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THE FUTURE OF PSYCHOANALYSIS: THE PAST, PRESENT, AND FUTURE OF PSYCHOANALYTIC THEORY

BY ARNOLD D. RICHARDS, M.D.

Now, as we enter the centenary decade of our science, it is fitting to contemplate the role of theory in psychoanalysis—past, present, and future. Almost exactly one hundred years ago, in the spring or summer of 1889, Freud began to use the talking cure with his patient, Anna von Lieben (Frau Cäcilie M) and began to listen to what she had to say as she lay on her couch (Swales, 1986, p. 36). The decade that followed witnessed the birth of psychoanalysis (Stewart, 1967). And yet another milestone suggests the historical timeliness of a reconsideration of theory: we have just commemorated the fiftieth anniversary of Freud's death, an event which neatly bisects the history of psychoanalysis into a half century during which its founder personally dominated the field, and an ensuing half century of growth and development by his successors.

As prologue to my remarks on the present and future of theory in our profession, I turn to the past. The birth of psychoanalysis cannot be divorced from the theoretical models—and especially the theory of mind—that underlay Freud's discoveries. Indeed, the psychoanalytic method *was* the operational correlate of the theory of mind that Freud brought to the treatment situation. From the outset, Freud's theory of mind informed both his data of observation and his theory of therapeutic action.

The status of the *Project for a Scientific Psychology* (1895) as a theoretical foundation of psychoanalytic theory has been copiously documented. Perhaps less well known is the important role of Freud's earlier monograph, *On Aphasia* (1891), as a theoretical template for psychoanalytic formulations (Grossman,

1989; Rizzuto, 1989). These two works coalesce in the model of mind presented in Chapter 7 of *The Interpretation of Dreams*. Alongside this model, Freud delineated a theory of symptom formation, a theory of development, a theory of pathogenesis, and a theory of therapeutic action.

Theory mattered to Freud. Indeed, it mattered in several ways.

The suggestion that theory plays a role in allaying the therapist's anxiety applies as much to Freud as to current practitioners (Friedman, 1988). Appropriately, the decade of the 1990's marks the one hundredth anniversary of what may be considered the first psychoanalytic study group—the group of Freud and Fliess. What is remarkable in Freud's correspondence with Fliess and in the "drafts" intended for Fliess's eyes only is the extent to which these exchanges focused on theory.

The early history of dissidence in the psychoanalytic movement further attests to the primacy of theory. When Alfred Adler questioned not the phenomena of infantile sexuality but the theoretical model (the oedipus complex) by means of which these phenomena were to be understood, Freud placed him beyond the pale of psychoanalysis. To those members of the Vienna Psychoanalytic Society who opined that Adler's alternative concept—the masculine protest—could find a place within Freud's theory, Freud replied that the failure to "see any contradiction between Adler's views and Freud's doctrines" was beside the point, since "one has to point out that two of the persons involved do find this contradiction: Adler and Freud" (Nunberg and Federn, 1974, p. 173). Likewise, Jung's break from Freud had less to do with his disavowal of Freud's observational data than with his attempt to supplant Freud's libido *theory* with a reformulation which rendered the sexual significance of these data secondary and derivative. It will be recalled that in Jung's (1916) view, manifestations of infantile sexuality often emerged in the course of analysis in the service of resistance against contemporary nonsexual conflicts. Less than a decade later, Otto Rank (1924) provoked a rupture with Freud

when he proffered a theory of the birth trauma that collided with Freud's theory of anxiety.

Until the 1970's, analysts generally remained true to Freud's sense that theory determines psychoanalysis, both as an investigatory method and as a therapeutic modality. The theory—Freud's theory—was what psychoanalysts worldwide had in common. Perhaps as a result, psychoanalytic theory moved beyond the propositions of its founder only with great difficulty. Unlike atomic physics or biotechnology, where the scientific cutting edge presses ever forward, psychoanalytic theory edged forward only in very small increments, its propositions lending themselves more to refinement and elaboration than to replacement.

This is not to say that psychoanalysis remained stagnant in the decades following Freud's death. It is rather the *nature* of theoretical advance during this time to which I call attention. Significant changes in the psychoanalytic theory of mental functioning remained continuous with the theory bequeathed by Freud. They resulted in little revision either in the theory of therapy or in basic psychoanalytic technique.

Indeed, psychoanalytic technique is noteworthy for having so long resisted change. Hartmann, whose stature as a theorist of ego psychology is uncontested, proposed fairly important changes in the theory of mental functioning without advocating commensurate alterations in technique, although some of his co-workers were bolder in their technical recommendations. Mahler also presented significant new formulations while insisting that her findings entailed no alterations of technique with adult patients. Much the same can be said of Kernberg, who reserved his proposed technical changes for psychoanalytic psychotherapy while advocating standard technique for psychoanalysis proper. Eissler, in his widely cited paper of 1953, discussed the use of "parameters" as a modification of technique, but scrupulously insisted that such parameters be analyzed in the course of treatment.

The lesson here may be that analysts tolerate greater revision

of psychoanalysis as a theory of mind than as a theory of therapy. Analysts who have advanced major revisions in the theory of therapy or in basic technique have either fallen outside the analytic mainstream (Ferenczi, Alexander) or outside of analysis altogether (Adler, Jung).

In the past two decades theory has mattered still more—but in a way that bodes ill for the future of analysis as a unified discipline. Analysts increasingly no longer define their discipline as an investigatory method grounded in a general theory of how the mind works. They define it as one particular theory espoused over and against other theories. We live in an era in which to *be* a psychoanalyst more and more often means to endorse one particular psychoanalytic theory and to reject others. Ego psychology, object relations theory, Kleinian psychoanalysis, Lacanian psychoanalysis, interpersonal psychoanalysis, relational psychoanalysis, and self psychology—these are the rival claimants for the analyst's theoretical allegiance as we enter the 1990's.

In the United States, the controversy in psychoanalytic theory over the past decade has focused on the state of the self. In fact, the concept of the self has been invoked throughout the history of analysis in the course of attempts to solve the epistemological problem of what is subjective and what objective, what personal and what organismic. It has been used more recently to mediate between the hermeneutic and natural science approaches to analysis, that is, between the motivational and the causal dimensions of human experience. With respect to these interrelated currents, the field is now at the point of being polarized.

On the one hand are analysts who maintain that traditional theory can adequately account for clinical phenomena, including those that implicate the "person" or the "self." Notions of self-image, self-esteem, and self-representation, they point out, are parts of the Freudian lexicon, as enlarged by Jacobson, Hartmann, and others working within an ego-psychological tradition. Proponents of this viewpoint tend to see analysis as a

natural science of mind capable of illuminating causal connec-
tions via the data brought forth by the analytic method; they
tend toward a correspondence theory of truth which holds that
truth consists of the correspondence between an object and its
description.

Opposing this segment of the analytic community are ad-
herents of various "self" theories. They maintain that tradi-
tional theory must be radically revised both to accommodate
new clinical data, such as narcissistic personality disorders, and
to remedy various deficiencies, inaccuracies, and limitations in
the traditional theories of mind, development, pathogenesis,
and therapeutic action. Some proponents of superordinate self
theories view analysis as a hermeneutic discipline, grounded in
a coherence theory of truth that seeks to unravel meanings that
relate to issues of narrative construction. For them, truth re-
sides in the coherence of beliefs; objects in the world make
sense only within a theory of description. And there may be
more than one true description of the world insofar as our ways
of thinking and perceiving unavoidably condition what we ob-
serve. Self psychology, promulgated by Kohut (1977, 1984) and
elaborated by Goldberg (1988), is offered as a coherent theory
based on observations that cannot be falsified by classical anal-
ysis. Other theorists, among them George Klein (1976) and
John Gedo (1979, 1981, 1986, 1988), ground new psychoana-
lytic theories on the concept of a superordinate self but not nec-
essarily on a coherence view of truth.

Psychoanalysis's new status as an agglomeration of divergent
theories, each of which claims, at times stridently, to be "psycho-
analytic," has evoked varying responses. At one end of the spec-
trum is the fatalistic conclusion that the survival of analysis de-
pends entirely on the method and the therapy; the theory *per se*
simply has no future. The most extreme version of this position
is the claim that the analytic method does not generate scientifi-
cally meaningful data, data subject to validation according to
the canons of science (Grünbaum, 1984). Thus it is suggested

that psychoanalytic propositions must either be recast in the language of cognitive science (Colby and Stoller, 1988), or supplanted by explanation in terms of neurological mechanisms (Hobson, 1988). In either case, psychoanalytic theory-building, as an autonomous enterprise, is foreclosed at the outset.

Only slightly less pessimistic about the cumulative scientific status of psychoanalysis are hermeneuticists like Schafer (1983) and Spence (1982). They do not devalue psychoanalytic data, but rather place them within a hermeneutic framework structured by the narrative choices of a given analyst and a given analysand at a given time. According to them, the data shaped by considerations of narrative coherence and intelligibility are so resistant to a natural science "unpacking" as to make theory-building a virtually futile exercise in circular reasoning.

Another dour reading of the current state of theory, less pessimistic than the preceding ones only because more particularistic and historical, holds that Freud's metapsychology is beyond salvage and must be abandoned entirely. This position has been argued forcefully over the past two decades by Robert Holt. In a recent paper Holt (1990) returns to well-rehearsed themes, faulting Freud for his theoretical indebtedness to Helmholtz, Haeckel, and Lamarck, and arguing that Freudian metapsychology, with its reified concepts and dated mechanistic and vitalistic assumptions, is simply wrong. Holt holds out the possibility of a scientifically sound psychoanalytic theory, but only if the major clinical discoveries of analysis are restated in an observationally grounded language as free as possible of metapsychology. However, his definition of science is extremely narrow, limited to the classical canons of hypothesis testing. According to Holt, analysis has yet to clear away the wreckage of Freudian metapsychology so as to provide an epistemologically clear field from which theory-building can proceed anew. Among the metapsychologically tainted ruins to be cleared away, Holt specifies the dual drive theory and the etiological importance of childhood sexual conflicts.

More optimistic than Holt, but still anchoring his critique and

recommendations in the diagnosis that psychoanalysis is "a theory in crisis," is Marshall Edelson (1988). Edelson does not share Holt's assumption that Freudian metapsychology, including the lower-level propositions that derive from it, is wrong and should be abandoned. His argument is rather that analysis remains a science *in potentia.* According to Edelson, we cannot determine the validity of psychoanalytic theory until analysts embrace a scientific methodology that permits them to test their propositions. He believes that analysts *can* test their hypotheses with clinical data obtained in the psychoanalytic situation, and that they can do so via a case study method that meets the methodological and evidential requirements of research in other sciences. The fact that analysts have heretofore failed to do so is, for Edelson, cause for disappointment and concern, but not for despair. Edelson, who defines analysis as a science that investigates the relation between sexual desire and imagination, holds out the prospect of future hypothesis testing that will enable analysts to differentiate psychoanalytic theories according to the scientific veridicality of their propositions. Further, his writings imply the belief that such testing will confirm central features of traditional psychoanalytic theory, the heuristic and clinical value of which has been abundantly demonstrated over the decades.

A final response to the plethora of rival analytic theories comes from Robert Wallerstein (1988, 1989). Wallerstein argues for a unity that encompasses theoretical diversity by stressing day-to-day therapeutic work, and the experience-near clinical concepts (such as transference, resistance, and conflict) employed therein, as the "common ground" shared by analysts of varying persuasions. The general theoretical perspectives associated with the various schools—Wallerstein has in mind ego psychology, object relations theory, and self psychology—are irrelevant to this common ground; such theories are merely metaphors we have created in order to satisfy our variously conditioned needs for closure and coherence. According to Wallerstein, the attempt to illuminate the "past unconscious"

(Sandler and Sandler, 1987) via a causally developmental accounting of mental life from its earliest fathomable origins counts as part of this metaphoric superstructure; it exists apart from the unity of clinical purpose and healing endeavor that analysts worldwide have in common.

It follows from Wallerstein's sense of theory as metaphor that theoretical differences among analysts cannot now be resolved. Unlike Edelson, Wallerstein (1989) believes that the propositions sustaining the various theoretical perspectives are "beyond the reach of the scientific enterprise in the sense of not being amenable to comparative and incremental scientific testing" (p. 2). Wallerstein does hold out the possibility of testing and validation at some indeterminate time in the future, but urges analysts to accept the fact that for the time being their theories are only metaphors that may be heuristically useful. His commitment to analysis as a science of mind anchored in a correspondence theory of truth coexists with his acceptance of a theoretical diversity that makes sense only within a coherence theory. His point is that the theoretical differences with which we now must live need not be organizationally divisive. Common ground resides in the experience-near clinical theory that sustains practice; it resides, that is, in what clinical analysts do rather than in the theoretical perspectives through which they understand what they do.

Analysts who hazard predictions about the future of psychoanalysis venture into deep and treacherous waters. It is far easier to offer analytic critiques of different theories—and different theories about those theories—than to synthesize such critiques into an overall assessment that will predict or perhaps determine the future of psychoanalytic theory.

At best we can speak of the probable importance of particular trends. I believe that analysis will continue to be a field of rival theories, that the "theoretical pluralism in psychoanalytic dialogue" noted by Michels (1988) shows no signs of abating. The trend toward theoretical pluralism is both good and bad. In one sense, theoretical ferment, as witnessed by animated dialogues

at our Congresses and in the pages of our journals, is constructive. It suggests that analysts are willing to learn from each other in ways that call into question the convictions of the past. To the extent that exercises in "comparative psychoanalysis" (Schafer, 1985) highlight basic methodological principles and call attention to underlying philosophical issues, they will continue to revitalize the field.

The down side of theoretical pluralism is the organizational developments that so often accompany the growth of rival theories. Groups tend to form around a new theory and take as their *raison d'être* its promulgation and continued development. Hand in hand with the productive exchanges promoted by emerging theories comes a push toward factionalism. Here the case of self psychology, which has its own membership societies, annual conferences, and publication series, is instructive. The tendency toward institutional autonomy by proponents of particular theories is likely to promote isolation and an absence of intertheoretical dialogue. We can only hope that in the years ahead the positive aspects of theoretical pluralism will predominate.

Another negative aspect of theoretical pluralism—negative in that it works against the integration of theories or the outright abandonment of theories proved inadequate—is the willingness of the proponents of rival theories to draw on divergent observational bases. This is perhaps an effect of the fact that there is a narrowing of the observational base for analytic data. In the United States, fewer analysts are being well trained and fewer trained analysts are able to practice psychoanalysis full time. The probable continuation of this trend means that genuinely analytic material will be less and less available and that the comparative evaluation of rival theories will thereby suffer. The tendency to advance theories on the basis of data that are at best only ambiguously analytic will militate against the establishment of a theoretical common ground. As a case in point, I cite the "intersubjectivity" theory of Stolorow and his colleagues. In two recent books (Atwood and Stolorow, 1984; Stolorow, Brandchaft, and Atwood, 1987), they proffer intersubjective "psycho-

analysis" as a radical alternative to traditional psychoanalysis. Yet they illustrate the intersubjective orientation with clinical data drawn from what appear to be analytically informed psychotherapies. Several of the patients discussed at length in the more recent book would not be considered analyzable by most analysts. Indeed, the title of this book, *Psychoanalytic Treatment: An Intersubjective Approach*, is rather a misnomer: the word "psychoanalytic" might more prudently have been replaced with the word "psychodynamic." The point here is that good psychotherapy data can sustain theories applicable to dynamic psychotherapy, but are inadmissible as a foundation for any psychoanalytic theory.

Here we touch on an issue integral to any discussion of the future of psychoanalytic theory, the status of the psychoanalytic method. For a century this method, along with the related notion of the psychoanalytic situation (Stone, 1961), has sustained the field. The method has never become obsolete, though it has been subject to continuing refinement. By method I refer to an analysand's attempts to free associate in a context maximally conducive to the procedure. What is essential about the context has long been subject to debate. It has recently been argued that certain features of the traditional psychoanalytic situation, such as the analysand's recumbent position and the frequency of sessions, are "extrinsic" to the mental processes engaged by the method (Gill, 1982). But what is beyond dispute is that the psychoanalytic situation makes free association possible, and free association informs us about unconscious mental processes.

Method, I would emphasize, is central to the discussion of theory. First, it dictates the kind of clinical data that can properly be said to generate theory and that can be used to test the hypotheses arising from it; second, the application of the method is premised on a theory about how the mind works, and method defines the boundaries within which psychoanalytic theory-building occurs. If we take method seriously, we are constrained to build theories anchored in the assumptions that method makes—assumptions about the unconscious, repres-

sion, resistance, transference, and so forth. The theoretical rationale of method, the theory of mind on which the method is premised, is the metatheoretical bedrock of psychoanalysis; any theory that lays claim to the appellation "psychoanalytic" is obliged to take this bedrock as foundational (Bachrach, 1989; Rapaport, 1944; Shevrin, 1984). Thus, when Kohut anchors self psychology in a definition of method so nonspecific as to render the concepts of transference and resistance potentially dispensable (Kohut, 1977, p. 308), he theorizes in a way that is at best incompletely analytic (Stepansky, 1983).

I have noted the difficulty of making firm predictions about the future of psychoanalytic theory. Let me then devote the remainder of this essay to a more personal vision—one, however, which attempts to extrapolate from current trends. Obviously, there is a normative component to this vision: the kind of psychoanalytic theory that I believe will prevail in the years ahead reveals the direction in which I believe psychoanalytic theory ought to move.

That theory will be anchored in the most comprehensive theory of mind available. To date, no theory has emerged that can supplant Freud's in scope and explanatory power. It is a signal virtue of Friedman's recent work (1988) that it explains just how and why Freudian theory achieves its remarkable comprehensiveness. According to Friedman, it was Freud's genius to have recognized that a theory of mind had to encompass both conflict and mental synthesis. Out of this realization evolved a "mixed theory" that achieved comprehensiveness along several dimensions: as a part-whole theory; a conflict and a deficit theory; a motivational and causal theory; a scientific and a humanistic theory. To this, I would add, in opposition to recent critiques, that Freudian theory is simultaneously a drive theory and a relational theory; a theory of intrapsychic reality and a theory of external reality. The current version of this theory, be it noted, is Freudian but not Freud's, as it incorporates the contributions of several generations of analysts, most notably the ego psychologists who have accepted Freud's basic

concepts and added to his theory by accretion (Rangell, 1990) rather than proffering discontinuous theories reflective of paradigm change (see Ornstein, 1978).

The psychoanalytic theory which prevails will be one which best explains or converges with data from other fields, neuroscience (Reiser, 1984) and observational research on infancy and childhood (Blum, 1989) in particular. For recognition of convergences is requisite in an epistemologically sophisticated understanding of the mind-body problem. It also requires an understanding of the relations between a theory of mind and theories of a biological or neurophysiological nature. Recent works from the standpoint of neuroscience (Hobson, 1988) and cognitive science (Colby and Stoller, 1988) pay no attention to this epistemological issue and end up giving short shrift to analysis as an autonomous theory of mind.

Although neurophysiological mechanisms may never be able to supplant psychological propositions (Kandel, 1979, 1983), they nonetheless provide a potential basis for choosing among rival psychoanalytic theories. There may exist neuroanatomical structures and neurophysiological processes that subtend the concepts of some theories but not those of others. Neurophysiological demonstrations of unconscious mental processes (Shevrin, 1973, 1988), neuroanatomical distinctions (e.g., that between right and left brain) that relate to Freud's notions of primary and secondary processes (Bogan, 1969), research on the neurophysiological pathways of affective expression (Reiser, 1984), and research on the impact of experience on neurological development (Goldman and Rakic, 1979) are all relevant to the psychoanalytic theory of the future. Particularly revelatory of the type of coordinate findings that will enrich future theory are the notions of "neuroplasticity" (Levin and Yuckovich, 1987; Vital-Durand, 1975) and of a "neural representational system" (Mishkin, 1982) that have been proposed as bridge concepts linking neurobiological functioning to mental activity, including unconscious mental processes. To the extent that neurophysiological events are found to be markers of psycho-

logical processes, they will be coordinate with, and therefore provide selective support for, a psychoanalytic theory that allows for, and makes explanatory use of, such processes.

I should note, parenthetically, that I share the belief that the 1990's will be the decade of the brain, and that the diminished appeal of psychoanalysis among physicians and psychiatrists will be offset by the increasing numbers entering the field because of exciting developments in neurological research. As neurobiologists confront questions about mind, motivation, and the phenomenology of conscious and unconscious mental processes, many will turn to analysis for data and insights obtainable only from the psychoanalytic situation.

A related but distinct prediction regarding the psychoanalytic theory of the future concerns the status of biology *within* that theory. Let me at the outset demur strongly with Cooper (1990) who, in an earlier contribution to this series, voiced his belief that demedicalization, which he considers a major trend in the field, will render analysis less attentive to, and less understanding of, biological considerations. But we must be wary of regarding these issues as the exclusive province of medicine; medical background is hardly prerequisite for developing and employing a biologically inclusive theory of mind. The contributions of nonmedical biological scientists in advancing psychoanalytic theory in this respect are to be welcomed as much as they are to be expected.

In the decades to come, analysts will refine theory by assigning a more systematic place to biology. This will enlarge their understanding of human development and provide new referents for understanding the regressive process mobilized by the psychoanalytic method and the therapeutic action of interpretations and other interventions. Already analysts have begun to outline the issues that a biologically inclusive analytic theory must be prepared to engage.

Countering the claim of biologically oriented psychiatrists that the somatic determinants of severe mental illness are etiologically primary, sophisticated analytic theorists (Maguire,

1982, 1983, 1984; Reiser, 1984) have stressed that psychoanalysis, of necessity, includes the biological within its explanatory purview. Maguire has argued that what is distinctive about analysis is precisely its ability to reconcile dialectically both poles of the Cartesian mind-body dichotomy. He distinguishes between the "shaping function" of form that includes biological imperatives, and the "shaped meaning" of content that includes psychological explanation, arguing that both are integral to psychoanalysis as a science.

Theorizing of this sort aims to accommodate biological imperatives while avoiding a biological reductionism that ignores "the variety of possible ways in which a psychological dynamic might work upon a relatively indeterminate biological condition" (Unger, 1982, p. 156). The psychoanalytic theory of tomorrow, I believe, will situate biology within a unitary conception of mental illness that does not equate biological imperatives with a reductionist bias which holds that biological determinants will be established as the sufficient cause of all major mental illness. In fact, to situate illness within a broad biological framework is antithetical to ascribing the pathology to any single cause. As Weiner (1980) has pointed out in discussing etiological theories of schizophrenia, in every population a pool of persons will be at risk for a given mental disorder, but whether or not a given person actually develops the disorder will depend on a number of complex internal and external variables. "A single etiological factor, be it proximate or distal, does not exist in nature" (p. 123).

It follows from the psychoanalytic imperative of reconciling in nonreductive ways the biological and the psychological that theories that opt for one pole of the Cartesian dichotomy will not in the long run prevail. Theories, for example, that explicate psychoanalysis as an exclusively hermeneutic enterprise are destined to be repudiated. Despite the illumination they provide, such theories remain wedded to a coherence theory of truth that is incapable of providing the epistemological foundation for a science of mind. To rest content with a theoretical

vision of psychoanalysis as the creation of multiple and shifting narratives (Schafer, 1983) laying claim only to "narrative" truth (Spence, 1982) or the truth of literary fiction (Geha, 1984) is ultimately to discredit the psychoanalytic method as a tool of scientific inquiry, the evidential status of the data generated by the method, and the consequentiality of the theories to which these data give rise. In addition, it is to forgo as pointless the challenging task of refining psychoanalytic theory in response to coordinate findings about mental processes in the biological sciences.

Implicit in my idea of theory refinement is the belief that we can advance toward one "true" theory through the endorsement of certain theories and the repudiation of others, partly on the basis of analytic data and partly on the basis of convergences between analysis and other sciences. I subscribe to a correspondence theory of truth, according to which the mind is a part of nature and theories about mind can be objectively tested. With Hanly (1989) I believe that psychoanalysis is a science that can grasp the facts of mental life, despite the uncertainty inherent in the psychoanalytic situation, including the vagaries of free-associational data. As Hanly has remarked, the vagueness and uncertainty of the analytic situation are themselves "determinate states of affairs that have an explanation; they are not characteristic qualities of mental contents and states as such" (p. 14). To the extent that "mental contents and states" exist in nature, and to the extent that these contents and states can be apprehended through the psychoanalytic method, the psychoanalytic theory of tomorrow can aspire to be truer than the psychoanalytic theory of today.

Consistent with the warrantable claim of psychoanalysis to be a science of mind with a scientific understanding of pathogenesis, the psychoanalytic theory of tomorrow will be more rather than less consequential for clinical practice. Here I disagree with Wallerstein, whose belief in a clinical common ground among analysts of various persuasions consigns theory to the status of an intellectually satisfying but clinically inconsequen-

tial metaphor. Wallerstein's belief in a common ground rests on a shared basis, across theories, in operational concepts, with consensually agreed upon meanings, inherent in day-to-day clinical work. Yet the very difference between experience-near and experience-distant concepts has been effectively questioned. Ellman (1988) argues that all theoretical constructs, including such clinical concepts as transference and resistance, are, to an appreciable extent, abstract and therefore distant from experience. Moreover, to relegate theoretical differences to the status of "mere metaphor" is to forfeit any attempt to come to grips with these differences. Metaphors are integral to the way we understand the world; we customarily perceive, think, and act in terms of metaphor (Lakoff and Johnson, 1980). To the extent that psychoanalytic theory affects the way we perceive the data from the analytic situation, think about the data, and then act interpretively on those data, the differences among theories must be considered substantive.

I believe that theory *is* crucially related to clinical technique. Arlow (1981) has made this point with respect to theories of pathogenesis and Brenner (1982) has argued for the clinical consequentiality of specific theoretical concepts such as defense, depressive affect, compromise formation, and intrapsychic conflict. Analysts of the future, I hope, will be better able than their predecessors to demonstrate the clinical relevance of theoretical concepts. As a harbinger of what I regard as a new attentiveness to the question of consequentiality, consider the way in which Brenner (1976, 1979), Arlow (1986), and Gray (1973, 1982), among others, frame their presentations to focus sharply on the technical consequences of their theoretical positions.

My vision of the psychoanalytic theory of tomorrow will be realized only if we promote vigorous dialogue among the proponents of the divergent theoretical viewpoints of today. The kind of dialogue I have in mind is premised on the belief that theoretical controversy is vitally necessary to the growth of science. The refinement of theory is not promoted by the adoption of a common ground position that blurs theoretical differ-

ences and ignores the tendency of new approaches to "eliminate variable essentials" (Rangell, 1988, p. 317), or by the seemingly nonjudgmental juxtaposition of divergent theories, to be used alternatively or successively in understanding clinical data. The latter approach, exemplified in Pine's recent espousal (1990) of the "four psychologies" of drive, ego, object, and self, is specious; it suggests that we can extricate ourselves from the knotty epistemological and empirical issues that enter into theory choice by simply declining any comparative scientific assessment of the theories we employ. According to this vision, we come to grips with divergent theories by, in effect, turning our backs on theory.

In disagreement with Wallerstein and Pine, I believe that differences among theories must be neither minimized as clinically inconsequential nor submerged in a noncritical eclecticism that encourages us, as if at a smorgasbord of theoretical options, to crowd as much onto our plates as we can. Rather, I believe that the differences among divergent theories must be accepted, for better and for worse. These differences must be accepted as the dialogic nexus out of which any eventual consensus will emerge. Our dialogue must compare theories not on the basis of literal truth but of empirical adequacy; we must inquire as to the *comparative* adequacy of different theories with respect to empirical clinical data. In suggesting that self psychology, in emphasizing contentless mental states, may ignore the role of conflict in clinical phenomena (Richards, 1981), I have made a statement about what I believe to be an empirical inadequacy of self psychology. Self psychologists, of course, will offer their own arguments regarding the empirical inadequacy of classical analysis.

But the dialogue must go beyond, or perhaps beneath, the issues of empirical adequacy to consider the basic issues of epistemology and methodology that underlie our theories. In evaluating self psychology, for instance, the question of whether one accepts Kohut's generic definition of psychoanalysis as a method of depth-psychological investigation characterized by empathy and introspection plays an important role in the evalu-

ation of self psychology as a theory (Balter and Spencer, 1990; Stepansky, 1983). Can we follow Kohut, for example, in his characterization of free association and analysis of resistance as "specific refinements of introspection" (1959, p. 464), or in his belief that psychoanalysis, as a data-gathering operation, in principle exists independently of the "presently indispensable" concepts of transference and resistance? To evaluate the empirical adequacy of self psychology, we must consider how broadly or how restrictively we are willing to define psychoanalysis as a scientific research tradition. We must compare theories at this level again instead of glossing over our theoretical differences. Not only must we accept the fact that differences exist and *are* consequential; we must probe and compare the ontological and epistemological commitments that sustain the competing theories.

In considering what can be done to promote constructive dialogue, we finally reach the issue of training. If we aspire to a consensus about theory, we must begin with coherent training. I mean by this an agreed-upon training experience that will produce analysts capable of evaluating rival theories. Common ground in training will put us on solid ground with respect to the future of theory.

With Cooper (1990), I believe that training programs that offer training analyses and supervised analyses at frequencies of less than four times weekly do not portend well for the profession. Only through a training analysis of four or five sessions weekly can a candidate experience what analysis can optimistically offer: "a unique therapeutic experience not duplicatable by other forms of treatment" (Cooper, 1990, p. 190). And only through supervised cases conducted at this same frequency can the candidate receive an adequate introduction to the psychoanalytic method and its unique integration of the investigatory and the clinical.

Cooper foresees with some concern trends toward the demedicalization, feminization, and internationalization of psychoanalysis. For me, the prospect of a dwindling pool of ana-

lysts who have had a four or five times weekly analysis as the foundation of their training experience weighs far more heavily than any changes in the disciplinary background, gender, or nationality of our future colleagues. What, then, can be done to ensure a common ground in training? I envision the formation of alliances among the American Psychoanalytic Association and other analytic groups with International Psychoanalytical Association accreditation to maintain the educational experience of analysis conducted four or five times weekly. Such alliances will cut across disciplines, since they will be based instead on agreement on the value of an in-depth analytic experience as the foundation of training.

Ensuring this common ground has its financial side. In the past, as Cooper has reminded us, direct and indirect subsidies—Veterans Administration support for personal analysis, NIMH grants, authorized time off from residency, and fellowship programs—facilitated psychoanalytic training. But as these resources shrink, will we be able to find the means to assist candidates in their training? In 1989 the American Psychoanalytic Association announced what has been referred to as the Nobel prize in psychoanalysis: a generous donor bequeathed the sum of two million dollars to support an annual award for the most significant contribution to psychoanalysis. Is it not incumbent upon all of us committed to the psychoanalytic scientific ideal to exert ourselves to obtain similar funding for the training of our Nobel prize winners-to-be?

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Character in Fiction and Fiction in Character

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CHARACTER IN FICTION AND FICTION IN CHARACTER

BY FRANCIS BAUDRY, M.D.

This paper examines the concept of fictional character from a psychoanalytic point of view, including its synthesis and the role of reader response. A second section takes up the role of fiction in the development of character.

> That fiction is a lady, and a lady who
> has somehow got herself into trouble, is
> a thought that must often have struck
> her admirers.
>
> VIRGINIA WOOLF (1927)

INTRODUCTION

Students in analytic institutes are often advised to read great nineteenth century novels by such authors as Flaubert, Dickens, and Dostoevsky to learn about character. What, in fact, do such works as *Madame Bovary* or *Crime and Punishment* have to teach us about character? I will approach this topic by comparing character in the literary sense with character in real life. I will illustrate key points by examples taken from well-known literary works, and will explore the relation between fiction and character from diametrically opposed points of view. After stressing the different realities of fiction and of real life, I will show how much of our character is determined by certain fictive elements

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which we unconsciously create in order to achieve continuity and to deal with frightening or intolerable aspects of reality.

The main section of my paper will deal with character as it is portrayed in the nineteenth century romantic novel. The romantic emphasis on the individual and on emotional life, and the questioning of the accepted social order, created a perfect spawning ground for the parallel development of the realistic novel and of psychoanalysis. Auerbach (1946) defined the nature of realism as consisting in "the serious treatment of everyday reality, the rise of more extensive and socially inferior human groups to the position of subject matter for problematic-existential representation, on the one hand; on the other, the embedding of random persons and events in the general course of contemporary history—these, we believe, are the foundation of modern realism" (p. 491). Zola, for example, devoted many hours to the scientific observation of the social milieu of his novels—the fishermen of a small village in Brittany, the railway workers, the miners. By this means he hoped to achieve an accurate and realistic depiction of the life of his characters.

Several questions come to mind. How is a literary character different from an individual in real life? How is the illusion of three dimensions achieved? What goes into the creation of a literary character? The best introduction to these questions will be through the examination of the nature and structure of the genre in which literary characters live: the novel and its frame, the fictional space.

THE NOVEL AND FICTIONAL SPACE

A novelist, according to Kundera (1986), is a person who is committed only to the discovery of truth through the fusion of reality and the dream. The novel combines two elements that enable the reader to enter and enjoy the fictional world: first, an image of life—a story which is believable at least as long as we

are reading the work; second is an imaginative construction which organizes this story and creates a coherent artistic whole. These two elements can be compared to the two components of psychic reality as suggested by Arlow (1969) in his two-projector model: first, external reality and, second, unconscious fantasies. What great authors strive to achieve, then, is a portrayal of *psychic* reality, not just external reality.

The novel portrays life, but life is not a "given" existing out there; rather it is a construct. Each artist, depending upon a combination of personal factors, the values of the time, and esthetic concerns, will have a different view of what "life" consists of. As Auerbach (1946) so well explored in his *Mimesis*, the representation of reality and what constitutes reality evolved gradually from Homer, to the Bible, on to the contemporary view. Even within the narrow span I am considering—the period of the nineteenth century novel which gave birth to modern realism—different authors constructed very different realities.

Henry James (1884), one of the most influential theoreticians of his time, wrote in his "The Art of Fiction" that the appearance of reality is the supreme virtue of a novel. To create the illusion of life is the beginning and end of the art of the novelist. James's belief raises the issue of the nature of the fictional space in which the novel unfolds. Part of the skill of certain novelists rests in the ways in which they try to make us forget that the characters are *not* real. But the question of what is meant by "real" within the fictional world needs further examination. Put in this way, the question of "real" is reduced to one of skill in making believe or dissembling. That is, a novel is never true or false—it only suggests appearances of reality or of the imaginary. It must appear plausible to the reader who is willing to enter the fictional realm and "willingly suspend disbelief," as Coleridge put it.

Literary critics such as Genette (1969) have emphasized that the novelist or playwright in the French classical tradition strives for verisimilitude (that is, to give the appearance of reality) rather than an accurate portrayal of reality. This was cer-

tainly true in the classical era. One has only to read Corneille's introduction to his 1637 play, *Le Cid*, and the critical debates of the period to realize that the key question was usually one of plausibility. Corneille's play was severely criticized by Georges de Scudéry, a literary critic, because the heroine, Chimène, a girl of noble origins, was going to marry Rodrigue, the killer of her father (compare Shakespeare's *Richard III*).

The criteria for verisimilitude were usually based on un-stated, implied values and beliefs applicable to a given period. Hence it was a relative concept. The idea of verisimilitude goes back to Aristotle, who wrote that the subject of theater, and by extension of all fiction, is neither the true nor the possible but the plausible; the latter tends more and more to be identified with some ideal realm, with what should be. The concept of verisimilitude seems to imply the existence of a fixed external reality with which some other reality is compared, whereas plausibility refers primarily to our subjective reaction to some-thing we feel is believable or at least does not violate our inner sense of what constitutes the boundaries of reality. In fact, the implausible is a privilege of the real world, not of the fictive one, at least according to the classical point of view. This atti-tude toward verisimilitude, which reached its pinnacle in the schools of Realism and Naturalism in the nineteenth century novel, began to break down toward the second half of the nine-teenth century, with the growing indifference of the novelists toward pleasing the public, the revolt against norms of any kind, and the desire to reach certain fundamental truths by routes other than realism.

The "reality" of the novel, more accurately its plausibility, is an illusion which readers must accept if they are to enjoy the work and immerse themselves in it.

Freud (1927) drew our attention to the characteristics of illu-sion: ". . . we call a belief an illusion when a wish-fulfilment is a prominent factor . . . and in doing so we disregard its relations to reality, just as the illusion itself sets no store by verification" (p. 31). These characteristics describe very well the nature of

the novel. What is the relationship between make-believe and reality, and what is the relationship of truth and illusion within the fictional realm? Is the relation between external reality and fictional reality one of analogy, identity, or resemblance?

