful to such a diversity of workers from the fields of child development, teacher training, nursery school education, inpatient care, outpatient care, residential care, the law, and child welfare, to name but a few. It would be difficult to exaggerate the substantive importance and seminal force of this body of work (p. 810).

In the area of theory construction and research methodology, although she seldom stated this as her intent, she delineated some of the major obstacles to the development of theory and suggested areas for future growth. Because she so rarely directed her comments exclusively to this area, this aspect of her work has been insufficiently appreciated.

She gave a much needed delineation and order to the problem of organization and hierarchy within an empirical framework of behavior. She emphasized the view that man is an organic whole and as such can be understood only in terms of a hierarchy of organized interrelationship of parts. Anna Freud (1965a) stated the essence of the conceptual problem as follows:

Without doubt we need more for our assessments than . . . selected developmental scales which are valid for isolated parts of the child's personality only, not for its totality. What we are looking for are the basic interactions between id and ego and their various developmental levels, and also age-related sequences of them which, in importance, frequency, and regularity, are comparable to the maturational sequence of libidinal stages or the gradual unfolding of the ego functions . . . whatever level has been reached by any given child in any of these respects represents the results of interaction between drive and ego-supergeo development and their reaction to environmental influences, i.e., between maturation, adaptation, and structuralization (pp. 63-64).

Later, with the concept of developmental lines, she forcefully

reintroduced, as a major focus, organization and hierarchy. It is only out of a systematic categorizing effort that one comes to the conviction that behavior is superstructural and that new concepts are needed to explore their relationship.

How do we evaluate our debt to her? We know that we look and listen differently; our eyes and ears are much sharper. Our concepts are more sophisticated, and we help children, their parents, and adult patients more, less is left to intuition, and more is based on knowledge.

In the historical framework of psychoanalysis, which is a living and developing science, Anna Freud remains a leader. Dr. Lustman has noted the reciprocal relationship in her work between phenomenology and theory construction. This resulted in a model which facilitates the gathering, storing, and assessment of clinical data. This model is important not only for the individual cases but for the crucial step of compilation of many cases. Most significantly, this schema makes it impossible to slip into a naïve oversimplification. The use of the *Profile* she and her co-workers later developed excludes a problem which has characterized the history of psychoanalysis, the question of how we compare cases which are not easy to compare.

The developmental profile schema represents Anna Freud's concern for empirical research. It is an instrument which imposes balance, completeness, and comparability—not only comparability in assessment of factors within an individual case and between cases, but comparability of reliable assessment between analysts, with each other, and in various time periods for the same analyst. In the future, compilation of similar cases, comparison of differing conditions, and likely other uses will develop from the application of the developmental profile.

About this profile, Anna Freud (1965a) said:

What we hope to construct by this laborious method is something of a "collective analytic memory," i.e., a storehouse of analytic material which places at the disposal of the single thinker and author an abundance of facts gathered by many, thereby transcending the narrow confines of individual ex-

perience and extending the possibilities for insightful study, for constructive comparisons between cases, for deductions and generalizations, and finally for extrapolations of theory from clinical therapeutic work (p. x).

What are the factors which promote the formation of good theory? The steadfast work of Anna Freud gives an answer to this question, for her work is useful and relevant. It is useful in the evolution of developmental psychoanalytic theory, moving as it has from the reconstruction of the treatment data of adult pathology to observation of normal and abnormal development in children. Her theorizing is relevant to all who deal with human development. Pediatricians, lawyers, educators, physicians, developmental scientists, as well as psychoanalysts, have turned to her work for guidance.

In the *Profile*, Anna Freud saw how complicated it was to deal theoretically with many factors. She was concerned with presenting a usable organizational system. She was practical, lucid, and able in a simple way to utilize the reciprocal relationship between phenomenology and theory. As she said: "It is serious that the division between theory and practice is widespread. There are many people who work practically with children, but not enough people who have the opportunity to apply their theories or to be taught developmental theory while the practical work with children goes on."

Her approach of alternating practical with theoretical work and combining the two, enabled Anna Freud to pioneer in the development and use of additional research techniques to augment and complement the psychoanalytic method. These extend from the development of child analysis to: the use of observational techniques; the use of the nursery school, the residential care center, the day care center, and the hospital; investigation of the developmental impact of such sensory deprivations as blindness and deafness; the decisions the law is forced to make in the best interests of the child; and the ever

increasing intricacies of conceptualization in data collection, storage and data reduction.

CONCLUSION

In the transmission of values from generation to generation of analysts a great deal is gained. In the transmission of these values, the *continuity* of Anna Freud's work is remarkable.

There is continuity in her work on the difference between neurotic and developmental psychopathology. Borderline, narcissistic, psychosomatic, and psychotic categories were included early in her psychoanalytic thinking. But even then, Anna was skeptical about undoing developmental deficiencies, and she stressed their difference from neurotic symptomatology.

There was continuity in her insistence that this expansion of theory was not only for children's psychopathology, but also for adults. The emphasis was on "developmental evolution." This took us away from the simple idea of a conflict as a normal happening at a certain stage of development, and widened the scope of psychoanalysis.

There is striking continuity:

From the hard-working student at the Cottage Lyceum in Vienna to the hard-working teacher in elementary school (age nineteen to twenty-four) to the teacher of psychoanalysis in Vienna (as the secretary of the Vienna Psychoanalytic Society), London, and world-wide. The area of theory, technique, and application broadened widely.

From co-editor of the *Zeitschrift für psychoanalytische Paedagogik* (where my first article appeared in 1936) to co-editor of the *International, Imago*, and many other journals.

From her interest in the reaction of children to the First World War to her work with bombed-out children in London during the Second. (Few people realize that Hampstead War Nurseries was not the start of Anna Freud's relief work. It was

in Vienna after World War I that she responded to wartime emergencies and started to study the results of deprivations. Hungry children were sent to other countries, and the question of how “outer reality” influences children and at what ages started to interest her then.)

From observation of school children in Vienna to the wide range of observation of normal and pathological development of children.

From her first paper on the psychology of the ego in 1922 to the end of her life, that subject continued to be her main interest.

There is continuity even in the day of the week—Wednesday—when the Vienna Psychoanalytic Society met, to the later Hampstead case conferences!

What about the question that is often raised: Was Anna Freud only her father’s daughter? I do not think so. “Her father’s daughter” was building and constructing foundation blocks for child analysis and developmental psychology at a very early age.

What about the identification with the father? I am not one to “analyze” Anna Freud. Certainly there are strong similarities between father and daughter: the power of the scientific work, the integrity of character as a human being and scientist, the sense of duty—even to the answering of each letter—but is it identification, as Raymond Dyer writes in his book?

There is no doubt that as Anna Freud progressed rapidly in her work, the mutual feeling between father and daughter became much closer. Her father was her teacher. She became his secretary and later, when he became ill, his nurse. But she was also independent very early, as her trip to England in 1914 at the age of eighteen demonstrates. Freud was pleased with his independent daughter’s work from the very beginning. She went beyond; she also got from him the famous ring.

The question of who was first is at times unimportant. Was it Ernest Jones who thought of applying psychoanalysis to education? Was it Anna Freud? Certainly, Bernfeld and Aichhorn were also important in this connection, and Ferenczi be-

longs to this group. But who was first is not so important as that the work continues and that it is expanded in a way that contributes to the transmission of human values.

As a person, Anna Freud was open, friendly, and a good listener. She had the ability to enjoy the good things in life and laugh at a comical situation anywhere, be it in a restaurant or in a case history. She found time for weaving. In her weekend house at Walberswick, she had two looms on which she wove intricate and beautiful textiles. During September, she was usually in South Ireland, where she wrote. Whoever had her as a houseguest found her easy-going, cheerful, unassuming, and very witty. She would sing old Viennese songs with my husband, and I, not knowing Viennese dialect, would feel left out.

When she gave papers (except on tape), she was without notes, but she always prepared carefully. Once, while driving her from Carmel to Berkeley, I listened to her and saw how she constructed a paper. She would say, "This must be the start, and logically this has to follow . . .," like a composer structuring a piece of music.

The real thread of her life, and of this paper, is *continuity*. When I think of the couch in my study, I have to remember a much earlier one, that of the analytic great-great grandmother's, Anna Freud's, sixty years ago. A straight line, I feel, leads back from today to Vienna, Bergasse 19.

From couch to couch. This is the continuity of psychoanalysis in which we work, in which we grow, have problems—a continuity in which we *live*.

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Resistance in Convergent and in Divergent Conflicts

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To cite this article: Anton O. Kris (1985) Resistance in Convergent and in Divergent Conflicts, The Psychoanalytic Quarterly, 54:4, 537-568, DOI: [10.1080/21674086.1985.11927119](https://doi.org/10.1080/21674086.1985.11927119)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927119>



Published online: 28 Nov 2017.



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RESISTANCE IN CONVERGENT AND IN DIVERGENT CONFLICTS

BY ANTON O. KRIS, M.D.

Psychoanalytic theory has limited the term conflict to refer only to convergent conflict, whose elements tend to move toward each other, as in repression. Formulations made from the viewpoint of the method of free association have led the author to favor an expansion in the concept of conflict to include also divergent conflict, whose elements tend to move apart, as in regression-progression and in mourning. A broad range of clinical and theoretical phenomena of psychoanalysis can be accounted for by such a revision in the concept of conflict. Focusing on resistance, this paper provides a historical review and discusses the application of an expanded concept of conflict in the field of psychoanalytic technique.

When psychoanalytic work is formulated from the viewpoint of the method of free association, two distinct patterns of conflict appear. I have called these patterns the conflicts of defense and the conflicts of ambivalence (1982, 1983b, 1984) or, more simply, convergent and divergent conflicts. These conflicts differ in a number of features: the form of opposition, that is, whether the elements converge or diverge; the types of resistance associated with them; the patterns of resolution; and the aspects of insight achieved in their resolution. In this paper I shall focus on the resistances encountered in analyzing these two kinds of conflicts, in order to clarify the implications for technique.

Precirculated and discussed at a meeting of the San Francisco Psychoanalytic Society on February 11, 1985.

There is such a close interconnection between the psychoanalytic concepts of conflict, resistance, analytic work, and insight that it is not possible to speak of one without the others. In psychoanalytic theory, though not always in psychoanalytic practice, these terms are tightly bound not only with one another but with the concept of convergent conflict only. So it is necessary to delineate the ways in which divergent conflicts have been both recognized and ignored in psychoanalysis in order to make a place for them. To put it another way, I have proposed an alteration in the meaning of the term conflict to include divergent opposition, and I shall have to spell out the implications for the aims of psychoanalytic work, for resistance, and for insight in order to show the potential that this conceptual enlargement affords the practicing analyst.

The distinction between convergence and divergence in the elements of conflict (A. O. Kris, 1984), which I shall further discuss and document below, can be illustrated by the difference between a play in football and a tug of war. In football, the two teams are poised facing each other and tend to converge. One team is on offense and aims to carry, pass, or kick the ball forward. The other team is on defense and attempts to prevent forward motion and tries to throw the offense for a loss. This is like the model of repression that Freud used from the beginning (Breuer and Freud, 1893-1895). I shall discuss below its later elaboration in the censorship component of repression (Freud, 1900), in the concept of anticathexis (1915c), and in the concept of defense (1926).

The tug of war is altogether different. Two teams attempt to pull a rope in opposite directions. They pull apart rather than toward each other. Movement is reciprocal and synchronous, so there is no distinction between offense and defense in such divergent conflict. This form of conflict was also part of Freud's concept of repression, from early on. For example, he regarded regression in dreams as the result not only of the censorship but also "of a simultaneous attraction exercised upon the thought by the presence of memories possessing great sensory force" (1900, p. 547). The forces propelling the thought "into

consciousness along the normal path" and this "simultaneous attraction" are in divergent conflict.

Freud added a footnote to this passage in 1914:

In any account of the theory of repression it would have to be laid down that a thought becomes repressed as a result of the combined influence upon it of *two* factors. It is pushed from the one side (by the censorship of the Cs.) and pulled from the other (by the *Ucs.*) . . . (p. 547, n. 2).

In the course of Freud's theoretical revisions, however, sometime between 1914 and 1916 the term repression became exclusively connected with censorship and anticathexis (1915c), and later with repression resistance and defense (1926)—that is, with the concepts of psychic elements in convergent opposition only. The pull of the unconscious and the effects of its later correlate, primal repression (1915b), were blended into resistance of the id (1926) and linked up with the concepts of fixation (1915b), psychical inertia (1915a), and adhesiveness of the libido (1916-1917, 1937)—all implying divergent opposition. I shall consider these theoretical formulations further below.

Divergence and convergence of the elements of conflict seemed to me to describe an essential feature of two patterns of free association when I tried to distinguish the (divergent) conflicts of ambivalence from the (convergent) conflicts of defense (1984). These terms refer both to the patterns and to the inferred determinants (A. O. Kris, 1982) of the associations. To forestall misunderstanding, I shall say at once that my term *conflicts of ambivalence* covers a much wider territory than the most common usage in psychoanalysis of the term *ambivalence*, affection and hostility directed toward the same object. The antithetical pairs in conflicts of ambivalence, as I conceive of them, are not limited to love and hate. They are most easily recognized in the characteristic alternations in the free associations of the adolescent, between such familiar opposites as activity and passivity, homosexual and heterosexual, pregenital and genital sexuality, old objects and new ones, independence

and dependence, autonomy and loss of self, self-control and dissipation, altruism and egotism, spontaneity and regulation, mind and body, fantasy and reality. Each of these pairs may at times be the subject of a sense of either-or, conscious or unconscious.

If one pictures the associations as traveling along a road, divergent conflicts appear as a series of forks that require a painful choice of one direction or the other, with increasing regret for the road not taken. Convergent conflicts appear as the familiar variety of obstacles and prohibitions that lead to detours and, at times, to retreat, with attendant painful affects.

I must warn, here, against the assumption that nothing further is required than to acknowledge that resistance occurs in important intrasystemic conflicts as well as in the familiar intersystemic ones. The view of intrasystemic conflicts must be modified to permit their divergent form, their kind of resistance, and their process of resolution to be taken into account. I shall illustrate these aspects in the later portions of this paper.

A discussion of the way a variety of divergent conflicts have been embedded in psychoanalytic theory from the beginning, along with convergent conflicts, though they have not been viewed as a distinct type of conflict, precedes those sections. It tries to show that the concept of working through can gain in technical precision and power when formulated in relation to the two kinds of conflict. This historical review aims to clarify the relationship of my formulations of two distinct paradigms of conflict to established psychoanalytic theory. It begins by considering the development of the concepts of conflict and resistance in psychoanalysis to demonstrate that they are formulated as convergent opposition only.

RESISTANCE AND CONFLICT IN HISTORICAL PERSPECTIVE

Freud's explicit views on the place of resistance in mental conflict, beginning with his early maxim that "*whatever interrupts the*

progress of analytic work is a resistance" (1900, p. 517), can be represented by a few quotations. In reviewing the history of psychoanalysis in 1914, he wrote:

The theory of repression is the corner-stone on which the whole structure of psycho-analysis rests. It is the most essential part of it; and yet it is nothing but a theoretical formulation of a phenomenon which may be observed as often as one pleases if one undertakes an analysis of a neurotic without resorting to hypnosis. In such cases one comes across a resistance which opposes the work of analysis and in order to frustrate it pleads a failure of memory (1914a, p. 16).

He stated the cardinal precept of psychoanalytic technique in corresponding terms:

By searching for the repression . . . by uncovering the resistances, by pointing out what is repressed, we really succeed in accomplishing our task—that is, in overcoming the resistances, lifting the repression and transforming the unconscious material into conscious (1916-1917, p. 438).

Resistance, as Freud conceived it in these citations, opposes the interpretive lifting of repression and the development of insight. So far as I can tell there was no explicit acknowledgment that henceforth repression would refer only to the push component (convergent conflict) and no longer to the pull component (divergent conflict). Contemporary comments, e.g., 1915b and the 1914 footnote cited above, still include both components in the concept of repression. Resistance, after 1916, referred only to a convergent conflict that reflects the one between the repressing force of anticathexis and the forgotten repressed (e.g., 1916-1917, Chapter XIX; see also Brenner, 1957; A. Freud, 1978, pp. 243, ff.). Fixation and adhesiveness of the libido, "which dislikes leaving objects that it has once cathected" (Freud, 1916-1917, p. 455), were seen as distinct from repression and represented divergent conflict at that time.

Later (1926, pp. 157, ff.), however, when Freud attributed

resistances to all three inner agencies, ego, id, and superego, only three of the five resistances he described (repression resistance, transference resistance, and superego resistance) were pictured in convergent opposition to the analyst's interpretive efforts. He presented resistance from secondary gain in terms unequivocally those of divergent conflict:

The third resistance, though also an ego-resistance [like repression resistance and transference resistance], is of quite a different nature. It proceeds from the *gain from illness* and is based upon an assimilation of the symptom into the ego. . . . It represents an unwillingness to renounce any satisfaction or relief that has been obtained (1926, p. 160).

This resistance, *of quite a different nature* from repression resistance, derives from divergent conflict between competing forms of satisfaction—one found in the symptomatic compromise between drive and defense in illness, the other in an implicit, potentially successful compromise between drive and defense in health.

Freud described resistance of the id as “the dynamic factor which makes a working-through . . . necessary.”

It must be that after the ego-resistance has been removed the power of the compulsion to repeat—the attraction exerted by the unconscious prototypes upon the repressed instinctual process—has still to be overcome. There is nothing to be said against describing this factor as the *resistance of the unconscious* (1926, pp. 159-160).

This resistance was no longer seen as part of repression proper, though it was the successor to the pull component of repression, the representative of divergent conflict. The concept of conflict, however, remained one of convergent opposition only.

These views of resistance and conflict were not altered, I believe, in the most famous of Freud's reformulations of the aims of psychoanalytic work: “Where id was, there ego shall be” (1933, p. 80). Only a few pages earlier, Freud had written: “The whole theory of psycho-analysis is, as you know, in fact built up

on the perception of the resistance offered to us by the patient when we attempt to make his unconscious conscious to him" (p. 68). On the one hand, from 1923 on Freud was at great pains to establish a structural ego concept and to distinguish ego from the quality of consciousness, expanding the aims of psychoanalytic work and the nature of insight at the same time. On the other hand, he described the analytic procedure as an attempt to make the unconscious conscious, thereby abandoning the advances he himself initiated. Gray (1982) has commented on such inconsistencies in Freud's writings and in continuing analytic practice. He relates them to resistances to the implementation of ego psychology. I believe that they are due also to the problem posed by the divergent conflicts.

In his last reconsideration of the developmental origins of the resistances, Freud (1937) implied a model of divergent conflict even more remote from the early push-pull concept of repression.

We come across people, for instance, to whom we should be inclined to attribute a special 'adhesiveness of the libido'. The processes which the treatment sets in motion in them are so much slower than in other people because, apparently, they cannot make up their minds to detach libidinal cathexes from one object and displace them on to another, although we can discover no special reason for this cathectic loyalty (p. 241).

This description implies a separate kind of conflict, one in which there is a difficulty in making a choice between two alternative investments. Freud attributed it to "fundamental conditions in the mental apparatus," however, rather than formulating a distinct paradigm of conflict.

From another angle, the concept of conflict as convergent opposition only was not affected by awareness of love-hate ambivalence. Freud pictured a reaction formation, later (1926) called both an anticathexis or resistance of the ego and a defense, derived from love that maintains the repression of hate. Freud also explicitly opposed the idea of direct *convergent* con-

flict between instinctual processes (e.g., 1916-1917, p. 350; see also Fenichel, 1945, p. 129, and Brenner, 1982, pp. 33, ff.). Divergent conflict between sexual aims, on the other hand, was attributed, without further specification, to bisexuality. For example, "... every human being oscillates all through his life between heterosexual and homosexual feelings, and any frustration or disappointment in the one direction is apt to drive him over into the other" (1911b, p. 46). Nor did Freud formulate conflict within the ego as elements in divergent opposition (1919, 1923, 1927, 1933, 1940, and cited in Jones, 1955, p. 252). All such formulations regularly describe elements in convergent conflict.

So far as I can tell, almost all subsequent psychoanalytic writers have viewed the intrasystemic conflicts as convergent. That is, one side of the conflict displaces the other, excludes the other, or wards the other off (e.g., Hartmann, 1951, p. 146; Anna Freud, 1965, p. 145; Loewenstein, 1972, p. 214; Sandler, 1974; Klein, 1976, p. 170; Kernberg, 1983, p. 248). Earlier (1977, 1982, 1984) I thought, on the contrary, that other writers conceived of intrasystemic conflicts as divergent. I have found Anna Freud's persistent emphasis on intrasystemic conflicts (e.g., 1936, 1965, 1966a & b), especially those between the drives, and her concept of "truly internal" conflict (1965, p. 133) particularly valuable. I now recognize, however, that the *form* of conflict in her concepts remains invariably convergent. Much in the writings I admire most on the process of psychoanalysis (e.g., E. Kris, 1975; Loewald, 1980) has seemed to me so clearly to imply divergent conflict that I did not at first appreciate the inconsistencies between formulations of process in clinical practice and theoretical formulation. I was alerted to my earlier misunderstanding when I recognized in some of the responses to my book, *Free Association* (1982), that resistance in the analysis of intrasystemic conflicts is generally understood not according to available models of divergence but according to the model of repression resistance and convergent opposi-

tion. Other analysts, no matter how flexible their technical approach or how catholic their theoretical tastes, would translate my formulations of divergent conflict, automatically, without their awareness or mine, into convergent conflict. This led me to focus on resistance, here, for clarification.

In an exception to the general rule, divergent conflict has held an important place in the work of Rangell. In 1963 (a and b) and in a series of subsequent publications (see 1971, 1979, 1981), he discussed the distinction

between two different types and meanings of conflict. These are (1) an opposition type, of forces battling against each other, in hostile encounter, and (2) a dilemma type, the need for a choice between competing alternatives (1963b, p. 104).

Unfortunately, this important clarification has gone largely unnoticed and has failed to influence other analysts on those occasions when it has been discussed (Panel, 1963; Brenner, 1982, p. 63). This has been true also for Kubie's (1974) recognition of a "second category of internal conflict," which he did not relate to Rangell's concept:

Freud was right of course in emphasizing the individual's struggle with his conscience. . . . Yet he seemed to underestimate another source of conflict, namely that which arose out of man's frequent struggles to achieve mutually irreconcilable and consequently unattainable identities (p. 352).

To sum up, conflict in psychoanalytic theory, with rare exceptions, regularly implies convergence, and resistance generally means opposition to the resolution of convergent conflict. These observations hold even though some forms of resistance have been described in divergent terms and the relationship between resistance and repression has been placed in the context of the advances in psychoanalytic theory over the course of this century (Stone, 1973; Blum, 1979, 1983; Dewald, 1980; A. Freud, et al., 1981). "Resistance analysis," as Fenichel (1941,

p. 43) put it, "was evolved from interpretation analysis," though Gray (1982) cautions against assuming that the evolution is well established. In an elegant and broadly conceived discussion of psychoanalytic process, Weinshel (1984) notes:

The loosening and undoing of the resistances of repression remain *the* goal, or at least one of the principal goals, of most analysts. . . . The workings of the resistances of the id are even more mysterious (probably because of their close conceptual connection to economic and quantitative factors) and more impervious to our direction and control. It is very difficult—perhaps impossible—to formulate meaningful interpretations dealing with such phenomena as the repetition compulsion, the adhesiveness of the libido, or the channelization of various instinctual discharge patterns (pp. 76-77).

In the sections of this paper that follow, I shall try to show that the recognition of divergent conflict as a separate paradigm, with its own pattern of resolution and aspect of insight, makes it possible to address these sources of resistance more directly with ordinary analytic technique.

DIVERGENT CONFLICTS EMBEDDED IN PSYCHOANALYTIC FORMULATIONS

While explicit psychoanalytic formulations have sharply limited the term conflict to mean convergent conflict only, a number of significant psychoanalytic formulations have implicitly encompassed divergence. I have already illustrated this thesis by demonstrating the model of divergent conflict in the early concept of the pull component of repression, in the later concepts of adhesiveness of the libido, resistance of the id, resistance of secondary gain from illness, and resistance from relative immobility of cathectic attachment, and in the idea of oscillation between heterosexual and homosexual feelings. In this section I shall take up several additional concepts that represent implicit divergent conflict. I shall then show their application in a reformulation of working through.

Regression

The most important example of divergent conflict in psychoanalytic theory occurs in the relationship between regression and development. The essence of regression, whether it be topographical, temporal, or formal (Freud, 1900, p. 548), is the reversal of developmental progression. The close connection between the divergent conflict of progression and regression with the ones already demonstrated (i.e., adhesiveness of the libido, resistance of the id) can be shown by citing Freud's comments on fixation. He links fixation, or psychological inertia (1915a), with primal repression and the pull component of repression (1915b, p. 148), on the one hand, and with regression (1916-1917, p. 341), on the other hand.

In a discussion of her concept of developmental lines, Anna Freud (1965) regarded "regression as a principle of normal development" (p. 93). Though she made the important point that regression in ego development, both normal and pathological, does not represent the influence of fixation (p. 104), the *form* of the relationship between regression and progression, the tension between them, is one of divergent conflict there too, just as it is in libidinal development.

The increased emphasis on the distinction between oedipal and preoedipal organization in the 1920's (Brunswick, 1940; Fliess, 1948, pp. 159, ff.) continued and extended the implications of divergent conflict that were established in Freud's earlier studies on regression in dreams (1900) and in libidinal development (1905). The many clinical applications in recent years of the concept of separation-individuation (Mahler, 1972; Mahler, Pine, and Bergman, 1975), especially the rapprochement phase, may be seen in part as a constructive attempt to deal with some of the phenomena of divergent conflicts without introducing a separate paradigm of conflict.

Pleasure Principle versus Reality Principle

The relationship between the pleasure principle and the reality principle (Freud, 1911a) formulates the potential for

conflict between two alternative paths of expression and satisfaction—a conflict with divergent elements. In addition, the activity of fantasy, which remains at least partially exempt from the developmental progress involved in the establishment of the reality principle, forms the link to the repressed in symptom formation. Under conditions of frustration, Freud concluded, “From what are now unconscious phantasies the libido travels back to their origins in the unconscious—to its own points of fixation” (1916-1917, p. 373). Not only is the relationship between reality principle and pleasure principle manifestly one of divergent conflict, the concept of fantasy connects the tension between them with fixation, which is itself the representative of divergent conflict. Similarly, the tension can be seen as one between progressive and regressive tendencies.

At a still more abstract theoretical level, the distinction between primary process and secondary process (Freud, 1900) can be seen to represent tension between two divergent forms of discharge, expression, and satisfaction (e.g., pp. 603-604). Loewald (1978), in a discussion of language, put it this way:

Primary and secondary process are ideal constructs. Or they may be described as poles between which human mentation moves. I mean this not only in the longitudinal sense of progression from primitive and infantile to civilized and adult mental life and regressions in the opposite direction. Mental activity appears to be characterized by a to and fro between, an interweaving of these modes of mental processes, granted that often one or the other is dominant and more manifestly guiding mentation and that secondary process assumes an increasingly important role on more advanced levels of mentation (pp. 178-179).

Mourning

The psychoanalytic concept of mourning differs from the instances of divergent conflict so far presented. The latter concern the antithetical *elements* in divergent conflict. Mourning, of which I take up only one aspect here, refers not only to

specific elements but also to a *process of resolution* of divergent conflict.

The term mourning expresses a number of different meanings in Freud's writings. Not surprisingly, he linked the state of mourning with fixation: "A perfect model of an affective fixation to something that is past is provided by mourning, which actually involves the most complete alienation from the present and the future" (1916-1917, p. 276).

Freud (1917) described the work of mourning in "Mourning and Melancholia":

Reality-testing has shown that the loved object no longer exists, and it proceeds to demand that all libido shall be withdrawn from its attachments to that object. . . . Normally, respect for reality gains the day. Nevertheless its orders cannot be obeyed at once. They are carried out bit by bit, at great expense of time and cathectic energy, and in the meantime the existence of the object is psychically prolonged. Each single one of the memories and expectations in which the libido is bound to the object is brought up and hypercathected, and detachment of the libido is accomplished in respect of it (pp. 244-245).

Jacobson (1971, p. 82), in a valuable amplification of this passage, described the "inner dichotomy" and the "vacillating attitude" in states of grief.

The form of the process of mourning, that is, the pattern of resolution of the divergent conflict between respect for reality and the reluctance to relinquish a loved one, is different from the pattern in the resolution of convergent conflict. Removal of repression resistance does not have the oscillating form of mourning. Remembering rather than mourning is the aspect of memory in resolution of convergent conflict. In my formulation of conflicts of ambivalence (1982, 1984) as patterns of free association characterized by divergent antithetical pairs, I stressed the significance of a process akin to mourning in their resolution.

I believe that Freud's formulation, just cited, introduced an error in its overstatement of the demands of reality—an error

whose effects continue in psychoanalytic discussions of mourning, as I shall demonstrate below. I believe that reality demands only the acknowledgment that the lost object of one's love is no longer present. It is the present reality of the lost object and the potential for future relationship with the object and the illusion of permanence that must be renounced. The acknowledgment of loss may be painful, but it is not loss; nor is it renunciation of the object. The misunderstanding on the part of the bereaved that mourning means total loss of the relationship contributes to the opposition to mourning in unresolved states of grief and in the incomplete mourning so frequently encountered in psychoanalysis. It is a commonplace of human experience and of clinical observation that mourning leads to reacquisition of freedom to recall the lost object—free of the dread that accompanies the painful reminder of loss prior to mourning—and to form an unambivalent identification based on the relationship with the object.

WORKING THROUGH

Like a number of psychoanalytic concepts, *working through* has been subject to redefinition and reinterpretation since its introduction—even then building on precursors—seventy years ago (Freud, 1914b). At that time Freud's main aim was to distinguish between the analyst's recognition of resistance and the patient's arriving, more slowly and laboriously, at a corresponding insight (Sedler, 1983). Working through, at first, seems to have referred to the effort leading to such insight.¹

¹An editorial footnote states that "the concept of 'working-through', introduced in the present paper is evidently related to the 'psychical inertia' which Freud discusses in several passages" (Freud, 1914b, p. 156, n.). This may be so, but it was around the time of this paper that Freud detached the pull component from repression, equated repression and censorship, and viewed resistance as connected exclusively with the model of convergent conflict. This surfaced most clearly in the uncharacteristic statement in "Beyond the Pleasure Principle" in which Freud maintained: "The unconscious—that is to say, the 'repressed'—offers no resistance whatever to the efforts of the treatment" (1920, p. 19), which he retracted a few years later (1926, pp. 157, ff.).

From 1926 on, working through has been linked with resistance of the unconscious or resistance of the id and with the compulsion to repeat, as indicated in the quotations given earlier.

Loewald (1955) contributed a most valuable perspective:

Working through is not primarily conceived of here as the undoing of repressions or other defenses, but it is seen as the strenuous task of helping to lift unconscious processes onto a new level of integration, the level of secondary processes (p. 39).

As noted above, the tension between primary process and secondary process represents divergent conflict.

The interaction of convergent conflicts and divergent conflicts seems to me to occur as a continuous sequence of alternations. The resolution of one kind of conflict sets the stage for the emergence of the other (though not as precisely as in an algebraic series). Greenson's (1965) illustration and discussion of working through, "the result of so many procedures performed simultaneously by the analyst and the patient" (p. 277), and his important definition of working through as "the analysis of those resistances and other factors which prevent insight from leading to significant and lasting change" (p. 282), demonstrate such a continuing interplay of processes. His conceptual formulation of two phases of analytic work is useful for distinguishing the resolution of the repression conflicts (convergent conflicts) with the acquisition of insight, on the one hand, from working through that leads to the resolution of divergent conflicts with, I suggest, different aspects of insight, on the other.

A number of analysts have linked working through and mourning. "Between mourning and analytic working through," as Lewin (1950, p. 78) put it, "there is often more than a mere analogy, for mourning may appear in the course of an analysis as part of the working through." Fenichel (1935, p. 346; 1941, p. 80) had earlier expressed a similar idea (which he attributed to Rado). Ernst Kris (1956) took up the same theme in examining the problem of reconstruction and recovery of childhood

memories:

To transform insight from an intellectual into a total experience is one of the essential parts of “working through”—hence the similarity between the patient’s work in analysis and the process of grief and mourning (p. 337).

Stewart (1963) noted that

working through and mourning have in common the need to come to terms with an unwelcome reality, and to accept the concomitant frustration. Also both have in common the pain involved in abandoning an accustomed pathway of libidinal discharge. In fact, mourning in this sense is a classical example of the working-through process and illustrates the overcoming of that particular form of the id resistance described by the term “adhesiveness of the libido” (p. 484).

Karush (1967) suggested:

There are different areas of emphasis in working through which are integral parts of almost every analysis, although they vary in relative importance for each patient. Each area requires a different type of renunciation (p. 516).

He gave examples of different kinds of *renunciation*. Meissner (1981), aiming toward “the working through and reshaping of introjective configurations” (p. 172) emphasized

that the resolution of transference elements depends ultimately on the surrendering of the introjects and their implicit object attachments and the appropriate mourning of this loss (p. 173).

Brodsky (1967), who stressed the mastery of painful affects in working through, asked:

But does mourning really mean the total surrender of the object? What really occurs in mourning is a mastery of the painful affect of longing for the lost object. After the work of mourning is completed, the lost object may still be loved but is no longer painfully longed for (p. 491).

The mastery comes as a *result* of the work of mourning, I want to emphasize. From the viewpoint of free association it is the result of repeated painful alternations of the associations, expressing longing on one side and the inner need to acknowledge the reality of the loss on the other. I shall return to this point in discussing the characteristic pattern of resolution of the conflicts of ambivalence.

