

How and Why Do Patients Become More Objective? Sterba Compared with Strachey

Lawrence Friedman

To cite this article: Lawrence Friedman (1992) How and Why Do Patients Become More Objective? Sterba Compared with Strachey, *The Psychoanalytic Quarterly*, 61:1, 6-17, DOI: [10.1080/21674086.1992.11927332](https://doi.org/10.1080/21674086.1992.11927332)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927332>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

HOW AND WHY DO PATIENTS BECOME MORE OBJECTIVE? STERBA COMPARED WITH STRACHEY

BY LAWRENCE FRIEDMAN, M.D.

What Richard Sterba described in his influential paper was not, as some have thought, a lasting alliance between patient and analyst but a momentary dissociative state, accompanying the analysis of transference resistance, in which the patient detaches himself from his strivings and views himself objectively before lapsing back into normal coherence. We also find in the paper a hinted answer to the vexing question of what motivates patients to engage in characteristically psychoanalytic self-scrutiny. Sterba implicitly proposes a problem-solving incentive activated by transference. A comparison with Strachey leads us to ask whether patients progress only by disinhibition of particular strivings through particular resolutions of particular fears, or whether patients also experience a more general liberation that fosters their own, deliberate search for integration.

Richard Sterba's "The Fate of the Ego in Analytic Therapy" (1934) is the earliest elaboration of the concept of the therapeutic alliance; it is the respected ancestor of all subsequent considerations of the subject.

Unfortunately, a primal paper in psychoanalysis is fated to be dragooned into alliance with successor discussions, its particular slant gradually bending to the developing trend. I have contributed to that bias (Friedman, 1969), and I hope to make amends in this essay.

From the Section on the History of Psychiatry of the Department of Psychiatry, The New York Hospital-Cornell University Medical Center.

To begin with, Sterba was not describing a general collaboration between patient and analyst as we now define the therapeutic alliance. His alliance was a far more specific phenomenon: he was describing something that happens during the interpretation of *transference resistance*. The alliance Sterba had in mind occurs when the patient temporarily stretches himself away from conflicted involvement with the analyst and looks at his transferential behavior objectively. Thus: no transference resistance, no alliance!

Looking at this fact in more detail, it is noteworthy that for Sterba the alliance is at once more ephemeral and more universal than the alliance imagined by later writers. We first note its transience. Like Strachey's mutative interpretation at the "point of urgency," Sterba's alliance, although requiring continuous preparation, is not a working contract but a happening—an immediate dissociation within the patient who experiences himself as simultaneously in (resistant) disguise and as seeing through his disguise. Furthermore, it is a genuine dissociative state, not merely an act of reflection or the flexing of a perspective. Patients recover from this abnormal quasi-alliance and assimilate the double vision to a normal—but now enlarged—coherent awareness, with long-forgotten memories summoned to cement the new coherence. Indeed, the alliance is so transient that it may lead to an *intensification* of libidinal demands on the analyst (p. 125). What tends to endure and grow is an at-homeness with the *sequence* of depersonalization and repersonalization, and an ease in falling back into it:

When analysis begins, the ego is subject to a process of 'dissimilation' or dissociation, which must be induced by the analyst by means of his interpretation of the transference-situation and of the resistance to which this gives rise.

As the analysis proceeds, the state of 'dissimilation' in the ego is set up again whenever the unconscious material, whether in the shape of instinctual gratification or of defensive impulses, fastens on the analyst in the transference. All the instinctual and defensive reactions aroused in the ego in the transference

impel the analyst to induce the therapeutic process of ego-dissociation by means of the interpretations he gives. There is constituted, as it were, a standing relation between that part of the ego which is cathected with instinctual or defensive energy and that part which is focussed on reality and identified with the analyst, and this relation is the filter through which all the transference-material must pass. Each separate interpretation reduces the instinctual and defensive cathexis of the ego in favour of intellectual contemplation, reflection and correction by the standard of reality.

However, once the analyst's interpretations have set up this opposition of forces—the ego which is in harmony with reality versus the ego which acts out its unconscious impulses—the state of 'dissimilation' does not last and a process of '*assimilation*' automatically begins (pp. 122-123).¹

By coining the term, "dissimilation," as an antonym for assimilation Sterba makes it clear that the ego split he has in mind is not a life style fashioned to the couch, but a repeated abnormality that is progressively displaced by normal, integrated functioning.

Yet, compared to the specialized psychoanalytic task that today's authors call therapeutic alliance, Sterba's ego split has unspecialized, universal significance. Sterba saw it as a variant of the normal, characteristically human capacity of reflection, the sort of thing a Piagetian might describe as operating upon one's operations, or a philosopher might refer to as abstracting from one's abstractions, or a man in the street might say amounts to looking hard at oneself.

... the therapeutic dissociation of the ego in analysis is merely an extension, into new fields, of that self-contemplation which from all time has been regarded as the most essential trait of man in distinction to other living beings (p. 125).

In support of the naturalness of this faculty, Sterba invoked the

¹ Unless otherwise specified, all page references are to Sterba (1934).

authority of one of Freud's most beautiful paeans to humanity's capacity for an infinite series of self-reflections (p. 120, n. 2).

As subsequently developed, the concept of the therapeutic alliance has been shadowed by a dismaying problem: the alliance seems to require, quite implausibly, the creation *ex nihilo* of a unique motive for a prolonged, intense human relationship. Or else it seems to postulate an attitude of unmotivated opposition to motives (Friedman, 1969). When we notice that Sterba is referring to a different phenomenon—a *common* variety of thought occurring in an exaggerated fashion at a *particular* moment in treatment—we become hopeful that he may have something more believable to tell us about the *motives* involved in a patient's psychoanalytic work, something missing from later teachings about the therapeutic alliance.

By 1934, psychoanalysis had developed structural concepts that made it easier to say without inconsistency that the transference is both a reaching out to the analyst and a pulling back, that it expresses both desire and prohibition, that it tries to use the treatment to achieve satisfaction and tries to abort it to achieve safety. Explicating what Freud (1914) had folded into his concept of working through, Sterba identified the clinical problem that analysts were up against when they confronted transference and its avoidance:

The function of the transference is twofold. On the one hand, it serves to satisfy the object-hunger of the id. But, on the other, it meets with opposition from the repressive psychic institutions—the super-ego, which rejects it on moral grounds, and the ego, which, because of unhappy experiences, utters a warning against it (p. 118).

Where the transference-situation is intense, there is always the danger that one or other of the conflicting forces may prevail: either the analytic enterprise may be broken up by the blunt transference demands of the patient, or else the repressive institutions in the mind of the latter may totally repudiate both analyst and analysis. Thus we may describe the transference and the resistance which goes with it as the conflict-laden

final result of the struggle between two groups of forces, each of which aims at dominating the workings of the ego, while both alike obstruct the purposes of the analysis (p. 119).

As to how this problem can be solved, analytic theory was making it increasingly clear (it was never really all that obscure) that patients can be changed only by utilizing their native powers of self-rearrangement.

In opposition to this dual influence, the object of which is to inhibit the analysis, we have the corrective influence of the analyst, who in his turn, however, must address himself to the *ego* (p. 119, *italics in original*).

The words, "who in his turn, however, must address himself. . . ," remind analysts that, no matter how well attuned they are to the patient's unconscious desires, it is not their attunement that makes the therapeutic difference, but rather some capacity patients have for shifting the way they experience themselves.

The conceptual task that lay before analysts at that time was to understand what prevented and what facilitated that ability: Where did the analyst fit into the patient's self-shifting machinery? How does the analyst ensure that the patient will experience himself in a heretofore prohibited fashion?

James Strachey (for instance in the pages immediately following Sterba's article [Strachey, 1934]), argued that the patient's prohibitions would have to be modified before the analyst could be seen, let alone followed into a new experience. The analyst would have to modify the superego if he hoped to have his message received. Sterba, on the other hand, pointed out that superegos are not formed every day: the superego is a peculiar developmental achievement of the immature human being. Viewed from Sterba's perspective, it might seem a bit disrespectful of the superego's uniqueness as a structure, its fateful historicity, its rootedness in phase-specific readiness and Proustian memory, to imagine that an analyst can take up superego modeling as a handicraft.

Sterba suggested a more modest role for the analyst. He said that the faculty of mind which had been drawn into superego formation remains always at a person's disposal. It is because we are *generally* capable of reflecting on ourselves as though we were somebody else, that we can create a *particular* superego at one stage of our life. The superego is the "prototype" of self-confrontation; it pairs a person's own spontaneous attitudes with supervisory attitudes derived from identifying with somebody else, and it is a permanent structure within the unified mind. But although such structuralization happens only once, we always retain the capacity to temporarily separate ourselves from our outlook and identify with another person's view of us. When the other person is an analyst, the view taken up lacks the moral coloring characteristic of the superego.

. . . whilst the super-ego demands that the subject shall adopt a particular attitude towards a particular tendency in the id, the demand made upon him when therapeutic dissociation takes place is a demand for a balancing contemplation, kept steadily free of affect, whatever change may take place in the contents of the instinct-cathexes and the defensive reactions (p. 122).

The effect of this new experience may be to fortify the patient against superego restrictions.

In overcoming the transference-defence by the method of therapeutic ego-dissociation we were not merely attacking that part of the ego which was using the patient's unhappy experience with the physician in her childhood to obstruct the analysis; we were, besides, counteracting part of the super-ego's opposition (p. 125).

Analysts have framed various pictures of the fate of the superego in treatment. Some, such as Franz Alexander (1925), have regarded the superego as a primitive irrationality, a sort of universal core neurosis requiring removal or replacement. Although most writers do not take such an extreme view, they vary in the degree to which they expect to make the superego "real-

istic" as against wishing simply to make it less automatically dispositive. In his 1934 paper, Sterba emphasizes the latter aim, and narrows even that aim to the therapeutic moment. He suggests that analytic technique is designed not so much to change standards as to suspend their force long enough to allow the patient to grasp his internal situation; and the outcome of analysis is not a new set of standards but a new disposition achieved by progressive, naturalistic glimpses of oneself. Sterba leaves us free to imagine that after treatment the same old superego functions less unrealistically only because it reacts to a more accurately discriminated psychic field.

Unlike Strachey's thesis, this is intended as a description of what the analyst does with transference resistance. Although it is not unreasonable to regard it as a general theory of therapeutic action, Sterba is more modest:

Now amongst all the experiences undergone by the ego during an analysis there is one which seems to me so *specific* and so *characteristic* of the analytic situation that I feel justified in isolating it and presenting it to you as the 'fate' of the ego in analytic therapy (p. 117, italics added).

I do not mean to exaggerate Sterba's difference from Strachey. For both, a successful interpretation of transference resistance is a kind of epiphany. But for Strachey, it permanently changes the patient's values, while Sterba regards it as a temporary suspension of "oughts"—a brief holiday in which the patient can compose a new mental balance, and glimpse the way analysis can help.

Through the explanations of the transference-situation that he receives the patient realizes for the first time the peculiar character of the therapeutic method used in analysis. Its distinctive characteristic is this: that the subject's consciousness shifts from the centre of affective experience to that of intellectual contemplation. The transference-situation is *interpreted*, i.e., an explanation is given which is uncoloured by affect and which shews that the situation has its roots in the subject's childhood (p. 121).

Mindful that this most characteristic and peculiar analytic experience occurs only in the context of transference resistance and its interpretation, we suddenly realize that Sterba is not describing a general attitude of dispassionate contemplation, but the disruption of a state of conflicted attachment.

Why does the patient allow himself to be thus disrupted? For Strachey, that is the basic question, and his answer is that the disruption is *forced* on the patient by the immediacy of the analyst's helpful response. No special motive is required of the patient other than the simple functioning of his sense organs.

Sterba's answer is more complex. At first he seems to be counting on the power of transferentially reinforced suggestion. For instance, he supposes that the patient comes to identify with the analyst because the analyst has been deliberately cultivating a collaborative transference.

The use of the word 'we' always means that the analyst is trying to draw that part of the ego over to his side. . . (p. 121).

But we must not lose sight of the fact that a general spirit of cooperation is not the alliance Sterba had in mind. Sterba's alliance, we recall, is a momentary, dispassionate identification with the analyst at a time of transference resistance.

As mentioned, Sterba's alliance comes about because the patient allows himself to be disrupted in an intense conflict. The positive transference—the cooperative spirit—precedes that and simply makes it *possible* for the patient to identify with the analyst when the disruption occurs.

If it were just a matter of cooperative spirit, perhaps that could be taught. But in referring to a dissociation, Sterba is not describing an ordinary learning experience (as Strachey was). Sterba's ego split is a flickering experience that quickly alternates, for instance, with starkly contrasting manifestations of attachment. And positive transference leads in many directions: it cannot alone account for the split in the ego. So, the crucial question is this: If the disruptive self-scrutiny is only facilitated, and not *driven*, by the positive transference, and if that new

perspective is truly affect-less, *why*, at those moments, does the patient let himself be disrupted at all? Why does the patient shift his style of experiencing from intense involvement to partial indifference?

I do not think that Sterba answers this question clearly. He is inclined to invoke the motiveless formulas of “strengthening the ego” (p. 121) and “identification.” Yet there is evidence in his paper that Sterba sensed a real and lively goal that inspires patients to *use* their positive feeling for—and identification with—the analyst, *to effect* a dissociation.

One very small clue is Sterba’s reference to the encounter of the patient’s passion with the analyst’s objectivity, which faintly suggests that Sterba may have been impressed by the same considerations that moved Strachey:

The transference-situation is *interpreted*, i.e., an explanation is given which is uncoloured by affect and which shews that the situation has its roots in the subject’s childhood (p. 121, italics in original).

Now, Sterba may only mean that the patient is impressed by an objective account of his state of mind. But since *anything* the analyst says is always and everywhere bound to be free of the *patient’s* affect, there is at least a possibility that in writing about these strange moments, Sterba has in mind the powerful effect analysts have on patients’ stereotyped perceptions when they react in a dispassionate way to passionate incursions.²

But even if Sterba shared Strachey’s interest in the shock created by meeting the patient’s passion with calmness, it seems to

² Sterba (1929, p. 376) had made this more explicit in a paper that was preliminary to the one we are examining. But while noting his emphasis in that paper on the analyst’s soothing efforts, we should not fail to also note his unusual reference to the *disappointment* a patient feels in the analyst’s detachment. Of course, that feature of analytic treatment was always well known, having given rise to Freud’s original discovery of transference. But it is surprisingly overshadowed in the literature by images of the analyst’s benignity and reassurance. I find it remarkable that the father of the Therapeutic Alliance was more sensitive than most to the sadness of the progressive features of treatment; the original Therapeutic Alliance was not a jolly comradeship.

me that there is a significant difference between Strachey's and Sterba's description of what happens as a *result* of the analyst's neutral response. Although the intensity of the transference moment is crucial to both Sterba and Strachey, it is important to them for different reasons.

Strachey observed that patients ordinarily assimilate their analyst to a prefigured role in their life drama. Whenever the analyst imparts information, it is regarded as an interpersonal attitude or a social action rather than information about reality. With his every movement the analyst comes across as positioning himself in the patient's real life. And if he comments on that fact, that comment is construed in the same way. Only the intensity of a personal confrontation can distract a patient from "hallucinating" a fantasy analyst and allow the real analyst to be seen. Strachey's point, as I would phrase it, is that it takes a social action to change a social perception, and it is only when the analyst's "just informing" is also an action (specifically a reaction of tolerance) that it will inform as intended. Moving toward the patient's thrust, the analyst acknowledges that he is being wrestled with (i.e., indicates that he has felt the patient's impact), and the patient learns the lesson in his own language.

As I understand Strachey's argument, the transference-intense moment is crucial just because at that point the analyst is taking an action in the social field and not trying in vain to speak without acting. I have in mind Irwin Hoffman's (1983) principle, which I would paraphrase this way: We know, roughly, how another person feels when, for example, we attack him. Since we know the internal experience that we have made the victim deal with and then see his overt response, we can interpolate a truth about his attitude to us beyond his deliberate communication. It would follow from this principle that, no matter what the analyst's professional demeanor, when he explicitly faces into the patient's gesture, he reveals a variety of real (i.e., social) responses to the patient. At the very least his inner reaction is revealed as self-restraint, and even that meager response is arresting because the restraint is real and not imag-

inary. (It may, indeed, be patronizing.) The same cannot be said, for instance, about the analyst's response to a story that the patient tells because the patient has fewer primordial clues to a hearer's reaction. Strachey believes that at the point of direct, personal impact there is something that cannot be misconstrued. A logical gloss on Strachey's principle would be that, when the analyst welcomes stressful approaches, even though he may be generally unrevealing, he rules out several *misconstruals* of his attitude—namely, those misconstruals that would predict his avoidance or retaliation. By eliminating those few misconstruals the analyst has objectively cleared the way for at least some permissive perspectives.

Now, turning to Sterba, we observe that, although generally speaking he is more confident than Strachey that he can make the patient see him as benevolent, it is not an issue that especially interests him in interpreting transference resistance. He does not seek to demonstrate his real permissiveness. The perspective he recommends is neutral. No doubt he would have agreed with Strachey that he is caught up in the patient's fantasy as a real player in the drama of life. However, Sterba escapes this psychic trap not by *adding* a little normal reality, but by *subtracting* a little subjective reality. He does not modify the patient's ordinary perception but encourages a totally different sort of self-experience. According to Sterba, what the patient needs in order to entertain a new perspective is not safety from a *specific* threat (emanating from a feared analyst); what he needs is to be momentarily freed from *identification with (all) his fears*. That is done by interpreting transference resistance.

What is there about interpretation of transference resistance that makes that possible? Part of the answer seems to be that the moment of transference resistance (if one can call it a moment) is at once more confused and more easily sorted out than other moments.

Through this interpretation there emerges in the mind of the patient, out of the chaos of behaviour impelled by instinct and

behaviour designed to inhibit instinct, a *new point of view of intellectual contemplation* (p. 121, italics in original).

Perhaps it is the exemplary quality of the problem that not only recommends it to Sterba, but makes it attractive to the patient: transference resistance is an acute but workable problem. It is also exemplary in being synoptic, since "the personality of the analysand passes first of all under the domination of the *transference*" (p. 118). We may suspect that immediacy, difficulty, solubility, and illustrativeness are the features of the situation that make it exemplary for Sterba, and that these same features attract the patient's interest. We might say that the analyst, exploiting a situation of this sort, *suggests* and *models* for the patient a way of pushing his own natural faculty of self-observation to a near-pathological extreme at a time when the need is maximal, the challenge greatest, the solution clearest.

According to this reading, the *co-presence* of passionate and dispassionate visions is more important to Sterba than to Strachey. For Strachey, passionateness ("urgency") is only incidentally important: it is useful only because it forces attention away from the fantasy analyst and onto the real analyst. But for Sterba, passionateness is important for two other reasons that have nothing to do with the real analyst: (1) transference passion is a painful but masterable challenge, and as such, it illustrates the usefulness of dissociated dispassionateness in analysis; (2) the passion contains the material that the patient needs to learn about.

Strachey's problem was, "How can I point out something to the patient when all he will look at is my finger? I guess I'll have to find a way of gesturing toward my finger." Sterba's problem was, "How can I get the patient to point to himself objectively? Let me give him an example at a time when he needs desperately to master a difficult problem." In contrast to Strachey, it is a way of looking at oneself—rather than an awareness of some features or an experience of an impulse—that Sterba is trying to induce.

The theme that Sterba inscribed in psychoanalytic theory remains with us, along with the questions and debates that attend it. Psychoanalysis asks that patients dissociate themselves from earlier figures toward whom they direct their conscious and unconscious reactions. The interesting question is: To what extent can the patient deliberately intend a useful dissociation? Sterba suggests that, given the proper encouragement, human beings have the capacity to observe themselves consciously and preconsciously in progressively less restrictive ways. In short, Sterba does not regard it as absurd for an analyst to *ask* a patient to take some distance from both himself and the analyst—to look down from the ceiling, so to speak—whereas Strachey implicitly argues that this is not a reasonable request even with suggestive encouragement. According to Strachey, the patient will always see the analyst in the way his history inclines him. The analyst's job is to introduce some new history and thereby incline him differently, by providing an experience so "hot" that it makes the analyst's true attitude inescapably clear. Thus, for Strachey, the style of the patient's experience is not changed, only its content. For Sterba, on the other hand, the exact opposite is true at the moment of dissociation.³

On the issue of motives, Strachey does not need to invoke anything but passion, which will follow the paths newly opened by the analyst. Sterba, on the other hand, was the first in a line of theorists who suggested that analysis sets the patient a problem (chiefly through transference), the efforts to solve which lead to health.

Had he been asked to elaborate on this point, perhaps Sterba would have said that the analyst shows his patient how he can immediately begin to resolve a painful conflict. Furthermore, we have reason to suppose that Sterba would have said that unclar-

³ Again, I am exaggerating the difference between these two theories: very likely what Strachey has in mind when he imagines the patient internalizing features of the analyst's superego is the same thing that Sterba visualizes as the patient's identifying with the analyst's observing ego. And it prescribes the same action for both analysts.

ity is a kind of pain, and the promise of clarity is by itself an incentive for trying out the recommended experience (see also Myerson, 1981).

Perhaps the most tantalizing question raised by Sterba's rationale is whether there can be such a thing as an affect-less view of oneself—or of anybody else, for that matter. Should we, instead, agree with Strachey when he implies that, for better or worse, a superego of some sort will always influence one's view? It is not a question of whether a non-attitudinal description can be made. We can easily formulate an impersonal account of a person; we do it all the time when we write a case history. But that is not the same thing as taking a non-attitudinal view of an acquaintance (including ourselves). Is there, perhaps, something in the *experience* of personhood that places it outside the realm of objectivity? Or are some dissociative states truly impersonal?

And does it matter? By itself it probably makes little difference whether we adopt Sterba's rationale or Strachey's, whether we fancy that the patient's new access to himself is obtained with the superego's blessing or without it, i.e., with a more tolerant superego or with a more "realistic" use of the superego, since both Strachey and Sterba have their eye on the new synthesis that the ego makes in each case. But Sterba's rationale evolved into a major tradition of technique, different in important respects from Strachey's. And the difference does not hinge on the belief that it is possible to see oneself objectively, popular as that belief may be within the tradition. Even if human beings can see themselves only in terms of attitudes, of morally tinged perspectives and dramatizations, etc., it can still be argued that a particular new, therapeutic way of seeing oneself has as its principal *significance* that it *generally* loosens restrictions of fear, and is not merely one additional, useful, perspective. A certain type of psychoanalytic self-scrutiny might be said to function *mostly* as a freeing example—a demonstration that safety can be enjoyed even while perspectives shift.

Many treatment attitudes will be determined by how we

answer this question: Is a therapeutically split ego important because it leads one to a more promising view of oneself, or because it shows that one can shift perspectives indefinitely without desperate loss? When the patient accepts a transference interpretation, is he shifting to a more satisfactory perception (Strachey), or is he gravitating to a more abstract confidence (Sterba)?

Depending on how the analyst answers this question, he will see his role differently and will count on different motivations in his patient. If, like Strachey, he thinks of himself as clearing the way for a repressed id expression, an analyst will trust the id-impulse to move the patient forward. If, on the other hand, the analyst follows Sterba and presents himself as a foil for the patient's use in untangling internal knots (perhaps to retangle himself more adequately afterward), that analyst will be making a peculiar demand on the patient's problem-solving motives. Although Sterba did not suggest that this builds a life-long skill, others in the tradition have explored that possibility. In particular, Gray (1973) hopes for a lasting self-ownership, so to speak, in which the patient has the option of using the mind's creative resources for their own sake, rather than for their social consequences.

Can we combine passionate and mastery incentives into one theory? We might suppose that each movement in treatment is evoked by the new prospect of a libidinal satisfaction but that the progressive assimilation of those movements yields a sense of power which then becomes attractive in its own right. In that sense, we could say that the libidinal struggles serve as tools. (I understand Myerson [1965] to be describing the patient's fantasy repertoire as a problem-solving tool kit; see also French [1958] who maintained that patients enlarge their "integrative fields" by successively revising their fantasy solutions to the problems encountered when new hopes are stirred by the analytic situation.) I think this has been the common trend of the Freudian tradition.

We must be careful with this image precisely because it is so congenial. Freudian theory has had good reason to keep "mas-

tery” motives at arm’s length. The power of Freudian theory comes from its relentless hunt for particular, earthy motives and its refusal to be soothed by bland generalities. The theory grants the mind its constant integrative tendency, but it views integration as reactive to more particular demands. In the light of recent infant observation, some authors (e.g., Lichtenberg, 1989) have postulated original impulses corresponding to what used to be called “effectance motives.” But Freudian theory tends to define those motives according to what at any time they are trying to effect so that practitioners can avoid being fooled into endorsing a particular, conflictual compromise. Analysts have usually felt that it is tactically wisest to let hypothetical, general growth “motives” take care of themselves. The irony is that when analysts are allowed absolutely no picture of an endorsable motive—no non-conflictual activity of the patient that tends toward independence—they deprive themselves of a standard baseline of neutrality from which to measure their unwitting collusions.

Sterba offers us a standard. It is his stark picture of a dissociative state, by contrast with which other analytic events, including his own rhetorically encouraged alliance, can be seen to be the product of suggestion and manipulation. And in recent years, Gray (1973, 1991) has used a related picture of reflective independence as a treatment goal, by comparison with which many perfectly ordinary analyst behaviors, such as routinely interpreting dream contents or speaking in a kindly voice, may be judged to be unthinking endorsements of conservative motives of the patient.

In general terms, psychoanalysts labor to disrupt an equilibrium. (That is just rephrasing the goal of change.) In doing this, they have little choice but to see themselves as either impressing something on the patient, or withdrawing something from him, or both. Strachey explored the possibility of imposition, forcibly pulling the patient close enough to impose a new perspective on him. Sterba is sometimes read as recommending a similar approach, and surely there is truth in that. But perhaps Sterba

should be principally credited with exploring the other aspects of disruption, i.e., how to undermine *all* the patient's convictions and help him *estrangle* himself from the person of the analyst.

These are not just alternative abstract formulas describing one, complex therapeutic event. They refer to two different practical forces in treatment: the analyst's wish to impress the patient with his vision, and his contradictory hope that the patient will not care how the analyst sees him. There is a faint irony in the fact that the paradigm of patient alienation (in both the ordinary and psychiatric sense of alienation) should be the ancestor of the concept of therapeutic alliance.

REFERENCES

- ALEXANDER, F. (1925). A metapsychological description of the process of cure. *Int. J. Psychoanal.*, 6:13-34.
- FRENCH, T. M. (1958). *The Integration of Behavior, Vol. 3. The Reintegrative Process in a Psychoanalytic Treatment*. Chicago: Univ. of Chicago Press.
- FREUD, S. (1914). Remembering, repeating and working-through. (Further recommendations on the technique of psycho-analysis II.) *S.E.*, 12.
- FRIEDMAN, L. (1969). The therapeutic alliance. *Int. J. Psychoanal.*, 50:139-153.
- GRAY, P. (1973). Psychoanalytic technique and the ego's capacity for viewing intrapsychic activity. *J. Amer. Psychoanal. Assn.*, 21:474-494.
- (1991). On transferred permissive or approving superego functions: the analysis of the ego's superego activities, part II. *Psychoanal. Q.*, 60:1-21.
- HOFFMAN, I. Z. (1983). The patient as interpreter of the analyst's experience. *Contemp. Psychoanal.*, 19:389-422.
- LICHTENBERG, J. D. (1989). *Psychoanalysis and Motivation*. Hillsdale, NJ: Analytic Press.
- MYERSON, P. G. (1965). Modes of insight. *J. Amer. Psychoanal. Assn.*, 13:771-792.
- (1981). The nature of the transactions that occur in other than classical analysis. *Int. Rev. Psychoanal.*, 8:173-189.
- STERBA, R. (1929). The dynamics of the dissolution of the transference resistance. *Psychoanal. Q.*, 1940, 9:363-379.
- (1934). The fate of the ego in analytic therapy. *Int. J. Psychoanal.*, 15:117-126.
- STRACHEY, J. (1934). The nature of the therapeutic action of psycho-analysis. *Int. J. Psychoanal.*, 15:127-159.

129 B East 71 Street
New York, NY 10021

Theoretical Inference and the New Psychoanalytic Theories of Infancy

G. E. Zuriff

To cite this article: G. E. Zuriff (1992) Theoretical Inference and the New Psychoanalytic Theories of Infancy, The Psychoanalytic Quarterly, 61:1, 18-36, DOI: [10.1080/21674086.1992.11927333](https://doi.org/10.1080/21674086.1992.11927333)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927333>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



Citing articles: 3 View citing articles [↗](#)

THEORETICAL INFERENCE AND THE NEW PSYCHOANALYTIC THEORIES OF INFANCY

BY G. E. ZURIFF

Psychoanalytic developmental theory has been profoundly influenced by recent observational research on infants. Although it is commonly held that these new data refute earlier theories of infancy, an examination of the evidence indicates otherwise. Much of the disagreement between the two is based on differences over the definition of such concepts as "self" and "self/other differentiation" and over strategies of theoretical inference. Inferences about the subjective experience of infants are best viewed as theoretical postulates rather than empirical statements or metaphors.

One of the most profound influences on contemporary psychoanalytic theory originates outside psychoanalysis and, indeed, outside clinical practice altogether. I refer to the impact of experimental studies of infants on psychoanalytic theories of development, pathology, and treatment (Cooper, 1989). So significant has been the effect that the American Psychoanalytic Association has devoted a recent monograph to it (Dowling and Rothstein, 1989).

Beginning with Freud's reconstruction of infancy through his analysis of adults, the psychoanalytic study of early childhood has undergone many changes (Brody, 1982; Silverman, 1989; Tyson, 1989). Following Freud, Melanie Klein and Anna Freud developed the psychoanalysis of children, thereby enriching the psychoanalytic understanding of this period. In contrast, Margaret Mahler and her followers constructed theories based on their observations of children in naturalistic settings. Today, many theorists are gaining insights into the intrapsychic world

of early childhood from observational experiments on infants conducted by academic researchers working independently of psychoanalytic theory or clinical concerns.

This trend in psychoanalytic theory is noteworthy not only because of the new theories engendered but also because of what it reveals about the nature of psychoanalytic theorizing. For many years, a frequent and consistent criticism of psychoanalytic theory is that it is not testable (Nagel, 1959; Popper, 1962). That is, no matter what the evidence, psychoanalytic theories can always be maintained because they are too vague, incomplete, and indeterminate to be falsified. Yet, in the area of contemporary psychoanalytic theory of infancy, we seem to have a counterexample to this criticism. Supporters of the new theories claim that the experimental evidence refutes older psychoanalytic notions of infancy, such as normal autism and symbiosis, and establishes a different model, that of the "competent infant."

The purpose of the present discussion is threefold. First, I shall review the shift in the psychoanalytic view of infancy. Second, I shall examine the evidence alleged to falsify earlier theories to see if it truly demonstrates the testability and falsification of a psychoanalytic theory. Third, I shall discuss the more general issue of the inference of intrapsychic phenomena from the observation of infants. To make these aims manageable, I shall limit myself to one work, perhaps the most influential and detailed among the new theories, *The Interpersonal World of the Infant* by Daniel Stern (1985). Although this book is only one item in a rapidly growing list, the general conclusions I shall draw are, by and large, applicable to most of this literature.

SYMBIOSIS VERSUS SENSE OF CORE SELF

To understand the revolutionary nature of the new psychoanalytic theories of infancy (NPTI) as represented by Stern's work, a brief review of earlier theory is in order. Freud (1914) con-

ceptualized the neonate as enveloped in its own "primary narcissism," protected by a "stimulus barrier" (Freud, 1920) from environmental stimuli that threaten to overwhelm it. Emerging from this conception is an infant who is passive, without clear self boundaries, and reactive more to its own fantasies and perceptual distortions than to the real world. Elaborating on Freud's notions, Mahler and her followers (Mahler, Pine, and Bergman, 1975) formalized two important concepts. The first, "normal autism," is described as follows:¹

In the normal autistic phase there is a relative absence of cathexis of external . . . stimuli. This is the period when the stimulus barrier, . . . the infant's inborn unresponsiveness to outside stimuli is clearest . . . (p. 41).

[W]e have applied to the first weeks of life the term *normal autism*; for in this stage the infant seems to be in a state of primitive hallucinatory disorientation in which need satisfaction seems to belong to his own "unconditional," omnipotent, *autistic* orbit (p. 42, italics in the original).

The second, normal symbiosis, refers to a stage following normal autism:

From the second month on, dim awareness of the need-satisfying object marks the beginning of the phase of normal symbiosis, in which the infant behaves and functions as though he and his mother were an omnipotent system—a dual unity with one common boundary (p. 44).

The essential feature of symbiosis is hallucinatory or delusional somatopsychic omnipotent fusion with the representation of the mother and, in particular, the delusion of a common boundary between two physically separate individuals (p. 45).

In contrast to the delusional, disoriented infant of Mahler's nor-

¹ Mahler more recently reconsidered her use of the term "autism" to describe this phase (Stern, 1985, pp. 234, ff.; Bergman and Ellman, 1985; and see Pine [1981]). Accordingly, the discussion will focus more on the concept of symbiosis.

mal autistic phase, the neonate of NPTI is an active seeker of stimulation, relatively well adapted to reality, with rather well developed perceptual capacities and preferences.

If by autism we mean a primary lack of interest in and registration of external stimuli, in particular of human stimuli, then the recent data indicate that the infant is never "autistic." Infants are deeply engaged in and related to social stimuli. . . . The infant never was autistic and cannot become less so (Stern, 1985, p. 234; see also Brody, 1982; Lichtenberg, 1983; Dowling, 1989).