This is the well-known problem of the relation between "art" and "life." Shiff (1979) studied the metaphoric relationship between them. Art is a construction of a fixed external public world, perfected but bounded and restrictive; life refers to immediate personal experience, never adequately captured in a reflected artistic image. The representation of private experience must depend on a medium or metaphor. "As the medium which separates art from life is perfected it becomes transparent. We see through it as though it were not there" (p. 114).

Strictly speaking, a novel, being the creation of its author, is all make-believe in its ordering and unfolding, even if the novel is based on some actual event, as in the case of *Madame Bovary*. Fictional reality is fictional, a fact forgotten by those who treat the characters in a novel as though they were real. An analogy may be drawn to the attitudes of certain patients who concretely ascribe to characters in their dreams the same autonomy and capacity to initiate motivated behavior as their real life counterparts. "I know why my mother behaved as she did in this dream," said a patient. "She felt guilty!" From one perspective, we would label this behavior as resistant, or naïve, because it ignores the fact that characters in dreams generally (there are exceptions) do not represent themselves or only themselves.

Let us examine how the novel represents inner life and makes us believe people in it are real. One device is to introduce characters who have existed in real life and whose existence cannot be questioned. Tolstoy's *War and Peace* has Napoleon as one of its protagonists, although the presence of Napoleon is by no means a guarantee of historical accuracy. Victor Hugo also introduced a Napoleon in his novel, *Les Misérables*, but Hugo's Napoleon bears no resemblance to the character portrayed in *War and Peace*. Authors are free to introduce in their characters some aspects of people whom they have known in the past or know in the present. Authors can also simulate mental life by

creating a character with "motives" which can be retrieved from the text or reasonably inferred. This can be facilitated by giving the character an identity, including persistent traits, and having him or her interact with others and evolve as a result of the action. Mental life may be simulated by the character's giving the appearance of being more than is described, having a certain ambiguity, and acting as a consequence of motives which are or are not clarified by the author. This may all be revealed through a character's speeches, gestures, actions, and thoughts or through comments made by other characters. For the purpose of my argument, I am vastly oversimplifying the concept of the reality which is portrayed in a novel. In general, this refers to psychic reality, not external reality. The representation of reality in Western literature has slowly evolved through the years, undergoing many changes as a result of various biases, beliefs, and theories about what was appropriate to include in the fictional work.

Having now explored some of the means by which illusion is created (that is, the similarity between literary characters and real-life persons), it is now time to explore the opposite issue— the many differences between literary characters and character as we encounter it in real life. Although most of the differences are self-evident, their enumeration will facilitate further discussions concerning the treatment of fictional characters as if they were real. I will start by mentioning some of the differences between fictional reality and external reality.

Hochman (1985) reminded us that in a novel we know all we need to know according to the purposes of the author, in contrast to the obscurity and at times unreliability of information we have about real life.[1] A novel has a coherence always lacking in real life—it is prepackaged. Characters in fiction are part of a whole which intrinsically means something. They are part of a configuration of meaning which the work as a whole articulates, however obscurely.

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[1] Occasionally, a novel, such as *What Maisie Knew* by Henry James, may incorporate an unreliable narrator, but this is part of the author's plan.

A novel focuses on portraying a character's mental life. Love, misery, suffering, and death occupy an inordinate amount of space, in addition to most other feeling states except happiness. Certain bodily functions (eating, excretory processes, and sleeping) are largely absent. There are, to be sure, exceptions to each of the above statement. Proust spends the first fifty pages of *À la recherche du temps perdu* on recounting the details of the narrator's falling asleep. An appreciable segment of contemporary literature dwells on the scatalogic functions. The management of time in a novel is clearly different from what is applicable to life. A character may be introduced at a certain age and may mention parts of her or his earlier life, while certain developmental phases that would be crucial to an analyst's reconstruction of the past may be altogether missing or briefly summarized. Flashbacks are common. In contrast to slices of life, which in large segments are continuous, a novel has to have a beginning, a middle, and an end. Fairy tales often end with the stereotyped "and they lived happily ever after." This is to satisfy what adults interpret as the child's need for a happy ending. Adult readers may feel cheated if a novel trails off without a sense of closure. This is clearly a departure from verisimilitude and becomes an issue of expectation about the genre. Closure is clearly a falsification of reality.

Novels, finally, express the author's theories about what character consists of and how it evolves. This theory is sometimes expressed directly. For example, Balzac's writings are full of explanations to account for his characters' actions through generalizations about social groups or classes of individuals. In other instances, the theory has to be inferred from the work. Such theories are usually derived from the author's personal views, assumptions, and attitudes which reflect his or her character. Proust writes mostly about the greater intensity of feelings generated by a fantasied love object whom one does not possess, in contrast to a real one. This was a characteristic of his personal love life as well.

CLASSIFICATION

From a literary point of view, how have characters been classified? The simplest division is the one proposed by E. M. Forster (1927) between the round characters—those who are fully sketched, replete with conflicts, and are central to the work—and the flat characters—who play a secondary or flanking role and are described in a very limited, stereotyped fashion. They do not exist outside of their function and do not evolve with the course of the narrative.

Another classification somewhat related to the above divides the characters into those who represent reality, i.e., copy or mirror some aspect of it closely, versus those who illustrate it. Illustration differs from representation in narrative art, in that it does not seek to reproduce actuality but rather to present selected aspects of the actual—essences referable for their meaning not to historical, psychological, or sociological truth, but to ethical or metaphysical truth. Thus we are not called upon to understand their motivation as if they were whole human beings, but to understand the principles they illustrate through their actions in a narrative framework.

Dickens was particularly adept at giving us caricatures of people. He tended to overload his personages to portray in a condensed fashion a particular view of reality found in the lower classes.

DESCRIPTION

Freud commented that his case histories read more like short stories than like scientific studies (Breuer and Freud, 1893-1895, p. 160). An analysis begins with a description of surface behavior. One might expect that description, organization, and classification of literary characters could be identical to those of characters in real life. Do we not use certain types drawn from the literary to describe our patients—Don Juan, Don Quixote, and Cinderella being the most obvious examples?

However, in the case of a novel all we have is a text which has been constructed, an artifact of the human mind; a literary character does not exist per se unless it is retrieved from the text and reconstructed from bits and pieces. It has no life of its own save that projected onto it by the reader.

Hochman has developed a comprehensive taxonomy for literary characters. His categories include stylization, coherence, wholeness, literalness, complexity, transparency, dynamism, and closure. I will comment on some of these categories. Said Hochman (1985):

> The skilled author gives us only part of imaginable life, yet we respond as though we had a complete image. This is so much the case that we are sometimes tempted to extrapolate beyond the boundaries of the time or space of the novel! Wholeness in the fictional world is different from that in real life. The illusion of wholeness may be created by an author with limited presentation, particularly in certain characters tightly woven around a small number of themes or preoccupations (p. 70).

Such characters as Shylock or Molière's invalid (*Le Malade imaginaire*) are examples of this trend.

Literalness is an interesting category: should the character be taken literally or does the character suggest some symbolic representation or function? This relates to the breakdown of character previously mentioned: representation versus illustration. Freud's (1916, pp. 318-324) discussion of Lady Macbeth illustrates the symbolic function of a character. He found that he could not account for that lady's breakdown within the text of the play, and he adopted Ludwig Jekel's solution to consider her as one half of a single character, with Macbeth the other half; she was thus the carrier of some of the guilt feelings of Macbeth. Whether one agrees with this solution or not, it does illustrate the arbitrary nature of motivation in literature.

On the surface this capacity of literary characters to symbolize someone other than themselves would not seem to apply to a

live person. Yet consider the psychotic individual who lives out the fantasy that he is Napoleon or Jesus Christ. What about instances of borrowed guilt or the cases of depressive patients who identify with a part or all of a departed loved one? In fact, much of our clinical work involves the reconstruction of what I would call the overloading of the self concept by such symbolic objects.

Transparency refers to the availability to the reader of the character's inner life. This concept could apply to both literary and real persons. Whether authors choose to convey their characters' motives and in what detail is a complex question. The flat characters are generally more opaque than the round ones, as their scope and complexity is not relevant to the artistic purpose. Ambiguity may be maintained to sustain interest. Such characters as Hamlet, although described in great detail, are sufficiently obscure as to provide food for endless debate. Shakespeare's Antonio in *The Merchant of Venice* suffers from a profound melancholy which is clearly shown in the opening lines of the play.

> In sooth, I know not why I am so sad:
> It wearies me; you say it wearies you;
> But how I caught it, found it, or came by it,
> What stuff 'tis made of, whereof it is born,
> I am to learn ... (I, i, 1-5).

Yet it is never clearly explicated during the course of the play, and the audience is allowed to conjecture whether, in fact, Antonio's sadness is related to his anticipation of Bassanio's departure even before the latter's suit to Portia runs its course.

MOTIVES

The nature of motives in fiction is central to the theory of novels and the understanding of character, both literary and real. In a novel the reader may be taken in by the "as if" nature of the interactions and believe that characters are more than

puppets in the hands of the hidden author. To speak of the unconscious of a literary character is, as I see it, to introduce one's own fictions on top of the author's and to attribute to an artificial creation an aspect of real life—as the character, Nathanael, did in E. T. A. Hoffmann's novel, *The Sandman*. A character is only the agent of the author's purposes and aims.

The comparison between motivation in a novel and motivation in real life is crucial to the clarification of the nature of fiction. A novel is a closed vessel. The author is all powerful. Anecdotally, certain authors claim that while composing, they have lost control over the characters, who acquire a life of their own and determine the course of events in the narrative. How true this can be in practice is hard to say. The ending of a book is often already present in the author's mind before she or he begins the work. The order of writing does not always follow the chronological unfolding of the narrative. The author is free to ascribe any motive to a character to justify any action. Dickens has been criticized for inconsistency in the motivation of his characters and was well known to change them in midcourse under pressure from his editor, who felt that the public would prefer some other direction. The end of *Great Expectations* was changed on the advice of Lord Lytton. Dickens had actually intended to write a sad ending; Lytton suggested he adopt an optimistic conclusion which would please the public, and Dickens bowed to this advice.

It would be better to use the term justification, explanation, or pseudo-determination to accurately portray the essentially arbitrary nature of motivation in artistic productions. The clinical analogue of this justification would be the mechanism of rationalization. Certain events may occur because the author needs them for the unfolding of the plot or the effect he or she wants to have on the audience, such as arousing pity or anger. Motivation is often introduced as a screen for the more pressing determinants of the work, which include its formal structure and governing design. Sometimes there is a breakdown between the two, and the author abandons the attempt to justify certain

behaviors; such is the case in the famous monologue of the lists of aphorisms by Polonius in *Hamlet*. This creates a problem for the actor who plays this role. As Genette (1969) puts it, from the point of view of the elegance of a narrative, there is a diametrical opposition between the function of a passage and its motivation. If its function is (roughly speaking) its purpose, then its motivation is what is necessary to hide its function.

It is, of course, possible to write a novel or a play with apparent lack of conscious motivation as a form. *Waiting for Godot*, for example, thrives on apparent senselessness and lack of narrative development. This does not prevent it from being powerfully evocative of certain primitive fragmentary affects, such as loneliness and anxiety. It even has a certain degree of plausibility! How can we understand this paradox? I suspect that what determines our sense of the plausible is not primarily a comparison we make with a fixed external reality but rather the evocation of some obscure inner subjective reality, which can range from the most advanced to the most archaic—as in the case of Beckett's work. This may explain the very powerful appeal of such characters as Don Quixote who have the most implausible series of adventures.

The French poet, Paul Valéry, once wrote, "Perhaps it would be interesting to compose a work which would show, at each of its switch points, the multiplicity of possibilities which present themselves and out of which the author selects the one that will be given in the text. This would substitute for the common illusion of a sole determinant imitating reality that of the 'possible' at each moment, which seems more plausible. It has even happened to me to publish different texts of the same poem—some versions were even contradictory to each other, and I have been criticized for this. But no one has yet told me why I should have abstained from writing these variations" (see Genette, 1969, p. 85). This passage is reminiscent of the problem of determinism in clinical work, with one major difference. We would not say that behavior in a real person is arbitrary, though we may not be in a position to predict future ac-

tions. Perhaps the arbitrary unfolding of a plot could result from the interaction of multiple determinants too complex to isolate; its arbitrary nature is only apparent.

Let us briefly compare the two sets of determinants in clinical work and in a literary work. How do we account for a bit of behavior in analysis? We are careful not to refer to causes or determinants but rather more modestly to meanings, which we conveniently break down according to agencies—instinct reality, superego, and possibly the repetition compulsion. Each of these agencies can, of course, be broken down further. Could we set up a similar set of agencies or determinants in the case of a behavior of a character in a novel?

One could proceed either synthetically or analytically. One can try to reconstruct the way a novel was written and the choices made, by a close examination of the early drafts and the correspondence of the author—staying within the framework of the text. One could also broaden the net and examine earlier examples in the same genre and the authors who influenced the writer. Moving closer to the sphere of individual psychology, one could study the author's previous works, detect similar patterns or characters, and attempt to explain their existence in terms of the author's earlier life experiences. For example, Dickens often tended to include in his novels a childlike man who is incorrigible, good natured, unable to handle money matters, a pathological optimist, totally unadapted to reality. Mr. Micawber in *David Copperfield* and Mr. Skimpole in *Bleak House* are two such characters. It turns out that their traits mirror rather closely those of John Dickens, Charles's father, who landed himself in debtor's prison and was totally unable to manage financial matters, always saying that "something would turn up." In the case of Flaubert's *Madame Bovary*, a great deal is known about the composition, events, and determinants of Emma's character. The end result is a complex combination: a compromise formation in the sense in which we use the term in analysis; a composite in the sense of a conscious and preconscious amalgam by the author of things seen, heard, experi-

enced, and imagined; and some autobiographical projections of aspects of his self. Finally, there are also some determinants derived from the function of Emma within the novel and other esthetic requirements of narrative and plot.

Although the final package as seen from the outside is a fictional character, the elements which synthesize it are clearly very different from those resulting in the character of a live person (for example, temperament, trauma, early life experiences, and the like). The critic who proceeds to do an analysis of Emma as though she were a real person, without being cognizant of the synthesis mentioned above, runs the risk of methodologically unsound practices. I believe that a proper explication of the text and of the characters it contains is immeasurably facilitated by some appreciation of the structure of the text, the motives of the author (to the degree that they can be reconstructed), and a knowledge of the rules of the genre to which the text belongs. It is possible to undertake a textual analysis of a character within the framework of a novel without concerning oneself with the above (see Wangh, 1950; Simon, 1988). However, what constitutes evidence and how one proceeds with interpretations requires great skill and sensitivity. In the absence of dynamic interplay and the process of the clinical situation, it becomes necessary to make certain assumptions about relationships, textual sequences, symbolic meanings, commonly shared definitions, and connotations of imagery and metaphor. I have tried a clinical exercise of this nature on a short passage from *Madame Bovary* (Baudry, 1979). It is essential to avoid the temptation of drawing conclusions beyond what the text can effectively support.

THEORIES OF LITERARY CRITICISM AND CHARACTER

How have critics, both analytic and literary, struggled with the immense task of interpretation of character? Two divergent ap-

proaches present themselves. Advocates of the first group treat the characters in fiction as though they were real and had motives, and as though their interactions could be analyzed in analogy with persons in real life. Although their papers are interesting, critics who use this first approach rarely teach us much that is new about the text as literature. Some exceptions include Wangh's (1950) paper on *Othello* and Simon's (1988, pp. 177-212) work. To be successful, the author of such a paper must devise a question which analysis is in a position to answer, using the text as data (see Baudry, 1984). Wangh started with unexplained factors in the relationship of Iago and Othello. He focused on an analysis of jealousy and rage in Iago, and traced subtle defense mechanisms in Iago's awareness of his feminine identification and in his unconscious homosexual bond with Othello. Wangh's observations are well documented by quotations from the play. Was Shakespeare aware of these subtleties? In all likelihood not. It is conceivable that the playwright either portrayed some personal attitudes which he projected onto Iago or possessed an uncanny intuitive grasp of such dynamics in other people. The discovery of these elements in the play had to await the elaboration of the mechanism of homosexuality by Freud in the Schreber case, and related papers on jealousy.

The second group of critics, which includes the structuralists and the deconstructionists, treat character as a textual effect. The structuralists wish to avoid description of character that uses psychological concepts. Instead they refer to participants as agents and to sequences of actions proper to them (e.g., fraud, seduction). The contemporary structuralists, such as Barthes or Hamon, stress the illusory nature of the reader's construction of literary characters. They attempt to analyze in textual terms how character can be understood—whether in terms of action, discourse, functions, point of view, or themes.

Molière's theater can be profitably examined from the point of view of roles defined not through psychology but through the cohesion of actions given to them by the narrative, e.g., the young lovers, the faithful servant, the foolish husband, the co-

quette, the seducer, the evil one, etc. Molière's characters, like dancers in a minuet, carry out the actions of the plot and structure as defined by the author, and their behavior is fairly predictable from play to play.

Has analysis anything interesting to say about the view of character as the analogue of a person versus character as a textual function? Are they mutually exclusive, and does the structuralist approach invalidate the analytic one? My answer would be a cautious, "It depends on what uses one wants to put a literary text to." I continue to maintain that an understanding of the textual function of character will enable the analyst to avoid asking methodologically inappropriate questions. Neither approach is sufficient in itself. As Frow (1986) pointed out, the structuralist theory fails to account for "the activity of the reader in the constitution of these represented subjects; it fails to explain the affective force of the imaginary unities of character" (p. 232). It does not integrate into a consideration of character the role of unconscious fantasy which we analysts consider pivotal. The structuralist view deals more with the meticulous organization of texts and can provide us with important clues about themes and relationships. However, in dealing with the formal aspects of a text, it neglects the role of dynamics, which constitutes an essential element of character.

RETRIEVAL

How do we retrieve a character in a novel? From the many indications given by the author about behavior and attitudes, both direct and indirect, the reader reconstructs a fictional persona to explain a sequence of actions, attitudes, or feelings. I have written elsewhere (Baudry, 1983) that the concept of character establishes a relationship between a superficially observable trait and a deep structure (a drive, a defense) whose existence we infer from a multiplicity of manifestations. Is there a similar relationship in a literary work? The author describes for us,

both directly and indirectly, a number of traits which we extract from the text. So far, there is a similarity to the clinical situation of a candidate reporting to a supervisor, or of an intake interview with a new patient. However, there is no deep structure in the text to which we can relate the described traits unless we posit a fictional person through a process combining identification and projection. The fictive mind we posit may have no relation to what the author had in mind and may be quite different from fictive minds other readers would create. One of the vexing problems of applied analysis is the lack of rigorous criteria to evaluate the validity of these multiple and at times contradictory constructions.

As an example, Frattaroli (1987) started with the observation that Shakespeare's characters are often inconsistent; he then went on to conclude that this is based on "Shakespeare's consistency in portraying his characters as unconsciously motivated" (p. 427). To my mind, this conclusion, even though plausible, is not warranted, unless one could consider other possible causes for the inconsistency and evaluate these critically. Charney, in a passage quoted by Frattaroli, pointed out that "Shakespeare's characters are not developed novelistically by accumulating details that lead one to irresistible conclusions. Rather the characters respond to various dramatic contexts, and therefore they may seem discontinuous or even inconsistent in different parts of the play. . . . Many speeches are the product of the occasion rather than the personal mood of the speaker. . . . the speaker is speaking not in his own behalf but for the benefit of the play. . . . Shakespeare does seem to put the needs of his subject, theme or plot before those of his dramatic persona" (p. 426).

This sobering view, with which I am in full agreement, suggests that the understanding of the psychology of a character cannot be done outside of the dramatic context. To return to a point made earlier by Genette, the function of a character has to be understood properly before one can tackle the thorny issue of motivation. Thus, if Shakespeare endowed his characters with inconsistency, we could not assume a priori that in a given

scene the inconsistency requires a psychological explanation. It could reflect an indifference in Shakespeare to making his character consistent and an overriding interest in the development of plot.

The nature and type of text will determine how far one can pursue the analysis of character. The play, *Macbeth*, with its admixture of fantasy and reality and the absence of reference to any character's past (except for the comment on Macduff's being untimely ripped from his mother's womb) presents a different challenge from that of the character of Shakespeare's Coriolanus, who is presented in a more realistic fashion, with lengthy exchanges between himself, his wife, and his mother. It would make no sense to pursue the individual motivation of a character in a fairy tale because fables do not concern themselves with individuals per se or with the development of character, being focused only on story and plot. Certain characters may have a secondary or flanking function within the plot which determines their existence. The role of *confidentes* in French classical tragedy is to present to the audience some aspect of the conflict of the major character. They have no other role and have to be seen as externalizations of one part of a key character and nothing else.

In contrast with the multiple ways of reading character in the literary field, the clinical situation has far less ambiguity and more clearcut goals. In the latter, the purpose of isolating and confronting character is both hermeneutic and therapeutic. In contrast, the literary search has only a hermeneutic aim, the search for meaning and explanation.

READER RESPONSE

Much has been written about reader response to a literary work. Holland (1975) sees the literary work as presenting little more than a foil for the individual reader's projection of his or her inner world. This leads to a totally subjective view of interpreta-

tion. Other critics see the reader and author as establishing a close object relationship with characters. Flaubert wrote about losing his sense of self when he composed, merging with his characters, and treating them as though they were real. He referred affectionately to Madame Bovary, who was giving him a lot of trouble.

Works of fiction can arouse affective reactions in the reader as strong as or stronger than those elicited by a live person. The sharply etched character can allow displacement, ventilation, and multiple identifications in the reader, whether admiring, sympathetic, cathartic, or ironic (Frow, 1986). These identifications can have powerful lasting effects. A patient who had difficulty in experiencing closeness and grief after his mother's death cries openly when reminiscing about certain movie scenes involving the death of a character.

A very detailed description of a "love affair" between a gifted author and a fictional character may be found in Vargas Llosa's *The Perpetual Orgy* (1986). In this work Vargas Llosa detailed his "unrequited passion" for Madame Bovary. He pointed out that, in contrast to a real person, "a fictional character can be brought to life indefinitely merely by opening the pages of the book and stopping at the right lines" (p. 8). For him, the book becomes part of his life helping him in a difficult period. Reading about Emma's suicide curtailed his own suicidal wishes. Vargas Llosa "each time found consolation and a sense of proportion, a revulsion against chaos, a taste for life in those heart-rending pages. The fictional suffering neutralized the suffering I was experiencing in real life" (p. 16).

Readers of a novel bring to the work the full strength of their unsatisfied longings and the wish to succumb momentarily to the illusion created by the writer. There arises a mutual collusion between the writer who creates a fictive world and the readers who wish to be taken in and to suspend reality testing momentarily for the purpose of gratification. Copying reality closely is not a requirement for a novel to have a powerful effect. Kundera (1986) reminded us that a character is not a simulation of a living being, but rather an imaginary one, "an experi-

mental self." "Don Quixote is practically unthinkable as a living being. And yet in our memory, what character is more alive?" (p. 34) When an analyst treats character as though it were a real person, does he not fall prey, to some degree, to the same realistic illusion as the unwary reader? The analyst's position becomes analogous to that of the therapist who acts on the patient's requests rather than analyzing them. The willingness to enter the fictional universe has a developmental line starting with early identifications with a playing adult (see Loewenstein's [1957] description of seduction of the aggressor) transitional phenomena, and the capacity to play.

That novels have a profound impact on people has been taken for granted by governments which have banned the publication of such works as *Madame Bovary* and *Ulysses*. What is the basis for the fear that public morality can be so profoundly corrupted? Do the governing officials understand the power of the dream of the novelist to touch and influence the hidden reality within each of us? Flaubert once wrote that the successful novel would be *"un qui ferait rever"*—"one which would cause the reader to dream." Madame Bovary is dangerous to the degree that the readers find her real and believable, and might, through identification, be aroused to live out their own fantasies and to emulate her actions, thus undermining the very fabric of social institutions. At one point Flaubert wrote that *"en ce moment ma Bovary pleure dans vingt villages de France"* ("as of this moment my Bovary is crying in twenty villages of France"), suggesting that his fictional creation was in fact mirrored by real women whose plight had been unrecognized.

There is another factor which may account for the intensity of reader reactions to a novel: an unexplored similarity between a fictional character and the make-up of one's own character.

FICTION IN CHARACTER AND SELF

The role of illusion in the sense of a belief distorted by wish fulfillment is certainly not limited to pathological mental

products but accompanies normal development as well. Illusion is a part of infantile omnipotence. It plays a role in idealization, in falling in love, and is often necessary for maintaining our equilibrium and self-esteem in times of trauma or reverses, and in dealing with severe illness or death. But illusion is also part and parcel of our everyday self. Grossman (1982, p. 929) quoted Stone: " '. . . the adult organism' can 'preserve the subjective illusion' of reacting as a whole '. . . only with the aid of an elaborate unconscious system [and] various compromise formations (ranging from dreams to well-marked symptoms or pathological character traits). . . .' In short, 'the self' is a 'personal myth' . . . , a myth of which everyone has his own more or less original version."

Auerbach (1946) made a related point when he wrote that

there is always going on within us a process of formulation and interpretation whose subject matter is our own self. We are constantly endeavoring to give meaning and order to our lives in the past, the present, and the future, to our surroundings, the world in which we live; with the result that our lives appear in our own conception as total entities—which to be sure are always changing, more or less radically, more or less rapidly, depending on the extent to which we are obliged, inclined, and able to assimilate the onrush of new experience (p. 549).

The process of interpretation and synthesis to which Auerbach referred has all the hallmarks of a work of fiction—not in the sense of being untrue, but in the sense of a complex combination of real events, their inner meaning, and the overriding influence of unconscious fantasies. The imaginative production which we call our self has its origins in childhood.

Its derivatives—the amalgam of unconscious fantasies which organize mental life—occasionally coalesce to form condensed discrete "imaginative" works. The French for family romance is *roman des origines*, literally translated as "novel of the origins." The term stresses the fictional nature of this group of uncon-

scious fantasies.[2] No great distance separates these imaginative productions from the plots of fairy tales. At times, other imaginative products determine in unusually clear fashion the behavior or lifestyle of certain individuals. Such is the case of impostors who live out a life which could be described as fictional. For example, some pretend to be doctors and for a long time may be able to fool the establishment. Such impostors have been known to treat patients successfully and skillfully without ever having gone to medical school or having a license. They are often caught because of some trivial mistake which exposes the hoax. Greenacre (1958) described some of the characteristics of impostors, including their need to enact family romances, disturbances in their sense of identity and sense of reality, and malformation of the superego.

A related group includes those patients who have accomplished a great deal in their lives and yet who believe themselves to be impostors; in these, we find different pathology. In one patient the feeling of being an impostor was based on an identification with a father who repeatedly exposed himself to shame and humiliation by trying to pass himself off as an expert in a field in which he had only moderate knowledge. The father would elaborate ingenious theories based on imaginative reconstructions, which he would present as facts. As a result, he would be ridiculed by the true experts. In his grandiosity, which bordered on imposture, he would claim that he was far ahead of his time and that his adversaries "resisted" his findings because they could not tolerate his revolutionary ideas. The patient's feelings of being an impostor also originated in his retreat from the oedipal struggle. The disturbances in the sense of identity and sense of reality described by Greenacre were also present. Chasseguet-Smirgel (1984) has studied a particular type of imposture related to certain perverse structures.

To return to the classical analytic situation, the view analy-

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[2] In an early paper, Anna Freud (1922) traced the evolution from beating fantasies to a piece of creative writing.

sands have of themselves, and of their character, changes as treatment proceeds. The distortions introduced into the narrative of one's life—its fictions one might say—are understood in terms of defenses, adaptation, and re-enactment. A screen memory is like a very brief work of fiction, a story unconsciously created by its author to retain a complicated amalgam of real events, fantasies, and wishes. Time is distorted and episodes have to be interpreted symbolically and analyzed as one would analyze a dream whose latent meaning has been altered by the processes of condensation and displacement. New reconstructions are elaborated. Such constructions need not portray actual events, but rather can be seen as fictions—in the sense of imaginative narratives combining some bits of historical truths with plausible reconstructions of earlier psychic states for which we may or may not have complete evidence. This is how we speak of a patient's infantile neurosis. We have to fill in missing pieces, and the analysis does not always allow us to confirm the validity of our hypotheses with the emergence of new memories.

Related to this question of "real" versus "fantasy" in the makeup of psychic structure is a vast literature, including such authors as Laplanche and Pontalis (1968) and Spence (1982). Loewald (1975), in a paper comparing transference neurosis and a play, wrote:

> In the promotion and development of the transference neurosis, analyst and patient conspire in the creation of an illusion, a play. The patient takes the lead in furnishing the material and the action of this fantasy creation, while the analyst takes the lead in coalescing, articulating, and explicating the action and in revealing and highlighting it as an illusion (note that the word illusion derives from the Latin *ludere*, to play). The patient experiences and acts without knowing at first that he is creating a play (pp. 279-280).

Substantial aspects of our character are based on such symbolic re-enactments of conflicted early object relations encoded in the mind as unconscious fantasies.

These early object relations do not represent the relation of the child to the actual parent but to the imagined parent. This imagined parent is a fictive creation of the child's mind, presenting an amalgam of the real object colored and distorted by the child's projections, identifications, idealization, or depreciation in accordance with the child's unconscious fantasies. There will often be a close relationship between the unconscious fantasies and the type of fiction individuals will write should they be creative. The same relationship will apply to the genre of autobiography. DeMan (1984) wrote:

> We assume that life produces the autobiography as an act produces its consequences, but can we not suggest, with equal justice, that the autobiographical project may itself produce and determine the life and that whatever the writer does is in fact governed by the technical demands of self-portraiture and thus determined, in all its aspects, by the resources of his medium? (p. 69).

> Autobiography then, is not a genre or a mode but a figure of reading or of understanding that occurs to some degree in all texts (p. 70).

DISCUSSION

To return to my original question, what do great works of literature have to teach us about character? The answer would have to be both relatively little and a great deal! If we are interested in finding case histories, we will be disappointed. In a few instances, a type may afford a label in our diagnostic category. When it comes to etiology or dynamics, the novel, being less interested than we are in development or unconscious fantasy or the relation between trait and symptom, will have little to teach us. It can teach us a great deal, however, in the sense that poets or creative writers can have very insightful glimpses into the unconscious; they may be able to convey in a condensed fashion something that we struggle to articulate in much more cumbersome fashion. We can sharpen our clinical acumen and appreciate the finesse of the description of the inner life—

whether in a play by Shakespeare or in the detailed introspection of Marcel in Proust's *À la recherche*. I occasionally find myself associating to a character in a novel while listening to a patient, and, by following the trend of my own thoughts, I discover something unexpected about the patient which first came to my mind via the literary association.

For example, while listening to a patient describing how he had stopped living—was letting his house go uncared for and was no longer productive—I found myself thinking of Miss Havisham, the character of the eccentric lady in *Great Expectations* who was abandoned by her suitor shortly before her wedding and secluded herself in her house, stopping the clocks and allowing her wedding dress to disintegrate. This picture suddenly allowed me to discover the profound erotic bond between the patient and his father whom he had lost in childhood. This bond had not been apparent in the clinical material until then.

It is possible that a reading of Sophocles' *Oedipus Rex* during Freud's adolescence resurfaced many years later and allowed him to crystallize his own oedipal conflicts. This discovery then allowed him to appreciate the gripping power of the play. In the October 15, 1897, letter to Fliess, Freud mentioned the discovery in his self-analysis of his love for his mother and jealousy of his father. He then added, "If this is so, we can understand the gripping power of *Oedipus Rex*, in spite of all the objections that reason raises against the presupposition of fate . . ." (Masson, 1985, p. 272).

I would like to conclude my discussion by alluding to a real danger in the application of analysis to works of art. It resides in the problem of boundary and the use of analogy, which has been studied by Kaplan (1988) and Ricoeur (1970). If a heart is like a pump, it is also more than a pump, and the "more than" cannot be expressed by any of the properties of the pump. This is the well-known issue of reductionism. Analysis will tend to see in the novel the components of its systems of the mind—that is, a complex combination of instinctual derivatives, defenses, identifications, projections, and the like. While these elements

do play a role, their addition leaves something essential out of the picture. Ricoeur writes about the Janus-like quality of symbols, their two faces: one looks toward the regressive or infantile, and the other is the creative forward-looking innovative side. Likewise, a work of art or a character in real life is more than an intricate combination of mechanisms and infantile elements. In the same vein, art is more than a form of instinctual renunciation, and a novel is more than a substitute for life. Psychoanalysts have tended to talk about art as a substitute for symptom formation. This leaves out an irreducible element of the new or the "novel." Reading a great work is an enriching experience. I have suggested that some of the associated excitement is the identification with the experience of the author who creates other selves. This enriching process may allow us to give new meanings and new interpretations to our own lives and, even further, to gain new understanding about our own prize fictions—ourselves!

We have now come full circle. Although I initially started to write a paper about the differences between literary characters and character in real life, and the dangers of treating a literary character as though it were real, the second part of my paper on fiction in character seemed to blur some of the distinctions between the two entities. However, I would like to end by restating that the motives for creating fictions within ourselves are very different from those which apply to a work of literature. Fictions are created within ourselves for defensive, synthetic, and adaptive ends. The novelist writes, as I have indicated earlier, primarily to please, to guide, and to offer new insights into human nature and the world at large.

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Addiction, Helplessness, and Narcissistic Rage

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ADDICTION, HELPLESSNESS, AND NARCISSISTIC RAGE

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In many cases addictive behavior serves to ward off a sense of helplessness or powerlessness via controlling and regulating one's affective state. Addicts have a vulnerability to feelings of power-lessness, which reflects a specific narcissistic impairment. The drive in addiction to re-establish a sense of power is, correspond-ingly, impelled by narcissistic rage. This rage gives to addiction some of its distinctive clinical properties. The narcissistic vulnera-bility in addicts is discussed. Several brief clinical cases are pro-vided, and the view proposed is correlated with other psychoana-lytic perspectives.

This paper addresses the role of feelings of powerlessness and rage in addiction. Having repeatedly discovered these affects preceding and precipitating addictive behavior, I have found that clarifying, exploring, and interpreting them has been in-strumental in understanding the addictive process with many addicted individuals. This experience suggests a model for ad-dictive behavior which both extends and is compatible with other psychoanalytic formulations. In proposing this model, I

wish to be clear that I am focusing on addictive vulnerability and the initiation of or relapse to addictive behavior, rather than on the maintenance of addiction. Factors other than those involved in initiation or relapse, including physiologic ones, are likely to be at work in continuous drug use.

Recent views of addiction have emphasized ego defensive function and defense deficit. The most frequent formulation has been that substances are used for the purpose of managing intolerable affective states. Krystal and Raskin (1970) emphasized a defect in the stimulus barrier, resulting in an incapacity to ward off repeated painful affective experience; they saw substance use as augmenting or substituting for this defective barrier. They also suggested that a normal developmental process of differentiation, desomatization, and verbalization of affects is impaired in addicts. A number of authors have also noted specific affective states which addicts attempt to manage through the use of drugs, including aggressive feelings, anxiety, depression, rage, and shame (Khantzian, 1978; Milkman and Frosch 1973; Wurmser 1974). Khantzian (1985) focused attention on a self-medication hypothesis in which an individual's choice of drug is the result of the pharmacological action of the drug ameliorating the individual's principal painful affect.

From a different perspective, Wieder and Kaplan (1969), Krystal and Raskin (1970), and Wurmser (1974), among others, have also described the use of drugs as an object substitute for a yearned-for parental figure. Alternatively, Khantzian (1978) and Khantzian and Mack (1983) have observed that addicts seem to have a deficit in a group of ego functions involved in the anticipation of danger and in self-protection, which they have called "self-care" functions. They have emphasized the importance of this deficit psychology in substance abusers, helping to explain the self-destructive nature of drug abuse. Khantzian (1987) has also considered a view that is virtually the reverse, namely, that addictive behavior serves as an attempt at mastery over poorly understood and passively experienced suf-

fering, by creating a dysphoria which is controllable and understandable.