I am inclined to share the position of those who equate working through with thoroughness in all phases or aspects of analytic work (Fenichel, 1941; Greenacre, 1956, 1964; Panel, 1966). Its shifting significance in Freud's thinking, particularly its intimate connection with the mysterious realm of the compulsion to repeat, has made it the topic of numerous fruitful psychoanalytic inquiries. I find it useful to apply to this topic the distinction between convergent and divergent conflicts.²

RESISTANCE IN DIVERGENT CONFLICTS

So far, I have tried to demonstrate two groups of phenomena and corresponding concepts that warrant separate designation as conflicts. They differ not only in the elements of conflict, divergent and convergent, but in the process of conflict resolution: lifting of repression that gives the unconscious access to consciousness, in the one, and a process akin to mourning, in the other. I have followed Freud's classification of the resistances (1926, pp. 157, ff.), allocating repression resistance, transference resistance, and resistance from the superego to convergent conflict and appropriating resistance of the id and resistance due to secondary gain from illness for divergent conflict. There is, however, a substantial problem in going further.

²I do not believe, however, that all problems of working through can be subsumed under these concepts. For example, Novey's (1962) emphasis on learning, Gill's (quoted by Brodsky, 1967) on unlearning of old patterns (see also Sandler, Dare, and Holder, 1973, p. 127), and Boesky's (1982) and Valenstein's (1983) on the access to action patterns may all be related to divergent conflict in a very general sense, but they refer to an important territory beyond the one I have addressed.

The interlocking definitions of psychoanalytic work, resistance, repression, and insight exclude the divergent conflicts. Most significantly, the familiar and seemingly unobjectionable phrase, "when we attempt to make his unconscious conscious to him" (Freud, 1933, p. 68), noted earlier, that usually defines the analytic procedure, assumes that the aim of analysis is principally to lift repression. That aim misses the mark in regard to the divergent conflicts, for in them the elements in conflict may both be conscious.

Here, I believe, the formulation of psychoanalytic clinical phenomena in terms of the *method* of free association that I have presented in previous publications (1982, 1983a and b, 1984) offers one possible solution to the problem. The method of free association is a joint venture initiated by mutual agreement, in which the patient attempts to put into words, spontaneously and without reservation, as much as possible, whatever comes to mind—thought, feeling, sensation, image, memory. The analyst tries to help the patient do so from the vantage point of the "analytic stance," which is characterized by neutrality, anonymity, and abstinence (1982, Chapter 4). Aware that the term free association has been used with a variety of connotations, I emphasized that in my own usage I would limit the term *free association* to mean relatively free from *conscious* control. This holds whether the term is used to refer to the activity, to the sequence produced by the patient, to the method, or to the process. Viewing resistance as the central concept in psychoanalytic technique, I employed the term *freedom of association* to refer to relative absence of unconscious restrictions on the associations (in the setting of free association) and defined *resistance* as any unconscious interference with freedom of association. I use the term *reluctance* to refer to conscious interference with the *activity* of free association. The *initial* aim of psychoanalytic work is defined as the attempt to increase the patient's freedom of association. These terms and this conception of the analytic enterprise permitted me to study the patterns of free association and their *determinants* without biasing the method to exclude one form of conflict and resistance or the other.

To cite an immediate corollary of these definitions and formulations, I am wary of seeing resistance primarily as opposition to analysis, analyst, or "cure," because such a view tends to equate unconscious attitudes with conscious ones and to restrict the aims of analytic work to resolution of convergent conflict only. Resistance may, of course, manifest itself by placing a halt on free association, or by externalizing one side of an inner conflict onto the analyst and then rejecting it, or by reluctance to revise a pathological pattern of behavior. But it need not. Resistance may operate even when the associations are fluent, a cooperative spirit prevails, and the desire, both conscious and unconscious, for "cure" is strong. I have discussed previously (1982, Chapter 5) the variety of negative attitudes in analysis and their variable relationship to (conscious) reluctance and (unconscious) resistance. The compelling observation that resistance and reluctance are in part independent of each other leads me to emphasize the distinction between them in attempting to foster freedom of association. This approach has the further advantage of stressing the correlation of different resistances with corresponding patterns of association.

The recognition of divergent conflicts, whose prototypes are regression-progression and mourning, demonstrated that a patient could encounter a resistance that is not based on repression, in which the opposing elements may both be conscious rather than unconscious. The patient's resistance manifests itself as a conscious attitude of reluctance to proceed in these instances. Reluctance may be due, also, to convergent conflicts, and I have presented previously (1984) the distinguishing features of those situations. In convergent conflict between paired opposites, if, for instance, exaggerated passivity defends against activity, the repressed member of the pair cannot be expressed at all, or only most derivatively, and reluctance does not occur. On the contrary, in such situations the patient may be willing endlessly to pursue passive pleasures. In divergent conflicts, on the other hand, when, for example, active and passive wishes compete, neither side can be expressed alone for long, leading to the alternations and oscillations referred to above.

Reluctance, it should be added, may appear without being due to resistance, as when the patient chooses to be absent for vacation, or when business obligations require his absence. As noted by Freud (1900, p. 517), however, such sources of reluctance become so frequently a vehicle of resistance that patient and analyst are well advised to remain vigilant, always, to unconscious meanings and concomitant resistance. While little more than ordinary analytic tact is required to establish the presence or absence of resistance when the patient is reluctant, recognition of the differences between the two types of conflict is required to distinguish reluctance due to divergent conflict from reluctance due to convergent conflict.

INSIGHT IN DIVERGENT CONFLICTS

If the elements of divergent conflicts are, in fact, both conscious or relatively easily accessible to consciousness, the question arises whether there is any sort of insight to be gained in their resolution, or whether it is only a matter of painful alternation without words. To answer this I return to the persistent conceptual problem of what it is that must be given up in mourning. I have indicated, earlier, my view that mourning does not mean giving up the love for a lost object. What is given up is the illusion of permanence. But it is just this insight that is missing from the patients who suffer from unresolved divergent conflicts. They cannot conceive how to solve their either-or dilemmas. They cannot conceive that there is a solution, though the solution is hardly a secret: a process akin to mourning. (I say *akin* to mourning rather than mourning itself, because in some divergent conflicts no temporal factor is at work, neither side representing a past or lost element—for example, in conflicts between active and passive wishes or between heterosexual and homosexual inclinations.) The characteristic misconception that expression and satisfaction of one side necessarily means total loss of the other, that no satisfactory compromise can be reached, does yield, along with the resolution

of the conflict in painful alternations, and it does produce an aspect of insight quite different from the insight obtained in the lifting of repression. The patient gradually recognizes a different view of such conflicts and their potential for resolution.

To illustrate the development of such insight would be very difficult, since it does not appear in sudden light flashes of discovery. On the contrary, one recognizes the insight only by contrasting the new attitude with the old. It does not feel like the sort of insight gained in resolution of convergent conflict. A man in his twenties, whose father died while he was very young, was reluctant to speak about his father in analysis and consciously avoided talking about him, because he felt that to do so risked losing the little attachment to his father that he possessed. Although he had mourned for his father to some extent, he longed for him in a painful and even a helpless way. In association with the divergent conflict over whether to speak about his father were many others. Not least was the conflict between remaining in a state of relative regression, marked by passivity and immobility that were connected with longing for his father, and the wish for action and outside involvement. The mourning was far from completed. There were, naturally, a host of convergent conflicts, too, in regard to his father. The idea that to talk about his father and to remember him was to lose him was linked to the feeling that to remember was to feel overwhelmingly guilty, inadequate, disappointed, and unloved. A long analysis did, eventually, lead to a fairly successful completion of the incomplete mourning, with resolution of many of his neurotic conflicts, and he achieved an impressive identification with his father as one result. The fear that talking about his father meant losing his few precious memories yielded very very slowly to the advantages of remembering and being free to resolve the conflicts connected with hostility, disappointment, and, above all, guilt. He gradually recognized that he had lost only a barely unconscious hope that his father would return one day, which had been a conscious fantasy in the years im-

mediately after his father's death. He no longer held the view that talking about his father, or about anyone else, would lead to loss, but it would not be possible to separate the achievement of this insight from the painful process that led to it.

THE INTERACTION OF THE TWO KINDS OF CONFLICT

While divergent conflicts may be entirely conscious, their elements may also be repressed or defended against in other (convergent) ways. The painful experience of conflict of either kind is itself the potential signal for defense that may keep the elements of conflict out of awareness (Rangell, 1963a & b). It is characteristic for patients with borderline disorders, owing to their extreme intolerance of the kind of tension involved in divergent conflicts, to repress one side or the other of such conflicts alternately. Other solutions, such as compromise formations that rely heavily on condensation (e.g., symptoms and images that combine active and passive or homosexual and heterosexual wishes), may also diminish the tension and experience of divergent conflict. In these situations I find it clearer to see that two kinds of conflict—and, therefore, two kinds of resistance—combine, rather than suppose that one of a pair of antithetical elements in divergent conflict represses the other. The latter formulation necessarily implies that one defends against the other, foreclosing insight by missing the way the two elements appear to the patient to be in mutually exclusive competition.

For example, a young woman reports a waiting-room fantasy of being assaulted by a man in the analyst's bathroom. The analyst comes to her rescue in the fantasy. Associations, including further details confirm the initial impression that her fantasy satisfies wishes for a sexual relationship with the analyst, based on a father transference, with fears and inner prohibitions expressed as well. Here is convergent conflict with compromise formation.

Omitted from the original account and from the early associations, an event reported on the television news the night before also determines the fantasy. A young woman had been raped in a railroad station bathroom, and her parents came from far away to take care of her. The conflict between the attachment to her parents, with emphasis on being taken care of by them, and her current love relationship with her boyfriend, a divergent conflict, is also expressed in the patient's fantasy. The early omission from the associations of links to this conflict—between old objects and new, between passive pre-genital wishes and active genital ones—is due to repression. Lifting that repression does not, however, resolve the divergent conflicts. It only permits their further resolution in an associative process that includes painful alternations akin to mourning.

Two additional divergent conflicts can be seen in this example. The relationship with her boyfriend, owing to a number of inner reasons and outer ones, characteristics of her own and of her boyfriend's, was not as satisfying as she needed. Her boyfriend did not and could not match a childhood image of her father and its present version in the transference. The choice between the two remained an unresolved conflict. Further, defenses against the genital sexual wishes for father had contributed to significant anal regression and masochistic tendencies that appeared in the fantasy. The choice between sadomasochistic, anal loving and genital sexuality in a context of more mature object orientation represents another divergent conflict that combines with the convergent conflicts over the incestuous wishes of childhood.

A different interaction regularly occurs when anxieties about expression of either side of a divergent pair of opposites operate (convergently) in tandem with reluctance. A young man is so often unconsciously afraid of injury to his penis and of injuring with his penis in intercourse that such sources of anxiety and defense very frequently operate in tandem with divergent conflicts between active and passive, genital and pregen-

ital, and heterosexual and homosexual wishes and between wishes for a new partner and old attachments in the family. In one such situation, for example, the young man retreated from intercourse to foreplay only—satisfying but also frustrating. The frustration was mostly not experienced consciously in the sexual situation itself, but it appeared in the deterioration of successive relationships. In the free associations the self-criticism for the retreat from intercourse became an important concern. Interpretations, whether offered by the patient or by the analyst, on the fears that kept him from a more satisfying conclusion to love-making failed to identify the resistance in free association or to help him master the symptom outside the analysis. When the analyst focused, instead, on the divergent conflicts determining the patient's view of mutually exclusive opposition between foreplay and sexual intercourse—"You are very fond of foreplay"—the response was immediate—"Oh, yes"—and led to further freedom of association, eventually permitting analysis of some additional convergent conflicts.

Another type of interaction between the two kinds of conflict can occur when the patient is self-critical (convergent conflict) for not giving up one side or the other of a divergent conflict. Such situations are often complicated still further by externalization of the self-criticism onto the analyst, creating a new divergent conflict between free association and a good relationship with the analyst. To regard the reluctance to speak and the externalization as manifestations of resistance against the lifting of repression (convergent conflict) rather than as resistance to making a choice between two essential wishes leads to misunderstanding. An interpretive focus on the patient's self-criticism, divergent conflict, and the assumption that the patient must choose and lose can avoid impasses and lead to resolution of inner conflict.

THE YIELD FOR TECHNIQUE

In the foregoing sections I have tried to demonstrate that formulations of the aims of analytic work, conflict, resistance, and

insight interlock in such a way that a modification of the concept of conflict—to view divergences embedded in psychoanalytic theory as a separate paradigm of conflict—requires parallel modifications in the others. In their clinical formulations and in their interpretations, however, psychoanalysts take divergent conflicts into account far more than the theoretical passages I have cited would indicate. Precept is, after all, only one element influencing practice (see, for example, E. Kris, 1951, pp. 248, ff.). The use of the developmental concept of separation-individuation, as noted earlier, even provides a *systematic* means for introducing the concept of divergent conflicts without explicit acknowledgment. Nevertheless, like other concepts, the formulation of divergent conflicts may be particularly useful when intuition is paralyzed and it seems that analyst and patient confront their complicated task without much guidance from the associations.

I want to stress that the descriptive concepts, the conflicts of defense and the conflicts of ambivalence, derive from an analytic procedure guided explicitly and uniformly by the aim of assisting the patients with their task of free association (i.e., association relatively free of conscious control) in order to gain greater freedom of association (i.e., association relatively free from unconscious interference, that is, resistance). In the preceding sections I have tried to demonstrate that such a formulation of analytic aims and resistance yields an unbiased stance with regard to the two kinds of conflict. Here I shall discuss two generally applicable advantages that the concept of divergent conflict affords in psychoanalytic technique. I have presented others in previous publications (1982, 1983b, 1984). I shall take up first the relevance of divergent conflict in the mysterious realm of the compulsion to repeat, building on my earlier discussion of working through.

Historically, the concept of repetition compulsion (Freud, 1920), that is, a concept of motivation beyond the pleasure principle, was not accompanied by a change in the aim of psychoanalytic work (i.e., the lifting of repression) or in the concept of conflict (i.e., repression and other defenses against drive

expression) or in the nature of insight sought. The formulation of the structural concepts (Freud, 1923), the revision of the theory of anxiety (Freud, 1926), and the shift to defense analysis (A. Freud, 1936) modified the aims of analysis, the nature of conflict to include intrasystemic conflict, and the qualities of insight sought, but they did not alter the convergent form of conflict and resistance.

The formulation of the conflicts of ambivalence, divergent conflicts seen in patterns of free association, offers a significantly different approach to the resistances that have been attributed to the compulsion to repeat and that have been held to require working through with the aim of surrendering old object ties and modes of satisfaction. The latter view supposes that the analyst should assist the patient in recognizing the reluctance to abandon old in favor of new, to master the attraction due to fixation. The concept of conflicts of ambivalence, employed with an understanding that the need for mourning or a process akin to it is not recognized intuitively by the patient, focuses on the resistance due to the patient's assumption that to choose one means to lose the other altogether. The approach parallels the focus in the analysis of conflicts of defense on the resistance due to the patient's assumption that defense responds to real danger. In the conflicts of defense this assumption is always unconscious, and making it conscious is part of the resolution through lifting of repression. In the conflicts of ambivalence the assumption of impending loss is conscious or readily brought into consciousness, but resolution is not effected by awareness of the assumption. Resolution requires a process akin to mourning, with painful alternation of the elements in conflict, to alter the assumption.

When reluctance to proceed in conflicts of ambivalence combines with the patient's self-criticism for not "mastering" (i.e., surrendering) the old, "infantile," or "perverse" wishes, the analyst's intuition is especially vulnerable. At such times the shared assumption that the patient needs to renounce and to relinquish the old wishes is likely to intensify the conflicts, because the

patient anticipates an intolerable loss. The shared assumption is at odds with the analyst's intention to be neutral with respect to the patient's conflicting wishes and at variance with the psychoanalytic aim that insight and other components of the analytic process rather than suggestion should lead to behavioral change. The concept of conflicts of ambivalence reminds the analyst to focus on the resistance, which derives from the patient's unconscious belief that satisfaction of one wish or intention means total surrender and loss of the other, and to foster the required process akin to mourning.

A second technical advantage of the concept of divergent conflict can be seen most clearly in patients with substantial problems of indecision, such as obsessional neurosis and manifest bisexuality. To assume the interplay of two kinds of conflict, rather than picture convergent conflicts only, avoids the consequences of treating conflicts of ambivalence as though they were conflicts of defense. The assumption that one element is *only* or even *always to some extent* a defense against the other runs counter to the patient's need to experience the sense of loss in a process akin to mourning. To insist upon such an assumption, which may well coincide with the patient's self-critical attitudes, as noted above, forecloses the development of the psychoanalytic process and, especially, insight into either-or attitudes.

SUMMARY

This paper attempts to clarify the potential for technique of the distinction between convergent and divergent conflicts. It reconsiders and challenges the proposition that all resistance maintains convergent conflict, whose prototype is repression, in which the elements move toward each other. The divergent conflicts, whose opposing elements tend to move apart, also give rise to resistance. Their prototypes are regression-progression and the process of mourning.

Resistance in the convergent conflicts opposes the threat of anticipated unpleasure which would result from the lifting of repression. Resistance in the divergent conflicts opposes the threat of anticipated loss of the opposing element, when either of the paired elements is expressed alone.

A historical review of conflict and resistance, beginning with Freud's (1900) push-pull (convergent *and* divergent) concept of repression, demonstrates an unbroken line of psychoanalytic views that see all intrapsychic conflict as convergent and all resistance as opposed to the lifting of repression (defined as convergent only, since about 1916). Interlocking definitions of the aims of psychoanalytic work, conflict, resistance, and insight have tended to preserve the overinclusive relationship between resistance and convergent conflict, because enlargements and alterations in the aims of psychoanalytic work and the nature of insight sought have not been paralleled by changes in the concepts of conflict and resistance.

Though no *explicit* metapsychological formulations of divergent conflict have been included in the psychoanalytic theory of the mind, a number of implicit formulations of divergent conflict have constituted an established and essential part of psychoanalysis. These are illustrated in a discussion of regression, pleasure principle versus reality principle, and mourning. They are applied to a re-examination of the concept of working through, the aspect of psychoanalytic treatment related to resistance of the unconscious. A reconsideration of what must be given up in mourning—the illusion of permanence rather than love of the object—is central to this discussion of working through.

The paper discusses and illustrates resistance and insight in divergent conflicts and contrasts them with corresponding concepts for convergent conflicts. It emphasizes the interaction between the two kinds of conflict and cautions against the consequences of equating them. A view of psychoanalytic technique is offered that approaches the resistances to resolution of two kinds of conflicts, divergent and convergent. It constitutes an

alternative to the distinction between insight production and working through as separate aspects of psychoanalytic work.

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Beating Fantasies in a Latency Girl: Their Role in Female Sexual Development

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To cite this article: Lester H. Friedman (1985) Beating Fantasies in a Latency Girl: Their Role in Female Sexual Development, The Psychoanalytic Quarterly, 54:4, 569-596, DOI: [10.1080/21674086.1985.11927120](https://doi.org/10.1080/21674086.1985.11927120)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927120>



Published online: 28 Nov 2017.



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BEATING FANTASIES IN A LATENCY GIRL: THEIR ROLE IN FEMALE SEXUAL DEVELOPMENT

BY LESTER H. FRIEDMAN, M.D.

Detailed clinical material is presented from the analysis of a latency girl whose inner life revolved around a series of beating fantasies. The clinical data support Freud's 1925 formulation that the perception of sexual differences initiates the oedipus complex in the girl. Whether a girl experiences vaginal sensations before puberty has been a controversial issue; in this girl vaginal sensations and contractions appeared prior to puberty.

INTRODUCTION

While Freud's description of the psychosexual development of the boy has generally been accepted, his description of the sexual development of girls was far more tentative and has aroused debate almost from the very beginning. This debate has centered on several issues: the vicissitudes of penis envy, the role of the castration complex in initiating the girl's oedipus complex, the shift from clitoris to vagina, and the role of vaginal sensations prior to puberty. None of these issues has yet been satisfactorily settled. On the other hand, there has been little doubt about the importance of beating fantasies in the development of girls, although such fantasies also occur in males (Joseph, 1965). In this paper I shall use detailed clinical ma-

This paper was presented to the New York Psychoanalytic Society on May 10, 1983, as a precirculated paper at the American Psychoanalytic Association in December 1983, to the Austen Riggs Center, Stockbridge, Mass., on February 3, 1984, and to the Baltimore-District of Columbia Society for Psychoanalysis on November 10, 1984.

terial from the analysis of a latency girl, Jane, whose inner life revolved around a series of beating fantasies, to address some of these unresolved issues—i.e., whether the perception of sexual differences initiates the female oedipus complex and whether vaginal sensations are present before puberty.

SOME CONTROVERSIAL ASPECTS OF FEMALE SEXUAL DEVELOPMENT

It is not my intention to review the literature on female sexual development. This has been done extensively in recent years (e.g., Fliegel [1973]; see also, the supplement to Vol. 24 of the *Journal of the American Psychoanalytic Association*). Rather, I want to state the issues that have been debated, both early in the history of psychoanalysis as well as more recently, to see whether my clinical material can resolve some of them.

Fliegel (1973) gave a detailed account of the history of analytic theory regarding feminine psychosexual development; Helene Deutsch and Jeanne Lampl-de Groot supported Freud's original view that the girl is led to the oedipus complex by the castration complex, in contrast to the boy, who transforms the oedipus complex as a result of castration anxiety. Freud (1925) stated that "the little girl's recognition of the anatomical distinction between the sexes forces her away from masculinity and masculine masturbation on to new lines which lead to the development of femininity. . . . She gives up her wish for a penis and puts in place of it a wish for a child: and *with that purpose in view* she takes her father as a love-object" (p. 256). These views were not shared by Horney (1923, 1926), Jones (1927), and Fenichel (1930). Horney suggested that early pregenital penis envy (primary penis envy) be differentiated from a later, more intense form; for the latter she posited a different origin—in the female oedipus complex—and regarded it as the nucleus of what may develop into a neurotic "castration complex" or "masculinity complex" in women. Fliegel (1973)

pointed out, "Crucial to these formulations is an underlying idea, later to be argued forcefully by Jones, that *the little girl's oedipal attachment develops out of her intrinsic, innate femininity undergoing its own maturational processes*" (p. 387). On the basis of observational data, Galenson and Roiphe (1976) as well as Kleeman (1976) offered qualified support for Freud's original view. Galenson and Roiphe agreed that "the girl's discovery that she is castrated is a turning-point in her growth" (p. 47). They stated:

We believe that Freud's original position was partially correct in that penis envy and the feminine castration complex do exert crucial influences upon feminine development. However, these occur earlier than he had anticipated, they are closely intertwined with fears of object and anal loss, and they shape an already developing, although vague sense of femininity, stemming from early bodily and affective experiences with both parents (p. 55).

Kleeman (1976) concluded, "Freud repeatedly made the point that the little girl gives up (masculine) masturbation (of the clitoris) and finally makes a move toward femininity under the impact of castration anxiety and the consequent sense of inferiority" (p. 22). Kleeman stated that a little girl may stop genital self-stimulation because of penis envy and a sense of inferiority; she may continue genital self-stimulation despite learning about the anatomical differences; and she may stop genital self-stimulation for reasons other than penis envy. He said, "All three eventualities can and do occur, and observation denies the single routine pattern Freud claimed to be universal . . ." (p. 23).

I should also add that the existence of penis envy itself has been called into question or—even when it is acknowledged to occur in "some women"—attributed solely to social factors. I do not, however, include this latter view among the controversial issues since I believe that the evidence for penis envy is overwhelming.

The second unresolved issue concerns the shift from clitoris to vagina, which, in Freud's view, does not occur until adolescence, and the related question of whether vaginal sensations can occur before puberty.

In 1905 Freud wrote, "The leading erotogenic zone in female children is located at the clitoris . . ." (p. 220). In 1925, after discussing the young girl's giving up her wish for a penis and putting in place of it a wish for a child, Freud made a startling statement: "If I am to credit a single analytic instance, this new situation can give rise to physical sensations which would have to be regarded as a premature awakening of the female genital apparatus" (p. 256). Here Freud stated that the girl's genital apparatus, which I presume must include the vagina, gives rise to sensations. Thus Freud stated in 1925 that the girl went through a change in her leading sexual organ and a change in her sexual object before she could arrive at the "normal" oedipus complex. However, as late as 1931, by which time he had revised some of his early views on female sexuality, Freud made the puzzling statement that "the vagina is virtually non-existent and possibly does not produce sensations until puberty." Then in the very next sentence, he himself contributed to the continuing controversy on this point: "It is true that recently an increasing number of observers report that vaginal impulses are present even in these early years. In women, therefore, the main genital occurrences of childhood must take place in relation to the clitoris" (p. 228). Freud (1933) also said that "it could not be easy to distinguish these [vaginal sensations] from sensations in the anus or vestibulum" (p. 118).

Yet, the evidence for the occurrence of vaginal sensations before puberty began to mount even in Freud's time and has continued to do so. Helene Deutsch (1930) thought vaginal masturbation atypical for latency girls. She had, however, observed "two instances of . . . vaginal excitations and vaginal masturbation before puberty." In both instances the girl had suffered "seduction with defloration . . . very early in life" (p. 51). Jones (1933) stated, "In my Innsbruck paper (1927) I expressed

the opinion that vaginal excitation played a more important part in the earliest childhood than was recognized—in contradistinction to Freud's opinion that it begins only at puberty. . . . What is important about this early vaginal functioning, so deeply repressed, is the extraordinary amount of anxiety that goes with it (far more than with clitoric functioning)" (pp. 470-471). Jones (1935) wrote, "The impressive facts of adult vaginal anesthesia or even dyspareunia, with the suggestion of what they are the negative of, seems to me definitely to refute the idea of the vagina being an indifferent or merely underdeveloped organ. They prove rather the erotic cathexis of the vagina and the deep fear of this" (p. 489). And Ruth Mack Brunswick (1940) believed that the vagina derives its sensitivity primarily from the clitoris and secondarily from the anus.

Greenacre (1950) stated, "For many years I have had the impression, based wholly on clinical observations, that vaginal sensation does not develop by any means uniformly secondarily to that of the clitoris, and certainly does not always await actual intercourse for its establishment, but may be concurrent with or even precede clitoral sensation" (p. 124). She indicated that in the analyses of women she found "some kind of vaginal awareness very early" and added that this may occur even in patients who have not had extreme early stress. Bornstein (1953) noted the decline in masturbatory activity in latency, but said we do not expect either masturbation or the capacity for genital sensations to be extinguished in the healthy child at this age. She learned about intense orgasmic sensations connected with masturbation from three latency girls. She said, "I assume that vaginal sensations were involved. . . . Their main defense was a crude denial of facts which was ultimately related to their orgasm" (p. 71). Fraiberg (1972) discussed genital arousal in latency girls. She found in the analysis of an adult woman with frigidity that she had had a childhood experience like that of two latency girls, "a fateful turning away from the genital coinciding with total loss of erotic sensation" (p. 439). Both girls had

discovered and explored the vagina and had repressed sensation. The crucial event had been overwhelming excitement of orgasmic proportions. Fraiberg felt that her patient, Suzanne, was not alone among little girls who experience insupportable excitement and withdrawal in panic following vaginal exploration. Kramer (1954) reported two adults in analysis (without severe pathology) who described vaginal masturbation to orgasm before age six. Barnett (1968) surveyed a nonpatient population who never had trouble experiencing coital orgasm; without exception these women recalled being aware of having a vagina since early childhood. Bernstein (1976) suggested that the repression of genital sensation may also be due to masochistic fantasies that accompanied masturbation and are perceived as too dangerous. Cases in which vaginal sensations and vaginal orgasm occurred before puberty have been reported by Barnett, Bornstein, H. Deutsch, Greenacre, Kestenberg, and Kramer, among others.

Nevertheless, some authors (e.g., Nagera, 1975) continue to believe that the vagina does not become the leading erotogenic zone before puberty, though they do not make it clear how they envision the shift from the dominant position of the clitoris.

I wish to conclude this review with a most interesting and probably often overlooked comment Freud (1925) made about the fantasy of a child being beaten: "The child which is being beaten (or caressed) may ultimately be nothing more nor less than the clitoris itself, so that at its very lowest level the statement will contain a confession of masturbation . . ." (p. 254).

CASE PRESENTATION

Historical Background

Jane began analysis at age seven. She was a precocious girl who was the third of four children and the only girl in an upper middle-class family. Her mother, a concerned and interested

parent, sought help when Jane's distress interfered with her comfortable participation in their family life or when friends visited. At those times Jane often isolated herself. She wanted to be a boy and was moody, irritable, and hypochondriacal; she felt she was stupid, feared dying in quicksand, disliked being alone at bedtime, and had tantrums eight or nine months before. She was fearful and inhibited with other children. Her father was very sensitive to Jane's needs. Jane fought with her mother and was clinging with her father, who treated her with maternal tenderness. He neatly itemized Jane's difficulties. She read voraciously and did very well in a coeducational private school with high academic standards. She was close to her brother, Robert, who was fourteen months older, and maternal with a brother, Edward, who was two years younger. She was less involved with her brother, Tom, who was four years older.

During infancy, Jane was easily satisfied and seldom cried. She "watched" while her mother was absorbed with taking care of Robert, who was a very active and demanding child. Jane's mother felt that boys were more important than girls. At age two, following Edward's birth, Jane experienced the relative loss of her mother, who had a severe depression of a year's duration. During this time Jane was cared for by a strict nurse. Jane began to wet again and ate poorly for the next two years. At age two and a half she became moody, whiny, and procrastinating. At times she was rude, a behavior that served the purpose of getting attention. Although she later wanted to be a boy, she was willing to dress like a girl and played with dolls, but did not especially like them. At age three and a half she was afraid of the other children in nursery school and was often hit, especially by one girl. She told her mother that she fantasied hitting this girl back. At age four, when tantrums began, she would sulk, slam doors, and have black moods. In the following year, Robert and Edward underwent tonsillectomies, and Robert had a herniorrhaphy. Her father was distressed when his two younger sons had serious illnesses. The analytic material demonstrated that these surgical procedures markedly in-

creased Jane's castration anxiety. Her castration anxiety would appear to have been prominent earlier: throughout her early childhood Jane had been sexually stimulated by being bathed with Robert and Edward and by observing her parents naked. In the latter part of her fifth year she showed a relatively abrupt change in her drawings; her colorful drawings of flowers suddenly became somber and angry looking and displayed teeth. At five and a half, when she was in a combined kindergarten/first-grade class, she advanced from reading only a few words to reading at third-grade level; she tested higher than any other child in the group and was moved ahead a year. She preferred playing with boys, but also enjoyed playing with her mother's make-up. She now slept with a large stuffed animal, although she had not previously been fond of stuffed animals. For two to three months prior to beginning analysis she would not allow her father to be physically affectionate with her.

Opening Phase of the Analysis

In reporting on the course of Jane's analysis, which lasted four and a half years, I shall focus on the material relevant to: (1) the unfolding of her beating fantasies, (2) the relationship of her awareness of sexual differences to the onset of the oedipus complex, and (3) the presence of vaginal sensations prior to puberty. Her fantasy that she had once had a penis and lost it was central, as were her attempts to repress the fantasy.

Jane was a cute, small, feminine girl with short blond hair, blue eyes, and a ready, impish smile. At the beginning of her first hour she put the child's chair next to mine and told me that it took her a half hour to fall asleep and that she was thinking of quicksand. Her brother Robert lost his shoe in it and almost got his foot stuck. "There was mud—like quicksand—we had it all over us. I told my parents it was peanut butter." As will be clear from the later material, this fantasy expressed a wish to regain the lost penis orally. She worried

about someone being covered in quicksand. She then reported a dream:

There was quicksand and thirty feet away a post and concrete. There was an island of concrete and water. My brother Edward wanted to dive into the water, and my mother told him not to because there was coral and he would hurt himself. Mommy said Betsy had this chest and sand in a container. She wanted to put quicksand in it and wanted to get it and was covered by the quicksand [i.e., Betsy died]. Everyone went swimming in the ocean.

She drew a picture of this dream, and the gestalt looked like the male genitals with pubic hair.

She dated her wanting to be a boy to Edward's birth. After she had responded to the idea of having lost a penis, a desire to acquire one appeared in the transference. During one session, after winning three games from me, she played at being a tiger, clawing me on the arm, and ran her "claw" down my body. This was one step removed from grabbing my penis. She lay on my couch, said she would sleep, and then that she would have an operation "on my stomach." Her female dog had been "fixed" by having an operation "on her stomach." She pretended her foot was caught in my toy cabinet. In effect, she feared retaliation after having expressed her wish to take my penis.

After an initial period of a few weeks, her mother reported that Jane was more relaxed and slept better. Her father reported that she was less clinging at bedtime and that she came into the bathroom to see him urinate. She had also done this a year ago. Recently, as well as two years ago, she had tried to urinate standing up.

Her hurt and fury from the time of Edward's birth was revived in the transference. On seeing another patient in my waiting room, she said, "What's he doing here?" After I commented on her keeping her mother waiting at school, she initiated puppet play; in the play she expressed her feelings from

age two years when her brother was born, her mother became depressed, and she felt she had lost her mother. In her next hour she played a game, pick-up-sticks, with much excitement, indicating that the two black sticks were the mother and father. She made a crib for the other sticks, which were the babies. Soon, she reported "spying" on her parents. She took her shoes off, just as she did at home when "spying," and said she went to her parents' open bedroom door. When I said that she must see a lot, she replied, "I don't want to say," and at the same time jumped up and down. She disclosed that she did the "spying" with her two younger brothers. She played a game of jumping up and down. She then lay on my toy chest and counted the shelves above her, saying that they were bunk beds. She went under my couch and said, "I'll sleep here and you sleep there" (i.e., on the couch). In effect, she staged the scene of a man and woman sleeping in bunk beds. The fantasy underlying this play had both wishful and defensive purposes: she wanted to stay under her father's bed and prevent the arrival of new babies; and it helped her to deal with the fright she experienced when she witnessed the primal scene.

Middle Phase

During the next two and a half years Jane gradually related her oedipal fantasies of a sadomasochistic nature and expressed her sexual excitement as she elaborated these fantasies. Eventually, her sexual excitement and her anxiety about it led to her elucidating both the precursor of a beating fantasy and actual beating fantasies.