Moreover, during the period when according to Mahler the infant is experiencing normal symbiosis, the NPTI neonate is depicted as already having an integrated sense of a core self and of others.² As Stern (1985) concludes in his review of the new research:

These findings support the view that the infant's first order of business, in creating an interpersonal world, is to form the sense of a core self and core others. The evidence also supports the notion that this task is largely accomplished during the period between two and seven months. . . . The newly suggested timetable pushes the emergence of the self earlier in time dramatically and reverses the sequencing of developmental tasks (p. 70; also see pp. 101, 105).

If Stern is correct in his assessment of the research data, then not only are his assertions revolutionary in themselves, but they also represent an instance in which a significant psychoanalytic theory, long and widely held, has been falsified and replaced by a more adequate one. As a counterexample to the common complaint that psychoanalytic theory is not testable, this instance is worth examining. What, then, is the evidence for Stern's claims that the two-month-old is developing a "sense of core self"?

² To be sure, not all supporters of NPTI agree (Lichtenberg, 1983).

THE EVIDENCE

Stern's sense of core self consists of four self-experiences taken together—self-agency, self-coherence, self-history, and self-affectivity—and is thus an experiential sense of events (p. 71). Each of these self-experiences is self-invariant, i.e., the self is experienced as that which does not change in the face of all else that does. In general, Stern's reasoning, and that of NPTI, can be analyzed into four steps. First it is shown that there are stimulus invariants that characterize the self, or other, or differences between the two. For example, actions of the self are accompanied by proprioceptive feedback to the infant while the actions of the mother are not. Because this feature holds across all the actions of the infant and mother, it is considered an invariant. Second, Stern points to evidence indicating that an infant typically can be expected to be exposed to these stimulus invariants. Third, Stern reviews experimental findings showing that the infant can respond differentially to these invariants. In the fourth and final step, he concludes on the basis of this evidence that the infant can differentiate self from other and has a sense of core self.

Let us examine a representative example of this reasoning in more detail (Stern, 1985, pp. 80, ff.). As Stern notes, one invariant that can potentially specify agency is the consequence of action. For all actions of the self upon the self there is an experienced consequence. When the infant closes its eyes, visual sensations change abruptly, for example. In contrast, actions of the self upon the other do not invariably result in a consequence for the infant. Thus, the difference in schedule of consequences, constant versus intermittent, is a stimulus invariant available to distinguish self from other. In the second step, Stern cites evidence demonstrating that when a three-month-old vocalizes, although there is a 100% likelihood of its feeling its chest resonate, there is only a probabilistic chance of its hearing its mother vocalize back. In the third step, Stern refers to Watson's (1979, 1980) experiments as showing the infant's ability to tell one

schedule of consequences from another. From this and similar evidence as well as observational findings on the infant's integrative and memory capacities, Stern concludes, in the fourth step, that the infant differentiates self from other and has a sense of core self.

The first two steps in this reasoning, formal analyses of the infant's environment, involve no psychological hypotheses. In contrast, the third step says something psychological about the infant in that it describes the infant's ability to discriminate. In the experiments cited by Stern, fourteen-week-old infants were placed in an experimental situation in which leg movements resulted in a reinforcing consequence (the movement of a mobile plus a bell tone, or a pattern of changing lights and sounds) under different schedules (Watson, 1979).³ The results showed that the rate of the infants' leg movements depended on the schedule of reinforcement. Stern cites this as evidence that infants can tell one schedule from another, thereby supporting the hypothesis of self/other differentiation. However, the fact that the infants' behavior was different under different schedules says nothing about the infants' ability to tell the difference between schedules. Consider a column of mercury. Its height depends on temperature as well as air pressure. The fact that its height changes with the temperature does not imply that the column "can tell the difference" between 40 degrees and 80 degrees. Similarly, the leap from the functional relationship between leg movements and schedule to discriminatory capacity is unwarranted. *A fortiori*, any conclusions about self/other differentiations or sense of core self are similarly invalid.

To be sure, Watson's method is not the only one used by NPTI. In another method, infants are first habituated (as measured by, e.g., sucking or heart rate) to a set of stimuli, and then a test stimulus is introduced. If the infant shows a dishabituated response, it is concluded that the infant finds the test stimulus

³ Although Stern's description of this experiment is slightly different from what is reported in Watson (1979), I assume he refers to this experiment.

“novel” and distinguishes it from the previous stimuli. In another method, the infant’s preference (as measured by, e.g., visual gaze) for one of two or more stimuli is taken as evidence that the infant discriminates among them. In a third method, infants are reinforced for a response to one stimulus and tested with other stimuli. If the response rate to the reinforced stimulus differs from that to the other stimuli, the infant is said to distinguish between the two.

A later experiment by Watson (Watson, 1985; Bahrick and Watson, 1985) offers better support for Stern’s conclusion than the one Stern cites and is a good illustration of the preference method. Five-month-old infants were presented with two video displays, one a live video display of their own leg motions, the other, a video tape of their own leg motions at an earlier time. Thus, the former visual stimulus was contingent on the infant’s leg movements while the latter was not. In three experiments, the infants showed preferential fixation for the non-contingent display. This is a demonstration of the infant’s capacity to discriminate the contingency of visual stimulation on movement.

FROM BEHAVIOR TO SELF

In the fourth step of NPTI reasoning, results such as these are taken as evidence that infants between two and seven months have achieved self/other differentiation and a sense of core self. However, this leap from the infant’s detection of stimulus invariants to the infant’s intrapsychic world raises some important questions about NPTI in general and Stern in particular (Dowling, 1989). Many phenomena throughout psychology illustrate that conclusions about subjective experience cannot be drawn from discriminatory responses in any straightforward manner. Space perception provides an excellent example. It has been well demonstrated experimentally that our perception of a three-dimensional world in vision and audition depends on subtle cues of stimulus disparity. A critical cue for our perception of

the three-dimensional location of a sound is the disparity in time of arrival and phase between stimulations at the two ears. Similarly, our visual perception of depth depends largely on the disparity between the images projected on the two eyes. In both cases, it can be proven that when these disparities are the only cues available, they are sufficient for the auditory and visual perception of three dimensions.

Given that human adults can respond differentially to invariants in the stimulus disparities between the two ears and between the two eyes, what conclusions can be drawn concerning subjective experience? If we draw the seemingly intuitive inference that the subjects in these experiments experience the disparity invariants, we would be mistaken. In fact, as we well know, humans are not normally aware of these stimulus disparities. Indeed, effective perception requires that we *not* be aware of double images in our visual fields and of double sounds in our hearing. Instead, our experience is of depth and location, not of stimulus disparities. Note that we arrive at these conclusions about subjective experience through introspection and the verbal reports of subjects. To know what is experienced requires a set of highly developed concepts including depth, location, and disparity.

Returning now to NPTI, we see that similar considerations apply. That an infant responds discriminatively to stimulus features that may specify self, other, or the difference between self and other does not, in itself, imply that the infant experiences self, other, or the difference between them.⁴ To see this more clearly, consider an infant who responds differentially (e.g., by sucking, reaching, or preferential gazing) to invariants in retinal

⁴ As Bahrick and Watson (1985) note, one interpretation of their results is that the infants may have detected the invariant without detecting its "affordance," i.e., they did not perceive the information to specify the self. Stern (1985, p. 99) also requires that the infant make a "quantum leap" from self-invariants and integrating processes to create a sense of core self. Gedo (1986) and Blum (1989) are two of the many who warn about the dangers of inferring intrapsychic processes from infant behavior.

disparity. Is the infant experiencing depth or double images or something else? We cannot tell, because the infant's reactions to each are coextensive. More important, it is not clear that this question even has an answer. In the absence of the relevant concepts in the infant's cognitive world, the question makes no sense. Lacking introspection, verbal report, and the appropriate conceptual categories, the infant cannot be said to experience either depth or double images. Similarly, the fact that an infant shows a preference for stimuli that are noncontingently related to its leg movements does not allow us to say anything with certainty about the infant's experience of contingency, self, or other. Again, introspection, verbal report, and conceptual schema are missing.

In fact, we can have only the vaguest notion of the experience of the infant (see Blum, 1989; Dowling, 1989). At best, we illegitimately project our own experience, with its conceptual schema, onto the infant, and this may give us a picture meaning of terms that refer to the infant's experience. A literal meaning must forever elude us. Language is not the only deficit. More important, the infant does not interact with others and with the environment in ways that admit it to the interpersonal world of shared meanings. As Wittgenstein (1953, p. 223) observes, even if a lion could speak, we would not understand it.

In light of these considerations, the comments of Mahler, Pine, and Bergman (1975) on the normal symbiotic phase take on greater significance:

We know that the infant can already respond differentially to stimuli from inside and outside. (A light, for example, will be experienced differently from a pang of hunger.) But, unless we postulate inborn ideas, it seems most reasonable to assume that the child has no concept, no schema, of self and other to which to attribute and assimilate these differing stimuli. We postulate that experience of inside and outside is as yet vague; the most highly cathected object, the mother, is still a "part object" (p. 49; also see Pine, 1981).

In this short but important passage, Mahler and her co-workers

admit the infant's capacity to respond differentially, but they contend that this capacity does not establish that the infant has achieved self/other differentiation or a sense of self in the absence of the requisite schema. In effect, they are arguing that the next decade and a half of the research upon which NPTI is based is irrelevant to NPTI's conclusions.

Thus, both NPTI and earlier views agree that the infant possesses behavioral capacities to discriminate self from other, but they disagree on the implications of these capacities. For the more traditional views, the possession of self and self/other differentiation necessarily involves concepts, schema, and categories of self and other, or, in other terms, internal self-representations. Thus, adults suffering from psychopathologies in which the clinical picture indicates that self/other differentiation has been lost may still be capable of many of the same behavioral discriminations that NPTI points to as evidence of self/other differentiation in infants. Similarly, through the techniques of operant conditioning, lower organisms such as rats and pigeons are also capable of many of the same discriminations; yet, selfhood is not attributed to them (cf., Stern, 1985, p. 71, n.). Therefore, in traditional approaches, the infant's behavioral discriminations do not imply selfhood or self/other differentiation.

In contrast, for Stern and many other supporters of NPTI, the behavioral discriminations are sufficient for inferring selfhood and differentiation in the infant. This claim can be understood in three possible ways. First, NPTI might be suggesting that selfhood is nothing more than the capacities for discrimination—to respond discriminatively to self versus other is equivalent to possessing a self. However, this reading of Stern denies the intrapsychic reality of selfhood and is tantamount to a behaviorist definition of mental life, totally incongruent with the thrust of NPTI. A second interpretation is the claim that the infant *does* in fact possess the representations necessary for selfhood. However, a close reading of Stern (1985) is not consistent with this understanding:

[T]he idea of a sense of self is usually reserved for some overarching schema, concept, or perspective about the self. And clearly, during this early period infants are not capable of such an overview. They have separate, unrelated experiences that have yet to be integrated into one embracing perspective (p. 45).

This leaves a third interpretation: The intrapsychic sense of self NPTI attributes to the infant does not require representation, but only some other, more primitive, form of subjective experience. As Stern (1985) describes it:

By "sense" I mean simple (non-self-reflective) awareness. We are speaking at the level of direct experience, not concept. . . . An invariant pattern of awareness is a form of organization. . . . This organizing subjective experience is the preverbal, existential counterpart of the objectifiable, self-reflective, verbalizable self (p. 7).

A crucial term here is "sense of," as distinct from "concept of" or "knowledge of" or "awareness of" a self or other. The emphasis is on the palpable experiential realities of substance, action, sensation, affect, and time. Sense of self is not a cognitive construct. It is an experiential integration (p. 71).

With this concept of "sense of self," the problems of studying the self in infancy are quite serious. A pure subjective awareness of a process is an elusive and diaphanous concept (Lichtenberg, 1983). As with many proposals of NPTI, a large inferential leap is required to derive statements about the infant's sense of self from the research findings. To be sure, Stern (1985, pp. 4, 13, 17, 275) does not deny the highly inferential nature of his enterprise. Yet, the issue may be more serious than the degree of inference. It is not clear that anything at all qualifies as a potential confirmation of the existence of Stern's "sense of self."

REFUTATION?

Of course, theorists are free to speculate as they please. However, speculations are not refutations of another theory. Today

NPTI is widely seen as having refuted traditional concepts of infancy on the basis of new experimental data. Clearly this is not the case. If self and self/other differentiation are taken in their traditional senses, the NPTI must agree with earlier theories that the experimental evidence does not imply that infants possess the schema, concepts, or representations required. If these concepts are taken in Stern's sense, then as argued above, the empirical evidence cannot logically confirm his inferential leap or falsify the inference of symbiosis.

Indeed, some of what appears to be a refutation of earlier theories is actually a methodological assumption. In a revealing footnote, Stern (1985) says with regard to his method of inferring subjective experiences:

[I]t is important that the subjective experiences chosen are not those seen exclusively or particularly in adult psychopathological states, nor those that come to be acceptable and reasonable only after much psychodynamic self-exploration. They should be apparent to anyone and a normal part of common experience (p. 17).

In his attempt to avoid pathomorphic adultomorphizing, Stern has made it logically impossible to find evidence of normal symbiosis or normal autism in the observational data. As adult psychopathological states, they are ruled out a priori from theories of infancy. Mahler has been excluded rather than refuted (Rangell, 1989).

Apparently the debate over selfhood and differentiation in infancy hinges on two issues: (1) the choice of a definition of the concept of self (Tyson, 1989) (does it necessitate a representation or is a mere experiential awareness sufficient?); and (2) the willingness to hypothesize a self in the latter sense, although such a hypothesis may not be an empirical one. Hence, the emergence of NPTI does not represent an empirical testing and falsification of a psychoanalytic theory (Kaplan, 1987; Rangell, 1989). The choice of a particular definition of self and infer-

ences about neonatal experiences are not entailed by the new observational data.

THEORETICAL POSTULATES

What, then, is the relationship between the empirical data and NPTI's views of the infant's intrapsychic world? Stern (1985, pp. 4, 275) offers two suggestions. Either statements about neonatal experience are empirical scientific hypotheses or they are "clinical metaphors to be used in practice," or perhaps both (see also Peterfreund, 1978; Meissner, 1989). Neither of these alternatives is appealing. As argued above, the first alternative is not available because statements about the infant's subjective experience are not directly open to observational test. As metaphors in the second alternative, such statements have no scientific status, and NPTI loses all scientific legitimacy.

I suggest yet another perspective on such statements, one in which they are not empirical statements, but nevertheless retain their scientific status. Scientific theories contain many types of propositions. Some are definitions, some are empirical generalizations, some are natural laws. Among these propositions are some known as "postulates." These are at the very heart of a theory. Yet they are not empirical statements. Only in conjunction with other propositions do these postulates generate testable empirical consequences. Thus, the postulates can be *indirectly* tested by the confirmation or disconfirmation of statements deduced from them in combination with other statements. An experiment, therefore, tests the theoretical system as a whole, not individual postulates. Confirmations support the entire theory while disconfirmations cast doubt on the whole theory without specifying which parts of the theory are at fault.

Often a postulate system is accompanied by a model serving as a heuristic to help us understand the postulates. For example, a

theory of the atom may be presented along with a model of small spheres orbiting a central core. Although this model is not literally a true description of the atom according to the theory, it is sufficiently analogous to the theory to enable us to visualize and work with the theory.

I suggest that: (1) descriptions of the subjective experience of infants can be conceived as postulates in psychoanalytic theory; and (2) the picture meaning we derive by projecting our own experience into the infant is the heuristic model accompanying these postulates. Although these postulates may not be directly testable, they do entail observable consequences when combined with other statements. The more of these consequences observationally confirmed, the greater the claim on our belief by the theory in general and by the postulates in particular. In the case of NPTI, the consequences include not only statements about the behavioral capacities of infants but also hypotheses about adult psychodynamics and clinical treatment.

Postulates strengthen their validity also by their effectiveness in serving other functions. One such function is that of systematization, for postulates can help organize a set of data into a more coherent whole (Rangell, 1989). In the case of NPTI, postulates about selfhood in infancy may prove useful in structuring a range of psychological phenomena around the developmental continuities and changes in the self, a developmental line extending from birth to death (Stern, 1985, pp. 6-7).

The model accompanying these postulates may also be helpful in supplying us with a picture meaning, if not a literal meaning of the subjective world of infancy. Some (Lichtenberg, 1989; Shane, 1989) suggest that this picture is useful in treating patients because it supplies them with additional "model scenes" of early childhood as they struggle to understand the patient's past. Postulates and models may also function as a heuristic in the creative tasks of the theorist. Picturing the infant as having a primitive self may inspire the theorist to develop new ideas for both theory and research, ideas which may not have occurred

otherwise. On the other hand, caution is in order because picture meanings are also misleading, and in the long run they may prove a hindrance to theory and research.

THEORETICAL APPEAL

If NPTI has triumphed over earlier theories, it is not because the new observational data have dictated the victory. As we have seen, the data are neutral with respect to the issues separating the theories. Moreover, as with any scientific theory, the earlier theories can be rescued from any apparent disconfirmation by ad hoc modifications (Gedo, 1986). Indeed, Pine (1981, 1985, 1986; and see Bergman and Ellman, 1985) achieves such a rescue. He suggests that the symbiotic phase refers to *moments* of the infant's experience during which the infant experiences boundarylessness or merger while at other moments the infant may experience more articulated cognitions congruent with the new research findings. Thus, the apparent ascendancy of NPTI must be due to other reasons.

Of course, the most obvious possible reason is that a new generation of psychoanalytic developmentalists has found that NPTI is more successful than earlier theories in performing the various functions reviewed above. That is, NPTI has been found to be more effective in systematizing the phenomena, in generating confirmed consequences, in clinical practice, and as a heuristic for the theorist's imagination. Other reasons are possible as well. For one thing, NPTI, with its emphasis on selfhood in infancy, is congruent with Kohutian self psychology (Stern, 1985, p. 242; Meissner, 1989; Scharfman, 1989), which is currently of great appeal to mental health professionals. Lawner (1985) suggests some sociohistorical reasons for the popularity of self psychology, and these may be relevant to NPTI as well. Yet other reasons for the popularity of Stern's work are suggested by Cushman (1991), who adopts a social-constructivist perspective.

One other possible reason should be considered. The self is the contemporary version of what traditionally has been known as "the soul." The soul is the essence that transforms what is otherwise just skin, bones, meat and blood into a person. We attribute a soul to another, be it our pet dog or a sophisticated robot, not on the basis of an inspection of its parts or its subjective experience, but intuitively because of the way it reacts to and interacts with us. Social interaction transforms an "it" into a "thou" (Buber, 1923). Over the past two decades, observational research on infants has revealed the subtle and sophisticated ways in which infants interact with others, ways that bespeak a person, a "thou," rather than the random movements of disorganized protoplasm. Our natural human reaction is to interact with this infant more as a person in an I-Thou relationship and to be more willing to attribute a soul to it. In psychoanalytic terms, we are more likely to find congenial a theory that confers selfhood on that infant.

CONCLUSIONS

Summarizing the discussions above, we may draw the following conclusions:

1. The empirical data from experimental observations of infants do not establish that infants possess a self or are capable of self/other differentiation in the psychoanalytic sense. This conclusion derives from the general logical difficulties in inferring intrapsychic experience from behavioral data in the absence of introspection.
2. Because of these problems, statements about the intrapsychic experience of infants should be viewed as theoretical postulates rather than as either empirical generalizations or metaphors.
3. The postulates of NPTI and traditional theories of infancy differ in their criteria for attributing selfhood and self/other differentiation to the infant. The latter theories require the pos-

session of concepts and schema not required by the former. Thus, although the two theories may agree on the data, they disagree over whether these data entail selfhood and differentiation.

4. It follows that the wide acceptance of NPTI illustrates neither the refutation nor even the testability of traditional theories by the new empirical research on infancy.

5. Instead, the popularity of NPTI may be due to sociohistorical factors associated with the rise of self psychology, or to the greater utility of NPTI, or to new attitudes toward infants resulting from the surprising findings of the new research.

REFERENCES

- BAHRICK, L. E. & WATSON, J. S. (1985). Detection of intermodal proprioceptive-visual contingency as a potential basis of self-perception in infancy. *Developmental Psychol.*, 21:963-973.
- BERGMAN, A. & ELLMAN, S. (1985). Margaret S. Mahler: symbiosis and separation-individuation. In *Beyond Freud. A Study of Modern Psychoanalytic Theorists*, ed. J. Reppen. Hillsdale, NJ: Analytic Press, pp. 231-256.
- BLUM, H. P. (1989). The value, use, and abuse of infant developmental research. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 157-174.
- BRODY, S. (1982). Psychoanalytic theories of infant development and its disturbances: a critical evaluation. *Psychoanal. Q.*, 51:526-597.
- BUBER, M. (1923). *I and Thou*. Translated by R. G. Smith. New York: Scribner's, 1958.
- COOPER, A. M. (1989). Infant research and adult psychoanalysis. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 79-89.
- CUSHMAN, P. (1991). Ideology obscured: political uses of the self in Daniel Stern's infant. *Amer. Psychologist*, 46:206-219.
- DOWLING, S. (1989). Epilogue. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 213-225.
- & ROTHSTEIN, A., Editors (1989). *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*. Madison, CT: Int. Univ. Press.
- FREUD, S. (1914). On Narcissism: an introduction. *S.E.*, 14.
- (1920). Beyond the pleasure principle. *S.E.*, 18.
- GEDO, J. E. (1986). *Conceptual Issues in Psychoanalysis: Essays in History and Method*. Hillsdale, NJ: Analytic Press.
- KAPLAN, L. J. (1987). Discussion. *Contemp. Psychoanal.*, 23:27-44.

- LAWNER, P. (1985). Recent sociohistorical trends and the ascent of Kohutian "self-psychology." *Amer. J. Psychoanal.*, 45:152-159.
- LICHTENBERG, J. D. (1983). *Psychoanalysis and Infant Research*. Hillsdale, NJ: Analytic Press.
- (1989). Model scenes, motivation, and personality. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 91-107.
- MAHLER, M. S., PINE, F. & BERGMAN, A. (1975). *The Psychological Birth of the Human Infant: Symbiosis and Individuation*. New York: Basic Books, Inc.
- MEISSNER, W. W. (1989). The viewpoint of a devil's advocate. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 175-194.
- NAGEL, E. (1959). Methodological issues in psychoanalytic theory. In *Psychoanalysis, Scientific Method, and Philosophy: A Symposium*, ed. S. Hook. New York: New York Univ. Press, pp. 38-56.
- PETERFREUND, E. (1978). Some critical comments on psychoanalytic conceptions of infancy. *Int. J. Psychoanal.*, 59:427-441.
- PINE, F. (1981). In the beginning: contributions to a psychoanalytic developmental psychology. *Int. Rev. Psychoanal.*, 8:15-33.
- (1985). *Developmental Theory and Clinical Process*. New Haven/London: Yale Univ. Press.
- (1986). The "symbiotic phase" in light of current infancy research. *Bull. Menning. Clin.*, 50:564-569.
- POPPER, K. R. (1962). *Conjectures and Refutations: The Growth of Scientific Knowledge*. New York: Basic Books.
- RANGELL, L. (1989). The significance of infant observations for psychoanalysis in later life: a discussion. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 195-211.
- SCHARFMAN, M. A. (1989). The therapeutic dyad in the light of infant observational research. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 53-64.
- SHANE, M. (1989). The challenge posed by infant observational research to traditional psychoanalytic formulations: a discussion of the papers. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 143-155.
- SILVERMAN, M. A. (1989). Infant observation and the reconstruction of early experience. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 123-139.
- STERN, D. N. (1985). *The Interpersonal World of the Infant: A View from Psychoanalysis and Developmental Psychology*. New York: Basic Books.
- TYSON, P. (1989). Two approaches to infant research: a review and integration. In *The Significance of Infant Observational Research for Clinical Work with Children, Adolescents, and Adults*, ed. S. Dowling & A. Rothstein. Madison, CT: Int. Univ. Press, pp. 3-23.

- WATSON, J. S. (1979). Perception of contingency as a determinant of social responsiveness. In *The Origins of Social Responsiveness*, ed. E. Thomas. Hillsdale, NJ: Erlbaum, pp. 33-64.
- (1980). Bases of causal inferences in infancy: time, space, and sensory relations. Presented at the International Conference on Infant Studies, New Haven, CT. Later published in *Advances in Infant Psychiatry*, 1984, 3:152-165.
- (1985). Contingency perception in early social development. In *Social Perception in Infants*, ed. T. Field & N. A. Fox. Norwood, NJ: ABLEX Publ., pp. 157-165.
- WITTGENSTEIN, L. (1953). *Philosophical Investigations*. Translated by G. E. M. Anscombe. New York: Macmillan.

Wheaton College
Norton, MA 02766

The Evolution of Freud's Theory about Dreaming

Malcolm N. McLeod

To cite this article: Malcolm N. McLeod (1992) The Evolution of Freud's Theory about Dreaming, The Psychoanalytic Quarterly, 61:1, 37-64, DOI: [10.1080/21674086.1992.11927334](https://doi.org/10.1080/21674086.1992.11927334)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927334>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



Article views: 5

THE EVOLUTION OF FREUD'S THEORY ABOUT DREAMING

BY MALCOLM N. MC LEOD, M.D.

Freud revised his theory of dreams significantly. First, he discovered the role of the id in dreaming. He hypothesized that the function of dreaming is to gratify an infantile sexual wish, in accordance with the pleasure principle, and thereby to preserve sleep. However, he learned later that anxiety generated by recent events plays a greater role in stimulating dream formation than he had thought and that some dreams actually generate anxiety. These clinical observations caused him, in large part, to revise his theories of dreaming, of anxiety, and of the mental apparatus.

The two-fold purpose of this paper is to demonstrate that Freud revised his original theory about the structure and function of dreaming, and to trace the evolution of his concepts about the dream instigators, the dream wishes, the use of the dream in analysis, and the function of dreaming as the guardian of sleep.

The Interpretation of Dreams (1900) does not adequately reflect a rounded, balanced view of Freud's final theory of dreaming. Although his book on dreams contains the kernel of what he considered, to the end of his life, to be his most valuable discovery, it remains heavily weighted toward his earlier theory. From reading *The Interpretations of Dreams* alone, one is inclined to come away with the impression that dreaming is simply the gratification of an infantile sexual wish. In subsequent editions of his dream book, Freud modified his concepts and answered critics of his original theory. However, the additions are not arranged chronologically. Often they are tucked away in footnotes. Furthermore, his observations about dreaming are scattered throughout other works that were published during the

thirty-eight years after *The Interpretation of Dreams* appeared in 1900. Thus, acquiring an appreciation of the evolution of the theory from Volumes 4 and 5 of *The Standard Edition* is not possible. Perhaps this in part explains why Freud (1923b, 1925, 1933) observed that many of his contemporaries had not understood his original theory of dreams, nor had they kept abreast of his revisions. He had intended to revise his cluttered dream book, but was unable to do so for financial reasons.

In order to gain a perspective on the inconsistencies and to track the evolution of Freud's revisions, I copied all of the references to dreams contained in his letters to Fliess and those cited in the Indexes and Bibliographies in *The Standard Edition of the Complete Psychological Works of Sigmund Freud* (Richards, 1974), and I arranged them in chronological order. By reading the theories organized in this way, I was able to get a temporal profile of the revisions.

The adequacy of Freud's theory of dreaming has often been debated. However, at times it appears that those who criticize it are being critical of his early theory, without considering his later modifications.

Numerous authors have argued that some dreams do more than fulfill infantile sexual wishes and preserve sleep. Freud (1900, pp. 579-580, n.; footnote added in 1914) reported that Adler (1911) and Maeder (1912) had contended that, in addition to preserving sleep, dreams anticipate problems and attempt to solve them. But he repeated that the only function of dreaming that he knew of was to decrease unconscious excitation. The consideration of dreams as adaptational has been discussed by Rivers (1923), Ullman (1961), Snyder (1966), and Ephron and Carrington (1967).

Whether the occurrence of traumatic elements in dreams can be explained by Freud's original dream theory has been debated. Garma (1947), Loewenstein (1949), Kanzer (1949), and others have argued that traumatic dreams are also wish fulfillments. Ward (1961), Stewart (1967), and Myers (1983, 1989),

following Freud's revised theory, have discussed traumatic dreams as efforts to master traumatic experiences.

A number of psychoanalysts (e.g., Altman, 1969; Greenson, 1970) have insisted upon the adequacy of Freud's original topographic theory of dreams, but several have argued the reverse. Arlow and Brenner (1964, 1988) have stated that Freud's dream theory is not an adequate model for understanding conflict and anxiety. Rather, they suggest, the structural model is a superior framework within which to conceptualize dreaming. Kohut (1984) felt that Freud's model of dreaming did not adequately explain certain "self-state" dreams.

Although some analysts—among whom are Saul (1966), Stewart (1967), and Myers (1989)—have noted that Freud revised his theory of dreaming, there has remained a persistent tendency to understand dreaming, in accordance with Freud's original topographic theory, as a welling up into consciousness of repressed childhood sexual wishes. Lewin (1952), Arlow and Brenner (1964), and Kohut (1984) opined that most analysts of their respective decades had adhered to Freud's original topographic theory of dreaming.

ORIGINAL CONCEPT OF DREAMING (1895-1916)

Freud cradled his original theory of dreaming within the framework of his quantitative, neurophysiological, topographic model of the mind, in which pleasure results from discharging from the unconscious a physical substance which he named "libido." When discharge of libido is inhibited, it is transformed into anxiety.

In 1900, Freud felt that the only function of dreaming is to preserve sleep and to achieve pleasure by discharging libidinal excitation from the unconscious. Dreaming, he felt, is stimulated either by wishes during the day before the dream, which

arouse childhood wishes, or by spontaneous arousal of sexual wishes during sleep. This process threatens sleep. In order to satisfy both the wish to remain asleep and the sexual wish, the dream work disguises the forbidden wish behind innocent day residues, thereby discharging tension while avoiding the wrath of the dream censor.

Two years before he published *The Interpretation of Dreams*, Freud wrote to Fliess (Masson, 1985, p. 302) that the dreamer accomplishes this pleasurable gratification of a forbidden childhood wish by visualizing erotic scenes witnessed during early childhood. The infantile sexual impulses, the essential fuel for dreaming, are located in the unconscious. He felt that dream life and the unconscious develop during early childhood and that the two are closely related. He considered these views extreme and was uncertain how far he should go in revealing them in his forthcoming dream book.

Initially, this topographic theory of the mind and of dreaming (that the mind seeks pleasure by discharge of tension) formed the basis of Freud's technique of treatment, which was to "discover the unconscious material that was concealed from the patient, put it together, and, at the right moment, communicate it to him" (Freud, 1920a, p. 18). The main instrument he used in that endeavor was the analysis of dreams. Through the window they provided he looked into the unconscious past of his patients. Indeed, he stated that the "*interpretation of dreams is the royal road to a knowledge of the unconscious activities of the mind*" (Freud, 1900, p. 608).

From his earliest days as a psychoanalyst, Freud noted several challenges to his original theory of dreaming and model of the mind. In the first edition in 1900 of *The Interpretation of Dreams*, he discussed the existence of "psychical instigations to dreaming, left over from waking life, which are *other* than wishes" (p. 554). He explained this apparent contradiction of his theory thus: "the daytime thought, which was not in itself a wish but on the contrary a worry," was not capable of generating a dream (p. 556). Distress appeared in dreams only in the following way: a

naked and opportunistic childhood wish seized the distress as a cloak and hid behind it in order to escape undetected (p. 553).

In order to amplify this point, Freud offered his own distressing dream of the illness of his beloved family physician, Otto. One day he had observed that Otto was ill. That night he dreamed that Otto had Graves' disease. If dreams are wish fulfillments, he asked, should he not have dreamed that Otto was healthy rather than ill? Through a series of associations, he explained that his daytime worry about Otto's health had become attached to his own unconscious wish to become a distinguished professor (pp. 560-561). This unconscious, ambitious wish thus served as the motive force for the dream, disguised under cover of the distressing image of his ill family physician.

Another challenge was the disappointing results of the treatment that had been based upon his original dream model. Freud (1920a) commented years later that his attempt to free the unconscious libidinal wishes and associated traumas by simply communicating their existence to his patients had failed to "solve the therapeutic problem . . ." (p. 18). The case of Dora is an example.

One of Freud's purposes in publishing his analysis of Dora was to demonstrate how the study of dreams could be used to discover "the hidden and repressed parts of mental life" (Freud, 1905a, p. 114). He had expected that delivering her unconscious wishes into consciousness would result in a pleasurable decrease in tension and the disappearance of her symptoms. However, she became anxious and fled from psychoanalysis. He attributed this unexpected result to his lack of awareness of the importance of the transference, and to excessive emphasis on dream interpretation to uncover the past. In the postscript to his report on her analysis, he concluded that it "is easy to learn how to interpret dreams . . . [but] by far the hardest part of the whole task [is combating the transference]" (p. 116). Also, he learned that "in Dora's case the dream which occurred during the treatment had gained a new significance connected with the present time . . ." (p. 93). By 1911 he had become aware that "it is of the

greatest importance for the treatment that the analyst should always be aware of the surface of the patient's mind. . . . It is scarcely ever right to sacrifice this therapeutic aim to an interest in dream-interpretation" (p. 92). Thus, he had discovered an additional use of dreams during psychoanalysis, that is, to illuminate the transference.