Kernberg (1975) saw addictive behavior as a gratification of instinctual needs or a reunion with a forgiving parental object or an activation of "all-good" self and object images. Kohut referred to addictions as "narcissistic behavior disorders" (Kohut and Wolf, 1978). He viewed the disturbance in addicts as due to the mother's failure to function as an adequate idealized self-object, and saw drugs serving "not as a substitute for loved or loving objects, or for a relationship with them, but as a replacement for a defect in the psychological structure" (Kohut, 1971, p. 46). Wurmser (1974) also emphasized a "narcissistic crisis" in drug abusers, in which the collapse of a grandiose self or an idealized object leads to feelings for which drug use is an attempted response. He wrote: ". . . an archaic overevaluation of the self or of others [leads to] the abysmal sense of frustration and letdown if these hopes are shattered. . . . and thus to the addictive search" (p. 826). Like others, he viewed the choice of drug as dependent upon its influence on the affect most troubling: narcotic use for reducing or eliminating rage, shame, and feelings of abandonment, and amphetamines and cocaine for giving a sense of grandeur, defending against underlying depression.

ADDICTION, HELPLESSNESS, AND REASSERTION OF POWER

While there are many valuable psychoanalytic perspectives on addiction, I find in all of them an insufficient attention to the roles of power, helplessness, and rage. I would like to propose an additional mechanism which I have found to be important in many cases of addiction.

First, I would like to consider the role of addiction in managing omnipotence over one's own affective state. The central importance of being in control of one's affective state is high-

lighted by the loss of this control in psychic trauma: i.e., the imposition of a state of helplessness on the ego when it is over-whelmed by an instinctual drive (affect) which it cannot manage without excessive anxiety (Freud, 1926). It is the sense of pow-erlessness or helplessness in this situation which, as Krystal (1978) has emphasized, constitutes the essence of psychic trauma. The ability to be powerful over oneself and one's in-ternal state may also be described as an inherent aspect of nar-cissism. Spruiell (1975) noted that among the strands of narcis-sism is "the pleasure in efficient mental functioning, . . . the regulation of mood. . . . and . . . a sense of inner safety and reli-ability" (p. 590). Socarides and Stolorow (1984-1985) likewise stressed the central importance of steadily regulable, contain-able affect for the development and organization of self experi-ence, without which affects become traumatic. In describing the "catastrophic reaction" of individuals to an acute brain defect, Kohut (1972) referred to the narcissistic importance of being in control of one's mind. Upon discovering an inability to perform mental functions once done easily, a person may become enraged because "he is suddenly not in control of his own thought processes, of a function which [we] consider to . . . [be-long] to the core of our self, and we refuse to admit that we may not be in control of [it]" (p. 383). Kohut also wrote about the reaction of patients, especially early in analysis, to slips of the tongue: "They are enraged about the sudden exposure of their lack of omnipotence in the area of their own mind. . . . '. . . the trace of affect which follows the revelation of the slip,' Freud said, 'is clearly in the nature of shame . . .' " (pp. 383-384).

In light of the core narcissistic importance of maintaining psychic control, it is significant that drugs are a device *par excel-lence* for altering, through one's intentional control, one's affec-tive state. Since drug use provides a mechanism to re-establish such a central area of omnipotence, it may serve as a corrective when an addiction-vulnerable individual is flooded with feelings of helplessness or powerlessness. That is, by acting to take control of one's own affective state, addictive behavior may

serve to restore a sense of control when there is a perception that control or power has been lost or taken away.

There is clearly a paradox here. While I am suggesting a role in addiction for an unconscious process of restoring a sense of control, addictive behavior itself is inherently a matter of being out of control; simultaneously, then, addiction reflects both ego functioning and a loss of elements of ego functioning. The paradox is real, but also may be understood as the result of conflict: between a deeper need to ward off perceived helplessness and powerlessness, and other, healthier elements of the personality which become overwhelmed.

Drugs may be used to re-establish a sense of power quite apart from their pharmacologic effects. Some alcoholics begin to feel relief from tension at the point of ordering a drink, or the point of beginning to drink it, i.e., before there is any pharmacological effect. This suggests that something has been accomplished by the act alone of obtaining the drug. I view it as an initial or signal satisfaction of an attempt to re-establish an internal state of mastery. By initiating the chain of events (ordering the drink) which will lead to alteration of one's affect, one has confirmed the ability to alter and control one's affective state, reaffirming a sense of internal potency.

Experiences of helplessness or powerlessness are in fact central for addicts. Alcoholics Anonymous (and Narcotics Anonymous) make the need to tolerate powerlessness the focus of the first of their twelve "steps" of recovery: "We admitted we were powerless over alcohol . . ." (*Twelve Steps and Twelve Traditions*, 1952). Toleration of helplessness is also the essence of A.A.'s "serenity prayer," which centers on the wish to be granted "serenity to accept the things we cannot change" (*Living Sober*, 1975). Wurmser (1984) has also noted that addicts characteristically experience a "claustrum" feeling, i.e., a feeling of being (helplessly) closed in and imposed upon.

The following briefly summarized cases illustrate the function of drugs that I have described.

Case 1

Mr. S was a forty-year-old man in psychoanalysis; he was not an addict in the usual sense, but his difficulties with smoking cigarettes illustrate clearly the issues I am trying to highlight. His father had been a violent man, and his mother had been passively compliant with his father's violence toward her; Mr. S described her as being like a "vegetable." As a child, Mr. S had regularly sought refuge from the "crazy adults" by hiding in a secret place in the cellar of their house, where he felt both safe and in control. At the time of this vignette, he had been in analysis for two years. He had previously stopped smoking and now spoke of his renewed craving for cigarettes. In the analysis, he had recently been feeling increasingly dependent, and very uncomfortable with what he considered to be "surrendering"—to the process, or to me. He said about his craving for cigarettes: "I wanted the comfort of it, I wanted to do something . . . it's paying attention to the anxiety and unhappiness, even if it's destructive." Asked what he would have been doing about these feelings by smoking, he said: "Soothing them, maybe; that's not right . . . it was a powerful urge, I felt frustrated." Several sessions later he returned to his urge, saying "there's a compulsion, it seems a gesture of defiance, but totally displaced . . . it's a certain kind of 'fuck you to the world' feeling . . . maybe it's a reflection of anxiety about the project [a big job he had been preparing at his work]. It's getting close and isn't ready yet . . . I really don't feel in control." I commented that he had been saying he didn't feel in control in several ways, and perhaps cigarettes were a way to be in control. He said: "I know it's a pleasure, but that's not enough [to explain his intense desire]." I agreed with him. Mr. S continued: "I guess [in smoking] I regain some control over the crazy world; it would be better to throw dishes!" He was surprised at his remark, and after a brief pause, added: "I guess it's a way of letting out some rage."

I agreed with him again, and suggested that smoking for him

could be driven by rage about not being in control, and would express that rage, as well as resolve the feeling of being out of control, through an action which would yield a sense of taking back control. I commented that this could seem confusing since, overall, resuming smoking certainly would mean being out of control, but looked at very closely, it means just the reverse. Mr. S thought about this aloud a few minutes, then said, "Somehow I feel a great sense of relief right now." He went on to speak of his efforts to be in control of his life through not only cigarettes, but also alcohol (he had been a a moderately heavy drinker) and food. We were then able to consider a wish he had expressed that week to change several appointment times for the following week, as an analogous effort to retake control in the analysis, where he had been feeling frighteningly out of control.

This man made it clear that his impulse toward addictive behavior was a "letting out some rage" about feeling that he was not in control, and simultaneously was a reparative effort to regain mastery, arising in the setting of intensified dependency and anxieties about "surrendering." His initial thoughts about his craving were from the side of external reality, or from superego pressure, i.e., that it would be very foolish to smoke. As is usual with addictive behavior, this approach neither aided his understanding nor reduced his craving. Interpreting the unconscious dynamic behind the craving dissolved it, however, and led to further exploration of his feelings of helplessness and his indirect means of managing them. He did not resume smoking at that time.

Case 2

Mr. C, a fifty-two-year-old man whose advancement in his career as an architect had been severely hampered by his chronic alcoholism, entered psychotherapy after a previous psychoanalysis twenty years earlier. He described an early history of intense envy of his older brother, whose aggressiveness and cre-

ativity had stood in contrast to his own sense of having been a compliant, good boy. Paradigmatic of his experience was the story told by his mother that when she had caught him masturbating at age three and had told him to stop, he had done so immediately, in contrast to his brother. Characteristic, too, was his experience, as a child, of letting other children painfully bend back his fingers without defending himself.

In his analysis with a woman analyst, he never revealed the extent of his angry, critical feelings toward her. When she became aware that he drank heavily, he reported that she told him to stop drinking; he did so immediately, but the transference meaning of this was never addressed. After the analysis, he resumed drinking. His drinking was secretive in general. He attempted to conceal it from his wife, drinking in his car or when she was away or asleep. These attempts were never ultimately successful, and his wife was quite aware of his heavy drinking and experienced it as anger directed at her. (This is characteristic of the accurate perception by others of the addict's underlying affect, though, of course, without a real understanding of its basis.) His secretiveness was expressed as well in the current therapy, in which he again did not at first reveal his critical or angry feelings, but, it later came out, had a number of devaluing fantasies about my professional ability and my sexuality. His inhibitions were reflected in several ways. As a child he had slept with his mother after having nightmares, until he was twelve years old, and recalled seeing his mother naked in silhouette once, when she stood in her nightgown in front of a light. Later, he developed an inhibition in regard to looking. His analyst had discussed with him his failure to notice her habitual knitting while she sat in analysis. In the current therapy he failed to notice my analytic couch in the room; and while sitting a few feet away at a concert by chance, he failed to notice me. His inhibition of aggression, as in his allowing his fingers to be bent back, expressed itself in adult life, among other ways, through involvement with a con man whom he permitted to steal from him.

When he began therapy, he was still drinking. Strikingly, he recognized that he was an alcoholic, paid lip service to the need to stop, and described himself as feeling guilty about his drinking, yet had no guilty affect at all. When this was pointed out in an exploratory, nonjudgmental way, he began to speak of a feeling that no one was going to stop him in his drinking, that in fact there were many complaints he had about how he was being treated in a variety of contexts, and that in general he lived with an angry feeling that he had put up with enough. On one occasion early in the treatment when he drank, he said he had the thought, "the hell with it," and added he felt "entitled . . . I deserved it." When he was questioned about this entitlement, he associated to an occasion when he had bought the wrong item at a store at age seven and his mother had unfairly scolded him. He said he had always thought he had felt guilty then, but in retrospect he saw that he had been very angry and had had the secret thought that he was right in his rage: he was entitled to be treated better and to be enraged, though it had to be kept secret.

On another occasion when he drank, he spoke of feeling that he had been let down. It became clear that one area in which he felt this was with me—after I had challenged his intellectual acceptance of his alcoholism. His association on this occasion was to an incident when he was four years old and had visited his father's business. He had called out proudly to his father, who was leading a meeting. His father had been angry and afterward had spanked the boy. His father's puncturing of Mr. C's exhibitionistic narcissism, and of his wish to join with his father whom he idealized, was an empathic failure which had been re-experienced when I challenged his offer of his prized intellectual understanding. His subsequent drinking was a response to this narcissistic deflation and reflected his rage and reassertion of his potency. Mr. C's final drinking episode in his therapy occurred when he had felt devalued and powerless in response to a combination of my informing him of my vacation, his wife's leaving on a trip, and criticism of his prowess by a

colleague at work. He associated to a man confined to a wheel-chair who had been ignored as unimportant by Mr. C's older brother. It was possible at this time to clarify with him his rage at feeling that he had been placed in a powerless, helpless position, and the value of his drinking as seizing power over his experience, while also defying those (his wife and me) he felt were devaluing him.

Some time later, he reported masturbating, then cutting his finger and dreaming of his collarbone being broken. Subsequently, he associated the experience of drinking without knowing a drinking bout was coming on, with wetting his pants as a child without having been aware he was about to do that. The theme of his castration anxiety and his need to find a secret expression of his phallic wishes became clearer, as did the meaning of drinking as a masturbation equivalent. He said finally, "Masturbation is the ultimate secret activity." He added that it was now clear to him that his "drinking is so crazily involved with 'getting away with it' . . . thumbing your nose at authority."

While the functions of this man's drinking are complex, characteristic of the complexity of his neurosis, his drinking was fundamentally a (secret) reassertion of his potency, driven by his rage at feelings of powerlessness and helplessness.

Case 3

Mr. G, a professional man in his mid-twenties, was a cocaine abuser and an alcoholic. He had been troubled for most of his life by feelings of weakness and inadequacy, associated with his relationship with his alcoholic father, a tyrannical man who often frightened and humiliated him. He had been abstinent of all substances since beginning once weekly psychotherapy five months before, until I had to reschedule two weeks of appointment hours, shortly before my upcoming vacation. Mr. G then used both cocaine and alcohol, and over the next three weeks

spoke of feeling deprived and angry. His thought about using drugs was that he wanted to "fuck everyone."

Five months later, again shortly before my vacation and just after Mr. G's girlfriend broke up with him, he reported walking into a bar to buy cocaine (although he did not buy it). He said: "I had a sense of rebellion; I wasn't always going to be a help-less, crying hulk." His associations linked drug use to mastur-bating with a fantasy of women finding him highly desirable, i.e., a fantasy in which his impotent self-image was reversed. Mr. G continued substance-free for another six months, before using cocaine again in this context: he reluctantly dated a woman, feeling helpless to avoid this because he thought it was a political necessity in his work, and he felt degraded by the experience. After the date, he realized that for several months his great efforts at work had been unconsciously motivated by a wish to advance in order to impress his former girlfriend and win her back. Like his feeling of powerlessness in his recent date, he had the feeling that, during this time, he had been out of control and under the sway of his former girlfriend. He then had the thought, "Fuck them all, I'll make myself feel good," whereupon he sought out, bought, and used three grams of cocaine.

Mr. G used drugs in response to feeling helpless, impotent, and devalued. He made an angry effort to reassert his power— "Fuck them all," he was going to make himself feel good—and his means of expressing this enraged reassertion of his potency was via his drug use.

DEGREE OF NARCISSISTIC IMPAIRMENT

The importance of a sense of helplessness in addicts may arise from any level of psychological development. For some, who describe chronic states of feeling disempowered, or experience dysphoric states when faced with external successes which arouse frightening aspects of a sadistic grandiose self, there is

clearly a significant degree of general narcissistic fragility, up to and including narcissistic personality disorders. But most addicts are not narcissistic characters. The shame that may be associated with anal and separation-individuation/autonomy issues, or narcissistic injuries associated with oedipal impotence, guilt, and inhibitions, may all provide the underlying basis for a vulnerability to feeling overwhelmed and helpless that is great enough for helplessness to be experienced as a traumatic narcissistic blow. Put another way, since narcissistic injuries occur at all psychosexual levels without resulting in a character that is dominantly narcissistic, the sensitivity to feelings of impotence or powerlessness, which I suggest is important in addiction, may occur in a wide variety of character structures. The narcissistic disturbance I am suggesting as a predisposition to addiction is, in fact, narrower than that in narcissistic personality disorder. (Khantzian and Mack [1987] also described alcoholics as suffering with "sectors" of narcissistic vulnerability.) As a result, addicted individuals have a rather wide range of general emotional health, and the engagement of narcissistic libido in addiction, which I am suggesting, need not be at primitive levels.

CORRELATION WITH OTHER PERSPECTIVES

In the perspective for viewing addiction that I am proposing, drug use is both id derivative and ego defense. It expresses an aggressive drive to be in control of one's narcissistic core self, while also reasserting that control, maintaining potency in the face of threatened helplessness. Correspondingly, the importance of aggression and even rage for maintaining a sense of inner stability and control was noted by Stolorow (1986), who wrote of the utility of "rage and vengefulness in the wake of injuries . . . [to] serve the purpose of revitalizing a crumbling but urgently needed sense of power and impactfulness" (p. 395). And Krystal (1978) spoke of the defensive value of even "affective storms" for avoiding states of psychic helplessness.

The function of drug use I am describing might also be viewed as akin to the "ego instincts" of survival, since this use performs a central self-maintenance action. Khantzian and Mack (1983) wrote of the self-soothing and self-preservative functions of the ego and their consecutive development in childhood, the former preceding the latter. While addicts notoriously fail to self-preserve adequately, they clearly self-soothe in their behavior. This self-soothing function is related to the taking over of control (or self-regulation) of one's own affective state which I am describing.

Many of the formulations of drug use cited earlier may also be correlated with the perspective presented here. For instance, in the self-medication hypothesis of drug use (Khantzian, 1985), the choice of substance abused is made on the basis of its ability to alleviate the addict's most intolerable affective state. Put another way, such an overwhelming or intolerable affect threatens to create a feeling of powerlessness, since the affective flooding of the ego (psychic trauma), which is implied by the notion of intolerable affect, is a blow to the core of one's sense of mastery of oneself. Making the choice of a particular drug because it is the best antidote to this most intolerable affect is equivalent to doing one's best to restore internal equilibrium and potency.

McDougall (1984) observed that some patients, whom she called "dis-affected," immediately disperse all emotional arousal in action. She referred specifically to use of alcohol and drugs, as well as other addictive behavior as examples of such dispersion, saying *"these all represent compulsive ways of avoiding affective flooding* . . . due to unsuspected psychotic anxieties or extreme narcissistic fragility" (p. 389). She also noted, as I have, that such affective flooding could occur with exciting or positive affects as well as with painful ones. She felt that this condition arose from a relationship between mother and child in which the mother was simultaneously "out of touch with the infant's emotional needs, yet at the same time has controlled her baby's thoughts, feelings, and spontaneous gestures in a sort of archaic

'double-bind' situation" (p. 391), which results ultimately in "an enraged child who is struggling, with whatever means he has at his disposal, for the right to exist" (p. 406).

While McDougall's description refers principally to psychologically more primitive addicts, I find her observation of an enraged struggle for "the right to exist" in these patients to be in a general way consistent with the view I am suggesting. Though she sees the addictive behavior only as a way to avoid the anxieties associated with experiencing affect, I would emphasize that it is also a direct expression of this urgent insistence upon a "right to exist," and a corrective response. That is, the addictive behavior represents the repeated fighting and (transient) winning of the struggle for the kind of autonomy to which she refers.

Krystal's (1982) observations about alexithymia are also relevant. In speaking of addicts and psychosomatic patients, both groups which he describes as having alexithymia, he wrote that there is "inhibition in regard to assuming the care for one's own self" (p. 361) because such activity is reserved for the mother and is proscribed to the child: " 'taking-over' of these maternal functions is forbidden and very dangerous" (ibid.). Further, he said there is a distortion in self-representation, with "all vital and affect functions . . . experienced as part of the object representation" (ibid.). Krystal's view that addicts feel they cannot "take over" certain of their own internal affective functions appears consistent with my view of a need to struggle for internal power and control in these patients. I would differ, however, with Krystal's conclusion that addicts in their substance use are only seeking an external agent which will soothe them. In my view, this underestimates the active, though unconscious, struggle to retake that control. An example of the difference in approach this entails may be taken from Krystal's paper. He presented a case vignette in which the patient experienced somatic distress in place of an affective reaction, in the transference. Krystal described the patient as saying that "when he gets in these states of [somatic] distress, he is completely helpless. It

is not possible for him to help or relieve this distress, except with the use of some external agent such as food or drugs" (p. 362). The therapist in the case interpreted the patient's difficulty to him in these terms: "not only was he unable to soothe or comfort himself, but . . . such activities were prohibited for him, as was the acquisition of any such skill" (p. 363).

It would be useful, I believe, to also offer an additional interpretation. The key to the patient's feelings appears to be in his statement that when he gets in these states of distress, he is completely helpless. That is, somatic distress is not the final (nor I would say precipitating) affective state which he experiences before using food or drugs—rather, it is his helplessness. I would suggest it is his helplessness that his addictive behavior serves to relieve. I would ask him to consider that while he feels proscribed from acting, he repeatedly acts via his addictive behavior. That is, his feelings of helplessness entail other feelings—of being overwhelmed, disempowered, and enraged—and he regularly acts upon these feelings. (His denial of the active nature of addictive behavior is a commonly seen defense, often expressed by addicts in the externalization that the drug has power "over" them.) In pursuing this understanding with the patient, I would then be interested in exploring with him the history of his feelings of helplessness, and his solutions to them.

Krystal's observations also point to the object role of drugs. Drugs may certainly in part represent a longed-for object, particularly one over which individuals have complete control, and one which can also supply the omnipotence they seek. Analogously, I have described the search for omnipotent objects or omnipotent transitional objects in alcoholics' transferences to Alcoholics Anonymous and to its "higher power" (Dodes, 1988). The use of drugs to overcome traumatic helplessness and to re-establish internal omnipotence through a relationship with an omnipotent object represents an object relations perspective on the view I am describing.

From a different standpoint, Wurmser (1984) emphasized

the use of drugs to relieve pressure from an archaic superego, saying such use was a defiance against the superego and a way of supporting an identity free of its tyranny. This identity, he said, would allow denial and suppression of anxiety, shame, disillusionment, and guilt. I agree with Wurmser that the demands of a punitive superego are commonly a source of difficulty in addicts. When addictive behavior is induced by the superego, it most often appears, in my experience, as a restitutive response to the inhibiting function of the superego. That is, there has been an inhibition of an aggressive action (because it is unacceptable) by the addict in response to some injury or limitation. The drug use then serves, as Wurmser said, as a breaking out of a sense of constraint, or as a *coup d'état* against the superego. Put another way, the superego creates in the ego a sense of powerlessness as it induces internally a flood of shame or guilt, and externally an inhibition of action. What I would add to Wurmser's view is that the subsequent drug use is then not only to achieve a state which is free of unpleasant superego-induced affects, but also to re-establish the ego's autonomous power, free of imposed dysphoria and helplessness.

Finally, there is the question of the pharmacology of the substances chosen as a factor in addiction vulnerability. While there is clearly some psychic determinism in the selection of drugs, the fact that most addicts readily and often change the drugs they use, and use multiple drugs of entirely different pharmacological effects simultaneously and consecutively, argues against a primary role for the specific drug pharmacology in addiction (a point also made by Wurmser [1974]). The physical property of "addictiveness" of drugs also appears to be only a minor etiological factor in initiation or relapse of addiction (though there is a role of anxiety over physiological withdrawal in maintenance drug use). The minor role of pharmacological "addictiveness" is suggested by the everyday experience of controlled use of addictive drugs by non-vulnerable individuals (e.g., alcohol), and the demonstrated capacity of many addicts to remain abstinent from even the most addictive substances. In

addition, there is the evidence of heroin-using returned Vietnam veterans. Over 90% of these individuals gave up heroin when they returned to the United States (Zinberg, 1975); once away from the extraordinary setting, their lack of intrinsic addiction-vulnerability readily overcame any physiologic pull to continued use.

ADDICTION AND NARCISSISTIC RAGE

I have described a drive, in addiction, to ward off a sense of helplessness and re-establish a sense of internal power. The drive is clearly aggressive and in the service of narcissistic equilibrium, i.e., to restore a threatened central aspect of "safety and reliability" in Spruiell's (1975) terms. The drive to re-establish the power to which one feels entitled has long been known for its intensity in narcissistically impaired individuals. Murray (1964) described the "massive rage and defiant determination to preserve . . . at any cost" (p. 493) that to which his narcissistically impaired patient felt entitled, and this man's sense of his right "to destroy . . . through anger and aggressive fantasies or anally devaluing attitudes" anyone who interfered with his view of his world (p. 494).

This drive may be called "narcissistic rage," though this term requires some clarification. As Nason (1985) has pointed out, the adjectives "primitive," "narcissistic," and "borderline" are frequently applied to rage in psychoanalytic literature, with somewhat differing connotations but perhaps describing a fundamentally unitary entity. A value of the term "narcissistic rage" is its indication of the origin of the affect in narcissistic vulnerability, and it is in this sense that I use it, without implying by this term either a Kohutian metapsychology or a link between this affect and pathological fear and envy (Kernberg, 1975). My focus is on a relatively specific area of "narcissistic expectation," to use Murray's (1964) term, namely, that of control of affective experience. Nonetheless, Kohut's (1972) description of narcissistic rage provides a particularly clear clinical picture in consid-

ering the important role of narcissistic rage in addiction. He noted that narcissistic rage is set apart from other forms of aggression by its "deeply anchored, unrelenting compulsion" (p. 380), its "utter disregard for reasonable limitations" (p. 382), and its "boundless" qualities (*ibid.*). These characteristics are virtually identical to those that describe addiction. Indeed, the most striking aspect of addiction is its compulsive, insistent quality, as Wurmser (1974) emphasized. In addition, it is well known that the most common countertransference responses to addictive behavior are helplessness, frustration, and rage (or the manifestation of these feelings through defensive maneuvers designed to avoid them, such as rescue fantasies and withdrawal). These countertransferences, too, suggest that there is an irrational, unrelenting aggression in the addictive behavior.

There is also a characteristic loss of ego autonomy in both narcissistic rage and addiction. (This loss coexists with the active functioning of unconscious elements of the ego which I have been describing. It is the coexistence of elements of function and loss of function which results in the paradox referred to earlier of simultaneously seeking control while being out of control.) Kohut pointed out that "narcissistic rage enslaves the ego and allows it to function only as its tool and rationalizer" (1972, p. 387), and that in chronic narcissistic rage "conscious and preconscious ideation, in particular as it concerns the aims and goals of the personality, becomes more and more subservient to the pervasive rage" (p. 396). Substituting "addiction" for "narcissistic rage" in these statements creates a perfect description of the acute and chronic addicted state.

From another perspective, Stolorow (1984) described intense, primitive hostility (rage) in the psychoanalytic situation as serving "a restitutive function in restoring an urgently required feeling of omnipotence" (p. 650). Nason (1985) likewise pointed to the affirmative and valuable aspects of rage as an active position which "may be essential for many people in their struggle to survive" (p. 187), and cited George Klein's "principle of active reversal of passive experience" (*ibid.*). This mechanism of turning passive into active, in narcissistic rage-prone individuals

(also noted by Kohut [1972]), is consonant with the use of sub-
stances that I am suggesting, namely, the active remedying of
an intense state of helplessness.

Finally, the permanent nature of the risk of resumed sub-
stance abuse even in a treated, abstinent abuser, is an almost
universally recognized fact of addiction. For instance, it is cen-
tral to the operation of Alcoholics Anonymous, which speaks of
the need for the alcoholic to develop a permanent lifestyle, and
prescribes a treatment that has no provision for termination
(Rosen, 1981). While I do not agree that the need for treatment
must be permanent, there is no question that addicts have a
permanent regressive potential (Dodes, 1988). This fact is an-
other way in which addiction corresponds to narcissistic rage, as
Kohut described: ". . . it must be admitted that . . . at the end of
a generally successful analysis of a narcissistic personality dis-
turbance . . . the patient should face openly the fact that there
exists in him a residual propensity to be temporarily under the
sway of narcissistic rage when his archaic narcissistic expecta-
tions are frustrated" (1972, p. 393).

It may be concluded that there is a striking overlap between
the characteristics of addiction and those of narcissistic rage. In
my view, this is because a central aspect of addiction is its func-
tion as response to a narcissistic sensitivity to powerlessness, in
which the addiction is both a restorative defense against power-
lessness and an expression of the narcissistic rage it produces.
The role of narcissistic rage as the drive behind regaining a
sense of internal power is a major cause of the "unrelenting
compulsion," "utter disregard for reasonable limitations"
(Kohut, 1972), and loss of ego autonomy which are character-
istic of addiction. Each of the case vignettes described earlier
illustrated the role of rage in addictive behavior.

TREATMENT

In keeping with these thoughts, one would expect that elements
of narcissistic transferences would be important in the treat-

ment of addictive disorders. I have previously noted (Dodes, 1988) that the use of Alcoholics Anonymous and its central concept of a "higher power" may be understood as examples of a search for an idealized object and an omnipotent transitional object, whose powers are utilized in exchange for the loss of power entailed in giving up the drug. Likewise, the therapist or analyst may also be quickly created or perceived to be such an idealized narcissistic object, leading to rapid achievement of drug abstinence. In these cases, the restoration of control, which had been achieved through drug use, is achieved instead via a merger with the idealized object that will provide assurance of power and control. This use of an object, however, is a capacity which is not universally present in addicts, or people in general, and as I have discussed elsewhere, the presence of such a capacity may distinguish those patients who rapidly abstain from those who do not (Dodes, 1984). (And some addicts will abstain from drugs but will be unable to internalize the function of the idealized object, therefore requiring its permanent presence, as via permanent use of AA [*op. cit.*].) These transference phenomena may serve as the basis for a transference "cure" with early abstention from substance use. But in continued analytic or analytically-oriented treatment, the goals of insight and structural growth, as well as of a less brittle substance-free state, will require interpretation of the unconscious processes underlying the addiction.

A full discussion of treatment is beyond the focus of this paper. However, the illustrations contained in Cases 1 and 2 and in the discussion of Krystal's (1982) case will, I hope, suggest how exploration of the role of narcissistic traumatization around powerlessness, and its resulting rage, may help to understand the addictive process.

SUMMARY

In this paper, I have presented the view that addictive behavior serves to ward off a sense of helplessness or powerlessness and

to re-establish a sense of internal power, via controlling and regulating one's affective state. The question of powerlessness is inherently an aspect of narcissism and is an area in which addicts appear to have a specific vulnerability. Several brief clinical illustrations were provided.

It was suggested that this narcissistic vulnerability in addiction is narrower than that seen in narcissistic personalities, and may arise from any psychosexual developmental level, consistent with the fact that addicts have a rather wide range of general emotional health. Correlations of this view were made with other psychoanalytic formulations and relevant theoretical perspectives, including those on the role of rage in maintaining internal cohesion; the self-care functions of the ego; the role in addiction of underlying affective disturbances, and of superego pathology; and the self-medication hypothesis.

The importance of narcissistic rage in addiction was discussed. This follows from the aggressive nature of the drive in addiction to restore a sense of power to which one feels entitled. I described the role of narcissistic rage in contributing to the "unrelenting compulsion," "disregard for reasonable limitations" (Kohut, 1972), and loss of ego autonomy which are characteristic of addiction.

Finally, treatment issues were briefly considered. Several illustrations applying the ideas I have suggested were provided in the case vignettes and in discussion of a case of Krystal's.

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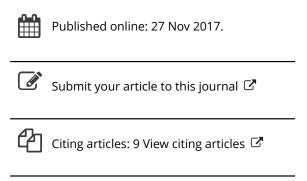*330 Mount Auburn St.*
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Free Association as a Method of Self-Observation in Relation to Other Methodological Principles of Psychoanalysis

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FREE ASSOCIATION AS A METHOD OF SELF-OBSERVATION IN RELATION TO OTHER METHODOLOGICAL PRINCIPLES OF PSYCHOANALYSIS

BY SAVO SPACAL, M.D.

The method of free association, especially in its self-observative aspect, may be seen as a useful criterion for differentiating among various clinical approaches to psychoanalysis, not only as they evolved in the course of its history but also as they are being practiced today. It is suggested that it may be of some relevance to view the existing variants of clinical psychoanalysis as being based upon differing emphases on one or another of the basic operational concepts, such as free association, interpretation, and the mental disposition of the analyst.

At a time when there is an increasing proliferation of concepts in the psychoanalytic field, it may seem anachronistic to refer back to its beginnings. Such a decision may be justified by the idea that there are still some obscure points regarding the meaning of the term "psychoanalysis" in the original use Freud made of it to describe a *psychological theory*, an *investigative method*, and a *therapeutic procedure*. The fact that the same term denotes three different objects may be seen as demonstrating just how specific our discipline is; however, it also tends to

create ambiguities, both of a methodological and of a conceptual nature.

A brief glance at the various psychoanalytic orientations allows us to make the following observations by way of introduction. The most striking differences, and those which also represent the major source of controversy and division, have to do with general theories. Technical aspects, including the formal setting, are taken at times as the criteria distinguishing one therapeutic approach from another, while methodological modifications may be the least evident, but may nonetheless prove highly significant in the clinical and scientific evolution of psychoanalysis. In fact, the various methodological modifications which have taken place during the evolution of psychoanalysis have brought about important changes in our conception of psychic reality that require a very careful epistemic evaluation.

1. From Breuer's Method of Spontaneous Recall to the Free Association and Analytic Interpretation of Freud

The obvious starting point in any discussion of the analytic method must be the contribution made by Breuer (Breuer and Freud, 1893-1895) and his patient, Anna O. The methodological innovation which brought Breuer to a much more dynamic understanding of hysterical mental processes than the prevailing psychiatric notions allowed consisted of giving his patient the opportunity to express herself freely and structuring the environment in the way he thought most conducive to this end. He thus came to the conclusion that a patient suffering from hysterical symptoms is able to understand the latent meanings of her own symptoms and behavior, *provided that she is left free to investigate her own inner world.* In the light of the subsequent evolution in the psychoanalytic method, it is important to note how, in Breuer's abreactive method, clinical interpretation is practically non-existent.

As far as psychological knowledge is concerned, Freud extended the concept of *second conscience*, present in hysterics, to the conception of *repressed unconscious*, present universally. It was on the basis of the latter concept that his method came to be introduced and generally applied in preference to that of Breuer, which had to be limited to hysterical subjects who were hypnotizable. Freud commented more than once on how the principal investigative procedure he had introduced, known as the *method of free association*, came to be substituted for the technique of hypnosis. There is an ambiguity here, since Breuer's methodological principle of investigation was not hypnosis, but rather free verbal and emotional expression; the hypnotic state—and many sessions with Anna O. were characterized by self-hypnosis—can be seen as a particular aspect of the therapeutic relationship and thus as an adjuvant therapeutic principle, within the sphere of which the patient proceeded with her "talking cure." Consequently, it would be more exact to say that Freud's innovation consisted of instructing the patient to express herself freely in a mental state not altered by traditional hypnotic procedures. In this formulation, the emphasis is not on the presence or absence of the hypnotic state, but rather on the element common to both cases, which was that of organizing the therapeutic situation so that the patient could express herself as freely as possible. The different mental states involved undoubtedly had important implications for how the psychoanalytic method was to evolve, but this should not lead us to neglect the fact that Freud's modification left the investigative-epistemic priority of the patient intact, a priority which Breuer had already assigned.

I would now like to consider Freud's description of the method of free association, as formulated in *The Interpretation of Dreams*, since it was here that the most important modifications in the investigative methodology originated.

The patient was encouraged to avoid criticizing the ideas which occurred to him/her and to *observe rather than reflect*. A person who reflects exercises a critical attitude.

The self-observer on the other hand need only take the trouble to suppress his critical faculty. If he succeeds in doing that, innumerable ideas come into his consciousness of which he could otherwise never have got hold. . . . What is in question, evidently, is the establishment of a psychical state which, in its distribution of psychical energy (that is, of mobile attention), bears some analogy to the state before falling asleep— and no doubt also to hypnosis . . . the patient purposely and deliberately abandons [his critical] activity and employs the psychical energy thus saved (or a portion of it) in attentively following the involuntary thoughts which now emerge. . . . *In this way the 'involuntary' ideas are transformed into 'voluntary' ones* (1900, p. 102).

From the passage quoted above, it seems clear that Freud was referring to a mode of introspection which he himself had practiced, and that he was paying little attention to the interpersonal context. Just as he had been able to record his own thoughts in a notebook, he presumed that his patients could observe themselves and communicate their thoughts to him. *The method of free association, then, was instituted primarily as an introspective modality, rather than a communicative one, or one producing material to be interpreted.* As further confirmation of this hypothesis, I would like to quote just one of several relevant statements by Freud to be found in the same chapter:

No doubt I shall be met by doubts of the trustworthiness of 'self-analyses' of this kind; and I shall be told that they leave the door open to arbitrary conclusions. *In my judgement the situation is in fact more favourable in the case of self-observation than in that of other people* . . . (p. 105, italics added).

In a footnote, which is also important because it was added in 1914 during the period of his papers on psychoanalytic technique, Freud criticized Artemidorus for having assigned priority to the associations of the interpreter:

The principle of his [Artemidorus'] interpretative art . . . is . . . the principle of association. A thing in a dream means what it

recalls to the mind—to the dream interpreter's mind, it need hardly be said. An insuperable source of arbitrariness and uncertainty arises from the fact that the dream-element may recall *various* things to the interpreter's mind and may recall something different to different interpreters. *The technique which I describe in the pages that follow* differs in one essential respect from the ancient method: it *imposes the task of interpretation upon the dreamer himself. It is not concerned with what occurs to the interpreter in connection with a particular element of the dream, but with what occurs to the dreamer* (p. 98, n., italics added).

Here, Freud seems to make a clear distinction between the tasks of the dreamer and those of the interpreter. He suggests that *valuable knowledge can be obtained solely from the interpretation given by the dreamer him/herself.*

Although emphasis has been given, above all, to the self-observative aspects of the method introduced by Freud, it is important to point out that its exceptional investigative power derives from other characteristics made evident in the passages quoted above: (a) the mental organization of the self-observing subject is similar to that "before falling asleep" or to "hypnosis"; (b) this permits the formal regression of thought and the appearance of "involuntary ideas"; (c) the subject's discourse tends to become more expressive because of the modified "distribution of psychical energy," and aspects to do with emotions and drives become more prominent; (d) "the psychical energy thus saved" enhances the self-observing subject's capacity for "attentively following the involuntary thoughts"; and (e) the concurrence of attentive self-observation with the appearance of "involuntary ideas" creates a situation in which "involuntary ideas are transformed into voluntary ones."