Initially, when Jane's excitement increased during a session, she appeared to express masturbatory guilt by first tying herself up and then tying her hand. Soon, she fantasied having her arm broken and put in a cast when a car struck her motorcycle. Around this time her father told me of his wife's current depression, which had intensified Jane's ambivalence about the female role. This was now observable in the sessions. In an

attempt to defend against the threat inherent in her excited and frightened view of the female role, Jane began to be opposed to wearing dresses. Her fantasy was that the female is injured during sexual activity with the male. Turning passive into active was prominent in Jane as a defense to ward off the sexual threat. For example, she began to play with a small ball, bouncing it off my walls, and in the process marked up the wall. She was actively damaging my space and, as later material will show, doing it with her fantasied penis.

She had a bedtime fantasy of a "giant gun extending from the sky to the earth and shooting everyone." Another way of warding off the threat of injury was to become a boy. She symbolically played out a disavowal of orally incorporating a penis as follows: she pretended to be a dog who got a chocolate cigar and gave it to her father, who ate it; this disowned her own wishes.

Her excitement was increased in the face of any separation: she would either fantasize or dramatize being knocked out or injured. Soon after learning of our not meeting in July and August, she confessed to thinking of "fuck," which means "married"; "married" means "a penis in the vagina." Later, when acknowledging her apprehension about our not meeting for two months, she dramatized orally incorporating my symbolic penis. In the face of the summer separation, which led to an increased excitement, oral and anal drive derivatives appeared in a fantasy: a poor boy, who lives with his mother without money or food, is beaten by his mother. Then, in the last hour before the summer interruption, she again dramatized her wish to orally incorporate my symbolic penis. She appeared to express her intense masturbatory guilt by slightly burning her hand as she lit a match.

After the summer, a facet of the oedipal fantasy appeared when she leaned against me, played with a chocolate doughnut, and told of wanting a female puppy that would have puppies. She had brought chocolate doughnuts to her hours many times, even though the local grocery carried a large selection. Retro-

spectively, I understood that her play with this chocolate doughnut was a re-enacting of her early anal and vaginal masturbation. She soon told how her brother Edward liked to watch her "B.M." come out. With an increase in her castration anxiety, masochistic fantasies appeared: she feared being swallowed or devoured and dying; she recalled getting lost hiking, feared a robber taking money, and fantasied Christ on the cross and nails being driven through his hands.

Furthermore, as her excitement mounted, crucial oedipal conflicts were dramatically played out with much intensity at home and with increasing clarity in the transference. She playfully jumped into her parents' bed in the morning and said she wanted to kill her mother. She told her mother to divorce daddy and then she, Jane, would marry him. When anxious about these oedipal wishes, she symbolically dramatized her wish to rob me of a penis, taking my umbrella, which she threatened to tear. She rubbed her genital area and wanted to touch me with her foot.

Her anxiety and guilt over her genital wishes led to an increasing curiosity about me, a wish to live inside me, and to a precursor of her later beating fantasy. She decided to write a book entitled *All about Lester Friedman, Written by Jane*. She then drew a picture of me, doodled, making a hippopotamus with teeth and with a fly going into its mouth. "The fly likes it. It's not a fly but a bee and his name is 'buzzzz.' The bee feels warm inside." She then elaborated a fantasy of a bee family living inside a hippopotamus. These bees, which multiplied, had stripes like the victims in her later beating fantasy. Associating to a hippopotamus, she thought of a big elephant without a trunk. This suggests the hippopotamus is a symbolic mother. Her wish to live inside a symbolic mother must go back to age two when she really missed her mother.

She feared dying at the time of our two-and-a-half-week Christmas interruption. The night before her last hour prior to her going away, she was playing in the bathroom with her brothers Robert and Edward. She and Edward were

"watching—I mean washing dolls." They were interrupted, Jane said, and she jumped, tripped, and fell into the bathtub and knocked herself out. She had a mild concussion and was hospitalized overnight. Two and a half weeks later, on returning to her sessions, she masturbated a rubber figure, whom she spoke to as Dr. Friedman, while reporting how she had knocked herself out. In pulling the rubber figure's legs apart she tore them slightly. She felt very guilty. Over a number of sessions she expressed the following. The rubber figure represented her father and me. She wanted to marry the rubber figure. She wanted to put my cigar in her box, where she kept her toys. She spoke of a balloon as a baby and then of the rubber figure as a baby; she put the rubber figure between her legs. She dozed with one hand between her legs, felt between the rubber figure's legs, took my stick as her "magic stick," ran her hand down my long plant stem, and wanted to take my stick home with her. She wanted to be close to her father, who had been away on a business trip all during this period. She created a hole between the rubber figure's legs. "Like a girl," I noted. She said that the rubber figure had no penis, and she added, "It's the fault of the one who made him." I suggested she felt it's the mother's fault if a girl had no penis. She denied this and wanted to give me a bloody nose for talking about "all that bathroom stuff." In her play she then had two trains smash and one lose a wheel. She put a stick in a hole in a wheel. Her mother then reported that Jane had said, "If I say I'm mad, you'll spank me." I want to emphasize that a beating fantasy appeared when she had revived and dramatized her becoming aware of the differences between the sexes and her primal scene experiences.

She said she masturbated because it was a habit. Her mother told me that Jane had started to masturbate two or three months after she began her analysis. In connection with the material about knocking herself out, Jane elaborated the fantasy of being injured. She had a doll family of boys live in Africa. The head of the village hated children, whipped them,

and broke one child's leg. The mother of the family was a witch and as mean as the head of the village.

Jane's penis envy was prominent. She felt that one advantage of having a penis was that one could "box it," i.e., hit it, or in actuality masturbate it as Edward had shown her he did. She dramatized her oral incorporative phallic wishes in the transference. After verbalizing her oedipal wishes and her symbolic wish for a penis, she excitedly rocked and expressed a wish to hit me.

At this time in the analysis, more material relating to a beating fantasy emerged. After she had been angry at her father, she dreamed that her babysitter's father was captured by the Indians, tied to his horse, fell off, and was "mushed" (trampled) by the horse. She directly said that she would like a penis like Edward's. Furthermore, she explained that she was angry at her father because "he hits me." Her saying "he hits me" seemed to be a fantasy. Her older brother Robert teased and hit her. She said she touched her genitals because "it itches." I learned that she had told her mother that her father had hit her when she had crossed the street without looking at age two. When sad after having her hair cut too short, she knocked over my clock and its bottom came off. I interpreted her fear of my anger, and she gave me a spank as she left her session. Her mother reported she had again told her father she wanted "an overnight" with him. She verbally attacked her closest siblings, Robert and Edward, and hit her younger brother, Edward. Two weeks later her mother reported she had spanked Jane on the street when "she was attacking Edward when I told her not to."

For several months she had been masturbating by pressing her thighs together and touching her genitals through her clothes in the sessions. She put a ball in her lap and said it was her penis. She covered it and uncovered it and said it was all bloody. She pretended to be sad and then pretended to eat and drink from the ball. She was excited and touched her genitals. After Robert had in reality hit her, she dreamed that she shot him, and she said, "I want to be a boy to be strong like my brothers." She continued to bathe with her brother Edward.

Summary of the Middle Phase of the Analysis

She gradually spelled out her masturbatory fantasy that the female is injured in her sexual activity with the male. The father's penis was depicted as a "giant gun" which shoots (or castrates) everyone.¹ She reacquired the lost penis—the dog gave it to her father to eat—projecting onto him her wish to regain the lost penis and expressing his castrating her in oral terms. Eventually, she expressed her wish to orally reacquire her lost penis from me. In the face of her anxiety and guilt over this and while sexually excited, she had a fantasy of a mother beating her son. After the summer interruption she symbolically revealed her anal and vaginal masturbation in her repetitive play with a chocolate doughnut, and she expressed her wish to have babies. Showing Edward her stool-penis was also showing him her baby. Masochistic fantasies appeared after her oedipal wish for a baby. Soon she playfully expressed her oedipal wishes. Her wanting to take my umbrella was an attempt to cope with her anxiety and guilt (over her oedipal wishes). The stripes of the bees, as noted, were precursors of the stripes of the victims in her later beating fantasy. These bees multiplied inside the hippopotamus, and the fact of their multiplying thus linked the beating fantasy with the birth of her brother. In this context and again facing a separation, she knocked herself out when "caught looking" in the bathroom play with Edward and Robert. She referred symbolically to the castration that occurred as a result of the primal scene (two trains smashed and one lost a wheel; also, in a dream a queen chopped off a guard's head).

Her play with the rubber figure suggested that her becoming aware of the differences between the sexes was linked with her primal scene experiences and that this propelled her into the oedipal conflict, which then led to her wish to take my penis, to marry me as father, and to have a baby. Symbolic "castration"

¹Horney (1923) described a fantasy of castration through intercourse with the father.

was accomplished by both mother and father substitutes. Again, when excited after expressing her positive oedipal wishes and then her penis envy, she first fantasied hitting me (identifying with the aggressor) and then fantasied her father hitting her. The fact that she placed his hitting her to age two again linked it with Edward's birth. After she fantasied her father hitting her, she gave me a spank and succeeded in getting her mother to spank her.

Final Phase

During the last year of her analysis she returned to marking up my wall with a ball. She wanted a penis to be able to aim her urine. Edward let her box his penis. In the past she had put her finger in her vagina and let Edward smell her finger. She spoke of the ball-penis going "spurt" and marking up the wall. She partially described her genital anatomy: there is a "bump, a thing that sticks out, and a bump." Later when rocking her legs to masturbate, she said, "It goes stiff." She taped her fingers out of shame and guilt.

She spoke of finishing her analysis at some future time. Then, when informed by her mother at the last minute that she would be away and would miss two sessions, she said, "Come with me." She was ill while away. I interpreted that her longing and sadness were a result of our not meeting. She said, "If you were hot and took an ice-cold shower, you wouldn't like it."

After this transference disappointment, she reported her "private games": these were masturbatory fantasies that she first had had at age five which focused on a boy having leg injuries. On her birthday she tried to take my pipe from my pocket. She told of the boy in her "private game" who had his leg torn and cut; he was rescued by Indians and then got "deep cuts." In her first "private game" at age five, a herd of elephants flattened his leg. She then fell asleep in her hour and dreamed: "This great big round mass got bigger."

Her fear of being a girl and of becoming a woman and having intercourse gradually emerged over the next several months. She again wanted my pipe and tobacco, saying that perhaps then she would grow a penis. She acquired the nickname "Moose" in her class after she had acted out how a moose was shot by a hunter. At this time Tom, Robert, and her parents were to fly to Texas on a Saturday or Sunday. She and Edward were to fly to Texas the following Wednesday. I was also to be away Thursday and Friday. During the session she was balancing toy acrobats in order to cope with her anxiety about separation (Friedman, 1979). Then she defecated in my bathroom. She said her stool felt like it caught on something just as it came out and it hurt. It had hurt her like that for two to three weeks. In her "private game" a fifteen-year-old, Danny, was gored by a boar's tusk and fell from loss of blood.

In the next hour she pretended to be Christ, singing the words from a song, "I'm dying, I'm bleeding." She joked about the ball as a penis, put it between her legs, "took off the hair," and threw it away. She expressed her rage at me: she wanted to break my windows, paintings, and office with a baseball bat while her parents and her two older brothers were in Texas before she and Edward were to join them. She threw the ball against the floor with fury. She kept saying how angry she was, and she did not want me to talk. Finally, I said that she was so angry that it made it hard for her to listen to me. She calmed enough to allow me to talk. I first noted her fury at her parents' being away when she was to join them the next day and I was to be away. She said, "I'm angry at my mother and father for leaving me here." I then suggested that she felt such strong fury at me when her parents were away and I was to be away because it reminded her of how she had felt at age two when Edward was born.

She then lay on my couch and writhed from side to side, making sounds as though she were being beaten. She recalled a beating fantasy which she had had at "five, no, seven, no, at eight." In this fantasy a white overseer beats black slaves—men

and women, boys and girls—with a whip. She first said that parents ordered the overseer to do it and then that a boy beat the slaves; then the parents died. She then denied both that the parents died and that the boy beat the slaves. A week later, after her return from Texas, she drew Christ on the cross, and we were able to figure out that she had had this beating fantasy during the Christmas vacation two and a half years earlier, after she had knocked herself out in the bathtub, that is, at age seven years, ten months. This beating fantasy defended against the fantasy of a female being injured during sexual activity with a male, which she had acted out by injuring herself when excited. It is striking that Christ looks feminine in her drawing, a symbolic mother rather than father figure. She said that the overseer made the slaves' backs bloody and striped.

After these links had been made in her analysis, which by that time was in the fourth year, she began to speak of her vagina itching during her hour. I want to emphasize that vaginal sensations became prominent after the appearance of her beating fantasy. She learned about menstruation at school. During this time her penis envy was increased, and her wish to acquire a penis by swallowing one was evident. She masturbated in the hour by pushing her legs apart and putting them back together. She acknowledged that this made her feel good between her legs. She pointed to her genital area and said she had an itch. She spoke of the "thing" getting hard.

Later, in a subsequent hour, after partially acknowledging masturbatory guilt, she said, "Others talk of marriage and a baby. I don't want to get stuck—with a bad husband." Stuck had a double meaning. She joked about wanting a baby and in explaining conception said, "The seed from the penis crashes into the egg." I noted her fantasy of intercourse as a fight and recalled her "spying" on her parents. She vividly confirmed this in the transference. She immediately wanted to kick and bite me and was fiercely determined to win in a game of dominoes. She said the vagina was too small for the penis. What stood out in her game playing was that she wanted to be in charge.

In the course of intensive analytic work on this material, as well as on other conflicts not alluded to in this paper, she became more flexible, was more affectionate with her mother, got along better with children at her school, began to come to her sessions alone, and no longer needed her furry animals. There was still a mild tendency to fight with her father, although she was mostly affectionate with him. She worried about feeling homesick at a sleep-away camp.

At the beginning of the last year of her analysis her affect from the time of the tonsillectomies and herniorrhaphy was revived. The sticks in pick-up sticks were tonsils. "The doctor just rips them out." She accepted my interpretation that she had felt scared and sad when Robert and Edward had surgery. She called a stick a "juicy one," and it was clear to me that she perceived a tonsillectomy as an oral castration, with which she identified. Her penis envy increased. She was determined to beat me in the games we played so that I could not beat her. To this she associated giving a beating. There was someone being beaten in her "private games" at age five. When I interpreted her wish to come out on top, she said that she didn't want to be at the bottom. In her current private game an eleven-year-old, Danny, went into the forest, broke his leg, and was rescued by a dog. Her limping, which lasted for an extended period, was based on an identification with the injured boys in her "private games." She used a stick as a cane. She said her vagina was so little, and the penis was so large. Later she said she pictured her father's penis and her vagina. When I interpreted her wanting to take one of my sticks as a substitute penis, she said, "Your penis is too big for me anyway."

She told of beating Edward up because he had "bigger feet." After she had reported a number of injuries to her feet, ankles, or legs, and had limped and used a cane for an extended period, it became apparent that she was living out the fantasy of having damaged herself by masturbating. She first denied this and then agreed that it sounded as if she was trying to convince herself that it was not wrong to masturbate. She then said,

"Sometimes my vagina gets tight and loose and tight and loose, like when I'm playing my private game. And then I feel I have to urinate and only a few drops come out." She immediately felt an urge to urinate and felt her vagina get "tight and loose." When I suggested that she had thought about intercourse, she was relieved and said, "I worry what I'll do on my wedding night—that I won't know what to do." She now thought that her vagina was only slightly smaller than Edward's penis. Marriage and menstruation were on her mind. She feared bleeding to death. (She had not yet begun to menstruate). She said that her vagina became "tight and loose" when she thought of torture and had the urge to urinate. While she was able to initiate this vaginal reaction, she could not stop it. She said she did not want to get married and have intercourse. She thought of intercourse as two people being side by side—it would be "squishy" on bottom. She reported having slept recently, once, side by side with Edward in a sleeping bag. When she got soaked on the way to her session, she wanted me to have a warm bed for her.

She told me that her left breast was beginning to swell. Her father reported that she had been primping for about two months. She then told a joke in which a man's penis is cut off. When I noted that her conception of intercourse as a fight was the opposite of reality—intercourse was enjoyable—she beamed. She told another joke in which a girl played with her father's penis and bit it when it "squirted" her. She could finally acknowledge the idea that she had wanted a penis because she thought that the penis hurt the vagina when it entered it. Vaginal contractions occurred only when she thought of severe torture. This happened when she thought of intercourse as hurting. She acknowledged that she masturbated when she had "private games." The next day she said she masturbated with the "private games" she thought out, but not with those that she played out. She gave herself a smell when she masturbated. She said that she had begun masturbating at age five. She told of having vaginal contractions sometimes when she thought of

a white overseer beating black slaves. She again emphasized that this fantasy was not a "private game."

Again, when the idea of her having lost a penis recurred, she pretended to have her tonsils taken out on my couch. I interpreted that this fantasied tonsillectomy pushed away the idea of a penis coming into her vagina. She noticed a crack on my wall and said that when there's a fault (in the earth), western California will go to Alaska. She was lying on her stomach with her behind up in the air and had a "volcanic eruption." At our last meeting in June, prior to our summer interruption and before a September termination, again she thought of injury when she was excited about the approaching separation. In September, during the last week of analysis, she told me that her vagina had gone "tight and loose" when she fantasied Lee, the rebel, being captured by the Union Army and hitting his eight-year-old son. I suggested again that she thought of this because she imagined intercourse was like an earthquake. She then lay on my couch and made the pelvic thrusting movements that accompany intercourse.

She had been talking for some time about how she would enjoy using her free time after finishing her analysis. She was socializing with much pleasure with her peers both at school and outside of school. She was getting along well with her brothers and her parents. She no longer fought with her mother, nor was she attempting to express her sexual wishes with her father. She was able to be flexible in a new way. She was no longer frightened of her sexual excitement. She had a good summer and did not injure herself as she had in the past. I have heard that she continues to do well.

Summary of Final Phase

During the final phase of analysis the theme of the loss of a penis and its reacquisition continued to be prevalent and was gradually worked through in relation to past and current preoc-

cupations, primarily the various fantasies associated with masturbation. Jane expressed her guilt over masturbating Edward and herself. After a transference disappointment she reported her "private games" which began at age five and focused on a boy's suffering leg injuries (as a symbolic castration). Her wish for a penis then increased to defend against the threat of becoming a woman and having intercourse and against the symbolic "castration." Her fury over the fantasied loss of a penis was displaced onto the loss of her parents and from them onto the loss of me in the transference. The appearance of the beating fantasy, after I interpreted her fury as reminding her of how she felt at age two when Edward was born, both expressed a wish for a baby in regressive terms and served as a punishment for aggressive wishes evoked by Edward's birth and by her penis envy.

This beating fantasy was a substitute for and a defense against genital sensations, because it was only after her beating fantasy was revived that genital sensations became prominent during her sessions. Her fear of getting "stuck" was a result of her sadistic view of intercourse. Her anxiety about penetration was displaced upward; and she spoke of the tonsils being ripped out, which can be seen as an oral castration. She identified with the injured boys in her private games to ward off the danger of her father's large penis in her "little vagina." After I interpreted her living out the fantasy that she had damaged herself by masturbating, she first tried to deny it and then said that her vagina contracts (she was now ten years, ten months old) and that she had to urinate a few drops. When I interpreted her thinking about intercourse, she said she worried about her wedding night. She accepted my saying that she wanted a penis because she thought that the penis hurt the vagina.

It should be noted that she began having beating fantasies at age five. Although she attempted to differentiate her beating fantasy from her "private games," she stated at one point that someone was being beaten in her "private games" when she was five. Thus, she had masturbatory beating fantasies at age five.

It is not clear when she had vaginal contractions for the first time.

DISCUSSION

In this case report I have presented material as it evolved in the course of the analysis. Here, in contrast, I shall attempt to reconstruct how this child's fantasies evolved in the course of her development and how they shaped her personality and major conflicts. The analytic data suggest that Jane's primal scene experiences occurred when she was about two years old and that they shaped her fantasy of the female being injured by the male during the sex act, especially with penetration. The events when she was two—her primal scene experiences, the birth of her brother, and her mother's depression—were crucial determinants that influenced subsequent phases. Her frequent exposure to the anatomical differences between the sexes (seeing her parents and her brothers naked) gave an impetus to her fantasy of sadistic sex because of the marked difference in size of her father's penis and her vagina. This exposure to nudity also increased her castration anxiety. Her response to her perception of the sexual differences was to turn to her father as a love object. She clearly wanted to have a baby. A regression then occurred as a defense against these oedipal wishes, and what evolved was a beating fantasy. For her, being beaten meant being loved sexually. Her history of evoking a response from a girl who often hit her at age three and a half suggests that she already had a beating fantasy then. Certainly, we can say that important organizing masturbatory beating fantasies had evolved by age five, which is in accordance with what Freud suggested. He wrote that beating fantasies show themselves only toward the end of the period from age two to four or five. In the first of Jane's "private games" at age five, a herd of elephants flattened a boy's leg. The fantasies or "private games" involving a boy who sustains leg injuries continued

throughout latency. In one fantasy a whipping was combined with a leg injury. The whipping or beating was omitted from the "private games," which primarily concerned a leg injury, because of the enormous shame and guilt associated with masturbation. The fantasies of a leg injury appeared in association to ideas about knocking herself out. The analytic data suggest that she fantasied sex between a male and female as a "crashing" or "being knocked out." Such a fantasy both preceded and followed her beating fantasies. Her fantasy that she was a boy who had lost a penis and testicles which she hoped to regain defended against the fantasy of being "knocked out" in sex with a male and against her beating fantasies. Her anal loss of a penis and wish to orally incorporate mine in the transference were vividly depicted. Her anxiety about this, and her oedipal wishes as well as earlier fixations, led to her wish to merge with or live inside a mother. Her fear of dying in quicksand expressed the former, and the striped bees multiplying and living inside a hippopotamus expressed the latter.

Jane's inability to refrain from masturbating showed the obsessional element Freud described. Her shame and guilt were marked; and in the "private games" she dramatized, she kept the feeling of gratified excitement and attempted to diminish her sense of guilt by omitting masturbation. Freud (1919) said, "In two of my four female cases an elaborate superstructure of day-dreams, which was of great significance for the life of the person concerned, had grown up over the masochistic beating-phantasy. The function of this superstructure was to make possible the feeling of satisfied excitation, even though the masturbatory act was abstained from" (p. 190). The "private games" Jane dramatized were the elaborate superstructure of day-dreams referred to by Freud (1919) and subsequently elaborated on by Anna Freud (1922).

It is notable that Jane found it easier to reveal her "private games" than to reveal her beating fantasies. This occurred because of her shame and guilt over her masturbation. "Beating" symbolized masturbation. She held on to her masturbatory ex-

citement by dramatizing her leg injuries and limping for months. It was only after I interpreted her living out her sense of guilt—i.e., that she damaged herself by masturbating—that she was able to allow herself to experience her vaginal sensations or contractions. At this point she expressed her fear of her excitement. She was consciously afraid of having intercourse. After her fantasy of intercourse being like an earthquake emerged, she simulated coital movements.

My case material does not indicate whether vaginal sensations became prominent earlier and were subsequently repressed in the face of anxiety about penetration. From the analytic data one can say that penis envy appeared for four reasons: (1) as a response to her perception of sexual differences; (2) to defend against the threat of her positive oedipal libidinal wishes for her father; (3) out of envy of the male's ability to hold and touch his penis and direct the stream of urine; and (4) to compensate for the fantasied castration that at times she treated as a completed fact.

Now some comments on the controversial questions outlined earlier. I start with the issue of vaginal sensations because my case material seems clear on this point. Jane reported vaginal contractions (at age ten years, ten months) before her menarche and before puberty, but only after her masturbatory guilt was interpreted. There is a strong presumption that vaginal sensations occurred earlier when she was sexually aroused. It is unclear, however, what part vaginal sensations play in the mental life of the young girl between birth and age six years. It might be possible, with careful documentation from longitudinal observations of young girls together with careful analytic work, to shed some light on this issue. I want to emphasize that although longitudinal observations provide us with important data, they do not give access to fantasies; such observations are of different order from the organizing fantasies one obtains during the course of an analysis.

With regard to the second question, I believe that my clinical material supports Freud's 1925 view that the perception of

sexual differences initiates the oedipus complex in the girl. Horney's minimizing of primary penis envy seems incorrect to me, though it may very well be true that there is a secondary penis envy of considerable strength. My data support the concept of penis envy as a defense against the threat of the positive oedipal libidinal wishes for the father. While Jones's idea of the young girl entering the oedipal phase as a result of her innate maturational processes sounds appealing, I believe he minimizes the impact of the girl's viewing a male's penis, which we can assume is part of every girl's experience. I do not see how we can separate the so-called innate maturational processes occurring in a girl from the impact of her viewing the penis.

When Jones (1935) said that the central difference between the two points of view turns on the question of the early oedipus complex, ushered in by oral dissatisfaction, I wonder whether he was being influenced by Melanie Klein. Of course, Jones did not have the advantage of the infant observations that Galenson and Roiphe have made: namely, that the girl's response to the perception of sexual differences (at about fifteen to seventeen months) precedes her turning to her father.

Jane's analysis disclosed that her witnessing the primal scene was preceded and followed by her observing the differences between the sexes (seeing her brothers and her parents naked). In her play with the rubber figure she disclosed how her sexual theories unfolded in her development. She made a hole in the genital area, said that the rubber figure had no penis, and added, "It's the fault of the one who made him." In her play immediately preceding this, which I believe originally followed her becoming aware of sexual differences, she depicted and verbalized that (1) she symbolically wanted a penis from me and dramatized this by taking my "magic stick" and by running her hand down my "phallic" plant stem; (2) she wanted a baby, pretended that the rubber figure was a baby, and put the "baby" between her legs; (3) she symbolically wanted to put my penis in her vagina (this was expressed when she wanted to put my cigar in her box) and she wanted to marry the rubber figure who, she made clear, represented her father and me.

The detailed clinical material from the analysis of this latency girl, I contend, supports Freud's 1925 view that the perception of sexual differences initiates the oedipus complex in the girl. It does not confirm the ideas Horney and Jones expressed in the twenties and thirties, nor does it agree with the conclusions drawn from observational data by Parens, et al. (1976) and others.

I look forward to hearing detailed analytic data that can further elucidate both the role of vaginal sensations in early childhood and how the perception of sexual differences influences the development of the girl. I believe that a clearer understanding of development can contribute to improved technique in the analysis of children, adolescents, and adults.

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Paradigms and Crises in Psychoanalysis

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To cite this article: Isabel F. Knight (1985) Paradigms and Crises in Psychoanalysis, The Psychoanalytic Quarterly, 54:4, 597-614, DOI: [10.1080/21674086.1985.11927121](https://doi.org/10.1080/21674086.1985.11927121)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927121>



Published online: 28 Nov 2017.



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PARADIGMS AND CRISES IN PSYCHOANALYSIS

BY ISABEL F. KNIGHT

The use of T. S. Kuhn's Structure of Scientific Revolutions as a model for the history of psychoanalysis is addressed. It is shown that his categories have been regularly misapplied in the interest of establishing the scientific status of psychoanalysis, or of proposing a new theoretical structure. It is argued that Kuhn's model may nevertheless be useful for the history of psychoanalysis on condition that its categories are used precisely, and their correspondence to the data is tested rather than assumed.

As a historian of psychoanalysis, I have been struck by the frequent invocation of the name and work of T. S. Kuhn (1962, 1970a) in discussions of the past history, present condition, and future shape of psychoanalytic theory. Thus, Freud's achievement is often characterized as a "scientific revolution," or psychoanalysis is said to be "normal science" governed by this or that "paradigm," or to be in a state of "crisis," awaiting a "paradigm shift," or already to have experienced one or more such shifts in its history. In view of Kuhn's (1970b) exclusion of psychoanalysis from the category of science, it is perhaps surprising to find his concepts appropriated for precisely this field. But Kuhn has lost control of his property; it has entered the public domain, and his ideas, or more precisely, his terms, have there been given more authority and greater reach than he would claim for them himself. Rather than dismiss this extension out of hand, I propose to treat it as instructive about the danger of using the history of science to establish the scientific credibility of a discipline or a theory, and then to ask whether there is, after all, a place for Kuhn in the history of psychoanalysis.

Let us, then, look more closely at discussions of the history and development of psychoanalysis that rely upon Kuhn's model. I will consider, first, claims made in Kuhnian terms about psychoanalysis and the mistakes occurring in arguments for each claim. Then I shall suggest some ways in which Kuhn's categories might be deployed properly and fruitfully by historians of psychoanalysis.

Two claims about psychoanalysis inspire Kuhnian discussions of it: first, that there is a paradigm that establishes psychoanalysis as a science; second, that psychoanalysis is a science in crisis, troubled by persistent "anomalies" that have not been resolvable under the prevailing paradigm. At issue in the first claim is the scientific authority and credibility of the field; at stake in the second is the future of psychoanalysis as well as its integrity as presently constituted and practiced. I will discuss each claim, and the arguments supporting it, in turn.

PSYCHOANALYTIC PARADIGMS

The claim that psychoanalysis is a science is made against the implicit or explicit background of Kuhn's (1970b) debate with Karl Popper about the nature of scientific practice. Popper (1935) contends that empirical science can be distinguished from non-science only by the criterion of "falsifiability," by which he means that the logical form of a scientific theory must be such that it can be subject to empirical tests designed to falsify it. The "truth" (as well as the scientific value) of a theory depends equally on the possibility and on the failure of such tests. Kuhn objects that in their everyday practice, scientists do not seek to falsify theories; rather they operate within a paradigm, a theoretical-instrumental structure, whose validity is assumed during the long periods of ordinary or "normal" science. To question a paradigm is to undermine the working foundations of the science it constitutes so that the science can no longer be carried on. If normal science, which aims at solving

puzzles generated within the paradigm, begins to turn up too many unsolvable puzzles ("anomalies"), the science enters a period of crisis, or "extraordinary" science, marked by disputes about basic principles and by unorthodox experimentation, which lasts until a new paradigm has been formulated and widely accepted, and normal science can resume within its boundaries. It is this conception of normal science carried on within a paradigm that is deployed by psychoanalytic writers against Popper's criterion of falsifiability (Guntrip, 1978; Kelk, 1977; Legrand, 1974; Will, 1980). This strategy assumes (mistakenly, I believe) that Kuhn's conception of science is less rigorous than Popper's and therefore that Kuhn's model, in spite of his own denials, implicitly covers psychoanalysis and establishes it as a true science.

Wallerstein (1976) acknowledges the sensitivity of psychoanalysts to this issue: "In the field of psychoanalysis, few theoretical issues are more constantly and passionately argued . . . than the status of our discipline as a science" (p. 198). Wallerstein's own stance is somewhat equivocal when he affirms his "comforting belief that we are indubitably a science—albeit one that has not been as scientific in its investigative and research endeavors as it might be, or as the evolving technology of scientific method (by which I mean, of course, scientific method appropriate to the observational field of the science at issue) would permit . . ." (pp. 199-200). The awkward language of this and adjacent passages suggests that Wallerstein's "comforting belief" is none too comfortably held, as does his rather defensive appeal to outside authority: "That psychoanalysis has . . . earned the sophisticated attention of hard-headed philosophical positivists from without is external confirmation, if such be needed, that we are indeed to be considered a scientific enterprise, one in the state of 'normal science' (again in Kuhn's sense)" (pp. 206-207). Since most of this attention has been directed *against* the claim of psychoanalysis to be a scientific enterprise, Wallerstein's feeling of reassurance is puzzling (Eysenck & Wilson, 1973; Hook, 1959; Medawar, 1973; Popper,

1963). Spruiell (1983) is more straightforward, suggesting that the motives behind the frequent references to Kuhn in the psychoanalytic literature are "to emphasize Freud's greatness or to point to the coming of his successor" (p. 354), or to express a "thirst for the prestige of science or the approbation of philosophers" (p. 358).

There is no need to dwell on the many references to Kuhn that claim that psychoanalysis possesses a paradigm but fail to say what it is (Burnham, 1967; Decker, 1977; Holzman, 1976; Lotto, 1982; Ornstein, 1981; Panel, 1975; Shakow and Rapaport, 1964; Steele, 1978; Van der Leeuw, 1977). Attempts to label the paradigm generally locate it in metapsychology: "the theoretical model of energy distribution" (Ricoeur, 1977), "the concept of instinct" (Lotto, 1982), "Freud's structural paradigm" (Knobloch & Knobloch, 1979), "ego psychology" (Möddel, 1975; Peterfreund, 1975). One writer (Astley, 1974) does not identify the paradigm but does list examples of psychoanalytic normal science, ranging from ego psychology to psychohistory. Another writer (Rothstein, 1980) provides two different but overlapping sets of rival paradigms, tagged with the names of their creators: in the first instance, a practitioner is said to internalize a narcissistically invested paradigm into his self-representation, so that "he is a Freudian, Kleinian, Jungian, Sullivanian, and now Kohutian" (p. 388); two pages later we are told that "dissatisfaction" has "led a number of psychoanalysts, such as G. Klein . . . , Peterfreund . . . , Schafer . . . , and Kohut . . . to propose new paradigms" (p. 390). None of this is reassuring about the care with which these writers have read Kuhn or adapted his terms to their purpose, nor is it persuasive about the existence, number, or nature of psychoanalytic paradigms.

More complex problems arise in expanded accounts of paradigm in psychoanalysis.

In a symposium on *The Ego and the Id*, Arlow (1975) offers a Kuhnian interpretation of the development of Freud's thought, in which he suggests that Freud had established a paradigm in 1900, in *The Interpretation of Dreams*: the topography of mental

functioning based on dynamic conflict between unconscious and conscious systems. Anomalies arising in Freud's clinical practice after 1905 challenged this model and forced a paradigm shift which was accomplished in 1923 with the publication of *The Ego and the Id* and the establishment of the structural hypothesis as the new paradigm. As is discussed below, Arlow is primarily concerned to defend the structural paradigm against those who say that psychoanalysis needs a second paradigm shift.