From his earliest days, Freud had intuitively recognized the existence during dreaming of what is currently referred to as superego activity, but he had not integrated these observations into his theory. For example, in a letter to Fliess dated November 2, 1896, Freud wrote that, following the death of his father, he had had a dream which stemmed "from the inclination to self-reproach that regularly sets in among the survivors" (Masson, 1985, p. 202). In the 1911 edition of *The Interpretation of Dreams* (1900) he briefly considered the possible explanatory role of "masochistic impulses in the mind" for his own recurrent unpleasant dream of being humiliated for having been incompetent as a chemical analyst during his medical school days (pp. 475-476). And, in a paragraph added in the 1914 edition, he stated that he had only recently discovered that, in addition to attempting to reassure the dreamer, the manifest content of examination dreams contains a self-reproach (pp. 275-276).

From his study of dreaming, Freud (1916-1917) serendipitously discovered that complicated mental activity, which is currently referred to as ego activity ("an intention, a warning, a reflection, a preparation, an attempt at solving a problem, and so on" [p. 222]), can occur unconsciously. He reconciled this observation with his wish theory of dreaming by simply defining such mental activity as not a part of the dream: "When you speak of a 'dream', you must mean either the manifest dream—that is, the product of the dream-work—or, at most, the dream-work itself as well—that is, the psychical process which forms the manifest dream out of the latent dream-thoughts" (p. 223). Thus he maintained his theory that in "the construction of dreams, the part of the capitalist is always played by the uncon-

scious wish alone; it provides the psychical energy for the construction of the dream" (p. 226).

However, the above explanation was not totally satisfactory, as he stated that his discovery of complex mental activity in the unconscious was "as imposing as it is perplexing" (p. 223). Although unconscious, the activity does not belong to that "particular realm of the mind with its own wishful impulses. . . . the realm of the infantile" (p. 212). "It would be highly opportune to distinguish these two kinds of unconscious by different names" (p. 227).

His recognition of the above, and of the frequent occurrence of anxiety during dreaming, prompted him to ask a question, which, he indicated, had "important and far-reaching" implications, as it penetrated to the core of the problem with his topographic theory.

Freud (1916-1917) phrased his question as follows:

No doubt a wish-fulfilment must bring pleasure; but the question then arises 'To whom?' To the person who has the wish, of course. But, as we know, a dreamer's relation to his wishes is a quite peculiar one. He repudiates them and censors them—he has no liking for them, in short. So that their fulfilment will give him no pleasure, but just the opposite; and experience shows that this opposite appears in the form of anxiety, a fact which has still to be explained. Thus a dreamer in his relation to his dream-wishes can only be compared to an amalgamation of two separate people who are linked by some strong element in common (pp. 215-216).

REVISIONS IN FREUD'S THEORY OF DREAMS (1916-1925)

During the mid-phase of his professional life, Freud formulated major revisions which included the structural theory, the reality principle, the repetition compulsion, the division of the drives into libidinal and aggressive ones; and he amended his theory of

dreams, too. Perhaps he used his understanding of the evolution of his theory of dreams as a guideline for his other theoretical revisions. As he commented years later, his understanding of dreams had been his “sheet-anchor during those difficult times when the unrecognized facts of the neuroses used to confuse my inexperienced judgment. When I began to have doubts of the correctness of my wavering conclusions, the successful transformation of a senseless and muddled dream into a logical and intelligible mental process in the dreamer would renew my confidence of being on the right track” (1933, p. 7).

For many years he had been aware that events which were both unpleasant and of recent origin, as opposed to wishes from the childhood past, played a role in dream formation. However, in the 1919 edition of *The Interpretation of Dreams*, he indicated that the occurrence of punishment dreams and dreams which were caused by recent distressing events deserved further investigation. In that edition, he presented two personal examples of such dreams—his own dream of “news from the front” and a dream his small grandson had—to illustrate the role of recent distressing events and anxiety in dream formation.

Freud’s dream of “news from the front” had been caused by fear that his son had been killed in the war. Another day had passed and he had not heard from his son. He attempted to replace the sleep-disturbing fear with a wish fulfillment, but his efforts failed: “The disguises were too thin and references to what it was sought to repress pierced through them everywhere” (p. 559). The terrifying prospect of the death of his son had activated the memory of a traumatic incident of falling and lacerating his lower jaw, which Sigmund Freud himself had suffered between the ages of two and three (p. 560). Worry, he explained, had given rise to the dream. “[T]he dream *set about giving direct expression to what it had first sought to deny*, though the inclination towards wish-fulfilment was still shown at work in the distortions” (p. 559, italics added). Clearly, he implied that a force actively propelled the fear into the manifest content of his dream. But he was uncertain “what it was that provided the

dream with the motive force for thus giving expression to my distressing thoughts. . . . [T]here can be no question that it was precisely the strength of the painful emotion which [caused the dream work] to seek out a repressed wish-fulfilment of this kind in order to find some consolation (pp. 559-560, italics added).

The second of Freud's examples of this reversal in chronology of dream instigation was contained in a footnote in the 1919 edition and concerned a dream his grandson had. The child's father (Sigmund Freud's son) was leaving for the war front the next day. That night the twenty-month-old boy carried the anticipation of loss, affect unchanged, into sleep. During his sleep, he cried out, "Daddy! Daddy!—baby!" Sigmund Freud inferred that his grandson, by means of calling out the two together, had achieved a wish-fulfillment union between himself and his father (1900, p. 461, n.).

Are punishment dreams caused by a wish? Freud insisted that these dreams do conform to his original wish theory, in that the "*Traumbildner*," or literally "dream builder," belonged to the unconscious. However, he conceded that their recognition necessitated "in a certain sense a new addition to the theory of dreams" (1900, p. 557) because the force which generated the dream originated from the ego and not from a repressed infantile wish. He elaborated his convoluted, theoretical answer thus: "[It] is not an unconscious wish derived from the repressed (from the system *Ucs.*), but a punitive one reacting against it and belonging to the ego, though at the same time an unconscious (that is to say, preconscious) one" (p. 558). In other words, the wish for punishment by the superego, as he later termed it, was in order to obtain libidinal gratification.

Did Freud's ambiguous use of the word "wish" result from imprecise translation? No. Although Strachey incorrectly translated *Traumbildner* as "dream-constructing wish" (Freud, 1942, p. 564), in the same complex sentence Freud also used the phrase (correctly translated), "wish for punishment," and in 1930 he added a footnote in which he referred to wishes of the superego (1900, p. 476, n. 2). Thus it appears that, at this point,

he was being tautological and that he was forcing his new clinical discoveries into his old theoretical model. He simply defined distress as a wish for punishment. Clearly, he was using "wish" with a different connotation.

In the 1919 edition of *The Interpretation of Dreams*, he repeated his question—What wishes does a dream fulfill?—because often the fulfillment of a wish does not result in pleasure "but just the opposite; and experience shows that this opposite appears in the form of anxiety, a fact which has still to be explained" (pp. 580-581, n. 1). He felt that the answer to this question did not jeopardize his wish theory of dreams, but it did necessitate major theoretical revisions. He suggested that the "mechanism of dream-formation would in general be greatly clarified if instead of the opposition between 'conscious' and 'unconscious' we were to speak of that between the 'ego' and the 'repressed' " (1900, p. 558).

A year later Freud wrote: "It is certain that much of the ego is itself unconscious" (1920a, p. 19). His fully developed structural theory appeared three years later in *The Ego and the Id* (1923a). He (1923b) summarized the relative roles of distressing day residues and infantile impulses thus:

It is possible to distinguish between dreams *from above* and dreams *from below*. . . . Dreams from below are those which are provoked by the strength of an unconscious (repressed) wish. . . . Dreams from above correspond to thoughts or intentions of the day before which have contrived during the night to obtain reinforcement from repressed material that is debarred from the ego (p. 111).

Freud's discovery of the occurrence of anxiety secondary to gratification of a wish was just the reverse of what he had expected, and it forced him to revise his theory of anxiety. From his analyses of Little Hans and the Wolf Man he arrived at the unexpected conclusion that "the motive force of the repression was fear of castration. . . . It was anxiety which produced repression and not, as I formerly believed, repression which produced

anxiety" (1926, pp. 108-109). He felt that this hypothesis was secured by his analysis of the Wolf Man's dream, which "rendered further proof superfluous" (p. 108). He postulated that the ego was the seat of anxiety (Freud, 1923a, p. 57; Strachey, 1959, p. 85).

Although Freud still maintained, in the 1919 edition of *The Interpretation of Dreams*, that all dreams are wish fulfillments, just one year later he wrote, in *Beyond the Pleasure Principle* (1920a) that it is "impossible to classify as wish-fulfilments the dreams . . . in traumatic neuroses, or the dreams . . . which bring to memory the psychical traumas of childhood" (p. 32). Thus he had decided that there was another type of distressing dream, the traumatic dream, which was an exception to the rule that dreams fulfill wishes. (I think Freud had been subsuming traumatic dreams under punishment dreams, and that he had confused the two.) In considering traumatic dreams, he concluded that the theory of the twofold function of dreams—to guard sleep and to gratify a libidinal impulse—was upset in traumatic dreams. Rather, such dreams obey the reality principle and the ego instinct for self-preservation (p. 10). They attempt "to master the [traumatic] stimulus retrospectively, by developing the anxiety whose omission was the cause of the traumatic neurosis" (p. 32). That is to say, the dreamer (who anticipates the imminent recurrence of a once-overwhelming trauma) seeks to alert him/herself in order to prevent repetition of the trauma, to brace him/herself, so to speak. Before delivering bad news to people, we caution them with the words, "I have some bad news for you." We give a person time to brace him/herself, to increase his or her anxiety, as it were, so that the element of surprise is diminished.

The occurrence of dreams which did not conform to the pleasure principle caused Freud (1920a) to postulate the existence of an aggressive instinct. Later, he repeated his reason for this addition to his theories in his *New Introductory Lectures*: "We have been struck by the fact that the forgotten and repressed experiences of childhood are reproduced during the work of analysis

in dreams . . . although their revival runs counter to the pleasure principle . . ." (1933, p. 106). He recognized that the "institution of the super-ego . . . takes over the dangerous aggressive impulses . . ." (p. 110).

In the 1925 edition of *The Interpretation of Dreams*, Freud, having recognized the significant role of the aggressive instinct in dreaming (and in superego formation), asked if the aggressive instinct alone were capable of fueling a dream, that is, if it were possible for a dream to be devoid of libidinal elements (1900, pp. 160-161, n.). He concluded that all dreams had some libidinal elements. However, in some dreams, "nothing belonging to the latent thoughts is taken up into the manifest content" (1923b, p. 118). Therefore, from the practical, clinical standpoint of dream interpretation, "It would, of course, be useless to look for a repressed wishful impulse as the motive power for [such] a manifest dream . . . ; one must be content with the fulfilment of the wish for self-criticism" (pp. 118-119).

FINAL PHASE REVISIONS (1926-1938)

Freud (1940) introduced his final summary of his theory of dreams by once again stressing that an understanding of dreams is central in psychoanalysis, as it allows us to see how the id invades the ego in the neuroses. He stated, "It is best to begin by pointing out that the formation of a dream can be provoked in two different ways" (p. 166). In short, a so-called "ego dream" can arise "from above" due to the residues of waking thought that continue to be active during sleep; or an "id dream" can arise "from below" due to the welling up of an instinctual urge. He emphasized that what is essential in this process is the activity of the dream work. If the dream is stimulated by concerns from the day before, the dreamer's sleeping ego summons an innocuous wish fulfillment to replace the disturbing day residue and thereby preserve sleep. If the dream is stimulated by the surge of an instinctual demand, the dream work attempts to

partially satisfy the instinctual urge through hallucinatory gratification.

The concept of anxiety during dreaming did not contradict his earliest theory, Freud insisted. Anxiety was the product of a conflict between the opposing wishes of the superego and the id. Clearly, he explained dreams as a compromise formation in accordance with the structural theory. However, he felt that there remained two serious challenges to his wish-fulfillment theory of dreaming: the occurrence of dreams of traumatic incidents, and the dreaming of childhood traumatic incidents which follows the lifting of infantile amnesia during psychoanalysis. "[W]e must admit that childhood experiences, too, are of a traumatic nature, and we need not be surprised if comparatively trivial interferences with the function of dreams may arise under other conditions as well" (1933, p. 30).

Freud (1933, 1940) modified his early concept of the dream as a guardian of the wish to sleep. In 1935, he stated: "When it is considered how frequently the [guardian] function of dreaming miscarries, the dream may aptly be characterized as an attempt at the fulfilment of a wish" (1925, p. 46, n.; footnote added in 1935). On the basis of his assumption that the dream work always attempts to preserve sleep, he defined awakening from dreaming tautologically as a failure of the dream work. However, I infer that, at the conclusion of his final lecture on dreaming, he was suggesting another function of dreaming—namely, an attempt by the ego to master trauma and to serve as a sentinel—when he wrote that sometimes the dreamer is awakened "precisely by the dream. So, too, there are occasions when that excellent fellow the night-watchman, whose business it is to guard the little township's sleep, has no alternative but to sound the alarm and waken the sleeping townspeople" (1940, p. 171).

DISCUSSION AND OVERVIEW

In Freud's early theory of the mind, pleasure results from discharge of tension from the unconscious. Anxiety results when

discharge of libido is inhibited. The libido actually is transformed into anxiety. It was in this topographic theory of the mind that he cradled his early theory of dreaming.

During sleep, there occurs an increase in tension in the unconscious, due to the welling up of a childhood sexual wish, which threatens sleep. The only function of dreaming is to decrease tension in the unconscious by visualizing a pleasurable scene or experience and thereby to preserve sleep. In this schema the day residue is no more than a convenience behind which the unacceptable wish can escape undetected. In 1914 Freud (1900) repeated that this was the single function of the dream work (p. 579, n.). While acknowledging that some dreams contain attempts at solving conflicts, he attributed such activity to day residues (pp. 579-580, n.).

Later he learned that in many dreams, recent distressing events played a greater role in the generation of dreaming than he had once thought, and that anxiety, rather than pleasure, often resulted from gratification of a wish. In many anxiety dreams the unconscious wish was detectable with ease. However, there was another class of dreams, which he called punishment dreams, in which the unconscious wish often was not detectable. This type of dream deserved further investigation, he reported in the 1919 edition of *The Interpretation of Dreams*. Although he minimized the challenge which this observation posed to his original theory, he stated that this new discovery required "in a certain sense a new addition to the theory of dreams" (p. 557).

He reasoned that the anxiety resulted from an anti-libidinal force (later termed the superego) which opposed discharge of the forbidden wish. This did not contradict his wish-fulfillment theory, he contended, because the anti-libidinal generator of the dream was unconscious. This explanation was not a fundamental departure from his original position. Punishment dreams were an effort to appease the superego in order to retain parental love and to avoid punishment. While he minimized the

extent of the revision in his theory of dreams, this observation may have been a major reason he created the structural theory.

Although Freud argued in the 1919 edition of the dream book that all dreams conform to his wish-fulfillment theory, he contradicted this statement in *Beyond the Pleasure Principle*, published in 1920. He felt that there was another type of dream, the traumatic dream, which functioned to increase tension in the unconscious, to awaken the dreamer, and to master trauma in accordance with the reality principle rather than to function, as he had previously asserted, to gratify a libidinal wish and to preserve sleep.

Confusion about the concept of the dream as the fulfillment of a wish has persisted. Five years after publication of *The Interpretation of Dreams*, Freud noted a tendency "to reduce the contents of the book to a catch-word ('wish-fulfilment') . . ." (1905b, p. 159). And, years later in a lecture he titled "Revision of the Theory of Dreams," he said: "[I]f you ask how much of dream-interpretation has been accepted by outsiders . . . the reply gives little cause for satisfaction. A few formulas have become generally familiar, among them some that we have never put forward—such as the thesis that all dreams are of a sexual nature—but really important things . . . above all, the discovery that what is essential in dreams is the process of the dream-work—all this still seems about as foreign to general awareness as it was thirty years ago" (1933, p. 8).

A partial explanation of why confusion arose and has persisted about the concept of the dream as wish fulfillment resides in the fact that the word "wish" has been used with different connotations. Originally Freud used wish in two ways: there is the libidinal wish and the wish to sleep. Later, he spoke of the "wish for punishment" by the anti-libidinal superego. And he spoke about the conflict between incompatible wishes. Some writers have used the phrase "wish for mastery."

Although Freud's early technique was to explore the depths of the mind through dream interpretation, from his early anal-

yses he learned that: 1) many dreams have significance for the transference (1905a, p. 93); 2) the analyst must attend to the surface of the patient's mind (1911, pp. 91-92); 3) the analysis of dreams is useful in elucidating the dynamics of the patient's conscious mind (1925, p. 46); and 4) recent events have a greater capability to generate dreams than he had thought earlier. There have been substantial post-Freudian elaborations on these themes. French and Fromm (1964) discussed the use of dream interpretation to elucidate current conflicts. Erikson (1954) observed the role of the ego in dreaming. Mack (1970) stated that nightmares reflect "the ego's efforts to deal with these early anxieties and conflicts . . ." (p. 173). The function of the ego during dreaming to master trauma to self-esteem was discussed by Kohut (1977, 1984).

Palombo (1978) proposed an adaptive model of dreaming in which recent events are matched with experiences stored in long-term memory. The dream work "plea bargains," as it were, substituting experiences of lesser distress for more distressing ones. Palombo (1984) stressed the importance of the manifest content as "the point of convergence for the multiple associative strands that radiate from it" (p. 405). He added that understanding the organization of the manifest content is the key to studying the dynamic interaction and confusion between past drive derivatives and current events.

Palombo (1988) observed that Freud had an inconsistent view of the day residue and that "Freud's fluctuating view of the day residue has persisted in psychoanalysis [as an] unresolved theoretical ambiguity . . ." (pp. 881-882). I think this can be explained as follows. In his early theoretical writings, Freud did minimize the role of the day residue, at least in part because he wished to emphasize the importance of his discovery that one should not take the reported dream at face value. Paradoxically, as Freud (1990) wrote in 1925: "I used at one time to find it extraordinarily difficult to accustom readers to the distinction between the manifest content of dreams and the latent dream-

thoughts. . . . But now . . . many of them have become guilty of falling into another confusion. . . . They seek to find the essence of dreams in their latent content and in so doing they overlook the distinction between the latent dream-thoughts and the dream-work" (p. 506, n.). From reading Freud's case histories, one can see that he was cognizant of the influence of the day residue. After 1919 he clearly recognized its importance, especially in its distressing form.

Palombo (1988) asked: "Was Freud referring to separate classes of dreams, in which significant current events are directly represented in the dream content, and in which only recent trivial events are represented? If so, a different theory of dream construction would be needed for the first class. Dreams that directly represent significant current events would be inaccessible to repressed childhood wishes. But it seems unlikely that Freud intended such a division" (p. 885). However, in his final summary of his theory of dreams, Freud (1940) stated: "It is best to begin by pointing out that the formation of a dream can be provoked in two different ways . . ." (p. 166), i.e., from above or from below.

From the beginning of his monumental discoveries to the end of his life, Freud (1940) maintained that an understanding of dreaming was useful during psychoanalysis because dreams contain "impressions from the dreamer's early childhood [which have] become unconscious owing to repression. That explains the help—usually indispensable—given us by dreams in the attempts we make during the analytic treatment of neuroses to reconstruct the dreamer's early life" (p. 166). I have found that the analysis of dreams is helpful in uncovering actual childhood traumatic incidents. Some patients have much greater access to traumatic incidents from childhood during their dreams than while awake. One of my patients reconstructed a history of childhood sexual abuse (which was confirmed independently) from analysis of her dreams. Perhaps dreams are of invaluable help in reconstructing traumatic events from childhood. As

Freud (1920a) wrote, "I am not aware . . . that patients suffering from traumatic neurosis are much occupied in their waking lives with memories of their accident. Perhaps they are more concerned with *not* thinking of it" (p. 13). The importance of the manifest dream in psychoanalysis for uncovering childhood memories has been discussed by several analysts, among whom are Nunberg (1956), Stewart (1967), and Pulver (1987).

There has been a long-standing debate about Freud's concept that traumatic dreams are an exception to the wish-fulfillment theory. Stewart (1967) agreed with Freud that certain dreams function to master trauma rather than to gratify libidinal wishes. He described certain dreams (with overt sadistic and incestuous events in the manifest content) which do not fit into what he described as "our usual formulation of the dynamics of dreams" (p. 329). Rather, he felt that these dreams could "often be understood in terms of this fear of the outbreak of uncontrolled primitive aggression and the fear of the loss of the sense of identity. The dreams represent an effort to master these primitive fears and, as in the traumatic dream, show a greater dependence on the preconscious component of and the original function of the dream" (p. 339). "The preconscious forces represented in the day residue are related to the original function of the dream—that of mastery" (p. 340).

A number of psychoanalysts have disagreed with Freud's assertion that traumatic dreams are an exception to the wish-fulfilling function of dreams. Garma (1946), Kanzer (1949), Loewenstein (1949), and others have suggested that traumatic dreams do, in fact, fulfill wishes. The dreamer accomplishes this wish fulfillment in the dream by disguising the actual trauma in the manifest content. For example, Loewenstein's patient, who had been helpless and temporarily unconscious while nearly drowning, dreamed afterward that he was alert and actively swimming for safety, a wish-fulfilling conversion of passivity into attempted mastery of the perilous situation.

Renik (1981) argued that all dreams can be explained by

Freud's original paradigm. He asserted that Freud was incorrect in assuming that dreams in which traumatic incidents are accurately portrayed contradict the wish-fulfillment theory. Freud failed to recognize that the wish fulfillment in such dreams operates in the same way as in typical examination dreams. Dreaming of traumatic incidents that have been successfully negotiated is reassuring, but the happy ending of the incident is deleted from the dream's manifest content because of conflict about the wish for reassurance.

The debate about traumatic dreams seems based on a presupposition that dreams have to be either wish-fulfillment dreams or traumatic dreams which, through repetition, seek to master a trauma in accordance with the instinct for self-preservation. The fact that we can identify traumatic incidents in dreams does not invalidate the concept that libidinal wishes and the wish to sleep also are operative in traumatic dreams. As Renik (1981) suggested, there "seems . . . to be no need to contrast these two functions or to hold them in opposition" (p. 178). He emphasized the wish-fulfilling function in all dreams. In this connection, let us consider Freud's (1900) own dream of "news from the front."

His dream was stimulated by an intense anxiety from the day before that his son had been killed in the war, and the day residue activated a traumatic experience from Freud's own childhood. He recognized, but was not able to explain why "the dream set about giving direct expression to what it had first sought to deny, though the inclination towards wish-fulfilment was still shown at work in the distortions. . . . [T]here can be no question that it was precisely the *strength* of the painful emotion which [caused the dream work] . . . to seek out a repressed wish-fulfilment of this kind in order to find some consolation" (pp. 559-560).

Was there a wish to remain asleep in Freud's dream? Were libidinal elements pressing for gratification? Is it possible that his anxiety was a self-preservative signal of danger that moti-

vated him to master a dangerous situation and to reach safety? I think the answer to all three questions is "Yes—and undoubtedly much more."

SUMMARY

To the end of his life, Freud maintained that his original discoveries about dreaming, as set forth in *The Interpretation of Dreams*, contained "the most valuable of all the discoveries it has been my good fortune to make" (1900, p. xxxii). He valued the study of dreaming because the regression which occurs during sleep provides a unique view of the workings of the primitive mind. However, he eventually concluded that his early theory of the dream—as the fulfillment of a sexual wish, in accordance with the pleasure principle and the topographic model of the mind—was incomplete. It failed to provide an adequate model for understanding anxiety and conflict.

Freud not only felt that his original theory of dreams was incomplete; he also felt that neither the original theory nor his revisions had been properly understood. Among the theoretical misconceptions and therapeutic errors which had arisen were tendencies toward: (1) oversimplifying his concept of the dream as only a wish fulfillment (1905b, p. 159; 1933, p. 8); (2) exaggerating the differences between waking thought and dream thought (1922b, p. 229); (3) equating the dream with the unconscious (1920b, pp. 165-166); (4) conceptualizing dreams as being fueled solely by and gratifying only infantile sexual wishes (1910, pp. 214-215, n.; 1933, p. 8); (5) overlooking the role which the ego instincts play in dream formation (1910, pp. 214-215, n.); (6) placing excessive emphasis on the interpretation of dreams in psychoanalytic practice in order to plumb the "depths" of the mind, as if the dream were a one-way street to the unconscious (1923b, p. 112; 1925, p. 46); (7) failing to recognize that the interpretation of dreams has "a double value for the work of analysis . . . as a means of obtaining knowledge

alike of the patient's conscious and of his unconscious processes" (1925, p. 46); and (8) looking to the latent content for explanatory value while ignoring what is most essential, i.e., the dream work (1900, p. 506, n. 2; 1933, p. 8). And finally, "[I]t is impossible to classify as wish-fulfilments the dreams . . . which occur in traumatic neuroses, or the dreams during psychoanalyses which bring to memory the psychical traumas of childhood" (1920a, p. 32).

Freud's final theory of dreaming postulated a complex interaction among id, ego, and superego. These activities occur in the conscious and in the unconscious, both while awake and during dreaming, and they are influenced by the conflicting demands of the sexual and the self-preservative instincts. Perhaps he was referring to these intricacies of dreaming when he wrote in 1935 that "Aristotle's old definition of the dream as mental life during sleep still holds good. There was reason for my not choosing as the title of my book *The Dream* but *The Interpretation of Dreams*" (1925, p. 46, n. 1).

APPENDIX

The following abbreviated chronology is intended to highlight the evolution of Freud's theory of dreaming and to provide a guide for the reader who wants to study these revisions in more detail. All references below are from either (1) *The Standard Edition of the Complete Psychological Works of Sigmund Freud* or (2) *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887-1904*. Quotations from *The Standard Edition* are indicated only by volume number and page number; those from *The Complete Letters* are cited as *Letters*, followed by page number.

1895: The Irma dream provides evidence that dreams are wish fulfillments (*Letters*, pp. 134, 419).

1898: "The repetition of what was experienced in [the prehistoric period of life] is in itself the fulfillment of a wish; a recent wish only leads to a dream if it can put itself in connection with material from this prehistoric period . . ." (*Letters*, p. 302).

1900: The function of dreaming: "it discharges the *Ucs.* excitation [and] . . . preserves sleep. . . . [I]t fulfils the two wishes . . ." (Vol. 5, p. 579).

1900: Daytime worries are "obliged to find a connection in some way or other with an infantile wish [to cause a dream]" (Vol. 5, p. 556).

1900: "*The interpretation of dreams is the royal road to a knowledge of the unconscious activities of the mind*" (Vol. 5, p. 608).

1905: "[W]ider circles of readers have been content to reduce the contents of [*The Interpretation of Dreams*] to a catch-word ('wish-fulfilment') which can be easily remembered and conveniently misused" (Vol. 8, p. 159).

1911: There is a tendency "to interpret as fully as possible every dream related by the patient. . . . In opposition to such a technique stands the rule that it is of the greatest importance for the treatment that the analyst should always be aware of the surface of the patient's mind at any given moment. . . . It is scarcely ever right to sacrifice this therapeutic aim to an interest in dream-interpretation" (Vol. 12, pp. 91-92).

1916: "No doubt a wish-fulfilment must bring pleasure; but the question then arises 'To whom?' " (Vol. 15, pp. 215-216).

1916: "[T]he time will soon have come to provide another name for the unconscious character of the latent dream-thoughts in order to distinguish it from the unconscious which comes from the realm of the infantile" (Vol. 15, p. 212).

1919: "[In some dreams the] distressing ideas may make their way, more or less modified but none the less quite recognizable, into the manifest content of the dream. This is the case which raises doubts as to the validity of the wish theory of dreams and needs further investigation" (Vol. 5, p. 556).

1919: Punishment dreams differ "from other wishful dreams . . . [in that] the dream-constructing wish . . . must be reckoned as belonging not to the repressed but to the 'ego' " (Vol. 5, pp. 557-558).

1919: Examples: Freud's dream of "news from the front" and his grandson's dream of his father (Vol. 5, pp. 461, n., 558-559).

1919: Regarding his dream of "news from the front," "[T]here can be no question that it was precisely the strength of the painful emotion [which caused the dream work] to seek out a repressed wish-fulfilment . . . in order to find some consolation" (Vol. 5, p. 560, italics added).

1919: "The mechanism of dream-formation would in general be greatly clarified if instead of the opposition between 'conscious' and 'unconscious' we were to speak of that between the 'ego' and the 'repressed' " (Vol. 5, p. 558).

1920: "A dream is not the 'unconscious'; it is the form into which a thought left over from preconscious, or even from conscious, waking life, can, thanks to the favouring state of sleep, be recast" (Vol. 18, pp. 165-166).

1920: The early technique of discovering the unconscious material and telling the analysand of the discovery "did not solve the therapeutic problem. . . . He is obliged to *repeat* the repressed material as a contemporary experience . . ." (Vol. 18, p. 18).

1920: In *Beyond the Pleasure Principle* it is "impossible to clas-

sify as wish-fulfilments the dreams . . . in traumatic neuroses, or the dreams . . . which bring to memory the psychical traumas of childhood" (Vol. 18, p. 32).

1920: The purpose of these dreams is not the hallucinatory gratification of a wish in accordance with the pleasure principle. Rather, in accordance with the reality principle, the dreamer observes the demands of the ego-instinct of self-preservation and attempts to master the trauma (Vol. 18, pp. 13-21).

1921: "I have never claimed that every dream expressed the fulfilment of a *sexual* wish, and I have often asserted the contrary" (Vol. 11, p. 215, n.).

1922: "Dreams are distinguished from waking thought by the fact that they can include material (belonging to the region of the repressed) which must not emerge in waking thought. Apart from this, dreams are merely a *form of thinking*, a transformation of preconscious material of thought by the dream-work and its conditions" (Vol. 18, p. 229).

1923: "It is possible to distinguish between dreams *from above* and dreams *from below*. . . . Dreams from below are those which are provoked by the strength of an unconscious (repressed) wish. . . . Dreams from above correspond to thoughts or intentions of the day before . . ." (Vol. 19, p. 111).

1925: Regarding the technique of interpretation of punishment dreams: "It would, of course, be useless to look for a repressed wishful impulse as the motive power for a manifest dream such as this; one must be content with the fulfilment of the wish for self-criticism" (Vol. 19, pp. 118-119).

1925: "Analysis exploits the dream in both directions, as a means of obtaining knowledge alike of the patient's conscious and of his unconscious processes" (Vol. 20, p. 46).

1925: "[Some analysts] seek to find the essence of dreams in their latent content and in so doing they overlook the distinction between the latent dream-thoughts and the dream-work. At bottom, dreams are nothing other than a particular *form* of thinking, made possible by the conditions of the state of sleep" (Vol. 5, p. 506, n. 2).

1925: Freud noted that his critics had not addressed "the interesting problem of whether all dreams are created by 'libidinal' forces as contrasted with 'destructive' ones" (Vol. 4, p. 161, n.).

1931: *The Interpretation of Dreams* "contains, even according to my present-day judgement, the most valuable of all the discoveries it has been my good fortune to make. Insight such as this falls to one's lot but once in a lifetime" (Vol. 4, p. xxxii).

1932: The theory of dreams "occupies a special place in the history of psycho-analysis and marks a turning point. . . . [T]he theory of dreams has remained what is most characteristic and peculiar about the young science [of psychoanalysis]. . . . I myself found it a sheet-anchor . . ." (Vol. 22, p. 7).

1932: "[I]f you ask how much of dream-interpretation has been accepted by outsiders . . . the reply gives little cause for satisfaction. A few formulas have become generally familiar, among them some that we have never put forward—such as the thesis that all dreams are of a sexual nature—but really important things . . . above all, the discovery that what is essential in dreams is the process of the dream-work—all this still seems about as foreign to general awareness as it was thirty years ago" (Vol. 22, p. 8).

1935: "When it is considered how frequently the function of dreaming miscarries, the dream may aptly be characterized as an *attempt* at the fulfilment of a wish. Aristotle's old definition of the dream as mental life during sleep still holds good. There was a reason for my choosing as the title of my book not *The Dream* but *The Interpretation of Dreams*" (Vol. 20, p. 46, n.).

1938: "It is best to begin by pointing out that the formation of a dream can be provoked in two different ways. . . . In short, dreams may arise either from the id or from the ego" (Vol. 23, p. 166).

1938: "The evidence of the share taken by the unconscious id in the formation of dreams is abundant and convincing. (a) Memory is far more comprehensive in dreams than in waking life . . . (b) Dreams make an unrestricted use of linguistic sym-

bols . . . (c) Memory very often reproduces in dreams impressions from the dreamer's early childhood [which] had become unconscious owing to repression. That explains the help—usually indispensable—given us by dreams in the attempts we make during the analytic treatment of neuroses to reconstruct the dreamer's early life. (d) Furthermore, dreams bring to light material which cannot have originated either from the dreamer's adult life or from his forgotten childhood. We are obliged to regard it as part of the *archaic heritage* . . ." (Vol. 23, pp. 166-167).

1938: "[The] replacement of the [sleep-disturbing] demand [which arises from either the ego or the id] by the fulfilment of a wish remains the essential function of the dream-work" (Vol. 23, p. 170).

1938: "It must not be forgotten that dreams are invariably the product of a conflict, that they are a kind of compromise-structure. Something that is a satisfaction for the unconscious id may for that very reason be a cause of anxiety for the ego" (Vol. 23, pp. 170-171).

1938: "We shall be taking every experience into account if we say that a dream is invariably an *attempt* to get rid of a disturbance of sleep by means of a wish-fulfilment, so that the dream is a guardian of sleep. The attempt may succeed more or less completely; it may also fail, and in that case the sleeper wakes up, apparently woken precisely by the dream. So, too, there are occasions when that excellent fellow the night-watchman, whose business it is to guard the little township's sleep, has no alternative but to sound the alarm and waken the sleeping townspeople" (Vol. 23, p. 171).