The investigative method of free association as proposed by Freud was undoubtedly a modification, but it was not a complete reversal of the method inherited from Breuer. The same cannot be said of the introduction of the *principle of psychoanalytic interpretation*. From an operative point of view, this was the most important innovation with respect to the previous method.

What role did Freud assign to analytic interpretations? If we consider the investigative and epistemic importance he attributed to self-observation, this role can be none other than that of making the patient's task of self-investigation easier. The very content of the interpretations had its chief source in the knowledge accumulated from introspective data reported by patients, as well as in material taken from Freud's own self-analysis.

By refraining from hypnotizing them, Freud gave his patients more autonomy, thus favoring subsequent developments in the psychoanalytic method which found expression in the concepts of transference and resistance. With the operative principle of interpretation, on the other hand, he rendered the analyst's influence on the introspective activity of the patient much more conspicuous.

Without dwelling at length on this point, I would like to propose that the technical concepts of transference and resistance, too, implied, at least in part, an extension of the patient's introspective activity. By asking them to explain themselves, with all the difficulties involved in following the method of free association and in their relationship with the analyst, Freud assigned an even greater responsibility to the patients, regardless of the fact that analytic interpretations may have helped them in their self-investigative labors.

But if the introduction of transference meant, on the one hand, increased introspective responsibility for the patient, in the sense that he/she was required to consider the relationship with the analyst as a personal construct, it was no less important, in its operative consequences, for the analyst; the concept of transference contributed to the fact that increasing attention was given to the analyst's attitude toward the patient. In this way the operative principle of interpretation was supplemented by the *mental disposition of the analyst* as the most characteristic aspect of the therapeutic setting. Hence the various considerations regarding the *mental organization of the analyst: the analytic neutrality and abstinence* which structured the relationship with the patient; *the free floating attention* as the basis upon which

to build an adequate interpretation; and *countertransference* as a sign that the first two aspects have failed. Notwithstanding all these operative norms, however, Freud never gave the impression of wishing to relegate the patient's self-observative function to second place.

2. *Interpretationist and Relationist (Regressionist) Methodology*

For a clearer understanding of the evolution of free association as a method of self-observation, it may be useful to take a brief detour and consider certain methodological developments which have progressively received greater attention. In these developments, the operative modes of interpretation and the mental attitude of the analyst have tended to lead toward the abandonment of the original therapeutic sphere of action and have become fundamental investigative principles, thus usurping the prime epistemic position previously bestowed on the introspective subject.

In the Kleinian approach, for example (and certainly in other psychoanalytic orientations as well), the *method of analytic interpretation* has prevailed. The other tendency, which greatly accentuates adaptation to the emotional needs of the patient, could be called relationist (or regressionist). Here, the basic therapeutic-investigative method has become that of the relationship to and the mental attitude of the analyst; its most influential proponents have been Ferenczi, Balint, Winnicott, and Kohut. While M. Klein and her school have claimed a strict adherence to Freudian principles, the relationists (regressionists) have preferred to stress the diversities and departures from Freud's original methodology (with regard to the operative principle of neutrality, or abstinence, and of countertransference seen as a hindrance to the analytic situation).

Certain passages in one of Klein's papers (1955) can be used to show how the investigative principle of free association and the operative one of interpretation have been modified in her

conception of the analytic procedure. At the beginning of "The Psycho-Analytic Play Technique: Its History and Significance," we find the following statement: ". . . my work with both children and adults, and my contributions to psycho-analytic theory as a whole, derive ultimately from the play technique evolved with young children" (p. 122). "Play technique" immediately gives an idea of what the new method might imply: the material is "freer," and so there is greater need to interpret it (Spence, 1982). Klein did not see play as a self-observing activity, as Freud saw free association, but for the most part as material to be interpreted. Indeed, this supposition is clearly confirmed on the following page, in the very passage where Klein was reaffirming her adherence to Freudian method: "This approach corresponds to a fundamental principle of psycho-analysis—free association. In interpreting not only the child's words but also his activities with his toys, I applied this basic principle to the mind of the child, whose play and varied activities—in fact his whole behavior—are means of expressing what the adult expresses predominantly by words" (1955, p. 123). I believe this statement shows clearly how the investigative principle of free association has been overturned and transformed into the production of material to be organized and interpreted.

In this way, the interpretative phase is given enormous importance, further indicated by the following quotation: "It was always part of my technique . . . to keep to the psycho-analytic procedure only, which, to put it in a nutshell, consists in understanding the patient's mind and in conveying to him what goes on in it" (p. 129). This last quotation also shows, I think, what a short step there is to the next position, in which the analyst no longer transmits knowledge, *but thinks for the patient*. In fact, this is the very step taken by Bion: his method was linked to the conception of the inability to symbolize present in the psychotic, or asymbolic, area of the patient's mind, and the analyst was assigned the task of thinking in his/her place.

With regard to relationist (regressionist) methodology, I would like to stress first of all that its exponents should not be

thought of as theorists of object relations. The term I use has to
do with the method, while the term "object relations theorist"
has to do with the body of psychological knowledge. They are
not always the same thing: in many ways, for example, M. Klein
can be included among the principal object relations theorists,
while her clinical methodology, so strongly centered on inter-
pretation, goes in a different operative direction from that of
the relationists.

The fundamental concept underlying *relationist (regressionist)*
methodology is the *psychic defect*, which is not dealt with through
interpretations, but preferably with empathic adjustment to the
needs of the patient. Some of the concepts elaborated by Balint
(1968), such as the "basic fault" and the "new beginning," give a
sufficiently clear idea, in my opinion, of the conceptual founda-
tions of this operative mode. Its most striking and widely pro-
claimed feature is the rejection of the therapeutic principles of
abstinence and neutrality on the part of the analyst, and the
substitution of an increased attention to the relational regres-
sion of the analysand, accompanied by a complementary mental
state in the analyst. Di Chiara is very explicit on this point: "The
[psychoanalytic] experience . . . can . . . provide (and this is the
point to arrive at) some idea of what dependence can be like
when it takes place in a world which is benevolent as opposed to
tyrannical, which is clear as opposed to confused, which is how
we suppose the analyzed mind of the analyst to be" (Di Chiara,
et al., 1985, p. 334). "The cure takes place—and this appears
more and more clearly—in the emotional encounter between
the two members of the couple at those levels where the illness
appeared" (Di Chiara, 1987, p. 83). "The analyst looks for the
patient's ego and attempts to lead it back to its original needs, to
initiate it into the ways in which these needs have not been satis-
fied, and to allow these needs greater satisfaction" (Di Chiara,
1986, p. 347).

The earliest description of the methodological necessity of re-
living correctively, in the here and now, the regressive experi-
ence connected to traumatic points of fixation is probably to be

found in Ferenczi and Rank (1924). Initially, this methodology was conceptualized in terms of a concrete analogy to a solicitous parent, as can be seen from the following quotation from an article by Ferenczi (1931):

> It might justly be said of my method with my patients that it is like 'spoiling' a child. In following it, one gives up all consideration of one's own convenience, and indulges the patient's wishes and impulses as far as is in any way possible. The analytic session is prolonged till the emotions roused by the material are composed. . . . The analyst's behavior is thus rather like that of an affectionate mother, who will not go to bed at night until she has talked over with the child all his current troubles, large and small, fears, bad intentions, and scruples of conscience, and has set them at rest (pp. 136-137).

After Ferenczi's experiments, the adaptation of the analytic attitude to the maternal behavior model underwent a kind of "distillation" process, in the course of which attempts were made to "extract" the essential features of the maternal mental disposition, which could then be matched by the correct psychic organization on the part of the analyst. The methodological contributions made by Balint, Winnicott, Bion, and Kohut centered around the search for the common elements in the mother's mind in relation to the child and the analyst's mind in relation to the patient. In this search, a specific mental function was identified and called the "psychoanalytic function of the mind" (Hautmann, 1981). It was endowed with specific qualities capable of guaranteeing adequate development of the relational capacity (Di Chiara, et al., 1985).

The relationists (regressionists) tended to stress their point of view in opposition to the traditional role of interpretative activity, which is considered useless if directed at mental facts situated in extra- or preverbal areas (Balint, 1968). On these grounds, they criticized the "hermeneutic conception" of psychoanalysis, which, in their opinion, is guilty of making light of the patient's autonomous activity, to the extent that it reduces

his/her communications and behavior to a text to be inter-
preted. At this point it is important to bear in mind that the
discussion about the relation between analytic procedure and
hermeneutics is not only complex and fascinating but is also still
under way. It should not be forgotten that Freud stressed the
importance of distinguishing between the hermeneutics of the
observer and that of the self-observer; and it is this very distinc-
tion between the "two hermeneutics," together with their nu-
merous connections, that could be the most characteristic fea-
ture of the total "hermeneutic field" in psychoanalysis.

3. From Free Association to the Liberalization of the Fundamental Rule

Mahony quoted Jones in saying that "the devising of 'free as-
sociation was one of the two great deeds of Freud's scientific
life, the other being his self-analysis . . .' " (Mahony, 1979a, p.
41). If we accept this rather peremptory statement, we are
tempted to ask ourselves, like Mahony (1979a, p. 16), why so
little attention has been given to this fundamental scientific fact.
A further question could be asked regarding the fate of the *fun-
damental rule* in the branching out of methodologies which has
taken place.

The impression one gets is that in all the different psychoana-
lytic orientations, the *method of free association* has lost the rigor
and incisiveness of its original formulation by Freud. While no
school has openly refuted it, all have re-elaborated it, almost
inadvertently, assimilating it according to their own particular
methodological needs.

In the methodological approach which places the accent
firmly on interpretation, free associations are taken into ac-
count in their guise of "material to be interpreted"; hence the
concept of association is extended to include every action or
aspect of the patient, verbal and nonverbal. Clearly, since free
associations include all the mental and behavioral aspects of the

patient, there is no need to expound on the fundamental rule in the course of treatment. Very probably, then, this extension of the concept of association has had a significant part to play in the "liberalization of the fundamental rule."

In the relationist (regressionist) approach, the method of free association simply loses its importance in the face of the operative principle of an optimum relationship, sustained by the appropriate mental attitude on the part of the analyst.

One might wonder how it is possible that an investigative principle, considered the true cornerstone of the psychoanalytic procedure, should possess so little autonomy as to be easily assimilated by widely different methodologies. Probably there are many reasons for this, and the subject needs further study; one author who has discussed the question recently is A. Kris (1983). He is well aware of the danger that the method of free association will prove too weak in the face of a succession of conceptual innovations, and he places great stress on the close link between the topographical model, with its steady point of reference in the consciousness of the subject, and the method of free association. In his opinion, those conceptualizations which were aimed at supplanting the topographical model at the level of theoretical knowledge (such as the tripartite structure of the mind), have had the effect of depriving the method of free association of its specific and privileged investigative function.

Here I shall limit the discussion of what seems to me to be the most striking aspect of all the "reinterpretations" of the fundamental rule, irrespective of the general methodology adopted.

Since Freud's original formulation, two views of free association have gradually developed, which, while not openly conflicting, seem to be anchored to substantially different operative positions. In order to understand this evolution, it seems appropriate to distinguish between the *method* and the *rule* of free association (Mahony, 1979a).

The *method* of free association is an individual self-investigative procedure which Freud himself put to profitable use in his own self-analysis.

The *fundamental rule*, on the other hand, is a relational fact which obliges the patient to follow the self-observing method within the relational context.

It is obvious that in clinical practice the two aspects of free association—that of the method and that of the rule—could not be kept distinct, just as it is quite natural that the conception of free association should, in the end, have come to have very different connotations, according to whether the emphasis is placed on the self-observing aspect or on the need to comply with the relational norm. *Free association as a method of self-observation has retained a relative autonomy only in situations of clinical practice where the self-investigatory project of the analysand becomes the main objective of the psychoanalytic experience from the very beginning.*

But when the accent is on the therapeutic nature of the analytic relationship, the fundamental rule has necessarily had to adapt itself to the methodological needs of a relational kind. Here the "task" assigned to the patient of "associating freely" has come into conflict with the aim of leaving the analysand free to give spontaneous expression to his/her tendencies. The self-observing method of free association has been "liberalized" and has become a sort of "free expression of relational attitudes," in which the verbalization, the silence, the behavior of the patient are all utilized uniformly as indicators of his/her communicative and relational tendencies. At this point, it is not at all surprising that *the patient is left free to say whatever comes into his/her head*, and that it is not made clear to him/her that the method of free association is an integral and essential part of the psychoanalytic situation.

Perhaps the earliest clear statement of this modification of the method can be found in Little (1951, p. 47). But as Zucchini (1987) has recently pointed out, a large number of psychoanalysts had already made this important modification in method before. This change in method could perhaps be seen as a shift in the way of conceiving the analytic situation, from an authoritative-paternal code to a permissive-maternal one, possibly reflecting wider sociocultural trends. In my opinion, though, this psychosocial interpretation of the fact is not sufficient clarifica-

tion for what amounts to a substantial methodological subversion. E. Kris (1956, p. 265, n.) suggested that the above-mentioned change has "far reaching consequences for the structure of the analytic situation." There is real possibility that this modification does not simply reflect greater sensitivity to the relational needs within the analytic situation but also fundamentally alters the investigative and epistemic dimension of psychoanalysis.

After all, it is not at all clear how an investigative method which was considered of prime importance came to be radically modified for relational reasons. It is obvious that other aspects of the setting (for example, the use of the couch) can undoubtedly influence the relational experience, but this has not brought about changes in the setting: on the contrary, it has always been claimed that a careful examination of the meanings attributed by the patient to the technical procedure was a *bona fide* part of psychoanalytic *praxis*, and that, anyway, the investigative and therapeutic advantages to be derived from this outweigh the relational difficulties which may arise. It seems odd, therefore, that the attitude is not the same with regard to the more fundamental aspect of analytic methodology represented by the method of free association. It is unquestionable that the patient attributes to the rigorous application of this method a rich range of meanings which find expression in transferential reactions of various kinds. But apart from this, it is important to consider the real investigative value of a rigorous application of the method of free association, irrespective of the transferential reactions which it tends to promote. It may well be that it is the patient who suffers the greatest loss in this liberalization of the self-investigative method, by being deprived of the most effective tool for self-observation which can be put at his/her disposal.

4. *The Variants of Clinical Psychoanalysis*

It seems to me misleading to look for a model of clinical psychoanalysis which is the "true" expression of the psychoanalytic

method in its pure state. This would only serve to justify all the controversies over which psychoanalysis is the "real" one.

I believe that the very concept of psychoanalytic method contains obscure points, since it embraces methodological principles belonging both to the investigative and to the therapeutic spheres. The neglected or confused distinction between one set of principles and the other is bound to create considerable misunderstanding.

I have proposed that the fundamental investigative principle of psychoanalysis at its birth was introspection (subsequently modified by the introduction of free association, resistance, and transference), which Freud called self-observation, in order to distinguish it from introspective methods more closely centered on controlled reflective thought. The fundamental therapeutic principle, on the other hand, was that of analytic interpretation, from which the analytic attitude and the mental organization of the analyst then became partially differentiated. *Thus, the variants of clinical psychoanalysis consist of the different combinations of the methodological investigative principle and the therapeutic ones.*

I imagine that the greatest source of perplexity in this formulation will be my assigning the investigative priority to the patient, instead of to the analyst. I would like to stress, however, that the investigative priority is assigned not so much to the patient as to the introspective mode. As Kohut (1959) reminded us, introspection constitutes the psychological field; it also represents the investigative method with the closest connection to psychic reality, irrespective of how great the observer's intuitive or empathic abilities are or of how complete the general body of knowledge is on which the analysts base their interpretive formulations.

In conclusion, it must be borne in mind that "investigative" does not coincide with "cognitive," just as the latter, for its part, should not be seen as in opposition to "therapeutic." Investigative aspect implies, above all, a very close link with the reality under examination—the patient's psyche, in our case—and so it is quite natural that the epistemic priority should be given to

the patient. Undoubtedly, interpretation, too, in its capacity as a therapeutic principle, yields knowledge. But it is knowledge of a mostly referential kind (Mahony, 1979b), belonging more to a sphere of logical operations connected with reordering and linking, than to the sphere connected to the knowledge of one's own subjectivity, which has predominantly existential implications (Barratt, 1984).

SUMMARY

In the course of the evolution of psychoanalytic procedure, various methodological principles have emerged, which are separated into investigative and therapeutic ones. The basic investigative principle consists of the method of self-observation by free association, due to its most intimate tie with the object of the investigation, namely, the psychic reality of the patient. The methodological principle of interpretation, together with the mental attitude of the analyst, are supposed to have an adjuvant or therapeutic function in relation to the main investigative principle.

At the methodological level it seems impossible nowadays to refer to a true, unified psychoanalytic procedure in a "pure state." The variants of psychoanalytic *praxis* incorporate, to a varying degree, and in different forms, the basic methodological principles, both investigative and therapeutic.

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Lacan's Words

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LACAN'S WORDS

BY STANLEY A. LEAVY, M.D.

The usefulness of Jacques Lacan's writings on psychoanalysis is likely to remain in dispute for some time to come. It remains a serious question whether or not they will ultimately be regarded as a temporary Parisian phenomenon, absorbing the interest and allegiance of a huge following with a limited understanding of their meaning, and then disappearing in the presence of a yet newer wave. Even if that is the outcome—which I doubt—the phenomenon itself deserves serious attention, because Lacan's reinterpretation of psychoanalytic theory issues from within psychoanalysis, and probably has subtly influenced many who would deny much importance to Lacan's overall contribution. At all events, many analysts are at least curious about Lacan, but understandably find themselves daunted by his language and style, and refrain from further inquiry.

Without venturing into Lacan's stylistic complexities and perversities, I offer here a brief introduction to his words, or rather to his special uses of words, hoping that a few points may be clarified and intelligent criticism may be fostered.[1] If we make no attempt to read him because of his esoteric vocabulary, we leave him to a self-contained in-group who prefer not to be integrated into the forever ongoing movement of Freudian analysis. What follows, then, is a kind of glossary in which the terms introduced by Lacan are defined in context with one another and, as far as possible, related to more traditional terms,

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[1] Readers looking for fuller explanations of Lacan's concepts are referred to Lacan (1966), Laplanche and Pontalis (1967), Muller and Richardson (1982; an indispensable work), and Wilden (1968).

with the special words of Lacan's system italicized as they come up.

Lacan's terminology is essentially phenomenological, in that it is descriptive of the psychoanalytic situation as Lacan saw it. It is a very sophisticated description, however. We may begin with the *subject*, or *I*, who, being heard through the patient's speaking, is sometimes called the *decentered* subject, i.e., the source of the unconscious message, and therefore not to be identified with the conscious individual on the couch. The subject is only infrequently the "self" and is assuredly not the *ego*, which, for Lacan, is exclusively an agent of defense, of distortion. Nor is this subject the same as the "self-representation" of Hartmann and Jacobson, which is probably closest to Lacan's *imaginary subject*, to be accounted for below. The subject governs the slip of the tongue, and speaks through the dream and the associations. These distinctions may become clearer if we take as the analytic goal the merging of the subject with the conscious speaker, an always unfulfilled task.

Since Lacan was neither a personalist nor a humanist, even the unconscious subject is not the ruler in his house. The subject is under the domination of *language*, because she speaks, and *speech* occurs through the *sign*. First let us distinguish language and speech, more or less according to the teachings of F. de Saussure, from whom Lacan took them. Language is the natural verbal symbolic structure of a community, with its lexicon, syntax, and semiotic. The individual is born into language, or otherwise initiated into it, so that all his or her mental processes are under its sway. Language is therefore *transpersonal* in the sense that individuals derive their world from it, and are constrained by its structure. Similarly, unconscious processes obey the laws of language, and in particular the *tropes* or figures of speech by which language is arranged. Speech on the other hand is the process of utterance of the individual's discourse, in words and sentences and, of course, in longer utterances.

Language may also be described as *synchronic* or as *diachronic*. It may be seen in its totality as given at any particular time,

synchronically, or it may be seen within a historical sequence, diachronically. It is diachronic in response to the history of a given natural language, or to the history of the individual's appropriation of it during development. Speech, unless it is deliberately or accidentally anachronistic, is always synchronic.

Language is a system of signs. A word or other verbal unit is a *signifier*, an acoustic form or its written expression, arbitrarily presented by the natural language and referring to a specific concept, the *signified*. It is the signifier and the signified that constitute the sign. The signs of language are the most important class of the system that Lacan called the *symbolic*, which he distinguished from the *imaginary* and the *real*. For the most part, the real comprises the physical world as it is, in abstraction from personal experience. Lacan was not a philosophical idealist, and he accepted the physical world as existing outside any appropriation of it. However, within human experience, and dependent upon perception, we have only the imaginary and the symbolic.

The imaginary does not mean the illusory, although illusions generally belong within the world of the imaginary. Lacan here plays on the word *image*, the percept as it persists in memory, conscious or unconscious (Freud's mnemic image). Purely imaginary percepts are present only during early childhood, before the institution of the symbolic through the acquisition of language, but the imaginary remains the enduring treasury of images, even after the arrangement of images has been subordinated to the symbolic order of language. It is of the nature of the image that it stands in a one-to-one relation with the percept; the image is not conceptual, and therefore not itself a sign. Essentially, fantasies are of the imaginary order.

With the advent of language, the child's world becomes a symbolic one. Experience is governed by the categories of language; words are signifiers. Signifiers (unlike images) are polysemous: a signifier has more than one referent, or, in Lacan's phrase, "*The signified slides under the signifier.*" The kernel of this dictum is relatively simple: any concept (signified) may be represented by more than one word and correspondingly any word

may refer to more than one concept. (This kind of configuration is congruent with Freud's account of the relation of a dream element to a variety of dream thoughts, and to the representation of a dream thought by a variety of dream elements.) This situation, as noted, is strikingly different from the univocal condition of the imaginary.

Polysemy is the basis of *metaphor and metonymy*. In this connection, Lacan's source was Roman Jakobson, in his construction of the twofold system of *selection* and *combination*. Since a concept may be represented by more than one signifier, and vice versa, meaning may be carried over ("meta-phor") from one word to another, so that words of slightly (or even greatly) different literal meaning may stand for one another. In speech we select one of the possible metaphors to express our meaning, as when we say "The players were all at the peak of their form," with neither "peak" nor even "form" being intended in its most literal sense. Metonymy is the substitution of an attribute, adjunct, or association for the thing meant, as in "The White House denied all knowledge. . . ." A frequent variety of metonymy is *synecdoche*, by which the part stands for the whole, or the whole for the part, as in "a town of a hundred chimneys."

Parallel with metaphor/metonymy and selection/combination goes the pair *paradigmatic/syntagmatic*, the former member meaning the array of more or less synonymous words from which a selection may be made, the latter meaning the variety of combinations to which they may be put.

For Lacan, all this was not just a matter of structural linguistics at the conscious and preconscious levels. Lacan's most famous dictum is "*The unconscious is structured like a language.*" That means that the arrangement of unconscious ideas, such as the latent meaning of dreams, is in accordance with the principles of metaphor and metonymy, running roughly parallel to Freud's division of the primary process into condensation and displacement.

For Lacan, the symbolic order is introduced into the child's mental life through the intervention of the *name-of-the-father*. To

the extent that the child has lived in the primary, dyadic, symbiotic interaction with its mother, the imaginary reigns. Disruption of this state comes in the form of the reference to the father as another person, an *other*, but mainly as a name, since it is not his physical presence but his introduction by name that establishes once and for all his *presence as an absence* and, as a consequence, the existence of names or words or signifiers as enduring signs. Simultaneously, the power of the father, the object of mother's love, the mysterious unseen presence, rewarder and punisher, is of *phallic* significance well before the clear recognition of the penis as the distinctive feature of the male. In this way the name-of-the-father and the phallus are merged as the *primary signifier*.

To anticipate, we may refer here also to Lacan's interesting suggestion that a paramount feature of psychosis is to be found in the failure of registration of the primary signifier, a process that he called *foreclosure*, which stands as the basis of what Freud called "disavowal." The psychotic's problem with reality is that he or she has not fully experienced the symbolic order because of his or her exclusion of the primary signifier, so that the encounter with the real may not submit to the criteria of symbolic meaning. One last point here is the matter of the *law*: the name-of-the-father, with its peremptory establishment of the oedipus complex, thereby introduces law into the experience of the child; all antecedent rhythms, order, and rules are from then on subsumed under its influences. This, again, is roughly compatible with the traditional theory of the origins of the superego, but once more we see how Lacan ingeniously focuses our attention on the institutive agency of language.

At this point we must return to the imaginary order. Lacan envisaged the original experience of infants as disorganized, without unification of the perceptions of the parts of the internal and external worlds. Children's perception of themselves begins with a *fragmented body*, which becomes unified into a whole structure during the period of six months to a year and a half; this is called the *mirror-stage*, because it is the sight of one-

self in the mirror, or, derivatively, the mirroring by the mother, that first constitutes the child as a whole. Thus the first awareness of oneself as a totality comes from the outside. The *alienation* of the subject begins here. Likewise, because of this first encounter of mirroring, objective reality is presented in reversal, a *miscognition* that pervades the mirror stage. Throughout life reality is immediately presented as image, with the one-to-one relation mentioned above, only partly yielding to the symbolic interchangeability that language affords. These unconscious fantasies are images that are caught up in signifying (symbolic) structures.

All the foregoing elements of Lacan's conceptualizing refer to *signification*, but ultimately what is signified is *desire*. Lacan differentiates *need, desire*, and *demand*. Need, to which he gives the least attention, is the energetic, biological source of activity that exists in hunger and thirst, and in sexuality to the extent that it, too, has a physiological basis. Need is the only one of the three that arises without reference to another person. Desire is the truly psychological force, in that it cannot be known apart from some formative meaning. In Lacan's words, *desire passes through the defiles of the signifier*: therefore, its value may be transferred, as by metonymy, from one signifier to another associated with it. Because it is symbolic, it necessarily refers to the *Other*, who here is a generalized other person. Desire aims not so much toward gratification as toward *recognition*. Another statement of Lacan's, to this effect, is that *the desire of the subject is the desire of the Other*. In these instances Other has a meaning different from, but related to, its use as the unconscious, decentered subject. Demand is an address by the subject to a specific other person. Lacan spoke of desire as existing between need and demand.

While need is its physiological basis, desire originates psychologically in the *want-to-be*. Here Lacan appears to mean, with Plato, that all desire comes from a sense of insufficiency. The mother opens up in the infant, as it separates from her into a

being of its own, the anticipation of the symbolic order, namely, desire.

One difficulty with trying to "translate" Lacan's words is that one can fall into the error of supposing that what Lacan has to teach us is only a different way of saying what we have already known. That might, must, be true of certain details. But the deeper discovery in reading Lacan is that psychoanalysis is something other than what we often think it is. That discovery is obscured, often by Lacan himself, when we lose sight of the structural and, even more, the phenomenological foundations of his thought. It is the *being*—and the *lack of being*—of the person that psychoanalysis reveals. The "talking cure" is not just a technical device: the person speaks and the person replies. Psychoanalysis is a coming-to-be, in and through a discourse, in which desire is made known. We do not have to accept all of Lacan's teachings, much less his eccentricities, to find value in reviewing our understanding of psychoanalysis in the light of his thought.

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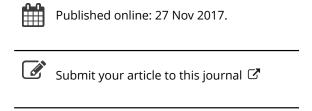
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Centennial of an Overlooked Freud Paper on Psychosomatics

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CENTENNIAL OF AN OVERLOOKED FREUD PAPER ON PSYCHOSOMATICS

BY MAURICE S. NADELMAN, M.D.

In 1890 Freud wrote a paper, titled "Psychical (or Mental) Treatment," which was included, along with the work of other contributors, in a collective work on medicine.[1] He specified psychical treatment as one which starts in the mind and treats mental or physical disorders "by measures which operate in the first instance and immediately upon the human mind" (Freud, 1890/1905, p. 283). It is a treatment in which the use of words is the essential tool. He noted that the relation between the body and the mind is a reciprocal one, although until shortly before the time of the paper, the effect of the mind on the body had received less attention. He observed that this lack of attention seemed to have been caused by the physicians' fear of abandoning a proper scientific ground. This attitude, however, had begun to change with the increasing number of patients who suffered from various kinds of physical and bodily complaints, but in whom no physical etiology could be discerned clinically or at postmortem.

Freud stressed that the symptoms of a large number of these people could be very much influenced by psychological factors (e.g., excitement, sorrow, worry). Symptoms may change so that other systems are affected; and symptoms can worsen or even disappear. He described these functional illnesses as neuras-

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[1] The date was incorrectly given as 1905 in *The Standard Edition* (7:282), although this was corrected in the Index (*S.E.*, 24:27). This paper appeared in the first edition of *Die Gesundheit*, which was published in 1890. The 1905 publication was in a subsequent edition.

thenia or hysteria, and he emphasized that in at least some of these patients the symptoms originated from "*a change in the action of their minds on their bodies*" (p. 286). In passing, he referred to the more remote causes of the disturbances which affect the patients' minds, a question to which he returned at the end of the paper.

Freud noted common, everyday examples of the mind's effect on the body: he referred to such things as the effect of the emotions on the facial muscles and on the movement of the hands, which often are indicative of how the persons feels. Affects can have other physical results. For example, persisting worry or grief may undermine the nourishment of the whole body, cause the hair to turn white, and induce pathologic changes in the walls of the blood vessels, whereas feelings of joy and happiness may influence the body to show signs of youth again. He stated, "The major affects evidently have a large bearing on the capacity to resist infectious illnesses" (p. 287), and he asserted that an affect such as depression can cause diseases of the nervous system, with manifest anatomic changes, as well as diseases of other organs. He assumed that such patients have an underlying predisposition for the disease to become manifest. He noted that with states of illness already present, violent affects usually worsen the condition, yet there are instances of the opposite occurring. In addition, a violent shock or a deep humiliation can cause a person to die suddenly, just as may sometimes occur from the unexpected impact of great joy.

Although affects are connected with somatic processes, all thoughts are to some degree "affective" so that a person who is quietly thinking will experience excitations or stimuli corresponding to the thoughts or ideas which are discharged into the smooth or striated muscles. Freud spoke of a physician who claimed an ability to produce pains in any part of his body to which he directed his attention, a clear example of physical phenomena that are dependent on mental determinants. He observed that even imaginary pains "are no less real and no less

violent on that account" (p. 288). Pains also can decrease or even disappear if the attention is diverted from them: for example, a soldier wounded in the heat of battle may not feel the pain of the wound. In addition, the influence of volition can play a role in illnesses, so that "a determination to recover or a will to die may have an effect on the outcome even of severe and precarious illnesses" (p. 289).

The mental state of expectation, particularly fearful expectation, also was considered by Freud: he questioned whether those who are fearful during an epidemic, for example, are more vulnerable. On the other hand, the opposite of fearful expectation, hope or faith (religious faith, e.g.), sometimes plays a role in a miraculous cure of an illness, whether of mental or "organic" origin, previously resistant to medical treatment. For other patients, reputation and group influence may substitute for faith, as in the case of fashionable treatments from fashionable doctors which may produce cures beyond the power of the therapy.

The patient's mental attitudes often play a role in the treatment: faith in the procedure, confidence in and respect for the medical skill, and the power attributed to the doctor's personality as well as the patient's liking the doctor. Freud noted that a patient will often feel better the moment the doctor enters the room. Medical treatment to produce mental states and conditions most propitious for the patient's recovery is a technique that dates back to ancient times: the curative effects of the potions, baths, and other treatments used then can be explained only by such means. The physician's personality was important for producing in the patient a state of mind favorable for recovery. Freud observed, however, that all these forces which occasionally cure illnesses sometimes fail to achieve therapeutic results; he attributed this to the "autocratic nature of the personalities of the subjects, with their variety of mental differences" (p. 292). He observed that the idea of imposing a propitious state of mind by suitable methods rather than leaving to the patient how much compliance the patient should show, was

the beginning of modern mental treatment. He emphasized the
patient's right to a free choice of a doctor because of its impor-
tance in favorably influencing the patient mentally. At the same
time the doctor must forgo ("He has not the power or has not
the right to invoke them" [p. 293]) fear and fright for thera-
peutic ends, as well as relations with the patient which are con-
nected with tender feelings. These restrictions would seem to
limit the doctor's power to bring about mental changes in the
patients.

Freud noted one approach which would avoid these restric-
tions: hypnosis. But hypnosis, with its power of suggestion,
must be pitted against the underlying conditions which created
and maintained the symptoms. A patient may be easily hypno-
tized, for example, and yet remain unchanged by a hypnotic
suggestion which denies his or her state of imaginary paralysis.
But even when it is effective, it may require a series of hypnotic
sessions, and the symptoms may abate only temporarily. Freud
ended the paper with the anticipation that the search for other
procedures, via deeper insight into the processes of mental life,
would provide more effective weapons in the fight against ill-
ness.

"Psychical (or Mental) Treatment" was not printed again
during Freud's lifetime, and it seems to have been overlooked in
the last hundred years. This paper introduced a psychosomatic
point of view a century ago, and it laid the groundwork for what
was to become a psychoanalytic approach in this field. Further-
more, comments and reflections in the paper touch on issues
that are as timely today as they were then. Freud introduced
subjects that had not previously been discussed. For example,
the idea of imposing a propitious state of mind in the patient by
suitable methods rather than relying on the patient's ability to
do so antedates by many years the expectation in psychoanalysis
that the patient will say what he or she is thinking without any
censorship. It was also in this paper that Freud for the first time
spoke of the patient's feelings about the doctor and their im-
portance for the outcome of the treatment, although the term

transference had not yet been introduced. The concept of countertransference is also clearly delineated in the same context, along with the proscription against the doctors' discharging their positive or negative feelings in their relations with patients.

Freud asserted that affects such as depression can play a role in causing physical illness. His assumption that such patients have an underlying predisposition for the disease to become manifest is compatible with the concept of a threshold level: the disease becomes manifest with the additional emotional stress. It is implied that adequate treatment of the emotional stress would avoid exceeding this threshold level and thereby abort eruption of the disease. Asthma is an excellent example of such an illness. Freud also noted that all thoughts are to some degree "affective," with a resulting discharge of excitations or stimuli into smooth or striated muscles. Half a century later Fenichel (1945) would distinguish organ neurotic symptoms from conversion symptoms: the former result from non-specific emotional stress and the latter from specific, psychodynamic causes with unconscious meaning. Although the organ neurotic symptoms (unlike conversion symptoms) are not directly accessible to psychoanalysis because of the non-specific emotional stress, if the attitude underlying inadequate resolution of the stress can be analyzed, the symptoms will disappear. The symptoms in this situation are directly caused by the non-specific stress, whereas the physical illnesses mentioned above are a result of an underlying predisposition with superimposed emotional stress exceeding the threshold level for manifestation of the disease.

Freud's connection of the individual's state of mind (via the major affects) with the capacity to resist infectious illness anticipated the role of immunologic factors in resistance and their interplay with the emotions. He gave as an example in his paper the increase of infectious illness in a defeated army, as compared with the victorious one. The state of the emotions, how-

ever, appears to be connected even more widely to physical welfare than had been anticipated. A recent report by Spiegel (1989) on the psychosocial treatment of patients with metastatic breast cancer surprised the investigators, for they had anticipated at the outset that positive psychological effects and improvements in the quality of life would not affect the course of the disease. Their study showed that the group in psychosocial treatment lived, on average, twice as long as did controls, those with the same oncologic care but no weekly group therapy. They noted "neuroendocrine and immune systems may be a major link between emotional processes and cancer course" (p. 891).

Although in the paper Freud described the relationship between the body and the mind as a reciprocal one, he focused primarily on the effects of the mind on the body. He mentioned, in particular, the affects and their influence on resistance to illness, falling ill, and recovery. Sometimes, however, the affect may be a result of an unconscious awareness of a serious illness. Eissler (1955) treated a woman who had had a simple mastectomy three years earlier. She brought in a dream in which she saw her newborn grandchild, who had died shortly after birth, in a coffin. "From her associations it became clear that the background of the dream was a wild triumph over newborn life that had to perish, whereas she was permitted to live" (p. 132). He felt that such a triumph was "absolutely foreign to this Victorian, essentially inhibited and dutiful lady" (p. 132), and he insisted that she be examined immediately rather than wait for her regular checkup, which was not due for a few months. A recurrence of her malignancy was found, and the patient was operated upon once again.