Sulloway's (1979) treatment, in his monumental and tendentious study of the development of Freud's thought, is more ambiguous. Sulloway twice refers to Kuhn for illumination, but with different and perhaps incompatible implications each time. First he attributes definite paradigmatic status to Freud's work. Speaking of *The Interpretation of Dreams* and *Three Essays on the Theory of Sexuality*, Sulloway asserts that "they provided him with a compelling theoretical *paradigm* (in the Kuhnian . . . sense), by which Freud successfully transformed psychoanalysis from a theory of the neuroses into a new and far-reaching psychology of the normal mind" (p. 358, Sulloway's emphasis). In a footnote to this statement, Sulloway mentions Kuhn's modification of his concept, in which paradigms are now composed of a "disciplinary matrix" and "exemplars," and says that "in both of these two general senses, Freud brought a significant new paradigm to psychology" (p. 358, n.). Later in the book Sulloway is more tentative:

To borrow Kuhn's . . . useful terminology, history is inevitably harsh in its assessment of those individuals who have sought to transform "preparadigmatic" into "paradigmatic" sciences. Such was the nature of Freud's endeavor. If he was only partially successful, one must still acknowledge that his synthetic approach and his theoretical daring were highly appropriate to the particular historical context in which he expressed them (pp. 499-500).

This shift may be explained by the different functions the Kuhn

reference serves on the two occasions. In the first instance, Sulloway is showing the importance of the unifying conceptualizations Freud arrived at between 1899 and 1905. In the second, Sulloway is ready to launch the argument that inspires his book: that Freud's "cryptobiology" does not offer an adequate paradigm and should be replaced by a science that will, namely *sociobiology*. So here Freud is credited with a *failed* scientific revolution; the successful one, with its true paradigm, is yet to come, and Sulloway is its herald.

Spruiell (1983), after criticizing loose appropriations of Kuhn, argues that a Kuhnian interpretation of psychoanalysis may nevertheless be legitimate and fruitful, provided that Kuhn's revision of his model is taken into account and that "we look for true analogies in our own field, that is, if we think metaphorically" (p. 358). (Spruiell also discloses that at a 1978 meeting of the Center for Advanced Psychoanalytic Studies, Kuhn "acknowledged that there might be activities of analysts not readily accessible to outsiders, like himself, which in fact do represent work comparable to that done with paradigmatic exemplars" [pp. 358-359].) Spruiell claims that psychoanalysis does resemble, "at least in some respects," the scientific disciplines described by Kuhn. Psychoanalysis is organized into a disciplinary community whose members share "a small number of preferred metaphors or models for its structure and operations," and seek "to apply similar techniques" in their activities (p. 359). In Spruiell's account, psychoanalysis possesses certain craft rules (such as the use of free association), symbolic generalizations (for example, a concept of psychic determinism, a belief in the importance of the dynamic unconscious, and some version of drive theory), and a variety of models (of which the most useful is the "organismic" model); moreover, psychoanalysis exists in "a highly defined social situation, the *school*," whose function is "to establish or continually renew the basic models or precepts" of the discipline (p. 360). Finally, psychoanalysis possesses an exemplar, or "at least an analogy" to one: the small case conference, in which "the participants . . . , if they are

professionally competent, are able to *understand* the process, *discriminate* interferences when they are there, *reliably infer* the deep structure of unconscious operations from the presenting material, and make successful *predictions* (it over and over turns out) referring to the course of the analysis . . ." (p. 361, Spruiell's emphasis).

This last claim—that a case conference is analogous to an exemplar—is suggestive, but incomplete, so that the analogy limps. In Kuhn's later formulations (1970a, pp. 186-191; 1977), the scientific paradigm is renamed "exemplar," defined, as Spruiell correctly states, as a concrete problem or puzzle like those "found at the ends of chapters in scientific textbooks" (p. 357). The significance of Kuhn's reference to textbooks is the missing leg of Spruiell's analogy. It is not simply the fact that a problem has been successfully solved that makes it exemplary. That virtue derives, rather, from a disciplinary consensus that the particular problem, with its solution, constitutes an exemplary application of a law or formula to a specific empirical phenomenon which, when presented along with other similarly exemplary problems to students of the discipline in their textbooks, will show them how one problem is "like" another with respect to the applicability of the law in question. In psychoanalysis, a case conference (or a case study, for that matter) may or may not have this virtue and come to serve the instructional function of an exemplar. With this amplification we may understand what Spruiell is getting at; as it stands, however, his analogy does not quite work.

The Belgian philosopher Legrand (1973, 1974, 1975), in a series of articles, presents the most systematically Kuhnian interpretation of the history of psychoanalysis that I have found. Legrand asks two related questions, the answer to each intended to throw light on the other. First, is psychoanalysis scientific? Second, is it legitimate to speak of a psychoanalytic paradigm? To answer these questions, Legrand compares the history of psychoanalysis to Kuhn's description of a scientific revolution. Before the invention of psychoanalysis, Legrand ar-

gues, there was a neurological paradigm governing the treatment of “nervous” disease. Psychoanalysis emerged out of Freud’s rejection, on observational, methodological, and theoretical grounds, of the neurological paradigm as it applied to hysteria—neurology’s unassimilable anomaly. Within a few years, Freud had created an alternative structure which served all the functions of a Kuhnian paradigm. It set forth a theory linking the unconscious, repression, and the sexual etiology of the neuroses. It determined what facts were pertinent to diagnosis and treatment: the phenomena of free association. And it set up a method—a highly regulated mode of personal interaction—which brought the phenomena under observation. Before long, Freud had extended the paradigm beyond the realm of the neuroses in which it first emerged, into the new fields of dreams, parapraxes, and jokes. Finally, the Freudian paradigm progressively defined an organized scientific movement, beginning with informal meetings of disciples and ending with an international association, regular congresses, and the publication of a journal.

Legrand concludes, then, that psychoanalysis has a paradigm. But does that make it a science? For one thing, the psychoanalytic paradigm is not accepted by all psychologists. Legrand responds (in the first of a series of answers to rhetorical questions) that Kuhn’s criteria do not require that an entire discipline adopt one paradigm to the exclusion of all others, for a paradigm does not constitute a scientific discipline, but a scientific community within a discipline. It is sufficient that the paradigm be shared by the members of the psychoanalytic community. But is the community of psychoanalysts a *scientific* community? The decisive consideration here, for Legrand, is the nature of psychoanalytic training: analysts in training are placed in a model-situation, the didactic analysis; they learn a theory from classical texts (mostly Freud’s); and they study selected examples of concrete scientific practice, in the form of case studies. This, he tells us, is exactly comparable to Kuhn’s account of the way scientists are trained.

But does the psychoanalytic paradigm govern the practice of something that can be called normal science? Again, Legrand argues that what psychoanalysts do fits Kuhn's description. They solve problems or puzzles, "without ever calling their theoretical framework into question, at most producing interesting variants on the basic Freudian outline. Never has the work of psychoanalysts been directed toward the falsification of psychoanalytic doctrine, but rather toward its preservation, its consolidation, its extension" (1975, p. 197, my translation). Moreover, Legrand points out, when they seek to extend their work into new fields (like psychosis, or infant psychology, or the psychology of non-Western peoples), they do so "not so much with disconfirmation of the Freudian theory in mind, but in order to improve its concurrence with the phenomena" (p. 198). Legrand's statements here require comment. From Kuhn's contention (against Popper) that ordinary scientific research does not consist of attempts to falsify a theory, but rather proceeds within the framework of a paradigm (of which theory forms a part) that it seeks to extend and elaborate, Legrand seems to have constructed a faulty syllogism: normal science is characterized by the absence of falsification efforts; psychoanalysis is characterized by the absence of falsification efforts; therefore, psychoanalysis is normal science. Indeed, Legrand has executed a *double* fault. He has treated Kuhn's *negation* of Popper's theory of science as if it were the major constituent of Kuhn's own theory of "normal science," when Kuhn's theory is actually constituted by his designation of the normal activity of scientists as puzzle-solving. To be sure, Legrand includes puzzle-solving as a sign of science as well, but he does not say what puzzles are being solved, and he clearly emphasizes non-falsification as somehow decisive.

In spite of defects in his argument, however, Legrand represents a high point in Kuhnian studies of psychoanalysis, in that he reflects on the meaning of Kuhn's terms. In other cases, Kuhn's terms are separated from their meaning and used for their symbolic value, with ambiguous and confusing results. An

example is Eissler's (1969) treatment of the theme. "In every one of Freud's papers it is possible to find one or more paradigms. It was his special gift—as yet unmatched by any other analyst—to look at data in a form that led at each turn to the discovery of paradigms" (pp. 464-465). Now since for Kuhn a paradigm is a structure governing the work of an entire scientific community, Eissler is unwittingly suggesting that Freud founded not one but dozens of psychoanalytic mini-communities, each single-mindedly pursuing the trail of its own chosen Freudian insight, a conclusion he surely does not intend. Eissler multiplies paradigms by using the term as a synonym for insight or concept, effectively weakening Kuhn's category. At the same time, Eissler retains and even exaggerates the uniqueness of a paradigm by denying to Freud's successors the possibility of discovering any at all. "Freud extracted all the paradigms that could be gained from the observation of patients on the couch. With his death, psychoanalysis entered the phase of 'normal science'; it has stayed in it since then" (p. 465). Notice that it is Freud's *death*, not the consolidation of his theories, that begins the period of normal science. Eissler's graceful admission (p. 466) that his view of Freud's singularity may be the bias of a "native Viennese" underplays another possibility: the likelihood that to a classical analyst the scientific status of psychoanalysis may be overshadowed by the legendary stature of Freud, whose lifetime then defines the Heroic Age—Kuhn's period of extraordinary or revolutionary science.

PSYCHOANALYTIC CRISES

In Kuhn's terms, a crisis in science is signaled by the persistence of anomalies that challenge the prevailing paradigm to the point of throwing the community of scientists into disarray, causing some of its members to question the very foundations of their discipline. In discussions of psychoanalysis, however, precision with respect to anomalies is as rare as it is for para-

digms. A case in point is Lifton (1976), who describes a *mood* of crisis—made up of a “deep uneasiness, bordering on despair” and an atmosphere of chaotic eclecticism” (p. 63) that confuses all issues—but fails to identify anomalies.

With somewhat more precision, Legrand (1973, 1975) locates the crisis in therapeutic failure, manifest in such symptoms as indefinite prolongation of treatment, increasing difficulty in defining the criteria of cure, and loss of interest by psychoanalysts in clinical research in favor of theoretical investigations of dubious clinical application. Legrand implies that these problems constitute a true anomaly that is central to the paradigm, and he calls for a radical change of theoretical framework.

The point of making a case for crisis, of course, is to prescribe a new candidate for paradigm to replace the one that is in trouble. Several have been proposed. Knobloch and Knobloch (1979) look back to H. S. Sullivan, among others, for an interpersonal model that would transcend and absorb the intrapsychic structure of the classical paradigm. Schafer (1976) advocates a quasi-behavioristic paradigm in the form of “action language.” Lifton (1976) offers a “formation” paradigm that he believes will recognize the developmental, adaptational, and interactional potencies in the human historical psychic structure in a way that the Freudian paradigm does not. Legrand (1975), allying himself with the Freudo-Marxism of Castel (1973) and of Deleuze and Guattari (1972), proposes a reconstruction of psychoanalysis in which social as well as psychical forces would be acknowledged.

That the arguments for crisis tend to be circular is made especially clear in Legrand’s treatment, owing to its greater elaboration. Legrand uses Kuhn’s *descriptive* criteria to establish that psychoanalysis is a science in order to be able to demonstrate, on the basis of Kuhn’s *historical* model, that its present condition is one of crisis. Legrand then takes this demonstration as license to characterize an internecine battle in “French Freud” as the critical struggle over an anomaly, to identify one side in that battle as having correctly located the anomaly, and

to point to that side's position as the embryo of the emerging paradigm that will resolve the anomaly, replace the old paradigm, and re-establish the now problematic scientificity of psychoanalysis. Significantly, Kuhn's model permits Legrand to do all this with little reference to the actual merits or deficiencies of any of the positions considered.

Of course the charge that psychoanalysis is in a state of crisis preliminary to a new scientific revolution has not gone unanswered. Arlow (1975), for one, argues that the structural theory of mind remains, fifty years later, a valid basis for continued, fruitful research in psychoanalysis. But for its strength to be universally recognized, he suggests, the structural theory must be purified, that is, freed from metapsychological propositions which he regards as both outmoded and misleading because they belong to quite another realm of discourse than the realm in which the structural paradigm truly resides: the clinical setting. Were this purification to occur, Freud's innovation in *The Ego and the Id* would emerge unmistakably as having established "a frame of reference that . . . render[ed] more comprehensible the data obtained from the clinical setting of psychoanalysis, emphasizing how organized groups of mental functions relate to each other in the course of intrapsychic conflict" (p. 518). Arlow sees the structural hypothesis as paradigmatic not simply because it is a unifying *theory*, but more especially because of its operational power in clinical work and clinical discovery. Modell (1975) shares Arlow's position that the structural hypothesis remains a viable, though imperfect, paradigm, differing from him, however, on the nature of the imperfection. Modell takes the view that the paradigm offered in *The Ego and the Id* should be modified to take into account new clinical data regarding object-relations disturbances, data that had already provoked one attempt at a revolution. Modell argues that, while such a revolution is not needed, the questions raised by it can and must be addressed within the structural paradigm itself.

Astley (1974) also takes a dim view of those who anticipate a post-Freudian paradigm, aiming at them a heavy Freudian gun.

He charges them with “resisting” both their need to personally come to terms with Freud’s work and the knowledge that what they really seek is the destruction of psychoanalysis itself, a destruction that would codify their resistance and constitute a cultural as well as a personal regression. Gitelson (1964), arguing against the need for a new paradigm, turns the tables on the crisis Kuhnians by using Kuhn’s arguments against them. He quotes Kuhn:

“Let us then assume . . . that crises [in science] are a necessary precondition for the emergence of novel theories and ask how scientists respond to their existence. Part of the answer, as obvious as it is important, can be discovered *by noting what scientists never do* when confronted by even prolonged and severe anomalies; *they do not renounce the paradigm which has led them into crisis*. They do not, that is, treat anomalies as counterinstances. . . . This generalization is simply a statement from historic fact. . . . Once it has achieved the status of a paradigm, *a scientific theory is declared invalid only if an alternative candidate is available to take its place*” (p. 466, Gitelson added the emphasis).

Gitelson concludes: “This is the state of affairs in psychoanalysis. No more than other scientists can psychoanalysts reject their paradigms when faced with anomalies or counterinstances.” For, quoting Kuhn again, “‘they could not do so and still remain scientists . . .’” (p. 466). So Gitelson has them: if they want to be scientists, they must act like scientists. If Kuhn’s account of the behavior of scientists authorizes their self-identification, then that very account forbids them to abandon the paradigm. “Restating the issue in my own terms, it is not enough to declare that there are seeming divergences from theory, as is the case with those who turn away from psychoanalysis. Such divergences must in fact be proven to be unas-similable into the existing theory whose validity, as I have shown, must in the meanwhile be assumed” (p. 467). Thus Kuhn’s account, descriptive in the hands of its originator, becomes prescriptive in the hands of Gitelson.

CONCLUSION: OF WHAT USE KUHN?

Several kinds of misuse of Kuhn's *Structure of Scientific Revolutions* have emerged from this survey: invocation of Kuhn's terms for their symbolic value with little regard for their actual meaning; confusion about the nature or number of psychoanalytic paradigms; unclarity about the precise correspondence of the constituent parts of a psychoanalytic paradigm to the Kuhnian model; and obfuscating use of the model as a polemical weapon.

What is to be done, then? Shall we say that any application of the Kuhnian model to Freud's achievement or to the subsequent history of psychoanalysis is misguided and misleading? Perhaps—but not yet.

Two observations may clarify the problems encountered here and put us in a better position to determine whether Kuhn's history of science, which has been so misapplied to psychoanalysis, may nevertheless be legitimately used for it as well. First, many of the writers discussed in this paper have asked more of Kuhn's model than its categories can deliver, by treating them as epistemological or normative when their domains are historical and sociological and their power is merely descriptive. Second, they mistakenly take Kuhn's model as a fixed structure, when Kuhn (1970a, 1977) himself does not, for he has revised it repeatedly. Indeed, the heuristic value of Kuhn's model depends upon its dialectical tension with historical data, so that not only are the data read through the model, but the model is modified in turn by the data.

What is called for is a subjection of the "psychoanalytic revolution" to a Kuhnian analysis that will be both more thorough and more critical than any I have reported upon here. By "critical," I mean having at the outset a series of questions in whose answers there is no preinvestment, questions not only about Freud but about Kuhn as well. Such a project would try to correlate in historical and descriptive detail the Kuhnian categories of paradigm, normal science, crisis, anomaly, scientific

community, and the rest, with the invention and development of psychoanalysis not only with a view toward seeing how (or whether) psychoanalysis fits the model, but with a view toward commenting upon the range and limits of Kuhn's model itself. Approached from both directions, the bearing of Kuhn's model on the scientific claims of psychoanalysis is more complex and more interesting than when it is taken to be a kind of litmus test for separating science from nonscience. If such a test exists at all (and it may be only an American obsession with the prestige of science, combined with a narrow definition of the word, that demands one), it is surely to be found in the method, not the social organization, of the field. Popper is right about this, whether or not his "falsifiability" test is the correct one. Moreover, Kuhn's history of science does not really contradict Popper on this point. Kuhn and Popper are talking past each other, because they address different aspects of science. Popper is talking about the logical structure a scientific statement must be capable, in principle, of being given, and Kuhn is talking about the organized daily practice of scientists who are not, after all, called upon to justify the scientific character of their work to Popperian challengers as they go. At the same time, the distinction between science and nonscience should not be taken, by either side, as dividing sheep from goats. Just as psychoanalysis cannot use the name of science as a shortcut to credibility, a substitute for evidence and logic, so critics of psychoanalysis cannot vitiate its theories simply by asserting that they are not science.

There is a real issue between those who see psychoanalysis as a science and those who see it as something else—a therapeutic, humanistic, or hermeneutic discipline—but that issue should not be reduced to a claim of truth and effectiveness if it is a science, and a charge of fabrication and futility if it is not. It would be helpful in this regard if the word "science" were either unequivocally restricted to the study of physical manifestations of nature, like photons or nerve cells, or unabashedly extended to the systematic study of any phenomena whatever (cultural as

well as natural), as is the case with such European equivalents as *Wissenschaft*. But American usage tries to have it both ways. We privilege "science" because it implies the rigorous experimental procedures and indubitable achievements of, say, atomic physics or molecular biology; but then we allow the word to slide from natural to social to behavioral and even to hermeneutic "science," carrying the privilege but not the rigor with it. And so Kuhn is co-opted, against his will, to justify psychoanalysis as a science, not by its method, but by the sociological form of its practice and the psychological investments of its practitioners. This will not do.

The kind of analysis proposed here is not likely to have a simple outcome. Perhaps it would show that while the invention of psychoanalysis derived from the breakdown of a paradigm in some prepsychoanalytic field or other, the "resolution" of the anomalies that Freud offered has not taken on the cognitive, the instrumental, or the consensual attributes of a true paradigm. It might even become apparent that the nature of psychoanalytic data is radically incompatible in any case with the particular structure of knowledge Kuhn sets forth. But from the other direction, it may turn out instead that Kuhn has described characteristics of intellectual innovation in general, so that, far from distinguishing science from other forms of inquiry, his model can be used to throw light on the history of any systematic discipline whatever. In any case, at the end of such an exercise, we should have refined our understanding both of what Freud accomplished historically, and of what Kuhn has contributed to the historiography of intellectual change.

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Sudden Onset of Anti-Chinese Prejudice in a Four-Year-Old Girl

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To cite this article: Martin A. Silverman (1985) Sudden Onset of Anti-Chinese Prejudice in a Four-Year-Old Girl, The Psychoanalytic Quarterly, 54:4, 615-619, DOI: [10.1080/21674086.1985.11927122](https://doi.org/10.1080/21674086.1985.11927122)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927122>



Published online: 28 Nov 2017.



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SUDDEN ONSET OF ANTI-CHINESE PREJUDICE IN A FOUR-YEAR-OLD GIRL

BY MARTIN A. SILVERMAN, M.D.

Racial and ethnic prejudice is not a simple phenomenon. It is the complex result of multiple factors—cultural, economic, group psychological, and individual psychological. The socio-economic factors, by and large, are beyond the competence of a psychoanalyst to elucidate. Psychoanalytic investigation can provide observations, however, that can help shed light upon the psychological factors involved in generating antipathy toward a particular racial, ethnic, or religious group.

Ackerman and Jahoda (1948), Bird (1957), Zilboorg (1947), and others have addressed themselves cogently to the psychological factors involved in prejudice and bigotry. They have emphasized the importance of problems involving narcissism and narcissistic vulnerability, aggression, hatred and self-hatred, identifications, identification with the aggressor, castration anxiety, superego defects, symbolism, and the mechanisms of denial, exteriorization, projection, and displacement.

This communication is extracted from a longer, forthcoming paper on the connection between symbolic expression of unconscious emotional conflict and racial prejudice. A clinical vignette will be shared that illustrates the way in which chance dovetailing between certain attributes of a particular racial group and key aspects of highly charged, conscious and unconscious emotional conflicts can contribute to the development of racial or ethnic prejudice in a young child.

Cora was just under four years of age when she startled her parents, neighbors, and nursery school teachers by suddenly expressing intensely negative feelings about Chinese people. She could not tolerate the sight of an Oriental person, nor could she bear even to hear of anyone who was Chinese. Everyone

was flabbergasted. Nothing had occurred that to anyone's knowledge could account for Cora's strange new aversion. She had never expressed such feelings about any group of people before, and no one could imagine how she had developed such an attitude. She always had gotten along well with everyone in the highly diverse, polyglot, urban neighborhood in which the family resided. Her parents were not aware of harboring ill-will or negative attitudes toward any racial, religious, or ethnic group, and they were at a loss to understand what had come over her.

Cora was the younger of two children, two years apart in age, born to a young, middle-class couple. She adored her older brother, even though he tended to tease and at times even to torment her. When he was in the mood for it, he could be quite affectionate with her, but her own affectionate overtures to him most often were coldly rebuffed. At times, he initiated sexual play between them. For example, he would lie on top of her in bed or invite her to engage in exploration of each other's bodies. There was repeated friction and squabbling between them. It was most regularly noticeable in the bathroom when they were being bathed together. Cora's brother would tease her about her not having a penis, and she would sputter and fume in a frustrated, unsuccessful attempt to come up with a suitable retort. To complicate matters, Cora's father, whom she deeply loved, often was away from home on extended business trips, during which she was quite noticeably sad and dejected. There were serious problems in her parents' marriage, furthermore, and her father was beginning to talk about leaving for good. Her mother was intermittently preoccupied, unhappy, and irritable because of the marital discord.

What all this had to do with Cora's abhorrence of Chinese people remained quite mysterious until a chance remark by another child in her nursery school class provided an unexpected solution to the mystery. When the remark was repeated by an adult who had overheard it, this led to the realization

that Cora's intense anti-Chinese feeling had begun after a boy in her class had made the following suggestion to her: "Let's play a game. I'll show you my penis, and you'll show me your china."

Cora's mother responded in several ways. She discussed the differences between the sexes with Cora, and she had a series of talks with her in which she tried to clarify Cora's anatomical and linguistic misperceptions and to help her to appreciate and value herself as a female. She stopped bathing the two children together and provided Cora with somewhat better protection against her brother's mistreatment of her. Her father arranged to spend more time with her, and he attempted to reassure her that he loved her. He indicated to her that no matter what happened in the marriage, he always would remain interested in her and would be devoted to her. Cora's anti-Chinese sentiment vanished, never to return.

It is clear that the sudden, unexpected outbreak of racial prejudice in this little girl was the product of an emotional reaction to all that was going on in her life. She was being teased, taunted, and humiliated by her brother. Her father was abandoning her for long periods of time, and she felt that she was in danger of losing him altogether. Her mother's emotional availability was inconstant, as she was prevented from tuning in consistently to Cora's needs by all the troubles she herself was experiencing. And she certainly was not giving her the protection she needed from her brother.

Cora was presented with the need to find ways to deal with a set of exquisitely painful narcissistic injuries and with intense rage at the very people whom she most loved. Unable to tolerate what she was feeling and unable to take effective action to relieve it, she seized upon the linguistic error of her nursery school classmate as a metaphorical avenue through which she could escape from her inner distress. She symbolically linked the words "china" and "vagina," which helped her to redirect her attention—away from the hurt and rage she felt inside and

toward a group of substitute objects outside her whom she could disparage, denigrate, and despise in place of herself and her family members.

Instead of hating herself and her femininity in response to the rejection she felt she was receiving from her brother and father, she could, via reversal and identification with the aggressor, turn on a group of outsiders as objects of her hatred and scorn. She could reject them the way she felt she was being scorned and rejected at home. She could salvage her regard for herself and for the love objects in her family by splitting off all the negative feelings and ridding herself of them by aiming them instead toward objects outside herself and outside her family.

She connected Chinese people with the female genital her brother had derided because of his castration anxiety and his fear of his sexual excitement. Thus she was able to deflect the self-hatred she had developed as a seemingly devalued person and to project it onto others. When her mother helped her to understand that her brother's taunting derived from his own problems rather than from defectiveness in herself and when her father reassured her somewhat as to her lovability, her need for this kind of projective scapegoating greatly diminished.

Cora was able to protect her libidinal ties to her love objects within her family by xenophobically selecting a group of strangers, very different from her family members, onto whom she could displace her disappointment with and rage at her parents and brother. Zilboorg (1947) in particular has emphasized the importance of this mechanism in the dynamics of racial and ethnic prejudice. When her parents became aware of her pain and took steps to ameliorate it, her fury at them and at her brother subsided. Her need to displace her rage to people outside her family diminished, therefore, and she could give up her antipathy toward Chinese people.

One outstanding feature of the episode described in this communication is that Cora's selection of the target group for her negative feelings was based purely on accidental factors. The

only link between the group of people toward whom she suddenly developed intense animosity and the emotional conflicts within her from which those feelings were derived was a remark made by a boy that contained a misunderstanding about two words that sounded similar. If this is all it takes for someone to be chosen to serve as a victim of prejudice and bigotry, without even the remotest rationale for the attitudinal shifts that are involved beyond the mere sound of a word, is anyone justified in feeling safe?

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"China" As a Symbol for Vagina

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To cite this article: Sheila Hafter Gray (1985) "China" As a Symbol for Vagina, The Psychoanalytic Quarterly, 54:4, 620-623, DOI: [10.1080/21674086.1985.11927123](https://doi.org/10.1080/21674086.1985.11927123)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927123>



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"CHINA" AS A SYMBOL FOR VAGINA

BY SHEILA HAFTER GRAY, M.D.

The patient was a scientist in her late twenties who came for psychoanalysis with a presenting complaint of vaginal anorgasmia that had persisted throughout her marriage and that had proved refractory to counseling. She had not been similarly disabled outside of marriage. She also suffered from an inhibition to publish her work under her own name; she therefore had not completed her doctoral dissertation. She was, however, readily capable of doing outstanding research which she permitted her immediate supervisor to present as if it were his own.

Extended evaluation confirmed the presence of a stable neurotic character structure with marked obsessional features which were residua of a painful childhood obsessional neurosis that had never been treated. Psychoanalysis appeared to be the treatment of choice, and it was consequently instituted.

The initial associative material suggested the presence of phallic oedipal concerns, but these did not seem to condense into a meaningful pattern. In the second year, the patient reported a dream.

I was preparing to give a dinner party with [my husband]. I was setting the table, and I went to the cabinet where my party dishes are stored. I found they were all broken. It was frightening. I woke up and found my period had begun. I was bleeding profusely.

This dream failed to preserve sleep, in part because the profuse menstrual flow impinged on the patient's awareness, but, as the accompanying affect of near terror suggested, in larger part because it could not guard against the emergence of the memory of a primary anxiety-provoking experience.

The first association to the manifest content was that the

dishes in question were her wedding china. The marriage had been contracted when the patient was twenty-three years old, after significant pressure from her parents. They had been appalled to discover that their daughter had become sexually active in graduate school, and they hoped that a stable marital relationship would "put a lid on her id." The patient, who had just begun a long course of study in a demanding science, was not ready to make a permanent commitment, although she enjoyed many aspects of the existing relationship with the man who became her husband. While she was willing to accept passively the decision to marry, she had little time for or interest in the actual wedding plans, wedding presents, and the like; to avoid making any decision, she adopted as her silver and china patterns those of her mother and maternal grandmother, which were identical. She could, she reasoned, look forward to receiving some of these valuable household goods when the older women no longer had use for them and could thus "complete" her party service without much trouble or expense.

"Dinner party" brought to mind *The Dinner Party* by Judy Chicago, which the patient had seen a few months earlier. She had been impressed by the avant-garde nature of the explicit vaginal symbols depicted in this artistic production in a conventional women's medium, china painting.

It seemed clear that the dishes in the dream stood for the word "china" and represented "vagina." When this was communicated to the patient, she recalled her mother formally imparting sex education to her younger sister when the patient was six years old and the sister almost four. The little girl could not pronounce "vagina" and would speak of her "china." In this context, the patient told of her belief, held "since time immemorial," that her body was in some unspeakable way defective.

Continuing her associations over the next few sessions, the patient remembered her menarche, and the emergence of an accompanying and persistent fantasy, which she spontaneously labeled irrational but which she could not quash, that the menstrual flow proved that her genital had been irreparably dam-

aged through a process outside her control. This idea was all the more troublesome to her in the present when examined in the light of her early, quite accurate knowledge of the existence of two kinds of genitals, male and female, and of her many experiences of herself as feminine and competent. The dream confirmed to the patient her continuing, unconsciously held belief that her female organ, which was represented by the highly condensed symbol of her wedding china, had been permanently damaged. It was therefore unavailable for effective use in the marriage relationship, represented in the dream by the dinner party she was preparing with her husband. These ideas were readily connected with her presenting complaint.

Through the analysis of this dream, we discovered a path which led to the source of the patient's neurosis. In the short term, we were able to note that at the time of transition between adolescence and young adulthood she had experienced a newly emerging capacity to view herself as an autonomous, sexually and intellectually competent, feminine person. The decline of this capacity seemed temporally related to the events which culminated in her marriage and might be causally related.

Eventually, over the long course of the psychoanalysis, we were able to reconstruct an early experience which formed a basis for the patient's symptoms. There had been a brief, overwhelmingly traumatic hospitalization for a surgical procedure just weeks before her mother had gone to the hospital to give birth to the next child. The contrast between her own pain and isolation and her mother's obvious joy in the new baby led this very bright child to the conclusion that her wish for independent, feminine creative functioning was dangerous and could eventuate in physical damage and mental anguish. The parents' later disapproval of her overt sexual activity evoked the anxiety of this early event, which the patient had come to see as a consequence of her creative feminine strivings, and she returned to her prior neurotic adaptive stance. She became the docile,

compliant, helpful, and definitely asexual little girl who was content to wait for permission to be a woman at some later time. This was symbolized by her hope of receiving some family china as a gift.

The feminine oedipal nature of the core neurotic conflict was unequivocally communicated in the symbolic equation, china = vagina.

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A Fetishist's Dream

Harvey Kelman

To cite this article: Harvey Kelman (1985) A Fetishist's Dream, The Psychoanalytic Quarterly, 54:4, 624-628, DOI: [10.1080/21674086.1985.11927124](https://doi.org/10.1080/21674086.1985.11927124)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927124>



Published online: 28 Nov 2017.



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A FETISHIST'S DREAM

BY HARVEY KELMAN, M.D.

The psychology of fetishism is associated with the childhood theory of the phallic woman. The fetishist is thought to substitute some symbolically related object for the absent maternal phallus in order to disavow his mother's "castration." The motive for the fantasy of the phallic mother is clear in this formulation. The source of her penis is not. The following fragment of a dream analysis suggests that the source of the maternal penis can be found in the genetic precursors of the fantasy of the phallic woman.¹

The patient, a middle-aged oral surgeon who had been a stocking fetishist since childhood, sought analysis shortly after bondage foreplay precipitated an anxiety attack. During the middle of his treatment, at a time when his homoerotic interest in the analyst was accompanied by increasing anxiety, he dreamed:

Paul Gracie built a pipe that went over to my house, down my chimney, and into my furnace. I somehow didn't even know about it.

Paul Gracie was an older colleague. A failure in his practice because he was argumentative with patients, he had turned to work in "tooth pulling factories" where teeth were indiscriminately extracted and replaced with ill-fitting plastic dentures. The patient had once seen the results of Paul Gracie's work on Mrs. Cagney, an elderly woman, whose appearance had been ruined by careless extraction. Although the patient had attempted some repair of Mrs. Cagney's mouth, he had not been altogether successful. To lose teeth, as she had, was "like chop-

¹Although the dream analysis was extensive, only those parts bearing on this theoretical issue are included in this report.

ping off fingers. The problem with it is that you can't ever make it right again."

The pipe in his dream was associated, in part, with the patient's attempts to "make it right" in another area. He was reminded of "PVC [plastic] pipes used for drainage and sewage." Plastic sewage pipes reminded him of the lifelike plastic penis he had recently given his wife as a bitter joke. "If she wasn't satisfied with the job mine did for her she could damn well have one of her own." His wife, like Paul Gracie, was argumentative. On the night of the dream, for example, she had "chewed me out because I didn't rub her clitoris the right way. I couldn't even find the damned thing. It wasn't as though there was some kind of handle there to grab hold of."