REFERENCES

- ADLER, A. (1911). Beitrag zur Lehre vom Widerstand. *Zentralblatt für Psychoanalyse und Psychotherapie*, 1:214-219. Referred to in Freud (1900).
- ALTMAN, L. L. (1969). *The Dream in Psychoanalysis*. New York: Int. Univ. Press.
- ARLOW, J. A. & BRENNER, C. (1964). *Psychoanalytic Concepts and the Structural Theory*. New York: Int. Univ. Press.
- (1988). The future of psychoanalysis. *Psychoanal. Q.*, 57:1-14.
- EPHRON, H. S. & CARRINGTON, P. (1967). Ego functioning in rapid eye movement sleep: implications for dream theory. In *Science and Psychoanalysis, Vol. 11: The Ego*, ed. J. H. Masserman. New York/London: Grune & Stratton, pp. 75-94, 99-102.
- ERIKSON, E. H. (1954). The dream specimen of psychoanalysis. *J. Amer. Psychoanal. Assn.*, 2:5-56.
- FRENCH, T. M. & FROMM, E. (1964). *Dream Interpretation: A New Approach*. New York: Basic Books.
- FREUD, S. (1900). The interpretation of dreams. *S.E.*, 4/5.
- (1905a). Fragment of an analysis of a case of hysteria. *S.E.*, 7.
- (1905b). Jokes and their relation to the unconscious. *S.E.*, 8.
- (1910). The psycho-analytic view of psychogenic disturbance of vision. *S.E.*, 11.
- (1911). The handling of dream-interpretation in psycho-analysis. *S.E.*, 12.
- (1916-1917). Introductory lectures on psycho-analysis. *S.E.*, 15.
- (1920a). Beyond the pleasure principle. *S.E.*, 18.
- (1920b). The psychogenesis of a case of homosexuality in a woman. *S.E.*, 18.
- (1922b). Some neurotic mechanisms in jealousy, paranoia and homosexuality. *S.E.*, 18.
- (1923a). The ego and the id. *S.E.*, 19.
- (1923b). Remarks on the theory and practice of dream-interpretation as a whole. *S.E.*, 19.
- (1925). An autobiographical study. *S.E.*, 20.
- (1926). Inhibitions, symptoms and anxiety. *S.E.*, 20.
- (1933). New introductory lectures on psycho-analysis. *S.E.*, 22.
- (1940). An outline of psycho-analysis. *S.E.*, 23.
- (1942). *Gesammelte Werke, Vol. 2/3*. London: Imago Publ. Co.
- GARMA, A. (1946). The traumatic situation in the genesis of dreams. *Int. J. Psychoanal.*, 27:134-139.
- GREENSON, R. R. (1970). The exceptional position of the dream in psychoanalytic practice. *Psychoanal. Q.*, 39:519-549.
- KANZER, M. (1949). Repetitive nightmares after a battlefield killing. *Psychiat. Q., Suppl.*, 23:120-126.
- KOHUT, H. (1977). *The Restoration of the Self*. New York: Int. Univ. Press.
- (1984). *How Does Analysis Cure?*, ed. A. Goldberg with P. E. Stepansky. Chicago/London: Univ. of Chicago Press.
- LEWIN, B. D. (1952). Phobic symptoms and dream interpretation. *Psychoanal. Q.*, 21:295-322.

- LOEWENSTEIN, R. M. (1949). A posttraumatic dream. *Psychoanal. Q.*, 18:449-454.
- MACK, J. E. (1970). *Nightmares and Human Conflict*. Boston: Little, Brown.
- MAEDER, A. E. (1912). Über die Funktion des Traumes (mit Berücksichtigung der Tagesträume des Spieles, usw). *Jahrbuch für psychoanalytische und psychopathologische Forschungen*, 4:692-707. Referred to in Freud (1900).
- MASSON, J. M., Translator and Editor (1985). *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887-1904*. Cambridge, MA/London: Harvard Univ. Press.
- MYERS, W. A. (1983). An athletic example of the typical examination dream. *Psychoanal. Q.*, 52:594-598.
- (1989). The traumatic element in the typical dream of feeling embarrassed at being naked. *J. Amer. Psychoanal. Assn.*, 37:117-130.
- NUNBERG, H. (1956). *Principles of Psychoanalysis. Their Application to the Neuroses*. New York: Int. Univ. Press.
- PALOMBO, S. R. (1978). *Dreaming and Memory: A New Information-Processing Model*. New York: Basic Books.
- (1984). Deconstructing the manifest dream. *J. Amer. Psychoanal. Assn.*, 32:405-420.
- (1988). Day residue and screen memory in Freud's dream of the botanical monograph. *J. Amer. Psychoanal. Assn.*, 36:881-904.
- PULVER, S. E. (1987). The manifest dream in psychoanalysis: a clarification. *J. Amer. Psychoanal. Assn.*, 35:99-118.
- RENIK, O. (1981). Typical examination dreams, "superego dreams," and traumatic dreams. *Psychoanal. Q.*, 50:159-189.
- RICHARDS, A., Compiler (1974). *The Standard Edition of the Complete Psychological Works of Sigmund Freud. Indexes and Bibliographies*. London: Hogarth.
- RIVERS, W. H. R. (1923). *Conflict and Dream*. New York: Harcourt, Brace.
- SAUL, L. J. (1966). Embarrassment dreams of nakedness. *Int. J. Psychoanal.*, 47:552-558.
- SNYDER, F. (1966). Toward an evolutionary theory of dreaming. *Amer. J. Psychiat.*, 123:121-136.
- STEWART, W. A. (1967). Comments on the manifest content of certain types of unusual dreams. *Psychoanal. Q.*, 36:329-341.
- STRACHEY, J. (1959). Editor's introduction to Inhibitions, Symptoms and Anxiety. *S.E.*, 20.
- ULLMAN, M. (1961). Dreaming, altered states of consciousness and the problem of vigilance. *J. Nerv. Ment. Dis.*, 133:529-535.
- WARD, C. H. (1961). Some further thoughts on the examination dream. *Psychiat.*, 24:324-336.

Doctor's Bldg., Suite 3
901 Willow Dr.
Chapel Hill, NC 27514

Faulkner's *As I Lay Dying*: Issues of Method in Applied Analysis

Francis Baudry

To cite this article: Francis Baudry (1992) Faulkner's *As I Lay Dying*: Issues of Method in Applied Analysis, *The Psychoanalytic Quarterly*, 61:1, 65-84, DOI: [10.1080/21674086.1992.11927335](https://doi.org/10.1080/21674086.1992.11927335)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927335>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)

FAULKNER'S *AS I LAY DYING*: ISSUES OF METHOD IN APPLIED ANALYSIS

BY FRANCIS BAUDRY, M.D.

This paper seeks to illustrate several possible approaches in the application of psychoanalysis to Faulkner's novel, As I Lay Dying. In applied analysis, the specific form and content of the work in question must be considered in order to determine which aspect of psychoanalysis will be most relevant in creating a meaningful context and in increasing our understanding.

Psychoanalysis as a theory was not devised to deal with non-living subjects, yet many apply the tools of analysis to literary characters as if they could be treated the same as patients on the couch. In a previous paper on this topic (Baudry, 1984) I described four possible psychoanalytic approaches to a novel: 1) the story of the characters in a novel as case history; 2) the novel as an aesthetic structure (including form and style); 3) the novel as a reflection of the life of the author; and 4) reader reaction as a point of entry into the novel.¹ I would like to apply these approaches to Faulkner's novel, *As I Lay Dying*, and try to determine which approaches are most successful as a point of entry into the work and its relation to the author.

This paper is written from the viewpoint of a practicing analyst using the data of his clinical and supervisory experience as phenomena analogous to the unfolding of the novel. As my paper concerns itself with issues of method in applied analysis,²

¹ For a more literary approach to the same question, see Skura (1981).

² An interdisciplinary group made up of analysts and literary scholars has been meeting monthly since 1975 at the New York Psychoanalytic Institute and struggling with issues of method in the application of psychoanalysis to literature. Much of my work is heavily influenced by the deliberations of this group.

it cannot do justice to the many complex layers of plot, structure, and style in Faulkner's novel. Hence, I will neglect certain aspects of the narrative and will have little to say about many of the characters. This is not because I do not consider them important or relevant, but rather because I have assigned myself a limited aim—to deal with methodology. This topic is often neglected in both literary and psychoanalytic writings.

The attempt to apply analysis in a general way to a work of art can only result in uninteresting conclusions or in the refinding of some bit of analytic theory. This is the well-known problem of reductionism relating to issues of boundary. How can one discipline relate to another without appropriating it? The first task lies in the search for an organizer or a point of entry into the work. What are the questions which analysis, in contrast to other systems of literary criticism, is in a position to answer in regard to a specific work?

A prerequisite is a thorough and sensitive reading which will serve as a manifest text and provide a basis for evaluation. This reading must be understandable and able to be challenged by informed readers. Only then are we in a position to select a point of entry into the work. If an attempt is made to relate the novel to the author, a detailed knowledge of the author's life, including his or her particular circumstances around the time of the composition of the work in question, is required. If I may be allowed an analogy, the work can be seen both as a symptom and as a character trait. As a symptom, it might be said to express some particular state the author is in at the time of its composition—as the result of a loss, for example, or of a major developmental step, such as marriage. As a character trait, it might reveal the author's customary habits and the unconscious fantasies which inform them. These would permeate typical narrative sequences and shape stylistic and formal aspects of the work. The possibility that there is no demonstrable relation between the life and the work is not really tenable in a literary piece. Klee (see Thomas, 1990) has suggested that an artist's work is related to his life in much the same way that a tree's

branches are related to its roots. In both instances, there is an obvious causal connection, which is nevertheless difficult to analyze.

The length of *As I Lay Dying* precludes my being able to give in detail an account of the aforementioned "sensitive reading." I will instead briefly summarize those aspects of the plot necessary for the arguments to be made later.

The narrative concerns the events following the death of Addie Bundren and the conflicts and difficulties posed by her request to be buried with her family of origin rather than with her husband's. (I am excluding for the moment the one chapter in which she is still alive.) Her family is forcibly brought together for the trip, which becomes an odyssey of suffering, with multiple tragedies. The narrative is frequently interrupted by passages in an authorial voice dealing with problems of identity, death, fatality, and time, and the relationship between something and nothing. Sentences are often broken off in the middle, the subject is not always clear, and pronouns are purposely confused. The text includes a few concrete illustrations—a line drawing of a coffin, for example, and a blank space in the middle of a sentence. Some passages are in italics, reflecting the speech or musings of another character, not always specified, but generally from the recent past. There are occasional references to characters from previous novels, including horses which play a major role in both mirroring and expanding a character's mood or state of mind. The chapters, varying in length from one sentence to several pages, are assigned to different narrators, including members of the Bundren family and some neighbors.

I will now turn to my first category, "the case history approach." The characters belong to lower-class hill people with very limited capacity for introspection, or for communicating emotions. Their reliability as narrators is often questionable. There is no development of character as a result of the action, and the interaction between the family members is at a bare minimum—often at a nonverbal level. Thus, the critic's tradi-

tional pursuit of character development bogs down because of the fragmented nature of the work. Perhaps we can better enter the novel by asking how and by what means the author has succeeded in involving us in an intensely human and moving experience, one in which we empathize with the tragic fate of the family. This would involve a consideration of my second approach.

I believe this can best be done through an examination of some aspects of the author's style. In a beautiful passage, the adolescent daughter, Dewey Dell, has made love with Lefe at the end of a cotton row in the field, and she describes her realization that her brother, Darl, was aware of the event.

It was then, and then I saw Darl and he knew. He said he knew without the words like he told me that ma is going to die without words, and I knew he knew because if he had said he knew with the words I would not have believed that he had been there and saw us. But he said he did know and I said "Are you going to tell Pa are you going to kill him?" without the words I said it and he said "Why?" without the words. And that's why I can talk to him with knowing with hating because he knows (p. 24).

The repetition of "he knew" and of "without the words," like a musical refrain, intensifies the nonverbal dialogue; although there is no mention of facial expressions, one senses gazing and a barely restrained affect of a primitive sort. The special quasi-incestuous closeness between brother and sister is obvious. The emphasis of the nonverbal over the verbal channel of communication poses a special challenge for the application of analysis, which relies so heavily on spoken dialogue.

The text itself does not yield its meaning readily. In fact, one aspect of Faulkner's style here, as elsewhere in his work, is the deliberate withholding of meaning: Faulkner tends to delay disclosure and to cultivate ambiguity and obscurity. The narrative action often remains fluid, ill defined. He uses repetitions to

create a special language (reminiscent of Gertrude Stein's work), as in his rendering of Vardaman's consciousness. After learning of his mother's death, the little boy, Vardaman, is overtaken by a combination of feelings, including helplessness and rage. His universe is fragmenting. In a semi-dream state he relives his version of the death. "I can hear the bed and her face and them and I can feel the floor shake when he walks on it that came and did it. That came and did it when she was all right but he came and did it" (p. 49). Vardaman runs to the barn: "Then I can breathe again, in the warm smelling. I enter the stall, trying to touch him, and then I can cry then I vomit the crying. As soon as he gets through kicking I can and then I can cry, the crying can" (p. 49).

Clearly, no eight-year-old boy would speak this way. Some critics, taking a very concrete stance toward the text, have even suggested that the boy is slightly retarded. Through poetic repetition Faulkner is able to evoke the sorrow of a latency child full of rage and tears, so agitated and yearning so for his lost mother that he cries and vomits at the same time. It is not immediately clear whether the breaking up of the syntax in this passage is primarily an aspect of the author's experimental style, or whether it is meant to convey psychological significance—for example, the graphic portrayal of the distraught state of a child so disorganized by grief that he can only play with words as objects rather than as conveyors of meaning.

To continue with the examination of Faulkner's style, I would like to give an example of an extreme use of condensation. This mechanism is typical of dream formation and is related to what Freud called the primary process, a mode of functioning of the unconscious. In the final part of the same "Vardaman" chapter, Faulkner writes:

It is dark. I can hear wood, silence: I know them. But not living sounds, not even him. It is as though the dark were resolving him out of his integrity, into an unrelated scattering of components—snuffings and stampings; smells of cooling

flesh and ammoniac hair; an illusion of a co-ordinated whole of
spotched hide and strong bones within which, detached and
secret and familiar, an *is* different from my *is* (p. 52).

Vardaman as character is abruptly replaced by the author/
narrator interpreting Vardaman's experience for the reader.
This section ends by returning to Vardaman, who says, "I am
not afraid. Cooked and et. Cooked and et."

Let us stay with this remarkable condensation, repeated twice
for emphasis after the reassuring presence of the horse and the
statement, "I am not afraid." What is Faulkner conveying here?
On a manifest level it refers to the fish which Vardaman caught
and brought home in an earlier chapter, just before his mother
died. Instead of being praised for his catch, he was told by his
angry father to take it out and clean it. The fish was described by
Vardaman as "cut up into pieces of not-fish now, not-blood on
my hands and overalls. Then it wasn't so. It hadn't happened
then. And now she is getting so far ahead I cannot catch her" (p.
49). The fish becomes a concrete representation of the lost
mother. This is confirmed in the shortest chapter, which runs
"My mother is a fish" (p. 74). The little boy feels in some way
responsible for his mother's death. Vardaman describes the
mysterious process wherein something becomes nothing, deny-
ing the blood on his hands. Full of love for his mother, he wants
nothing more than to catch up with her, be with her, and find
comfort in her. But "cooked and et" also conveys an image of
incorporation consistent with the little boy's desperate clinging
to some aspect of the mother who has just left him. While the
manipulation of viewpoint does violence to our concept of re-
ality, the effect produced is one of utmost emotional reality and
immediacy. On an allegorical level, some critics have suggested
a link between the fish and the early symbol of Christ as a fish.
Both are killed and ritualistically ingested to prevent the death
of the believer. This religious meaning is psychologically con-
sistent with fantasies of incorporation which Vardaman demon-
strates in his childish conception of grief. Other religious sym-

bolts in the novel include the three days during which Addie Bundren lies in the coffin before the beginning of her final journey.

At this point I have not addressed the core person in the novel—Addie Bundren, whose failure to control her own fate while living is compensated for by her capacity to bring her family together after her death. In the central chapter of the book, in which she is the narrator, time is reversed, creating an uncanny feeling in the reader. What is most impressive is the recurrent theme of the inability of words to convey the richness of intended meaning, a central idea in this book, expressed in one way or another by each character. A related idea is the aloneness of each member of the clan, an aloneness totally unbridgeable except by such concrete means as physical violence—for example, switching. When Addie finds herself pregnant with Cash, she says to herself: “That was when I learned that words are no good; that words dont ever fit even what they are trying to say at” (p. 157). And a bit later, she continues, in an obscure passage: “I knew that it had been, not that they had dirty noses, but that we had had to use one another by words like spiders dangling by their mouths from a beam, swinging and twisting and never touching, and that only through the blows of the switch could my blood and their blood flow as one stream” (p. 158). This last sentence is confusing. “Dirty noses” is a brief flashback to the children in her class who received the blows of her switch, but the metaphor of the spiders condenses images of isolation, of prey, and of the role of hatred in fostering contact. The concreteness of Addie’s conception of identity is remarkably conveyed in the following monologue about her husband:

Why are you Anse. I would think about his name until after a while I could see the word as a shape, a vessel, and I would watch him liquify and flow into it like cold molasses flowing out of the darkness into the vessel, until the jar stood full and motionless: a significant shape profoundly without life like an empty door frame; and then I would find that I had forgotten the name of the jar. I would think: The shape of my body

where I used to be a virgin is in the shape of a and I
 couldn't think *Anse*, couldn't remember *Anse* (p. 159).

If a patient were talking this way, we would surely be struck by the sequence of associations—first, the concrete representation of Anse's name as a vessel, the man represented as filling the vessel, yet lifeless and empty, his identity denied; then a sudden move to thinking about herself as a container, and the state of virginity graphically represented in the text by an empty space. What is the relevance for the author of such primitive-sounding imagery? Does it represent a product of regression in the service of the ego during creativity? Or does it indicate some pathologic state in his mental economy, with a too ready availability of unconscious mental processes? Or are we to see it primarily as a meticulously planned passage echoing the style of Joyce without any special psychological significance? It was Greenacre's opinion that artists have a greater capacity to be in touch with the more primitive aspects of their mental life than do other people. Another remark can be made about this central passage: the novel dwells insistently on the limits of language, and here the author resorts to an empty space to convey meaning. The reader is compelled to fill the space by naming it and is thus in the position of enacting what the function of Anse is for Addie—a space filler.

If the recurrence of questions about identity expressed on a concrete level by all characters is a consistent aspect of Faulkner's novels, we may be in touch with a matter of keen concern to the author. It is known that he changed the spelling of his name from Falkner to Faulkner, which may reflect, among other things, a concern about changing identity.

This leads me to the examination of some aspects of the relation of the novel to the author's life, starting with his circumstances during its composition. We are told that the novel was written in forty-six days. Faulkner had recently returned from his honeymoon with Estelle Franklin and had settled in Oxford,

Mississippi.³ The book was written mostly at night during his shift as supervisor in the university's power plant. The honeymoon had nearly ended in total disaster: both participants drank heavily, and Estelle had made an unsuccessful suicide attempt by walking into the Gulf of Mexico. She was saved by the intervention of a neighbor. A fragile young woman, Estelle soon realized that she came second to her husband's interest in his writing. At the time he wrote *As I Lay Dying*, Faulkner had already achieved some success with his previous novel, *The Sound and the Fury*. Every morning he would walk to his mother's house and have coffee with her, which some critics see as a sign of excessive closeness, a characteristic of all the Faulkner boys that is felt by some critics to be responsible for the animosity found in Faulkner toward women in general.

Any attempt to penetrate the author's private life is hindered by Faulkner's secretiveness. Jay Martin (1983) tells us that Faulkner did everything he could to hide his real interior life from the scrutiny of others. Choosing to write about a family whose members were unable to express their feelings in words and who related to each other only in limited ways is consistent with Faulkner's passion for secrecy. His own pronouncements about his work are, for the most part, not helpful to an interpretation of them. His opinions are often ambiguous and conflicting. When Malcolm Cowley asked Faulkner about the genesis of his stories, he received little help. Faulkner was evasive; he said they were not his own: "I listen to the voices; sometimes I don't like what they say but I don't change it" (Martin, 1983, p. 300).

This disowning of responsibility for one's own activity is typical of a number of characters in the novel, Anse and Dewey Dell in particular. Faulkner seems to have feared that his literary work might expose him, and so he claimed that he was not really

³ Most of these details about Faulkner's life are drawn from the recent biography by Frederick R. Karl (1989).

connected to it. However, such pronouncements need not spell the end of our endeavor as analysts. We know that the unconscious cannot be silenced; all we need is to develop the necessary technique to read how an author's unconscious mind betrays itself in his or her work. Like any other mental product, a work of art is a compromise formation, though the laws governing its genesis are, of course, different from those that apply to symptom-formation or to the genesis of a character trait. A work of art is more influenced by conscious choice, aesthetic considerations, and cultural factors than are mental structures. This is why we cannot assume that a particular trait or attitude found in a novel simply reflects a similar attribute of the author or of anyone close to the author.

As Blotner (1974) informs us, *As I Lay Dying* was started on October 25, 1929, the day after panic broke out on Wall Street. Faulkner stated, "I set out deliberately to write a tour de force. Before I ever put pen to paper, and set down the first word, I knew what the last word would be" (Blotner, 1974, p. 215). This suggests that the book may have been written to justify a particular ending, rather than to delineate the development of character.

This book was especially significant for Faulkner, judging by a letter to his editor: "By this book I will stand or fall" (p. 216). Blotner raises the question of whether the rapidity of the writing—unusual for Faulkner—was due to the fact that there existed earlier versions of most of the story. This does not appear to be the case, however. The episode of the spotted horse is found in two short stories: one is titled "Father Abraham," and the second appears to be a fragment (a 17-page surviving segment of 203 lost pages), titled "As I Lay Dying." Why this title, based on a line from Homer's *Odyssey*, was chosen for the brief segments is even more obscure than in the case of the novel. In one possible connection with Homer, Mrs. Armstid's eyes were described as dog's eyes—a clear if indirect reference to Homer, but scarcely enough to explain the use of this title. There may be some flimsy narrative connection between the short stories and

the novel. The short story, "As I Lay Dying," ends as follows: "... she descended the steps and went down the road: a figure that progressed without motion like a blasted tree trunk moving somehow upright upon a flood" (McHaney, 1987, p. 38). In any event, the title was obviously already in the author's mind, available for use in the future.

What can be learned from the literary origin of the title? It comes from the section of Homer's *Odyssey* that deals with Odysseus' trip to the Underworld. The dead Agamemnon complains that his cruel wife would not close his eyes as he descended into Hades. He says: "As I lay dying the woman with the dog's eyes would not close my eyelids for me as I descended into Hades" (see Karl, 1989, p. 386). Could the title refer to the privileged vision of the poet as he penetrated the dark confines of a domain both awesome and fearful, a descent into his own underworld of fantasy and fears? Is there a personal meaning to Faulkner of the murder of Agamemnon, a man killed by a woman? Of possible relevance is the fact that in a brawl Faulkner's father, Murry, was shot in the middle body, face, and back; as Karl (1989, p. 50) informs us, "Murry lay in this state—not dying, but not really in a position to live." He was rescued by his own father and nursed by his mother. Also, Faulkner suffered a near fatal attack of scarlet fever at age four, according to a local paper.

To consider another approach to the meaning of this title, Bleikasten (1990) studied the grammatical and textual significance of the words. He pointed out that this title is from another text; intertextuality is already at work. The wording contains a riddle; the sentence is incomplete. Who is the "I"? Is it Addie, or the author, or even the reader? If Addie, does the novel serve as a kind of Scheherazade series of tales? Since some of the chapters are very brief, is the title from the first chapter? Why the use of this particular tense? Bleikasten aptly concludes that "what the novel is concerned with is not so much death as the process of dying. . . . *As I Lay Dying* works from the start with the double paradox of a dying life and a living death" (p. 164).

Continuing the relation of the novel to its author, can we demonstrate a connection between Faulkner's personality and that of his characters? One of his attributes deserving special mention is that of imposture, which is well illustrated in his behavior following rejection at the hands of Estelle, whom he later married. He had gone as far as to give her a ring. When she announced that she no longer loved him and was planning to marry an officer (this was apparently done under pressure from her family, which disapproved very much of the marital plans), Faulkner determined he would become an officer himself. He hoped for some feats of glory and heroism. Unfortunately, the end of World War I interrupted the air force training he had initiated some four months before. Faulkner returned home with a limp and began to make up stories which became more elaborate with each new telling, about a plane crash and a near fatal injury. The limp disappeared after some time, only to reappear under stress or when Faulkner was trying to impress women. He made up stories about war exploits, and he wore unearned pilot's wings. His life was thus colored by the enactment of certain fictive elements. Other traits attributed to Faulkner by those who have written about him include passivity, dishonesty, and a certain slipperiness of identity and morality. All of these can be found in the Bundren family, including Anse. Could we imagine what the author's personal attitude is toward those very undesirable traits he so successfully caricatured in Anse?

There is another trait of Faulkner which may be of relevance to the form of the novel. Martin (1983) tells us that Faulkner "seems to have wanted to deny that he was a single person because he wanted to express his impulses but he also wanted to keep himself blameless for dealing with the primitive stuff of his unconscious mind" (p. 301). What better way to do this than to split the narrators into many fragments and to interrupt the narrative at frequent intervals.

Can we possibly discover which of the many narrators in the novel the author feels most in sympathy with? Can our own reaction to the text be of help? This question will allow me to

develop the relevance of the reader's reaction as an aid to the analysis of the novel (my fourth approach). This resembles the role that the analyst's affects may play in providing clues about what is going on in the patient's mind.

I would like to focus on a character whose identification with Faulkner has not been emphasized, at least in the critical literature I have consulted. While reading the reactions of the little boy, Vardaman, to his mother's death, I found myself very moved by the boy's experience, and I hypothesized that the author's aesthetic distance from Vardaman was much less than in the case of the other characters. I sensed a closeness and a sympathy between the author and the little boy, particularly during the scene in which Dewey Dell discovers him in the stall. The odors of the horse, the warmth of the semi-dark place, and certain unusually vivid descriptions of the animal suggest a special significance to the author. In this chapter about the horse, Faulkner writes: "The life in him runs under the skin, under my hand, running through the splotches, smelling up into my nose where the sickness is beginning to cry, vomiting the crying, and then I can breathe, vomiting it" (p. 50). Does it make sense to assume that Faulkner has projected some of the more primitive and personal elements of himself onto that unhappy little boy? To flesh this out, one would have to come up with evidence, such as an especially meaningful image of the author's childhood connected with Vardaman, perhaps a secret known only to him.

I believe I may have stumbled upon such an element by chance. While reading the Martin (1983) article on Faulkner, I came across the following: "While William was growing up, his father owned and managed a livery stable—messy, fragrant, full of filth" (p. 313). Although we are told that, by and large, William adopted his mother's rather negative picture of his father, could it be that the imagery of the horse and stall encapsulates the author's secret love and search for a father who did not make it easy for a little boy to approach him, being either cold, hostile, or conspicuously drunk, passive, and disorderly?

Near the end of the same Vardaman chapter is the obscure

sentence, "I can see hearing coil toward him, caressing, shaping his hard shape—fetlock, hip, shoulder and head; smell and sound." And then, "I am not afraid" (p. 52). Is it plausible that the touch and smell of the horse, so comforting to the frightened child, reflects the author's personal experience with or fantasy about objects associated with his father? Thus, rather than being markers of anal imagery, as some authors with a psychoanalytic bent emphasize, such episodes may encode Faulkner's secret closeness to his father. That the images are expressed in the language of odors and filth is of secondary importance.

Is it possible that Faulkner is disturbed by the outpouring of emotions in this chapter? I was struck by the sudden interruption of the Vardaman narrative by the narrator's intruding himself in what seemed a jarring and aesthetically inappropriate fashion to "explain" what was happening to Vardaman. "It is as though the dark were resolving him out of his integrity, into an unrelated scattering of components—snuffings and stampings . . ." (p. 52). While reading this passage, I was reminded of certain supervisees who suddenly shift from describing a session with a patient to very technical jargon; almost invariably this shift denotes some uneasiness or conflict in the supervisee. Should my observation about this passage be agreed upon, we could raise the same question about Faulkner. One possible objection to my argument might be that such interruptions in the course of the narrative are frequent in this novel; however, the break in mood and rapid shift in point of view remain striking and possibly deserving of a psychological explanation.

Before concluding, I would like to turn to one other approach which may reveal a great deal about the meaning of a text. A colleague, Dr. Theodore Cherbuliez, and I have been collaborating on examining in great detail the first five minutes of patient hours, including what we have come to call the static—i.e., all the words which are not essential to the conveying of meaning. We have discovered that what we choose to call "static" is purely arbitrary and that the nonessential words can

become the focus of attention and be very revealing about the structure and meaning of the patient's narrative. In similar fashion I have chosen to examine the first chapter of *As I Lay Dying*. It presents the reader with a number of problems and challenges. To a naïve reader, the author says a great deal which will be understandable only later, in retrospect. Freud once believed that the first dream in an analysis often encapsulated the core aspects of the patient's neurosis. Could the same be true of a novel's first chapter? With this in mind, let us turn briefly to a close look at the structure and content of this first chapter, given over to Darl as narrator (see Appendix for text).

At first glance the content of the chapter appears sparse, with few unnecessary words. We see two people coming up a path single file to a cottonhouse. One goes through a window and out the other side. The other comes around. They pass a wagon and drink; beyond it one hears someone named Cash making a box which turns out to be a coffin for someone called Addie Bundren. Several readings are required to detect a number of features. Not a word is exchanged between the participants, yet the chapter is full of sensory modalities—visual, kinesthetic, and auditory. There is no obvious leader. The choreography is quasi-military in its precision. This is reinforced by references such as “straight as a plumb-line,” “square,” “right angles.” The behavior of Jewel and Darl is remarkable in its well-defined distance keeping—their stride is unchanging, in perfect synchrony though they do not speak to each other. A relationship of close watching exists. A mood is created of repetition, monotony, and aridity; no emotions are displayed on the surface. The atmosphere changes dramatically as Darl sees Cash, whose planks have a human quality (“soft gold, bearing on their flanks . . .”). Cash is completely and single-mindedly involved in his task with loving concern. The rhythm of life alluded to by the path “worn so by feet in fading precision” (a strange, ambiguous image: are the feet in fading precision or is the path?) is echoed by the concrete representation of the sound of the adze, chuck-chuck-chuck, following Darl as a reminder of the coming death

of Addie. The theme of comfort and confidence is expressed with muted sarcasm. This final sentence is choreographed in the text, reinforcing the continuing yet diminishing sound.

Death is introduced casually, without fanfare or emotion. This aspect is reflected in the description of objects which have had much use (the hat, the cottonhouse). Their state of breakdown is described factually as though this is their destiny. Jewel, who appears dead in the upper part of his body, is endowed with life from the hips down. This includes the genitals and brings me to the primal scene imagery and scenes of generativity, often sadistic in nature, which abound in the novel and in which the reader finds sexual innuendoes unexpectedly thrust upon him or her by the author.

The relation between life and death is entwined in the imagery of wood which recurs several times in unexpected settings. First, the cottonhouse made of logs "leans in empty and shimmering dilapidation," suggesting a dreamlike quality; then we see Jewel, "his pale eyes like wood set into his wooden face." Later we are told of the planks of the coffin, "yellow as gold, like soft gold, bearing on their flanks in smooth undulation the marks of the adze blade." Wood is an image of decay, but also of life, including a necrophilic fantasy: the mother will be carried in comfort and confidence inside a living thing of flesh (flanks).

Still other elements can be singled out. The first paragraph introduces two different perspectives, a precursor of the multiple narrators of the work. A contrast also emerges between structure and looseness, fragmentation and synthesis. The author introduces details, withholding their significance until much later. In one example, mention is made of Jewel's stopping at the spring to take a gourd from the willow tree and drinking. Much later, in the Addie chapter, we learn about Jewel's special relation to his mother and the role that a spring had for her: "In the afternoon . . . instead of going home I would go down the hill to the spring where I could be quiet and hate them. It would be quiet there then, with the water bubbling up and away . . ." (p. 155). In another example the image of Jewel

starting behind Darl and coming out several feet ahead of him is consistent with the fate of the two brothers at the end of the novel. Jewel, the half crazy and violent wild one, remains part of the family as Darl is carried away in a psychotic state. The void in inner life is compensated for by minute description of body posture, movements, and inanimate objects. The lack of narrative does not interfere with the poetic evocation of powerful themes of fate, life, and death. By juxtaposing rich and unexpected adjectives and metaphors, Faulkner creates a halo effect—the evocation of new meanings through suggestion. This may be one of the most powerful stylistic devices of the novel.

The first chapter also introduces the core of the novel, its preoccupation with death and the conflict about burying and not burying Addie. Anna Burton (personal communication) has suggested that the entire saga of the family's encountering one obstacle after another in its ill-planned efforts to return Addie to her father's burial grounds was reminiscent of certain dreams which present a task that is sought after but then delayed by one obstacle after another. This reflects the dreamer's ambivalence about the task at hand. The Bundren family has an unusual capacity to delay the mother's burial and deny the stench, decay, and suffering thereby engendered. Yet, Addie's death is not mourned for a long time, as Anse somewhat sheepishly introduces the new Mrs. Bundren to the assembled clan.