When Freud wrote his paper, "Psychical (or Mental) Treatment," a hundred years ago, he briefly summarized what had transpired in the past, and he related it with the methods of his time. He then focused on the treatments of his day, with comments and critiques which were timely; indeed, some of them

were far ahead of their time, ideas for the future treatment of illness.

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Richard F. Sterba 1898–1989

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RICHARD F. STERBA

1898-1989

Psychoanalysis lost one of its few remaining pioneers when Richard Sterba died on October 24, 1989, in his ninety-second year.

In 1927, Richard Sterba, along with Grete Bibring, constituted the first graduating class of the Vienna Psychoanalytic Institute. The path that brought him to psychoanalysis reflected both his intellectual courage and his humanism. He was born in Vienna into a liberal middle-class family. His father, a professor of mathematics and physics, endowed him with a love of learning and culture. His early education was the classical *Gymnasium* one of the time and included Greek, Latin, geography, history, oratory, and religion. The interests which were to further enrich his life and work developed in adolescence. The humanistic tradition led to extensive reading of classical and modern literature and philosophy. He became a serious student of music and an accomplished violinist. Typical of his enthusiasm and of the standards he set for himself, well into his seventies he made at least one trip a year to London for violin lessons with a favorite teacher. To music was added his deep interest in, and love of, graphic art.

After military service in World War I, Sterba began medical studies at the University of Vienna. There, influenced primarily by Paul Schilder and Julius Wagner-Jauregg, he considered a career in psychiatry. During his medical residency, he began to read Freud's works. They impressed him so deeply that, despite discouragement and even derision by fellow students, he determined to become a psychoanalyst. In 1924, he applied to Dr. Edward Hitschmann, who, at the time, was the director of a

small clinic operated by the Vienna Institute, and undertook a personal analysis with him and began analytic training.

The years 1924 to 1938 in Vienna were particularly exciting and productive. While still an analytic student, Richard met and married his fellow student, Editha. The couple had two daughters, Monica and Verena. Richard and Editha worked closely together in raising their family, and later in teaching and writing, until Editha died in 1986, a few days before their sixtieth wedding anniversary.

Sterba was an enthusiastic student whose intellectual and cultural gifts were quickly recognized. Shortly after certification he was chosen to present clinical material at seminars. The teachers who most impressed and influenced him included: Helene Deutsch, Edward Bibring, Paul Federn, Otto Fenichel, Wilhelm Reich, Herman Nunberg, and Robert Waelder. Above all, his closeness to Freud's work *in statu nascendi* gave him a feeling of participation in a major new scientific and cultural process, a devotion to the cause of psychoanalysis, and a feeling of being elite and privileged. He attended some of the Wednesday seminars at Freud's home, and, on one occasion, presented a paper on sublimation which Freud discussed.

Hitler's rise to power and then the *Anschluss* left the members of the Vienna Psychoanalytic Society with no alternative but to leave the country. The Sterbas, being gentile, could have remained, but chose to cast their lot with their Jewish colleagues and left Vienna for Switzerland four days after the Nazis took over. Shortly thereafter, Dr. Müller-Braunschweig, from Berlin, urged Richard to return and head a restructured Vienna institute. Ernest Jones expressed disappointment that the Sterbas did not remain in Vienna and, in fact, refused to help them settle in England. On the other hand, Anna Freud, on learning of their decision, said, "We are glad that you will not play the role in Vienna that Felix Boehm plays in Berlin." After much difficulty, the Sterbas emigrated to Detroit in 1939. There, despite some early hostility and suspicion during World War II,

they remained to play a central role in establishing a major psychoanalytic institute and center in Detroit.

Sterba's contributions to the psychoanalytic literature extended throughout his long career and reflected the diversity and depth of his interests. His first paper, "On the Analysis of the Gothic [Art]," was written during his first year of analytic training. Of this, he later said, "It was in every sense a dilettantish undertaking." A number of his theoretical and clinical papers have become classics. Some of the earlier ones include his graduation paper, "On the Latent Negative Transference" (1927), and "The Dynamics of the Dissolution of the Transference Resistance," published two years later. At the 1932 Wiesbaden Congress, he presented, "The Fate of the Ego in Analytic Therapy," in which he introduced the concepts of the therapeutic split of the ego and the therapeutic alliance. His book, *Introduction to the Psychoanalytic Theory of the Libido*, published in German in 1931 and in English in 1942, was based on the course he taught for a number of years at the Vienna Institute.

Sterba believed strongly that psychoanalysis has a unique and valuable contribution to make to other disciplines and areas of human concern. This conviction, coupled with his own serious interests, resulted in many contributions dealing with his psychoanalytic explorations in literature, music, art, history, and contemporary issues. In 1954, with Editha, he published the volume, *Beethoven and His Nephew*. Shortly thereafter, the Sterbas undertook a study of Michelangelo and published several papers dealing with the relationship of the artist's psychodynamics to his artistic creativity. Additional family pride came later when Richard collaborated with his son-in-law, Robert Michels, in writing the article on Sigmund Freud for the *Encyclopedia of World Biography*, published by McGraw-Hill in 1973. A volume entitled *Richard Sterba: The Collected Papers*, published in 1987, contains a sampling of his scientific works, of which there are well over one hundred.

Throughout his long life and career, Richard Sterba retained

a deep, sophisticated enthusiasm not only for his work, but for his other wide-ranging interests as well. He was warm, relaxed, and had the knack of putting difficult situations and problems into humorous terms. He was outspoken, yet tactful, righteous but not self-righteous, and did not hesitate to express his strong sense of moral and ethical values. His dedication to work, and especially to patients, students, and colleagues, was boundless. In his teaching, he strove to pass on his pioneering spirit and idealism, despite the realization that times had changed. He remained a classical, orthodox analyst while accepting that some of Freud's ideas had to be revised in the light of later findings. He always looked to the future. Into his late seventies, he made monthly trips to New York to participate in research-study groups on perversion and on aggression. When bad weather made flying uncertain, he took the train a day before.

As father to Monica and Verena, and as grandfather to Tamara Schneider and to Katherine and James Michels, Richard was great fun to be with. He was sympathetic, emphatic, and teasable, and possessed an endless supply of stories and jokes. He considered himself fortunate. "I live on the sunny side of the street," he said.

Richard Sterba will be remembered with appreciation for his contribution to psychoanalysis, with admiration for his gifts and accomplishments, and with an inner smile for his love of life.

SIDNEY S. FURST

A Fresh Look at Psychoanalysis. The View from Self Psychology. By Arnold Goldberg, M.D. Hillsdale, NJ: The Analytic Press, 1988. 275 pp.

Arthur Malin

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BOOK REVIEWS

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A FRESH LOOK AT PSYCHOANALYSIS. THE VIEW FROM SELF PSY-
CHOLOGY. By Arnold Goldberg, M.D. Hillsdale, NJ: The Ana-
lytic Press, 1988. 275 pp.

This book is a compilation of eighteen papers, nine of which have
been published previously. They are organized into four sections:
Theory, Empathy, Character, and Clinical Papers.

Goldberg states in his introduction that, with regard to self psy-
chology, "The essays in this volume have been written on a course
midway between unbridled enthusiasm and forlorn hollowness—
with a lot of zigzags. They are offered as part of an effort that
seems to be the natural heir of new ideas; the search for more" (p.
xviii).

Goldberg views psychoanalysis from a self psychology perspec-
tive, but he expresses concern regarding certain trends which
sometimes appear to encourage an "anything goes" approach to
analytic work. Goldberg therefore presents his perspective on
science in psychoanalytic self psychology. He insists, for instance,
that empathy and empathic data gathering must be defined at the
level of rigorous thinking and theory formation. "Anything" does
not "go"; rather, careful study of the significance and meaning of
the data is required in the self psychological approach.

Goldberg expresses his belief that we do not build clinical data
into theories and then into values, as Waelder had urged. Goldberg
states, "We *start* with our values and our theories, and only then
can we see a fact" (p. x). He is particularly persuasive in describing
how we are incapable of making observations without having some
theoretical ideas. This is especially important since some analysts,
including self psychologists, suggest that they work relatively free
of theory, listening only to the subjective experience of the patient.
They claim that through immersion in empathic understanding,
interpretations can be made without resorting to theory. Goldberg
disagrees. A somewhat similar situation occurs when some analysts
warn against the use of inference. Goldberg points out that we
constantly require inferences for the full awareness and elabora-
tion of our theories, since it is impossible to obtain enough data
only from the patient's subjective experiences.

The first section of the book, on Theory, contains an excellent discussion of the philosophy of science and its application to psychoanalysis. There is additional material on psychoanalysis and hermeneutics. Goldberg tries to lay to rest what he calls "one of the great unnecessary arguments in our field," namely, "the controversy over the hermeneutic status of psychoanalysis," by citing evidence to the effect that hermeneutics is a part of all science.

Goldberg's discussion of theory and the philosophy of science is a synthesis of much of the literature in the field. It is expressed in clear, understandable language. He is trying to demonstrate that the development of a theory of self psychology is similar to the development of theory in general and in all sciences. He states that he has learned from Popper that a new theory "should really be at odds with the established order—it should be revolutionary" (p. xi). It is not enough to integrate a bit of knowledge here and there with an existing theory; rather, a new theory must call into question an existing theory it is attempting to supplant. Arguments involving the philosophy of science and its application to psychoanalytic theory are often read with little interest by most of us, who are mainly involved in the clinical work of psychoanalysis. However, I strongly recommend this first section.

Goldberg emphasizes that "we do strive to determine the subjective feelings of our patients, and we simultaneously aim to be objective in our efforts" (p. xiii). He is concerned about the tendency of some self psychologists to make psychoanalysis a science of the interpersonal. He objects to this, stating that self psychology studies the intrapsychic. The intrapsychic world of the individual, however, is expanded greatly by the selfobject experiences which are an extension of the self and, therefore, are an extension of what is intrapsychic. For Goldberg, self psychology is about one person. The data are gathered from a point inside that person, the intrapsychic. "Selfobjects are parts of persons and thus should not be seen as an interpersonal issue" (p. xiv).

Goldberg points out that all analysts use exteroceptive data, "such as the particulars of the patient's developmental history, the elements of the physical appearance and demeanor of the patient, and even some extra-analytic information about the real life situation of the patient." However, he emphasizes that it is crucial to understand the meaning of this material to the patient. This mate-

rial "need[s] to be recast in terms of what . . . [it] mean[s] to the patient, that is, to the subjective state. . . . Every observation and every association is perceived by the analyst in terms of what it does to the patient, what it means to the patient, what it feels like to the patient. We learn these things through a very objective process of vicarious introspection—prolonged empathic immersion" (p. xiii).

In the second section, on Empathy, Goldberg discusses his belief that the role of empathy in self psychology theory is often misconstrued: "We need to navigate a neutral course between the total dismissal of empathy and the liberal attribution of just about everything wholesome to its presence" (p. xv). He objects to the notion that empathy is a technique belonging solely to self psychology. To Goldberg, many analysts employ empathy because it is a form of data gathering. It can therefore be a part of other theoretical systems. He feels, however, that the study of why some people "communicate empathy" much better than others is a province in which self psychology can claim an edge (p. xiv).

Section three, on Character, starts with an excellent chapter on the structure of the self, in which Goldberg discusses the "dimensions of the self structure as extending over time and space. It is seen as a system that is open and stable, yet capable of growth and change and alterability" (p. xv). I found this chapter to be especially significant since it helps to clarify what is meant by the self structure or the self system, in contrast to the more usual, vague definitions of "self." This section also includes two interesting papers on special character types, namely the "misfit" and the "wishy-washy" personality.

The last section of the book is Clinical Papers. It starts with two chapters, "Comments on Rules in Psychotherapy" and "Psychoanalysis and Negotiation," in which Goldberg discusses efforts to focus attention on the linkage between self and selfobject. "Some Notes on the Mirror" puts the concept of mirroring in perspective with a review of what is meant by the mirror as used in different theories. The next to last paper, "The Apology in Psychoanalysis and Psychotherapy," is an interesting discussion of how theory informs our approach. Goldberg states that "Kohut's emphasis on the empathic failures of parents" and analysts "is too easily translated into parental blame . . . [and] analyst blame" (p. xvii). By contrast, patients are blamed when theory emphasizes their "impos-

sible demands" and "unrealizable fantasies." Goldberg sees both attitudes as subject to exaggeration, and adherence to one or the other approach seems to determine whether or not the analyst is inclined to offer an apology. Goldberg sees this as simplistic. He gives a case example in which, although the theoretical focus was on empathic failure, an apology was not offered, and this proved to be helpful in the analysis of the clinical incident. For Goldberg, the analysis of the meaning of offering or not offering an apology is the critical dimension, and not the theoretical stance. He claims that what is involved is reasoned analytic technique. He advocates not flying by the seat of one's pants, on the one hand, or rigidly adhering to what seems to be called for by one's theoretical preference, on the other.

The final chapter, "Post-Termination," has a special twist. One would expect to read about the post-termination experiences of the patient, but instead it is about the analyst. The approach presents us with an unusual view about examining ourselves as analysts and the impact we have on the data coming from the patient. Goldberg again emphasizes that he does not believe that the focus of observation is on the interpersonal field. Instead, the patient takes on the attitudes imparted by the therapist and incorporates them within his or her own self system. Stated another way, the patient incorporates the selfobject functions experienced in the relationship with the therapist and makes them a part of his or her own intrapsychic organization.

This book offers an opportunity to learn from the thinking and synthesizing of a psychoanalytic scholar. Goldberg has a vast storehouse of information on the philosophy of science and its application to psychoanalysis. He does not accept the argument that hermeneutics and causality are dichotomous points of view, but instead states that hermeneutics is a part of all science. He believes that subjective data can be studied objectively. He insists that we *all* approach clinical material with certain values and theoretical points of view that inform and organize that clinical material. He provides arguments and asks questions that stretch our minds and help us "search for more." This is an excellent book for psychoanalysts who want to think about what they do.

ARTHUR MALIN (BEVERLY HILLS)

THEORIES OF THE UNCONSCIOUS AND THEORIES OF THE SELF.
Edited by Raphael Stern. Hillsdale, NJ: The Analytic Press,
1987. 282 pp.

This collection of invited essays derives from an attempt by the
Association for the Philosophy of Science, Psychotherapy and
Ethics to initiate a unified approach to the dynamics of the uncon-
scious, the theory of the self, and the emotions. The resulting in-
terdisciplinary effort, despite the philosopher Raphael Stern's val-
iant attempt at integration, is a loose collection of interesting but
disparate papers. Approximately half are written by psychoanalysts
or psychoanalytic psychotherapists; the others are the work of phi-
losophers, cognitive psychologists, and social scientists from
various disciplines. Unfortunately, a biographical index of the con-
tributors is missing.

Otto Kernberg's major contribution is to formulate hypotheses
about the development of consciousness, as a means of illumi-
nating the nature of the dynamic unconscious. Unlike Freud, who
conceptualized the id as a mainly unstructured cauldron of re-
pressed drives, Kernberg maintains that it is organized and reflects
vicissitudes of drive investments of internalized object relations. He
states that ordinarily deeply repressed id contents are fully con-
scious in patients whose defensive organization relies on splitting
rather than on repression. He reasons that the dynamic uncon-
scious may not develop fully until the ego is sufficiently consoli-
dated to form a repressive barrier, with the aid of the early su-
perego. Kernberg reformulates Freud's hypotheses that the ego
originates as a precipitate of abandoned object cathexes and that it
differentiates from the id by crystalizing around the system per-
ception-consciousness. He proposes that affective interactions with
the mother, and evolving instinctual investments of her, shape
consciousness by transforming archaic affective states into mental
activity with symbolic functions. The bulk of the chapter is devoted
to tracing the evolution of consciousness from the infant's initial
state of primary affective subjectivity. Kernberg also outlines suc-
cessive levels of superego pathology, emphasizing its dependence
on the quality and depth of internalized object relations and the
corresponding integration and structuralization of the self. For
Kernberg, the self is an internally consistent, stable frame for orga-

nizing psychic experience, a substructure of the ego that acquires supraordinate functions within the ego. While the concepts of consciousness and of the self tend to converge as development proceeds, the intertwined historical roots of the dynamic unconscious and of the self ensure that both conscious and unconscious are continually shaped by each other.

Althea Horner traces the development of self- and object representations during early life, mainly from a Mahlerian point of view. She views the process of interaction between infant and mother as forming a pattern of experience which creates psychic structure. When the child is able to unify disparate self-representations into a single self, the foundation for a sense of self, or identity, is laid. Horner notes that we have hardly come any further than Freud in understanding the physical correlates of "mind."

The next four contributors comment briefly on the two preceding chapters. Esther Robison examines the methodological difficulties inherent in research that tests the hypotheses of developmental theory. She notes that although there is general agreement that early maternal behavior shapes infant adaptation, there is no evidence about the specific interactive processes necessary for a particular outcome, so it is difficult to determine the superiority of one particular theory over another. Nevertheless, she is sanguine about the potential usefulness of longitudinal research in assessing the explanatory value of psychoanalytic and developmental hypotheses.

Richard Kuhns characterizes psychoanalysis as a mode of inquiry straddling the natural sciences, in its search for causal relationships, and the cultural or social sciences, in its reliance upon empathic use of the transference-countertransference relationship in its methodology. He justifiably questions Kernberg's moving from clinical observation to theoretical formulation without distinguishing between the two levels of discourse. Faced with Kernberg's explication of the power of the archaic, unconscious superego and of the pathology of morality inherent in narcissistic and borderline individuals, Kuhns finds himself re-evaluating the philosophic paradigm of rationality in the face of moral action. Kuhns believes that philosophy needs to be informed by an understanding of individual pathology, and that psychoanalysis must integrate a cultural and philosophical perspective.

Both Marcia Cavell and Peter Caws respond positively to Kern-berg's focus on the development of consciousness. They are partic-ularly intrigued with the concept of splitting, as unconscious pro-cesses appear to present an ethical dilemma for them. Cavell ex-presses interest in reflexive self-consciousness, as it creates the possibility of responsibility for one's activities. However, she argues that the precursors to reflexive self-consciousness, rather than being early states of thinking, are actually early states of action. For Caws, Freud's account of development did not attend sufficiently to the subjective, self-reflective growth of the organism and there-fore was less applicable to philosophic inquiry than Kernberg's ac-count of the connection of splitting to concepts of morality.

Kenneth S. Bowers focuses on the perceptual, or cognitive, un-conscious, as distinct from the dynamic Freudian unconscious. He is concerned with processes which take place outside of tacit aware-ness and yet influence thought and action. Bowers defines intu-ition as responsiveness to such unnoticed information. He argues that unnoticed events may bias or distort thinking, but can also genuinely inform thought so as to be important conditions of in-sight and invention. He cites scientists' accounts of dreams that re-veal unexpected solutions to complex and previously intractable problems as demonstrations of how novel juxtapositions are less likely to occur in a mind dominated by conscious expectations. Gerald E. Myers discusses how introspection in the form of the internal monologue familiar to psychoanalysis can lead to the sub-jective conviction of the discovery of a new level of self-knowledge conceptualized as the unconscious. Both Bowers and Myers make the point that knowledge of causal connections is not directly avail-able to introspection or intuition.

Stern makes an ambitious attempt to formulate a theory of emo-tions that integrates concepts from many disciplines, including psy-chology, psychoanalysis, neurophysiology, logic, semantics, ethics, aesthetics, and social history. In this sense, it can be considered the centerpiece of the volume. In order to discuss affects in the terms of logic, Stern hypothesizes that emotions are rational rather than irrational. They shape interventions (acts or behaviors of one person toward another), and are value-bearing and highly cogni-tive. As he links numerous attributes to his concept of emotion, Stern comes up with some interesting ideas, such as that of the

imaginative rehearsal of new self-images as an aid in self-defini-
tion. However, too often he is overinclusive and ties concepts to-
gether on the basis of contiguity rather than by convincing argu-
ment or substantive evidence. In discussing the "birth" and "death"
of emotion, he does not differentiate between the individual and
the social group. It is possible to admire his broad interdisciplinary
sweep, however, even as one recognizes the vast, perhaps insur-
mountable, difficulties in integrating so many diverse concepts and
languages.

In Benjamin Rubinstein's short, dense chapter, he "delineates
the way various hypotheses enter into the process of clinical expla-
nation" (p. 139). Rubinstein does a brilliant job, separating specific,
general, and special clinical hypotheses in a format in which specu-
lative explanations, which include posited unconscious motives,
can be scrutinized. As unconscious motives are not observable
events, psychoanalytic predictions and/or postdictions do not fit
into the usual scientific formula of one observable event predicting
a second observable event. Rubinstein explains how psychoanalytic
hypotheses can fit into less common rules of inference by the use
of the "hypothesis of partial functional equivalence," in which a
realm of expected predictability, a class of events, rather than a
singular occurrence, can be related to a posited unconscious mo-
tive. Although he sees grave, perhaps impossible difficulties in
confirming the hypotheses of Freudian metapsychology, Rubin-
stein is not content to relinquish higher level scientific hypotheses,
as he fears that that would leave psychoanalysis open to the claim
that any particular hypothesis is contingent upon an idiosyncratic
choice of rules of inference. However, he does not see any hope for
clinical confirmation of psychoanalytic hypotheses. Instead, he
turns to the "ultimate reality" of the nervous system and proposes
that a new metapsychological theory that will approximate the lan-
guage of neurophysiology will eventually enable general clinical
hypotheses to be tested. Unfortunately, Rubinstein does not ac-
knowledge the equally formidable difficulties inherent in this ap-
proach to confirming metapsychological hypotheses.

Morris Eagle uses his comparison of psychoanalytic and cogni-
tive views of unconscious mental processes to support his rejection
of drive theory and his reformulation of the concept of repression.
He contrasts the Freudian unconscious, with its hypotheses of an

irrational primary process and the possibility of recovery of in-
stinctual wishes with the lifting of repression, with cognitive psy-
chology's view of the logical, problem-solving characteristics of the
unconscious and the impossibility of recovering most cognitive un-
conscious inferences. He opts for the modern constructivist view
that perception is a process of constructing reality and that the un-
conscious, rather than being a storehouse of wishes, is a mental
structure which can change and be selectively activated. Eagle finds
a better fit between the cognitive and psychoanalytic view of the
unconscious when it is conceptualized as a cognitive-affective
structure with implicit "grim beliefs," "rules," and self-representa-
tions which are learned at a primitive developmental level. Uncon-
scious representations and grim beliefs of this type are not similar
to instinctual wishes, according to Eagle; they do not require the
concept of·repression and the related theoretical network of in-
stinct theory. Eagle reconceptualizes repression as a process of dis-
avowing and disowning aspects of personality inimicable to one's
self-concept and of failing to acknowledge and integrate certain
mental contents into one's self-organization.

Jeremy D. Safran and Leslie S. Greenberg provide another in
their series of articles on affect which view emotion as a synthesis
of motor, schematic, and conceptual information that helps the or-
ganism adapt to the environment by providing meaningful infor-
mation. The conscious, meaningful experience of emotion is seen
as the product of an unconscious or preattentive synthesis of com-
ponent memory structures. Unconscious can be differentiated
from conscious activity, as it allows for the processing of multiple
channels of information at the same time and is highly resistant to
change. Safran and Greenberg reject the assumptions of both clas-
sical Freudian metapsychology and the information-processing ap-
proach popular among cognitive psychologists. They criticize both
approaches for their lack of attention to the interpersonal field,
and espouse an approach based on "action dispositions" that re-
tains the centrality of motivation. Safran and Greenberg's cognitive
perspective of the unconscious is in many ways similar to Eagle's
view.

In their short chapter, Robert Stolorow and George Atwood
propound a theory of "psychoanalytic phenomenology" as an in-
terpretive discipline, viewed from the context of the experiencing

subject. Stolorow and Atwood reject classical analysis, with its emphasis on scientific causality, as "reduc(ing) experience to a material substrate" (p. 215). Their basic units of analysis are, instead, "structures of experience," those systems of organizing principles, of cognitive-affective schemata, in which personal themes and meanings are embedded. Rather than hypothesizing impersonal motivational prime movers, they propose the supraordinate motivational principle of the need to maintain the organization of experience. They view repression as a negative organizing principle and the dynamic unconscious as a set of configurations which are not allowed to become conscious due to association with emotional conflict. In addition, they emphasize the "prereflective unconscious," the nondefensive organizing principles of a person's subjective world. A major task of analysis is to acquaint the patient with these previously unknowable, guiding structures.

Robert Stoller's chapter deals with the desire to humiliate as essential to erotism; and he discusses the dynamics of perversion, in which trauma is converted into triumph. While the article is an interesting one, there seems to be little reason to include it in this volume. The reader would learn far more about Stoller's handling of theoretical issues relevant to the topic of this volume, such as the question of metapsychology versus information processing, from his book, *Sexual Excitement: Dynamics of Erotic Life*.

Eric Mendelsohn and Lloyd Silverman fear that psychoanalysis as a profession has been diminished by a lack of accepted, objective means of validating the competing claims of new theories. They outline a model for a far-reaching clinical and experimental research program to compare the validity of competing formulations. They steer a course between sophisticated recognition of the complexities and difficulties involved in such an enterprise and an optimistic presentation of a combined methodological approach. This model project, with all its obvious pitfalls, ties together some of the most promising techniques for the psychological validation of psychoanalytic hypotheses, including Silverman's studies of the subliminal relationship between unconscious motives and psychopathology. However, as with the Stoller article, this chapter fits uneasily into the present volume. It would have been more appropriate to include one of the readily available theoretical papers in

which the authors discuss their ideas about the self and the unconscious.

One comes away from this book with a greater appreciation of the complexities inherent in attempting to integrate concepts from numerous disparate points of view and, at least for this reader, with a renewed pessimism about the possibility of doing so. Perhaps we cannot bridge the gaps among various fields of knowledge, and we may find that the closer we approach them the clearer this becomes. Nevertheless, while the goal of theoretical unification, to which this book is devoted, may prove elusive, the theoretical richness that results from the effort to correlate input from many disciplines makes the attempt eminently worthwhile.

DALE MENDELL (NEW YORK)

LEARNING DISORDERS: AN INTEGRATION OF NEUROPSYCHOLOGICAL AND PSYCHOANALYTIC CONSIDERATIONS. By Arden Rothstein, Ph.D., Lawrence Benjamin, Ph.D., Melvin Crosby, Ph.D., and Katie Eisenstadt, Ph.D. Madison, CT: International Universities Press, Inc., 1988. 381 pp.

In a 1925 preface to Aichhorn's *Wayward Youth*, Freud said, ". . . children have become the main subject of psycho-analytic research and have thus replaced in importance the neurotics on whom its studies began."[1] Anna Freud took up Freud's challenge in her studies of the psychoanalytic psychology of normal and abnormal development. In "The Principal Task of Child Analysis," she said:

> The study of purely developmental aspects has not been taken up very seriously in child analysis so far. At least, it is still waiting to advance from the realm of mere observation and description of facts to their application to the technique of treatment. We have not yet learned how to deal with developmental deficiencies, although many of them underlie the infantile neuroses and, as mentioned above, are often inextricably bound up with them. Developmental disharmonies are a fertile breeding ground for almost every type of infantile neurosis. . . . To the extent to which developmental harm can be undone belatedly, child analysis may accept it as its next duty to devise methods for the task.[2]

[1] Freud, S. (1925): Preface to Aichhorn's *Wayward Youth*. S.E., 19:273.
[2] Freud, A. (1978): The principal task of child analysis. In *The Writings of Anna Freud, Vol. 8. Psychoanalytic Psychology of Normal Development, 1970-1980*. New York: Int. Univ. Press, 1981, pp. 108-109.

The book under review is a contribution in this direction. It attempts to integrate neuropsychological data and theory with analytic concepts, adding descriptions of some educational and testing techniques used for children with learning disabilities. The authors' efforts are laudable, but the product is a mixed one. The theoretical concepts and literature summary are very good, although there are very few references from the 1980's. Descriptions and definitions of some of the learning disability syndromes are clear and adequate. The most successful portion of the book addresses the need for comprehensive evaluation and an analytically informed, developmental approach. The authors show how they develop a history and use screening procedures.

Special emphasis is placed on the composition of and rationale for diagnostic testing. This section is informative. Psychoanalysts, however, with their interest in personality functioning and awe of projective tests, will be disappointed by the necessarily brief treatment given to the Rorschach, TAT, and Figure Drawings. The educational tester, likewise, will find that this section is not meant to be comprehensive.

This reader was concerned about the authors' view that the 1978 version of the Wide Range Achievement Test (WRAT) serves "as a good jumping-off point since it covers all three areas of achievement (reading, spelling, and arithmetic) . . ." (p. 142). Although this version of the WRAT is widely used because it is so easily administered, it is, in fact, not a good test. A serious shortcoming is the very limited behavior sampling. "Reading," for example, is assessed only by counting the number of words a student reads, with no consideration of the student's skill in deriving meaning from those words, reading phrases or sentences, or comprehending what is read. Large generalizations are made on the basis of a few items.

The chapter, "Treatment in Relation to the Diagnostic Spectrum," discusses possible effects of psychological factors in the learning process. It includes an excellent detailed summary of a few teaching methods. Although the authors specify that this is only a sampling, their discussion can inadvertently leave the impression that there is only one way to teach. I was disappointed in the lack of mention of any of the "manipulative" methods of instruction in mathematics such as the superb Structural Arithmetic

System of Stern.[3] Also missing is any mention of the very fre-
quently used "multisensory" methods of teaching reading, such as
the Orton-Gillingham methods. It would also have been inter-
esting to learn about some of the psychological effects of children's
being tutored for varying lengths of time and circumstances.

Given the necessarily small space allotted to teaching methods,
this reviewer was interested in the footnote on p. 273: "This sec-
tion is not meant to be a manual of remediation. Instead, its pur-
pose is to illustrate some basic principles and possible procedures
for approaching common disorders. Should the reader wish to im-
plement these techniques, he is encouraged to contact one of the
authors for further discussion of their application in specific indi-
vidual cases." Not all interested readers may be able to talk with the
authors in New York City. It would have been more useful to refer
to some of the specialized educational literature and the specialized
professional organizations available for the learning disabled.
These groups not only provide information, resources for finding
specialized teaching, and legal rights support, but can also be
helpful in providing antidotes for parents and children against the
destructive effects of the isolation experienced by many who have
the problems. It would have been good to provide references to
the Orton Dyslexia Society, the Association for Children and
Adults with Learning Disabilities, and the Foundation for Children
with Learning Disabilities.[4] The literature of the Orton Society can
be especially helpful to psychoanalysts. The Orton Society can also
provide a roster of specially trained tutors in some geographical
areas.

In a book subtitled *An Integration of Neuropsychological and Psycho-
analytic Considerations*, one would expect more psychoanalytic treat-
ment material. To the one case called a child analysis, the authors
append a footnote declaring that several analyst readers felt that it
was not an analytic case but a psychoanalytically oriented psycho-

[3] Stern, C. (1965): *Structural Arithmetic*. Boston: Houghton Mifflin. See also,
Stern, M. (1988): *Experimenting with Numbers: A Guide for Preschool, Kindergarten, and
First Grade Teachers*. Cambridge, MA: Educators Publ. Serv.

[4] The addresses are as follows: Orton Dyslexia Society, 72 York Road, Baltimore,
MD 21204; Association for Children and Adults with Learning Disabilities, 4156
Library Road, Pittsburgh, PA 15234; Foundation for Children with Learning Dis-
abilities, 99 Park Avenue, New York, NY 10016.

therapy. This reader felt that there was an excessive use of technical terms and that many of the interpretations seem to have been generated more from the therapist's theoretical orientation than from what was verbalized by the patient. For example, one sentence from the report reads as follows: "Lastly, he devised a game in which he 'castrated' or 'impregnated' baseball figures on a dart board with a little screw-hook, additional sensorimotor matrices for exploring issues of birth, separation-individuation, and the primal scene" (pp. 314-315). The effects of the disability, furthermore, are barely mentioned.

Psychologists and psychoanalysts reading this book might regret the absence of any material discussing the stimulation of countertransferences by these patients. This population often presents particular difficulties in testing and treatment because of many factors, i.e., various forms of denial and withdrawal, speech idiosyncrasy, distrust of memory functions, and distrust of their own judgment. These can be very silent patients and sometimes irritatingly hyperactive.

The reader interested in supplementing this volume will find a vast literature. I particularly recommend *Learning Disabilities: Proceedings of the National Conference*, edited by James F. Kavanagh and Tom J. Truss, Jr., and *Learning Disabilities: A Report to the U.S. Congress*.[5] These were published as the result of an Act of Congress in 1985, which mandated a review of the state of knowledge and an assessment of Federal research priorities, research, and activities regarding learning disabilities.

The Committee commissioned experts to write comprehensive review papers describing research findings, identifying gaps in knowledge, and making recommendations for future research related to the cause, diagnosis, treatment, and prevention of learning disabilities. The papers dealt with (a) The Neurobiology of

[5] Kavanagh, J. F. & Truss, T. J., Jr., Editors (1988): *Learning Disabilities: Proceedings of the National Conference*. Parkton, MD: Yorkton Press. This volume is available free of charge through the generosity of the Foundation for Children with Learning Disabilities, co-sponsor of the Conference. It may be obtained by writing to NICHD Publications, P.O. Box 29111, Washington, DC 20040. See also, *Learning Disabilities: A Report to the U.S. Congress*, by the Interagency Committee on Learning Disabilities, J. F. Kavanagh, Exec. Sec'y. Washington, DC: Dept. of Health and Human Services, 1987. This report can be obtained free of charge by writing to the Secretary of Health and Human Services, Washington, DC 20201.

Learning and Memory; (b) Specific Developmental Disabilities of
Reading, Writing, and Mathematics; (c) Developmental Language
Disorders; (d) Social Skills Deficits; and (e) Hyperactivity/Attention
Deficit Disorder. Each of these reviews included an extensive bibli-
ography and was followed by prepared discussions by others. They
are published in full in *Learning Disabilities: Proceedings of the Na-
tional Conference*.

These papers offer the analyst a rich mine of information. Each
paper is noteworthy for its completeness and its coverage of very
recent scientific literature. I note a few interesting findings:

The U.S. Department of Education in 1987 noted that 4.73% of
all school-aged children receive special education services for
learning disabilities as defined by Public Law 94-142. This per-
centage represents almost 1.9 million children. It does not include
children in private schools or learning disabled young adults in col-
leges who receive special assistance. The Committee concluded
that five to ten percent is a reasonable estimate of the number of
persons in the United States with learning disabilities. Another
point is that an individual may manifest great difficulties in group
situations and none in a one-to-one situation. This has important
implications for the diagnostic/evaluative process. A youngster who
is hyperactive at an early age will usually be much less hyperactive
when an adolescent. A disturbing observation is *that language-im-
paired children do not catch up and become normal.*

> Further, as might be expected, their processing deficit, which so drastically im-
> pacts on their ability initially to access the oral language system, subsequently
> also precludes their ability to access other learning systems, which share critical
> components with oral learning, such as reading, spelling, and perhaps some
> aspects of social interaction. Thus, rather than "catching up," these children fall
> further and further behind, as their processing and language deficits impact on
> their ability to learn and interact normally in other structural settings (*Learning
> Disabilities: A Report to the U.S. Congress*, p. 173).

Social skills research has well documented that LD children are
less well liked and more likely to be rejected by other children.
They exhibit increased levels of anxiety, withdrawal, depression,
and low self-esteem, compared to their nonhandicapped peers.

Analysts frequently see very intelligent patients who have an
awareness of poorly developed social skills. These patients com-
plain of being different, feeling socially ill at ease, and it is usually

correctly ascribed to anxiety in social situations. But for some of them a learning disability has played a role. There are individuals who have poorly developed capacities to "read" others and to behave in socially effective ways for developmental reasons. This must be important in many mother-child interactions. A developmental defect may sometimes be the cause of a parent's not "reading" a child's feelings.

The review by Shaywitz and Shaywitz on Hyperactivity/Attention Deficit Disorder is especially noteworthy for analysts. Not only is this report extremely comprehensive, but it highlights the need for attention to be paid to the Attention Deficit Disorder children who are not hyperactive and whose problems thus may not be visible. Their inattention, carelessness with details, problems in monitoring their work, and a variability in functioning at different times and environments, coupled with the lack of externalizing signs, lead frequently to their being erroneously faulted for "poor motivation" or "laziness." This group of children is at the highest risk for the development of academic difficulties and a poor self-concept. The Shaywitzes stress that the developmental pattern of Attention Deficit Disorder is that of a chronic disorder, in which hyperactivity diminishes over time *but attention deficits persist*. The secondary and often more resistant problems of learning difficulties—behavior disturbance, lack of peer acceptance, and low self-esteem—are major sources of concern in every aspect of these children's lives.