Familiar fetishistic themes were apparent in this dream and in its surrounding web of associations. Castration was represented by the thoughts of dental extraction, as mutilative for the patient as chopping off fingers. Dread of female genitalia appeared in a number of elements. Their possible mutilative quality was apparent in his association—with characteristic upward displacement—about being "chewed out" by his wife on the night of the dream. This dread took several defensive turns: toward amusement in the case of Mrs. Cagney's grotesque toothless mouth (penisless genitalia) and toward anger in the case of the wife who had no "handle." The phallic woman appeared in the dream elements "Paul Gracie" and the "pipe." The latter was associated with plastic prostheses for both the toothless mouth (Paul Gracie's stock-in-trade, Mrs. Cagney) and for the female genitalia (the plastic penis). The former suggested the formula "penis + woman" by a juxtaposition of names.

This composite name, half masculine and half feminine, was a dream representation of the fantasy of the phallic woman. Associations to each half of the name pointed to the historical origins of this fantasy. "Paul," the male half, reminded the patient of a family friend, an elderly Catholic priest. He respected this man, but also derided him for his "unnatural" celibacy. The

patient's father's "celibacy" was even more "unnatural." He suspected, from hints and innuendo, that his father's second marriage had never been consummated. He also blamed his mother's drug addiction on the frustration that stemmed from his father's unusual sexual continence. The father was also connected with the dream via the associational element of the plastic prosthesis. He also had had an artificial penis, a wax one, partially melted, which the patient, as a young boy, had discovered in a box in his parents' room. ("Melted penis in a box," as it developed later, was the patient's representation of his explanation for his father's celibacy, namely that the father had been impotent.) "Gracie," the female half of the dream name, was the name of the patient's maternal grandmother, a "black Irish hypochondriac—an *old lady* all of her life." His associations, however, pointed not to his grandmother but to his mother. She was, for example, his *old lady*, an oedipally loaded term that he used at different times to mean both "mother" and "wife." He skipped a generation in the dream representation of his mother for two reasons: first, to avoid any oedipal inference ("My mother was no dream girl," he had said, referring to her drug-related deterioration); second, to underscore that she was indeed a partial source of the dream character but one associated with elderliness. She had been, in fact, older than her husband, and she had aged faster and died first. This idea of the aged mother-grandmother figure was also associated with Mrs. Cagney, the elderly "oral castrate" (it was common for the patient, in dealing with difficult situations, to swagger and joke that he was "tough like Cagney"—hence the formula: Mrs. Cagney = mother).

The analysis of this dream casts some light on two theories of the source of the maternal phallus. In the first, the ascription of the penis to women is thought to originate in the narcissistic valuation of the boy's own organ. Little Hans (Freud, 1909), for example, insisted that both his mother and his sister had penises principally because he had one. Likewise, it was young Leonardo's (Freud, 1910) own penis which was the referent for the

organ of the phallic mother. According to this view, the source of the maternal phallus is the boy's own penis; *i.e.*, it is a projection. A second explanation holds that the maternal phallus originates in the child's fantasy of his mother's expropriation of his father's penis. Klein's (1932) patient Kenneth, for example, imagined his seductive nurse to wield frightening phallic objects, an image he associated with his parents locked in perpetual copulation, whereby his mother permanently incorporated his father's penis. Similarly, Egon (Klein, 1932), a nine-and-a-half-year-old schizoid boy, built and drew representations of single humans of indeterminate sex which he associated with perpetual parental coitus. According to this second view, the phallic mother is a product of parental part objects: "The woman with a penis always means, I should say, the woman with the father's penis" (p. 245).

While these two theories are not necessarily mutually exclusive, analytic dissection of the phallic mother figure would lead to different genetic antecedents depending on which of them was predominant in a given case. The theory based on narcissistic valuation should lead to a picture in which the phallic mother's penis could be shown to be a projection of the fetishist's own organ. The theory of parental condensation, on the other hand, would find genetic origins that included both mother and father.

Analysis of the "Paul Gracie" dream suggests that it is the latter theory that best explains the origin of the phallic woman in this case. Paul Gracie's name in the dream is a nodal point in an associational fork. Forward from this point one is led to associations of castration, dread of the female genitalia, and the fantasy of the phallic woman, all of oedipal origin, and all connected with the patient's fetishism. Backward from this point there are two associational chains: one leads to mother, the other to father. Both join at the "Paul Gracie" point, a dream representation of the phallic woman. Without exception, both father and mother were associated with elderliness. This invariant relationship suggests an attempt by the patient to date himself in the dream (*i.e.*, they are very old = I am very young).

This feature, plus the forklike structure of the Paul Gracie associations, suggests that in the patient's mind the phallic woman was an old composite figure formed, as in the dream, from a fused male-female parental image.

Several other lines of evidence also illustrate derivatives of the patient's unconscious tendency toward parental fusion fantasies. His associations in general were replete with indiscriminate plurals. He often spoke of "my parents" when, in context, he meant either his father or his mother. Sometimes, in slips of the tongue, he substituted one for the other. It was particularly telling, for example, that it was never completely clear in this man's mind which parent had been the owner of the wax penis he had discovered. Primitive fusion theories, one of the features that gives fetishistic disavowal its particularly bizarre quality, were also an intrinsic part of his fetishistic fantasies. On one occasion, for example, he saw an especially attractive woman at a swimming pool and remarked, oblivious of the physical impossibility of two bodies occupying the same bathing suit at the same time, "How I'd loved to have been wearing that bathing suit so I could just run my hand along her ass and feel the smooth curve of it."

These fusion theories, plus the patient's dream associations, suggest that "Paul Gracie" was a historically meaningful dream condensation. This condensation and the pathogenic fantasy construction of the phallic woman can be thought of as having a common source, the primitive fantasy of fused parental part-objects, the so-called "combined parent" (Jones, 1933).

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Jahrbuch Der Psychoanalyse. Beiträge Zur Theorie Und Praxis. (Yearbook of Psychoanalysis. Contributions on Theory and Practice.) Band 14, 1982, 305 pp.; Band 15, 1983, 333 pp. Stuttgart: Frommann-Holzboog.

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To cite this article: Tobias H. Brocher (1985) Jahrbuch Der Psychoanalyse. Beiträge Zur Theorie Und Praxis. (Yearbook of Psychoanalysis. Contributions on Theory and Practice.) Band 14, 1982, 305 pp.; Band 15, 1983, 333 pp. Stuttgart: Frommann-Holzboog., The Psychoanalytic Quarterly, 54:4, 629-670, DOI: [10.1080/21674086.1985.11927125](https://doi.org/10.1080/21674086.1985.11927125)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927125>



Published online: 28 Nov 2017.



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BOOK REVIEWS

JAHRBUCH DER PSYCHOANALYSE. BEITRÄGE ZUR THEORIE UND PRAXIS. (Yearbook of Psychoanalysis. Contributions on Theory and Practice.) Band 14, 1982, 305 pp.; Band 15, 1983, 333 pp. Stuttgart: Frommann-Holzboog.

Volume 14 contains a wide range of contributions. It begins with Anna Freud's letter to the Goethe University in Frankfurt, which was read at the academic celebration of the honorary doctorate given to Miss Freud in February 1982.

Following this are papers in honor of Erich Simenauer's eightieth birthday. Two of his own contributions on the metapsychology of narcissism are included. One of them, presented to lawyers and judges in 1962 at the Berlin Psychoanalytic Institute, discusses the history and anthropology of patricide and its significance for modern penal law. He discusses the psychoanalytic notions of repression, displacement, and oedipal conflicts "to facilitate mental processes in the practitioners of jurisprudence" (p. 81).

H. Beland, one of the editors, gives an overview of the broad spectrum of Simenauer's scientific contributions between 1949 and 1981, emphasizing his research on Rilke. Of special interest is Simenauer's perspective on anti-Semitism in transference and countertransference. His conclusions about the possibility of successful treatment of this "German heritage" are rather skeptical.¹

The following contribution by G. Pankow is addressed to Simenauer's concepts of the early self, the development of body limits, and early aggressiveness in relation to narcissism. E. Hinze pleads for the necessity of formulating nosological classifications in psychoanalysis to bridge "the gulf between academic and practical psychoanalysis" (p. 123). Then U. Ehebald considers the current situation of psychoanalysis in Germany, its present challenges, some aspects of its criticism of civilization, and its therapeutic limits.

The more interesting Part III contains various clinical, theoretical, and historical contributions to psychoanalysis. W. Loch, in his "Psychoanalytic Contribution to the Mid-Life Crisis," deals with the

¹ Simenauer, E. (1978): A double helix: some determinants of the self-perpetuation of Nazism. *Psychoanal. Study Child*, 33:411-425.

losses and conflicts which have to be suffered during mid-life as the "proximal" causes of neurotic and/or psychotic developments. If narcissistic defense systems cannot be maintained, a new way of overcoming the depressive position has to be found. While the role of death can no longer be denied, a "mastering" of the depressive crisis transcends "reparation." Loch concludes that living and existing in an "alter ego . . . present in the here and now may be the means at our disposal, especially for those who find it impossible to believe that our ego shall gain a life everlasting" (p. 156). The religious and philosophical convictions of the author become evident between the lines.

A. Haynal reflects upon Freud's understanding of the dream with regard to transference and countertransference within the psychoanalytic process. He emphasizes that each analyst has to be aware of his own resistances when trying to understand dreams.

In a most interesting, but controversial way U. Grunert discusses a different method of dealing with the manifest dream. She bases her approach on increased knowledge about mother-child interaction during the preoedipal period. She uses case material to demonstrate how dissociated states of the early self become understandable in the manifest content of visual dreams. Contrary to Freud's approach, she states that "the analyst should not fear . . . also to take the manifest dream and the dream action, as well as accompanying or symbolized feelings and emotions, seriously" (p. 208).

S. Stephanos presents an extensive psychosomatic case history of heart disease in illustration of his theoretical ideas. His reflections shed light on the extreme difficulty experienced in gaining insight into the psychological patterns of patients with cardiac infarction. Other authors doubt whether the underlying psychic conflicts can be resolved and the psychological patterns can be changed, but the author has a more optimistic view about the ability of a treatment team to change the psychic structure of the cardiac patient, leading to disappearance of somatic symptoms.

Sander L. Gilman discusses the male stereotypic vision of female sexuality in Vienna at the end of the last century. His examples are selected from legal, medical, and pornographic sources of the time. He indicates that male fantasies about female sexuality structured a concept of the "child-woman." Considering Nabokov's

Lolita and other contemporary stereotypes, it is doubtful that this view has disappeared. Consideration of this is missing in the author's conclusions.

V. Taehkae tries to construct a consistent, logical model of psychoanalytic psychotherapy. He hypothesizes that what is "phase-specifically curative at any given moment depends entirely upon the specific nature of the interaction and upon the level of primary object the therapist presents to the patient" (p. 287). His conclusion is: "For the psychotic patient we have to become an object; for the borderline patient we have to act as an object; and, finally, the neurotic patient we have to liberate from an object which has become superfluous" (p. 287).

The wide scope of psychoanalytic viewpoints is continued in the theoretical, clinical, and historical contributions of Volume 15. The tradition of the German *Yearbook of Psychoanalysis* permits focusing upon a cultural problem that may be different from that which pertains elsewhere. H. Beland's discussion of psychoanalytic identity distinguishes between rather primitive, inevitable, emotional group processes and psychoanalytic theory about group processes. He concludes that the quest for psychoanalytic identity "reaches its aim in a paradox: an inchoate [meaning novitiating, initiating] group process toward identity formation is applied to facilitate and protect something rational, i.e., a piece of precious experience concerning the dynamic unconscious psychic reality obtained by means of the analytic process . . ." (p. 66). As a consequence, "the feeling of belonging, excommunications, conservatism, and a dislike of theory will be dominant" when (irrational?) group identity and rational analytic understanding share a common language with "the dominant evolutionary-affective group identity" (p. 66). The article contains some controversial opinions about psychoanalytic training, identification with subgroups or with individual training analysts, the intolerance of analysts toward each other, and the fact that the availability of psychoanalytic treatment is limited by the German medical insurance system for the majority of potential patients. In a critical tone, Beland scores the atavism and the compulsive narrowness of role distributions created by irrational group processes among psychoanalysts (which seems to be a German heritage), leading to stagnation, disintegration, polarization within analytic groups, group taboos, and group self-deceptions. These ir-

rationalities, hostilities, intolerances, condemnations, and heroizings tend to be denied. We can be reminded of Freud's critical view that with psychoanalysts as with patients everything that has been learned tends to be lost under the forces of the next resistance.² Although the specific problem may be especially inherent in the German scene, Beland's observations might have a certain validity in other cultures as well.

The inclusion of Herman Nunberg's commentary on Freud's *Outline of Psychoanalysis* is especially welcome, since the original article³ has never before been translated into German.

W. Loch, in "On the Question of Sense—The Subject and Freedom," concludes that "Love is to be with oneself in the other," quoting M. Theunissen to emphasize that psychoanalysis is a system of special interactions between the patient and the analyst in which "the one may experience the other not as a limitation but as a condition for the possibility of his own self-realization" (p. 96). When sense and rationality obtain, something that has never been translated into consciousness before is raised to the level of language. The words coined thereby create an object. Binding, protective rules within the analytic setting, as a firm basis for proceeding, form the common background object. Through understanding the secret motives and hidden reasons for the subject's actions, "the subject itself realizes that it has its origin not in its products but in a negation, in a 'zero' position which in itself is an equivalent of freedom" (p. 95). Loch alludes to the fact that the conditions are valid for both sides, but only between the lines. He considers the analyst a "genuine authority," who, if the dialogue is "good enough," lets one emerge through the other. There may be some truth to this, but no criteria are provided by which it can be determined that the "dialogue" can be considered "good enough."

S. V. Hoffman investigates the concept of internalization. His thesis is that the difference between the inner and outer worlds, the worlds of introjects and of reality, of identifications and the social environment, contains moments that can promote the development of neurosis.

² See *Gesammelte Werke*, 1914, Band X, p. 91.

³ Nunberg, H. (1950): A commentary on Freud's *An Outline of Psychoanalysis*. *Psychoanal. Q.*, 19:227-250.

The clinical contributions of D. Pines and S. Stephanos are based on case histories. Pines draws her material from direct observations of mothers handling eczematous babies and from the treatment of two women with a history of eczema. The core content deals with the handling of the transference and countertransference, as mirrored in dreams. This is a challenging task for the analyst because of confusion on a primitive level. Stephanos discusses a case of psoriasis. He describes a clinging dependency on the mother as an omnipotent object. The cure is attributed to overcoming of imprisonment by the omnipotent object through a process of developmental progression that "culminates in a productive recreation of the father figure." It is not quite convincing, although one might expect distortions of early object relations in many dermatological disorders.

In a historical contribution E. Haas describes Freud's cocaine episode and discusses drug addiction. He notes that the problem of addiction is left out of Freud's later works. He comes to the conclusion that the revenants of Fleischl, Fliess, and, later, Jung are incarnations both of Freud's nephew John and, above all, of the early deceased brother Julius. The significance of this brother in Freud's self-analysis, in his physical and mental health, and in his creativity is examined in great detail.

J. G. Reicheneder examines Freud's extensive transformation of Breuer's "cathartic method." He states: "The importance that Freud attributed to Breuer's treatment of Anna O. cannot be historically supported in his own writings, which indicates a limited understanding of his own research process, thereby also possibly cutting off certain important scientific and theoretical roots of psychoanalysis" (p. 249).

The last part of Volume 15 contains several contributions to applied psychoanalysis. G. Pankow, in a rather philosophical paper that draws on French literature and on Solzhenitsyn's writings, discusses the formation of the body image as a basis for experiencing time. H. Henseler's contribution relates two clinical examples to Melville's *Moby Dick*. He comes to the conclusion that the tormenting thirst for vengeance of narcissistically enraged people can be interpreted as an expression of warded-off oral desires. This contrasts with Kohut's interpretation of the narcissistic phenomena in terms of defenses against instinctual conflicts.

These two volumes reflect the creative efforts of a group of dedicated psychoanalysts in West Germany. A long blank space covering the period between 1933 and 1950 is painfully evident. Quite a number of psychoanalysts who were forced to emigrate because of the Nazi dictatorship have tried to support the rebuilding of psychoanalysis in Germany. Their influence is fading, however. There are only a few analysts left who belong to a generation that had a truly international view and scope. Some of the contributors to Volumes 14 and 15 of *The Yearbook*, e.g., Loch, Beland, Simenauer, and others, who have published papers in previous editions, demonstrate that they possess a wide scope and a broad knowledge of psychoanalytic theory. The editors nevertheless are confronted with the problem of finding sufficient, worthwhile contributions.

It is the merit of the German *Yearbook* that it maintains a high level of scientific and professional discourse and a continuous effort to keep up with international publications. E. Simenauer describes the reality of the situation in West Germany in presenting his skepticism about full awareness of the anti-Semitic and partially fascistic tendencies that are mirrored in the arrogance of omniscient attitudes. The German *Yearbook*, in its efforts to maintain the high level of psychoanalytic competence that is represented by its current editors, deserves the full support of psychoanalysts in other countries.

TOBIAS H. BROCHER (NEUSS, W. GERMANY)

THE UNWELCOME INTRUDER: FREUD'S STRUGGLE WITH CANCER. By Sharon Romm. New York: Praeger Publishers, 1983. 164 pp.

Throughout history, interest in the interaction between psyche and soma has been subject to broad swings of the pendulum. Advances in the "exact" biological sciences have focused attention recently on the quantifiable and reproducible aspects of disease. New knowledge has not brought the hoped for medical millenium, however, and attention has turned once again to psychological and psychosocial influences on physical well-being.

In this climate, a book about Freud's encounter with the cancer to which he ultimately succumbed seems apropos. Romm, a plastic

surgeon, notes in her introduction that some of her patients with resectable cancers go on to lead productive lives, but others are quickly overwhelmed by their malignancies and die. She creates the expectation that she will address the factors that determine in general whether the cancer or the patient wins and what may have existed in Freud's own life that enabled him to hold the inevitable at bay for sixteen productive years. The reader's expectations are not fulfilled, however.

By drawing on the writings of Ernest Jones,¹ Max Schur,² and Felix Deutsch,³ and including a study of the meticulous case notes of Freud's long-time surgeon, Hans Pichler, as well as interviews with Helen Schur and others of Freud's Vienna, she gives us a day-to-day medical history of Freud's long illness. She fleshes it out with details of the personalities and daily lives of the main characters involved. Anatomical drawings illustrate the procedures that were followed in the surgical interventions. For the first time, we are given detailed illustrated descriptions of the series of cumbersome prostheses that were developed to replace diseased structures necessary for eating, drinking, and speaking. Romm confirms the nature of the tumor and convincingly deduces its anatomical location.

Romm illuminates the courage with which Freud submitted to each of the thirty surgical procedures he underwent. He struggled with "the monster"—the prosthesis in its various forms—with tenacity, and, despite pain and fatigue, he resumed analytic work promptly after each procedure. *The Ego and the Id* was published in 1923, *Inhibitions, Symptoms and Anxiety* in 1926, *The Future of an Illusion* in 1927, *Civilization and its Discontents* in 1929, etc. All of these were produced in the midst of pain. The achievement is indeed remarkable. Our curiosity is piqued, however, as to why Pichler, who had already produced one hundred and thirty-six satisfactory prostheses, was unable to make Freud's particular "monster" comfortable. Was this failure a reflection in somatic

¹ Jones, E. (1957): *The Life and Work of Sigmund Freud, Vol. 3: The Last Phase, 1919-1939*. New York: Basic Books.

² Schur, M. (1972): *Freud: Living and Dying*. New York: Int. Univ. Press.

³ Deutsch, F.: (1956): Reflections on Freud's one hundredth birthday. *Psychosom. Med.*, 18:279-283.

language of Freud's unconscious feelings about his "dear neoplasm"?

Freud self-injuriously used rationalizations to permit him to continue smoking despite a tobacco-related neoplasm. It is clear, however, that a very powerful force for survival must also have been at work in Freud. It held sway for thirteen years, until a second malignancy appeared that led to his death. This kind of force, current knowledge would indicate, stimulates immune mechanisms, via the hypothalamus, that boost immunologic surveillance and mobilize physiologic defenses that help to keep malignant processes in check.⁴ In Freud's case, this permitted an incomparably useful, creative life to continue until he reached the age of eighty-three.

Romm also reports in the book on Freud's meetings with Stefan Zweig and Salvador Dali, and on Dali's drawings of Freud's head. All of this is interesting, but it does not seem relevant to the book's theme.

Romm has presented new historical, technical, and scientific intelligence about Freud's struggles with cancer that is quite welcome. For those of us with an interest in inner as well as outer processes, however, many questions remain unanswered.

CAROLINE S. KOBLENZER (PHILADELPHIA)

LE JEUNE FERENCZI. PREMIERS ÉCRITS, 1899-1906. (The Young Ferenczi. First Writings, 1899-1906.) By Claude Lorin. Paris: Editions Aubier Montaigne, 1983. 360 pp.

This interesting volume attempts to correct a myth held in many quarters that Sandor Ferenczi was always either the loving, submissive child of an idealized Freud or the rebellious and eventually deviant son, by demonstrating that Ferenczi had a very original and independent mind of his own. His unpublished preanalytic writings are examined in great detail by Lorin, who puts them in the context of their sociocultural period in Hungary. What

⁴ See Fox, B. (1981): Psychosocial factors and the immune system in human cancer. In *Psychoneuroimmunology*, ed. R. Adler. New York: Academic Press, pp. 103-148; and Palmblad, J. (1981): Stress and immunologic competence: studies in man. In *Op. cit.*, pp. 229-254.

emerges is considerable respect for Ferenczi and for his knowledge of literature and philosophy. His admirable character traits of courage and willingness to espouse unpopular causes (for example, that of the homosexual in society) come through. The breadth of Ferenczi's writings is quite fascinating. For example, he had a deep, somewhat naïve belief in the occult and influenced Freud to pursue an interest in this area and to participate with him in seances. Some of his writings—for example, on menstruation—and his belief in the poison theory of menstrual fluid illustrate his naïve espousal of popular myths because of his own internal needs.

In 1898, before having come into contact with Freud's ideas, he initiated a largely unsuccessful attempt at self-analysis via automatic writing. He was influenced in this by the Surrealist movement.

It is of interest to compare the breadth and nature of Ferenczi's preanalytic writings with those of Freud. Each clearly bears the characteristic stamp of its author. Ferenczi was more aroused by speculative passion. He was more clearly drawn to issues by his own personal needs and was more aroused to activism against social injustice than was Freud. To a careful reader, the strengths and weaknesses of Ferenczi's career can be found in embryo in this work. The book is a valuable addition to the early history of a great psychoanalytic pioneer.

FRANCIS BAUDRY (NEW YORK)

PORTRAITS OF THE ARTIST. PSYCHOANALYSIS OF CREATIVITY AND ITS VICISSITUDES. By John E. Gedo, M.D. New York/London: The Guilford Press, 1983. 303 pp.

John Gedo is a bold, energetic, independent thinker with a wide range of interests and an approach that is conservative and innovative at the same time. He is staunchly committed to traditional Freudian psychoanalytic views, but it is quite evident that he regards them as neither perfect nor sacrosanct. It is clear that he believes our psychoanalytic understandings require continual refinement in an asymptotic pursuit of a completeness and perfection that can be approached but never fully attained. It also is clear that he regards the clinical situation as the most useful laboratory in which to carry out that quest.

Gedo looks upon the difficulties encountered in the course of psychoanalytic work less as indications of limitations in the usefulness of the psychoanalytic approach than as opportunities for exploring the possibilities of improving and enhancing it. A clinician who thoroughly enjoys the excitement of clinical investigations, he does not shrink from difficult clinical problems but welcomes them as pathways to important discoveries that are worth the trouble it takes to arrive at them. An inveterate questioner, he repeatedly examines traditional beliefs from fresh and original points of view that cast new light upon them. The ideas that emerge often are novel, surprising, or even startling. One may agree or disagree with them, but it is impossible to come away without feeling stimulated, invigorated, and the better for having made the encounter.

When someone who himself is so creative turns his attention to the subject of creativity, we can only look forward eagerly to the results of his intellectual labors. Gedo's latest book both satisfies and in one, paradoxical sense disappoints this reviewer's expectations. On the one hand, it contains a number of intriguing, thought-provoking ideas about creativity and about certain creative artists and thinkers who have stirred Gedo's interest. On the other hand, his observations provoke a strong desire in the reader to understand the unusually talented individuals upon whom Gedo focuses, but they leave at least this reader feeling teased and hungry for much more than the tasty but tiny portions that are served up in the book.

Gedo turns his attention upon so many different topics that he is not able to delve into any one of them in great depth. The first third of the book is devoted to a group of general observations on the creative process and on some specific problems with which certain creative individuals have to struggle. He points out that creativity is much more than the regression in the service of the ego described by Ernst Kris. It emanates from both conflict-derived and conflict-free sources. It is epigenetic in its evolution and utilizes both primary and secondary process functioning in tandem. It contains an important element of repair of faulty "creativity" of self-perception and self-esteem. It is modeled on feminine, procreative creativity and implicates all levels of development, preoedipal as well as oedipal.

Gedo draws heavily upon his clinical experience with creative individuals, although he coordinates his own ideas with the contributions of others who have attempted to use psychoanalysis to learn about creativity. He describes male patients who recall having felt, as precociously intelligent children, humbled "in realizing that, in comparison with the procreative potential of an adult woman, their own efforts to produce something from within themselves are paltry, inanimate, and meaningless" (p. 49). Other impediments to the realization of creative potential which he has observed include inability to develop an idealizing, guiding relationship to a master or to one's craft; grandiose goals that result in an inability to narrow one's aims and sights to but one or a few creative modalities; inability to restrict excitement and tension to an optimal, productive level; and inability to tolerate the temporary disruptions of productivity which are inevitable in creative work.

He describes multiple problems with which creative women must contend. One is competition between creative activity and maternal, procreative activity. He expresses particular concern over impairment of a woman's creative capacity when she diverts herself from developing it during what may be crucial years, between twenty-five and thirty-five years of age, to raise children. He also addresses himself to many women's difficulty in breaking free from a stultifying, passive attachment to their mother, the complexities involved in identifying with their father's creativity without feeling that they are "castrating" him and "robbing" him of it, etc. He (tantalizingly briefly) cites his experiences with a number of homosexual men whose sexual inversion served the protective function of freeing them from "a symbiotic orbit in which they had been reduced to instruments of a woman's narcissistic strivings" (p. 82). The latter had deprived them of the "sense of autonomous functioning" necessary for the pursuit of creative endeavors.

He disagrees with Eissler that sexual intimacy needs to be renounced for high quality creativity to be possible. Analysis, he points out, at times can heighten the capacity for both of these. Genius, furthermore, does not preclude normal development. Gedo emphasizes that extraordinary potential can be realized only if the child's special gifts are sufficiently recognized and nurtured by their caretakers. Future geniuses, he indicates, underestimate

their gifts, contributing to a fragile sense of self-worth that most often needs external reinforcement. They tend to idealize one or both of their parents or, as in the case of Freud, great historical figures through whom they can reach toward realization of their own potential.

The latter two thirds of the book contains studies of Picasso, van Gogh, Gauguin, Caravaggio, Cézanne, Nietzsche, and Jung. There is merit to Gedo's observation that the relationship between personal psychopathology and creative production is so variable that many individuals need to be studied to get a feel for what is involved. Nevertheless, it would have been less frustrating to the reader had he examined fewer subjects in greater depth (although if his aim is to stimulate interest in learning more about the people he describes by reading about them elsewhere, he indeed is successful).

Gedo's observations are fascinating. Picasso and van Gogh, he asserts, both were "essentially incapable of functioning effectively in ordinary human contexts when left to their own devices" (p. 107); they feared and hated women and had an obligatory need for an empathic, supportive partner to enable them to create. He cites evidence for the existence of a symbiotic relationship between Vincent van Gogh and his younger brother Theo. He finds evidence too for Picasso's having had a series of relationships with idealized men, beginning with his father. These relationships were supplemented by positive relationships with women who helped offset his intensely negative feelings toward his mother. Gedo also explores Vincent's religious grandiosity, his identification with Christ, his unbridled rages at those who disappointed him, and his idealization of suffering.

The kinship between van Gogh and Paul Gauguin was based on a shared identity as "mad artists" (p. 139). Despite Gauguin's idealizing self-portrayal as a passively suffering, Christ-like, romantic primitivist victimized by society, he actually was a hard, offensive, nasty, and arrogant egoist who raged at the world in a paranoid manner when it failed to agree with his own inflated view of himself. The manner in which Gauguin's psychopathology entered his art is illustrated rather convincingly by Gedo via the presentation of a number of representative samples of Gauguin's work. Among other things, Gedo concludes that "Gauguin succeeded in creating

a superb body of work on the theme of human helplessness by directing his attention away from his *own* helplessness to that of women in primitive societies" (p. 157).

Caravaggio and Cézanne, for Gedo, represent two instances in which "a chronically paranoid artist [could] execute works of the highest order when neither the medium nor the subject matter [impinged] on his delusional world" (p. 193). Caravaggio created brilliant religious masterpieces despite a progressive disintegration into temper outbursts, violence, homicidal rages, and an eventual chronic paranoid state from which he never recovered. Cézanne, in order to remain sufficiently under control to be artistically productive, needed to assiduously avoid subject matter that touched off his bizarre, psychotic fantasy life. For many years he had to avoid painting human figures altogether. Gedo puzzles over these two artists without being able to do more than speculate about them, since very little is known about their early lives.

Gedo then turns briefly to the relationship between Nietzsche's work and his psychopathology. The focus is upon the traumatic effects upon Nietzsche's self-esteem and capacity for human intimacy of the loss at age five of his beloved father, followed immediately by the death of the younger brother he thought his father had preferred. Finally, Gedo focuses at length upon Carl Jung's break with Freud. His main thesis is that Jung did not merely turn to Freud as an idealized father but deified him as the god-like or at least apostolic leader of a powerful new secular religion. When Freud failed him in this transference search for a grandiosely idealized successor to the powerless minister father of his childhood, he turned upon him, according to Gedo, "as a reincarnation of his inadequate father" (pp. 258-259). He abandoned both his father and Freud. His grandiosity now unchecked, Jung slipped into a delusional, Christ-like paranoia in which "he began to feel that his own unconscious was divine" (p. 262). He disparaged and attacked his Jewish precursor, Freud, denounced the Judaic deity, Yahweh, as a vengeful, unjust, patriarchal "embodiment of perfectionism, a divinity without love for mankind" (p. 266), and developed his own private religion.

I have presented but a brief outline of *Portraits of the Artist*. It is a book that is well worth reading in its entirety. I recommend it to anyone who works clinically with creative individuals or who is

interested in the creative process. I also recommend it to those who are interested in the passions, problems, and latent potentials of more ordinary people. It is clear that Gedo's interest in creative genius derives in part from his perception of a touch of genius in everyone.

MARTIN A. SILVERMAN (MAPLEWOOD, N.J.)

CONTINUITY AND CHANGE IN ART. THE DEVELOPMENT OF MODES OF REPRESENTATION. By Sidney J. Blatt, in collaboration with Ethel S. Blatt. Hillsdale, N.J.: Lawrence Erlbaum Associates, 1984. 411 pp.

In their efforts to understand the psychology of art and of creative processes, psychoanalysts and psychoanalytically oriented scholars have, in recent years, turned for enlightenment increasingly to questions of form and style, rather than subject matter. The earlier pursuit of the determining unconscious fantasy, in the context of a drive psychology model, has proved of little value in elucidating or defining what is specific to the artistic product or the processes that generate it. Current work, therefore, tends to focus more sharply on the role of ego functions, particularly those in Hartmann's "autonomous" sphere, as they give shape and structure to whatever conscious or unconscious affective and ideational elements enter into the artist's work.

The history of art bears witness to the dominance, at every era, of certain governing modes of representation that characterize the recognizable and identifiable style of the period. We can readily distinguish an Egyptian from a Byzantine from a Renaissance fresco painting, irrespective of variations determined by the hand of the artist or artists who created it. Every artist works either within or in reaction to the dominant mode of representation of his or her time; it is the rare genius who is able to rupture the mold and create a new representational paradigm—a process in art akin to Kuhn's model of a "scientific revolution."

It is this process of stylistic evolution that Blatt, an eminent clinical and research psychologist, in collaboration with his wife, an art historian, has sought to explain. To do so, he uses as his conceptual base the developmental psychology of Jean Piaget and attempts to correlate the successive representational modes in Western art to

the stages of individual cognitive development outlined by Piaget and his school. Blatt's argument is, essentially, that the stages of development of modes of representation in Western art follow a line from sensorimotor, pre-operational, and concrete operational stages to the more abstract, formal modes that characterize the dominant styles of modern art. ("Post-modernism" is not considered.)

The collaborating authors muster very substantial data to support their argument. In the process of doing so they offer a concise, if somewhat conventional, history of Western art from the Lascaux cave paintings through the various stages of ancient, classical, and medieval art, into the Renaissance, Mannerism, and Baroque, and on to the development of Romanticism and Impressionism that gave birth to the Postimpressionist, Cubist, and Abstract movements of the past one hundred years. Their historical information is presented intelligently, sensitively, and with appropriate, if sparse, black and white illustrations. And they do not neglect—indeed, they emphasize—concurrent development in the scientific and sociopolitical spheres, in order to emphasize their thesis that each mode of representation is an expression of a prevailing *Weltanschauung* that makes itself known in all areas of cultural experience.

Each phase of individual and, in the authors' view, of cultural, development is marked by characteristic ways of conceptualizing both space and objects. Thus, in Paleolithic times, space was conceived topologically, with objects seen in isolation and bounded, in a two-dimensional plane; this correlates with a sensorimotor mode of object perception based on the experience of satisfaction of immediate needs through action sequences. In the Greco-Roman period, however, where proto-Euclidean concepts of space first appeared and were elaborated, objects were seen as organized groupings, and three-dimensional space began to achieve representation. This is correlated with Piaget's "intuitive" stage, in which general schemata are formed, objects can be cognized independently of context, and perceptual (but non-mathematical) perspective appears. In the Renaissance period, concrete operational notions of spatial organization emerged, with geometric coordination and with space conceived as a homogeneous container. Here, transformation, reversibility, and conservation characterize

object representations, with a stabilized self-concept as the coordinating center of the perceptual ordering of the one-point perspective that was the revolutionary contribution of this period.