To summarize, psychoanalysis is the study of mental life from the point of view of conflict, development, and transformation of psychic structures. Although it is not designed primarily for the study of literary texts, I have tried to illustrate its value by combining a number of complementary approaches which do not do violence to the literary aspect of the work yet provide some additional insights which can increase our understanding and our pleasure. When utilized together, these approaches do provide mutual checks and balances, help create a fuller context, and increase our chances of discovering meaningful organizers so that our endeavors will enrich our appreciation of great works such as *As I Lay Dying*.

APPENDIX

CHAPTER ONE, "DARL," FROM *AS I LAY DYING*,
BY WILLIAM FAULKNER*

Jewel and I come up from the field, following the path in single file. Although I am fifteen feet ahead of him, anyone watching us from the cottonhouse can see Jewel's frayed and broken straw hat a full head above my own.

The path runs straight as a plumb-line, worn smooth by feet and baked brick-hard by July, between the green rows of laidby cotton, to the cottonhouse in the center of the field, where it turns and circles the cottonhouse at four soft right angles and goes on across the field again, worn so by feet in fading precision.

The cottonhouse is of rough logs, from between which the chinking has long fallen. Square, with a broken roof set at a single pitch, it leans in empty and shimmering dilapidation in the sunlight, a single broad window in two opposite walls giving onto the approaches of the path. When we reach it I turn and follow the path which circles the house. Jewel, fifteen feet behind me, looking straight ahead, steps in a single stride through the window. Still staring straight ahead, his pale eyes like wood set into his wooden face, he crosses the floor in four strides with the rigid gravity of a cigar store Indian dressed in patched overalls and endued with life from the hips down, and steps in a single stride through the opposite window and into the path again just as I come around the corner. In single file and five feet apart and Jewel now in front, we go on up the path toward the foot of the bluff.

Tull's wagon stands beside the spring, hitched to the rail, the reins wrapped about the seat stanchion. In the wagon bed are

* Copyright 1930 and renewed 1958 by William Faulkner. Reprinted by permission of Random House, Inc.

two chairs. Jewel stops at the spring and takes a gourd from the willow branch and drinks. I pass him and mount the path, beginning to hear Cash's saw.

When I reach the top he has quit sawing. Standing in a litter of chips, he is fitting two of the boards together. Between the shadow spaces they are yellow as gold, like soft gold, bearing on their flanks in smooth undulations the marks of the adze blade: a good carpenter, Cash is. He holds the two planks on the trestle, fitted along the edges in a quarter of the finished box. He kneels and squints along the edge of them, then he lowers them and takes up the adze. A good carpenter. Addie Bundren could not want a better one, a better box to lie in. It will give her confidence and comfort. I go on to the house, followed by the

Chuck. Chuck. Chuck.

of the adze.

REFERENCES

- BAUDRY, F. (1984). An essay on method in applied analysis. *Psychoanal. Q.*, 51:551-581.
- BLEIKASTEN, A. (1990). *The Ink of Melancholy. Faulkner's Novels from "The Sound and the Fury" to "Light in August."* Bloomington/Indianapolis: Indiana Univ. Press.
- BLOTNER, J. (1974). *Faulkner: A Biography*. Two volumes. New York: Random House.
- FAULKNER, W. (1930). *As I Lay Dying*. New York: Vintage, 1987.
- KARL, F. R. (1989). *William Faulkner: American Writer*. New York: Weidenfeld & Nicolson.
- MARTIN, J. (1983). William Faulkner: construction and reconstruction in biography and psychoanalysis. *Psychoanal. Inquiry*, 3:295-340.
- McHANEY, T., Editor (1987). Manuscript 7. *As I Lay Dying*. In *William Faulkner Manuscript Series*. Noel Polk, General Editor. New York/London: Garland Publishing.
- SKURA, M. (1981). *The Literary Use of the Psychoanalytic Process*. New Haven: Yale Univ. Press.
- THOMAS, W. (1990). Karl's Darl. *London Review of Books*, January 11.

9 East 96th St.
New York, NY 10128

An Analyst's Slip of the Tongue

Warren S. Poland

To cite this article: Warren S. Poland (1992) An Analyst's Slip of the Tongue, The Psychoanalytic Quarterly, 61:1, 85-87, DOI: [10.1080/21674086.1992.11927336](https://doi.org/10.1080/21674086.1992.11927336)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927336>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



Citing articles: 1 View citing articles [↗](#)

AN ANALYST'S SLIP OF THE TONGUE

BY WARREN S. POLAND, M.D.

She was known for her limitless kindness, a woman to whom everyone turned because of her readiness to help, never to refuse. When she came for analysis, she knew how different were her public softness and her private sense of pervasive but shapeless discontent. Quite sophisticated, she spoke from the start of an intellectual knowledge that her tics must be connected to repressed rage. Indeed, with her determined commitment to analyzing, that intellectual knowledge slowly and with difficulty moved to an ever-expanding emotional insight.

In conflict over expressing any of her impulses toward autonomy, she suffered with an underlying fantasy that to have something for herself was to betray others. It was as if there were in the world a finite amount of whatever was good, as if her having more meant someone else's having less (see Modell, 1965). Her inhibited anger toward others became the leitmotiv of our work.

As this theme was repeatedly exposed and explored, first outside the transference and then within, I felt the occasion to interpret, as I had before, what was becoming increasingly clear to both of us. "Here again," I said, "when you have an urge to do it your own way, even start to feel having your own idea, a mind of your own, you feel you are betraying the other person and killing yourself, I mean, the other person."

It was *my* slip that substituted herself for the other as the object of murderous impulses. We had long ago known that undoing of herself was the result of her pattern, but we had not before directly focused on the self-punishing quality as a derivative wish in its own right. When I made my slip, I had not been thinking consciously of aggression turned against herself.

Hearing my slip, I recognized the vague background of un-

spoken depression which had never taken full shape as we had heard about inhibited anger.

I heard my slip and I called *her* attention to it. She, too, had heard it and felt surprised and initially confused. When I asked about it, she proceeded to speak of fantasies of her own death, fantasies that in the subsequent nights also appeared increasingly in association to and then in the manifest content of her dreams.

My interest now is not in the specifics of her dynamics but rather in the place of my slip of the tongue in our unfolding collaborative inquiry. A model of the analyst's ideal mastery might seem to limit such slips only to parapraxes primarily determined by the analyst's neurotic pressures. Indeed, it is valid to consider that were I not inhibited by a personal conflict, my recognition of this aspect of her psychology that was newer to our attention could have been reflected upon by me and then clearly stated.

The validity of that observation, however, rests in the context of the awesome multiplicity of forces at work during an analysis. So very much presses for expression at once! The effort for technical precision is like the labor of steering while riding on a tidal current. Neurotic transference and countertransference forces are exactly what require dealing with by good technique; their mastery is the primary aim of analysis.

Yet the goals of expression, exposure, and understanding carry their own forward power for both analyst and analysand. There is no question of an exception to the basic rule, that of putting it into words. However, issues at times begin to be heard and even understood before they are known to have been heard. In this instance, if it were my own personal repression that had been mainly responsible for my not having addressed more directly at that moment the patient's turning her aggression against herself, then it does not seem likely I would have been able to hear and accept consideration of my slip without great resistance.

At times the analyst hears emerging trends unconsciously be-

fore turning to them consciously. Any slip of the tongue calls for personal examination for its personal unconscious significance. Nonetheless, as Olinick (1980) has noted, often at important moments in analytic progress the analyst's own slips can be heard expressing themes emerging in the patient, themes ready to be noticed but until then not yet explicit.

REFERENCES

- MODELL, A. H. (1965). On having the right to a life: an aspect of the superego's development. *Int. J. Psychoanal.*, 46:323-331.
- OLINICK, S. L. (1980). *The Psychotherapeutic Instrument*. New York/London: Aronson.

5225 Connecticut Ave., NW
Washington, DC 20015

New Foundations for Psychoanalysis. By Jean Laplanche. Translated by David Macey. Cambridge, MA/Oxford: Basil Blackwell, Ltd., 1989. 176 pp.

Gerald I. Fogel

To cite this article: Gerald I. Fogel (1992) New Foundations for Psychoanalysis. By Jean Laplanche. Translated by David Macey. Cambridge, MA/Oxford: Basil Blackwell, Ltd., 1989. 176 pp., The Psychoanalytic Quarterly, 61:1, 91-136, DOI: [10.1080/21674086.1992.11927337](https://doi.org/10.1080/21674086.1992.11927337)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927337>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



Article views: 2



View related articles [↗](#)

BOOK REVIEWS

- BIANCHI, HENRI: *L'Identité psychosomatique: une approche par la théorie générale des systèmes*. Reviewed by Edward Nersessian. 114
- CHERTOK, L., and STENGERS, I.: *Le Coeur et la raison—l'hypnose en question de Lavoisier à Lacan*. Reviewed by James Naiman. 122
- FIUMARA, GEMMA CORRADI: *The Other Side of Language: A Philosophy of Listening*. Reviewed by Ana Maria Rizzuto. 123
- Jahrbuch der Psychoanalyse: Beiträge zur Theorie und Praxis*, Band 23. Reviewed by Albrecht Kuchenbuch. 127
- Jahrbuch der Psychoanalyse: Beiträge zur Theorie und Praxis*, Band 25. Reviewed by Ernest S. Wolf. 133
- LAPLANCHE, JEAN: *New Foundations for Psychoanalysis*. Reviewed by Gerald I. Fogel. 91
- MACEY, DAVID: *Lacan in Contexts*. Reviewed by John P. Muller. 109
- MC DOUGALL, JOYCE: *Theaters of the Body: A Psychoanalytic Approach to Psychosomatic Illness*. Reviewed by Howard B. Levine. 98
- MC DOUGALL, JOYCE; MANNONI, OCTAVE; VASSE, DENIS; and DETHIVILLE, LAURA: *Le Divan de procuste: le poids des mots, le mal-entendu du sexe*. Reviewed by Antoine G. Hani. 104
- OLINER, MARION MICHELE: *Cultivating Freud's Garden in France*. Reviewed by Daniel Jacobs. 120
- ROUSTANG, FRANÇOIS: *The Quadrille of Gender: Casanova's 'Memoirs.'* Reviewed by Gail S. Reed. 101
- VON BENEDEK, LISBETH: *Le Travail mental du psychanalyste*. Reviewed by James Naiman. 116

BOOK REVIEWS

NEW FOUNDATIONS FOR PSYCHOANALYSIS. By Jean Laplanche. Translated by David Macey. Cambridge, MA/Oxford: Basil Blackwell, Ltd., 1989. 176 pp.

Those who rely, as I do, on *The Language of Psychoanalysis*, by Laplanche and Pontalis, for useful information about classical Freudian concepts, will approach *New Foundations for Psychoanalysis*, by Jean Laplanche, as I did—with high expectations. I was not disappointed. There are differences between Laplanche on his own and the partnership that introduced me to this influential French theorist, but this work has qualities I admired greatly in the other: daring, sometimes dazzling intellect and fresh vision; scholarly rigor; critical re-examination of, but also mastery and deep respect for Freudian theory; fluency in current trends in science and the humanities; passion, precision, and—wonder of wonders—wit and succinctness as well.

The book has three sections. First, Laplanche critically reviews, elegantly and imaginatively, major trends in psychoanalytic theory from both modern and historical perspectives. Second, he presents his own views and attempts, successfully I think, to show how his ideas logically extend and deepen Freudian theory. Finally, he discusses the implications of his ideas for analytic practice. Few will agree with all he suggests, but any who enjoy thinking about psychoanalytic ideas and the relation of theory to practice will find much that is interesting and useful in this relatively short, but densely packed volume.

Laplanche's brilliance and love of the elegant phrase, or the penetrating or deflating metaphor that is just so, can approach arrogance or mere cleverness; his wit sometimes becomes sarcasm verging on contempt. Pontalis may curb these tendencies when they co-author. The tone may put some readers off, especially if a dearly held belief is under scrutiny. Psychoanalysis as a natural science or a general psychology, "adaptation," the reality principle, American ego psychology, and Freud's errors, for example, are prime targets for his witty, sometimes derisive (though often telling and precise) criticism. But I suspect that one should not take his tone too personally. Laplanche represents a style within the French academic

tradition that is highly regarded and rightly so. If he sometimes skewers such things as English “emperio-clinicalism” or American adaptationalism, he is equally merciless with excesses or limits in those closer to home—Lacanian, for example—or any too wild or too tame analysts, wherever he finds them.

So do not be put off. His profound influence in Europe is widely known, and many of his works have not yet been translated into English, so this effort to summarize and systematize his ideas in one volume (in a straightforward and highly readable translation) is most welcome. Reading it, I can imagine that many of the original, provocative, and unusual ideas (at least for theoretical traditionalists, be they ego psychologists or object relations theorists) in *The Language of Psychoanalysis* may be Laplanche’s. I refer to the essays on such Freudian concepts as the *scene of seduction*, *deferred action*, *anaclysis*, *auto-erotism*, *phantasy*, and *primal phantasies*. Now I see that these sections of that book were like uncommon tastes at a meal that only *appeared* to conform to a traditional menu. The less familiar elements contained in these discussions hinted, however, that there were major influences in the overall approach—Lacanian ideas, for example—that were far from traditional. It may be that Laplanche was the partner more responsible for the daring and imaginative *breaks with*, and Pontalis for *preserving*, scholarly Freudian tradition. I say this because many of these more exotic ideas, ones that seemed merely interesting and unusual there, provide the central structure of Laplanche’s own system—a sweeping attempt to reformulate and reintegrate the conceptual foundations of psychoanalytic theory and practice, top to bottom.

A major premise is that psychoanalysis *is*, that psychoanalysis *exists*. Laplanche means to stress that it exists in its own right, that neither the data base of psychoanalysis nor the conceptual premises that organize it can be derived from or reduced to any other frame of reference; *psychoanalysis* needs neither justification nor explanation in other terms to give it legitimacy. This has been said before, but often to assert the primacy of clinical analytic experience in a more narrow sense than Laplanche intends. He believes that what some call clinical empiricism often is one more form of reductionistic thinking, one that ignores the actual profundities and universals of psychoanalysis. Clinical data can never actually ever be separated from analytic methodology and theory.

Laplanche states that, first, the “object” of psychoanalysis is that which is grounded in the fundamental rule and the analytic situation. Additionally, he insists that the “object of psychoanalysis is not the human object in general. It does not deal with ‘man,’ a concept which can be defined by many other sciences. . . .” He goes on (p. 10):

Any epistemology or theory of psychoanalysis must take account of the very basic fact that the human subject is a theorizing being and a being which theorizes itself, by which I mean that it is a self-theorizing being or, should the term ‘theorize’ seem too intimidating, a self-symbolizing being. The symbolization which comes to the human subject during treatment, the interpretations or self-interpretations, and the play of interpretation between analyst and analysand, are a re-symbolization based upon earlier symbolizations, upon primary symbolizations, and our search for foundations necessarily involves us in a search for traces of those symbolizations.

Though he does not use the term much, Laplanche characterizes a *process* here, and claims that the *structural characteristics* of that process uniquely define psychoanalysis. A field wider than the clinical psychoanalytic situation is defined, but one that is clearly demarcated from other disciplines.

Laplanche classifies four “sites” of the psychoanalytic experience. Clinical treatment is one site, of course. “Extramural psychoanalysis” is a second. By this he means cultural experience. “Theory as experience” is a third. Laplanche argues eloquently for the vitality and importance of speculative thought as experience, the experiential validity of theory, the quest for basic concepts as a vital passion that, like Freud’s, carries real, objective weight in human affairs. Finally, there is “history as experience.” Laplanche asserts that the personal, social, and intellectual history of Freud and Freud’s theories has evolved and continues to evolve as treatment itself evolves, has an analogous structure, and therefore is an additional source for psychoanalytic data. None of these “sites” has primacy over nor can be reduced to another, just as other sciences may be “appropriated” by (or appropriate) psychoanalysis without reducing one to the conceptual primacy of the other.

Laplanche aims to unify a heretofore fractured and fractionated psychoanalysis, to heal the rift between theory and practice that, in his view, remains as a legacy of Freud’s too radical rejection of the seduction hypothesis and too great commitment to biology, mech-

anism, and the reality principle. These trends have undermined the radical, constantly endangered truths of infantile sexuality and the unconscious. He searches out new universals, new foundations—the bare conceptual essentials.

He lets go of much that others regard as essential, but usually preserves what we rely on clinically. The oedipus complex, for example, is no longer essential as *previously formulated*, but what replaces it sacrifices nothing clinically; it merely widens the *theoretical* frame, undermines a reductionistic usage. What is essential is children's encounter with the adult world—what children need and want from the adult world and how they come to understand what that world wants from them. This primal encounter becomes personal experience—creates a human “subject”—in a process that extends over time. There must be both an early and a later “scene” and an “enigmatic signifier”—usually a parent or parents—who supply the “original” or “primal” stimulus for the “founding” or “primal scene.” “Deferred action” supplies the necessary time frame and specifiable events that become the “entities” through which a historical process involving symbolization, translation, and resymbolization may occur.

Laplanche solves (others might say sweeps aside) heretofore unavoidable and unsolvable theoretical problems. Should transference be regarded as a displacement in linear space and time *or* as enactment *or* as real action in the here and now? Should the here and now *or* the reconstructive aspects of interpretation be privileged theoretically? Is a particular reported event thought *or* deed, memory *or* “fantasy,” imagined *or* “real”? Such questions become less relevant *within* this model, where psychoanalysis *exists*, yet does not claim to necessarily supersede or be superordinate to other models or disciplines. Within psychoanalysis, such questions lose relevance because of the linear-historical, either-or forms in which they have been cast; this form of questioning is more appropriate, for example, in an empirical scientific investigation, where the self-reflexive factor must be minimized. One might say that Laplanche substitutes an inevitable and unavoidable, but necessary dialectic for the implied search for certainty (in the either/or sense) dictated by an empirical-deterministic model.

The reasoning is close and at times overly dense. Laplanche's system cannot be called hermeneutic in the ordinary sense; inter-

pretation is central, but there is something beyond interpretation. A psychoanalytic "construction" cannot be equated to "myth"—something without tangible or practical reference—merely because it cannot be located concretely in linear space-time. Constructions can have specificity, weight, and substance. Psychoanalysis, like human beings and their creations, is meaning-creating; its symbol-transforming nature is central. But it deals not *merely* in symbols, if symbols are taken to mean there is a nonsymbolic something somewhere that is more real. Representation, motive, meaning, and actuality are not in separate realms of discourse in this model; fantasy, sexuality, and "scene" are conjoined. Although these elements are grounded in the "vitality" of human beings, and therefore linked to biology, psychoanalysis does not "exist" in the biological field. Where psychoanalysis exists, representational thought, fantasy, the primary process, and sexuality are constitutive, fundamental, but are also founded in real events. Laplanche would claim, if I understand him, that objective, external reality does not exist *in psychoanalysis*. He concedes, of course, that objective reality exists and is crucially important, but believes it is appropriated *by* psychoanalysis and therefore, in an important sense, does not fundamentally constitute it. Psychoanalysis in turn may powerfully influence and shape objective, material reality.

The concept of seduction is central. Laplanche, in fact, calls his theory the "general theory of seduction." The advantage of the term is its ability to contain "factuality" as well as "theorization," actual events as well as psychosexuality and the unconscious—the instincts and wishes of both parental prototypes and the child who will one day be analysand or "subject." The "primal" or "original" situation or seduction is the encounter of the child with the adult world, with the "enigmatic signifier," the parental prototypes, who must inevitably seduce (and be seduced). These figures can never be fully, concretely revealed directly to the child. They are unknowable because of their original omnipotence and the relatively resourceless infant's inability to articulate or integrate the fantasy and unconscious sexuality that the parents bring to the encounter.

It will be obvious that I regard 'primal seduction' as including situations and forms of communication which have nothing to do with 'sexual assault.' The *enigma* is in itself a *seduction* and its mechanisms are unconscious (p. 128).

In other words, this situation of seduction is inevitably shaped by

the unconscious fantasies and desires of the parents. "Precocious seduction" roughly corresponds to the preoedipal, the mother-infant dyad, and "infantile seduction" to the interactions and experiences of triadic object relations, what we ordinarily call oedipal. Further, the enigmatic nature of this early historical prototype is reproduced with inevitable intensity in the analytic situation. The analyst's "refusals" to discuss "adaptation" (not take a stance in the analysand's so-called real world or receive the delegated omnipotence of the analysand—not be the one who "knows") make the analyst both enigmatic and real, just as the parents were in the primal encounter.

A disadvantage of Laplanche's terminology is that it makes the phenomena under scrutiny appear more exotic and spicy (in the sense of a sexualization or dramatization) than they actually are, and it de-emphasizes the many points of contact, affirmation, and possible mutual enrichment that exist between his theory and the current thinking of many enlightened ego psychologists and object relations theorists. For example, in his critical review of prior theoretical positions, he dispatches biology, physiology, phylogeny, mechanistics and materialism, infant observation, and linguistics. Many of his arguments are imaginative, interesting, and useful. But many of us already think less mechanistically and reductionistically than he implies regarding the relationship of these fields to our own. In addition, his most pointed barbs are at those within psychoanalysis who profess the primacy of the "objectless state" and the "interactionalists." I cannot go into detail, but I believe that, in his own fashion, he is saying things that responsible mainstream American psychoanalysts and many others have been saying for many years (although not always for the right reasons) while warning of possible dilution or misrepresentation of psychoanalysis by object relations or self psychology schools. The experience-near terminology and antitheoretical bias of some proponents of these schools can be exploited to avoid unconscious conflict and infantile sexuality or to justify mutual enactment in analysis—wild analysis, or cures through love or suggestion—with a de-emphasis on the centrality of insight.

I mean to take no position here, as I am well aware of the valuable critiques and enormous enrichment of psychoanalysis by these schools. I only point out the ironic common ground in Laplanche's

stance and that of the very American ego psychology he sometimes sets up as his straw man. Laplanche's special gifts are his intellectual brilliance and talent for philosophical speculation. The danger, of course, is of libidinization of thought, of cleverness and a loss of rootedness in the concrete, the practical, the ordinary and mundane realities of life, including mundane psychoanalytic life. The ego psychology which he describes and of which he is so critical may, in turn, intellectualize or isolate—reduce human nature to mere rationality and reason, and human life to the realm of observable action and an empirical ideal. What these polarities—imagination and reason—have *in common* when they are enlightened, however, is the view that psychoanalysis rests on the primacy of thinking and knowing—on insight; feeling and action will demonstrate or affirm that thought and insight are not superficial or wanting, lacking neither imagination nor actuality; but self-reflection and understanding, when not considered in shallow or superficial usages, is the Freudian way.

In the brief closing section, where he talks of what his ideas imply for the practical task of analyzing, he also (like a good ego psychologist might do, but in his own way) asserts the need to contain and shape an analytic regression, of the formal structure that is necessary to facilitate and “contain” an actual psychoanalysis. Do I hear the ghost of Anna Freud cautioning Kleinians about the necessity to prepare a patient for deep interpretations, to deal with the surface before the depth, or of Freud cautioning Ferenczi about whether to draw the empathy line at holding hands or sitting on laps?

I have barely scratched the surface for you of this rich and richly evocative book. Like Loewald, Laplanche revisits and reinterprets Freud, revitalizing concepts that have fallen into disuse by reinvesting them with new meaning. He often imaginatively discerns phenomena or trends in Freud that are much more continuous with or relevant to important new ideas than had been apparent. For example, his understandings of Freud's self-preservative and sexual instincts and his new conception of life and death instincts as a subclassification within the sexual instincts throw these largely superseded ideas into interesting new lights, as does his quite inspired defense of the drive concept. His view that fantasy and sexuality are born together and comprise and define psychoanalysis (and a cru-

cially important aspect of human nature) is most provocative, imaginative, and generative. His discussion of metaphor, metonymy, continuity, contiguity, and the primary process is a most interesting integration of language theory with classical conceptions of the Freudian unconscious.

The architecture of his system—structural similarity across hierarchical boundaries, evolving through time, with transformations or translations occurring across the borders—has much in common with modern chaos theory, which studies dynamic systems in the natural world and finds causes and effects, but evolution and behavior whose patterns, structures, and entities also have enigmatic and unpredictable qualities. I found myself reconsidering some of the enigmatic qualities of Winnicott's transitional or intermediate mode of experience and finding new ways to think about that very influential psychoanalytic theorist who is so difficult to integrate with classical structural theory. Enigmatic Winnicottian space and enigmatic Laplanchian entities beg to find a place in a modern psychoanalyst's structural conception of mental life. There is much to ponder in this volume. I recommend it highly.

GERALD I. FOGEL (NEW YORK)

THEATERS OF THE BODY. A PSYCHOANALYTIC APPROACH TO PSYCHOSOMATIC ILLNESS. By Joyce McDougall. New York/London: W. W. Norton & Co., Inc., 1989. 183 pp.

In *Theaters of the Body*, Joyce McDougall examines psychosomatic phenomena, using the metaphor, developed so successfully in her previous works, of the inner world as theater. She conceives of the individual psyche as a stage peopled by a multitude of voices, belonging to self- and object representations, reflecting past, important object relationships and derived from various levels of development. While some may take issue with her choice of metaphor, I find that it provides an ease of access to her clinical material that is rare among contemporary psychoanalytic authors. In this regard alone, I feel that McDougall makes an important contribution to our literature, as her clinical reports exemplify how to convey to one's readers an accessible and convincing sense of the analytic encounter.

Of even greater importance, however, are the formulations she

advances for our understanding of psychosomatic phenomena and their implications for clinical technique. As I understand it, her argument goes as follows. Psychosomatic phenomena are events to which we are all subject. Their developmental basis lies in the preverbal period of infancy, during which time, because we lack the capacity for speech, affective experience must be dealt with either in action or through physical reactions and alterations within the body. (Here, she cites the regulatory disturbances of the neonate, including sleep, eating, or bowel dysfunctions, as examples.) With the development of the capacities for verbal representation and for speech, the child may begin to use words as containers for primitive affective reactions, binding them in thought (trial action) and directing them away from somatic discharge. Once conflicts and the disturbing tensions to which they give rise gain representation in the psyche, they can then be dealt with there in the usual ways—e.g., by defensive activity of the psyche and/or associative elaboration, resulting in dream, fantasy, or symptom formation.

The metapsychological description which McDougall uses to describe this process of representation is derived from Freud's 1915 paper, "The Unconscious." There Freud talks of the instinctual derivative, the "thing presentation," being united with the "word presentation" within the ego, thereby gaining mental representation and becoming subject to modification and control by the activities of the ego. This, McDougall says, is the condition in neurotic and even psychotic states. However, in the domain of the psychosomatic, there is a *splitting of the linkage between word presentation and thing presentation*—a mechanism that McDougall refers to by various names, including "foreclosure," "dispersal of affect," and "ejection from the psyche." The result of this disjunction is that the conflict or disturbing affect is lost to representation within the psyche. Thus, if they are to be dealt with at all, the conflicts or disturbing affects these conflicts produce must be dealt with in a preverbal fashion within the reactivity of the body.

While there is much that McDougall elaborates upon within this framework, including the implication that it is early trauma and environmental disturbance that leaves patients fixated to the reliance upon such drastic measures as "foreclosure" in the service of defense, the implications for analytic technique are profound. Her convincing case material, which is ample, lucid, and presented in

terms of analytic process, illustrates the salutary impact that psychoanalysis can have upon classical psychosomatic conditions, such as asthma, eczema, colitis, heart disease, etc. In addition, her work opens up the possibility of more thorough analytic exploration of the less noxious psychosomatic phenomena that occur in the course of everyday life, including the "ordinary" ones encountered in the analyses of neurotic, narcissistic, borderline, and psychotic patients.

From a technical perspective, *Theaters of the Body* leads us to reaffirm the value and necessity of analytic construction and reconstruction in the treatment of psychosomatic patients. If the fundamental problem is a defensive foreclosure of mental representation of a conflict or affect, then the remedy must lie in the analyst's interpretatively "re-presenting" the link between word and thing and helping the patient acknowledge, bear, and put into perspective the anxiety that results from having the conflict gain access to the psyche. (My choice of words in the preceding sentence, with its evocation of the work of Elvin Semrad is intentional, as I think that he would find McDougall's views quite compatible with his own.)

But how is the analyst to do this? Unlike that which is repressed, that which is "ejected from the psyche" does not press to return or reappear as symptoms, slips, dreams, fantasies, associational links, etc. Rather than gain mental representation within the mind of the patient, derivatives of these conflicts appear as somatic events or in action, including that which presses to be enacted by the analyst under the sway of the transference-countertransference. What is called for on the analyst's part is an awareness of this non-represented dimension of the patient's inner, but not yet mental life and a willingness to make interpretations based upon what is missing in the analysand's verbal discourse but present in the manner and mode of relating that evolves between the analytic pair. (While the latter may seem a bit obscure in my description, it is quite well illustrated by the material McDougall presents.)

In the past forty or fifty years, we have come a very long way in our understanding of the developmental vicissitudes of the first years of life, the residues left by conflicts in the preverbal period, their implications for ego development, symptom and character formation, their impact on the analytic process, and our understanding of the techniques needed to address them within the analytic situation. While the publication of *Theaters of the Body* does not

lead us full circle to the overly optimistic claims of the 1940's and '50's that psychoanalysis was the cure and treatment of choice for all of the psychosomatic diseases, it does make a new and significant contribution to our understanding of psychosomatic phenomena and offers us a powerful model of how to theoretically conceptualize and clinically address many problems which psychosomatic phenomena present. In so doing, McDougall brings to life a piece of Freud's metapsychological thinking, as she advances analytic theory and technique and helps psychoanalysis to reclaim the treatment of psychosomatic conditions as falling within the scope of appropriate analytic endeavor.

HOWARD B. LEVINE (BROOKLINE, MA)

THE QUADRILLE OF GENDER. CASANOVA'S 'MEMOIRS.' By François Roustang. Translated by Anne C. Vila. Stanford, CA: Stanford University Press, 1988. 163 pp.

This short book by the well-known French psychoanalyst and annual professorial visitor to this country's shores is as fascinating as its English title is felicitous. Originally published in French as *Le Bal Masqué de Giacomo Casanova* (*The Masked Ball of Giacomo Casanova*), the book has an English title that retains the author's original intention and hints as well at his subject's underlying concern. The original title alluded to Casanova's presentation of himself to his reader. As Roustang persuasively organizes it, far from a discontinuous series of memoirs, that presentation is an elaborate and disguising dance in which the reader is invited to be duped by the memorialist's professions of philosophy into sharing in an attempt to cancel out all law and all difference, especially the perception of sexual differences. That is, the presentation of the memoirs is consistent with the organization of the memorialist's perverse character. The new English title alludes to the dynamics underlying that character as well.

Roustang's view of the memorialist's presentation of himself to the reader, which some would call transferential, is inextricably entwined both with the unconscious dynamics of the latter's character and with underlying questions about the position of the reader-interpreter who organizes the data and makes sense of it. It is not surprising, then, that this exposition is preceded by an essay,

"On Reading Again," that attempts to come to grips with some of the methodological problems any attempt at applied psychoanalysis presents to the practicing analyst.

Roustang broke with Lacan over the issue of discipleship. In the process of freeing himself, he examined the interrelated problems of suggestion and bondage of psychoanalysis, particularly the relation of the transferential transmission of theory in training to the clinical manifestations of the analyst's transference to his patient. The subject matter occupied two previous, thought-provoking books which were translated into English, *Dire Mastery* and *Psychoanalysis Never Lets Go*.¹ His ideas about reading seem very much shaped by these concerns. He conceives of reading as a struggle in which the informed reader, by dint of reading again and again, discerns all the basic components in the text. The reader can then perceive their repetitive patterns and the kaleidoscopic substitution of equivalent components. "A nosebleed in one story becomes a defloration in another, and an attack of apoplexy in yet a third" (p. viii). Knowledge of these basic components and their shifting patterns frees the reader from the snares of the author's rhetoric. The author's rhetoric, the conscious and perhaps preconscious revelation and simultaneous concealment, exists for the purpose of misdirecting the reader. "The text [is] an artifact that presents itself to the reader to seduce and capture him" (p. xi). The re-reader's exertions, Samson-like, resist enslavement and attempt, instead, to "disarm" the author. This agon between the author who conceals his snares and the re-reader who attempts not to become entrapped and instead to reveal what the author conceals reaches what Roustang calls a point of horror, a point of utter mutual defenselessness and loss of identity. For the successful re-reader, this point will be superseded by the victory of laughter—an ability to observe the horror at a safe distance.

Casanova is the perfect author for Roustang's re-reader and the psychoanalytic understanding of perversion his perfect organizational template. Experienced analysts will recognize that the description of the author's wiles dovetails with the clinical picture of the perverse character who constantly creates of self and world another one, idealized, reassuring, phallus-full, false. The perverse

¹ Reviewed in this *Quarterly*, 1984, 53:594-601.

character accords this false world a real status and needs to convince others of its reality to maintain the illusion. Maintenance of the illusion buttresses the more important refusal to look at reality and the horror of castration such a perception brings. As any analyst knows, each listener or onlooker is accordingly marked for seduction into belief in this false world, and few, other than informed analysts and Roustang's re-reader, are equipped to resist that seduction.

This is, fortunately, not to say that Roustang uses the memoirs to demonstrate an existing theory, shattering in the process the integrity of the text. Like the good clinician he is, Roustang allows his formulations about the memorialist-author to emerge from the data. Applying the principles of contiguity and similarity, our most valuable means of understanding the unconscious fantasies concealed in a patient's associations, to Casanova's narrative sequence, Roustang demonstrates not only that the memoirs are decidedly not a random chronological account of a dissipated, bizarre, indeed improbable life, but a work which attempts to recreate the very fetishistic untruth necessary for that life to be lived.