In contrast with and complementary to the book by Rothstein, et al., is *Developmental Variation and Learning Disorders* by Melvin D. Levine,[6] a developmental pediatrician, who writes from a very broad base of experience and an eclectic viewpoint. The psychoanalyst who is interested in learning problems (and in normal development in general) would be well advised to buy this encyclopedic, well-written, and wise work. Levine presents lines of social development and of various kinds of learning up to and including the high school years. Risk factors, complications, and outcomes are discussed. Methods of management, counseling, consulting, and evaluation of assessments, including descriptions and evaluations

[6] Levine, M. D. (1987): *Developmental Variation and Learning Disorders*. Cambridge, MA: Educators Publishing Service.

of various tests commonly used, are among the many topics covered. The author cogently addresses such complications as loss of motivation and maladaptive face-saving strategies, including avoidant behavior, cheating, controlling, aggression, regression, depression, delinquency, suicidal behavior, somatic complications, and teenage pregnancy.

Developmental learning disabilities provide opportunities for all of us to learn from and contribute to a very complex and heterogeneous population, so far relatively neglected by psychoanalysts. Anna Freud recommended the study of developmental disabilities as an important task for child analysts. The various works mentioned in this review will be helpful to all analysts.

EDGAR L. LIPTON (NEW YORK)

THE PURLOINED POE. LACAN, DERRIDA, AND PSYCHOANALYTIC READING. Edited by John P. Muller and William J. Richardson. Baltimore: The Johns Hopkins University Press, 1988. 394 pp.

Lacan's proposition that the unconscious is structured like a language has been most frequently cited to summarize Lacanian psychoanalysis for the non-Lacanian. Lacan's words, however, are taken out of proper context, so while their emblematic status remains impeccable, their apparent clarity eschews a greater complexity. A statement regarding language and the unconscious is, after all, familiar enough to most psychoanalytic colleagues and can therefore be easily assimilated into accustomed modes of thinking. Therefore, how are we to account for the intense resistance that, in fact, has greeted Lacanian thinking in this country? A questioned psychoanalytic practice and the provocative personality of Jacques Lacan have been offered as reasons by some. But for an otherwise intelligent and self-critical group of psychoanalysts, such reasons cannot justify premature dismissal of some very challenging ideas.

John Muller and William Richardson have assembled a collection of papers which are less about Edgar Allan Poe's *The Purloined Letter* and more about the Lacanian challenge to our accustomed ways of thinking about language, the unconscious, and the psychoanalytic process itself.

Although not included in this already very large and comprehensive collection, Freud's *Project for a Scientific Psychology* and his *Beyond the Pleasure Principle* are essential primary texts for the reader who wishes to begin sorting through the complexity of *The Purloined Poe: Lacan, Derrida and Psychoanalytic Reading*. Indeed, it is with these Freudian texts in mind, that Lacan begins his 1956 *Seminar on "The Purloined Letter."* And it is this seminar which serves as the focus for all the other papers in the Muller and Richardson collection. In the Poe story, a letter to the Queen, stolen by her ambitious minister and later recovered and replaced in a most unusual way by the famous detective Dupin, precisely illustrates Lacan's theory of the signifier, in which automatic repetitive effects are inevitably inscribed upon all human participants.

This theory of the signifier informs Lacan's structuralist interpretation of the Freudian unconscious. The radical displacement of the subject by the signifier is central to Lacan's challenge to ego psychology. He reinserts into psychoanalysis Freud's 1895 "neurological" theory of "memory traces" which precisely function as empty circulating marks and not as representational images. Lacan does not mince words. His theory of the signifier marks a return to a Freud that he feels has been massively repressed by object relations theories that subscribe to a naïvely empiricist theory of visual representation.

Freud's neurological model has traditionally been read out of conventional psychoanalytic theory as being his last attempt to remain within the mechanistic model of the nineteenth century neurologist. Freud is said to have discovered psychoanalysis in its own terms only by more or less forgetting this neurological machine and thereby discovering the human unconscious. But for Lacan, some of what remains most radical about the Freudian unconscious is, in fact, its machine-like functioning. According to Lacan, Freud never forgot this and re-established the prominence of this idea in his theory of the death instinct articulated in the repetition compulsion (Lacan prefers "repetition automatism") of *Beyond the Pleasure Principle*.

Lacan originally presented these ideas as part of his weekly seminar (1954-1955), bearing the general title *The Ego in the Theory of Freud and in the Technique of Psychoanalysis*. This collection of weekly seminars has been recently translated into English by Sylvana To-

maselli[1] and, I might add, it is a much more easily accessible intro-duction to Lacan's theory of the signifier than the condensed 1956 seminar on "The Purloined Letter." Those readers whose only in-troduction to Lacan has been through the *Écrits* will find in Toma-selli's translation a surprisingly clearer and more straightforward Lacan. One wonders why it took so long to reach these shores.

Again, the central paper in Muller and Richardson's collection is Lacan's. The Poe story is also included, and it needs to be closely read several times. It is short enough, only about twenty pages in length. However, the three hundred pages of commentary that follow demand enormous attention to the story's detail. So be warned. Muller and Richardson have already earned themselves a quite legitimate reputation for guiding us through some of the more baffling complexities of the *Écrits*.[2] In this volume, too, they guide us through Lacan in their concise Overview to his text, their line-by-line Map of the text, and their scholarly Notes to the text. It is a format they used in their earlier work. They introduce us to basic Lacan, namely, his notions of the Imaginary, the Symbolic, and the Real, and to some of those numerous luminaries of the past who have influenced Lacan, including the structuralist anthropologist, Lévi-Strauss, the structuralist linguists, Saussure and Jakobson, and the philosophers, Hegel and Heidegger. Muller himself returns to Hegel in his own paper at the end of the collec-tion, "Negation in 'The Purloined Letter': Hegel, Poe, and Lacan."

Muller and Richardson succeed in highlighting some of the fun-damental challenges Lacan poses to our typically received concepts of the unconscious subject; for example, the notion of the Real is opposed to conventional concepts of reality. Muller reviews Freud's approach to "*das Ding*," the thing, both in the *Project* and in his paper, "Negation." According to Muller, Freud clearly differ-entiated the unassimilable, mysterious something of "*das Ding*" from the idea of the object as a source of satisfaction. Reality testing is precisely aimed not at finding an object but rather at re-finding it, since, according to Freud, "a precondition for the setting

[1] Lacan, J. (1988): *The Seminar of Jacques Lacan. Book II. The Ego in Freud's Theory and in the Technique of Psychoanalysis, 1954-55*. Edited by J.-A. Miller. Translated by S. Tomaselli. Cambridge: Cambridge Univ. Press.

[2] Muller, J. P. & Richardson, W. J. (1982): *Lacan and Language. A Reader's Guide to Écrits*. New York: Int. Univ. Press. Reviewed in this *Quarterly*, 1984, 53:582-585.

up of reality testing is that objects shall have been lost which once brought real satisfaction" (p. 351).

Lacan's Real then takes account of this impossible satisfaction, this beyond the pleasure principle, this domain which cannot be apprehended simply along the pleasure-unpleasure axis of reality, this domain which Freud described as the mysterious navel of the dream. For the subject to rest secure in what Hegel called "picture thinking," or representational thinking or thinking in images, "in which consciousness reflects the object's visible configurations," it must be solely invested in what Lacan calls the Imaginary. This Imaginary realm is colonized by conventional psychology. Lacanian psychoanalysis challenges the commonsense security of this conventional psychology by introducing the Symbolic register of truth, through which the signifier exerts its effects. Object relations theory is part of conventional psychology and therefore remains spellbound by the lure of the visible, represented by spatial metaphors that benignly relate inside to outside in a non-paradoxical, Euclidian space in which identity functions self-sufficiently.

By contrast, the Lacanian Symbolic order transcends this Imaginary order and recognizes the Hegelian place of language in which real existence (for instance, as manifested by biological models of the mind) fades away. This concept of language as the negation of the I, or of the individual, as conventionally located in space, is obviously very different from the more ubiquitous commonsense view of language as being a transparent instrument with which the individual describes reality. Because of the subject's subordination to the signifier, the latter, according to Lacan, "materializes the agency of death" for the subject, insofar as it is the "symbol only of an absence" (p. 355). I might add, although Muller and Richardson do not include it in their list of references, much of this argument is elucidated by Laplanche in his *Life and Death in Psychoanalysis*, which would make an excellent complementary companion to this volume.[3]

By now, the reader of this review is aware of having entered a very different world of thinking about a subject she thought she knew very well. If you therefore need to rest on more familiar

[3] Laplanche, J. (1976): *Life and Death in Psychoanalysis*. Translated by J. Mehlman. Baltimore, MD: Johns Hopkins Univ. Press.

slopes, turn to any one of the following three chapters. In "Selec-
tions from Marie Bonaparte's *The Life and Works of Edgar Allan Poe:
A Psycho-Analytic Interpretation*," you will find familiar paths of ap-
plied psychoanalysis and pathography. The stolen letter becomes a
maternal phallus, Dupin and the Minister engage in oedipal battle,
and all of this becomes linked to Poe's other work and, of course, to
the idiosyncratic details of his life. Norman Holland's very light
and personal "Re-covering 'The Purloined Letter': Reading as a
Personal Transaction" provides further respite. He trashes what he
labels as the abstract intellectualism of both Lacan and Derrida,
and makes a plea for all readers to cast off their shackles and per-
sonally engage the text in their own way. I assume some readers
will cheer. Finally, Lianha Babener's "The Shadow's Shadow: The
Motif of the Double in Edgar Allan Poe's 'The Purloined Letter' "
is a fun analysis of Poe's use of the doubling motif to "expose a
deep affinity between Dupin and his arch-rival, one which equates
them morally and calls into question the customary ethical norms
of the detective tale" (p. 333). Moreover, her analysis suggests that
Dupin and the Minister might even be brothers, or that they might
even "constitute a single composite being."

While Marie Bonaparte's "maternal phallus" may have tempo-
rarily grounded the disoriented, its rhetorical function, in the
Muller and Richardson collection, is as a foil for Lacan. François
Peraldi's "A Note on Time in 'The Purloined Letter' " reviews the
history of that political conflict and some of its manifestations
within the International Psychoanalytical Association. Shoshana
Felman's "On Reading Poetry: Reflections on the Limits and Possi-
bilities of Psychoanalytic Approaches" nicely clarifies and contrasts
Lacan's approach to conventional pathography and applied psy-
choanalysis, as typified by an admittedly outdated Marie Bona-
parte. Felman explains (pp. 147-148), "For Marie Bonaparte, what
is compulsively repeated through the variety of Poe's texts is *the
same* unconscious fantasy: Poe's (sadonecrophiliac) desire for his
dead mother. For Lacan, what is repeated in the text is not the
content of a fantasy but the symbolic displacement of a signifier
through the insistence of a signifying chain; repetition is not of
sameness but of difference, not of independent terms or of anal-
ogous themes but of a structure of differential interrelationships,
in which what *returns* is always *other*." It should be obvious by now

that repetition of certain Lacanian ideas will be found in nearly all the chapters in this volume. The persevering reader will finally begin to get it.

The most serious critique of Lacan's theory of the signifier comes not from a psychoanalyst, but from a philosopher, Jacques Derrida. However, in this collection, the cards are stacked against him. Muller and Richardson give us only a scant introduction to Derridean deconstructive methodology and thinking, in "The Challenge of Deconstruction," and no map, and few notes to the Derridean text offered in Chapter 9, "The Purveyor of Truth." Their apology is well taken (p. 173). Chapter 9 is excerpted from the much longer "Le facteur de la verité," from Alan Bass's recent, prodigious translation of *The Post Card: From Socrates to Freud and Beyond*.[4] But only about one-half of the original text is present. What is missing are "long quotations from Lacan, Freud, and Bonaparte, some footnotes, and some of the argument." The reader is thus left alone with a very difficult text, minus guide. One has to wonder if some of the text's difficulty is not therefore iatrogenic to Muller and Richardson's subtractions.

Fortunately, they have included Barbara Johnson's brilliant critique of Derrida's challenge to Lacan which helps to unpack what it is that both Lacan and Derrida are saying, especially about psychoanalysis. Her paper, "The Frame of Reference: Poe, Lacan, Derrida," originally appeared in *Yale French Studies* 55-56 (1977). It is an enormously provocative paper, with a wealth of ideas for those of us interested in the significance of interpretive acts in the clinical situation. For example, she writes (p. 245): "Psychoanalysis is not the interpretation of repetition; it is the repetition of a *trauma of interpretation*—called 'castration' or 'parental coitus' or 'the Oedipus complex' or even 'sexuality'—the traumatic deferred interpretation not *of* an event, but *as* an event that never took place as such. The 'primal scene' is not a scene but an interpretive infelicity whose result was to situate the interpreter in an intolerable situation. . . ." Irene Harvey, in "Structures of Exemplarity in Poe, Freud, Lacan, and Derrida," and Jane Gallop's "The American Other" are further responses included in this section, entitled

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[4] Derrida, J. (1987): *The Post Card: From Socrates to Freud and Beyond*. Translated by A. Bass. Chicago: Univ. of Chicago Press.

"Derrida and Responses," but they pale in comparison with Barbara Johnson's work.

Finally, Ross Chambers's "Narrational Authority and 'The Purloined Letter'," included in the Section entitled, "Other Readings," deserves special note. Chambers's emphasis upon the "ludic and oppositional," duplicity, a game of "heads and tails," all of which fascinates Lacan in his reading of Poe's tale, calls our attention to the "relational as opposed to informational concept of discourse." Chambers focuses on how artistic authority in "The Purloined Letter" is maintained and how it depends on a poetics of duplicity. The Minister's practice of duplicity, for example, functions similarly to the realist text which (p. 298) is "successful in imitating 'natural' discourse" but in doing so, depends on simulated openness. The narrative, however, must admit a "significant flaw" and a certain "penetrability." Clues are left that permit the recognition of duplicity at work and thereby the ultimate authority of art is established. Dupin's practice, on the other hand, is of a more "honest" covertness. He is not simulating reality. In fact, he wears green glasses in the minister's presence; clearly, he is up to something. But even his kind of duplicity demands to be found out, and Dupin will accommodate by leaving his "signature" for his rival to discover.

Although not addressed by Chambers, questions immediately arise for the psychoanalytic clinician as to what kind of poetics is at stake in psychoanalysis. Is a poetics of duplicity necessarily at work in the psychoanalytic narrative? If so, then dissimulation with its necessary penetrability might indeed characterize narrative structures found in clinical work. If so, is this poetics of duplicity being repressed by prevailing notions of psychoanalytic narrative that privilege the interpretive hermeneutics of truth, caught up in an Imaginary *cohesive* story, rather than, as Lacan would have it, "in the defiles of the signifier?"

EVAN H. BELLIN (NEW ROCHELLE, NY)

IN THE IMAGE OF GOD. A PSYCHOANALYST'S VIEW. By Stanley A. Leavy, New Haven/London: Yale University Press, 1988. 112 pp.

Stanley Leavy, a practicing psychoanalyst for forty years in the process of retiring from his practice, reflects in this book on the com-

plexities of the human condition as he encountered it in his long
career as a dedicated follower of Freud and his method and, also,
as a faithful Christian of the Anglo-Catholic (Episcopal) tradition.
The book presents a series of brief lectures given at Christ Church
in New Haven. They were intended for educated men and women
who are believers. As a result, Leavy's reflections depart from an
existing faith in a creating and redeeming God, and do not attend
to technical aspects of psychoanalysis. The purpose of Leavy's
meditation is "to take up aspects of life on which psychoanalysis
has something to tell us and to reflect on what this means to Chris-
tians and other believers. My subject is the 'image of God' in
humans or, more properly, the refractions of that image that psy-
choanalysis has gathered" (p. 9).

Leavy has concluded that "the intensified study of nature . . . ,
human nature—leads toward and not away from faith in God" (p.
x). The aspects of human life which analysands of necessity ex-
plore in the course of psychoanalysis touch upon the same con-
cerns which religion, any religion, needs to face to respond to the
quests posed by the conditions of life.

Analysands have to face such realities not only as beings in con-
flict but simply as human beings. The present reality of being one-
self needs to find its sources in past developmental roots; love and
hatred, separation and closeness, physical and personal suffering,
and the final obscurity of death confront us all, believers or non-
believers. Our capacity for concealment and self-deception is
always there as a constant reminder that we fear our deepest inten-
tions as much as we want to cling to them. Leavy finds in the ana-
lytic goal of unveiling concealment and self-deception an analogue
to what the Christian faith believes about God "who has worked
within the evolving fabric of existence since the beginning and
made himself known in Jesus" (p. 56). Leavy seems to suggest that
the analytic process of self-discovery and disclosure in our past and
present could facilitate the understanding in faith of God's self-rev-
elation in history.

Analysts know quite well that "man is a discontented animal" (p.
67), constantly seeking to love and to be loved. Freud, psychoana-
lysts, and other critics of religion see in such a discontent and need
the source for a religion that is nothing but an illusory consolation
for weak hearts. Not so, says Leavy. The need is there, it is ac-

knowledged, and it is made the cornerstone for belief: the discontent and the suffering recognize the human need for salvation, for a divinity who responds to the cries of humankind. The difference between believers and their critics is that what the latter consider wishful fantasy, the former believe to be the true reality of the human condition: the need for a self-revealing and saving God, in whose existence they believe.

Leavy concludes with what he calls "an outlandish comparison" which he is willing to defend "as best as I can" (p. 106). If God's disclosure of our true human nature is the greater evidence of divine love, as the rabbinical tradition suggests, and the psychoanalytic aim is to reveal the true concealed sources of human desires and actions, then psychoanalysis partakes in the process of divine self-disclosure. By its liberating action, psychoanalysis brings forth something new, a creation by way of unveiling what was concealed. If that is the case, Leavy suggests, "Analyzing, both as doctor and as patient, is acting in the image of God" (p. 107).

The book is soberly written, has no apologetic intent, and aims only at a broad reflection about the common ground shared between analytic experience and Christian belief. It is a meditation which may enlighten those curious about a practicing analyst who is also a practicing Christian. We have many articles and even books about believers who hang on to their illusions as drowning people to the saving wood. Leavy presents himself as a solid believer and a solid analyst in one solid piece. Each likes the other and his respective devotions, with the moderation of a man who is acquainted with human grief. The reader will feel respected, regardless of his or her convictions, while partaking in this meditation, which I recommend.

ANA-MARIA RIZZUTO (BROOKLINE, MA)

PSYCHOANALYTIC PERSPECTIVES ON ART, VOLUME 3. Edited by Mary Mathews Gedo. Hillsdale, NJ: The Analytic Press, 1988. 314 pp.

This beautifully designed book is a pleasure to read. For a person interested in art and psychoanalysis, it offers a delightful excursion that unites the two fields in an interdisciplinary dialogue. As was true with the second volume in the series, the third volume has a

focus, this time articles on the Renaissance and the surrealists, particularly de Chirico and Ernst. As is the case with any anthology, there is variability in the quality and in the degree to which the arguments in different articles are convincing, but the general level is high. A sampling of the contents reveals a wide diversity of approaches and interests.

John A. Philips's examination of Michelangelo's fresco of Adam and Eve in the Sistine Chapel richly interweaves theology, history, high and popular culture, and personal themes important to Michelangelo, such as Eros and Thanatos, birth and death, innocence and corruption. This article is a model of integrated scholarship. The history of the serpent in the fresco reveals the view of woman as the seducer, the temptress, the potential evil force. As such, the female head of the serpent and Eve's reaching out to it, suggest her identity with evil forces. Philips emphasizes how this view of woman was gradually tempered by Augustine who established Eve's full humanity; nonetheless, sensuality has seduced reason in the disruption of paradise. Next follows a fascinating section that demonstrates how compositional elements of the painting reveal a high degree of eroticism. Elaborate discussion of puns, plays on words, obscene signs, and associative references that were part of Renaissance Florentine popular culture support the argument. As he examines the painting, it becomes more erotic and playful in its own right. The author concludes the article on a proper and serious theological note.

The series of articles about de Chirico are individually of very high quality and are the high point of the book for, although written by different authors, they form an integrated whole. Attention is primarily directed toward what is generally accepted as de Chirico's most creative period, in the second decade of the twentieth century. Nancy Scott traces sources for his paintings in sculptures he had seen; and she corrects certain presumptions about these sources. There is a wonderful description of the sequence of movement in the paintings from 1911 to 1919. The fact that de Chirico wrote extensive autobiographical material that includes early screen memories facilitates the work of interpretation. De Chirico's father died shortly before the 1911-1919 period, when his son was seventeen, and Scott interprets much of the painting done in Paris during this decade as a search for an ideal-

ized, distant father, represented in rigid state and often viewed from behind. Scott's method in part involves the study of the transformation of visualized images into painted images that involve condensations of personal experiences and influences. The main thrust of the article suggests unconscious rage at the father, whose insistence on conventionality demanded a return to nineteenth century classicism. De Chirico ultimately capitulated to this demand in 1919 to effect a fantasy of reunion with his father, and, as he returned to classical form, he lost much of his creative and innovative potential. This is revealed in the fantasy of the return of the prodigal son and in the influence of the classical Raphael. Yet Scott does not adequately emphasize the powerful unconscious rage that lay under the idealized image of the father. The father represented "the civilizing force," the very force that ultimately stifled de Chirico's creativity and to which he felt he had to submit. The rapprochement with father involved the death of creative capacity. This article demonstrates how artists escape from the impact of reality and civilization through creativity. They may lose their creativity in submission to civilizing forces.

Milly Heyd, in a paper that complements Scott's, examines the famous image in *The Mystery and Melancholy of a Street*, 1914. Heyd finds the image of de Chirico's dead sister in the shadow of a young girl rolling her hoop. She had died when de Chirico was three or four. Themes of the power of women, the search for perfection, and images related to funerals are revealed. The shadow of the dead sister is running toward another shadow, which is the shadow of a dead father that will obliterate her shadow. The round object, the perfect object, is related to an early screen memory and is echoed in incomplete arches that had not achieved perfection. A painting with a similar theme, *The Street*, 1959 to 1960, shows the sister, now no longer a shadow, racing toward the statue with two men before her, one of them representing the dead brother. Coffin-like objects are present. Yet the painting has much less power and dramatic tension than the earlier version. Has resolution of conflict decreased creative power?

The articles on Max Ernst are less convincing and do not form an integrated whole. They raise certain issues pertinent to the role of applied psychoanalysis in the visual arts. Their intent clearly is not to elaborate psychoanalytic theory. To simply apply theory in

an intellectual way to the examination of painting adds little, for not only must what is presented have coherence, it must be convincing, it must make sense, it must seem right, even if it is speculative and difficult to document with scientific rules of proof. Above all, it should enrich the act of viewing and enlarge the experience of the spectator.

Charlotte Stokes's interpretation of sister symbolism in Ernst does not have a dynamic developmental quality but seems rather like the study of symbols in a dreambook. Leon Berman's article on the role of the primal scene in Ernst's work has similar problems. Berman sees the primal scene fantasy as a central organizing fantasy in Ernst's work, psychologically derived from a rebellious retaliation against the father, fueled by disillusionment generated by the First World War. There are areas that are more or less convincing, but the leaps of inference that lean on complicated associations related to a single word give the article a tenuous and intellectualized quality. Other explanations may be equally meaningful, for the novelty of the collages may be as well understood as related to guilt about the sister's death, i.e., the loss of the bird.

Leonard Shengold, discussing sister symbolism in Ernst and de Chirico, suffers by his failure to distinguish between universal fantasies and conflicts—that of sibling rivalry, for example—and the special conditions that influence the quality and degree of resolution of these conflicts. Much of Shengold's formulation has the quality of arbitrary translation. He contends that Ernst used psychoanalytic ideas reactively, but de Chirico did not. Does he regard de Chirico's early work as less powerful for that reason? The question of de Chirico's loss of creativity is much better understood in Scott's formulation. Shengold's contention that Ernst is more complex than de Chirico is puzzling and subject to dispute. This critique is highly speculative and intellectualized, and for that reason it is less interesting.

In contrast, Andrew Abarbanel's note on Magritte's use of the shroud is a lovely psychoanalytic note that weaves a convincing psychological narrative into one picture and enriches the act of viewing. The painting in question, *Meditation on Folly*, is a meditation on the mother who was "*folle*" and who died by suicide. The shroud as a transitional object is evoked. Magritte, for all of his protestations about psychoanalytic interpretation, invites it by

virtue of the dramatic data of his life, his own writings, and the paintings which he entitles in specially revealing ways.

The general articles on surrealism are interesting philosophical comments on the surrealist movement. Stephen Post points out that the surrealist movement, with recourse to the unconscious, was doomed to failure in its effort to fill the emptiness generated by the nihilism of the twentieth century. Although success in this grand endeavor could not be realized, the author properly emphasizes that surrealism's new vision offers as much as any artistic endeavor can accomplish. This is a particularly rich essay.

Donald Kuspit, in a scholarly article, defines the discrepant goals of psychoanalysis and surrealism. In its effort to obtain rational control over the unconscious, surrealism reveals a breakdown of ego forces. This does not acknowledge the claim of psychoanalysis for a resolution or integration of unconscious phenomena, a process more subtle and complex than control. Surrealism as an anti-authoritarian movement is in many respects a remarkable paradox because of the manifest and extreme authoritarianism of Breton, the self-appointed leader of the surrealists. Kuspit tends to speak of surrealism as a unitary phenomenon, and yet there are substantial differences as one considers Breton and others, certainly Magritte.

The discussion of psychotic art highlights the distinctions among creativity, imagination, and psychosis. Mihaly Csikszentmihalyi elaborates on the subtle differences between imaginative fantasy and the psychotic distortion of reality. Art, as an escape from reality, may categorize non-psychotic artists, but they remain always aware of reality, and the imaginative fantasy exists in a dialectic with reality, a circumstance that is not apparent in the work of the psychotic artist. The details of psychotic art are described in considerable depth.

Aaron H. Esman's erudite and delightful interlude offers a framework for understanding the theme of the bathers in Cézanne's work. He utilizes Ellen Handler Spitz's tripartite ordering of psychoanalytic inquiry into art. The first theme has to do with Cézanne's psychology and his elaboration of this theme. Esman relates this to the screen memory of pleasurable bathing in early adolescence with Zola and his friends, seen as a defense against homoerotic impulses and intensified by Cézanne's manifest fear of

heterosexuality. The second theme, namely, the study of the content of the work of art without reference to the life of the artist, postulates that the bather paintings represent a movement toward isolation and containment, represented in the pediments in Greek art, with echoes of death, another central theme in Cézanne's work. Finally, he suggests that the aesthetic appreciation of these works of art is generated by repressed conflict in the viewer. Esman's comments enrich and sharpen the act of seeing, and accordingly increase the pleasure in the examination of the paintings.

Catherine Bock makes an interesting attempt to follow the path of self-discovery through the self-portrait in Matisse's work. She leans heavily on a previous article by Francis V. O'Connor, who utilizes Daniel Levinson's conceptualization of the different stages of a person's life to illustrate themes. My own view is that Levinson's stages are much too precisely defined and that the patterns and rhythms of individual lives hardly accommodate themselves so readily to this type of categorization. By extension, some of Bock's readings of the portraits are not entirely convincing, although she often sheds new light in the examination of particular portraits by what she reveals about the inner state of the artist at that particular moment.

Other articles on caricature and their relationship to Freud's book on jokes and comments about Vasari are interesting. There are stimulating book reviews of a biography of Giacometti and discussions of the less known post-World War II Viennese school. For those interested in the field of applied psychoanalysis as it relates to the visual arts, this is a volume well worth perusing.

MILTON VIEDERMAN (NEW YORK)

SOWING THE BODY. PSYCHOANALYSIS AND ANCIENT REPRESENTA-
TIONS OF WOMEN. By Page duBois. Chicago/London: University of Chicago Press, 1988. 227 pp.

The founder of psychoanalysis was a philhellene, as is apparent from his antiquities-cluttered desk and the name of the most famous complex he invented. He frequently cited classical authorities and Greek mythology for confirmation of his discoveries and validation of his theories about the human psyche, particularly the

centrality of castration anxiety. In *Sowing the Body*, Page duBois, a feminist classics scholar with Lacanian and Marxist sympathies, challenges Freud's interpretation of these ancient sources. Her work offers a fresh and provocative, if somewhat quirky, perspective both on Greek concepts of sexuality and gender differences and on some of the fundamental assumptions of psychoanalysis.

The focus of duBois's inquiry is the depiction of the female body and references to feminine attributes in the art, literature, and culture of Greece of the fifth and fourth centuries B.C., with a special emphasis on pre-Socratic sources. She traces the metaphors by which women were described in myth, drama, poetry, and philosophy, and demonstrates how and why these images were transformed over time.

Five types of representations of the female body are delineated here in the order of their emergence in Greek consciousness: field, furrow, stone, oven, and tablet. According to duBois's analysis, the earliest Greek image of the feminine principle is that of the fertile field, a metaphor in which the female earth is the fruitful, self-sufficient ("parthenogenic"), and spontaneous producer of life and food. The earth, and by extension the female body, was seen as powerful, and potentially dangerous. Mythic connections of women with stone, such as the Medusa, represented the earth as the interior place of burial, a negative counterpart to fertility. As the earlier gathering culture became a society with organized agriculture and private land ownership, there was an increasing estrangement from the land and from food production. The dominant metaphoric representation of women changed, with the development of the *polis* (city-state), from the field to the cultivated furrow ploughed by man. Although there is considerable overlap in metaphoric usage, in the fourth century women came to be depicted primarily as receptacles and as places for filling (ovens and vases) and inscribing (tablets). Metonymy, the figurative depiction of the container, comes to predominate in images of the feminine. This increasingly passive view of women, from the source of life to the "medium for inscription of masculine culture," reflected a more pervasive sense of male hegemony resulting from social and economic changes in Greek society.

DuBois argues that the shift in metaphor from the fifth to the fourth centuries was a radical one. In the earlier era, the female

body was represented as a space for reproduction, or as a site for production or protection. Women in pre-Socratic Greece were virtually considered another species, "unknown and unknowable," whose sexual attributes were entirely different from men's. Each sex was thought to have "what the other has not." The conceptualization of the female in terms of absence or deficit started with Plato. In the works of Plato and Aristotle, the good and the whole became identified with the masculine; women were defective, since the female body was thought to lack both heat and soul. By the fourth century, women were ranked hierarchically below men, and thought to be created, like animals, for domination. These views are amply supported in the text by quotations from such sources as Plato's *Timaeus* (". . . all those creatures generated as men who proved themselves cowardly and spent their lives in wrong-doing were transformed, at this second incarnation, into women" [p. 171]) and Aristotle's *Politics* ("The female is inferior, the male the ruler, and the female the subject" [p. 36]). Since women were illiterate and excluded from intellectual life, the ethos of Athenian philosophy was homosexual. Socrates "appropriated" female fertility when he referred to himself in the *Phaedrus* as a midwife in the birth of reason and philosophical understanding in men. This duBois interprets as evidence of the fantasy of male self-sufficiency and of an ambivalence and fear of women which pervaded Greek culture.

DuBois takes care to point out that the position of women in pre-Socratic Greece was by no means idyllic (their lot actually improved over time) and that the metaphoric shifts she describes reflect attitudes primarily. In addition, other than the poet Sappho, there are no extant records of Greek women's views either of themselves or of men. The author's purpose is to describe the historical context of these metaphors in order to understand the origins of "phallocentrism," which, while not inherent in the Greek philosophic tradition, was its logical extension. This orientation structures modern thinking about gender, and permeates the thinking of Freud.

DuBois's objective is to challenge the "ahistorical" references to Greek thought in psychoanalysis and to demonstrate that Freud's approach is not "a transcendent, universally adequate description" of gender. She claims that the image of women as wounded, defi-

cient, and defined by the absence of the phallus is a modern pro-
jection and a distortion of Greek notions of sexuality which, despite
the frequently misogynistic content, view women in entirely dif-
ferent terms; the presence or absence of the penis is not the essen-
tial attribute of sexual difference within the Greek idiom. The
Greek mentality was fundamentally different from our own, and
therefore our notions of gender are particular and historically de-
termined rather than objective, eternal verities. Freud's "coloniza-
tion" of Greek sources to confirm his theories of penis envy and
castration anxiety are, in duBois's view, misinterpretations.

DuBois supports her position with alternative readings of several
of Freud's key references. With regard to Sophocles' *Oedipus Rex*,
she charges that Freud overemphasized the fear of castration by
the father and ignored the textual focus on the mother's violated
autonomy. Jocasta, mother of Oedipus, is repeatedly referred to as
a "twice-ploughed field." In duBois's reading, the incestuous crime
was viewed by the Greeks primarily as a violation of the mother's
sacred autonomy, the opposite of the *hieros gamos* (holy marriage)
which produces crops. Castration anxiety did indeed exist in Greek
thought, but castration of the female was not the essential element
in sexual differentiation.

In a similar vein, the myth of the Medusa, which Freud inter-
preted as representing male fear of castration, represented within
Greek tradition the female body as an aspect of earth as a place of
burial, which feeds on men and renews herself. "The myth of Me-
dusa," the author states, "is a myth of fear of women, fear of their
archaism, their self-sufficiency, their buried power" (p. 92). The
Gorgon, taken out of context as a phallic symbol, can be seen as
symbolizing male fear of the "dangerous interiority" of the earth—
not a denial of women's castrated state, but anxiety over her po-
tency. There is extensive evidence of ambivalence toward women,
womb envy (Zeus' parthenogenic delivery of Athena, for instance),
and examples of the violent, devouring power of female anger
(e.g., the Furies, Medea).

Why did Freud misinterpret the Greeks? His view of history, like
his concepts of neurology, were rooted in his time. He saw the
Greeks as in touch with the truth untainted with repression, rather
like noble savages who expressed unconscious fantasies in undis-
guised form. He was relieved to find confirmation of controversial

ideas in revered ancient sources, even if what he really found were foregone conclusions. DuBois, applying Freud's methods to his own behavior, shows that he typically denied the significance of the mother—a conclusion with which many analysts agree—and that he took as literal the themes that would have been construed by an ancient audience as metaphoric.

In order to avoid making assumptions of similarities of thought where study indicates none exist, it is essential, duBois believes, to take the past in its own terms, and to be aware of a tendency to idealize and make anachronistic use of Greek concepts. She makes a cogent argument that the ancient Greeks did not conceive of gender differences in terms of castration and penis envy, and her approach is a valuable corrective. However, phallocentrism is no longer a universally accepted, unchallenged notion within psycho-analysis, as duBois assumes; she cites no psychoanalytic theorists other than Lacan. In addition, her style is polemic and her prose frequently impenetrable, full of such neologisms as "gendering," which tend to alienate the reader. Her work is, however, original and fascinating, and adds a new perspective as well as a useful ca-veat to psychoanalytic inquiry.

JEANNE M. SAFER (NEW YORK)

FREUD AND JUNG. YEARS OF FRIENDSHIP, YEARS OF LOSS. By Linda
    Donn. New York: Charles Scribner's Sons, 1988. 238 pp.

The relationship between Freud and Jung started in 1906 when the young Swiss psychiatrist, working at the Burghölzli, read and admired the dream theory of Sigmund Freud. In his article, "Psy-choanalysis and Association Experiments," published in 1906, Jung gave generous praise to the theories of Sigmund Freud. He stated, "It appears, from some recent publications, that Freud's theory . . . is still consistently ignored. It therefore gives me great satisfaction to draw attention to Freud's theories—at the risk of also becoming a victim of persistent amnesia" (p. 66). Jung sent Freud a copy of his book on the word association test. In Freud's brief thank-you note to Jung, he made a prediction: "I am confi-dent that you will often be in a position to back me up, but I shall gladly accept correction" (p. 67).

Thus began an intense and tumultuous relationship character-

ized first by warm camaraderie, intimate self-revelation, profes-
sional collaboration, and growth—but then after 1910, by growing
distrust, hostility, organizational schisms, and personal hurt for
both these men of extraordinary genius. Although Freud and Jung
never saw each other again after the discordant 1913 Munich Con-
gress, the author suggests that the relationship lived on in each as a
deep sense of disappointment and personal loss. From letters and
interviews in their later years, one can see that there also remained
a warmth and concern of each for the other that was largely silent
and undisclosed. It is reported that following the 1913 Congress,
Freud had trouble even saying the name "Jung," repeatedly pro-
nouncing it as "Jones."