Later, multiple perspectives became prominent as, with progression toward formal operational modes, the capacity for identification with the perspective views of others emerged in Mannerism and the Baroque, and concern shifted from the representation of manifest features of the object to an interest in its internal structure. It was these developments that led, by way of Impressionism, to the Cubist revolution of our century in which post-Euclidean geometries served to reconceptualize notions of space and in which more abstract structural and transformative views of objects achieved representation. All subsequent phases and movements of modern art derive from this conceptual leap, tending toward even greater abstraction and emphasis on the formal elements of the object as represented on the picture plane. The latter has been successively transformed from a field of magical action to a window on space to a surface on which formal relations are worked out without necessary relationship to "real" objects. The red thread of continuity in the historical context of change is well and convincingly set forth.

As must be apparent, there is little if any psychoanalytic contribution to this thesis or its elaboration. Though Blatt is clearly familiar with psychoanalytic ideas, they are evoked only with regard to questions of "self" formation as they arise with the Renaissance emphasis on individuality, and in a brief critical aside on the inaccurate claim of the Surrealists to special access to and use of "the unconscious." The case stands or falls, rather, on the plausibility of the fit between Piaget's postulated stages of individual cognitive development and the successive stages in the history of culture. The authors argue their case persuasively, if at excessive length and with a propensity for grinding repetition. (One has the impression of a collection of course lectures, with a perceived need to review old ground each time a new concept is about to be considered.) The fit between individual and cultural stages is tight, and the reader emerges with the sense that an intelligent argument has been effectively advanced, with substantial scholarly support.

Yet, questions do remain. Piaget advanced the view that the developmental stages he proposed are universal; sociocultural factors

may influence the precise ages of transition, but, except perhaps for formal operational thought, each will occur in the same sequence in all persons of normal endowment in all cultures. Are we to believe, then, that no one in Paleolithic times—not even the artist/shamans—advanced beyond the level of sensorimotor intelligence? Or that no one in the Renaissance—even such universal geniuses as Alberti and Leonardo—achieved formal operational thought? And if they did, why did this level of cognition not show itself in the art of the period—presumably the province of its most advanced thinkers? It should be noted that Steinberg¹ sets forth a powerful argument that the change in representational modes between Byzantine and Renaissance periods was based on theological-doctrinal considerations, rather than on developmental-psychological ones. May it not be, that is, that the Blatts' thesis represents a mode of analogic thinking that equates correspondences with identities?

And what of the art of the rest of the world? Can this set of propositions deal with, say, Chinese art, in which the mode of representation has remained essentially unchanged for two thousand years? Does the absence of linear perspective in Chinese art constitute evidence that the Chinese remain locked into preoperational thought? Lévi-Strauss² suggests that the same modes of cognition exist in all cultures—that there is no “primitive” or “savage” mind *per se*; anthropologists have taken a rather dim view of the nineteenth century concept of cultural evolution. Yet something of the sort certainly emerges from the present volume. Rubin's³ recent study of the role of “primitivism” in modern art emphasizes influences, affinities, and structural resemblances that would seem to cast doubt on notions of fundamental divergences in underlying cognitive frames between so-called “primitive” sculpture and modern art movements. (Sculpture is, by the way, barely mentioned in the Blatts' study.)

In sum, this volume constitutes an imaginative, intriguing, but less than thoroughly convincing attempt to correlate cognitive de-

¹ Steinberg, L. (1983). *The Sexuality of Christ in Renaissance Art and in Modern Oblivion*. New York: Pantheon.

² Lévi-Strauss, C. (1966). *The Savage Mind*. Chicago: Univ. Chicago Press.

³ Rubin, W. (1984). “Primitivism” in *Twentieth Century Art*. New York: The Museum of Modern Art.

velopment and evolving modes of representation in Western painting. For the psychoanalyst interested in these matters, and particularly in the critical role of formal considerations in the creative process, it will provide stimulation and suggestive insights. Its pertinence to and employment of psychoanalytic theory itself are, however, minimal. As to its fundamental thesis, the Scotch verdict applies: *non liquet*.

AARON H. ESMAN (NEW YORK)

PSYCHOANALYTIC THEORY OF ART. A PHILOSOPHY OF ART ON DEVELOPMENTAL PRINCIPLES. By Richard Kuhns. New York: Columbia University Press, 1983. 169 pp.

The author somewhat apologizes for this slight book's presumptuous title when he states in the preface that a "psychoanalytic theory of art, in its philosophical implications, should . . . be readily available in a short exposition . . ." (p. xi). An attempt to provide a "short exposition" should be reflected in the book's title or at least in its chapter headings, all of which are global in scope.

Richard Kuhns, a professor of philosophy at Columbia University, generally stays within the topographical model (apparently out of lack of awareness of its limitations). His frequent use of the imperfect topographical metaphor "deep" becomes an unfortunate confusion among: intense, broadly based, developmentally early, concrete, and widely affecting.

With the exception of a brief discussion of Winnicott, it is hard to see why the book is subtitled "A Philosophy of Art on Developmental Principles." The book is all but devoid of discussion of ontogenesis and its relation to creativity. Kuhns notes, "The developmental . . . has two dimensions: in the growth of the person and in the history of each art" (p. viii). Perusal of the book reveals little of either. Although his writing is turgid, when Kuhns is expository, he borders on naïve overinclusiveness. The book, although beautifully printed, contains a surprisingly large number of misspellings.

Kuhns's classification of art closely follows Kant (not so noted). Yet, the book suffers from lack of distinguishing among the plastic, tonal, and linguistic arts. In general, Kuhns addresses only aspects of "linguistic art," probably the easiest to study psychoanalytically.

Accurately indicating that Freud's theories have roots in the "positivistic and idealistic" theories of the nineteenth century, Kuhns, with regard to art and culture, emphasizes how Hegel informs Freud's work. Yet, it seems strange, especially given the depth of Freud's intellectual interests, that Kuhns says, "This is not to argue that Freud read Hegel, or had any interest in Hegel as a thinker . . ." (p. 5). Kuhns might have researched the many excellent studies that have been made of the origins of Freud's thoughts, including careful study of Freud's personal library.

In the preface, Kuhns introduces what might be his most valuable contribution when he makes the point that "*culture is a tradition of enactments*" (p. ix). Psychoanalysis has long needed a term for cultural objects, including the art object, that connotes their psychodynamic significance. His concept of *enactment* carries the connotation of the development of an external *something* expressive of the meaning with which it has been endowed. His term *enactment* provides an important linguistic distinction between such objects and *object* in the psychoanalytic interpersonal sense, while maintaining the possibility of their being derived developmentally from common origins.

In the first chapter, Kuhns suggests that he "will help psychoanalytic theory realize all of which it is capable" (p. 9). Although this captures our interest, our hopes are disappointed. Kuhns, underestimating important sectors of psychoanalytic theory, mainly points to the rather stale criticism of a lack of balance between the cultural and the intrapsychic influences in psychoanalytic theory. Although Kuhns appreciates the dialectical nature of the influence of culture on intrapsychic events, he does not make enough distinction between the layering kinds of additions, the accretions, which are so important to the psychoanalytic topography, and the modification of experience through subsequent experience—so important to learning and environment theorists. Kuhns does not realize that in addition to recognizing the transmuting effects of experience, psychoanalysis recognizes co-existent continuance of unaltered, psychically active accretions of vast consequence and significance.

Kuhns relates Freud's method, the case history, to the late nineteenth century genre, the clinical narrative, accurately clarifying that Freud's contributions are derived from description and inter-

pretation rather than from evaluation of palpable variables. As Kuhns more fully explicates the centrality of "interpretation" in psychoanalysis, he rightly uses the dream as a model. Unfortunately, in this chapter, he overextends the concept of "transference." He suggests that "'transference' refers to the ways in which the artist reacts to, makes use of, reinterprets, and restructures aesthetically the tradition within which work was carried out" (p. 22). In a like overextension of the concept of "countertransference," Kuhns develops ideas about "audience response." Although we are woefully devoid of analytic studies of response to art, Kuhns makes a mistake in invoking "countertransference" in this context. I agree that "there is the history of the object, and there is the history of the individual" (p. 21). Yet, in examining "audience response," it must be considered that more important than the history of the object are the multiply condensed meanings, in the images, each with a historical ranking that reverberates with multiply condensed experiences that are historically ranked within the viewing individual. Condensation, a concept that might have helped Kuhns greatly, is absent in the book.

In his discussion of style, Kuhns develops a view that is even more reductionistic than the one often placed accusingly at the door of psychoanalysis. For example, he states, "Every artistic style and each personal artistic history possesses an organization of meaningful elements that go back to primal repression" (p. 26). To his credit, Kuhns enlarges the concept of *iconography*, so important to art historians. He proposes that "where the iconographical elements are traditionally limited to discriminable objects that have been given a specific meaning through a tradition of artistic reference" (p. 27), iconography also has specific personal meaning. This idea, similar to Mary Gedo's,¹ helps establish the role of psychoanalysis in enhancing the study of iconography and in understanding art as autobiography. Kuhns also places a clear and proper emphasis on the importance of cultural objects as agents of as well as organizers of inner experience.

The fourth chapter, "Psychoanalytic Theory at Work: Style, Expression, Truth," is the most helpful chapter. Kuhns makes a plea for "psychoanalytic interpretation of the object, not of the artist"

¹ Gedo, M. (1980): *Picasso: Art as Autobiography*. Chicago: Univ. Chicago Press.

(p. 87). He indicates that although studies that relate art to events within the life of the artist are continuous with one aspect of Freud's study of art, they are not the totality, or perhaps, as contrasted with the study of the art object itself, the most important aspect of what Freud contributed to the study of art. As a parallel to the study of the art object, Kuhns accurately invokes the interpretation of dreams as a paradigm. In dream interpretation, Kuhns mistakenly states, "Control is gained . . . under the guidance of the clinician" (p. 93). In fact, "control" in the interpretation of dreams comes from the dyadic interplay of the dreamer's associations and the interpreter's awareness. In art appreciation, Kuhns notes that "control is gained through wide experience, knowledge, and the capacity to respond to the right things in the right way" (p. 93). The vagueness of the statement suggests that he does not have a clear idea as to where the "control" in the monadic process of art interpretation comes from.

Although Kuhns's concept of enactment is useful, I predict his concept of the "art-life" will be short-lived. By "art-life," Kuhns seems to have in mind the study of that aspect of the creative person that is directly involved in creativity, a refinement of Freud's "pathography." Yet, his attempt to embrace what he proposes amounts to a cop-out: "It may be, indeed, that such an effort exceeds our capacities as workers in the human sciences, and that the product exceeds the bounds of a compassable object, but the effort is a development out of the psychoanalytic theory of art whose possibilities remain unexplored" (pp. 124-125).

Kuhns's study, in the last chapter, of several of Emily Dickinson's poems is compelling. It illustrates the psychoanalytic study of a *work of art* at its best. Yet as he struggles with her imagery and the varieties of representations within the lines of her poetry, it again seems that the concept of condensation would have been immensely helpful to him. Perhaps condensation is what he means when he cryptically refers to "the metaphoric power of the *internalization of one object by another object*" (p. 133).

The book concludes appropriately philosophically with a referral to Wittgenstein's question, "What has history to do with me? Mine is the first and only world." Kuhns answers: ". . . history *makes* my world insofar as I have a world at all. My world to be sure is the only world I can know but in coming to know my world I join in

the larger historical world to which all consciousness attaches" (p. 144). Kuhns shows how enactments become part of the world; through their exploration, in that they are shared objects, a sense of cultural continuity and history can develop. "The poet dies; the poem lives" (p. 144) illustrates Kuhns's thesis that enactments are the history of and determiners of man's evolution.

In summary, although Kuhns presents some addition to the psychoanalytic study of creativity and is favorable to psychoanalysis, the book is a sketchy presentation, too often proclaiming but not demonstrating that there is more to psychoanalysis than generally thought. Yet, the book merits attention, for it represents a serious scholar's attempt to master the psychoanalytic corpus and to apply it in the study of an area of great interest.

JEROME D. OREMLAND (SAN FRANCISCO)

THE PLAY OF THE IMAGINATION. TOWARD A PSYCHOANALYSIS OF CULTURE. By Paul W. Pruyser. New York: International Universities Press, Inc., 1983. 226 pp.

Paul Pruyser must have enjoyed writing this book. He created an arena for himself in which he could be imaginative, personal, and playful while attempting, as indicated by the subtitle, to contribute to the literature on a psychoanalytic theory of culture. In the book, he tries to update and broaden the Freudian view of the imaginative facets of personal and public cultural processes. Like a kind and learned mentor and guide, he leads us through an intellectual journey that takes into account the early developmental base of what he calls the "tutored imagination." The reader is treated to a review of the epigenesis of the affective, cognitive, identificatory, spatial, and object relational aspects of the imagination, that land of magic and imagery. As the imagination flourishes in a nourishing surround, the individual's inner needs for pleasure, play, love, and comfort reach for their counterpart in the culture's symbology. Pruyser illustrates this in an ambitious survey of the visual, literary, and musical arts, scientific creativity, and a field in which he has had a long-standing interest, religion.

It is an ambitious book, written by a wise and literate psychoanalyst who has much that is worthwhile to say about the imaginative, creative process. It also is a problematic book, an all too typical

example of the difficulties involved when a psychoanalyst undertakes a multidisciplinary investigation. In his attempt to be complete, Pruyser tries to point out some of the ways the imagination articulates with each of the major fields he approaches, from early cognitive and object relations development to the arts and religion. Unfortunately, he feels compelled to create a kind of primer for the psychoanalytic reader, to bring him up to date on some of the more recent thinking and developments in each field. A deeper, more integrative psychoanalytic critique is replaced by interesting but didactic discussions that might not be necessary for psychoanalytic readers and surely are too elementary for readers working within the areas Pruyser chooses. Thus Pruyser's book is a book in search of its audience. If this had been initially conceptualized more carefully, the effort might have been more successful.

However, I do want to say that a mixed review of a book that attempts to grapple with such a difficult, ambiguous, and, in some ways, essentially uncharted area is really a positive review: an unambivalent review would be one that was hailing a basic new breakthrough in this area that has frustrated psychoanalysts and aestheticians for so many years.

Pruyser's major influences are the ideas of D. W. Winnicott on the transitional object, play, early object relations, and the development and capacity to form illusion. Pruyser, following Winnicott, approaches illusion in a non-pejorative way. He attends to its aesthetic meaning, close to Coleridge's "suspension of disbelief," Keat's "negative capability," and what the anthropologist Victor Turner has called the subjunctive "as if" mode of experiencing. Pruyser tends to criticize the Freud who felt we could not fathom creativity, tended to reduce religion to a pejorative illusion, and believed that humanity must emancipate itself from its natural, infantile, instinctive needs. Freud felt we require renunciation, sacrifice, discontent, and a transformation and graduation from infantile roots toward a state in which sublimation of the drives is possible.

Pruyser quotes from *The Future of an Illusion*:

... the mild narcosis induced in us by art can do no more than bring about a transient withdrawal from the pressure of vital needs, and it is not strong enough to make us forget real misery (p. 205).

Pruyser then comments that to Freud "misery lurks around every

corner. All illusions are, in the end, vanity" (p. 205). Clearly, Pruyser's vision is much closer to Winnicott's view that we are born with a natural capacity for creativity, that we are born with an "innocence," with a tendency to play, to imagine, to dream. Man is not merely an animal, but is *homo symbolicum* (Cassirer) and *homo ludens* (Huizinga). Pruyser's view is essentially neo-Kantian, constructivist, and hermeneutic in its nature. In a Rousseauian manner, using interesting examples from his own personal, as well as general, secular and religious training, he shows how our imaginative processes are threatened from the beginning. Ritual tends to take over, and rule-ridden games can stifle creative playing. Without a good enough holding environment, the infant lacks assistance in taming its drives, leading eventually to reactive overcontrol that can rigidify imaginative playfulness.

Pruyser reviews Winnicott, but provides more organization than Winnicott was inclined to provide. Using his own language, but with Winnicottian ideas, Pruyser points out that traditional psychoanalysis has tended to see us as operating within either an autistic, inner-directed or an outer, reality-oriented perceptual world, a world of facticity. Pruyser addresses Winnicott's third world, which Winnicott termed "potential space," though he prefers the term "illusionistic world." It is not a sum but a synthesis of the dialectic between the autistic and realistic worlds. The illusionistic world includes "tutored fantasy, adventurous thinking, orderly imagination, inspired connections, verbalizable images, imaginative entities or events, cultural needs, symbols, playing, creativeness, and transcendent objects prefigured by the child's transitional object" (p. 65).

For Pruyser, the mature imagination does not simply spring into existence in pristine form. It requires "tutoring," learning the symbol systems of the culture in order to find external representability and interplay with the culture. We require "illusion processing," a long education in acquiring culturally derived skills that feed back into and nourish the imagination. This process is analogous to that of the environmental mother providing a transitional object or phenomenon to her child at the "moment of truth" without challenging the paradox that the object is both mother and infant. If a mother, a teacher, or a cultural attitude stresses too much that there is "nothing new under the sun," dark clouds that suppress the playful imagination are provided instead.

Pruyser, drawing on the object relations school and on Roy Schafer's book, *Aspects of Internalization*, stresses the importance of identification processes in providing images for the imagination. Early double identification between the self and the caretaker offers a model for creative, illusionistic re-experiencing of early transitional states, "as if mother and child are one." This has obvious derivative form in adult religious and aesthetic states.

Pruyser spends worthwhile time pointing out how the original model for the imagination is simultaneously the body and its spaces and the environment and its spaces. (I am reminded here of that wonderful book by Gaston Bachelard, *The Poetics of Space*, in which chapters are devoted to attics, drawers, corners, and basements.) I tend to agree with Pruyser that a psychoanalyst working with the arts, or with the imaginative world of a patient, will find it difficult to discard spatial metaphors as Schafer has suggested we do in his more recent work on action language.

What has Pruyser added to what Winnicott already had provided? I like Pruyser's concept of the "tutored imagination." It tends to place in proper perspective the criticism of Winnicott that implies he advocated a regressive free play. Winnicott, like Pruyser, tried to demonstrate the dialectic between culture, form, and tradition, on the one hand, and the free-ness of our natural capacity for play on the other.

Pruyser makes an important contribution in presenting an organized book on the application of Winnicott's ideas to a psychoanalytic theory of culture and aesthetics. He spells out, more than others have done, that Winnicott's view is *neither* dualistic, as the traditional Freudian view tends to be, nor monistic, with subject and object being but two sides of one coin. Pruyser's dialectical view is compatible with a general system approach that overtly or covertly informs current object relations theory. A Hegelian view of humanity emerges, with our infantile roots and our adult experiences interacting in an active, shifting, ongoing dialectical process.

Another important related emphasis that represents a fresh contribution is Pruyser's elaboration of Winnicott's "transitional sphere." In Pruyser's words, it is

a unique pattern of dynamic family relations in which certain things and certain attachments are held to be of incontestable value. The transitional object is not a thing in the ordinary sense, but a quasi-sacred entity that is constituted by a

process of make-believe in which the rest of the family conspire. The actions with and around the transitional object are not ordinary motor activities but ritual acts in which the whole family participates" (p. 58).

This family view articulates with Pruyser's theory of culture. Within a hermeneutic anthropology, the relationship between personal and cultural symbols has been studied in a similar manner, for example, by Clifford Geertz¹ and Gananath Obeyeskere.² Psychoanalytically oriented (and sometimes trained) anthropologists, such as Gilbert Herdt, Fitz Porter Poole, and Waud Kracke, also have been interested in applying Winnicott's ideas to their own field.

Mention of a related discipline brings me to some of my reservations about *The Play of the Imagination*. In the course of his deep involvement in the nonpsychoanalytic literature, Pruyser appears to have neglected many significant psychoanalytic contributions to the area he addresses. One significant omission is Gilbert Rose's important book, *The Power of Form*.³ In it, Rose describes the "transitional process," which is closely related to Pruyser's thinking about the world of the relationship between the transitional object and the cultural or aesthetic symbol. Others worth mentioning are Arnold Modell, Phyllis Greenacre, André Green, Jonathan Pedder, Werner Muensterberger, W. W. Meissner, Martin Weich, and the contributors to *Between Reality and Fantasy*,⁴ all of whom are ignored by Pruyser when he speaks of a "dearth of literature" on the developmental roots of the enjoyment of culture. In addition, in Pruyser's excursions into the philosophical and aesthetic bases for his ideas, his "allies" are Cassirer, Susanne Langer, Kant, Huizinga, Gombrich, etc., all of whom have been placed into the psychoanalytic literature by others, for example by David Beres, Joseph Coltrera, and Susan Deri.

¹ Geertz, (1973): *The Interpretation of Cultures*. New York: Basic Books, Inc.

² Obeyeskere, G. (1981). *Medusa's Hair: An Essay on Personal Symbols and Religious Experience*. Chicago: Univ. of Chicago Press.

³ Rose, G. J. (1980): *The Power of Form. A Psychoanalytic Approach to Aesthetic Form*. *Psychol. Issues*, Monogr. 49. New York: Int. Univ. Press. Reviewed in this *Quarterly*, 1982, 51:457-461

⁴ Grolnick, S., & Barkin, L. in collaboration with Muensterberger, W., Editors (1978): *Between Reality and Fantasy: Transitional Objects and Phenomena*. New York: Aronson.

As a reviewer who enjoyed this most interesting book, but also struggled with its ponderous, "tutored" style, I feel a little sad about the problems experienced by psychoanalysts who attempt to write creatively about subjects that reach toward the poetic. Perhaps I am unfair to Pruyser for mentioning this subject at all. Here and there, he turns a sparkling phrase and often he follows Winnicott, who has been accused by many within psychoanalysis of being *too* poetic. Psychoanalysis may be at a time at which imagination and science need to join each other more than ever. In a Wittgensteinian sense, the growth of our theories and techniques may necessarily lag behind and be nourished by our ability to find a vital language in which to express our ideas. Pruyser has joined in that dialogue as an active participant.

Another reservation deserves mention. Concern has been expressed about Winnicott's ideas about transitional phenomena, play, and metaphorical potential space being applied to everything and hence rendered meaningless. At times Pruyser is a bit careless about this. He does believe correctly, however, that adults do not achieve full object constancy and therefore need outer "background music" to supply the comfort that cannot be provided completely by living, by "holding" introjects, and by psychological functions.

Let me make one last point. Pruyser is a cultured man. The wide literary, critical, philosophical, psychological, and scientific literature he cites is a testimony to this. There is an implication that is felt throughout his book that the "tutored imagination" is highly sophisticated and "cultured." One "must," as Pruyser puts it, steep oneself in the riches of our literature, our art, our music, and our religious imagery. Winnicott was more of a populist. He felt (and I suspect Pruyser would agree) that magic lurks in everyone's attic, that the imagery of a culture is embedded in its language and its unconscious rituals. Winnicott addressed himself to the "creativity of everyday life," as Gilbert Rose has put it. When it comes to art, other considerations are involved as well. Cassirer, in his *Essay on Man*, demonstrated that theories of play (including Winnicott's) always have been insufficient to explain art by themselves.

In Pruyser's unfortunately all too short last chapter, he writes about an area that can and I hope will be the basis for his next book. He begins to show how Winnicott's work articulates with that

of Freud, Kohut, Erikson, Hartmann, William James, and Allport (and there are others he has omitted). Pruyser's critical, broad, multidisciplinary thinking permits him to address himself in a very valuable way to an important area in our field.

SIMON A. GROLNICK (MANHASSET, N.Y.)

PERSONALITY STYLES AND BRIEF PSYCHOTHERAPY. By Mardi Horowitz, Charles Marmar, Janice Krupnick, Nancy Wilner, Nancy Kaltreider, and Robert Wallerstein. New York: Basic Books, Inc., 1984. 349 pp.

In recent years, there has been a burgeoning interest in the brief dynamic psychotherapies. This is reflected in the very large number of books and articles which have been published on the topic recently. One must, of necessity, pick and choose carefully among these works. This book is one which all who are seriously interested in brief dynamic psychotherapy will want to read.

Horowitz, a psychoanalyst who has focused on psychotherapy research, and five colleagues describe research in brief psychotherapy conducted at the Langley Porter Psychiatric Institute of the University of California. The research and the psychotherapy method that evolved from it are unique in several respects. The authors' evaluation of a potential brief psychotherapy patient involves not only a case study approach but also an attempt to classify individuals, utilizing generally accepted psychoanalytic diagnoses, in terms of personality configuration. Their case formulation and treatment employs *configurational analysis*, which is a process based on both psychoanalytic and cognitive (specifically information processing) theory.

The use of personality diagnosis, with its consequent understanding of the patient's ego functioning, including typical defensive modes, is exceptional among brief therapists. Most practitioners of brief therapy tend merely to generalize and classify patients as either neurotic or more disturbed, and they focus on the dynamics of the specific patient without availing themselves of the wealth of psychoanalytic understanding of different kinds of personality makeup.

There is a further marked difference between this research and treatment methodology and others. Unlike the others, it includes

a deliberate attempt to conceptualize and interpret defenses rather than viewing them as troublesome impediments to the speedy confrontation of the patient's central problem and the expeditious conclusion of therapy. This is closely connected with another singular quality of the authors' approach, i.e., its sense of proportion and reality, its lack of grandiose claims of achieving far-reaching structural and characterological change in twelve psychotherapy sessions. The authors have not forgotten or disregarded such crucial psychoanalytic concepts as defense interpretation, working through, and the genetic point of view. They are *careful* in that they understand that in order to pursue a successful brief psychotherapy the therapist must initially possess as complete an understanding of the patient as possible and must be highly skilled in presenting his understanding to the patient in a tactful, yet emotionally significant way.

The book is composed of nine chapters. The first contains an inclusive and authoritative history and overview of the field of brief psychotherapy and the next two present an exposition of the authors' research design and treatment method. These are followed by five chapters, each of which describes a patient with a specific clinical personality type: the hysterical personality, the more disturbed hysterical personality, the compulsive personality, the narcissistic personality, and the borderline personality. These chapters are particularly valuable. They include discussions of diagnosis, patient style within that diagnosis, including what the authors term short, medium, and long-order patterns, typical problems facing the therapist, and tactics in therapy with each personality type. The authors then relate these dimensions to the specific patient's history, presenting problems, and therapeutic course by employing the method of configurational analysis.

Configurational analysis consists of three steps, labeled "states, relationships, and information processing." These steps are used to formulate the condition as it exists before therapy, as it changes during therapy, and as it may be evaluated in an outcome study. "States" is a term that refers to the most important recurrent states of mind of the particular patient and are classified according to the amount of control exerted by the patient. Symptomatic phenomena in general correspond to under-controlled states of mind, while over-controlled states correspond to defensive functioning.

These states of mind are then related to particular precipitating external and internal events and to defensive operations in terms of problematic, dreaded, desired, and compromise states of mind.

Relationships are tied to states of mind in terms of role relationship models characteristic of each state of mind. The models include at least three aspects: self-concept, role of the other person, and goals in the patient's interaction with the other. Again defensive operations are noted, now in relation to problematic, dreaded, desired, and compromise role relationship models.

Information processing, the third leg of configurational analysis, essentially focuses on discrepancies between reality and "inner assumptions." The focus is on how these discrepancies provoke affective responses that lead to specific states of mind and particular control operations. The authors indicate that it is the discrepancies between reality and the inner (intrapsychic) models that produce unpleasurable states of mind and the fear of being inundated with out-of-control responses. Unconscious processes then are employed to avoid the "dreaded states of mind" through inhibition of painful themes. Treatment intervention is intended to facilitate the patient's mastery of the potentially (or actually) traumatic event by aiding the patient to use insight to discriminate between fantasy and reality.

There is one serious flaw in this work. It is the attempt of the authors to devise a new nomenclature and a distinctive theoretical formulation that avoids generally accepted and understood psychoanalytic terminology and constructs. This attempt miscarries in at least two ways. One is that it tends to restate basic psychoanalytic ideas in rather cumbersome ways that detract from the clarity of exposition. Secondly, it implies, particularly in the information processing step, that a novel theory of the therapeutic process is being presented when, in fact, the idea of the patient working through an incomplete and conflicted theme that is dynamically active in his unconscious is one of the cornerstones of psychoanalytically derived treatments. Notwithstanding this shortcoming, the book can be highly recommended, both as a model for psychotherapy research endeavors and, particularly, as a very practical handbook for practitioners interested in developing competence in the demanding field of brief dynamic psychotherapy.

MAXWELL H. SOLL (DALLAS)

RECOVERY FROM BEREAVEMENT. By Colin Murray Parkes and Robert S. Weiss. New York: Basic Books, 1983. 329 pp.

The authors of this volume are well-known, highly respected investigators in their area of expertise, bereavement. This new book is a continuation of their ongoing research. The special focus is a study of widows and widowers and how they coped with the stress of losing a spouse. Parkes's 1972 publication on bereavement¹ is already a classic. In 1974, Glick, Weiss, and Parkes published *The First Year of Bereavement*.² Weiss carried the research further in his books, *Marital Separation* and *Going It Alone*.³ Now Parkes and Weiss focus on recovery from bereavement in a report of a systematic attempt to discover the roots of recovery.

They correctly note that there is a wide spectrum of responses to loss. Bereavement is the reaction to the loss through death. However, as I have suggested elsewhere, bereavement is one aspect of the mourning-liberation process, which is seen in many "loss" situations and not limited exclusively to death. Furthermore, in my own ongoing research, I find there are different bereavement responses, depending on many variables (e.g., the psychological meaning of the one who dies to the survivor, the age of the survivor, prior relationship, prior mourning processes, etc.). In my own work, I find general similarities in the mourning-liberation process, but some important differences between the loss of a child, a spouse, a sibling, or a parent. Furthermore, the elderly may deal differently with loss experiences than do children or young adults. Parkes had addressed aspects of this issue by comparing reactions to the loss of a limb, loss of work, and loss of a person.

In the work under review, the authors address another aspect of their area of study: Why did some of their respondents do less well than others? Why were there differences in recovery rates and in outcomes?

This volume consists of ten chapters and five appendices. There is an adequate reference list and a good index. The initial chapter

¹ Parkes, C. M. (1972): *Bereavement. Studies of Grief in Adult Life*. New York: Int. Univ. Press. Reviewed in this *Quarterly*, 1974, 43:139-140.

² Glick, I. O., Weiss, R. S., & Parkes, C. M. (1974): *The First Year of Bereavement*. New York: Wiley Interscience.

³ Weiss, R. S. (1975): *Marital Separation*. New York: Basic Books; (1979): *Going It Alone: The Family Life and Social Situation of the Single Parent*. New York: Basic Books.

deals with the study of bereavement. The authors prefer the term "bereavement," and they "reserve the term 'mourning' for the observable expression of grief [and] use 'grief' as the term for the overall reaction to loss" (p. 2). There might be some disagreements here, not only terminological but also conceptual. If one sticks to observable phenomenology over time, this can perhaps avoid difficulties. However, one cannot ignore intrapsychic aspects of adaptive processes and focus exclusively on observable interpersonal or even filtered self-reports. Methodology and sample size do make a difference, and the conclusions one reaches must be tempered by these multiple variables. The authors use attachment theory as their basic frame of reference. This is a powerful body of constructs, but nowhere is the question of adaptation to change, loss, and disequilibrium addressed as a normal phenomenon independent of attachment theory.

The sample used by the authors consists of relatively young American widows and widowers. Here again, one must consider limitations that may restrict the universality of the conclusions. Restricting the population to individuals under the age of forty-six, to deaths other than suicide or homicide, and to survivors who wished to be part of the study raises questions, but does not necessarily invalidate the conclusions. The methodology of assessment of outcome, the codes, the questionnaires, the intercorrelation of outcome measures, the discriminant functions analysis, and the Bereavement Risk Index are all interesting and can be of value to future researchers who can use them to compare their results with those of Parkes and Weiss. But again, questions arise that suggest further research.

The chapter on the identification of patterns of grieving is significant. It discusses predictors of "normal" and "abnormal" process and correlates later outcome with initial observations. The significance of unanticipated grief, preparation for loss, and anticipatory mourning over time is very useful conceptually. In psychoanalytic concepts, these studies deal with the ego's ability to relate to future events and traumas. Does anticipation help the prepared ego to adapt to traumas in contrast to situations where no such preparation occurs? What are the crucial factors? For example, the degree of ego integrity, ego cohesiveness, or ego resiliency may be as significant as the preparation variable. The idea

that support systems can ameliorate the effects of sudden shock must also be kept in mind.

The antecedent marital relationships, especially when these have been ambivalent and conflictful, are addressed in a chapter on complicated grief. The authors describe the syndrome of conflicted grief and note that initially such marital survivors are "not so devastated by their loss as those whose marriages had been more conflict-free" (p. 120). "But," the authors continue, "as time went on they seemed more frequently to be stuck in the grieving process, still unaccepting of their losses, self-reproachful and yearning for the return of the spouse" (pp. 120-121). The possible explanations for this observation are interesting and include "insecure attachment"; however, I find the lack of data on the childhoods of the widows and widowers a serious oversight. The death of a loved person that occurs during one's childhood can predispose one to later pathologies of the mourning process (my use of the term is along Freudian lines).

In the chapter on chronic grief, the authors describe Queen Victoria's reactions to the death of her husband, Prince Albert. The chapter does not mention Victoria's loss of her father when she was an adolescent. Therefore, it does not address the possibility that the loss of her father was a powerful predisposer to "chronic grief" and that Prince Albert may have been a "father substitute," whose death unleashed latent mourning that had been held in abeyance during the replacement era of Prince Albert. I cannot prove this, but it may be a testable alternative explanation, and it raises questions about "chronic grief," its precursors, and how it should be handled therapeutically.

The chapter dealing with the recovery process again presents intriguing ideas and, as is true with all good scientific reports, spawns additional questions on the positive historical variables that play a role in this adaptational process. When this is linked to the next chapter on the consequences of failure to recover and the very interesting clinical reports, we are given the types of data that can be instructive and useful to mental health professionals seeing such cases. The last two chapters, on the prediction of outcome and implications for care, are of clear benefit to the clinician, especially to those who do or will work with hospice populations and their families.