But Casanova's memoirs go further. Not only do they show the attempt to deny sexual difference by falsely creating an illusory world of interchangeable sexualities, they also reveal the very horror they seek to abolish. From their early portrayal of a pox-ridden, insane (or feigning insanity), stinking, designing woman, to their late portrayal of a designing, lying woman enslaving the memorialist in helpless passion and taking his money, the horror Casanova attempts to avoid constantly reappears. This reappearance conveniently dovetails with Roustang's theory by which the process of re-reading reaches a point of horror and he accords this reappearance aesthetic weight:

It is there that the reader rejoins the text at the exact point of horror where it tends to undo itself. But . . . the reader has arrived at the text's source. The act of reading must itself pass through the deadly suffering in which the author originally found the strength to create. Nothing is closer to artistic creation than the moment of anguish from which the work's production must originate. The reader must endure the same anguish if he is to arrive at the work's real principle. (p. xiv).

I find troubling this linking of anguish and creation and the concomitant raising of them to universal tenets. It seems to suggest

that all art originates in a need to deny both sexual difference and differentiation. Moreover, it seems to suggest that the process of freeing oneself from discipleship, emphatically understanding a patient's fear of being castrated by a vagina dentata, mastering a text, and creating a work of art are psychologically similar acts. If that is indeed so, it ignores the restructuring of the psyche that can be a result of sublimation and consequent new compromise formation and implies a deeply pessimistic view of psychoanalysis with which I do not agree on clinical grounds. More specifically, the fantasy of the female phallus is not the only illusion operating in the perversions. Equally illusory, but much less discussed, is the fantasy of female castration. An analysis that stops at the painful renouncement of the wish for an illusory penis and does not analyze aggression sufficiently to help the patient perceive that difference is difference, not lack, does not proceed far enough. When it does, however, not all creation need originate in horror and anguish.

It is a tribute to the complexity of Roustang's book that such issues emerge in its discussion. Beyond its worth as a study of Casanova's memoirs, with its avoidance of technical language and its consistent enumeration of evidence, it is a truly excellent primer for teaching students about the dynamics of perversion.

GAIL S. REED (NEW YORK)

LE DIVAN DE PROCUSTE: LE POIDS DES MOTS, LE MAL-ENTENDU DU SEXE.

(The Procrustean Couch: The Weight of Words, the Misunderstanding of Sex.) By Joyce McDougall, Octave Mannoni, Denis Vasse, and Laura Dethiville. Paris: Éditions Denoël, 1987. 156 pp.

This book is derived from conferences and discussions held at the C.E.R.P. (Center of Education and Research) in Paris. Each contribution represents a theoretical point of view illustrated by clinical experience with therapeutic intent. Together they convey a lively impression of the analyst at work. They evoke the image of the analyst's office as a laboratory of experiences that constantly stimulate thinking and raise questions. Each of the authors expresses the fascination and excitement that come from tackling the seemingly impossible task of understanding someone else through un-

derstanding oneself. This impression is brought even more to life by the group discussion that follows each presentation.

Octave Mannoni, in his presentation, "The Procrustean Couch," struggles with the ever-present issue of how best to convey to the analysand the essence of what we know and understand about him or her. He strongly agrees with Winnicott's view that it is ultimately the patient who really knows and who does the work, while the analyst's task is to help the patient do it. He differentiates between "interpretation" and "intervention." He speaks for a creative view of analysis, in contrast to the theoretically bound analysis that restricts and constricts the patient's autonomy. As an example of intervention, he describes a patient who introduced himself by handing him a mass of written reports from various specialists he had consulted and stating, "All you need to do to know me is to read all that." In subsequent sessions he continued to quote others about himself. After a few weeks, the patient declared, "I will not come back anymore." The analyst said, spontaneously, "This is the first time that I hear you speak for yourself" (p. 26). The patient returned and from then on was more alive and engaged.

Mannoni stresses an essential aspect of analytic work: the ability of the analyst to follow where the patients lead and to help them do their own work. Mannoni rightfully cautions against the tendency to bend the clinical data to make them fit theoretical assumptions. However, in so doing, he does not accord theory its rightful place in the process of guiding analytic work. He alludes to the two crucial concepts of empathy and countertransference without actually mentioning them. He does not focus on the theoretical underpinnings of the process he describes, as though it is theory that is to be guarded against rather than its misuse or misapplication. Empathy and countertransference are indeed crucial. I believe that knowing patients derives mainly from empathic identification with them, awareness and understanding of our reaction to them, and our sensitivity to and respect for their autonomy.

Denis Vasse addresses the issue of severely disturbed patients who relive in the transference the agonizing ambiguity related to interacting in the earliest weeks of life with a depressed, narcissistic mother. He gives a vivid clinical description of two sessions he had with a psychotic, depressed, suicidal woman. At the end of the first session she stood in front of the threshold for ten minutes, biting

the back of her hand until it bled and tearing off a portion of her skin. He interpreted this in terms of her fear of occupying her place, the place which was empty. When she returned for her next session, she avoided the usual handshaking at the beginning and proceeded to express her reaction to the analyst's interpretation. She said that it meant that either her parents were right or that he was unable to understand her. Via analysis of his countertransference fear, Vasse was able to tune in to his patient's affective state, reinstate a therapeutic alliance, and set analytic work in motion.

Vasse writes poignantly and vividly of how the absence of the parent's smile during early feeding experiences prevents the child from associating eating with human interaction and lays the groundwork for a later severe difficulty in receiving and giving. This is discussed in relation to anorexia and bulimia. He sees a connection between the patient's lack of trust and refusal to attach importance and worth to the analyst, and the infantile experience of being untouched by the empty words of an unsmiling mother perfunctorily going through the ritual of feeding the child. The current words have no weight, just as food earlier had no taste and therefore could not be savored. Expressions like "what difference does it make anyway?" or "it's not worth living" or "it's not worth talking about" echo the profound feeling of rejection and "death" experienced by an infant with a mother incapable of mirroring, empathizing with, or enjoying the child. The infant cannot be born psychologically, and, imprisoned in a shell, becomes withdrawn, walled off, and incapable of trust and genuine involvement as an adult. There is no differentiation, and sexual functioning can only be pseudo-sexual, indistinguishable from oral activity. The vagina is experienced as a wide open mouth, a closed mouth, or a strangulating oral cavity. A profound restructuring of the early defects of the differentiation process is a prerequisite to becoming a truly sexually functioning individual. Vasse's presentation helps to sensitize us to the deeper, archaic layers of the psyche.

Laura Dethiville describes an interesting brief encounter with a depressed, preadolescent girl seen in the course of family consultation. She narrates with clinical finesse how she arrived at an accurate diagnosis that vital information had been kept secret by the girl's father: the child's natural mother had died accidentally in her presence when the child was one year old. Dethiville describes with

sensitivity how she advised the father to communicate the withheld information, and the dramatic effects the revelation had on his daughter. There was a seeming quick happy ending, but I wonder if analyzing this preadolescent girl might not have led to her own realization that something crucial was missing in her knowledge about herself, followed by her taking the initiative in searching it out. Nevertheless, this is a valuable presentation that vividly illustrates the profound impact of a withheld secret on the development of a child.

Joyce McDougall gives a detailed account of a segment of the analysis of a perversion in a forty-year-old surgeon struggling with profound difficulties in his sexual and personal identity. McDougall, objecting to the pejorative connotation of the term "perversion," coins a new one, "neo-sexuality," for the complicated, agonizing attempt to bypass castration in order to establish a sexual and even a love relationship with someone and to create a construction to compensate for the absence of a personal identity. In other words, the patient, through the perverse act, created an organized, acted out fantasy in order to have a relationship, fill a void, and ward off psychotic, disintegrative anxiety. McDougall elegantly analyzed the patient's unusual acting out of a core masturbatory fantasy. He would take the elevator up in the building where he lived, send it down, and then climb the steel cable above it to a higher floor. He would then masturbate with the steel cable between his legs. Hanging forty meters in the air, he was intensely excited by the fear that he might fall at the moment of ejaculation.

The unraveling of the meaning of his being suspended in the void was fascinating. The feeling of a void was overdetermined. Analysis revealed his mother's incapacity to accept and confirm his existence, when, in a poignant moment, he spontaneously expressed gratitude to his analyst for acknowledging it. He apprehended a distinction between his maternal transference feelings and his awareness of the analyst as a new object who conveyed to him the feeling that she accepted him. The void also had to do with his mother's interfering with his identification with his father and encouraging an identification with a (castrated) grandfather who had an amputated leg. His sexual attraction to a woman, he came to realize, was motivated by the search to possess the penis of the man with whom she was sexually involved. With the deepening of

the analytic process in its third year, there occurred periods of silence during sessions that were interrupted by screaming episodes. This was followed by a more frightening phase, which he referred to as a state of emptiness or void, in which he was overcome by a catastrophic anxiety that scared the analyst. He was afraid of losing everything—his sexuality, his identity, his professional skills, his sanity. The analyst interpreted the void in terms of castration on all levels: phallic, oedipal, narcissistic, and archaic. There ensued an elaboration of these themes, with the important difference that now they were expressed in the transference and accessible therapeutically. The “neo-sexual” scenario constructed came to be understood as an attempt to master the void he had experienced with both his parents, to fill it with sexual excitement, and emerge triumphant over it. The analysis made it possible for the patient to achieve a capacity for symbolization. This permitted him to construct new structures that allowed him to develop a stable relationship with a woman for the first time and then to have children with her. He was amazed at the attachment he felt toward his children and his partner in what seemed to be a miraculous change in his love and sexual life.

In the last presentation in the book, Octave Mannoni gives an interesting account of his reflections on the language of schizophrenics. He discusses the views of Bion, who explained language as a defense against the feelings of the depressive phase described by Melanie Klein. Mannoni prefers to think of schizophrenics as defending against the fact that language has meaning. He agrees with Freud that the language of schizophrenics is an expression of primary process thinking, but he criticizes Freud for failing to explain why. He differentiates the seeming senselessness of obsessional language, which hides repressed, anxiety-laden significance, from the senselessness of schizophrenic language, which escapes this anxiety by fleeing to something more primary. Everything with schizophrenics, he indicates, seems to take place on the single level of the signifier. The signified is simply nonexistent. Schizophrenics protect themselves from the fear that language has meaning. Mannoni cautions against thinking only in terms of protection from parental language that is ambiguous, controlling, authoritative, or hostile. There is something, he asserts, in language itself that is frightening.

This book illuminates and enriches our thinking. It stimulates our curiosity and helps us in our never ending inquiry into the mind.

ANTOINE G. HANI (CHEVY CHASE, MD)

LACAN IN CONTEXTS. By David Macey. New York/London: Verso, 1988. 322 pp.

This book examines in great detail the many contexts in which Lacan's thinking developed: historical, literary, philosophical, linguistic, and, to a limited extent, psychoanalytic. The book is written clearly, if at times pedantically, and begins with a brief preface and an introduction in which Macey states his guiding thesis: that Lacan, his followers, and many commentators present Lacan as if the final state of his thought were present from the beginning, with no changes and no indebtedness to the currents of ideas moving around him. Macey sees this tendency as "one of the more curious features of the psychoanalytic movement as a whole: its marked tendency to forget or repress its own history" (p. 1), as typified in Freud's gesture of destroying his manuscripts, correspondence, and private diaries in 1885 and 1907. In Lacan's case, Macey argues, the suppression of context and the presentation of Lacan's thought as a monolithic block to be accepted or rejected in full are the work of "a virulent intellectual terrorism" whose arcane writing rests on "a haughty presumption of knowledge on the part of the reader" (p. 24).

Macey's aim is to counter such tactics with detailed information about the formative influences on Lacan's thought, indicating from whom he gets many of his ideas as well as how he alters them. The specific "contexts" Macey examines constitute the five meaty chapters of his book, which concludes with a detailed curriculum vitae of Jacques Lacan's long life (1901-1981), an extensive set of notes, a long bibliography, and a name index. This book is essential reading for anyone doing historical or textual research on Lacan's thought, but it gives no indication of what Lacan's clinical relevance might be. The best book in English on the clinical relevance of Lacan's thought, Shoshana Felman's *Jacques Lacan and the Adventure of Insight* (Harvard University Press, 1987) is sequestered by Macey in a note dealing with "the appropriation of Lacan by post-structuralist

literary theory" (p. 259), an academician's wholly inappropriate reduction of the clinical dimension of Felman's book.

The first context Macey considers is historical and psychiatric, and he provides an excellent summary of how psychoanalysis developed in France in the twenties, drawing largely on the monumental work of Elisabeth Roudinesco (recently translated as *Jacques Lacan & Co.*, The University of Chicago Press). Macey notes an anti-German current in French psychiatry that inhibited the early acceptance of Freud in France and in part motivated a specifically French school of psychoanalysis with its own central concepts, whose primary one was scotomization. Macey spells out Lacan's unacknowledged debt to Laforgue, Pichon, and other early French analysts for many of his notions about language and psychosis.

The second chapter deals with the literary and artistic context that shaped Lacan's thinking, namely the Surrealist movement of the twenties and thirties. Lacan made many allusions to Surrealist authors, above all André Breton, and he claimed friendship with painters, especially Salvador Dali. Their emphasis on hysteria, sexuality, desire, and the unconscious was partly rooted in their reading of Freud and Hegel. Surrealist journals published some of the earliest French articles by and about Freud, including extracts from Marie Bonaparte's translation of *The Question of Lay Analysis* in 1927, at a time when not even a dozen of Freud's works had been translated into French. Breton, in his 1924 *Manifesto*, viewed Surrealism as "a belief in the higher reality of certain forms of associations which have hitherto been neglected, in the omnipotence of dreams and in the disinterested play of thought" (quoted by Macey, p. 51). Macey shows how even Lacan's style was indebted to the Surrealists' punning with a purpose and to their claim that when words are juxtaposed in unexpected ways they "make love," they react upon one another and produce new meaning and not simply deliver a pre-given meaning. The Surrealists were among the first to claim that "psychoanalysis is essentially a question of language" (p. 66), and their influence on Lacan was unmistakable.

The third context Macey examines is the philosophical climate during Lacan's formation, in particular the ideas of Hegel as presented by Alexandre Kojève in his lectures in the thirties. In Hegel's *The Phenomenology of Spirit* Lacan found a philosophy that rests on desire in dialectical tension with the illusory status of certainty and

the instability of self-identity. In Hegel's Master-Slave dialectic Lacan could find the roots of aggressivity in the ego's demand for recognition. But rather than simply assimilating Hegel or other philosophers, Lacan used their ideas in a Freudian context in order to subvert, in the spirit of the Surrealists, the presumed mastery claimed by the ego.

Lacan also drew on Sartre's notion of the gaze to conceptualize the ego as an illusory representation, and this notion became an essential ingredient of one of the few crucial developmental moments in Lacan's psychoanalytic framework, his "mirror stage," first proposed at the 1936 International Psychoanalytical Association Congress in Marienbad. The cohesion of the Lacanian ego rests on a narcissistic cathexis of and identification with the *gestalt* of the human body perceived as possessing a degree of unity, control, and mastery that the infant lacks. The view of the human infant as visually precocious came to Lacan from the French psychologist, Henri Wallon, whose contributions are acknowledged by Lacan. Macey disputes Lacan's claim that ego psychology betrayed Freud, finding this instead an example of the French passion for "epistemological breaks" (p. 114) that treats Freud's discoveries as inaugurating a new view of the human subject.

Macey's general intention appears to be to cut Lacan down to size, to challenge his stated "return to Freud" and to show that Lacan borrowed much that is not Freud. But, in the final two chapters, Macey goes further and charges Lacan with a kind of pseudo-borrowing that distorts the ideas of other disciplines. This is especially the case in the context of linguistics, the discipline outside of psychoanalysis most associated with Lacan through his saying, "The unconscious is structured like a language."

Macey argues that in the framework defined by Lacan's own texts, this statement is incoherent. He begins by asserting that Lacan did not make any systematic reference to language until the fifties and then he did so with irritating ambiguity: "Signifier, sign, and symbol are sometimes used almost interchangeably, whilst at other times they refer to distinct and even oppositional entities" (p. 124). Lacan's use of the technical linguistics of Ferdinand de Saussure and Roman Jakobson is criticized by Macey for being incompatible with his use of Heidegger's ontology of language, language as the "house of Being," as opposed to language as a

system of signs. Macey concludes that the "variegated colours and textures of the discourse [of Lacan] may be exciting and seductive, but they do not merge into any harmonious fabric" (p. 126). Macey notes that Lacan himself (p. 165) acknowledged his casual interest in and departures from standard linguistics; for this very reason Lacan called his domain of interest not linguistics but "*linguisterie*," a realm of shifting meanings, puns, and ambiguities in which it is not lexical content but the verbal utterance itself which has a performative impact by creating resonances and instituting pacts. Macey concludes: "No true theory of language emerges from Lacan's prolonged meditations and explorations" (p. 175), but I think Lacan would have agreed, since he stated that his own aim was avowedly clinical.

In his final chapter, "The Dark Continent," Macey examines Lacan's conceptualization of sexual development and relates it to the earlier psychoanalytic controversy regarding the phallic phase in girls as discussed by Freud, Jones, Rivière, Deutsch, Horney, Klein, and others, whose work Lacan referred to. The issue, for Macey as well as for feminist theorists, is "whether gender is a construct or an innate, 'natural' differentiation founded upon a genital determinism" (p. 177). Both Freud and Lacan are guilty, in Macey's eyes, of creating and maintaining mystification about feminine development as a "dark continent," "impenetrable and unknowable," a peculiar effect of male theory: "Psychoanalysis posits femininity as being in excess of its rationalist discourse, and then complains and exclaims that it cannot explain it. It is as though the obscure object had to remain impenetrable for the desire to penetrate to be sustained" (p. 179).

Macey's rancor extends to select Lacanian women analysts who frame development in phallogentric terms, in alleged fidelity to Lacan. This leads Macey to examine Lacan's conceptualization of the phallus as a wide-ranging symbolic function distinct from the anatomically based penis. Macey states that Freud makes no systematic distinction between "phallus" and "penis" and that French psychoanalysts such as Bonaparte tend to use the word "phallus" more frequently than Freud, but do so indiscriminately, leading Melanie Klein, for example, to protest the French translation of phallic mother, mother-with-a-penis, as *mère phallique* (p. 185). When Freud writes *der Wunsch nach dem Penis*, a French translation has *le désir de posséder un phallus* (p. 188). Feminists are rightly crit-

ical of a view of anatomy that sees a hole where a penis ought to have been, but French feminists have also attempted to work with the notion of the phallus as symbol of desire and of a lack in male-dominated linguistic traditions.

After his examination of the historical, psychiatric, literary, philosophical, and linguistic contexts of Lacan's thought, what has Macey omitted? He has not presented the clinical context, and as a result the reader is given little indication of what clinical questions propelled Lacan's thoughts. Because Macey has omitted the clinical context, he thereby has omitted the most engaging of Lacan's ideas, his most important contributions to psychoanalysis. Among these are his distinctions among the Imaginary, the Symbolic, and the Real, with a special emphasis on the problematic of the Real in psychosis.

The psychotic patient's blurring of boundaries is viewed by Lacan as a breakdown in the symbolic anchoring of meaning and desire. Since words, concepts, and gestures no longer have clear referents, there is a desperate attempt to fix things through images, but these swarm and proliferate out of control and the patient risks falling into a void of dedifferentiation, a realm of the nameless which Lacan calls "the Real." The patient's desperate efforts to mark boundaries often take the form of cutting into the skin.

Lacan makes an analogous set of clinical distinctions useful in working with non-psychotic patients: he attempts to distinguish need as biological from demand as intersubjective and both of these from desire which has no object in reality. The analytic work takes place not as an effort to meet needs but to elicit, unravel, and analyze demands so that the underlying unconscious structure of desire, as a structured fantasy, will disclose the patient's primary motivation that is displaced in the demands. Lacan's schema for analysis is a four-cornered structure that includes the regulatory presence of culture and language as "Other" to the two participants. This schema is cursorily dismissed by Macey as an example of a failed logical notation whereas it provides a handy perspective on transference/countertransference phenomena.¹

This book provides a great deal of detail about Lacan but fails to

¹ See Muller, J. P. (1989): Lacan and Kohut: from imaginary to symbolic identification in the case of Mr. Z. In *Self Psychology: Comparisons and Contrasts*, ed. D. Detrick & S. Detrick. Hillsdale, NJ: Analytic Press, pp. 363-394.

introduce Lacan in a functionally useful way. Perhaps it is an insurmountable task.

JOHN P. MULLER (LEMONT, IL)

L'IDENTITÉ PSYCHOSOMATIQUE. UNE APPROCHE PAR LA THÉORIE GÉNÉRALE DES SYSTÈMES. (Psychosomatic Identity. An Approach Following General Systems Theory.) By Henri Bianchi. Paris: Éditions Aubier, 1990. 353 pp.

Recent major advances in the neurosciences have once again focused attention on the ancient mind-brain conundrum. In a somewhat rough and schematic way, the work on this subject can be divided into two groups, the first encompassing those studies that approach the issue in a global way and the second, basic neuroscience research. Arguments over monism, dualism, and Roger Sperry's "New Mentalism" belong in the first group, as well as hypotheses that attempt to explain how the mind comes about from the activities of the brain. Penrose's proposal of a "new quantum theory" and Pribram's use of the transform domain are among the newer ideas to emerge in this area. In the second group are the studies (primarily neuropsychological in nature) that focus on various functions or processes, such as memory. The research of Squire and Schacter belong here, as well as the work of the psychoanalyst Reiser. In addition, there is the more basic neuroscience research that examines changes at the cellular level which may influence mental functions. The work of Schwartz and Kandel on aplysia falls into this category, as does recent work on the activity of NMDA receptors and its possible connection with memory functioning.

In this schema, the two groups are divided along the lines of whether the approach is global or "from above," so to speak, or alternatively, "from below," starting from the biochemical and physiological and building "up" towards mental processes and functions. Though both approaches are valid and are, to a degree, complementary, the more global approach does require theorizing at a level which is, at present, unverifiable.

Bianchi's scholarly work, *L'Identité psychosomatique*, belongs to the first group, while, at the same time, it is very well informed by the findings of the second group. Bianchi proposes a holistic view of the mind-body relationship, one that is anchored in a systems-

theory approach. This holistic approach contrasts sharply with the work of other theorists, such as Pribram, for example, who uses the "transfer domain" and holograms to explain the mind-brain relationship. While Bianchi does utilize psychoanalytic ideas, the concepts he applies tend to be outdated ones. They take a backseat, furthermore, to his thesis of the "identity" between the psyche and soma, which purports to go beyond conventional psychoanalytic thinking.

Clearly, in many ways this is an erudite work, as well as an ambitious one. Bianchi draws from such diverse fields as modern physics, biochemistry, histology, anatomy, embryology, mathematics, philosophy, and Indian and Chinese medicine, not only to buttress his views but also to establish continuity, unity, and consistency to the relationship among these various fields. On first reading, his conclusions seem more eccentric than they may actually prove to be on closer examination. For example, his idea that all body organs have a mind (or psyche as he prefers to call it) "as well as a kind of primitive intelligence" is not beyond current understanding, if one thinks in terms of the local organ response to hormonal, neurochemical, and electrical stimuli. At other points, however, it is more difficult to come to terms with the author's ideas. In particular, his concept of a psychic space analogous to physical space, with coordinates or dimensions of affects, seems far removed from the arena of scientific verification and validation. This is especially so, given the manner in which Bianchi attempts to make not just a loose analogy, but rather to construct a supraordinate concept connected to the big bang theory and to the notion of unfolding which results in the creation of space.

A brief summary of one of Bianchi's clinical examples may best convey his ideas and the way he applies them to understanding his patients. The case—in an excessively summarized and simplified form—involved a young woman with eczema who needs to defend against excessive dependence on her mother and aggression towards her father. Father is intrusive (i.e., intrudes in the patient's space) because he walks around naked all the time, thus causing a problem for the daughter in terms of her ability to maintain boundaries or "frontiers." Since the boundary of the body is the skin, which is the envelope which protects, the girl suffers from eczema. Though this summary in no way does justice to the richness of

Bianchi's writing or to the complexity of his ideas, it does give some sense of the way in which he has developed his thesis.

In conclusion, this is a book to be read by those interested in the mind-brain problem; the more one is exposed to intellectually rich works like Bianchi's, the more one appreciates the vast complexity of the matter. On the other hand, within the narrower confines of the theory and practice of psychoanalysis, *L'Identité psychosomatique* is of limited interest.

EDWARD NERSESSIAN (NEW YORK)

LE TRAVAIL MENTAL DU PSYCHANALYSTE. (The Mental Work of the Psychoanalyst.) By Lisbeth von Benedek. Paris: Éditions Universitaires, 1989. 158 pp.

The focus of most psychotherapy research is on changes occurring in the patient. This book's focus is on the mental activity of the therapist at work. Although the author acknowledges the differences (p. 14) between analytic psychotherapy (sitting up, face to face, one or two sessions per week, emphasis on confrontations, clarifications, interpretations, and working through) and classical analysis (use of the couch, four or five sessions per week, emphasis on transference interpretations), for the purpose of this study she combines them, using the rationale that both have the same theoretical framework. All the therapists in the study described in this book are analysts with at least five years of analytic experience (p. 21). The author uses the word "project" ("*projet*" in French) to refer to the analyst's anticipations, predictions, wishes, and feelings projected into the future. Her hypothesis is that this "project" makes sense only through successive approaches, based on explicit, conscious components as well as implicit preconscious components, which are part of the predictions of the analyst.

Psychotherapy was used when the patients were judged to be too sick for classical analysis, the decision being made by the analytic clinicians (p. 13).

In appearance, the author's methodology was simple. She interviewed the analysts twice by means of a semi-structured interview which was taped. The first interview took place after two to six sessions and the second ten months to a year later. The clinicians

were informed from the start that they could not be told in the second interview what they had said in the first until the second interview was completed (p. 22).

The author wanted to study twenty analyses. It took her five years to obtain the necessary data (p. 13), and she had to interview thirty analysts (p. 22). Fifty percent of the patients interrupted their analyses, thirty-one percent shortly after beginning and seventeen percent shortly before the end of the first year of treatment. The thirty-one percent were discarded from the study and the seventeen percent retained in order to see if the interruptions were predictable. In other words, in order to study twenty analyses, she had to conduct twenty-nine initial interviews. Nine patients interrupted soon thereafter and of the remaining twenty, five stopped shortly before the end of the first year of treatment (p. 140). The author mentions her surprise at the large number of interruptions (p. 141).

Psychotic patients were excluded. The others included three borderlines, two patients with psychosomatic illness, two with anorexia nervosa, and eleven who had neurotic difficulties with narcissistic problems (p. 21). (That adds up to eighteen, not twenty. The author does not indicate that she is aware of the discrepancy.) Half of the patients came from the public sector (p. 141), but the author does not specify which ones, nor does she indicate which patients were treated by analytic psychotherapy and which by classical analysis. All the analysts agreed that suffering was the basis of motivation for treatment (p. 40). Suffering increased at the end of one year of treatment in four patients and decreased in all the others (p. 43). Suffering had decreased in four of the five therapies that were interrupted (p. 43).

The predictive ability of analysts was not impressive. Of the five patients who stopped, initial doubts about the patient had been expressed only with respect to one (p. 86). On the other hand, many of the clinicians had predicted interruptions in patients who in fact continued (p. 134).

The financial aspect was never mentioned by the analysts as part of the motivation for undertaking a treatment (p. 54).

The memory of analysts was found to be fallible. Clinicians thought at the time of the second interview that they had spoken of certain affects in the initial interview when this was not in fact the

case. There was a change between the initial and the second interview, insofar as the predictions, hopes, and fears of the analysts were concerned (p. 23). In the second interview, the wish to help the patient, positive feelings when confronted with an anxious and suffering patient, were often replaced by more ambivalent feelings, irritation, annoyance at the patient's masochism, and disappointment when confronted with lack of progress due to the patient's resistances or lack of gratitude (p. 57). Scientific interest in the psychopathology of the patient was mentioned less often in the second interview than in the first (p. 57).

Some of the analysts were convinced, at the time of the second interview, of having mentioned difficulty in establishing a contact with the patient during the initial interview. In fact, this was not the case. It was only retrospectively that the clinicians rationalized their current counterattitudes (p. 59). At the second interview, many of the analysts had forgotten their initial "project" for the patient (p. 91). And in the second interview, none of the analysts mentioned their interest in the psychodynamics of the patient (p. 115). A year after the initial interview positive feelings for the patient were expressed. In retrospect, there were, right from the beginning, certain preconscious identifications with the patients or their family environments which enabled the analysts to continue their self-analysis (p. 115). Many analysts also expressed negative affects not mentioned initially (p. 115). In half of the cases, the second interview revealed more extensive life goals for the patient. At the same time, there was also more emphasis on infantile material and less on current conflicts (p. 142).

Transference difficulties were less than had originally been anticipated (p. 142). Many analysts thought they had reported their countertransferential affects in the first interview when this was not the case. In general, the countertransference was more positive initially and more ambivalent a year later (p. 143). Scientific interest was expressed less often in the second interview. There was more ambivalence and more affect. There was a general tendency on the part of the analysts to underestimate the capacity of their patients for real analytic work (p. 144), and a close correlation between limited therapeutic goals and negative countertransference (p. 145).

At the time of the second interview analysts claimed to remember

having said things at the initial interview which they did not say, and forgot things they actually did say. Forgetting particularly affected the project of the analyst and the countertransference, while the transference of the patient was usually well remembered (p. 147).

As the analysis proceeded, the "project" was lost sight of, and there was a greater affective involvement (p. 147). The patients were able to feel real aspects of the analysts' personalities and of their motivations toward the patients through their professional roles (p. 148). The scientific observer seems to become more human as he or she becomes more involved in the therapeutic relationship.

In my opinion, this is a fascinating study. It makes sense that analysts should become more "human" as treatment progresses, but it is nice to have this documented. Whether a similar study would show similar results in North America is an interesting question. The finding that analysts underestimated the capacity of their patients for analytic work is surprising. The Menninger Project seemed to point in the opposite direction. The fallibility of analysts' memory is hardly surprising, but it is useful to have it demonstrated so convincingly.

My main criticisms are directed toward the use (or non-use) of the data and to the manner in which it is reported. A few tables might have been helpful. For instance, how many of the patients were treated by classical analysis and how many by analytic psychotherapy? When the author says that analysts underestimated the capacity of their patients for real analytic work, does she mean that they decided to treat them by analytic psychotherapy rather than by classical analysis? Different diagnostic categories are mentioned. Did they determine the choice of treatment or have an impact on dropout? On p. 21, the author mentions that all four theoretical possibilities involving the gender of analyst and patient were in fact present (male analyst and male patient, male analyst and female patient, female analyst and female patient, female analyst and male patient). There is no further reference to this matter in the rest of the book. Did it correlate with anything else? If the book has a second edition, I hope that some of these questions will be answered.

JAMES NAIMAN (MONTREAL)

CULTIVATING FREUD'S GARDEN IN FRANCE. By Marion Michele Oliner, Ph.D. Northvale, NJ/London: Jason Aronson, Inc., 1988. 332 pp.

One cannot read Marion Oliner's book without wanting more. This is its great strength and, at the same time, its greatest weakness. The task Oliner sets for herself—that of introducing the reader to French psychoanalytic thought, with all its variety and its political and ideological factionalism—is a formidable one. Others who have attempted to do so, such as Turkle¹ and Lemaire,² have narrowed their focus to a particular aspect of the French psychoanalytic movement or to a particular thinker. Oliner, however, has chosen the broader road, attempting, with some success, to orient us first to the history of psychoanalysis in France and then to introduce us to the theories of many of its most prominent thinkers.

Oliner divides her book into three sections. The first is a rather sketchy history of the French psychoanalytic movement. The second discusses classical analysis, as exemplified by the work of Béla Grunberger and Janine Chasseguet-Smirgel. Oliner succinctly reviews their theories of narcissism, female sexuality, and perversion. The last part of the book addresses French psychoanalytic thought concerning the treatment of psychosomatic illness. In this section, she reports on the contributions of Joyce McDougall, Michel Fain, and Denise Braunschweig (to name just a few). Oliner's background as a French literature major familiar with the language and culture of France, as well as her experience as an analyst, would seem to uniquely qualify her for such an undertaking. Yet the book is disappointing in a number of ways. First, the history that she provides leaves large gaps. The rich philosophical and intellectual roots of the French psychoanalytic tradition, and the influence of the surrealist movement, or of Melanie Klein, on French psychoanalytic thought (particularly on the work of Chasseguet-Smirgel) is not dealt with in any depth, if at all. Nor are the more current ideas of Derrida and Habermas and their influence on French psy-

¹ Turkle, S. (1978): *Psychoanalytic Politics: Freud's French Revolution*. New York: Basic Books. Reviewed in this *Quarterly*, 1980, 40:167-168.

² Lemaire, A. (1977): *Jacques Lacan*. Translated by D. Macey. London: Routledge & Kegan Paul.

choanalytic thought included. The role of Jacques Lacan, coupled with a careful evaluation of his theories, is also missing. In fact, the author tells us early in the book that Lacan's "texts are essentially unreadable and need to be interpreted, something I have rarely attempted to do" (p. 5). This failure to come to grips with a major figure whose ideas have reverberated throughout France and the entire psychoanalytic world is most unfortunate.