Immediately following this very disturbing break with Jung,
Freud left Munich and went to his beloved Rome, where he im-
mersed himself in studying Michelangelo's statue of Moses. His
subsequent anonymously published short essay, "The Moses of Mi-
chelangelo," reflected in part the rage, disappointment, and bitter-
ness associated with the desertion of his protégé. Carl Jung, for his
part, left the Munich Congress and began a steep descent into de-
spair, which was life threatening. He was unable to write or to read
scientific journals. He withdrew from his family and friends, and
had disturbing dreams and terrifying "images." He placed a gun in
his night stand and said that when he could bear it no longer, he
would shoot himself.

Linda Donn, in her book, focuses on the seven years from 1906
to 1913. She includes some earlier history of the two protagonists,
and ends her study by detailing a few events in the lives of Freud
and Jung following their estrangement. In sketching these seven
years, Donn invites us to follow the growing intimacy between
Freud and Jung, the "misunderstandings" and transferential dis-
tortions, and the harsh and bitter crumbling of their friendship.
She highlights two principal areas of difference between Freud
and Jung, which initially drew them together but subsequently
contributed to the demise of their relationship.

First, they came from different worlds and different back-
grounds, which molded their distinct but dissimilar views of the
world. Freud, the Viennese Jew, the favorite child adored by his
young and attentive mother, grew to become a controlled but pas-
sionate man who had a sense that he was someone special and was

convinced that his unpopular scientific observations and theory were correct. Jung, nineteen years younger, a non-Jewish Swiss and a minister's son, was raised in an atmosphere of ominous parental conflict and tension. His mother was hospitalized for several months when he was three for an illness related to the marital situation, and Carl was left feeling that women were innately unreliable. He was a lonely, insecure, mistrustful child who played for hours by himself and felt alienated from others and estranged from himself. In Freud, Jung found an impassioned, interested father-hero. In Jung, Freud found a youthful and brilliant supporter and admirer and someone from outside the intimate Viennese group.

Second, Freud had an unwavering conviction about the centrality of sexuality in neurosogenesis; Jung never seemed sure about this position. He at first agreed, but he felt uneasy. Then he became doubtful and finally rejected outright the centrality of sexuality in psychological life. Freud saw himself as a scientist and sought scientific truth. He tried to uncover the psychologic basis for religious belief. Jung, the introverted minister's son, delved deeper into occult and mystical matters. Scientific thinking was confining and a hindrance.

Freud and Jung were very much part of the political struggle between the Viennese school and the Zürich school—groups that would grow increasingly distrustful and disdainful of each other. Motivated in part by the desire to remain the "favorite children," loyal associates fanned the fires of contention that were sparking between their respective leaders. In 1910, at the peak of their friendship and collaboration, Freud saw Jung as his natural successor who would lead and protect his new science. In addition to his personal closeness to Jung, he saw in this young man, a non-Jew, someone who would be in a better position to safeguard psychoanalysis from a hostile world. He feared that his science would become an isolated "Jewish science" and thereby vulnerable in Vienna. At the Nuremberg Congress in 1910, Ferenczi, under Freud's direction, proposed that the members at the Congress form the International Psychoanalytical Association, with Carl Jung as its president for life. The proposal was met with hurt and outrage by Freud's closest and oldest colleagues from Vienna.

They saw Jung as an outsider, and someone prone to mystical and occult preoccupations.

Linda Donn, the author of this thin volume, does an outstanding job in filling in this outline and in making the relationship between Freud and Jung come alive. To begin with, her scholarship appears to be first rate. Her sources—extensive and rich—include letters from The Sigmund Freud Collection at the Library of Congress, some of which have not previously been available for study. In addition, a number of personal letters and interviews with Jung have recently been opened to scholars. In researching these and many other sources, the author has woven together the threads of data in an articulate and thoughtful manner. Clearly, an element of subjectivity is involved in what she selects and how she analyzes and synthesizes, but this should be of no surprise to the psychoanalyst, the historian, or even the physicist. The story that Donn reconstructs does not include any startling new discoveries or perspectives. The Freud-Jung relationship as an important part of psychoanalytic history has been underscored in many biographical studies. Donn's particular focus on this relationship, along with the additional source material, makes her synthesis notably rich, informative, and vibrant.

Alongside her more formal documentary research, the author has tried to immerse herself in the worlds of Jung and Freud. She spent a dozen afternoons with Franz Jung hiking in the hills around Schaffhausen, an area so important and familiar to his father. Because she learned the small details of everyday life, Donn is able to describe a sense of connectedness to the little village in Switzerland where Carl Jung lived at the turn of the century. The author also befriended Paula Fichtel, now eighty-three, who was Freud's maid since the age of twenty-eight. "Paula drew a human portrait of Freud, and together we watched night fall on Austria and the Freud family" (p. x).

Just as the author felt drawn into the lives and the friendship, the loss and the pain, of these two giants, and into the ambience of the analytic community between 1906 and 1913, so, too, she is quite masterful in drawing the reader into these momentous times and into this intense relationship. The material in itself is powerful and involving, but, in addition, Linda Donn's writing style and her

dramatic flare are most effective in engaging the reader. Although some will probably object to a number of her speculations and to the poetic license which creates some personal distortions, the portrait she paints is quite credible, alive, and absorbing. In comparing her factual material with other biographical works about Freud and Jung, I do not find that she sacrifices factual content for dramatic impact. In the period from 1906 to 1913, the relationship between Freud and Jung was affectionate, intimate, tumultuous, and painful; it stirred within these two men deep levels of unconscious conflict. Linda Donn, in an articulate, scholarly, and dramatic manner, captures this extremely well.

NEWELL FISCHER (BRYN MAWR, PA)

A SECURE BASE. PARENT-CHILD ATTACHMENT AND HEALTHY HUMAN DEVELOPMENT. By John Bowlby. New York: Basic Books, Inc., 1988. 205 pp.

This slim volume is a compilation of John Bowlby's lectures, delivered to a variety of audiences, between the years 1978 and 1986. In the Preface, Bowlby makes explicit the underlying agenda for this collection: to sketch the history of attachment theory and its evolution through his own thinking and through the vast research it engendered, both directly and indirectly, and to encourage its greater clinical application. The lectures offer a compendium of Bowlby's main ideas, a sampling of research, especially the Strange Situation paradigm developed by Mary Ainsworth, and an opportunity to assess the robustness of Bowlby's theory as he attempts to integrate it with self psychology and applies it to various clinical problems.

As an introduction for the psychoanalyst unfamiliar with attachment theory, this book provides a readable overview; however, even putting aside differences based on theoretical persuasion, it is seriously flawed for its own purposes. Probably because of its original lecture format, there is a tendency toward oversimplification so pervasive as to undercut the recognition due Bowlby as the pioneer ethologist whose work opened up critically important approaches to the dilemma of research in infancy. Unfortunately, this defect is highlighted by Bowlby's wide-ranging focus in these

lectures, since the application of his theory, which refers to the biologically based attachment of the infant to its mother, to such extremely complex social problems as child abuse produces self-evident, even banal conclusions: "I believe there is already sufficient evidence, coming from diverse and independent sources, that points to the very substantial influence on personality development and mental health of the way an individual's parents treat him or her" (p. 179). This brings to mind Jerome Kagan's observation that Bowlby is "newsworthy" because "modern citizens have begun to question the universality of deep affection and continued loyalty . . . and are eager to hear a wise commentator on human nature assert that the love between child and parent is an absolute requisite for psychological health."[1] In the context of this diffuse and reductionistic application of attachment theory, its limitations are highlighted; it does not comprise a general psychology, nor should it be expected to, despite its usefulness as a perspective on infancy and the dawn of object ties.

Moreover, for the psychoanalytic reader, the polemical nature of Bowlby's frequent references to "traditional psychoanalysis" creates an unfortunate schism between attachment theory and psychoanalytic views of development, rather than an attempted integration. Interested, psychoanalytically oriented clinicians thus find themselves the target for attack, especially undeserved since, as Anna Freud noted in her discussion of Bowlby's work, attachment theory and metapsychological principles simply cannot be compared "as if they were mental phenomena of the same order."[2]

Also problematic is Bowlby's persistence in faulting psychoanalysis for views of development that were advanced in Freud's early discussions of libidinal phases, long since elaborated and amended by child analysts; similarly, he seems greatly impressed with popular notions of psychoanalytic "crimes," i.e., Freud's failure to document real sexual abuse in the context of his revolutionary discovery of the role of unconscious (incestuous) fantasy in his early

[1] Kagan, J. (1984): *The Nature of the Child*. New York: Basic Books, pp. 55-56.

[2] Freud, A. (1958, 1960): Discussion of John Bowlby's work on separation, grief, and mourning. In *The Writings of Anna Freud, Vol. 5. Research at the Hampstead Child-Therapy Clinic and Other Papers, 1956-1965*. New York: Int. Univ. Press, 1969, pp. 167-186.

cases. To this reader, Bowlby's own contribution is obscured by these comparisons, since his theory offers neither an alternative metapsychology nor a true developmental psychology; moreover, it fails to address the pivotal role of conflict in mental life, the cornerstone of psychoanalytic theory. To present attachment theory as a competing psychoanalytic school can only diminish its value.

Despite these caveats, the patient reader can come away with the key principles of attachment theory, a sense of its place in the field of child development, and an indication of its research potential. The book provides a good overview of Bowlby's professional trajectory, from his beginnings as a young analyst at the Tavistock Clinic, through his current interest in cognitive psychology, infant research, and self psychology. He sketches the origins of attachment theory in the germinal atmosphere of post-war Europe, where the shared observations of children disrupted by war and other forms of separation traumata informed the work of several key figures in the field of child development, including, of course, Anna Freud and the Hampstead Group.

Impressed with the impact of maternal loss and dissatisfied with the formulations of libido theory and the early object relations theory of Melanie Klein, Bowlby turned to Konrad Lorenz's experiments with ducklings and goslings to elucidate the nature of the child's tie to the mother. Arguing that an ethological perspective was more truly biological than traditional Freudian ideas of instinctual drive, he embraced the notion of an independent, fundamental motivational system, on a par with, but distinct from, sex, hunger, exploration, and parenting, preprogrammed to develop over the first few months of life and "cybernetically" organized by one year (meaning that patterned behavior will be predictably elicited in certain environmental circumstances; a baby will demonstrate attachment behaviors reliably in situations that require adult protection). Attachment behaviors, just like the other motivational systems, serve an evolutionary principle, that of safeguarding survival. Moreover, attachment behaviors can be observed throughout the life cycle and presumably are to be understood as the evocation of a particular preprogrammed response to conditions that threaten survival.

Bowlby makes clear that specific attachments differ from attachment behaviors, in that they are enduring attributes of the at-

tached person, independent of environmental conditions. He emphasizes repeatedly that this concept is not equivalent to dependency, which he feels is an exclusively pejorative term as employed by psychoanalysts. He reiterates his early argument with Anna Freud that mourning in early childhood is completely comparable to the adult form.

This aspect of his theory, with its strong emphasis on the powerful and immutable behavioral manifestations of the child's tie to the caretaker, addresses the failure of many psychoanalytic writers to integrate new research documenting the rich interpersonal repertoire of the human infant, demonstrable at birth, and to provide an appropriate lexicon for early emotional life. However, it also highlights what, from my point of view, epitomizes Bowlby's adevelopmental perspective, perhaps exaggerated in this presentation but nonetheless evident in his more elaborate theorizing. Despite his notion of phase-specific behavioral systems achieving activation according to biological readiness (e.g., sexual behavior) or to environmental stimuli (e.g., attachment behavior in the mature organism under stress), he does not seem to espouse an integrated picture of individual development with its "ubiquitous" potential for neurotic conflict.[3] He seems to minimize the extraordinarily complicated interaction of constitutional endowment, maturational sequencing and differentiation, experience (both internal and external), and gradually evolving and increasingly complex psychic structure. He does offer a notion of "developmental pathways," but places the onus entirely on "sensitive and responsive" parenting to determine a given child's direction, "except for infants born with certain types of neurological damage" (p. 136).

Not surprisingly, this perspective, which is focused on a level of analysis far more behavioral and descriptive than psychoanalytic, seems directly responsible for the research power of attachment theory. The Strange Situation paradigm, developed by Mary Ainsworth, has proven to be a useful and reliable measure of attachment types, permitting the characterization of three distinct groups which are sustained over time. In addition, Bowlby cites a number of epidemiological studies that borrow from his ideas and trace the importance of early loss and inadequate care in, for ex-

[3] Weil, A. P. (1970): The basic core. *Psychoanal. Study Child*, 25:442-460.

ample, subsequent depression and poor parenting. However, Bowlby's argument that his theory is closer to a "natural science" than is traditional psychoanalysis because of its research power and the invocation of concepts such as natural selection and biological systems is unconvincing.

Further, Bowlby embraces a patently unscientific position, popularized by writers such as Alice Miller, which considers the child a victim of the environment and reverts back to the simplified view, however sympathetic, of the mother as the primary pathogenic agent in childhood. Considerations of the "continuum of caretaking casualty"[4] and the powerful impact of infants on their environment, with their biological endowment, their genetic blueprint with its gradual and quantum shifts, its hidden gifts and aberrations, not to mention their unfolding psychology, are given short shrift.

In conclusion, this volume may best serve both the reader and attachment theory if read selectively, concentrating particularly on the chapters which describe the history of the theory and Ainsworth's research. Especially for the psychoanalyst interested in infancy, Bowlby, as the father of much current research, remains a central figure in the field of child development.

KAREN GILMORE (NEW YORK)

FREUD'S THEORY OF PSYCHOANALYSIS. By Ole Andkjaer Olsen and Simo Køppe. Translated by Jean-Christian Delay and Carl Pedersen, with Patricia Knudsen. New York/London: New York University Press, 1988. 557 pp.

This book is the most recent in a series called "Psychoanalytic Crosscurrents." Leo Goldberger, the general editor, gives in the foreword the criteria for inclusion in the series: a work must "provide the critical reader with contemporary insights; and, above all . . . be high-quality scholarship, free of obsolete dogma, banalization, and empty jargon" (p. xii). Scholarship is what I find especially lacking, though the book does contain many interesting con-

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[4] Sameroff, A. J. & Chandler, M. A. (1975): Reproductive risk and the continuum of caretaking casualty. In *Review of Child Development Research, Vol. 4*, ed. F. D. Horowitz, et al. Chicago: Univ. of Chicago Press, pp. 187-244.

temporary ideas. It also demonstrates decisively, however, that dogma, banality, and empty jargon may characterize the presentation of newer ideas as well as ones that are obsolete.

The dust jacket tells us that the authors are research associates in the Psychological Laboratory at the University of Copenhagen, Denmark, that one has "written extensively on semiotics, psychoanalysis, and literature," and that the other "has written on subjects ranging from Freud's neurophysiology to psychoanalysis and the history of ideas, theories of socialization, and narcissism." It states further that they are jointly "translating and annotating Freud's major works into Danish, as well as the works of Melanie Klein and Jacques Lacan." They clearly aim to cover a lot of ground.

The first hundred pages are somewhat like an introductory college survey course on Freud and the history of ideas, with all the strengths and limits of that format. I found much in these chapters that was interesting and informative. Stimulating ideas from many disciplines are presented for synthesis and integration. A major thesis of the work is that Freud's psychoanalysis successfully challenged and revised Western culture's ways of conceiving of the individual—it created a new "subject." Each of the three major prior "subject" models is traced historically through philosophy, political and economic theory, literature, and the natural and medical sciences. What the authors call the liberalistic-rationalist tradition was supplanted by Freud's "adaptive register," the romantic-humanistic tradition by Freud's "psychosexual register," and the mechanistic-empiricist tradition by the "structuralist" approach to human knowledge which the authors find implicit in Freud's thought, despite Freud's theoretical commitment to materialistic and positivistic models.

I simplify the authors' arguments considerably, but, in essence, they believe that in the concept of the unconscious, Freud discerned a domain that overcame the limits of earlier dualisms, such as mind and body, reason and passion, mechanism and vitalism, subject and object, and meaning and cause. Their social, economic, and political analysis utilizes a conception of "spheres": a sphere of production, a sphere of circulation, and a sphere of reproduction or intimacy. They show how prevailing intellectual traditions may serve political and economic interests and how so-called abnormal psychologies may be inevitable outcomes of these same interests.

They believe that Freud's "phylogenetic" (biological) emphases can be replaced by "sociogenetic" (more recent social and historical) ones. For example, they assert that the oedipus complex and many of the common neurotic patterns which Freud first described are the result of and a logical adaptation to the rise of capitalism in the past few hundred years.

I assume that their social, political, and economic analysis is heavily influenced by so-called Freudian-Marxist thought and their structuralism by Lacan—by these and an amalgam of other interesting and important intellectual and political traditions more popular and well known in Europe than in the United States. I know too little about these areas to say if this is so. The authors do not help, however, as they never state when an idea is their own, someone else's, or a modification of someone else's. Some of their major ideas seem to have come from Laplanche, to whom they briefly pay great respect once or twice in the lengthy text.

The authors are strongest when they are tracing the intellectual and scientific background for Freud's theories. Here the short-comings are those of the survey course. With very occasional exceptions, there are no sources cited in the text. Manifest clarity hides all sorts of possible omissions, oversimplifications, reduction-istic and broad categorical statements, opinions presented as facts, truths taken out of context so that important qualifying statements and opposing points of view are invisible to the reader, and so forth. For example, the romantic literary tradition is dismissed as "vastly inadequate" because it failed to understand "the expanding capitalist social system's encroachment on the sphere of intimacy" (pp. ix-xx); Homer and Sophocles are not mentioned in a chapter that attempts to show that the idea of the nuclear family and oe-dipal relations arose with the birth of capitalism. "Freud's psycho-analysis" may "help us avoid falling back on romantic and politi-cally useless, if not outright dangerous, positions as we grope our way to a new society" (p. xxi); and so forth.

A good lecturer or writer may write potent prose, and if it is a mix of fact and opinion, it may not be a major crime in some set-tings. One may learn something, be made aware of new worlds. If one wants to know more, one can read more advanced or scholarly texts or go to the original sources. The aim of the authors was much higher, however. A scholarly text that supersedes other,

more specialized works is promised—the first text to integrate all the important points of view that bear on Freud's thought. In the bibliographic notes at the end of the volume, many, many works are mentioned as sources. Many of these, even those by authors treated favorably (such as Anzieu, Ricoeur and Sulloway), are briefly characterized by a statement that alludes categorically to the correctness of their views (i.e., whether they "agree" or not with the authors) or to the limited perspective of the work (implicitly compared, of course, with that of the authors). Notably, however, none of the works mentioned are evaluated regarding their scholarliness.

After the first hundred pages, the authors move into the "close reading" of Freud that is promised in their introduction, and my enthusiasm, as I read on, soon sagged considerably. They are competent when dealing with certain kinds of abstract ideas. They usefully organize, for example, Freud's early theoretical models, and show how some of these may be compared to later ones in a way that gives them interesting, overall consistency and sense. But they cannot speak sensibly about anything experiential, anything remotely clinical. The complexities and ambiguities of human experience and the theories that deal with them are forever beyond their grasp. Astonishing oversimplifications, mixed metaphors, and confabulatory mixtures of concepts from different epochs in Freud's thought and different theoretical frames of reference are fused and confused with each other and with the authors' personal opinions and lay misunderstandings.

Innumerable factual errors, such as those contained in their straight-faced, nonhistorical approach to perversion and "actual neurosis," would be easy to document. More difficult to isolate and demonstrate is the strange (and fascinating) admixture of ideas that results when the authors allow themselves the liberty to pick and choose ideas from all of Freud, then to amalgamate these at will with ideas gathered from philosophy, social and natural science, and literature; further, to mix these indiscriminately with their own politics, philosophy, psychology, personal opinions, and pretenses; and finally, to totally ignore the necessary distinctions between experience and theory, or between intrapsychic experience and experience in what we ordinarily call the real, outside world. This example, where the authors use Freud's screen

memory of picking dandelions to demonstrate a psychoanalytic approach to memory, may convey the flavor.

> Woman was symbolized in Freud's unconscious by books as well as flowers. These were objects he appropriated violently and destructively, but which nevertheless provided him with a livelihood in keeping with the demands of his father and other male authorities. As bookworms live off the pages of books and Freud could eat the leaves of his favorite flower, the artichoke, he could provide a moderate income for his family without giving up his idealistic and one-sided research interests. The extremely artificial compromises on a symbolic level between the divergent impulses of the Oedipus complex had an organizing effect on Freud's life in reality. The two female symbols, books and flowers, were united in the attempt to establish a scientific career by studying the coca plant (p. 182).

Other difficulties are more subtle. In a subchapter, entitled, "The Oedipus Complex in Industrial Society," we have this:

> Freud was not the first to point out the paradoxes of love life, but he was the first to analyze them using a scientific model. By paradoxes we mean ambivalence, the opposition between affectionate and sensual feelings, the opposition between forepleasure and end pleasure, and the malleability of sexuality (inhibition of aims, displacement of aim and object, sublimation, and so on) (p. 198).

Some allowance must be made for possible stilted or inexact translations, of course. One problem is that many of the technical terms in this passage appear here for the first time in the book. They are not explained here or elsewhere. Nevertheless, so far so good, one might suppose. But the authors immediately go on, using the passage as a springboard and Freud's papers on the "Psychology of Love" to make their *own* point that tensions within the nuclear family in capitalist society inevitably create frustration, power inequities, and debasement of women. Unfortunately, this may be true. But it also seems to me an example of misrepresentation, as well as misappropriation and even exploitation of Freud. These examples cannot convey the additive effect of this sort of "interdisciplinary prose" when it goes on for hundreds of pages.

I am often stimulated by new knowledge from and opportunities for integration with fields which share borders with psychoanalysis. I also enjoy greatly many of the highly imaginative, creative amalgams from divergent cultural, artistic, and intellectual traditions that have become so common in international popular culture recently. But these authors do not seem to know where on this

spectrum they want to be or where they belong. They clearly do not recognize the limits that lack of expertise within each specialized area places on multidisciplinary work.

Ironically, at one point they define structuralism in a way that emphasizes nonreductionism as well as overdetermination (p. 426). In addition, they show a sophisticated (intellectual) appreciation that Freud's unconscious works structurally only if the contents attributed to it are not conceived of as identical with the contents of conscious thought, and that dynamic mental contents cannot simply be equated with psychic structures (p. 425). But though their ambitious intentions and respect for Freud's thought are both admirable and sincere, in practice they constantly forget they know these kinds of things, with the result that they too often oversimplify, reduce, and confuse.

GERALD I. FOGEL (NEW YORK)

ENDING THERAPY. THE MEANING OF TERMINATION. By Terry A. Kupers, M.D. New York/London: New York University Press, 1988. 153 pp.

The subject of termination as a process has not been addressed in a careful, methodical way until relatively recent times. "Unless the terminal phase has been passed through, it is very doubtful whether any case has been psychoanalyzed," Glover cautioned.[1] And Harold Blum[2] has pointed out that while the subject of termination was addressed by Freud (and also by Ferenczi), the process of a termination phase in analysis was not a focus for study during Freud's lifetime. Blum's thoughtful paper traces the evolution of our conceptual formulation of a termination phase.

Kupers contends that the process of termination, in both psychoanalysis and psychotherapy, must be considered from clinical and social perspectives. He is critical of the unequal distribution of mental health services. For example, in many clinics, patients are offered only brief therapy, although their clinical condition requires a more lengthy treatment. Kupers contends that "a patient's

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[1] Glover, E. (1955): *The Technique of Psychoanalysis*. New York: Int. Univ. Press, p. 140.
[2] Blum, H. P. (1984): The concept of termination and the evolution of psychoanalytic thought. *J. Amer. Psychoanal. Assn.*, 37:275-295.

financial means usually plays a greater part in determining the length of therapy than does clinical condition" (p. 4). Further, "therapists are more likely to tell those who have more health coverage or can afford to pay private fees that their condition warrants long-term therapy."

In a chapter titled "Clinical Logic," Kupers expresses his notion that the mental health practitioner is confronted today with new configurations of symptomatology, from which new theories and therapeutic techniques evolve. One effect of this is a proliferation of more lengthy treatments, and terminations which are potentially more problematic than in brief therapies. Kupers quotes Freud's remark that analysis transforms "neurotic misery" into "ordinary unhappiness" and observes that the "ordinary unhappiness" of the 1890's may now appear as a treatable diagnostic category.

An account of Freud's failures in termination (Anna O. [actually Breuer's patient], Dora, and the Wolf Man) and anecdotal examples from the writing of Wortis and Kardiner are presented in a historical context. This is followed by an account of contemporary analytic practices which is almost exclusively from the perspective of Kohut. My cavil with this is the failure to represent a wider range of current psychoanalytic perspectives.

In a chapter entitled "The Community of Therapy Consumers," Kupers states that an increasing number of "potential clients for therapy . . . [causes] . . . therapists to dig deeper to analyze and to create theoretical rationales for longer-term or repeated therapies" (p. 123).

The reviewer agrees with Kupers's contention that much is unfair in the distribution of psychological care. The creation of "theoretical rationales" to treat patients is certainly the reverse of what is desirable, which would be continuing research to enhance our therapeutic understanding. The book's subtitle, "The Meaning of Termination," is inviting, yet the book is a disappointment to anyone seeking further understanding of the termination phase from an analytic perspective.

While Kupers quotes analysts who describe differences between psychoanalysis and psychotherapy, the author himself presents this distinction from a viewpoint of external manifestations. For

example, we are told that "therapy, no matter how informed by the psychoanalytic approach, is not the same as analysis. Consider, for example, the question of eye contact" (p. 48).

Kupers does not distinguish clearly between the processes of termination in psychoanalysis and psychotherapy. He quotes from Stephen Firestein's work,[3] and tells us that "all of Firestein's conclusions about the termination of psychoanalysis apply as well to the termination of psychotherapy" (pp. 36-37). This, however, does not render the two processes identical. Clearly, the "conclusions" of Firestein which are cited are entirely descriptive, referring to procedural issues.

It is well known that necessary prerequisities for a termination phase include the establishment of a transference neurosis, in which is reflected "the intensity and organization of the libidinal drive aspect of primary object relations,"[4] and the unmistakable unfolding of a profound oedipal drama. The meticulous analysis of this material is what characterizes an analytic termination.

In general, Kupers underscores the plight of the person seeking psychological help. The unsophisticated consumer is faced with a multitude of clinics, many of which offer inadequate and inappropriate therapy, clinical recommendations based upon availability of funds, idiosyncratic predilections, and ever-widening diagnoses and therapies. Kupers describes a newly evolving community of consumers with an "abstract commitment" to remaining in treatment. (The examples of this "abstract commitment," however, appear to be typical of various forms of transference.)

The list of criteria for termination has grown since the time of Freud. This is to be expected. Some consider it an indication of further study and understanding rather than a reflection of new modes of pacifying prospective patients.

One value of the book is to heighten public awareness of the paucity of available treatment for those with limited income. I am somewhat surprised, however, at Kupers's failure to mention low-

[3] Firestein, S. K. (1978): *Termination in Psychoanalysis*. New York: Int. Univ. Press.
[4] Solnit, A. J. (1989). Developmental perspectives on self and object constancy. *Psychoanal. Study Child*, 37:207.

fee treatments available in analytic institutes and the inadequate attention given to reduced-fee therapies at a multitude of training centers.

Kupers's contention that the resident or graduate student who offers psychotherapy is obliged to tell the patient, at the outset, of known time-limitations to the treatment is one which deserves consideration.

ANITA G. SCHMUKLER (PHILADELPHIA)

Adolescent Psychiatry. XV, 1988.

Marianne Makman

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ABSTRACTS

Adolescent Psychiatry. XV, 1988.

Abstracted by Marianne Makman.

Female Psychosexual Development: Mothers, Daughters and Inner Organs. Susan M. Fisher and Roberta J. Apfel. Pp. 5-29.

The authors discuss the ramifications of the diethylstilbestrol (DES) experience in mothers given DES during pregnancy, in their daughters who suffer the sequelae, and in the relationship between these mothers and daughters. Apparently, reproductive difficulties occurred in fifty to sixty per cent in these daughters, "benign" vaginal and cervical adenosis occurred in ninety per cent, and there is increased risk of cervical carcinoma. Mother-daughter relationships are complicated by the fact that mothers, providers of "early tender care," have unwittingly brought pain and disability to their daughters in the most basic areas of feminine identification: sexuality and motherhood. The authors, in yet another blow to the theory of penis envy in women, demonstrate through fantasies and concerns of DES daughters that girls fear primarily the loss of what they have, namely vagina and ovaries, rather than mourning the absence of a penis they never owned.

Late Adolescence: Spock and the Ego Ideal. Rhoda S. Frenkel, Pp. 46-64.

The Spock in question is not Dr. Spock but Mr. Spock of the television *Star Trek* series. The author, after giving a summary of superego development and of the instinctual conflicts prevalent in adolescence, tries to explain the intense, virtually universal appeal of the character, Mr. Spock. Adolescents (and perhaps the rest of us as well) identify with his "alien" status, half Vulcan and half human. Spock feels a part of both worlds, yet belongs to neither. He, as alien (like the adolescent who is neither child nor adult), openly criticizes the discrepancies in the "adult" world around him. With his extraordinary self-discipline, unselfishness, loyalty, and courage, he represents an ego ideal, a "superhuman" who still has internal struggles and who has assimilated aspects of both his mother's and his father's characters.

Poetry and Consciousness. C. K. Williams. Pp. 121-133.

In his moving contribution to the section of this volume entitled "Creativity and Adolescence," the author attempts to define "consciousness" and "emotion." He uses his own inner flow of image, narrative, sensations, and language to illustrate the profound complexity of the definition. He suggests that poetry may be the best and most accurate medium through which human beings can convey to one another emotions in all their dimensions.

The Creative Moment: Improvising in Jazz and Psychotherapy. Russell E. Phillips. Pp. 182-193.

As he suggests in his title, the author develops an analogy between the creative, spontaneous improvisations of the jazz musician and the thoughts and behavior of the effective psychotherapist in clinic encounters. Both musician and therapist must

be simultaneously connected with personal past and present, must have intensely focused attention on the present interaction, and must be free to experiment and to "recognize the significance of accidental experience."

The Creative Therapeutic Encounter at Adolescence. E. James Anthony. Pp. 194-216.

Anthony writes candidly and beautifully about creativity as a force in the therapeutic work with intellectually gifted adolescent patients, creativity in the patient, in the analyst and in the analytic situation itself. He illustrates his reflections with six poignant and detailed case examples.

Masking the Self: Fictional Identities and the Construction of the Self in Adolescence. John L. Caughey. Pp. 319-332.

The author draws a vivid analogy between the imaginative identification of novelists with the characters they create and the tendency of adolescents to create inner selves by identifying with fictional characters from novels, plays, films, and, especially, television. Both groups "become" others during intense daydreaming. In adolescence this form of identification can contribute to positive self-image but can also at times contribute to, rather than resolve, confusion over true identity. Many lively, interesting vignettes illustrate the author's thesis.

On the Relation between Creativity and Cutting Corners. Jay Mechling. Pp. 346-366.

Cheaters, contrary to popular ethics, often do very well indeed. Some children and adults discover this fact while others "play by the rules." The author examines eight different ways of viewing cheating from "cheating is a sin" to "cheating is a member of the class of actions called transcontextual syndromes which also includes play and creativity." He suggests, without making a judgment, that "cheating" which sometimes represents creative problem-solving, be explored as a cultural phenomenon rather than only as "a problem."

Clinical Dilemmas in the Prevention of Adolescent Suicidal Behavior. Cynthia B. Pfeffer. Pp. 407-421.

The author presents a lucid and useful schema for the assessment of suicide potential in adolescents. High risk factors include: presence of depression, antisocial behavior and substance abuse, immediate family or peer crisis, preoccupation with another person who has committed suicide or with recent media presentation about teen suicide. Early recognition of high risk and subsequent early intervention are crucial to prevention.

Intensive Psychodynamically Oriented Treatment of Two Cases of Adolescent Psychosis. Henry N. Massie. Pp. 487-504.

Once again we are offered an eloquent plea for the continued use of psychodynamically oriented intensive psychotherapy in the treatment of some young psychotic patients. The author presents the history of his long-term treatment of two

patients, a girl who became ill at age fourteen, and a boy whose psychosis began early in college. In both cases, panic over issues of separation and psychosexual development precipitated psychotic withdrawal from reality. Both patients utilized the relationship with the therapist, initially in the hospital, then as outpatients, to make excellent recoveries. The author believes that if "optimal treatment" does not resolve the psychosis, it is because the patient's inner will to master the illness and rejoin the world has been broken and resignation to be a victim of the illness has prevailed.

Adolescent Chemical Dependency. John E. Meeks. Pp. 509-521.

The author offers a succinct and practical guide to assessment of drug abuse in adolescents, characteristics of progression of abuse, and issues in treatment of these patients. If a chemically dependent adolescent behaves as though drugs are more important than people, there is cause for serious concern and vigorous treatment. Massive denial protects these youngsters from the recognition that rather than becoming independent they have become desperately dependent both upon the substance of abuse and upon others to rescue them. Gradual development of a strong transference and "human relationship" with a therapist, together with abstinence and group support, allows the emergence and treatment of underlying psychopathology.

Bulletin of the Menninger Clinic. LII, 1988.

Abstracted by Sheila Hafter Gray.

Hypnosis as a Window on Regression. Michael R. Nash. Pp. 383-403.

Temporal and topographic regression are fundamental concepts in psychoanalytic psychopathology. Since hypnosis may be viewed as experimental regression, it may be possible to determine whether clinical regression is ever likely to be temporal in nature. The author evaluated the extensive literature on hypnosis from this point of view. For the sake of clarity, formal regression was omitted from consideration. Out of twenty-four empirical studies, twenty found evidence of the existence of topographic regression, while only a single study documented temporal regression. One may therefore state, with statistically based confidence, that hypnosis can evoke topographic regression and that it cannot produce temporal regression. That is, hypnotic subjects may think and act in childlike ways, but their behavior is not identical to that of a child. This finding raises the question of whether psychological regression is ever truly temporal. The experimental literature suggests that adult psychopathology does not involve the concrete reinstatement of infantile modes of cognition and experience.

Androgynous Masturbatory Behavior as a Schizoid Phenomenon. Milton Eber and Dean J. Rotondo. Pp. 404-409.

An elderly, unsophisticated man consulted a psychiatrist because he was extremely anxious lest he might be a latent homosexual. He retained a life-long wish to establish a satisfactory heterosexual relationship. In the therapeutic setting he was coherent, anxious, guarded, and distant, and was preoccupied with a variety of

hypochondriacal symptoms. He never revealed any delusions or hallucinations, and psychotropic medications had no significant effect. There was some history of homosexual abuse in childhood. In the course of psychotherapy the patient revealed that he had practiced a form of self-sodomy throughout his life. This had become his preferred mode of sexual gratification. It seemed to protect him from the annihilative experience of intimacy with a partner of either sex. It also served the adaptive purpose of integrating the masculine and feminine identifications that the patient experienced as two separate selves, thus arresting even more extensive fragmentation of his personality. The authors emphasize the clinical importance of accepting and working with a patient's report of masturbatory practices and fantasies.

The Selfobject Function of Projective Identification: Curative Factors in Psychotherapy. Gerald Adler and Mark W. Rhine. Pp. 473-491.

This is the case of a suicidally depressed, anhedonic woman who came for psychoanalysis. In the third session, she gave the psychiatrist an essay in which she revealed in graphic detail both her violent fantasies about him and her belief that he had agreed to treat her in order to cure himself of his own pain. These themes persisted in the treatment. The analyst frequently experienced himself as harassed by the patient to do as she wished in the sessions. He often felt violated by and fearful of her; he also found himself behaving sadistically toward her. Eventually, the treatment focused on their mutual perfectionism and their hatred of one another. The analyst first viewed them as projections of the patient's attitudes. He believes that when he owned and dealt with these projective identifications as psychic elements that had become part of his own self through the mechanism of transmuting internalization, he was able to help the patient recover from her serious mental disorder. The authors conclude that the optimal psychotherapy setting for regressed patients is one in which ambiguity and uncertainty are actually experienced by both members of the treatment dyad.

Masochism and Its Treatment. Robert D. Stolorow; George E. Atwood; Bernard Brandchaft. Pp. 504-509.