All in all, I found this report useful, clearly written, and in accord with my own clinical observations on conjugal losses through death. I did miss the historical childhood data, the current intrapsychic correlates of adult mourning (e.g., dreams are not mentioned), and the restriction of data to adult spouse loss through death. One last comment: The stress-strain coping model closely related to that of the ego-adaptive model has not been addressed. It is a valuable approach that should be kept in mind when one deals with the stress-strain of loss through death. Mourning-liberation processes, bereavement responses, and grief reactions are ways of coping with loss. The Parkes-Weiss monograph illustrates how one approach can be used to organize research, and the authors are to be commended for their work.

GEORGE H. POLLOCK (CHICAGO, IL)

THE LOSS OF LOVED ONES. THE EFFECTS OF A DEATH IN THE FAMILY ON PERSONALITY DEVELOPMENT. Second Edition. Edited by David M. Moriarty, M.D. St. Louis: Warren H. Green, Inc., 1983. 292 pp.

For a child, the loss of a loved one can be an especially tragic event. This book attempts to describe severe psychological sequelae in childhood and later life that follow the loss through death of a loved one: parent, sibling, or grandparent.

The book is divided into two parts. The first part consists of seven chapters by the editor, David Moriarty. This section contains his own case material and that drawn from a state mental hospital where he was director of psychiatry. Here he expresses his ideas about the significance of early loss as a causal factor in mental illness. His approach is to present verbatim interviews with adult patients who describe a childhood loss and their ongoing preoccupation with that theme. There are graphic delusional elaborations and identity disturbances in the accounts. It is difficult, however, to see how the author can be justified in making the leap he makes to his belief that early loss is a primary cause of major mental illness. On the other hand, his view that early loss is a contributory cause or precipitating factor is valid but has been expressed many times before.

Moriarty also makes a zealous plea for something to be done for

those who have suffered such a loss. Certainly no one would take issue with the tragedy and neediness of such children. But the feeling of the need to do something has led him to focus simplistically on such concrete issues as whether or not children should be allowed to view dead bodies at funerals. This leads him away from the existential tragedy before which we all feel helpless.

The author also fails to take into full consideration the wide range of possible responses an individual may have to the trauma of loss. He minimizes premorbid personality, endowment, and the unconscious meaning of the event to the child as important factors affecting the outcome, although they are mentioned by him.

The second part of the book consists of fourteen chapters, which are very loosely tied together. Moriarty describes these as "personal responses" to his section of the book. The chapters are written by people from various backgrounds. Included are psychoanalysts, psychiatrists, psychologists, clergymen, a judge, and a nursery school teacher. Some of the chapters are new to this second edition. Due to the varying levels of psychological sophistication and the varying interests of the authors, this section does not hang together very well. It sometimes wanders to such important but tangential topics as the loss involved in divorce or the impact of separation due to hospitalization of a child. The book is addressed to a mixed audience of mental health professionals and interested lay persons.

Several chapters concern themselves with aspects of psychoanalytic developmental theory that are pertinent to the subject matter. These include the development of defenses, drives, object relations, and the child's concept of death. An extremely brief psychotherapy of a six-year-old boy whose younger sister had died is reported with cautious optimism. Ostensibly, the treatment was discontinued for financial reasons. It is not clear why the child was not referred to a low-cost clinic for intensive treatment, since he was developing an obsessional neurosis. Instead, he was rapidly confronted with his hostile wishes toward his siblings, whereupon he became resistive to further therapy.

A chapter, by Santostefano, "Children Cope With the Violent Death of Parents," is interesting and thought-provoking. He reports on three children whose parents had died violent deaths. In two of the cases the death had been witnessed by the child. Two cases were in long-term psychotherapy, with an even longer follow-

up. He notes the tendency for such children to act out the aggressive aspects of the violent death they have witnessed, and he stresses the importance of helping the children to verbalize these mental contents so that they can more adaptively cope with life. He emphasizes the pathological alternatives of ego constriction, massive use of denial with impaired reality testing, or conflict with society through aggressive, antisocial behavior, which may otherwise result. The intense attachments these children rapidly formed with their therapists should be noted. I have found this to be typical of such children, and it is not at all unusual in other cases of loss in childhood. Perhaps developmental processes are on our side following such tragic events. If so, should we not avail ourselves of the opportunity to provide an intensive, long-term psychotherapeutic experience for such children? I am certainly in agreement with Moriarty's urging that we pay more attention to this group of children.

In another chapter Krinsky reports on the intensive psychoanalytic psychotherapy of a man who had lost his mother in childhood and who then had lost his brother in late adolescence. This man had great difficulty in forming close heterosexual relationships. There was a good deal in the history to suggest early mother-child pathology occurring prior to the mother's illness and death, as well as the development of a later, symbiotic relationship with the father. Such complexities always make the study of such a specific item as loss by death of a love object a very difficult matter to isolate for assessment. Perhaps longitudinal study of such children at risk would be more fruitful than retrospective evaluation.

Mason has contributed a chapter containing a subjective, autobiographical account of what it feels like to grow up after losing one's mother at the age of three years. According to his account, he went on to make a successful adaptation to life, but his description of his unique inner experience of the event and its sequelae is well worth reading.

This book highlights the need for a truly psychoanalytic exploration of the topic of early loss. Moriarty's book is aimed at a wide audience. It leans too heavily on opinion and beliefs, and it does not offer sufficient data upon which to plan for a meaningful, therapeutic approach. The kind of children he describes are very

much at risk, and many of them would benefit from therapeutic intervention. A more sophisticated study certainly is in order.

LAWRENCE SHADEROWFSKY (NEW YORK)

RENÉ A. SPITZ: *DIALOGUES FROM INFANCY. SELECTED PAPERS.* Edited by Robert N. Emde. New York: International Universities Press, Inc., 1983. 484 pp.

Jung, Ferenczi, Abraham, Klein, Sullivan, and later Mahler and Kohut variously extended Freud's seminal reconstructions of the developmental vulnerabilities of infancy and early childhood. They also demonstrated the propensities of psychoanalysts to theorize rather than to methodically research their profound conceptual differences. Spitz did not set himself the task of research clarification. But serendipity and fate presented Spitz, already an analyst of thirty years experience, the opportunity to observe and participate in a naturalistic experiment in which maturing babies were procedurally removed from the care of their incarcerated mothers. For two and a half decades, beginning in the mid-1940s, Spitz and his associates published research findings that extended the elucidation of the neurophysiological foundations of ego functions and primal defenses. Paradoxically, the full relevance of Spitz's ego-psychological observations to analytic concern with narcissistic and autoerotic regression may have been obscured by the very drama of the immediate remediation that followed his identification of hospitalism and anaclitic depression.

Emde's selection of twenty-five of Spitz's best known papers might have been intended to demonstrate the relevance of Spitz's research to the clinical and theoretical controversies that continue to divide psychoanalysis. But *Dialogues from Infancy* is more a post-humous tribute to Spitz's procreative genius, and Emde's collecting of these papers will be more appreciated by academicians and research historians than by ego psychologists.

Spitz's analytic place is anomalous. He was, perhaps, the first to undergo a formal training analysis, with Freud in 1910. He practiced for thirty years in Vienna, Budapest, Prague, and Paris before initiating his research in the United States. He was respected by child analysts but was largely ignored by other American analysts.

Spitz was rewarded in his lifetime by international, interdisciplinary recognition for his findings on maternal deprivation and institutional care of infants. Published and republished in seven languages, his work provoked and encouraged child development research and contributed to the evolving specialization of infant psychiatry.

Analytic indifference to the clinical and theoretical, ego-psychological implications of Spitz's work continues to prevail. It is all the more remarkable in connection with the profession's readiness (albeit ambivalent) to accept Kohut's implicit dismissal of ego psychology and Mahler's propensity to understate the importance of unconscious ego defenses in the development of object relations. English was not Spitz's native tongue, and his style detracts from the impact of his writings. His conceptualizations, moreover, employ a vocabulary that is arcane, e.g., "altricial," "coenesthetic," "diatrophic," "exiguity," "nidifugous."

Regrettably, this book suffers from a problem that is inherent in republishing papers that were written over more than two decades, namely, a redundancy derived from successive recapitulations. With this limitation, this collection is unlikely to rescue Spitz's ego-psychological contributions from the relative indifference of those who are not prepared to read and selectively reread. For those who are willing to do this, Spitz's papers in Part Three, on ontogenesis and metapsychology, are even more salient and valuable today than they were when they were written.

Emde divides the papers into six sections. The first is "Deprivation of Mothering," which includes five research papers describing hospitalism and anaclitic depression. They were initially criticized as methodologically naïve and conceptually overgeneralized, but verification of their essential accuracy has given them the status of "classics." Emde's bibliography of Spitz's total work does not include Soviet or East European citations. This is surprising, since Soviet bloc child care researchers are quite cognizant of Spitz. Their reparatory and preventive measures in hospitals, institutions, and infant day care centers clearly parallel Spitz's work.

"The Emergence of Dialogue," the second group of five papers, demonstrates Spitz's capacity to wring conceptual formulations from diverse, sometimes tedious research data. His most profound

ideas concern the dependency of early ego functions upon the quality of early nurture and the inherent interdependency between ego maturation and emerging self-object relations. Part Three, "The Emergence of Ego," includes two papers that should be required reading in analytic seminars concerned with self psychology: "Ontogenesis: The Proleptic Function of Emotion" and "Metapsychology and Direct Infant Observation."

"Aggression in Early Development," Part Four, comprises three papers that attest to the analytic propensity to identify with Freud in attributing hostile-aggressive intentionality to infants, although it is recognized that they lack the maturation to be psychologically aware of objects against which to feel hostile. Spitz is easier to appreciate when he cogently reviews the evidence of introjective processes that are descriptively similar to "identification with the aggressor." He refers to the "passive narcissistic organization of the ego" and the "self reproach of melancholia," as he assesses the significance of parental passive restraints and negations of toddler activities. His discussion, although brief, can help facilitate redefinition of the controversy with the Kleinians over the timetable of superego structuralization. Spitz's review of early childhood introjective propensities might be helpful in elucidating the defensive "structuralization" that is so evident in borderline and narcissistic disorders.

"Infant Psychiatry," Part Five, as Emde notes, is largely of historical significance. Included is Spitz's preliminary, "possibly even naïve" nosology of "psychotoxic" and "deficiency" diseases of infancy. Its republication conveys recognition of Spitz as the pioneer to whom the First World Congress of Infant Psychiatry, in 1980, was dedicated. Part Six, "Clinical Psychoanalysis," is comprised of two papers, both given in 1965, that are addressed to transference and countertransference.

One thing is perplexing. In the last decade of his contributions to the literature, Spitz must have been aware of the accelerating interest in the treatment of borderline and narcissistic disorders, stimulated by South American preoccupation with Klein and by fascination in the United States with the prolific and gifted Kohut. It would appear from Spitz's papers that he was oblivious to the relevance of his own earlier research to the clinical and theoretical controversies involved in this interest. Given Emde's personal and

professional relationship with Spitz, it is regrettable that he has not offered some editorial comment on this connection somewhere in the book.

Part Seven contains a brief descriptive catalogue of Spitz's sixteen-millimeter films. The book then closes with a group of interdisciplinary commentaries provided by seven distinguished professionals. They comment too parsimoniously on the scope and relevance of Spitz's work.

DALE R. MEERS (WASHINGTON, D.C.)

THE FAMILY, WOMEN AND DEATH: COMPARATIVE STUDIES. By S. C. Humphreys. London: Routledge & Kegan Paul, 1983. 210 pp.

The intriguing title of this volume is something of a misnomer. Humphreys's book is actually a collection of essays on classical anthropology. Only one essay is specifically comparative, and none attempt to relate the three topics in the title to one another.

Of the eight papers which comprise the book, half contain material of interest to psychoanalysts. The range of the remainder is unusually comprehensive: a summary of the proceedings of an anthropology conference, a review of the work of a nineteenth century predecessor, and an illustrated study of the placement of tombs and Athenian tomb-cults. The more pertinent essays concern ancient Greek conceptions of the public and private spheres and Greek attitudes toward women, death, and dying.

Gleaning what is relevant is no easy task for the nonspecialist. The author assumes familiarity with the terminology of her discipline (many ancient Greek terms are not translated), as well as with the lesser known classical dramas. Some of the most thought-provoking observations are to be found in appendices and footnotes. For example, an appendix on Greek sexuality notes that bisexuality was considered normal, that male homosexuality was not associated with effeminacy, and that homosexual relationships offered both men and women more intimacy than any other in the culture.

Humphreys's style is unusually clear for a scholarly work, and her point of view is persuasive. Her purpose is to demonstrate that the "interpretation of meaning is determined by perspective," and

that even such seemingly objective constructs as gender, family, and death can differ widely in their cultural connotations; there is, significantly, no word for "family" in ancient Greek.

She does not specifically apply psychodynamic interpretations to her data, and, in fact, she warns against simplistic transfers of values from one culture to another and against the assumption of a universal core of human experience. Nevertheless, her approach to the subject matter and her methods of analysis complement psychoanalytic understanding.

Humphreys's reason for examining certain aspects of public and private life in classical Athens is to shed light on social phenomena both of that time and of our own. This end is best served, she writes in her introduction, by "knowing the details of a few particularly rich developments, which stimulates awareness of latent possibilities or of the alternatives excluded by a particular set of categories and institutions." To achieve this, it is necessary to regard non-modern societies as complex and fraught with ambiguities. They are neither perfectly functioning alien units nor can they be viewed as contemporary culture in Roman chitons. Greek society, like all societies, was replete with "social conflict, competition, difficult choices, skepticism and people with feelings of restlessness, frustration and alienation."

Unfortunately, the format of the book does not permit a comprehensive exposition, but only provides glimpses of some assorted social predicaments in Greek society. One comes away with many interesting tidbits rather than with a detailed understanding of any particular issue. Some of the author's observations on Greek mores which were especially striking are as follows.

Classical attitudes toward women, according to Humphreys, were extraordinarily ambivalent. Virtually all information about this topic is derived from the writings of men, and the only sources of practical communications between the sexes are medical texts. Whether men and women were in fact members of the same species was still a matter of debate in classical Athens. Women were considered "psychologically unfree, incapable of self-control, powerful and dangerous," the opposite of all that was virtuous and rational in men. During the fourth century B.C. professional *gynaikonomoí*, or women-controllers, were appointed to maintain

rule over their potentially disruptive behavior. One has the impression that the men and women of Athens inhabited virtually non-intersecting universes.

On the other hand, Plato argued that women should be educated and likened their weakness, like that of the left hand, to lack of training. In practical terms, despite their reputation for incompetence, they were entrusted with household management, and as *hetaerae* provided the great men of their time with intellectual as well as sexual companionship. They were frequently depicted as capable of heroism in the tragedies and as self-sufficient and invincible in the myths of the Amazons. In ancient Greece as in Victorian Europe, women were thought to produce semen.

The nuclear family was a concept unknown to the Greeks, who viewed marriage primarily as a means to produce legitimate heirs rather than as a relationship based on affection. Intimacy as well as passion was to be gotten in the company of friends, and romantic love was regarded as "neither a guarantee nor a prerequisite for happiness."

There are also some interesting observations about the Greeks' attitudes toward death. In the archaic era, Humphreys notes, the "good death" was that of a young warrior in battle. Since old age was more frightening than death, the aim was to become immortal while young and beautiful. Plato's depiction of Socrates' calm in the face of death is representative of the philosophic ideal of the classical era, which so valued self-control that emotional displays at funerals were outlawed as antisocial. For this reason the participation of women in funerals was sharply restricted, not only because they might create a disturbance, but also because funerals were one of the few places where young men and women could actually meet one another. The hope of the pagan Greeks, rather like that of contemporary agnostics, was to be remembered in the thoughts of the living after death.

There is fascinating material here for those with the patience to search it out in the text.

JEANNE M. SAFER (NEW YORK, N.Y.)

Revue Française de Psychanalyse, XLV. 1981

Emmett Wilson

To cite this article: Emmett Wilson (1985) *Revue Française de Psychanalyse*, XLV. 1981, *The Psychoanalytic Quarterly*, 54:4, 671-683, DOI: [10.1080/21674086.1985.11927126](https://doi.org/10.1080/21674086.1985.11927126)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927126>



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ABSTRACTS

Revue Française de Psychanalyse, XLV. 1981

Abstracted by Emmett Wilson, Jr.

Metaphysics and the Unconscious. Francis Pasche. Pp. 9-30.

Pasche, one of France's most important psychoanalytic theoreticians, seems to lose his perspective when he turns to discussions of philosophy. He has long propounded the view that metaphysics is an enterprise only a slight remove from the naked unconscious. Here, he focuses on Descartes' dreams, in connection with two of Descartes' works, *The World or the Treatise on Light* and the *Meditations*. The result is a facile and glib array of hypotheses about the unconscious origins of Cartesianism, with, apparently, little appreciation of the philosophical problems Descartes was attempting to clarify. For Pasche, all philosophy is an intellectual defense against the irrationalism of the unconscious elements involved in the philosophical discussion. Philosophy, especially metaphysical thought, derives from the most primitive experiences of man, with the accessory and collusive participation of secondary elaboration. The article ends with a naïve attempt to equate Freud's "border concept" of instinct with the Cartesian discussion of the relationship of mind and body.

The Temptation of the Dream in Paul Valéry. Julien Rouart. Pp. 31-56.

The French poet, Paul Valéry (1871-1945), became interested in the study of dreams at about the same time that Freud was making his early discoveries. According to Rouart, Valéry was interested in dreams for what they might show about mental life and for the possibility that dreams might help in mastering life. One finds two attitudes toward dreams in Valéry's work: a methodical and objective approach, and a more emotional approach filled with curiosity about what dreams could show him about himself. Valéry insisted upon the heterogeneity and the disorder of dreams, characteristics which he linked to the initial stages of the creative act. He was also concerned with the theme of death in dreams, and he compared dreams to a puzzle. The psychoanalyst will see Valéry's attraction to dreams as infantile curiosity about forbidden knowledge and as a derivative of the fantasy of the primal scene. Valéry's work contains a sketch of a method for studying dreams from a semantic point of view. He saw that in the figurative and linguistic deformations in dreams there was nonetheless a conservation of relations. He was thus aware of the "double leitmotiv" of conservation and transformation. Freud's concepts of condensation and displacement are assimilated to metaphor and metonymy from a linguistic point of view. Valéry did not have the concept of repression, but he did believe that the dream was guided by a "secret aim." Although he recognized certain dynamic factors in dreams, his emphasis on meaning was entirely formal and led to the halting of his research. This represents an essential difference from Freud.

Libido, Dream, Symbol Interpretation: From Freud to Jung and from Jung to Freud. Jean Gillibert. Pp. 57-86.

Gillibert examines the Freud-Jung polemic. Such polemics may be an essential characteristic of psychoanalysis. In psychoanalysis there seems to be a ceaseless oscillation between the sort of oneiromancy that leads to boring mythologies, which Freud assiduously avoided, and the rationality for which *The Interpretation of Dreams* showed us the way. Attempts to resolve this essential ontological equivocation have led variously to an archetypal idealism as in Jung, to an intellectual idealism as in Bion, to the positivism (another form of idealism) of a purely genetic psychology, or to the positivism of the signifier (Lacan). Regarding the theory of symbolism, Gillibert feels that some important aspects have been forgotten and that there has been too much emphasis on the etymology of the word "symbol" as a "throwing together" of the world of things and the human world. Gillibert emphasizes instead reality's indifference to everything that is human and the effect that the knowledge of this indifference can have on human narcissism. There is in Freud a pessimistic note, a sort of stoicism, in the face of this indifference. Freud, however, emphasized both the joining of things to the human world and their disjointedness from human concerns. The debate continues in discussions of nature versus culture. However much one wants to make of language and symbolic unities, the acoustic images or signifiers have no autonomy in themselves. There is always a reference to a thing. The world of things is not born causally from the world of words, as Lacan postulates, nor does the contrary hold. If language is a symbolic process, it is so because it symbolizes not the absence of the thing, but the whole in which the thing in itself is included and comprehended, but does not have in itself any meaning. Language symbolizes the distance separating us from the world of things. It is dangerous to manipulate symbolism, whether in a theory of knowledge or in therapeutic practice. Symbolism lends itself to all sorts of constructions and distortions. The mistake of Melanie Klein, as well as of Lacan, was to confuse the interpretation and the dream. The interpretation shows a dream as expressing a desire beyond the dream, which Klein and Lacan both considered non-optative in itself. They forgot the dream and interpreted the allusion, the hallucination of the dream. The psychic reality of language thus became greater than the reality of the world. Psychoanalytic interpretation cannot be a hermeneutic of meaning as they try to make it. The passage from manifest to latent content involves dynamic and economic issues, which depend as much on force as on meaning. Freud had a theory of symbols which was founded on analogy, resemblance, and identity. It failed, however, to distinguish clearly between sign, symbol, allegory, and image, and was not adequate to define fully the nature of the symbol. But even if Freud was misled by a linguistic model, he never thought that sexuality could be expressed entirely in closed symbols. The preeminence of the linguistic model at the level of the symbol had already been the stakes in the Freud/Jung polemic, even though the terrain of this dispute was, on the surface, about libido and image. Jung resolved the unlimited tropism of language by declaring that the image had a meaning which was collective and archetypal. Everything became analogical by extension of the symbolism, which went beyond the field of the properly sexual and, from being symbolic, became mythic or poetic.

Freud and Jung: When Sexuality is Reborn from Its Ashes. Jacqueline Miller. Pp. 87-100.

The publication of the Freud-Jung correspondence opens a vast field for research, according to the author. Her discussion begins with a comment of William McGuire's, in his introduction to the volume of letters, that both Freud and Jung took something precious for their work from the rupture of their relationship. Miller focuses on Jung's father complex, which underlay the relationship between the two men. She notes Jung's jealousy of the preference Freud showed at times for Ferenczi and Abraham. She cites the letter in which Jung confesses that as a small boy he had been subjected to a homosexual attempt by a man whom he had previously venerated. Miller analyzes several dreams reported by Jung from various times in his life. In his autobiography, Jung even included a dream from his childhood which he did not tell until his sixty-fifth year—in 1940, just after Freud's death. Miller discusses the complexities of their relationship and makes suggestions concerning the unconscious motivation of Jung's rejection of some of Freud's ideas and eventually of Freud himself.

Dream and Theory of the Libido in the Freud-Jung Correspondence. Madeleine Vermorel. Pp. 101-120.

The Freud-Jung correspondence enables us to follow the evolution of Freud's thought during the important period from 1906 through 1914. Freud was interested in extending his theories to the problems of psychosis, which made the link with the Burghölzli particularly important to him. Wagner-Jauregg in Vienna was more biological in his approach to psychiatry, and Jung seemed to be the longed-for psychiatrist who would apply analytic theory to psychoses. The correspondence was initiated by the publication of Jung's *Psychology of Dementia Praecox*, which placed Freud in the center of current psychiatric discussion. Vermorel traces the intricacies and complexities of this correspondence. The question of the definition of libido became a central issue in the correspondence in 1909. The years 1910-1911 were years of crisis, with the issue of libido and the ego at the heart of the conflict. At Christmas 1910, Freud gave Jung the products of his long reflection which had been nourished by the correspondence with Jung: the paper on the Schreber case and "The Two Principles of Mental Functioning." It had been Jung who had called Freud's attention to Schreber's *Memoirs* at the Nuremberg Conference in 1910. Vermorel examines these two works for passages reflecting arguments and discussions occurring in the correspondence. In February 1911, the problem of dreams was taken up in the correspondence, at the time of the third edition of *The Interpretation of Dreams*. There was increasing disagreement and tension, leading to Freud's paper, "An Evidential Dream," in which he was openly critical of Jung. Jung explained his views on dreams in July 1913 and also let his views be expressed through his pupils, Silberer and Maeder. These authors held that the dream was a spontaneous and symbolic self-representation, with a prospective, anticipatory function in the unconscious, and represented the present situation of the dreamer. The inevitable rupture occurred a little after the Munich conference in 1913. Nevertheless the impact of the correspondence on Freud continued, Vermorel attempts

to show. Jung was therefore one of those interlocutors of quality so necessary to Freud for the elaboration of his thought.

Unconscious Symbolism and the Symbolism of Language. Alain Gibeault. Pp. 139-158.

In this tightly written but clear exposition of some of Lacan's views on symbolism, the author attempts to show the origins of the Lacanian notion of symbolism in Saussure and in Roman Jakobson. He then discusses Lacan's critique of Ernest Jones's naïve, empiricist view of the symbol, in which Jones does not provide a theory of the possibility of symbolism. Gibeault's article makes clear the arguments which led Lacan to the algorithmic view of symbols, and the relation between the Lacanian signifier and Freud's concept of thing representation. Gibeault refers to papers from the meetings of the International in 1977, in particular to the papers of Rosolato and Hanna Segal, and to the subsequent continuation of that discussion in papers of Meissner, of Van Dam, and of Blum, which appeared in 1978.

The Dream Work as a Mourning for Objects of the Waking State. Jean Guillaumin. Pp. 161-185.

In writing his metapsychological papers, Freud used dreams and the process of mourning to illustrate his theory, holding that these phenomena were normal prototypes of pathological afflictions. He stated that there are other such phenomena and mentioned love. According to Guillaumin, he could also have mentioned adolescence, the creative process, pregnancy, and the experience of a patient in analysis. Guillaumin proposes to examine all these states from the point of view of the rather poorly defined Freudian concept of work. We find the concept of dream work, the work of mourning, and therapeutic work frequently used. It is evident that the same concept is applicable to love and to the tasks of adolescence. These concepts are at a descriptive and operational level, and are more synthetic, or molar, than the other, more refined atomistic concepts of metapsychology. Other molar concepts would be transference, transference neurosis, countertransference, resistance, etc. The notion of work corresponds to a sort of continued state of crisis, engendering a new economy in the passage from past to present. Guillaumin holds this to be an important distinction between the scientific, closed discourse of metapsychology and the global and dynamic discourse centered on intentionality, effort, and suffering in the search of a goal, as implied by these synthetic and molar concepts. Guillaumin proposes a comparative study of the work of mourning, dreams, and these other aspects of psychic work. He discusses each type of psychic work from the point of view of its origins, its object, its goal, its product, and the psychic organizations involved.

An Aspect of the Constitution of the Instinctual Source. Denis Braunschweig and Michel Fain. Pp. 205-226.

The authors take up themes from their earlier collaborative work on dreams and the countertransference, to discuss what they call the fetishization of the patient by the analyst. The analyst sometimes delivers an interpretation with the pretense that it is an ideal interpretation. The effect is to induce a depression in the patient,

rather than mourning with all its possibilities of libidinal realignment. The result may be a blockage of communication between the patient and analyst, the result of an unconscious collusion between them. The authors theorize that the mourning of oedipal objects induces in the individual, under pressure from the superego, a personal elaboration of the oedipus complex. There is in each individual a potential opposition between such oedipal mourning and the depressive state which is induced when the child participates in the active incestuous fantasy of the mother. In analysis such "ideal" interpretations function as if the patient had become the object of an active incestuous fantasy on the part of the oedipal object. If the child is used to represent the latent thoughts of the mother, that is, if the child is used to take the place of the incestuous object, the mental development of the child is altered by a modification of the intent of the maternal message of the danger of castration. To the extent that the parents, especially the mother, refuse to carry out their own oedipal mourning, the unconscious message to the infant is a denial of all threat of loss of what he represents as a replacement of the incestuous object. He is idealized and fetishized at the expense of the formation of his own ego ideal.

Dream and Theory. Olivier Flournoy. Pp. 227-246.

Recent studies of the dream use dreams not as an end, as a thing, but as a means of elaborating other subjects. Anzieu discusses dreams with a focus on auto-analysis. Lacan focuses on language in his discussion of the dream of Irma's injection. There is no question for Flournoy of the prominent place to be played by dreams in an analysis. They are indeed the royal road to the unconscious and can be used as a barometer of the movement of an analysis. But, Flournoy asks, why does a patient tell his dreams to his analyst? Why did Freud write the famous Chapter VII? Did he act with the object of healing patients always in his mind, or was he moved by his elevated scientific ideal, or was he under the influence of some thought which motivated him without his knowledge? To answer these questions about Freud, Flournoy notes how the concepts of dream and psychopathology are both opposed and assimilated to each other in Freud's book. The emphasis on pathology accounts for the concept of regression in the theory and is superfluous with respect to the dream activity itself. For if the dream is merely one aspect of psychological activity, why is it the privileged mode of access to the unconscious? Why does the analysis of dreams carry with it curative powers not to be found in the analysis of other modes of psychological functioning? Freud's scientific ideals were ever present, but the contemporary conception of the enterprise of science and of the nature of scientific truth now emphasize more of a coherence theory of truth, according to Flournoy. The scientific truth Freud was to discover in dreams, especially in the dreams of the death of persons dear to us, led him to the oedipus complex. Freud thus discovered the universal semantic aspect to be found in dreams which accords to them this privileged position. The author concludes that Freud's motivation in writing Chapter VII involved an exteriorization of what had become a foreign body, the dream, with its reification in Chapter VII. He details his arguments with the many references to narcissistic problems and other conflicts which the dream book may have represented for Freud, and which led to its privileged place among his writings.

Brief History of the Consciousness of the Body. Jean Starobinski. Pp. 261-279.

The author, a noted literary critic, provides an interesting review of medical and psychological thought on the body and on those internal perceptions of the body termed "coenesthesia." He traces the notion from the Cyrenians, through Montaigne, Descartes, and other writers. The term "coenesthesia" was translated from the German word *Gemeingefühl*, which first appeared in a 1794 dissertation by Frieder Hubner, under the direction of Johann Reil. The concept was readily taken up. It introduced a genetic perspective into psychological studies, which came to consider all mental life as deriving from coenesthesia. The study of the French psychologist, Théodule Armand Ribot, *Disorders of the Personality*, which further elaborated coenesthetic theory, went through fifteen editions between 1883 and 1914, which attests to its immense influence. Other writers, such as Pierre Janet, were opposed to this radical biologism. Charles Blondel, a physician and philosopher, in a study published in 1914, also placed emphasis on the active role of consciousness. Rather than regarding the body as the causal source of mental life, as in earlier coenesthetic theories, Blondel considered it the agent for the expressive intentions of the individual. The concept of the body was thus displaced from the field of physiology to the role accorded to the body by society—the role of effector of messages. Freud also emphasized the *active* response of the mental apparatus on the afferent somatic stimulation. Well aware of the role of organic impressions on dreams, he nevertheless emphasized the neutrality of these organic sensations and stressed instead the work carried out upon them by the mental apparatus in producing the dream. The body became the place in which, or the means by which, an instinct could choose to attain its goal. The somatic element in instincts was recognized, but it was not perceptual as in earlier theories. The concept that Freud used was representation, which presaged the structural theory.

Toward a Psychosomatic Conception of the Unconscious. Michel Fain. Pp. 281-292.

Fain presents the gist of Pierre Marty's two studies dedicated to psychosomatic problems and the impact these studies may have on psychoanalytic theory. At one time a biologist during his training, Marty has developed a theory influenced by biology and reminiscent of vitalism. He is concerned with the divorce between psychopathological and somatic studies of psychosomatic patients. His theory is based on human evolutionary development seen as a progressive integration of functions and experiences. The central psychic trunk is the point along which evolution tends, although there are lateral parallel branches. When events interrupt this evolutionary process, they may remain unconscious as points of fixation and as subsequent points of departure for regressions affecting the main trunk or for partial regressions affecting the lateral trunks. Marty develops the notion of reorganizing regressions and contrasts these with disorganizations, in which the death instinct becomes evident. He postulates three stages for the unconscious. The first is a stage of pure sensitivity. The second is a stage of automation and repetition, which maintains psychosomatic functioning. The third is a system of programming which maintains the organism at its highest level of evolution, but it is a very fragile stage. In extreme disorganization the sensate unconscious alone would remain.

Marty does not use Freudian terms, although we can see that automation and programming are close to the Freudian concepts of libido and death instinct. Marty speaks of essential depression in which, when traumatic events disorganize the psychic functions beyond the capacity of the organism, there is a lowering in "tone" of the life instinct at the level of mental functions. This may lead to a stabilization at an "operative life" at a low homeostatic level. In this stage, secondary process thinking, isolated from the unconscious and without its resources, functions in an autonomous manner to maintain the concerns of the individual. But lacking from these concerns is the mental elaboration which had existed earlier, as if the ego were cut off from its resources. This level functions without the unconscious communication with the preconscious that is a prerequisite for normal psychic life. Marty's work emphasizes the important role of the preconscious for an understanding of psychosomatic illness and is accompanied by many technical suggestions. Perhaps the most telling is the warning that the psychoanalytic way of looking at the psychosomatic patient may itself support and continue the illness, the split between psyche and soma. This would bring about a continuation of the mode of functioning of the psychosomatic patient, in which all "programming" in Marty's sense comes from the exterior rather than from an interior evolutionary process.

Clinical Illustration of the Comments of Pierre Marty Concerning the Psychosomatic Illness of the Infant. Rosine Debray. Pp. 295-298.

The concurrent therapy of mothers and their psychosomatic infants seems to indicate almost always that it is the baby's body that is engaged in the expression of a psychological conflict of the mother. The conflicts are usually on a mental or psychological level, but they may also be psychosomatic. These cases are difficult to treat because of the "miraculous" flight into health that may occur for the child. The possibility of this flight sometimes technically necessitates some delaying tactics on the part of the therapist until a sufficient transference reaction in the mother has taken place. This would enable the therapy to continue even though the infant has "gotten well." Eventually the therapeutic group may be reduced to the mother and therapist alone, without the child present.

Psychic and Psychosomatic Space. Jean Begoin. Pp. 303-308.