Such a dismissive attitude toward Lacan is bound to make some readers uneasy about the intellectual depth and scope of Oliner's book. A tendency to arrive at quick judgments and to overgeneralize further mars her serious intention. Too often, Oliner makes provocative statements without providing the necessary supporting evidence. She states, for instance, "Freud, too, worked with analysts who 'warmed their soup at his fire,' and Lacan can be compared with Jung" (p. 49). Why should he be compared with Jung rather than with any other psychoanalytic thinker who reinterpreted Freud in new and, to many, not always acceptable ways? Does Oliner see some particular connection between Jung and Lacan (an unlikely match, to my way of thinking), other than her seeming to disapprove of both? If so, she should tell us. Furthermore, such statements about French psychoanalysts as "Their continuous striving for purity is as admirable as it can be self-defeating" (p. 77), or their "wish to extol the subversive role of psychoanalysis and to couple it with revolutionary politics" (p. 24), are useless unless examples are provided.

One would also like to have a fuller explanation of why Oliner chose to organize the book the way she has. Does she feel that French ideas concerning narcissism, female sexuality, perversion, and psychosomatic illness are the unique and most important contributions to Freudian thinking, or has she chosen authors who are most accessible to her, either personally or intellectually? Whom, besides the Lacanians, has she left out and why? It is never certain, for example, whether writers like Bergeret³ or Michel Foucault⁴ have been omitted because Oliner considers their ideas less important, because their work falls outside the tripartite design of her

³ Bergeret, J. (1984): *La Violence fondamentale*. Paris: Dunod.

⁴ Foucault, M. (1965): *Madness and Civilization: A History of Insanity in the Age of Reason*. Translated by R. Howard. New York: Pantheon.

book, or simply because she has not read them. Too often, Oliner seems like a sensible tour guide, providing us with *some* but not all of the facts, without attempting to mention her omissions or to integrate what she has included into any psychoanalytic perspective of her own. In this way, she remains a selective reporter rather than a serious critic or synthesizer of ideas.

Despite these weaknesses, Oliner's mastery of a huge body of French psychoanalytic theory is impressive. Her attempt to enlarge our thinking about psychoanalysis by introducing us to what, for many, will be new theoretical approaches is laudable. She often gives clear and helpful summaries of the work of the French analysts she has chosen to include. In so doing, she reminds us that interesting and important psychoanalytic thinkers live everywhere in the world, many of them in France. By introducing us to the ideas of French theorists like Grunberger, Fain, Roustang, Braunschweig, Le Gruen, to name just a few, she whets our appetite to learn more about them. We are fortunate that the work of many about whom she writes is available in English translations. After Oliner's introduction, many readers may be encouraged to go to the original texts and see for themselves what we can learn from our French colleagues.

DANIEL JACOBS (BROOKLINE, MA)

LE COEUR ET LA RAISON—L'HYPNOSE EN QUESTION DE LAVOISIER À LACAN. (The Heart and Reason—The Question of Hypnosis from Lavoisier to Lacan.) By L. Chertok and I. Stengers. Paris: Payot, 1989. 289 pp.

The title of this book was probably inspired by Pascal (*Pensées* 4, 267): "*Le coeur a ses raisons que la raison ne connaît point*" ("The heart has its reasons of which reason knows nothing").

In 1784, Lavoisier dismissed hypnosis because it did not meet his criteria for science. The thesis presented by Chertok and Stengers is that Freud's wish for scientific respectability led him to create the psychoanalytic situation. With its emphasis on abstinence, neutrality, and the transference neurosis, psychoanalysis gave priority to reason over the dictates of the heart.

The result, according to the authors, had limited therapeutic effectiveness, as first noticed by Ferenczi, who believed that analysts

must love their patients. Chertok and Stengers praise Ferenczi, Balint, and, to some extent, Kohut. The authors' reading of "Analysis Terminable and Interminable," in fact, is that it represents Freud's own admission of the therapeutic ineffectiveness of analysis. They view Lacan as disclaiming any therapeutic effect for psychoanalysis, by regarding the training analysis as the only true analysis. The authors also say that psychoanalysis contains more hypnosis than analysts are willing to acknowledge. After praising Kubie's efforts on behalf of hypnosis in 1960, they stress Gill and Brenman's comment that it is the analyst (not the patient) who is ill at ease about hypnosis being introduced.

Chertok and Stengers advocate training psychoanalysts in the use of hypnotic methods to render analysis more effective. They regard hypnosis as occupying a privileged place where heart and reason meet in ways which are not yet understood.

My belief is that the authors' reading of "Analysis Terminable and Interminable" attributes to Freud a pessimism which the text does not justify. I think they contradict themselves when they imply in one place that analysis contains hypnosis and in another place that analysis is ineffective because hypnosis has been taken out of it. I disagree that hypnotists love their patients, and I disagree with the authors when they seem to equate Ferenczi's technique with hypnosis.

The views expressed by Chertok and Stengers in this book will not be helpful to psychoanalysts in their efforts to help their patients.

JAMES NAIMAN (MONTREAL)

THE OTHER SIDE OF LANGUAGE. A PHILOSOPHY OF LISTENING. By Gemma Corradi Fiumara. Translated by Charles Lambert. London/New York: Routledge, 1990. 214 pp.

Gemma Corradi Fiumara is an Associate Professor of Philosophy at Rome University and a practicing member of the Italian Psychoanalytic Society. She has written another book, *The Symbolic Function and the Philosophy of Language* (Oxford: Basil Blackwell, 1990), thus revealing her scholarly dedication to the understanding of the function of language in human life, especially in the areas of discourse and knowledge. The book I am reviewing is entirely philo-

sophical. Its core proposal, however, is so central to analytic theory and technique that it cannot be ignored by psychoanalysts interested in the cultural stance and philosophical underpinnings of psychoanalysis.

Corradi Fiumara opens her book by observing that among the many meanings of the "Greek term *logos* there do not appear to be recognizable references to the notion and capacity of listening; in the tradition of western thought we are faced with a system of knowledge that tends to ignore the listening process" (p. 1). The consequences of such conceptual absence affects us in the present: "Elevated to an essential principle of our culture . . . [it] appears to control and shape all of our rational pursuits. . . . At any moment in which reality is constructed we can identify an attitude which is able to say and not to listen" (p. 2). The social repercussions are even more staggering: "The mechanism of 'saying without listening' has multiplied and spread, to finally constitute itself as a generalized form of domination and control" (*ibid.*). Confirming evidence about the inattention to listening comes from the fact that "in our culture there has always been a vast profusion of scholarly works focusing on expressive activity and very few, almost none in comparison, devoted to the study of listening" (pp. 5-6). (I checked our own performance and discovered that the *Chicago Psychoanalytic Literature Index* does not have an entry for 'listening' before 1970.)

Corradi Fiumara proposes that "we could start out by admitting that there could be no saying without hearing, no speaking which is not also an integral part of listening." She is inclined to believe that "an individual can speak only if he is listened to" (pp. 1-2). Such a conception has significant implications for research involving the phylogenesis and ontogenesis of language.

Corradi Fiumara suggests that cultivating proper hearing as a natural dimension of *logos* brings it into bloom, into a state of completion that is lacking when it only exerts the power of saying. She is speaking not about the capacity to hear in the physical sense but about an attitude of the mind, a disposition to listen which transposes—according to Heidegger—what is heard into the realm of the spiritual. Such a manner of listening resonates with the analyst's habit of giving a broad range of possibilities to the patient's words. Corradi Fiumara, however, attends to the attitude of listening in other realms beyond psychological and psychoanalytic listening.

She claims that any utterance, any *logos*, personal, philosophical, political, social or scientific, deserves a kind of listening that offers the words heard other possibilities of meaning besides the implicit act of power involved in the act of saying. This is a very interesting point for psychoanalysts. We, too, may be guilty of partaking in the structure of power involved in the act of saying our interpretations. We do claim that what is mutative is our interpretation. Could it be that what is mutative is the condition of listening between the patient and the analyst? Could it be that what is mutative is not the interpretation itself but the patient's capacity to listen to and react to it? There is much to reflect on about the dialectics of verbalization, listening, and interpreting, as well as about the structures of power created by the analytic *logos* in the analytic field.

Talking about listening as a general activity, Corradi Fiumara affirms that listening as *a means of achieving an end* "cannot be regarded as an authentic listening experience" (p. 115). One may question whether listening with the intent to cure or even interpret is a genuine act of listening. Authentic listening requires an attitude that "does not participate in the acquisition of power" (p. 61) or the definition of hierarchical value between interlocutors. Referring specifically to psychoanalysis, she concludes that "it does not seem possible to regard as sufficient the psychoanalytic tradition of empathy, containment, and interpretation originating from a person who is 'superior' by definition, precisely on account of his ability to empathize, contain, and interpret" (p. 173). The point is subtle but well taken. To listen is an act of creative cooperation in the service of hearing not a text or words *but the living being who says them*.

To be heard is so essential for human life that "*we cannot possibly do without being heard*" (p. 175). Furthermore, our own psychic structure depends on it: "The organization of our innerness seems to exist on condition that it is heard, brought out—in effect brought to be born. It is not just a matter of entities lying there waiting to be linguistically seized and organized in the most diversified expression" (p. 148). Such philosophical conceptualization brings into focus the role of parental listening in the formation of "entities" that create psychic structure. We know from the work of Winnicott and Kohut the great significance of parental seeing and mirroring for normal early development. However, much remains to be learned about the effect of diverse modes of adult listening on the older

developing child and its future health or psychopathology. Corradi Fiumara describes the optimal mode of verbal communication as a living, creative, relational act: "The message from the other will not attain its expressive potential except in the context of a relationship through which the listening interlocuter actually becomes a participant *in the nascent thought* of the person who is talking" (p. 144, italics added).

Perhaps we need to conceive of a transitional space for listening. Such a space can be created by the expectant silence of the listener, who is not pressed by clocked time but can wait for the organic timing needed by the speaking subject. "As a result of this silent attention, threads of mental life are granted that coexistential resonance, or recognition, which allows an incipient structure to be inserted into the life of thinking, rather than being rejected or else reduced to the most elementary semiotic mechanisms" (p. 96). It is easy to recognize here the analytic situation with its openness for free association. What is new and truly noteworthy is the implication that, without the space for listening on the analyst's part, the analysand cannot attend to certain "threads of mental life." Without the analyst, the options are repression or superficial, semantic classification.

Corradi Fiumara believes that our culture is in need of a true mutation (p. 165). We need to change a culture that makes speech an end in itself (p. 40), a means at the service of the structures of social, political, and scientific power. Language must be retrieved to help us move to a culture of maieutics, of listening to each other, as the midwifery of the birth and rebirth of our thinking processes. The situation is pressing for our historical moment. We have limited options. Corradi Fiumara believes that the progressive degradation of language creates "the greatest danger" for our times and that "the cultivation of listening" represents "a preliminary task for the survival and 'destiny' of the human species" (p. 117).

I find Corradi Fiumara's book extremely interesting. It offers a philosophical foundation for a psychoanalytic theory of listening and many fascinating reflections about the indispensable psychic need to be heard. I have always been struck by the limited theorizing about the function of language in psychoanalysis. I am not talking about linguistics. I am talking about a theory of the living acts of speech in the analytic situation, which go beyond semantics

to become psychic acts between two persons. Corradi Fiumara's book is a scholarly contribution which can be used by psychoanalysts as a point of departure for serious reflection about analytic listening.

ANA-MARIA RIZZUTO (BROOKLINE, MA)

JAHRBUCH DER PSYCHOANALYSE. BEITRÄGE ZUR THEORIE UND PRAXIS.
Band 23. (Yearbook of Psychoanalysis. Contributions to Theory and Practice. Vol. 23.) Stuttgart: Frommann-Holzboog, 1988. 304 pp.

Since its foundation in 1960 the *Jahrbuch* has served as a kind of official periodical for the German Psychoanalytical Association. It was started ten years after the foundation of the new German Association. In the first years of its existence this had been too small a group to support a periodical of its own, but then it became appropriate for the Association to have a publication which could be associated with it more closely than *Psyche*, which for years had provided an overall view of psychoanalytic psychotherapy and psychoanalysis. *Psyche* never did become an "official" journal of the German Association, although it has often been taken for that.

The title of the new periodical was chosen to link it with the tradition of the *Jahrbuch für psychoanalytische und psychopathologische Forschungen*, which was the first psychoanalytic periodical, starting in 1909, founded by Freud and edited by C. G. Jung. It was discontinued during World War I, after which the *Internationale Zeitschrift* and *Imago* took over as the main psychoanalytic periodicals for the German speaking and reading psychoanalytic community. The new *Jahrbuch* had the same conception as the first, i.e., to provide space for extended papers, especially on theoretical and applied psychoanalytic subjects. It sought papers from national and international authors in multiple areas of current psychoanalytic scientific investigation and thought. These aims have been held to during the years of the continuing existence of the *Jahrbuch*, although there have been changes in the editorial board and in its publishers in the three decades of its life.

Reviewing one of the volumes (this one from 1988) presents one with a dilemma: there are eleven papers covering a variety of themes, mainly theoretical, historical, and applied, that follow very

different psychoanalytic viewpoints. Most of them deserve a detailed review rather than a short description of contents, which can do no more than awaken interest, among those who are able to read German, in the importance of one paper or another. The *Jahrbuch* has, of course, been limited to a small audience due to the fact that the German language has lost much of its former impact on psychoanalytic thinking.

This volume is divided into three sections: theoretical, historical, and applied psychoanalytic contributions. The first, theoretical, contains four papers, by M. Ostow, S. Lebovici, W. Loch, and W.-F. Eickhoff. Ostow deals with apocalyptic visions and fantasies in individual psychopathology, in religious literature, and in myths. Starting with clinical material, he shows how—in states of humiliation and powerlessness—a dynamic appears that typically consists of two elements: the fantasy of the world's destruction and the restoration of a surviving, deserving remnant. This basic pattern can be seen in apocalyptic literature as well. Ostow gives a review of the relevant literature, concentrating on the *Revelation* of St. John and other classics. His discriminating point between individual and common, socially shared apocalypses is that the individual holds to the fantasy of rebirth and a mystical reunion with the mother, whereas the common social fantasy shows a pattern of catastrophic breakdown, i.e., destruction and death followed by rebirth and new life, with an emphasis on father-centered, messianic restoration. This paper can be taken as background for the current, ongoing discussion about Nazi history that is taking place within the German Association. It can extend our understanding by linking individual and mass phenomena with an understanding of psychopathology from a psychoanalytic point of view.

Lebovici, the former president of the IPA, offers a clarification of the basic principles of medical orthodoxy, considering ethical standards of behavior pertinent to the medical profession and relevant for the psychoanalytic profession. Starting from a general overview of actual medical issues, he emphasizes the importance of principles of medical ethics and morals as part of the psychoanalytic professional identity, especially with regard to the pitfalls presented by transference and countertransference problems. He claims that the IPA, as a community of psychoanalysts who share a common view of basic professional and ethical standards, can serve to protect

psychoanalysis, for the patient and the analyst as well, against threats from inside and from outside.

Loch's paper on reconstructions, constructions, and interpretations provides an elaboration of the role of these elements in the psychoanalytic process in the light of recent views in philosophy and theory of science. He refers to new models of evolutionary process, such as "autopoietic systems," to determine the role of speech and interpretation in a dynamic view of structure formation. He deals with the old problems of the pathogenetic impact of real trauma and/or traumatic fantasy, the search for "factual truth" in the psychoanalytic treatment process, and the emergence of the subject and its formation through the "selective constructions of new meanings." This paper is to be seen as another example of Loch's ongoing endeavor to find psychoanalysis a place within the canon of classical scientific disciplines, this time with an emphasis on evolutionary theory. He does it in a cogent way—asking for close attention from the reader to follow his thoughts.

Eickhoff's essay on the lie, from a psychoanalytic point of view, deals with the basic assumption that truth/reality, however forcefully denied, has a tendency to come back and to present its bill. He refers to Freud's seduction theory containing the lie as a constituent part and to the "deferred action" impact of a lie as a special kind of mental functioning that is determined by primal repression. Other related methods of dealing with truth/reality are discussed in reference to their impact on the development of neurotic disturbances and of psychic defense in general and on the resistance against therapeutic "unmasking" as a central element in psychoanalytic treatment.

The second section contains four contributions on the history of psychoanalysis. Fichtner and Hirschmüller elaborate an interesting aspect from a period of Freud's preanalytic scientific life. Both authors are well-known researchers, especially with regard to Freud's scientific and personal writings. They give a lively picture of Freud's relationship with H. Obersteiner, a contemporary neurologist and psychiatrist, who not uncritically but benevolently supported Freud's views and findings in the cocaine and hypnosis phase. This was a crucial period in Freud's life and in its transition from an interest in neuropathology to treatment-oriented activity and psychological issues, on his way toward developing psychoanal-

ysis. This is a very scholarly paper (147 references!) that adds to our understanding of the pressures Freud had to bear at that time.

The paper by Reicheneder about the development of the term "association" by Freud in 1895 gives an interesting and convincing view of how the term—later central to the psychoanalytic method—derived from Freud's neurophysiological research, especially his paper *On Aphasia*, in which he explicated his transition from the concept of a purely organically based and linear functioning of neuronal discharge to a topographical representation of single functions in defined cortical "centers." Data resulting from anatomical methods had proved, in Freud's view, to be insufficient for explaining and supporting a neurophysiological model of brain structure and function. Freud's concept of "association" as a core term for neurophysiological functioning consequently led him to a more psychological means of conceptualizing the development of speech and its functioning and then to the concept of "free association" as a core instrument of the psychoanalytic method.

T. Köhler deals critically with the issues brought up by Ellenberger and Sulloway about whether Freud himself created his own myth of himself as a "lonely hero" during his early psychoanalytic years. Köhler provides a convincing argument that Ellenberger's and Sulloway's attacks on psychoanalytic historiography, mainly by Jones and Freud himself, are incorrect in fundamental respects. He examines publications and critical reviews from the first period of psychoanalytic literature and its reception, especially in the first decade of the century, concentrating on the publication of *Die Traumdeutung* and the *Drei Abhandlungen zur Sexualtheorie*. It can be shown, he indicates, that Ellenberger and Sulloway dealt with the historical source material in a selective way that led them to conclusions that are not valid. Köhler also gives a lively picture of certain aspects of the early period of psychoanalysis, such as priority struggles involving the role and function of hypnosis (Janet) and of infantile sexuality (Moll) in the development of psychoanalysis and the vicissitudes of its scientific and social reception during those years.

E. Federn's "Remarks on the Actual State of the History of Psychoanalysis" starts with a comparison of the objects of general and of psychoanalytic history. He puts forward the idea that psychoanalysis as a method starts from a genetic point of view rather than

a historical one. History of psychoanalysis, he states, should follow the lines of its development (genetically) as reflected in various areas of its concern. He then discusses the development of the psychoanalytic movement from a restricted personal interest to a broadening international community, commitment, and responsibility to preserve and develop psychoanalysis as a science. Psychoanalytic history and its scientific reception in historiography will gain growing importance as a constituent part of this development. Federn suggests some special fields of historical research as a framework for planning a future history of psychoanalysis. He reflects on the possibility of founding an "International Association for the History of Psychoanalysis" dedicated to the establishment of psychoanalysis as a scientific discipline that is not peripheral to the body of sciences.

The section on applied psychoanalysis contains three papers. The first, by R. Scholz, "Early Aspects of the Disintegration of the Bourgeois Self," can be seen as an interesting example of the range and extent to which conclusions can be drawn from applying a psychoanalytic hypothesis deriving from clinical data to a historical period. Scholz, editor of Eissler's Goethe study in German, starts with Eissler's hypothesis that Goethe underwent a psychotic breakdown during a certain phase of his adolescent development. His lyrical speech, a new poetic language, that has to be seen as a radical change in the poetry of his time, reflects the threat presented to him by this psychotic disintegration and the defensive and restoring aspects of his creative response to this threat. The intense, identificatory, contemporary reception of his Werther novel, together with the continuing modernity of his new language in poetry and prose are seen as reflecting the general weakness of "bourgeois" psychic structure—not only that of Goethe's contemporaries—specific to the capitalistic economic and sociological principles of bourgeois society.

The dialectics between tendencies toward dissolution of psychic structures and the application and development of containing and integrating defensive aspects of Goethe's literary production and life are put in parallel to Rousseau's *Nouvelle Héloïse*, where similar things can be observed. The conclusions derived from this are meant to provide an extended understanding of the class-specific psychic structure of the contemporary "bourgeois" and its respon-

sibility for the disasters in recent history, especially concerning German capitalists. From my point of view, this tends to go beyond hypotheses that are reasonably and appropriately derivable from contemporary concepts of narcissism and psychosis. It might leave the reader a bit uneasy, especially if the reader is not familiar with the use of applied psychoanalysis in the field of literature with a strong political ideology in the background. Nevertheless, Scholz presents interesting hypotheses that are worth thinking about.

Goldmann's paper, "Guiding Ideas for a Psychoanalytic-Hermeneutical Approach to Autobiographical Texts," reviews relevant literature, with special reference to hermeneutics, as considered by Schleiermacher and Dilthey, German philosophers of the eighteenth and nineteenth centuries. They used hermeneutic principles in a way that can be seen as the forerunner of an interpretation-oriented approach to autobiographical writings. Dreams and other narratives as part of the analytic process are viewed as an "autobiographical text" used in the quest for a better understanding of the unconscious content and meaning behind the conscious content. Goldmann suggests using a psychoanalytic hermeneutic approach to autobiographical texts to achieve a better understanding of what the author unconsciously offers. In that context, autobiography can be viewed as an attempt to overcome personal crises.

The last paper, by G. Greve and K. Hössler, an essay on a psychoanalytic understanding of Offenbach's opera, *The Tales of Hoffmann*, is a nice example of a joint view of the text and the music of a standard in the world of traditional opera. The libretto is derived from three novels by E. T. A. Hoffmann, the first of which is the famous *The Sandman*. Freud referred to in his paper on "the uncanny." All three novels deal with psychotic breakdowns resulting from traumatic separation and guilt. The libretto has taken aspects of the personality of the main protagonists from the novels and transposed them into the new character of "Hoffmann" himself, although Hoffmann never actually became psychotic. Offenbach obviously identified with Hoffmann in certain respects. The authors present an elucidating elaboration of the literary and musical means and structure of the opera from a psychoanalytic view, especially in regard to the interaction between music-composer and listener. They show how psychic conflict and the attempt to achieve a solution through music and scenic representation can be partic-

ipated in on various levels of emotional commitment and control, thus avoiding fear of the affects and fantasies.

This *Jahrbuch* volume can be highly regarded. It is a collection of papers representing various kinds of psychoanalytic contributions. The papers have a kind of "German touch" in many ways, directly or indirectly. They might raise interest in those who read German well enough to inform themselves about the range of thematic and scientific interests in the German psychoanalytic literature and the interests and level of quality for which the editors of the *Jahrbuch* stand.

ALBRECHT KUCHENBUCH (BERLIN)

JAHRBUCH DER PSYCHOANALYSE. BEITRÄGE ZUR THEORIE UND PRAXIS.

Band 25. (Yearbook of Psychoanalysis. Contributions to Theory and Praxis. Vol. 25.) Stuttgart: Frommann-Holzboog, 1989. 296 pp.

The scope of the 1989 volume of this respected series is indicated by its division into three parts: Historical Contributions; Psychoanalysis and Philosophy; and Clinical Contributions. The lead article is by Hans Keilson, a well-known German-Jewish novelist who is also a psychoanalyst practicing in the Netherlands. The chapter is entitled "Psychoanalysis and National Socialism" and was first presented at a meeting of the German Psychoanalytical Association in the spring of 1989. Keilson discusses aspects of the history of psychoanalysis in Germany during the Hitler years. Beyond that, he comments more generally on the facts and tragic fate of the Jews as a minority group in Germany. He rejects the accusation that psychoanalysis is a Jewish science. In an interesting juxtaposition of Breuer and Freud, both Jews, he notes that neither Breuer's flight from Anna O.'s transference nor Freud's utilization of it to make discoveries reveals any particular Jewish themes: "[The fact] that Freud could put behind himself his neurological, physiological, and physical-theoretical preoccupations speaks for his genius but not for his Jewishness" (p. 24). Keilson alludes to the accommodation of German organizations to the Nazis, a theme that is discussed in more detail in the second chapter, by Ludger Herman, "Conditions and Limits of Scientific Productivity of Psychoanalysts in Germany, 1933-1945." He points out that no creative contributions could be

made to psychoanalytic science during the Nazi Years. He illustrates this with an examination of the work of Alexander Mette, a German analyst who tried to escape suppression by turning away from clinical research to applied analytic scholarship in an honorable attempt to resist conforming to the Nazis, albeit without success.

The philosophical section leads off with a chapter by Wolfgang Loch, "On Correlations between Psychoanalysis and Philosophy." He sees a close relation of Freud's metapsychological assumptions to Kant's metaphysical presuppositions. Freud's adherence to an Aristotelian, holistic point of view is noted, as well as Freud's links with Brentano's doctrine of intentionality and meaning as the very essence of psychic phenomena. Loch suggests that without both of these concepts the theory and technique of psychoanalysis are unthinkable. He also believes that psychoanalysis acknowledges a "realm" of being which cannot be derived from time and space-bound experience, although it does not come into existence without these. Therefore, psychoanalysis, in dealing with the "empirical ego," has to presuppose the "existence" of a "transcendental ego" (or subject). Loch also notes a striking correspondence between certain esoteric concepts of Nietzsche and Freud. Finally, "psychoanalysis, like philosophy, is interested in enlarging the possibilities of the individual by furthering the (empirically understood) ego functions. Since the ego, the subject—the *bestimmbare Selbst* of Kant—always transcends its predicates, both methods have an indefinite aim: the permanent execution of their method" (p. 119).

Rainer Kaus and Johannes Heinrichs, in "Transformations of the Unconscious," offer a critique of O. Marquard's "Transcendental Idealism—Romantic Nature Philosophy—Psychoanalysis." The authors see psychoanalysis as fundamentally analogous to Kantian transcendental philosophy in that, in both, the unconscious is an "unconscious of consciousness." They contrast this with the romantic philosophy of nature (Schelling) which presents a basically different concept of the unconscious, "the idealism of nature," an organico-psychic unconscious. They question whether the contemporary use of "the unconscious" is not an unreflected turning off from the Freudian concept to the romantic concept as they see it used in some current "humanistic" psychotherapies.

A chapter by Wolfgang Tress, titled "Adolf Grünbaum and the

Psychoanalytic Truth," takes issue with this philosopher's critique of Freudian psychoanalysis. He reviews three major theses of Grünbaum and attempts to refute them. First, he demonstrates that Grünbaum's theses are based on a one-sidedly exaggerated concept of truth. Also, he presents evidence "that motives of action cannot be causes in the strict sense of the concept of causality" and argues that Grünbaum's "atomistic understanding of the neurotic symptom . . . fails to meet clinical reality" (p. 196). Grünbaum's dismissal of the clinical psychoanalytic enterprise as placebo therapy is countered with the observation that such radical skepticism ultimately undermines the possibility of any meaningful exchange of ideas, including that between scientists. He credits Grünbaum with forcing psychoanalysis to reflect on some fundamental facts.

The clinical section contains Johannes Grunert's "Intimacy and Abstinence in the Psychoanalytic Alliance." Grunert thinks that analysts sometimes forget that psychoanalytic knowledge is derived from direct interpersonal experience, which evidences active emotional forces operating between human beings. Disturbances rooted in the earliest experiences are less neutralized emotionally and more affectively loaded than the classical psychoneuroses. Thus they are experienced as more menacing by the analyst, with possible antitherapeutic consequences such as paralysis of scientific curiosity and arousal of feelings, particularly sexual ones. He suggests some attitudes that may be helpful, namely, an autonomous position that offers the intimacy necessary for the progress of the analytic process together with keeping a distance that promotes the analytic functioning. Helmut Reiff offers a discourse on body image in his chapter, "Skin, Body and Symbol." The Piagetian concepts of "filled space" and "empty space" are used to illustrate the development of the body image as an integrated unit. Originating simultaneously in the "skin-ego" and the dialogical world of mother and child, it makes use of mirror identification (the coordination of self-recognition and self-movement). "Psychosomatic illness is thus related to deficits in the mirroring by the mother, leading to a deficient, unstable body image, and an insufficient control of body orifices" (p. 254).

"Problems of Approach to Schizophrenics" is the title of the last chapter, by Peter Seidel. The author discusses the generally poor results of psychoanalytic treatment of schizophrenia. He suggests

that the transference interpretation of drives in these cases results in the analyst's becoming included in the psychosis. Seidel offers an alternative view based mainly on object relations theory and comments on the therapeutic technique of Gisela Pankow.

This volume of the *Jahrbuch* testifies to the renewed vitality of psychoanalytic science in Germany. To this reviewer, the historical part seems to be a sincere effort to come to grips with some of the terrible consequences of the Hitler years through what appears to be an open discussion and self-examination. The philosophical and the clinical chapters are scholarly and of the highest quality. The book can be recommended particularly to analysts interested in the issues raised by Grünbaum and to those who must deal with the difficult therapeutic problems of psychosomatics and schizophrenia.

ERNEST S. WOLF (CHICAGO)

Psyche. XL, 1986.

Emmett Wilson Jr.

To cite this article: Emmett Wilson Jr. (1992) Psyche. XL, 1986., The Psychoanalytic Quarterly, 61:1, 137-153, DOI: [10.1080/21674086.1992.11927338](https://doi.org/10.1080/21674086.1992.11927338)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927338>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



View related articles [↗](#)

ABSTRACTS

Psyche. XL, 1986.

Abstracted by Emmett Wilson, Jr.

Law and History. On Psychoanalytic Concepts of Epistemology. Ulrich Sonnemann. Pp. 569-582.

Psychoanalysis is noted for its perpetually defensive attitude in regard to its scientific status, in the traditional sense of science. However, the author believes that there is not such a divergence between psychoanalysis and the scientific status of putatively normal sciences. There is only an apparent contradiction in psychoanalysis between metapsychological reductivism and narrative, that is, between the application of explanation by metapsychological principle and the narrative of the individual biography, i.e., between law and history. Sonnemann attempts to clarify psychoanalytic epistemological concepts by setting psychoanalytic explanation in relation to the two terms, law and narrative, or two conceptions of history. Both approaches must be taken into account. The author traces the recent development of thinking about these two terms, noting the shift from the nineteenth century preoccupation with historical patterns in Hegel and others, which became altered through Nietzsche and others. Freud's psychoanalytic theory articulated the interpenetration of life history and cultural history. Sonnemann emphasizes the cultural dimension in order to show the relativity of "laws" with respect to individual factors.

On the Problem of Sadism and Masochism. Judith Le Soldat. Pp. 617-637.

The author puzzles over what seems to her the relative repression and suppression of recognition of Freud's views on aggression, sadism, and the death instinct, in contrast to the seemingly unending discussions of sexuality. Even Freud noted the resistance that he found in himself, which long postponed the discovery of what he later came to call "obvious." The author sees this resistance that Freud found in himself as still operative among contemporary psychoanalytic theoreticians, in particular in their failure to recognize Freud's equation of aggression and the death instinct. There is a tendency to regard the death instinct as a theoretical construct without a necessary link to aggression. Not only is this theoretically worthless, confusing Freud's basic insight, but it also utilizes the notion of an unconscious self-destructive force to disavow the emotional experience of things closer to hand. If we had a patient with such behavior, we would call the process a counterphobic defense. For those to whom her thesis about the collective resistance of the psychoanalytic guild seems exaggerated, the author suggests that they examine the literature on the denial of the dangers of nuclear war. She cites examples of this literature in which themes of aggression and aggressive instinct are meticulously avoided. But the repressed returns as masochism. The masochist, who willingly does what everyone unconsciously *must* do, makes a truly extraordinary demand on the strength and capacity of our defenses. Freud in his earlier discussions viewed masochism as economically and genetically a derivative of sadism. Le Soldat reviews Freud's discussions, beginning with dreams that seem not to express wish fulfillment, to the

development of a concept of dreams expressing masochistic wishes, to the development of the concept of masochism in *Three Essays on the Theory of Sexuality* (1905), and ultimately to its development in *Beyond the Pleasure Principle* (1920) and "The Economic Problem of Masochism" (1924). In the later stages of the theory we are confronted with a quite different representation, in which masochism is not derived from sadism, but is original. And finally, Freud's thesis of the death instinct and the concept of structural conflict only become fully meaningful when the intrinsic potential for conflict between the nirvana, the reality, and the pleasure principles is recognized. This conflict potential of the abstract principles has often been neglected; it is scarcely mentioned, for example, in the writings of Hartmann, Rapaport, and Eissler. Though Freud did not discuss masochism directly after the 1924 monograph, subsequent passages in other works indicate that he continued to believe that the aggressive or destructive instinct derives ultimately from the death instinct. The historical development of Freud's theory of masochism can be read as the history of a struggle concerning the conscious recognition of the ubiquity of the aggressive instinct. The path from the original idea of masochism as a defense against sadistic impulses to the theory of a genuine masochism involved in the theory of the death instinct may also be seen as the struggle against the recognition that the operation of the death instinct itself may bring instinctual satisfactions.

The Life and Work of Imre Hermann. Paul Harmat. Pp. 640-651.

Harmat reviews the life and the theoretical interests of Imre Hermann, a student of Ferenczi's who died in 1984. He discusses Ferenczi in the context of the political events of the last several decades which have profoundly affected and suppressed Hungarian psychoanalysis.

George Devereux. Toward the Understanding of Psychoanalysis as an Epistemological and General Cultural Discipline. Brigitte Milkau-Kaufmann and Florian Rötzer. Pp. 665-677.