At a point in the course of psychoanalytic psychotherapy, a young psychotic woman became uncommunicative except for the repetitive statement, "Hit me." She responded to interpretations only with these words. The therapist encouraged her to write the reason for her request. She wrote, "Physical pain is better than spiritual death." This comment was accompanied by a facial expression that the therapist read as despair. After that, the patient never again asked to be hit. The authors understand the patient's request as a concrete symbolization of her need to experience the analyst's enlivening presence in her world. They suggest that the patient experienced interpretations as efforts to substitute the therapist's self for her own. This was repetitive of her early traumatic interactions with an unempathic parent. When the therapist advocated her making her own interpretation, she could affirm her own self. The aim of masochism, from this point of view, is not self-destruction but the restoration of one's being.

The Subjective Experience of a Certain Future: An Extension of the Concept of Concretization. Jeffrey L. Trop. Pp. 510-520.

The author presents his work with two patients who for a prolonged time harbored the certain conviction of a fixed and traumatic future. This was couched in graphic visual imagery of a definite catastrophic event. Trop demonstrates persuasively how he came to interpret these beliefs as concrete representations of actual emotionally significant experiences in the patient's life. These patients had difficulty regulating affect states because of specific deprivations in early child-parent interactions. They tended therefore to memorialize such states as ideas of concrete and affectless events. A productive therapeutic approach to these fixed convictions involves addressing the genesis of the patients' structural deficits and helping them acquire more adaptive ways of organizing affective experiences.

Psychoanalysis by Telephone. John A. Lindon. Pp. 521-528.

The author reports on his extensive experience using telephone sessions for psychoanalysis of patients whose other commitments prohibit their meeting regularly with the analyst. He has found it to be a productive alternative method of work. Contrary to expectation, the telephone has not in itself proved to be a distancing mechanism, although it may be and has been used as such. Patients come to verbalize the kinds of physical appearance and activity that are obvious in the conventional analytic setting; they are thus not lost to psychoanalytic attention. For comfort, one should use a speaker telephone. Both patient and analyst must have private areas in which to conduct the session. The patient should have specific times during which to call; late or missed calls and requests for changed times are treated as if the patient were attending in person. The analyst needs to maintain normal psychoanalytic technique, including neutrality, free floating attention, and tolerance for long silences. There is a brief selected bibliography on the use of telephone sessions in psychotherapy.

Psychoanalysis and Contemporary Thought. XI, 1988.

Abstracted by Luke F. Grande.

The Setting and the Issues [of the Hamburg Congress, 1985]. Norbert Freedman. Pp. 197-212.

Freedman presents an overview of the relevant historical and social factors, and describes the emotional setting, of the 1985 Hamburg Congress, the first international psychoanalytic meeting to be held on German soil since 1932. The official theme of the Congress was "Identification and Its Vicissitudes," but the more compelling sub-theme was the impact of Nazism on the psychoanalytic movement. This paper also introduces the other papers in this issue, which were presented in May 1986 at the Edmund Weil Memorial Meeting on "Psychoanalysis and Values: Reflections on the Hamburg Congress," at the Institute for Psychoanalytic Training and Research.

Aryan Analysts in Nazi Germany: Questions of Adaptation, Desymbolization and Betrayal. Anna M. Antonovsky. Pp. 213-231.

Antonovsky recounts how Jewish members were purged from the German Psychoanalytic Society, and "Aryan" analysts, particularly Carl Müller-Braunschweig and Harald Schultz-Hencke, collaborated with the Nazis and tried to make psychoanalytic thinking appear compatible with Nazi doctrine. She posits that they did so by distortion, and that the Nazi system of exterminating what, by a process of externalization, is deemed to be bad, militates against the need to deal with conflict and to symbolize, and is antithetical to psychoanalysis. She describes the later effort of Müller-Braunschweig to become reunited with the International Psychoanalytical Association, and how it was facilitated by a reluctance to deal with the reality of collaboration and its impact on the German psychoanalytic identity.

Adaptation and Resistance: Reparation and the Return of the Repressed. Karen Brecht. Pp. 233-248.

Brecht describes the atmosphere in Germany in the 1930's, and how the leadership and membership of the German Psychoanalytic Society was shifted from Jewish to non-Jewish psychoanalysts. She presents an overview of the conflicts facing these two groups as well as the International Psychoanalytical Association, especially its president, Ernest Jones. She cites his efforts on behalf of Edith Jacobson who had been imprisoned by the Nazis for alleged Communist activities. She summarizes the activities of the Göring Institute and the post-war efforts to reconstruct German psychoanalysis. Müller-Braunschweig's approach was to dissociate himself from the German Psychoanalytic Society and to form the German Psychoanalytic Association which in 1951 was accepted into the International Psychoanalytical Association while the German *Society* was not. This fostered the illusion, now being painfully challenged, that the German *Association* had remained true to the teaching and values of psychoanalysis.

How They Know Themselves: Confronting the Past—A Contribution to the History of the German Psychoanalytic Association. Hermann Beland. Pp. 267-283.

Beland focuses on the post-war development of the German Psychoanalytic Association through an analysis of the group processes involved. He notes how that group, by obtaining sanction of the International Psychoanalytical Association, came to be seen as the persecuted group of German analysts, while the group headed by Schultz-Hencke was cast in the role of the persecutors—the bad Germans. He explains how this illusion was sustained, in Germany and outside of Germany, until the common heritage of all German analysts, as heirs to the Hitler regime, was gradually but forcibly and painfully brought home to the members of the German Association, who are now in the process of recognizing and dealing with their collective guilt, borne individually.

Apocalyptic Thinking in Mental Illness and Social Disorder. Mortimer Ostow. Pp. 285-297.

Ostow develops some ideas about apocalyptic thinking, including the belief that peace and prosperity will be achieved through a great struggle between the forces of good and evil. He links it to Nazism and other forms of terrorism as well as to psychotic thinking in schizophrenia and other clinical disorders. He also discusses anti-Semitism and posits that it becomes Holocaust when it involves apocalyptic thinking in which the evil is externalized onto Jews who must then be destroyed.

Professional Responsibility and the Professional's Paradox: Two Non-Analysts Reflect on Psychoanalysis in Nazi Germany. Ralph Freedman and Lore Metzger. Pp. 309-329.

Freedman and Metzger focus on professional identity and its relationship to authority, illustrating their ideas by referring to Franz Kafka's *The Trial.* Then, using as examples Edith Jacobson and Käthe Dräger in Nazi Germany, as well as Antigone, Galileo, and Jung, they demonstrate the dilemma facing the professional in a totalitarian society and four ways with which it can be dealt.

Psychoanalytic Method and the Politics of Discourse. Barnaby B. Barratt. Pp. 337-350.

Barratt proposes a clear distinction between the various forms of psychotherapy on the one hand and the psychoanalytic method on the other. In the former, the therapist, working with a set social and psychological structure in mind, aims to help the patient reposition himself or herself within that context, thereby making a better adjustment and feeling better. As an extreme example, he describes the talking cure used in cases of dangerous, protracted labor among Cuna Indian women. In contrast, he maintains, the psychoanalyst works by constantly questioning and using a method that is radical and deconstructive.

Psychoanalysis in Nazi Germany: Historical and Psychoanalytic Lessons. Robert S. Wallerstein. Pp. 351-370.

Wallerstein adds further insights into the Hamburg Congress. He notes the questions it raised and how, a year later, the Edmund Weil Memorial Meeting on "Psychoanalysis and Values: Reflections on the Hamburg Congress" tried to deal with them. He comments on, summarizes, and integrates the ideas and data presented in the other papers in this issue.

Perversion and Utopia. Joel Whitebook. Pp. 415-446.

Drawing upon the writings of Freud, Marx and Engels, Horkheimer and Adorno, Marcuse, Chasseguet-Smirgel, Ricoeur, Kohut, and others, Whitebook examines the concept of a utopian civilization from philosophical and psychoanalytic perspectives. In doing so, he explores how our oedipally structured civilization is founded on a compromise between the reality principle and the pleasure principle, in which the pleasures of the narcissistic gratification of the dyadic relationship are

renounced, want is experienced, symbolization is developed, and there is growth into, and acceptance of, the triadic reality as a fulfillment of the ego ideal. White-book examines the concept of freedom, and also the notion that without need, there is no necessity to conform to a reality principle, nor is it necessary that phenomena related to the pleasure principle be suppressed. He discusses the affinity between utopianism and perversion, and expresses his belief that the complete satisfaction sought by the psychoanalytic utopian, even if attainable, would not be desirable for the human condition.

Phenomenology and Developmental Origins of Desperate Love. Michael B. Sperling. Pp. 741-761.

In this paper Sperling defines and describes what he calls desperate love, discussing it as a phenomenon in itself. Drawing from Kernberg and others, he examines it dynamically and genetically, primarily from an object-relations point of view. While he does not see it as being necessarily pathological per se, he does posit that it is due to anxiety and urgency arising from closeness and is a reflection of predispositional character traits resulting from unresolved conflicts in the rapprochement phase of development.

The Development of the Hero. Sigmund Freud and the Reformation of the Jewish Tradition. David S. Blatt. Pp. 639-703.

Blatt focuses on Freud's Jewishness, how it evolved, and how it affected his life, his thinking, and his professional determination. He discusses Judaism, noting that it is based on two contrasting but complementary attitudes: the antinomian, by which individuals relate to God directly and formulate their own notions, and the hierarchical, whereby people relate to God through social and communal structures. Blatt depicts the evolution of Judaism from the antinomian position personified by Jacob to the hierarchically structured society initiated by the Midianite priests and furthered by Moses, who is presented as actually embodying both forces. Blatt comments on social structure in which there is conflict between those who come first and have a direct connection with authority, and those who follow and must struggle to obtain power and autonomy. He closes by noting that Freud established a hierarchically oriented society, and while he dispensed with the rituals and dogmatism of religion, he remained true to the essence of Judaism propounded by Jacob in his struggle for individual freedom and responsibility, and that legacy has been passed down to succeeding generations of analysts.

American Imago. XLV, 1988.

Abstracted by Anita G. Schmukler.

The Myth of the Birth of the Hero Revisited: Disasters and Brutal Child Rearing. Stanley Rosenman. Pp. 1-44.

Freud and Rank studied multiple forms of the myth of the hero's birth and viewed oedipal conflict and efforts to overcome early injury as significant contributors to the development of hero-birth myths. Rosenman pursues the theme of injured narcissism in this context and focuses upon the effect of catastrophes on

child-rearing practices and on heroic imagoes of succeeding generations. Parents who attempt to master the overwhelming anxiety of societal catastrophe may identify with the destructive force, thus behaving brutally toward their children. The hero-birth myth presents this conflict, sets forth a potentially regenerative solution, and issues a warning about future transgressions. The form of the myth is shaped by the reverberations of catastrophic experience in its originators. Rosenman emphasizes the significant role in world mythology and primitive ritual of parents' destructive wishes toward their children, a subject neglected in early analytic literature. The abused or sacrificed child is placed in the role of the parents who were defenseless in the face of catastrophic forces. Sacrifices are accompanied by purgation, fantasies of purification. The hero who successfully overcomes parental hatred becomes an internalized object. Freud's contributions are seen, in part, as an effort to help Jewish parents, traumatized for multiple generations, alter behavior so that their children would not be repositories of retaliation.

John Fowles: The Psychological Complexity of *The Magus*. Julius Rowan Raper. Pp. 61-83.

The author examines the character pathology of Nicholas Urfe, a figure in Fowles's novel, *The Magus*, from the perspectives of Freud, Jung, and Kohut. Nicholas is unable to integrate his affectionate and sensual feelings for women, and so avoids tenderness with his sexual objects. The Freudian perspective is dismissed as inadequate to explain fully the material which Urfe portrays. Jung's emphasis upon the centrality of relationships in individual development is employed to understand further the complexity of Nicholas Urfe. Finally, the author turns to the work of Kohut to provide additional understanding of the material. The role of maternal figures in mirroring helps establish a child's self-worth; paternal figures provide a requisite model for the child to idealize.

Beckett's Unnamables: Schizophrenia, Rationalism, and the Novel. Eileen H. Watts. Pp. 85-106.

Beckett's trilogy of novels, *Molloy, Malone Dies*, and *The Unnamable*, are explored from psychological, philosophical, and literary viewpoints, with emphasis upon language and behavior which exemplify a schizophrenic process. The continual use of words as transitional objects, the lack of individuation in early development, and the intense social isolation are all offered as partial explanations for communication among Beckett's fictional figures, which is characteristic of schizophrenics. The Unnamable suggests that when one can ingest a "set of words," but is incapable of the requisite synthesis and integration to make affective (and effective) communication possible, isolation intensifies. From a literary perspective, the lack of reasonable genuine communication among the characters in the novels tends to establish a similar barrier between the characters (ultimately the writer) and the reader.

The "Confessions" of Augustine: Narcissistic Elements. William R. Beers. Pp. 107-125.

The author takes the position that Augustine's childhood and adolescent lying, stealing, and sexual promiscuity reflected injuries to his sense of self and his ideal-

ized image of his parents, particularly his mother. Beers feels that this is better explained by Kohut's concepts of narcissism than by Freud's theories. Augustine was beaten severely when he failed to master Greek at the rate expected by his earliest formal mentors. His parents laughed mockingly at the physical evidence of this, and he found no immediate comfort in God. His antisocial behavior is understood as his warding off vulnerability by engaging in "exhibitionistic grandiosity." Two years after his father's death, nineteen-year-old Augustine joined the Manichaeans, and he achieved a status which would enable him to set free divine substances by eating fruit. Augustine's depressed, narcissistic mother, who viewed her son as an extension of herself, despised Augustine's newly acquired religious detachment. Ambrose, an idealized father imago with whom Augustine became infatuated, led his friend to Christianity. Beers feels there were split-off elements of Augustine's narcissism which never became integrated adequately. The failure to establish a cohesive self may explain some of Augustine's modes of religious expression.

Alice James: "Neither Dead Nor Recovered." Mary Cappello. Pp. 127-162.

Cappello examines various modes of self-definition of women writers, particularly with respect to Alice James, as represented in her letters, the *Diary*, and the biography by Jean Strouse. Hysteria, in its many forms, and somatic illness as well, may represent a compromise between conflictual wishes, but they are clearly a greater factor in concealing than in revealing the attributes of the afflicted. Two questions are raised regarding the contributions of women to twentieth-century English-language literature. Can a woman "do the new things with words that her self-expression calls for without getting ill or being perceived as ill," and can she "make the necessary aesthetic gesture that compels her toward a new position in the community, in language, and stay alive." After all, Cappello points out, it was a woman who enacted and named the "talking cure." While most members of the James family occupied the sickroom with a series of psychosomatic complaints, Alice was the only one who could engage in this "as a profession." Alice's mother, who remained healthy, had an enduring bond with a live-in aunt, Kate. Their relation, which may have protected Mary James from illness, also allowed her to be less available to Alice. The compromise formation which the hysteric demonstrates symbolically in a symptom is expressed by the writer/poet in an enduring communication. It is the relation between these two forms of expression in gifted women whose work has been not listened to, not heard, that is the subject of Cappello's study.

Uncivil Wars: The Reproduction of Mother-Daughter Conflict and Rosellen Brown's *Autobiography of My Mother*. Merla Wolk. Pp. 163-185.

Mother-daughter relations and the intergenerational effects of inadequate mothering are examined in the fictional work of Rosellen Brown. Wolk traces preoedipal imagery in Brown's work, and cites the writing of Chodorow, who studied the centrality of the mother-daughter relation in the establishment of a girl's sense of self. Wolk examines the ambivalence of both mother and daughter over effective competition between the two—for the daughter, victory in this respect may be perceived as potentially self-destructive, and for the mother, this form of success may presage "intimations of her own death." Implicit in this essay is the profound signif-

icance of the unconscious identification of boy and girl with both mother and father. It is the conflict over repressed aspects of the primary figure of identification, especially when this involves separation difficulties and fury over deficits in early mothering, that becomes a profound influence in interpersonal relations. Wolk refers to the wider political and societal implications of this novel, clearly expressed in the article's title, "Uncivil Wars." Creative individuals, of course, find relief from conflict in sublimatory activities; symbolic artistic expression shapes their compromise formations.

Shame in Edith Wharton's *The Mother's Recompense.* Lev Raphael. Pp. 187-203.

The role of unconscious shame, in its "crippling impact on human personality," is explored in the work of Edith Wharton, with particular emphasis on the character of Kate in *The Mother's Recompense*. Raphael suggests that Wharton's writing has been insufficiently appreciated, partly because the profound impact of unconscious shame has been overlooked. The author quotes Kaufman, who points out that shame is first experienced interpersonally, and later becomes internalized and "experienced as a deep abiding sense of being defective, never quite good enough as a person." When this material is repressed, external perceptions are distorted so that they continually confirm the sense of shame. The effects of unconscious shame are examined in a study of Kate, who repeatedly engages in "doomed relationships." Kate experiences pain and isolation in confessing sexual secrets to Fred, whose unanticipated response of surprise and scorn heighten her sense of humiliation and result in her withdrawal from him. Apparently, this has been misunderstood by critics, who struggle to find meaning in Kate's departure. The author observes that the sense of shame may have origins in early triadic situations, in which the young child feels excluded and unworthy. Contempt is among a series of intense feelings used defensively to subdue the emergence into consciousness of a profound, repressed sense of shame.

Who Is Arnold Friend? The Other Self in Joyce Carol Oates's "Where Are You Going. Where Have You Been?" G. J. Weinberger. Pp. 205-215.

The concept of the double, demonstrated in fictional characters by Poe, Conrad, and Crane, and studied from a psychoanalytic perspective by Otto Rank, reappears in Connie, the creation of Joyce Carol Oates. Connie's "double" is Arnold Friend, who represents clusters of unconscious feelings, wishes, and identifications. A. Friend (Arnold) exemplifies the "imaginary friend" sometimes described by young children. This figure, a representation of unconscious wishes, embodies elements of superego and ego ideal as well. When preoedipal and oedipal conflicts re-emerge at puberty, the "friend" may be an idealized peer. The process of idealization and de-idealization is part of the work of adolescence, and the Oates story underscores the essential conflicts with which one wrestles, and the fact that "each person must undergo the rites of passage alone."

The Incest Taboo in *Wuthering Heights***: A Modern Appraisal.** Kathryn B. McGuire. Pp. 217-224.

Cathy was six when seven-year-old Heathcliff came to live with her family, and the two shared a bedroom until puberty, when Heathcliff was banished from the

room by Hindley. The author takes the perspective that the sibling arrangement of Cathy and Heathcliff was fraught with incestuous longings, in addition to a profound mutual identification. An unrelenting conflict over the incest taboo may be responsible for the novel's images of vampirism, necrophilia, and the notion that the two would be united only in death.

Ambivalence towards Women in Chinese Characters, and Its Implications for Feminism. Siegfried Berthelsdorf. Pp. 229-237.

Chinese characters, reflecting the synthesis of millennia of thought processes, demonstrate profound ambivalence toward women. The author examines combinations of Chinese characters and concludes that the "woman" radical is frequently linked with that which is negative, derogatory, greedy, wicked, while simultaneously conveying an impression of that which deserves respect. The etymological evidence for prejudice against women is associated with unresolved oedipal conflict and developmental lapses from the preoedipal phase. The implications are that such linguistic connections are not limited to Chinese characters and that perhaps that which is referred to as "unresolved" or "lapsed" is, in fact, part of the human condition. Thus, awe and fear of an object perceived preoedipally as omnipotent can be transformed, disguised, and sublimated, but continues to exert pressure on both character formation and human interaction.

The Psychotherapy of the Dead: Loss and Character Structure in Freud's Metapsychology. Greg Mogensen. Pp. 251-269.

Freud's notion that character is formed from precipitates of "abandoned object cathexes" is linked to his earlier work, *Beyond the Pleasure Principle*, in which the phylogenetic basis for this concept is set forth. The author views the "abandoned object cathexes" as "unmourned libidinal losses," which form a "dead zone" protecting the ego from being assailed by further insults. Our perceptions are shaped by lost love objects with which we have identified and which we have been unable to mourn. Mogensen suggests that one role of the therapist is to help the patient to identify these repressed love objects which both form character and limit one's vision, thus instigating a mourning process.

Yankev Glatshteyn: Mourning the Yiddish Language. Janet R. Hadda. Pp. 271-286.

Yankev Glatshteyn (1896-1971) was an American Yiddish poet who mourned the loss of his language following the decimation of millions of European Jews, the audience to whom Glatshteyn had directed his artistic communications. The author traces Glatshteyn's attachment to and loss of his language (mother tongue), using the phases of grief described by Bowlby. The final volume of poetry included the first three poems of Glatshteyn's career, which demonstrates to the author Glatshteyn's sadness over having no literary heirs and simultaneously presenting to the world that communication which was central to his existence—an acknowledgment of loss yet a profound wish to convey meaning.

The Grief behind the Spots of Time. Don Johnson. Pp. 287-307.

Wordsworth's poem, *The Prelude*, is viewed as an artistic response to traumatic events of his childhood: his mother died before his eighth birthday and his father died when he was thirteen. The author wonders if Wordsworth's mourning may be identified as "pathological" and cites the work of Bowlby to address the issue of splitting which may occur in response to a child's loss of a parent. Wordsworth's linking of his impatient excitement for horses to be sent (a link with father) anticipated Christmas reunion with father, and the death of his father shortly after the vacation began provides evidence for displacement of focus from "loss" to "anticipation." His self-reproach for vain excitement over horses and guilt over his father's death suggest that primitive unconscious guilt may have motivated some of his poetic expression.

King Lear, King Leir and Incest Wishes. Mark J. Blechner. Pp. 309-325.

The author examines King Lear's banishment of his favorite daughter, an action which generations of critics have attempted to explain. Lear's unconscious passion for Cordelia leads him to ask of her that which she cannot grant. The author suggests that as Lear loved Cordelia the most, he must have known her best. Thus, on some level, he must have anticipated her response. When she is deprived of a dowry, Burgundy emerges as "noble" for refusing to marry her—refusing to come between an aging father and his favorite daughter. The links between Cordelia and the fool are demonstrated clearly, as is Lear's passion for the truth, except as expressed by Cordelia. *The True Chronicle History of King Leir*, one of Shakespeare's sources, sets forth a much more rational plot. Leir rhymes with "there," and the author suggests that Shakespeare intended to convey the meaning of "leer," with respect to the King's incestuous longings. Cordella, in the early play, is changed to Cordelia—Cor de Lear—"the heart of Lear, Lear's Love." All who are familiar with Shakespeare's love of word play will acknowledge these as possible reasons for the seemingly minor alterations. King Lear's character development is traced in a lucid, convincing manner. The author also underscores another significant theme in the play: the struggle between fathers and their children (Lear and his daughters, and Gloucester and his sons), the exploration of which Freud simply dismissed.

Meeting of the Psychoanalytic Association of New York

Alina Rubinstein

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NOTES

May 16, 1988. A PSYCHOANALYTIC PERSPECTIVE ON DEPRESSION. (23rd Freud Anniversary Lecture.) Charles Brenner, M.D.

Dr. Brenner's purpose was to re-examine the understanding of depression in mental illness from the psychological point of view, which he feels has been relatively neglected in the current emphasis on neurobiological approaches. In Dr. Brenner's opinion, the prevalent conceptualization of depressive illness is misguided and thus impedes optimal treatment. Relying on data acquired through the clinical psychoanalytic method, Dr. Brenner has arrived at two conclusions. The first concerns the psychodynamic and psychogenetic role depression plays in mental illness: it is an error to equate depression as an affect with depression as an illness. The second, a corollary of the first, is that mental illnesses exhibiting depression as a prominent feature cannot be assumed to be similar on that basis. Therefore, an adequate nosology of mental illness cannot be based on the presence of depression.

Dr. Brenner reviewed the nature of affects and their role in psychic conflict. Affects can be most parsimoniously described as a combination of two elements, "a sensation or experience of pleasure or unpleasure, and an idea or ideas." Either of these elements may be unconscious, but both must be present by definition in any affect, whether repressed or not. The unpleasurable affects, those responsible for initiating psychic conflict, can be differentiated into two types: anxiety, and what Dr. Brenner termed misery. The only significant distinction between the two is in the tense of the ideational content (unconscious or conscious) as it relates to the four basic calamities defined by Freud. Whereas in anxiety there is anticipation of a future calamity (real or imagined), in misery, the calamity is believed to have already occurred. Dr. Brenner employs the term depressive affect to refer to the basic affect of misery in order to better clarify its relation to so-called depressive illness. Whether clinically significant or not, psychic conflict always ensues when unpleasurable affect is aroused by a person's wish for gratification of a libidinal or aggressive drive derivative. In childhood, such wishes will evoke ideas of any or several of four calamities: object loss, loss of love, castration, and punishment. The child will perceive these either as future dangers (anxiety) or present consequences (misery). Defensive operations arise in order to minimize the anxiety or depression engendered when the child imagines the consequences of gratifying his or her wishes.

Psychic conflict has four essential constituents: drive derivatives; unpleasurable affect; defenses; and, once the oedipal stage has been attained, superego manifestations. In accordance with the pleasure/unpleasure principle, the outcome, or compromise formation, maximizes pleasure and minimizes unpleasure. Dr. Brenner emphasized that patients may or may not consciously experience any anxiety or depression, i.e., the compromise formation may appear to have dispelled it, but both, of necessity, are still "present and active unconsciously" as components of the

underlying conflict. The person's awareness of unpleasurable affects depends only on how effective her or his defenses currently are in minimizing the unpleasure. Dr. Brenner cited the example of phobic avoidance to show that successfully eliminating unpleasurable affect does not necessarily mean that the compromise formation is normal. The point is that unconscious depressive affect is involved in every psychic conflict but, as with anxiety, conscious depressive affect may vary, depending on the balance of elements in the resulting compromise formation.

Prior to Dr. Brenner's own recent work, the main theories regarding depression to which analysts have subscribed are those of Freud, as elaborated in *Mourning and Melancholia*, and of Karl Abraham. Freud drew an analogy between pathological depression and the state of mourning following the actual or fantasied loss of a loved object, an experience of loss that the person may or may not be aware of. Noting the common tendency of mourners to see themselves as resembling the person they have lost, Freud formulated a connection between depression and identification, viewing the latter as a defensive attempt to deny the loss. Since individuals who feel abandoned by someone they value will necessarily have ambivalent feelings toward that person, the identification which occurs reflects that ambivalence. The crucial implication of this is that not only libidinal but also aggressive, murderous impulses toward the abandoning loved and hated person will then be turned against the self. On this basis Freud was able to explain the common attitudes seen in depressed patients, such as loss of self-esteem, self-critical attitudes, and self-destructive wishes and behavior. Freud's analogy, in linking depression to the calamity of object loss, limited it theoretically. Karl Abraham's chief addition to the theory was the connection he made between depression and orality. He posited that any person susceptible to depression in later life had to have suffered a psychological trauma and therefore fixation during the oral phase, i.e., insufficient mothering during the first eighteen months of life.

Dr. Brenner's more recent clinical data has revealed these theories to be inaccurate. For one thing, the connection between inadequate mothering and object loss is by no means invariable. Neither is evidence of psychological trauma during the oral phase, as posited by Abraham, always found in these patients' histories. Nor is the defense of identification always significant in depressed patients. Most crucial is the misunderstanding concerning the role of aggression: rather than causing depression, it results from depressive affect in its role as an essential element in engendering psychic conflict. Dr. Brenner reminded us again that depressive affect can be related to any of the childhood calamities, not only to object loss. While acknowledging the validity of the analogy between depression and mourning, Dr. Brenner criticized the distortion introduced when it is assumed that all instances of overt depression are to be equated with the mourning paradigm or with oral-level trauma and fixation. It has been his experience that these may actually be less common etiologies for symptomatic depression than conflicts from later psychosexual states. The only reasonable conclusion to draw from a correct appreciation of the psychoanalytic facts is that it makes no sense to set up a diagnostic classification for mental illness based on the same conscious symptom. The only thing these patients might be said to have in common is a weaker defensive system relative to other components of the pathological compromise formation. To illustrate his points, Dr. Brenner presented a clinical vignette.

In conclusion, Dr. Brenner strongly urged us always to remain open-minded and curious in exploring, with those depressed patients (and all patients) for whom analysis is indicated, the specific origins and elaborations of each multidetermined conflict and compromise formation: "Depression as a feature of a mental illness is the misery of childhood translated into the present and active in the present as part of adult psychopathology."

<div align="right">ALINA RUBINSTEIN</div>

MEETING OF THE NEW YORK PSYCHOANALYTIC SOCIETY

May 2, 1988. REFLECTIONS ON SOME THOUGHT DISORDERS IN NON-PSYCHOTIC PATIENTS: CERTAIN DISTURBANCES OF THINKING IN INDIVIDUALS AND GROUPS. Mme. Janine Chasseguet-Smirgel.

In this paper, Mme. Chasseguet-Smirgel presented clinical material to support her concept that disturbances of thinking in non-psychotic individuals arise out of the perverse wish to eliminate the differences between the sexes and the generations. There is an "anal universe" in which all differences are abolished. Perverse thinking seeks to abolish all of reality, since reality imposes an awareness of differences and, in consequence, of separation and loss. The attack on reality can take many forms, according to Mme. Chasseguet-Smirgel, such as social movements which aim at the dissolution of the fundamental reality—the difference between the sexes. Developing ideas first elaborated in a 1984 lecture, "The Archaic Matrix of the Oedipus Complex," the author advanced the hypothesis of an archaic primary wish "to discover a universe without obstacles, without roughness or differences, entirely smooth, identified with a mother's belly stripped of its contents, an interior to which one has free access." To support this hypothesis, she presented clinical material from the analyses of several patients. After discussing religion, art, and ideology, she concluded that "thinking comes into being as a result of the encounter between the wish to return to the smooth maternal belly and the obstacles standing in the way of this wish." The attack on the obstacles will then inevitably produce disturbances of thinking.

DISCUSSION: Dr. Stephen Rittenberg had several criticisms of Mme. Chasseguet-Smirgel's thesis. He questioned the importance she gave to the concept that the "pervert" wishes to "abolish reality." The wish to abolish reality is not necessarily pathological, nor its presence necessarily evidence of a thinking disturbance; for example, the wish to abolish the reality of infectious disease inspired the discoverers of antibiotics. An overall evaluation of the entire psyche is necessary for an assessment of pathology. To speak of a global wish to abolish reality as underlying social movements is questionable. Dr. Rittenberg's major criticism had to do with the evidence Mme. Chasseguet-Smirgel presented in support of a "primary" wish to scoop out the belly of the mother in order to return to it, and her assertion that "on the level of thought this primary wish corresponds to the rediscovery of mental func-

tioning without hindrances, with freely flowing psychic energy." The clinical evidence seemed not necessarily to support this speculation, and Dr. Rittenberg offered alternative possibilities. He pointed out that the manifest content of dreams was interpreted by Mme. Chasseguet-Smirgel without associations, in order to support her notion of the presence of the "primary" wish. Dr. Rittenberg questioned whether there were, in fact, "primary" wishes to be searched out and whether that concept had any usefulness. Furthermore, it was his view that we cannot know the mind of the infant and that to attribute such complex, highly structured wishes and fantasies to a newborn strains credulity. He concluded by offering his view that "thinking" cannot be reduced to the simple outcome of a clash between a wish to return to the smooth belly of the mother and the obstacles to its realization. Rather, thinking arises out of a host of developmental pressures, both biological and psychological.

MEETING OF THE PSYCHOANALYTIC INSTITUTE OF NEW ENGLAND, EAST

April 4, 1988. ON PSYCHIC DEPRIVATION. Dr. Joyce McDougall.

Dr. McDougall discussed a chapter from her book, *Theatres of the Body*. The central question in the chapter, "On Psychic Deprivation," is: What is happening when psychosomatic symptoms occur that is different from what happens when neurotic or characterological symptoms occur? She wondered whether the psyche can be deprived of psychic representations. In her previous book, *Theatres of the Mind*, she had suggested that in psychosomatic states it seems as though there is ejection of all the feeling and ideational components of affect, so that only the physiological component is left in the psyche. But since then, her thinking about it has developed further. From her studies of babies and of the regressed child aspects of her adult patients, and their way of communicating primitively by their use of fight/flight patterns and somatic expressions, she now feels that psychosomatic reactions are not due to deprivation of total representations of the affect in the psyche but that the deprivation is of word-presentations, leaving only thing-presentations for the psyche to decode. She also feels that there are few psychoanalytic concepts to deal with these matters. She has observed that many, although not all, polysomatizers dream rarely, and she thinks that their psychosomatic explosions are sometimes dreams that have never been dreamed.

She then presented the clinical vignette of Christopher from the chapter to illustrate this point. A crucial moment in the analysis occurred as Dr. McDougall responded to the patient's associations to a nightmare about roasting and beginning to eat a newborn baby. She said to the patient: "There are two people speaking . . . in you at this moment, the adult who treats himself as psychotic and hateful, a child murderer, a killer-mother, and the infant who tries to communicate his distress through this dream. This is a child terrified that others may come and take his place, and he will then feel damaged for life. He must eat up any others that threaten his existence. Your wife's insistent demand for another baby is perhaps as

threatening as it would have been if your mother had wanted another baby. You become a small frightened child. The adult in you can't tolerate this distressed child and doesn't want to listen to him and may even want to kill his helpless, monstrous baby-self." The patient replied: "The unwanted child! Yes, I don't want him either!" Dr. McDougall stated that this "proved to be an important turning point in Christopher's elaboration of his relationship to the anxious child-self whose messages he had tried to stifle for so many years. . . . When we are able to give expression to primitive feelings and fantasies through our dreams and through freedom to daydream, it is possible that these may often prevent the body from acting in a 'delusional' way, that is to say, reacting with somatic responses that obey no biological need."

DISCUSSION: Dr. Robert Kenerson commented that this case illustrates the usefulness of psychoanalysis for patients with preverbal pathology. Christopher seemed to be seeking a sense of self and was, in Goldberg and Gedo's terminology, at the stage of unification. Psychoanalysis can be used to create a stage for verbalization of affect which must be developed before any interpretation can be more than a mere intellectual game. Dr. Samuel Silverman noted that acting out seems to be an alternative response to somatization in many of these patients. Dr. McDougall agreed, mentioning that addictive patterns of behavior, including substance abuse, compulsive sexual activity, and primitive vampirizing object relations, were other ways to disperse emotions and that sometimes when these patterns diminished, somatization increased.

Dr. Jerome Sashin focused on the question of how to explain the shift from somatization on day one to dreaming and affect on day two. He pointed out that in Goldberg's *Psychology of the Self* there is a similar episode: Mr. I had come to analysis showing considerable impulsivity and somatization, but over the course of treatment, these response patterns had diminished as he developed a capacity to feel and to verbalize his feelings. Late in his analysis, after the analyst's vacation, Mr. I reported that he had had severe somatic symptoms during the prior weekend and that also he had had no dreams or fantasies, which was unusual for him. The elaboration of imagery seemed to be related to the ability to experience his feelings, and consequently the absence of imagery formation seemed to be limiting the affect being felt.

Dr. Frances Bonner stated that she believed that there was more than deprivation of words; that lack of maternal care in Christopher's case had resulted in the impairment of many ego functions, especially self-care functions. She felt that the key moment in Dr. McDougall's sessions with Christopher was her acknowledging that there are unwanted children. Dr. Arthur Valenstein wondered what it is that gives therapeutic effectiveness to supplying words to experiences not verbalized. He also felt that speaking to Christopher convincingly, after a long analytic relationship, about unwanted children had a powerful effect. Dr. Evelyne Schwaber asked Dr. McDougall why she said what she said and why it worked. Dr. McDougall thought that her remark about the unwanted child opened up a lot, but it was hard to know how much it really mattered. More important, she felt, was her remark about killer-mothers. Why it worked she did not know; we often formulate theories about psy-

chic change without ever really knowing what brings it about. Dr. Robert Gardner mentioned that he had learned from neurologists that there was a specific type of stroke which resulted in the inability to identify one's own feelings and to perceive the affect of others; there are now retraining programs for these patients.

JEROME I. SASHIN

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The Fall Meeting of THE AMERICAN PSYCHOANALYTIC ASSOCIATION will be held December 5-9, 1990, at the Fountainbleau Hilton, Miami, Florida.

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The Austen Riggs Center is pleased once again to invite nominations for the position of ERIK H. ERIKSON SCHOLAR at the Austen Riggs Center. This endowed position honors Professor Erikson's contributions to the fields of psychoanalysis, human development, and history, and extends that work through supporting the clinical and research interests of a distinguished scholar-in-residence. Arrangements include salary, housing, office space, secretarial assistance, and daily participation in the ongoing clinical, educational, and research work of the Center. Nominations are currently being accepted for tenure of one year or more, beginning July 1992 and beyond. For further information, contact: M. Gerard Fromm, Ph.D., Chairperson, Erikson Scholar Research Committee, Austen Riggs Center, Stockbridge, MA 01262.