Begoin reviews the development of psychoanalytic theory concerning the concept of an internal, containing space. In the primal scene in the Wolf Man case, three persons were involved in the interpersonal drama. But in terms of the bipolarity of instincts this was a drama with four persons, the two parents and the masculine and feminine aspects of the infantile self. Melanie Klein introduced a fifth character, the internal child of the mother, developed from the infantile concept of the interior of the mother's body. This move introduced the notion of a three-dimensional space in the interior of a body, and containing objects. The mechanisms of projection and introjection are involved in this notion of an interior. The object is internal and external, and psychoanalysis studies the articulation between the real and the fantasy objects, as Klein and Winnicott insisted. The depressive position corresponds to the move from partial to complete object and is the central position in psychic development. Before the depressive position, the body of the child and

the body of the object are not clearly differentiated and remain linked by means of projective identification characteristic of the schizo-paranoid position. The psychic space has limits; it is a container. This is perhaps the most advanced point of current psychoanalytic research that is centered on certain violent separation anxieties which involve not so much the disintegration of splitting, but nonintegration (feelings of endlessly falling, of being in a void, of becoming liquid). The failure of the capacities of containing by the internal object may create the conditions for the appearance of a somatic illness. The question of whether psychosomatic patients have fantasies has long been debated, but recent work suggests that they have a very rich fantasy life. The work of Bion with groups indicates that the situation is very complex and that somatization implies the existence of parts of the self which have never found an adequate container. Bion suggested a "proto-mental" level in which somatic and psychic events are not differentiated; it is the mother's function to provide a means of transforming brute sensation into elements utilizable for mentalization. When somatic difficulties appear during analysis, one should see them as linked to failures in this containing psychic space. The analyst plays the role of a real object who has the responsibility for certain vital functions of the patient as the mother did for the infant.

Body Images in the Course of an Analysis. Bertrand Cramer. Pp. 345-347.

Cramer discusses the long analysis of a young woman, in which body image played an important role. He traces her fantasies and images through the analysis, from the monolithic, impenetrable body-phallus motif, which occurred early on, to the fear of dismemberment as she began to enter the depressive position and to recognize transference feelings. The body was seen at times as fragile, as threatened with being emptied of all its contents, as melting. Another theme was the protective body wall as being all there was to the patient. Gradually, she developed a sense of self within the walls, a belief that she was more than just a partition. The theme of "internal music" appeared, along with a discovery and acceptance of her body and her sexuality, as she reintegrated her entire body. Other themes, for example pregnancy and the body within the protective body, were explored during the analysis.

Unusual Freud. Ilse Barande. Pp. 453-461.

Barande examines some aspects of Freud's personal conflicts as they appear in his 1917 discussion of Goethe in "A Childhood Recollection from *Dichtung und Wahrheit* and in his papers, "Fetishism" and "The 'Uncanny'." She questions whether Freud was correct to argue that the closeness in age between Goethe and his younger sister (she was fifteen months younger) excluded the sister from being an object of jealousy. In a letter to Fliess (October 3, 1897) Freud wrote of his own intense jealousy for his brother, who was younger by only a year. Hence the letter of 1897 and the article of 1917 are contradictory. Even the clinical observations which prompted Freud to examine Goethe's memory were of patients who had jealous feelings for younger siblings close to their own age. Barande suggests that Freud unconsciously equated his own family with Goethe's. Freud may have been dealing with his feelings about his younger brother, Julius, who failed to survive beyond the age of eight months. The dismissal of Goethe's sister as a rival suggests

a certain phallogocentric bias. In 1938 Freud discussed the notion of splitting, with an expression of a feeling of uncanniness, not knowing whether his topic was new and puzzling or had been known for some time. However, in the fetishism article he had already referred to splitting. In discussing fetishes, Freud sometimes wrote of the female as actually castrated, and his interesting metaphor of the threat to throne and altar is suggestive of his own conflicts. It would seem that this understanding of splitting was out of his own psychological past, though he was not to consider the subject of splitting theoretically until a decade later.

Irreducible Strangeness. Christian David. Pp. 463-471.

Analysts become so accustomed to dealing with the unusual that they run the risk of becoming refractory to recognizing it and even of becoming the accomplice of the patient's resistance by failing to experience the uncanny. The patient should not be spared the question of the unusual and uncanny at the heart of the familiar. David discusses the animistic tendencies and magical thinking which accompany the emergence of the uncanny in analysis. Through consideration of literary works by Max Jacob, F. J. O'Brien, and Saint Simon, David develops the topic of the unusual and the uncanny. He finds himself in agreement with the suggestion of the French literary critic, Todorov, that psychoanalysis has replaced the literature of fantasy.

The Sense of Identity. Nicole Berry. Pp. 473-486.

According to the author, psychoanalysis has its share of what one might call screen theories. The early concentration on the unconscious tended to minimize an awareness of narcissistic issues, while now the concentration on the theory of narcissism may well block out considerations of unconscious desire and oedipal conflict. The author discusses the belief in one's existence, or the sense of one's own identity, which is so often lacking in narcissistic conflicts. She believes that the origin of identity is to be found in the process of separation and individuation, in the psychic differentiation between the self and the mother. Berry criticizes Lacan's notion of the mirror, and in general criticizes theorists who would base this feeling of identity exclusively in the Other, unless, of course, this Other is to be interpreted as originally the mother. Disturbances of the sense of existence occur in two types of patients. One group has had to deal with the constant intrusion of a parent and the necessity of denial of their own feelings. For the other group, the mother was depressed or psychotic, and unable to provide the emotional response necessary for the child. Berry reviews the types of defenses specific to these clinical situations, such as testing, the need to possess, aggressive impositions, the staging of scenes and ruptures, excessive clutching at others, and overinvolvement in fantasy. She would distinguish the sense of identity from the sense of existence. One can exist without the experience of oneself as a unique individual. In contrast to Freud's concept of the family romance, the author's theory suggests that the child elaborates an original romance, in order to establish his or her feeling of identity. This is the fantasy that we as individuals tell ourselves about our own history, independent of the family myth. Such an original romance later sorts itself out between a sense of self and the ego ideal. Berry also argues for the existence of an original, unformed,

biological ego prior to identification. She compares her view of the formation of the sense of self with that of Kohut, with which she thinks it compatible.

"I Don't Want to Be Someone Else." The Uncanny in the Child. Paul Denis. Pp. 501-511.

Although it is rare for the feeling of the uncanny to be mentioned in the literature on child analysis, nevertheless this feeling often occurs in children. Children seem to be very sensitive to the experience of the uncanny, although they might refer to it as "funny." Children's literature often makes use of the uncanny. Denis reviews several cases. He would include eight-month stranger anxiety and Lacan's mirror stage among the uncanny feelings that a child must deal with. The clinical as well as theoretical problems raised by the experience of the uncanny in children are therefore numerous.

The Uncanny in Mathematics. Minh Nguyen Thanh. Pp. 513-522.

The author discusses the common observation that some otherwise quite intelligent people are unable to understand anything at all about mathematics. Several unconscious fantasies about mathematics lead to an experience of uncanniness. The fantasies concern, for example, the meaning of infinity, the nature of mathematical objects, the "secrecy" and the "magic" of the discipline, and the relationship between teacher and pupil as well as the difficulties which teachers themselves may experience in imparting their discipline.

An Uncanny Pleasure. Annie Anargyros-Klinger. Pp. 523-534.

When Freud introduced the theme of the uncanny he suggested that it might play an important role in aesthetics. This has been little explored by philosophers of art. The author emphasizes the contradictions in the notion of the uncanny: pleasure and fright, familiar and unknown, etc. Freud emphasized the contradiction of the neurotic's fright concerning the female genital organs and the nostalgia for a familiar place: behind fear and fascination is an incestuous desire to return to the womb. This may be seen also in the fear of being buried alive, a theme Freud mentions without developing it. Much of the atmosphere of the uncanny that haunts the work of Poe comes from this persistent theme. Poe also develops the theme of the presence of death embodied in a female figure, which may range from seductive to horrible (e.g., Berenice, Ligeia, Morella, Lady Madeline). This wish to return to the mother's body is accompanied by an anal-sadistic regression which transforms the mother's body into a dangerous and destructive monster. The author examines Poe's biography to understand his fascination with these themes. His father deserted the family in the first year of Poe's life. His mother died when he was not yet three. The theme of destructive fusion with the object is prominent in Poe's work. He seems almost to attempt to master the fantasy by a cold intellectual approach. The author singles out especially "The Fall of the House of Usher" as demonstrating this theme. She closes with some comments on the uncanny in *Alice in Wonderland* and in *Macbeth*.

The Arpeggios of the White Lady, or the Cantata of the Incomplete Narcissus. Paulette Wilgowicz. Pp. 535-558.

Wilgowicz discusses the theme of whiteness as an aspect of femininity and of the mother. She explores certain literary works for this theme, examining Anderson's fairy tale, "The Snow Queen," E. T. H. Hoffmann's "The Sandman," *Moby Dick*, *The Adventures of Arthur Gordon Pym*, and Jensen's *Gradiva*. The theme of the white goddess was discerned by Robert Graves in classical mythology. Wilgowicz also considers some clinical material in which the theme appeared. She links this theme of the white lady to the work of Lewin on the dream screen, and the work of André Green on the negative hallucination and the dead mother.

The Uncanny. Denise Colin-Rothbert. Pp. 559-567.

Freud's article, "The Uncanny," was written much earlier than its publication date of 1919. It is possible that it was written at the time of Freud's return from a trip to Italy or of the return from Athens in 1904. It seems to have been refurbished as a relief from the gestation required for *Beyond the Pleasure Principle*. The author makes some interesting conjectures about the two periods in Freud's life, first when he wrote the article, and then the time of his return to it in 1919. She considers the theme of the double, Freud's feelings concerning death, and his ambivalence toward his brother. The evidence of dissent within the psychoanalytic group and Freud's need to be the ego-ideal for the group may also have been involved in his working on the article.

Ten Years of Dreams. Claude Girard. Pp. 609-648.

This extensive bibliography of ten years of publications on dreams, prepared by Claude Girard and others, includes works from French, German, English, and Spanish psychoanalytic writers, and comments on the contributions appearing in the major psychoanalytic journals.

Revista de Psicoanálisis. XL, 1984.

Abstracted by H. Gunther Perdigão.

Certain Reflections Concerning Instinct Theory in the Works of Freud and M. Klein. R. D'Alvia; A. Maladesky; A. Picollo. Pp. 737-764.

The authors propose to distinguish the concept of instinct and its evolution in the works of Klein and of Freud. They point out that the notion of conflict as developed in *The Interpretation of Dreams* and in the metapsychological papers was totally ignored by Klein. In Freud's work, the idea of conflict evolved from the psychotherapy of hysteria to the structural model, but Klein focused exclusively on Freud's 1920 model of conflict between the life and death instincts. This model remained constant throughout her work. She reconceptualized the model of conflict in structural theory as a conflict between internal and external objects that have acquired the characteristics of structures. At birth, the instinctual fusion is altered, bringing about an increase in the death instinct which threatens the ego

with destruction. This threat is the source of anxiety, and it forces the ego to project it onto an object. The life instinct, which is a consequence of the diffusion, is also projected. The instinctual quality of what is projected determines the quality of the object (good or bad). Klein did not distinguish between aggression and sadism. Aggression is the direct expression of the death instinct. The object is either good or bad depending on whether the life or death instinct is projected onto it. In Freud, the object is either good or bad depending on its pleasure-unpleasure characteristics, a purely economic concept. Freud never abandoned the economic point of view, but Klein made selective use of Freud's theory. She spoke of quantities, increases and decreases, but her economic concepts were of a different nature. For Klein, both instincts are conceived of as substances which are in homeostatic equilibrium. This equilibrium is altered (diffusion) by the trauma of birth, resulting in an increment of the death instinct. This increment, which is not neutralized by the life instinct, becomes intolerable to the ego. It is then deflected to an object which can contain it. The predominance of the death instinct in a substantial sense is seen in the paranoid-schizoid position. In the depressive position, the life instinct predominates. This concept contains the idea of quantity of substances which have aims inherent in their existence. The life instinct tries to organize and integrate, whereas the death instinct aims at destruction and disorganization. The greater amount of death instinct corresponds to a greater anxiety and greater disorder and disorganization; the greater life instinct entails the reverse. A direct comparison of the word "instinct" in both theories is not possible without distinguishing the semantic use of the concept. In three different aspects, Freud and Klein proceed along different paths: 1) tendency in a teleologic sense; 2) substance (embodiment of the instinct in the form of substance); and 3) state (configuration of the psychic state). A teleological phenomenon implies that the system has a purpose: to arrive at a determined state of the system and evolve strategies to obtain that aim. In homeostatic phenomena, there is no intentionality but only a tendency to return to a position of equilibrium. An instinct can act as a teleologic tendency or as a homeostatic process. For Klein, life instinct has an organizing function: it has order, energy, and coherence, rather than being hedonistic, and is primarily homeostatic. The death instinct aims to bring about disorganization and is teleologic. For Freud, disorder is like the thermodynamic decay of a system—it has no purpose. In the *Three Essays*, he stated that the organizer of the psychic apparatus is genitality. In 1920, the organizer was the life instinct which acts as an organizing function (teleologically) through the genitality, and is primarily sexual.

The Myth of Narcissus: Some Reflections on the Phallic Derived from Narcissism. Emilce G. Bruno. Pp. 777-785.

Freud used myths because, like dreams and poetry, they allude to thoughts and feelings all people recognize as having had themselves. Bruno reviews several versions of the Narcissus myth which, like different accounts of a dream, disguise their latent content in their distortions. Narcissus was conceived when his mother Liriope was violated by Cephissus, who abandoned her. The child grew up as a "narcissistic" support to a lonely mother who was unable to adequately allow the intense dependency of the first stages of life. Teiresias, whom the mother consulted, alluded to

the ill-fated situation Narcissus found himself in. This situation returns his own image and denies otherness. Since what is in question is the idea of "otherness," one might ask, "Why Narcissus and not Oedipus?" In *Leonardo da Vinci*, Freud stated that the paternal function allows the transition from phallic-castrated to masculine-feminine. The phallic mother does not allow "otherness"; she prevents differentiation and keeps the child as an amoeboid extension. The absence of a father (paternal function) prevented Leonardo from renouncing his bisexuality: if he had been able to say, "I am I," his mother would have had to ask herself the disquieting question, "Then who am I?" Since this did not happen, Leonardo reinforced maternal megalomania. The paternal intervention separates mother-child unity and brings with it the recognition of the difference between the sexes, i.e., "otherness." The concept of "the phallic" has always been difficult to explain with regard to the girl, but it is equally difficult in reference to the boy. In the *Leonardo* paper, Freud discussed infantile sexual theory. In the young boy's mind, everyone possesses a phallus. The boy attributes enormous importance to this organ, so rich in sensation. The idea of being without it is intolerable, and he is convinced that everyone is built the same way. The phallus does not refer to the penis directly; it is essentially an imaginary organ which rejects any relationship but which in its solitary splendor accepts as the only alternative to be or not to be, although its representation is that of a real organ called the penis or more exactly the penis in its privileged state of tumescence and erection. Paternal function then serves as a mediator between narcissism and the oedipus complex. The failure of oedipal triangulation is a function of the absence of the paternal function which then maintains the infantile omnipotence and the identification with the mother. The boy loves in the manner in which his mother loved him as a child: he loves his own reflection.

Meeting of the New York Psychoanalytic Society

Peter Buckley, John B. Mcdevitt & John Munder Ross

To cite this article: Peter Buckley, John B. Mcdevitt & John Munder Ross (1985) Meeting of the New York Psychoanalytic Society, The Psychoanalytic Quarterly, 54:4, 684-690, DOI: [10.1080/21674086.1985.11927127](https://doi.org/10.1080/21674086.1985.11927127)

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NOTES

MEETING OF THE NEW YORK PSYCHOANALYTIC SOCIETY

February 14, 1984. THE DETERMINANTS OF OBJECT CHOICE IN ADULTHOOD: A CLINICAL TEST OF OBJECT RELATIONS THEORY. Peter Buckley, M.D.

Dr. Buckley presented a clinical example of the effects of the absence of the father during the childhood of a male analysand and in particular its consequence for his later object choice. The case illustrated the manner in which the experience of the absence of the father in childhood became connected with drive and development so that an unconscious fantasy was established which profoundly influenced later object choice. For this patient it was not simply the experience of an absent father that determined later object choice, but the development of a mental representation of the lost father cathected with sexual and aggressive drives organized around a persistent set of unconscious fantasy wishes. The case demonstrated that the nature of adult object choice is dependent on an interrelationship of identification, defense, object relations, and instinctual gratification. This is in contrast to the view of object relations theorists that early object relations determine the nature of later object choice.

The patient was the only child of his mother's first marriage. When he was six months old, his father abandoned him and his mother, and the patient had no subsequent contact with his father. He was raised by his mother and his maternal grandmother who lived nearby, and when he was five, his mother remarried. During the early phase of the analysis the patient was preoccupied with what he viewed as similarities between himself and his biological father. He felt that he was a "bad seed" and that he had genetically inherited a capacity for irresponsibility and destructive behavior. An unconscious sense of criminality gradually became increasingly prominent. This was based on an identification with his biological father's action of leaving him. Even in absence, his father had been a powerful force in the patient's mental life, and a mental representation of him with two sides, negative and positive, became an integral part of the patient.

The second phase of the analysis dealt with his involvement with older men. He would be provocative and teasing, imagining that he was creative and that he was providing them with a new perspective on life. He would then be surprised and disillusioned when they became angry at his teasing and attacked him. Behind this behavior was an unconscious wish to submit to these men, to engage them sexually by verbally sparring and then to accept their attacks passively. The paradigm for this type of involvement was his relationship with his stepfather whom he frequently provoked when he was a child.

As the analysis proceeded, the patient became conscious of a wish to see his biological father and of the positive idealized side of his fantasies about his father.

With some effort the patient tracked down his father, but when he finally met him, reality was drastically incongruent with the fantasy. His father was weak, mean-spirited, and a failure. Disappointed, the patient proceeded to embark on an attempt at psychological restitution of the shattered image of the lost father. He fell in love with a young woman who unconsciously represented his stepfather and ultimately the idealized lost father. Further analytic work enabled the patient to mourn the loss of his father, and this was followed by the development of a powerful wish to have a child. Within the wish to have a child lay a true solution to his quest. He would find a father by becoming a father to his son and would identify with his own child in the fathering that he would himself provide.

Dr. Buckley's case example supports Arlow's concept of the object as an intrapsychic mental representation whose evolution cannot be separated from the vicissitudes of the drives. The lost father became a strongly cathected mental representation invested with libidinal energy. Unconscious fantasies of the lost father and a longing for him organized the patient's drives and determined his self-identity as well as his later object choice. The prominent negative oedipus complex in this patient revolved around an autonomously created mental representation of the father without any contact with the person in reality. The case highlights the need to use a precise term in talking of the object, namely, the mental representation of the object which may or may not be built up out of experiences with a "real object." Since this patient's mental representation of the object and his paternal identification were based on a fantasy object, this case contradicts a central tenet of object relations theory—that earliest object relations determine later interpersonal reactions.

DISCUSSION: Dr. John McDevitt agreed that the immediate determinants of object choice and object relations are unconscious fantasies rather than early object relationships in any one-to-one sense. These fantasies stem from inner and outer forces that shape the mental apparatus throughout childhood, latency, and adolescence. Even though the main focus of the case presentation was the manner in which early object relationships or their absence shaped the patient's subsequent unconscious fantasies, little other than the father's absence was presented concerning their origin. Dr. McDevitt suggested that their development must have had some relationship to the boy's actual experiences and were not simply determined "autonomously." Furthermore, however determined, fantasies alone cannot take the place of an actual father in psychic structure formation. Even under the best of circumstances the absence of a father must interfere with development. Any such interference would naturally determine subsequent fantasy formation. There was insufficient data to speculate about this aspect of the case.

Dr. John Munder Ross emphasized the importance of the patient's abiding "father hunger" in shaping his preoedipal, oedipal, and adolescent development. The patient seems to have been presented all too early with the cruel and, for a child, untenable fact of his father's abdication of parenthood. Consciously, the obviously smart little boy no doubt accepted his circumstances while yearning for reunion with a good, even superhuman father. He constructed an idealized image of the

man, which he later projected onto his stepfather. So acute was the patient's longing that he welcomed the interloper and potential oedipal usurper with open arms, cleaving to him now, inviting his aggression and probably disavowing telltale forebodings of the stark genealogical disinheritance whose revelation would sear his adolescence. Hence his oedipal development was skewed toward the negative, and his resulting conflicts were made more difficult to resolve. His mental representation of the father who had abandoned him was driven underground, remaining unconscious until his "ghosts" (to borrow from Hans Loewald), tasting the blood of the transference, resurfaced in the young man's analysis. At first, the patient sustained solace in the illusion, rendered conscious in the analysis, of a carefree, iconoclastic soulmate of a father (a representation partaking, we are given to infer, of his image of his mother). And he guarded it jealously, going so far as to embrace as his own the transgressing father's "criminality." Meanwhile he hunted for fathers everywhere: in his girlfriend—like him orphaned—whom he abused and then spurned and mourned; in his bosses; in the "phallic woman" who reminded him of his stepfather and whom he subsequently married; in the analyst he found, lost and found again, and lastly, we are told, in himself as the potential father to a child. In identifying with, rather than submitting to, the representation of the good father, Dr. Buckley's patient revealed a shift in the oedipal balance toward the positive.

PETER BUCKLEY, JOHN B. MCDEVITT AND JOHN MUNDER ROSS

MEETING OF THE PSYCHOANALYTIC INSTITUTE OF NEW ENGLAND, EAST

May 24, 1984. FURTHER REFLECTIONS ON FREUD AND HIS WRITING. Patrick J. Mahony, Ph.D.

Dr. Mahony noted Freud's historic stature and his unique influence on twentieth century culture. The concomitant mystification and overridealization of Freud has, however, stultified scholarship and left a great deal of research undone, including research on Freud as a writer. Dr. Mahony began his discussion of Freud the writer with a commentary on Strachey's translation of the *Standard Edition*, including its Victorian prose style, its silent embellishments and corrections, and its editorializing. In the case of the Wolf Man, there is a passage which should read: "In his usual way he passed it off on me, and by this projection tried to make it trustworthy." Instead, Strachey uses the words: "...by this projection tried to make it seem more trustworthy," which obscures the patient's deficient self-esteem and massive transferential dependence. Elsewhere in the Wolf Man case a passage which should state that a discussion of the primal scene in the *Introductory Lectures* was "no longer with a controversial aim" was translated by Strachey as, "with no controversial aim in view," obscuring a self-contradiction in Freud who also asserted his "objective estimation" of the analytic material in the case.

Strachey's *Standard Edition* contains a variety of bibliographic deficiencies, including failure, with few exceptions, to consult Freud's available manuscripts and

failure to furnish a thorough bibliographical description of source texts, as was done in Hawelka's publication of the complete original notes to the Rat Man case. Dr. Mahony envisioned a future *Standard Edition* of nearly one hundred volumes which would follow Hawelka's bibliographic example. The future edition might include *The Significance of Psychoanalysis for the Mental Sciences* published under the authorship of Sachs and Rank, but, according to Rado, taken from lectures by Freud; Freud's ten to fifteen thousand extant letters; and first-hand accounts of analyses with Freud, including Marie Bonaparte's private journal of notes kept during the first three months of her analysis with Freud.

Dr. Mahony suggested that in contrast to much current psychoanalytic writing, Freud's writing consistently combines exposition with enactment to disclose both his conscious and unconscious processes. Freud wrote to Fliess that *The Interpretation of Dreams* was "written by the unconscious," and he said of *Civilization and Its Discontents* that such compositions "make themselves, and if one resists writing them down as they come, one does not know what the result will be." Freud's writing possesses a dynamically sociable quality in engaging the active participation of the reader. This quality is particularly apparent in the case histories where Freud seldom gives the patient's reaction, but instead involves the reader in interaction. Freud's writing style is also distinctly nonlinear; it is complex, mosaic-like, multi-leveled, and polyphonically patterned. Dr. Mahony contrasted Freud's writing with that of Lacan and some of his followers, who subjugate their writings to the influence of primary process and drive derivatives. Freud in his writing conveyed unconscious meaning while also appealing to the ego and accepting the responsibility of being consciously understood. Authentic comprehension of Freud requires a specifically psychoanalytic reading, including free association and free-floating attention.

The author next detailed several examples of subliminal effects in Freud's writing, with particular emphasis on his use of such terms as "expose, (un)cover, hide, disclose, reveal, and naked." The cumulative effect is a running intertextual polysemy. This is apparent from Jacques Derrida's commentary on Freud's analysis of the dream about the emperor's uniform, in which words relating to nudity and clothing are used in a complex manner so that Freud's explanation blends with that which is explained. Polysemous verbal choice is also frequently present in cumulative words appearing in the endings of Freud's monographs which encapsulate much of the preceding exposition. Dr. Mahony illustrated this with the words "troubled" (*heimsucht*) and "forbearance" (*Nachsicht*), which occur in the last sentence of "A Disturbance of Memory on the Acropolis," and which reflect the complexity of words and ideas previously expressed in the paper.

Dr. Mahony's final characterization of Freud's prose related to the impact of the oral tradition upon it. Freud's assimilation of proverbial lore, his creation of oracular statements, and his use of inconsistencies, illogical generalizations, and redundancy are all aspects of conversational discourse and of the oral tradition in his writing. This tendency reflects the influence of Charcot, whose improvisation and audience appeal in lecturing were praised by Freud. In using oral tradition in his writing, Freud avoids much of the lifeless impersonalism and abstract reification found in writings by other analytic authors. In *The Abstracts of the Standard Edition*,

for example, the personal pronoun "I" is omitted and the passive voice is used extensively. The lifeless "it" of the passive voice is characteristic of objective psychology and stands in sharp contrast to the active personal *das Es* present in Freud's writing. Dr. Mahony concluded with an appreciation of Freud's proposal for his own memorial: "When you think of me, think of Rembrandt, a little light and a great deal of darkness."

DISCUSSION: Dr. Paul Schwaber emphasized the degree to which talking, lecturing, and writing were crucial to Freud's way of doing science and his method of discovery in psychoanalysis. He expressed agreement with Dr. Mahony's description of Freud's fluency, trust, and pleasure in his writing, manifested by his sense of process, open-endedness, affinity for the oral mode of communication, address to an interlocutor, consideration for the reader's ability to understand, respect for his own spontaneity, doubts, and eruptions of irrationality, and ability to call on his humor, convictions, knowledge, and learning. Dr. Schwaber then compared Dr. Mahony's demystification of Freud's writing to Freud's method of analysis. Freud's prose allows internal responses of identification and transference as well as of cognition. To consider Freud's writing from this perspective is to approach it as art. However, the dependable persona of Freud's active authorial presence in his prose, observing, thinking, doubting, and anticipating objections, offers a perspectival or relational truth. This truth is relatable both to modernist techniques in fiction and poetry, and to relational, probabilistic, and uncertain canons of modern scientific truth. Freud wrote to Marie Bonaparte, "Mediocre spirits demand of science a kind of certainty which it cannot give, a sort of religious satisfaction. Only the real, rare, true scientific minds can endure doubt, which is attached to all our knowledge. Mental events seem to be immeasurable and probably will always be so." This is both a scientific and literary attitude. It is true in our clinical experience, but is it true of our writing? Freud's art outdistanced his Helmholtzian assumptions of science, but not scientific development. Freud's art is crucial to his science. Freud as an essayist of genius has become a burden to us in his overbearing originality, comparable to God in contemporary theology. Not only this theory and technique, but his prose has set a necessary standard that no one else has met, perpetrating on us all, in Harold Bloom's phrase, a vast anxiety of influence. Faced with the burden of Freud's achievement and the intricacies of the clinical situation, most analytic authors aim more humbly, not at the essay, but at the article, which is less process-oriented and more of a static form. The modern psychoanalytic profession and its educational processes do not support more. It would be folly for us now to risk such displays of ourselves, our psyches, or our processes of thought in our writing, even if we were capable of it. Having been analyzed, we are too realistic to view ourselves as conquistadors, as Freud viewed himself. Dr. Schwaber concluded by posing the dilemma of our science making serious claims for itself, while depending utterly on its expressive mode for its continuation.

Dr. Mahony responded to Dr. Schwaber's discussion with a more detailed elaboration of Lacan's style of discourse. Lacan floods the page with his unconscious, hoping to speak directly to the reader's unconscious. Dr. Mahony contrasted this with Freud's style of discourse which includes appeal to both secondary process thinking and the unconscious. He also contrasted it with much of current psycho-

analytic literature, which with its excess of secondary process does not engage the unconscious. Dr. Mahony also raised the question of how many articles in contemporary psychoanalytic journals are read and retained, suggesting that the answer would be a negative one.

RALPH H. BEAUMONT

MEETING OF THE PSYCHOANALYTIC ASSOCIATION OF NEW YORK

January 30, 1984. PEER REVIEW, THIRD PARTY PAYMENT, AND THE ANALYTIC SITUATION: A CASE REPORT. Howard S. Rudominer, M.D.

Dr. Rudominer reviewed the rather meager literature on peer review and third party payments and then discussed whether or not analysts should write peer review reports. He concluded that the reports need not compromise an analysis; they might even facilitate various aspects of the analytic process if both transference and countertransference are properly analyzed. The technical aspects include how and when to discuss the reality of the situation with the patient. An important aspect is that the analysis continue long enough after this intrusion to attempt to fully resolve the dynamic issues stimulated by the situation. Dr. Rudominer frankly discussed the analyst's reactions, both from personal experience and from the literature. He then presented a detailed case report of a thirty-six-year-old divorced woman who came into analysis because of episodic depressions, loneliness, and repeated sado-masochistic relationships with men. After she had been in classical analysis for over a year and a transference neurosis and a good working alliance had developed, Dr. Rudominer received a request for a peer review report. He felt both pressured and dismayed. He wrote a detailed narrative report and, in a general way, told the patient the contents. It was then not mentioned by either patient or analyst for the next five months. The receipt of a request from the APA for a presentation at a forum on the topic jolted Dr. Rudominer into realizing that he had unconsciously colluded with his patient in avoiding further analysis of this issue.

Analytic attention was now turned to this subject, which led to the patient's association of the insurance company with her mother—a depriving mother who would always follow any good and nurturing act with something designed to make the patient suffer. This exploration enabled the patient to uncover the hatred and rage she had felt toward both of her parents. She had been overstimulated by her mother's nudity, and she recalled that her father had not protected her from her alcoholic mother. Dr. Rudominer became, in the transference, both the "bad" mother and the unavailable father. The patient's unresolved feelings about the peer review report then emerged, with the result that the analyst felt guilty about having told the insurance company too much. He called the insurance company, asked for the return of the report, and was surprised and favorably impressed with the company's respect for confidentiality when his request was granted. The phone call meant to the patient that she was "special" to the analyst, and this became a powerful transference gratification, while to Dr. Rudominer it represented a countertransference acting out, to undo the guilt he felt at having written an overly

detailed report. The patient then revealed her previous feeling that Dr. Rudominer had sided with the insurance company just as her father had sided with her mother against her.

Toward the end of the analysis further material emerged relating to the patient's wish that the analyst not only protect her from insurance company-mother, but also hurt them on her behalf, just as father had tied up and hurt her mother in sadomasochistic sexual games, which the patient had been unconsciously repeating with her husband. This led into core primal scene memories, recalled with affect and clarity. She understood that she unconsciously equated being loved and being hurt. Dr. Rudominer stated that the peer review issue actually facilitated the emergence of these memories and the analysis of this patient's libidinalization of suffering.

DISCUSSION: Dr. Robert M. Chalfin recalled his own experiences with peer review which involved mutual acting out of a transference-countertransference paradigm leading to an unworkable impediment in the analysis. In contrast, Dr. Rudominer was able to use the experience to achieve a successful analytic resolution through utilization of self-analysis and classical analytic technique. Dr. Chalfin felt that patients are entitled to make use of their benefits, and he advised a nonjudgmental approach to insurance coverage and forms. He called attention to the splitting of positive and negative feelings in the transference, as well as to the stimulation of sadistic and masochistic impulses. The situation was heightened for Dr. Rudominer by his being a candidate at the time of the peer review request. It is not surprising that at the beginning there is mutual collusion and acting out. The writing of an overly detailed report was unknowingly complementary to his patient's masochistic fantasies. Forced into activity by the insurance company, Dr. Rudominer first reacted with annoyance which led to a successful self-analysis and to eventual empathy and the ability to handle the variety of transference and countertransference manifestations by interpretation. Dr. Chalfin agreed with Dr. Rudominer that analysis of the handling of third party issues can sometimes be a window into the analytic process.

Dr. George H. Wiedeman described the Peer Review Manual and how it may err on the side of a "formidable" completeness that could lead to the disclosure of unnecessary details of a patient's life to third party payers. This brought up the issue of privacy and confidentiality. In writing reports (not peer review) for insurance companies, Dr. Wiedeman has kept them brief and has avoided mentioning any intimate and compromising data. He recommended having the patient read the reports before they are sent off. Not to do this leads to the confirmation of a frequent transference fantasy that the analyst is the all-powerful secret-keeping parent of early childhood. Dr. Wiedeman then presented a vignette from his own practice in which a patient who was an executive decided to "take care of the matter himself" when Dr. Wiedeman showed him an insurance company request for a report. The patient invoked a power play involving his company treasurer's hinting to the president of the insurance company that profitable accounts might be withdrawn if the information were pursued. This was successful, and the patient experienced a competitive victory over the analyst which was used effectively in the treatment. No further reports were requested. This was an unusual case.

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To cite this article: (1985) Name Index, The Psychoanalytic Quarterly, 54:4, 691-696, DOI: [10.1080/21674086.1985.11927619](https://doi.org/10.1080/21674086.1985.11927619)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927619>



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To cite this article: (1985) Subject Index, The Psychoanalytic Quarterly, 54:4, 697-707, DOI: [10.1080/21674086.1985.11927620](https://doi.org/10.1080/21674086.1985.11927620)

To link to this article: <https://doi.org/10.1080/21674086.1985.11927620>



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