The authors review details of Devereux's biography, from his birth in Hungary in 1908, his early years in Paris as a student of theoretical physics, his shift to ethnology, and his eventual move to sociology and psychology. In 1932 Devereux emigrated to the United States and conducted field research on the Hopi and Mohave Indians. He later studied the Papuan and Indonesian peoples. Upon his return to the United States he taught and carried out research at various psychiatric institutions in Massachusetts and in Topeka, where he became a psychoanalyst. From 1959 to 1963 he was in private practice in New York, and taught ethnopsychiatry at Temple University School of Medicine in Philadelphia. His training analysis began in German with Jokl, continued in Hungarian with Róheim, and finished in French with Schlumberger. After 1963 he returned to Paris to the École Pratique des Hautes Études to continue his research in ethnopsychiatry, a science he had virtually founded. He died in France in 1986.

Devereux's primary theoretical interests focused on the epistemological basis of

psychoanalysis, especially on the dyad of observer-observed, and were obviously influenced by his earlier training in physics, specifically by the principle of complementarity. The "myth" of distance and objectivity in other sciences was for him an indication of defense against anxiety in the would-be observer, who deluded him/herself with a fantasied shield of objectivity. For Devereux, psychoanalysis was *the* paradigmatic example of a scientific discipline, in contrast to other sciences, because it took into account transference-countertransference phenomena as well as epistemology and methodology. Thus the seemingly never-ending debate about its scientific status was turned around completely, with its methodology now shown to be an ideal that other sciences approached only with difficulty. To Devereux, psychoanalytic mimicry of objectivity was misguided; tests, instrumentation, one-way mirrors, and psychoanalytic anonymity betray information about the *observer* in the same way that parapraxes and lapses of memory provide information about a psychoanalytic patient. Self-reflection in an investigation does not lead to a paradoxical circularity, but opens up a dialectical field, similar to the Hegelian structure of self-consciousness. Reciprocal self-awareness and interaction are not disruptions but the foundation of knowledge. Ethnopsychanalysis is not an autonomous discipline with a limited field of inquiry and a specific method, but reflects the interrelations between individual and group, a complementarity between psychology and sociology. Human phenomena do not, according to Devereux, have a single explanation. The discourse between sociology and psychology is quite interdependent, and sociological and psychological explanations are not reducible one to the other. His thinking was thus trans- or pluridisciplinary. He tried to avoid premature solutions and simplistic explanation. For that reason his writing often seems diffuse, for he progressed by montages of heterogeneous fragments rather than in a closed, worked-out system.

Devereux preferred to call his approach trans-ethnographic or meta-ethnographic or even meta-cultural, in contrast to what has come to be known as trans-cultural psychiatry. He attempted to avoid the extremes of the medical model of sick and well, normal and abnormal, as well as the relativistic extreme in which all psychological difficulties are explained through a cultural determinism. Nonetheless, Devereux believed that there are limitations to the plasticity and variation of human affect and behavior and therefore held out the possibility of a universal and general psychopathology. He also discussed an ethnic unconscious, but this was, in his conception, quite different from the collective unconscious of Jung. This ethnic unconscious is built from cultural directives and precipitates, and not from archetypes. It is the specific constellation of the defense mechanisms that a given culture brings to bear on human experience, and through which the necessary renunciation of the realization of wishes and fantasies can be achieved. For Devereux every culture is as analyzable as every individual.

On the Relationship between Psychoanalysis and Systems Theory. Tomas Plänkers. Pp. 678-708.

Plänkers is critical of various attempts that have been made to reduce psychoanalysis to systems theory. These attempts implicitly claim a logical priority for systems theory. Plänkers reviews the development of systems theory and various interpre-

tations that have been proposed. The basic position emphasizes hierarchical organization, with the variation of elements within the system determined by the invariant overall structure. The impetus to link psychoanalytic theory to systems theory is the hope that there would then be a common language with non-analytic disciplines, and psychoanalysis would be freed of the stigma of being unscientific. The development of psychoanalytic thinking about adaptation and affect regulation (Hartmann, Rapaport, Joffe and Sandler, among others) led to a concept of psychic structure that seemed analogous to a systems-theoretic structure. The author examines in detail the work of Peterfreund, Bowlby, and Rosenblatt and Thickstun, among English speaking authors; and König, Ciompi, Stierlin, and Fürstenau, among German theorists. All these writers have attempted to integrate psychoanalysis and systems theory. None have broken with psychoanalysis, but have seen this attempt at integration as an improvement of the epistemological and scientific status of psychoanalysis.

Plänkers summarizes these various positions in general terms: they all seem to derive from Freud's position in the *Project*; they all attempt to link psychoanalysis with general psychology, that is, to develop hypotheses of high-level generality concerning structure and function of the human psyche; and finally, they (Fürstenau, Stierlin) attempt to establish external links to sociology or (Peterfreund, Sandler, König, Ciompi) links to other, internal intrapsychic processes. The goal of this systems-theoretic approach is to place psychoanalysis on a par with other sciences and to open up new fields of possibility for psychoanalytic research. Conclusions of its proponents vary between the claim that psychoanalysis is a mishmash of theories that systems theory can improve, or that systems theory is a better paradigm than the outdated scientific paradigms previously employed in psychoanalysis. Finally, none of the authors believe that their work in any way modifies the basic tenets or practice of psychoanalysis. Plänkers, however, is very critical of these grandiose claims and he argues that the conclusions are incorrect. In particular, he challenges the claim that systems models do not disturb the basic tenets of psychoanalysis. He attempts to show just how disturbing, revisionistic, and unfaithful to psychoanalysis these proposals are. For Plänkers, systems theory and psychoanalysis are incompatible, and attempts to reduce psychoanalysis to the former do not do justice to its insights and theoretical innovations.

Does Psychoanalysis Neglect the Body? Günther Bittner. Pp. 709-734.

Today it is often claimed that psychoanalysis neglects the body and nonverbal experiences. Bittner writes that since psychoanalysis does take the body into account in many ways, the objection, to be credible, must be formulated more specifically. The more serious criticism is that psychoanalysis neglects the *experience* of the body, and that the notion of body image—which seems to replace body experience in psychoanalysis—does not play a proper role. After a discussion of body-therapeutic techniques which attempt to treat psychosomatic complaints—with, however, serious neglect of associative material and transference phenomena—Bittner traces various elements through S. Freud, Anna Freud, Klein, Andreas-Salomé, Groddeck, Winnicott, Jacobson, and Kohut, to detail the complex position assigned to the body in psychoanalytic theory.

Revue Française de Psychanalyse. XLVIII, 1984.

Abstracted by Emmett Wilson, Jr.

The following six abstracts are of articles from Issue No. 5. This issue offers a glimpse of the approach, theory, and psychotherapeutic endeavors of a group of French psychoanalysts specializing in research in and treatment of psychosomatic illness. They have developed a rather original "psychosomatic psychoanalysis." Their studies were carried out at the Psychosomatic Institute.

Introductory Remarks. Michel Fain. Pp. 1125-1132.

Fain opens the discussion with some thoughts about the place of psychosomatically oriented psychoanalysts on the French psychoanalytic scene: they work to some degree in isolation, and although their papers and reports do appear in journals such as *Revue Française de Psychanalyse*, it is almost furtive. There are theoretical and metapsychological reasons for this isolation. In work with psychosomatic patients, the notion of regression is quite different from that encountered in work with the usual psychoanalytic patient. The type of disorganization described by Pierre Marty becomes prominent. Two principal concepts have been developed to explain regression in psychosomatic illness: operative thought and essential depression. Operative thought is so called because it does not involve associative preconscious links which are counteracted. In other words, it has no tendency to become sexualized. Marty has now come to use the term "operative life." In these patients, the work of dealing with and modifying reality is done without arousal of any unconscious reaction, and day-to-day living is carried on devoid of associative links to unconscious material. Essential depression was at one time designated "objectless depression," but the adjective "essential" is justified by the lowering of functional level without the customary compensating depressive symptomatology of self-accusation, loss of self-esteem, and loss of interest in the self.

On Somatic Problems in Freud's Work and in That of Some of His Successors. Rosine Debray. Pp. 1133-1142.

Debray reviews the development of Freud's thought on somatic illness. Freud made a distinction between hysterical conversion and the opacity of somatic illness, which was devoid of "meaning" in his sense. However, some, including Groddeck and Garma, found that somatic illness improved through psychotherapy, and so made a premature and unfounded leap to include somatic illness within the framework of mental symptoms that could be treated in the same manner as conversion hysteria. The contemporary French school has, in contrast, been influenced by Freud's theory of the actual neuroses, and by the notion of stress as it appears in the work of Franz Alexander, who recognized "specific patterns of conflict." This work was continued by Flanders Dunbar, who investigated the typical psychological profiles of individuals presenting with the same illness. Sometimes this has become falsely reductive, as in the notion of "Type A personalities." Such studies lose the psychoanalytic perspective but still afford doctors some false sense of predictability and epidemiology. The notion of stress cuts across all this research, and can include

a purely medical model as in the work of Hans Selye, or can refer as well to object loss or mourning as in psychoanalytic theory. The latter work is illustrated by George Engel. The notion of a typical profile has shifted now to the notion of a special mental organization in the group of patients called "psychosomatic." Operative thought, the absence of fantasy activity, and essential depression constitute a triptych frequently found in the clinical picture, but the Psychosomatic Institute group questions whether this will eventually constitute a congenital nosological entity. The variability of the symptomatology tells against such a simplification. Marty's and de M'Uzan's description of operative thought has been taken up by others, in particular Peter Sifneos and John Nemiah in the United States, in the description of "alexithymic" characteristics. In contrast to Franz Alexander and Max Schur, who held that the decompensation represented by somaticization was the result of too much neurosis, Marty believes these patients do not present with sufficient frank neurosis because of a failure in the functioning of the preconscious. The question of using classical psychoanalytic treatment for psychosomatic illness is still unsettled. Can it be carried on without falling into the simplistic notions of Groddeck, or of Garma and his collaborators? Some results have been obtained by applying classical psychoanalysis to this group of somatic problems, but in general the poor therapeutic results, as well as the lack of interest these patients have in psychotherapy, have led to the description of alexithymia and the preference for "active" techniques. The approach of the Psychosomatic Institute group is to achieve greater permeability between the intrapsychic structures through the transference and countertransference bond that the patient establishes with the analyst. This does not, however, remove the question of the opacity of the somatic symptom itself.

On the Dreams of Patients with Somatic Illness. Pierre Marty. Pp. 1143-1161.

While some patients with somatic illness maintain they have no dreams, others report several different types of dreams. These include simple "operative" dreams in which the diurnal residue, or the tasks for the next day, are dreamed of without associations, or with a total filtering out of their unconscious elements. A second type is the repetitive dream. This is not repetitive of theme, as in the dreams of neurotic patients, but rather the same dream is simply repeated. Finally, there are "raw" dreams in which there is direct representation of instinctual aims without any deformation through symbolization. In all these there seems to be a failure of linkage to other elements in the unconscious and preconscious which are necessary for the normal functioning of censorship. The absence of associations to the dreams is an indication that the dreams are not the object of censorship. This notion of failure of censorship raises many questions, in particular why such patients' behavior does not involve more flagrant acting out of conflicts, and why some censoring structures, such as the superego, are present in spite of the lack of censorship in these "raw" dreams. Why, too, is the behavior of sleepwalkers not more flagrant than it is? It is Marty's thesis that psychological deficits in such patients are replaced and compensated for by systems of psychosomatic disorganization which become manifest in the somatic symptoms. The development of the capacity for symbolic dreaming is an accompaniment of therapy with these patients.

The Gaze, Eroticization, and Psychosomatic Illness. Jacques Cain. Pp. 1183-1195.

Cain discusses Freud's 1910 study, "The Psycho-Analytic View of Psychogenic Disturbance of Vision," as well as Freud's generalizations in other papers concerning somatic involvement and secondary eroticization of other organs. Freud used the notion of somatic compliance for the last time in the 1910 article. It was a concept which had a relatively short life span, appearing for the first time in the Dora case, and then disappearing ten years later, after this article. However, it is a term that is still current in psychiatric thinking, possibly encumbering it. Freud may have seen that the notion was no more explanatory than the notion of the "dormitive" power of opium. Or perhaps he disliked explanations that closed the door to further research, and wanted to place in question again the problem of the body and the why and wherefore of a corporal meaning. The choice of a particular neurosis or of a given mechanism of defense is often no more explicable than the passage of conflict to the somatic sphere. Cain considers the notion of the gaze (*regard*) and its role in psychoanalytic and philosophic theory. It has become important in psychoanalysis through work with infants. Lacan discussed it in his important article on the mirror stage, and Winnicott paid great attention to it. We are aware now how important the gaze is in the essential moments of development that lead to the structuring of the personality of the infant. The eroticized body of the other, perceived by the gaze, is constituted as an object of desire as well as the desiring object. It is by the mnemonic trace of such an incorporation that the first elements of fantasy life become established in the child. In the encounter of the two gazes the structuring of the neonate's psychic life begins. Cain and his co-workers refer to this encounter of gazes as complicity (*connivance*), implying a secret agreement between two persons. The "between" is the important element here.

Complexities in Consultation on Psychosomatic Problems. Michel Fain. Pp. 1209-1227.

The author discusses his interviews with various family members in the case of an eleven-year-old girl with severe asthmatic attacks, for whom the possibility of a "parentectomy" was being explored. He emphasizes the complex interplay of intra-familial fantasy life. A psychotherapy that was directed only toward the identified patient would menace the fragile equilibrium of the family as much as the removal of the child from the home. Knowledge of the linkages and relationships within a family is necessary before undertaking a psychotherapeutic action concerning one of its members.

Aspects of Mental Life in the Aged. Gérard Le Gouès. Pp. 1259-1273.

In Marguerite Yourcenar's novel, *Hadrian's Memoirs*, the aging emperor comments sadly on the dissolution of the good relationship he had formerly had with his body. Le Gouès utilizes this notion of a change in the relationship to the body to discuss the work which the psychic apparatus must carry out in the aging process when constantly confronted with physical discomfort and weakness. Although the work of aging may be in some ways no different from that involved in physical illness

or injury earlier in life, it acquires a particular dimension in great age because of the chronicity of the handicap and the pale hope of restitution. There is an irrevocable modification in the body image, that pedestal of identity, and therefore in the narcissism involved. There is a redistribution of resources at the expense of the earlier sublimatory activities and object relations. Aging is, above all, a difficulty in experiencing and living in an aging body, a difficulty not easily or clearly imaginable by younger persons in good health until a personal encounter with it in oneself or in one's family occurs. A thinness of the preconscious occurs in the same way that Marty has described for psychosomatic illness, opening the way for somatic manifestations. The author emphasizes the change in the "space of illusion," which even in adult life and well into the aging process was always directed toward the future. Suddenly, the polarity of this space is reversed, and turned to the past. There arise wishes to deal with one's past, to "write one's legend," whether in memoirs, a novel, etc. The old person launches him/herself in the conquest of the past because the future seems less enviable. Some become marvelous raconteurs, to the pleasure of their listeners, and may find a sort of narcissistic reparation in the attentiveness of children who like to listen to the old folks' stories. There are other aspects to aging: there is an anxiety about weakness or exhaustion, an obligatory experience of passivity, and the necessity to come to terms with the notion of loss. Some have spoken of a "narcissistic anemia." This involves the loss of professional activity, the loss of companions, the loss of autonomy. Some of the pages of Yourcenar's novel are virtually clinical descriptions of Hadrian's depression and acceptance of his aging and loss of sense of self. The presence of another person at the time of death seems important in carrying out what de M'Uzan has called the work of death.

The Setting and the Word. Paul Israël. Pp. 1351-1361.

The current range of patients taken into analysis includes borderline patients with a mixture of neurotic and characterological symptoms. The latter symptoms sometimes require a modification of the treatment setting to avoid an intensification of the characterological kernel of the illness. The author maintains, however, that manipulations of the formal elements of the setting run the risk of intensifying characterological formations. He offers the hypothesis that if the language of the analysand fails to bring in psychologically useful representations of important material, the productions of the analyst can set up a sonoric and visual space which provokes a more archaic mode of direct reliving of these same representations. This modulation of the setting by the analyst's words affects nonverbal aspects of the preconscious. It has been discussed under various names by many theorists, and is in direct line with some of Freud's reflections in "Remembering, Repeating and Working-Through." He suggests that this is a mode of acting on the setting, enriching the word representations of the preconscious. Some have spoken of the analyst as the guardian of the setting, but the setting is just as much the guardian of the analyst and the analysis. The rules of the setting guarantee the relative countertransference neutrality of the analyst.

From Mesmer to Freud. First Reflections on the Prehistory of the Psychoanalytic Setting. René Roussillon. Pp. 1363-1383.

The author disagrees with the view of the Freudian revolution as a rupture with the past, as the structuralist accounts have wanted to make it. It is rather at the heart

of nineteenth century psychiatric and medical thought. Freud may have effected a deconstruction, to borrow a concept from Derrida, of the anatomo-pathological hypothesis on hysteria. Many research efforts have now attempted to place Freud within the epistemological perspective of his era, but these have been primarily concerned with metapsychological concepts, and few have concerned themselves with the pre-history of the psychoanalytic setting. The author discusses Mesmer's career and his use of certain settings and paraphernalia such as a vessel (*baquet*) to contain his "magnetic fluid." He examines Mesmer's tremendous influence on thinkers and subsequent practitioners of "animal magnetism" in Germany and France in the years immediately following.

Some Considerations on the Difficulties of Psychoanalysis of Borderline Children. Francisco Palacio Espasa. Pp. 1399-1412.

Espasa presents a Kleinian view of the psychoanalysis of children. Many children who come to treatment receive brief or limited psychotherapy rather than psychoanalysis. Because the sessions are limited in number and frequency, the content of the transference is limited also. The focus tends to be on a certain number of fantasies considered to be responsible for the symptomatology. Although the notion of transference itself is too limited a concept to explain what happens in an analysis, it can be very useful in these limited psychotherapies, and the focus on central conflicts may make the therapy quite helpful to children with limited pathology. Psychoanalysis now tends to be used only for children with defects in their neurotic organization, or with a very labile neurotic organization. This once prompted Diatkine to comment that the primary indication for the psychoanalysis of children is a prepsychotic level of functioning. It is important to make clear the differences between neurotic functioning and the functioning of children with more severe pathology, for this has technical consequences. The difference is primarily in the elaboration of the depressive position. This is considerable in neurotic children, permitting their fantasy life to be expressed through a system of representations of the surrounding world and themselves, especially their bodies, thanks to the capacity for symbol formation. "Borderline" children have had access to a depressive organization, but the importance of aggressive fantasies against the primitive fantasy objects causes the depressive anxiety to take catastrophic forms. These anxieties involve fantasies of the destruction of objects, and affect the continuity and integrity of the ego. In the best cases there is a usual level of functioning by secondary process, with intrusion of very poorly symbolized archaic fantasies of destruction and persecution. In other cases the experience of the destruction of internal objects is accompanied by a disintegration of the ego which is identified with them. This leads to a massive inhibition in the capacity for symbolization and even of representation, with disturbances in the autonomous ego functioning of language and intelligence. The author concludes with case material illustrative of the treatment of such borderline children.

The Setting of Psychoanalytic Family Therapy. Jean-Pierre Caillot and Gérard Decherf. Pp. 1421-1434.

This article deals with the changes of setting necessary for psychoanalytically oriented family therapy. The authors consider this therapy a form of group analytic

therapy. Their definition of "setting" is the space of arbitrary invariants set up by the analyst as necessary for the appearance and unfolding of the psychoanalytic process. It is a transitional space between bodily, social, and physical reality on the one hand, and symbolic space on the other. It is ambiguous, because it belongs simultaneously to two orders, the real and the symbolic. Free association is the rule of the setting for family therapy. Here, however, the fundamental rule is an invitation to speak freely, rather than an injunction to omit nothing, thus preserving the possibility of individual secrets. Family therapy is not for neurotic families, in which differentiation and separation have been achieved. The aim of family therapy is to lead more disturbed families into an organization that is closer to that of the neurotic family. Because psychotic and psychosomatic phenomena are important in such families, the family members are invited to speak of their daydreams and their dreams of the night. The rule of abstinence is applicable also, in that the therapy is a verbal one. The family members are invited to speak, to think, to fantasize, but not to seek solutions concerning the day's realistic problems. The rule of abstinence is different for families, however, because there is one major difference in family therapy and psychoanalytic group therapy: the family group remains together after the session is over. The setting in family therapy becomes a shared group fantasy of the maternal container, permitting and containing the most primitive condition for the transformation and elaboration of primitive affects and omnipotent fantasies in the family members. The setting facilitates formation of symbols, inviting the patient to express his or her fantasy life verbally and freely, reducing the extent of somatized as well as motoric discharge. The setting also permits a regressive interaction between the family members on a family level. The regression induced by the setting is massive and can extend to the most archaic experiences, even to narcissistic object relations.

Freud and Collective Formations. Reflections on the Object-Group and Technical Consequences. Claude Pigott. Pp. 1435-1443.

The author reviews Freud's discussion of collective unconscious fantasies, of fantasies within the personality which in some way or other go beyond the individual. It is pointless to limit oneself to those of Freud's works specifically directed toward these questions, for he discussed them in other writings that were, on the surface at least, quite removed from such issues, in the Wolf Man case in particular. Pigott argues for a notion of group fantasies as the external correlate of the "internal group" in each individual, and in group therapy these fantasies may be elaborated and dealt with.

Revue Française de Psychanalyse. XLIX, 1985.

Abstracted by Emmett Wilson, Jr.

Anxiety Neurosis. João dos Santos. Pp. 17-106.

Freud described a clinical entity, anxiety neurosis, which he distinguished from hysteria and psychoneurosis. Dos Santos reviews at length the history of the concept and Freud's elaboration of it. The main themes of Freud's descriptions involved general excitability, floating anxiety, and anxiety attacks with somatic manifestations

which may be cardiac, respiratory, vasomotor, etc. Dos Santos is impressed with the accuracy of Freud's early clinical descriptions, and argues for the continued applicability of the phenomenological descriptions of the clinical entity. In Freud's view this was an actual neurosis that disturbs the libidinal economy only. Dos Santos does not agree with this purely economic explanation that led Freud to stress the role of contemporary sexual dissatisfaction and the accumulation of toxins. For Dos Santos, structural and genetic aspects are also inseparably involved.

There is a characteristic ego structure in patients with anxiety neurosis. Dos Santos stresses the experience of fragmentation or dissolution of the ego at the times of "crises of anxiety" as described by Freud. The anxiety has an organizing character similar to that of phobia or hypochondria. Rather than neurotic manifestations, however, there is a "brutal regression" of the ego, establishing an anxiety neurosis with a predominantly pregenital makeup. The ego is unable to contain the amount of excitation which invades the psychic apparatus at the time of crisis, and the anxiety comes to have a catastrophic character, in which it is as if all the mechanisms of defense suddenly disappeared. Dos Santos believes that this inability to contain excitation can be linked with the early difficulties such patients have in organizing their anxiety dreams as infants, dreams that in normal development become organizers of aggression and symbolizations of the primal scene, preparing the entry into latency. The apparent cause of the anxiety attacks often seems to be some event, such as an accident or a sunstroke, presented with logical, scientific, and "human" evidence. But a structural similarity exists between the explanations presented by individuals from "primitive" cultures and those from a Western "scientific" culture, for both involve rationalizing defenses. In essence, both evoke a sort of fetish, whether scientific or animistic, and both attempt to attribute the illness to an exogenous factor.

Phobia and hypochondria are often the eventual outcomes of anxiety neurosis, representing attempts to displace dreaded fears to the exterior, and so to contain them outside the body. In the phobic or obsessional individual, anxiety intervenes in a chronic state of malaise and in difficulties of a purely psychological character. In contrast, the crises of an anxiety neurosis frequently come upon the individual in a state of apparent health, and the anxiety is experienced in its somatic components. For this reason, an anxiety neurosis is to be viewed as a chronic psychosomatic disorder. These individuals are characterized by what Dos Santos calls an "incomplete hysterical structure." They have not completed the work of the oedipus complex and do not have a "solid" superego to draw upon. Their ego lives always in an infantile fear of confusing the parents in unconscious fantasies of bisexuality, incest, and castration. Their sexual relations are "simulated," not fully genital, and pursued as an antidepressive measure. The partner is not a true displacement object, but an external attempt at displacement, modified by the eroticized projection of imagoes and parental fantasies linked to bisexuality. Dos Santos gives examples from his work with children in treatment, in order to illustrate his hypotheses. In his experience, individuals who are subject to anxiety neurosis require a preliminary stage of work in which an elementary reorganization of the ego occurs, permitting it to recuperate from the narcissistic wounds caused by the traumatic quantity of anxiety. In this first phase of analysis, the patient has to rely on the image of the therapist to permit himself or herself to pass beyond the state of anxiety, and to approach a hysterical organization more susceptible of a standard psychoanalytic approach.

Hysteria. Unity and Diversity. Augustin Jeanneau. Pp. 107-326.

The attempt to explain hysteria led to the birth of psychoanalysis, but it is not clear even yet what we mean by hysteria. It is still reasonable to question its true nature and specific manifestations. To revitalize the meaning and the existence of the hysterical symptomatology of the end of the last century, one must go back over the path to Freud's first assumptions in order to discern elements and aspects which were sometimes scattered and lost. The author attempts, first, to locate hysteria with respect to traumatization, narcissism, anxiety, and depression; second, to explore the origins and roots of hysteria, its instinctual expression, the nature of the conflict and the forms of defenses; and, finally, to consider the manifestations of hysteria. Jeanneau emphasizes the multiplicity of meanings of hysteria, and the difficulties in formulating a more exact definition that would cover the many uses of the term in psychoanalytic and ordinary discourse. The multiplicity of meanings was noted as early as Galen. Yet Jeanneau insists upon the "red thread" that runs through our work on hysteria: to rely on convictions derived from daily psychoanalytic practice. This focus will prevent loss of perspective in spite of the many clinical manifestations that go under the term hysteria. The effort to arrive at a psychoanalytic understanding of hysteria, with dynamic, structural, and economic unity, must still be made. Jeanneau separates hysteria from phobia, distinguishing the two on the pivotal issue of action. Both hysteria and phobia urgently aim to contain action, but in phobia the action attaches to an image. Whether the danger is action or whether it lies in the incapacity to act, there is usually a projection involved. This projection is of action rather than intention, hence the projections consist mostly of things. Hysteria on the other hand is ready for immediate action on the body without recourse to objects. The hysteric wants to unite and maintain the intimate experience of the act while at the same time retaining the pleasure of viewing. Jeanneau introduces the concept of the hallucinatory position to characterize the stage in early infancy in which the visual and the muscular conflict is the demand for an impossible simultaneous motoric discharge and permanence of hallucination.

The Recalcitrance of the Clinical. Fixation on Technique or Questioning Theory? Variations on a Major Theme. Jean Bergeret. Pp. 525-550.

Various aspects of technique have at some time or other been controversial, for example, the number of sessions and the length of sessions. This paper highlights the evolution of technical thinking on these and other issues, to delineate the reasons for the focus on technique, as well as the clinical bias toward oedipal material. Bergeret reviews Freud's comments on technique and shows the development of Freud's thought from the six sessions a week he wrote of in 1913 to his modifications in the 1920's. Bergeret also discusses some of Freud's limitations when confronted with those areas that have today become of interest to us—borderline and psychotic patients, as well as neurotics who do not exemplify classical treatment cases. He links the question of frequency of sessions and duration of treatment to the focus on the neurotic aspects of psychopathology (genital, triadic, and oedipal themes). The length of treatment seemed to increase as problems other than these were faced, with the mean length changing from six months in 1922, to two years in 1927, and then to four years at various institutes by 1947. Bergeret criticizes the "neuroto-

centrism" of analysts, while at the same time emphasizing the centrality of the oedipal conflict in psychological development. He argues that Freudian theory rests on a specific metapsychology, which cannot be questioned without risk of serious deviation. On the other hand, the models for the understanding of psychological development have evolved considerably and need to be integrated.

Freud had a theoretical bias perhaps more than he had clinical gifts; his treatment cases were hardly successful, as he himself knew. In his clinical, as opposed to his technical papers he shows a preoccupation with the deeper theoretical mechanisms on which he was concentrating at the moment. However, clinical work cannot be reduced to theoretical interests, even when these interests are scientifically respectable. It is inappropriate to oppose therapeutic concerns to epistemological ones. Bergeret points out the narcissistic, self-validating elements involved in attempting to make theoretical discoveries in the course of clinical work, and in trying thus to inherit the mantle of the master. In the give-and-take between patient and analyst on an object-relational level, as well as on a narcissistic level, technical inventiveness may simply hide a lack of spontaneous affective interchanges. When a block occurs because of such a failure in communication, some analysts resort to technical manipulations, while others adhere even more slavishly to the rules which alone establish the conceptual framework. The only justification for technical manipulation is the necessity of finding and maintaining a frame favoring the conscious recovery of transference movements and their "archeological" elaboration. Bergeret argues that we must not confuse the analytic framework with analytic technique. The framework is indispensable for analysis and permits the functioning of the fundamental rule, whereas analytic technique is to facilitate the rule. He sees the couch, regular hours, fixed length, reserve, and neutrality as constitutive of the analytic framework.

Feminine Masochism and Destructiveness. Jacqueline Cosnier. Pp. 551-568.

In the years between 1920 and 1924, after *Beyond the Pleasure Principle*, Freud began to deal theoretically with the aggressive instinct that he had so long left out of his metapsychology, but which was quite evident in his clinical practice and in his reflections on collective psychology, civilization, and war. The enigma of self-destruction brought into evidence the ego in its most ambiguous aspects, not only as the source of self-preservation, but also as susceptible to preferring painful repetition, illness, and death. Biological references became important at this time, because the previous theoretical explanatory principles, the economic point of view, and the sexual instinct, were no longer adequate to account for the clinical realities forced into consideration by the failure of the dream work in a traumatic neurosis, or the failure of the grieving process in melancholia. The theory of narcissism of 1914 was not explicitly revised after 1920, but there was an implicit revision in the series of texts between 1920 and 1924, in which Freud's work on group psychology reintegrated hypnosis and suggestion, to place the ego and its cathexes in intersubjective exchanges and in the process of identification. The repetition principle was considered by Freud in a system of linkages independent of and more primitive than the pleasure principle. This enables the survival of the ego and its identifications, even at the price of suffering. Masochism then appears not only as the destiny of the sexual impulse, but also as the guarantee of internal bonds with past relations

constitutive of the ego, and as an alternative to the destruction of these bonds. The notion of the death instinct opens several lines of reflection of which the complexity and the sometimes contradictory aspects are particularly creative. It focuses attention on the principles of binding and unbinding of the instinctual representations (affects, word- and thing-presentations) in which the relations between primary and secondary processes are manifest. But the degree of unbinding is more radical, and can lead to the disruption of the relationship between the somatic and the psychic. Feminine masochism, placed by Freud between primary masochism and moral masochism, seems to the author to represent something of a lost union with the past, maintaining a link with the primary relation and early identifications, as well as maintaining the after-effects of the infantile and pubertal neurotic organization. The masochistic ego is caught between the desire for union that effaces difference, and the desire for separation that intensifies it. Specifically, feminine masochism is linked to the passive relation with the father.

The Two Ways of Innovation in Psychoanalysis. Jean Guillaumin. Pp. 569-576.

Guillaumin sketches two positions that can characterize analysts' attitudes toward change in psychoanalysis. One position is that psychoanalysis changes when concepts, techniques, or viewpoints are added—in the name of one's school, or in one's own name—to what has been acquired from our predecessors. This way is very attractive for those of dynamic spirit, eager to affirm themselves in some original manner and to respond quickly to the changing world itself. Freud's work, in this view, needed completion, by the findings of Klein, Lacan, Winnicott, Bion, Searles, Kohut, and others. This way of innovation is repudiated by those who feel that the essentials of psychoanalysis have already been gathered. To this conservative viewpoint, the opening of these new doors is merely illusory. Its exponents refuse to see psychoanalysis defined asymptotically by the cumulative ensemble of new ideas successively proposed by reformers from the past or by those to come. But this conservative position, too, has its problems, for the risk is the failure to do anything but repeat, a refusal to understand anything new, and a sacred ritualization of words and behaviors as sufficient indication of the presence of true analysis.

Guillaumin believes that there must be a place for discovery, for the encounter with the unexpected. A third way must be found between the perpetual resystematization of psychoanalysis by new would-be founders, and its encrustation as fixed once and forever; between superficial innovation and sterile repetition. The goal is to avoid the illusion of progress through mere successive acquisitions, without renouncing the work of discovery through analytic progress in new contexts. This way leads from the interior to the exterior. We must ask what, in the kernel of psychoanalysis, has not yet been sufficiently mobilized. Innovation, in this sense, could mean looking insistently into the interior of the psychoanalytic attitude. The new situations would organize themselves by the deepening understanding of the internal principles of psychoanalysis, and not through the enlargement or extension of the psychoanalytic field. Guillaumin calls this a "thickening" of the internal principles of psychoanalysis. Psychoanalysis would then be understood as a discovery, but one which, by its very nature, goes beyond the genius of the discoverer, however great. Psychoanalysis is a formidable epistemological turning inside out, of which

Freud was the privileged artisan as its pioneer cartographer, who set up the organizing landmarks and wrote the unique journal of the first voyage into an unknown world. But this world was discovered, not created, by Freud.

Freud and the Problem of the Object. André Ruffiot. Pp. 577-595.

Jean-Bertrand Pontalis once remarked that one of the future tasks of psychoanalysis is to take up again the theory of the object. Ruffiot discusses the historical, scientific, cultural, and philosophical background of the development of psychoanalytic theory. Cartesian philosophy drew a sharp distinction between perceiving subject and external object. Freud's work, in displacing the Cartesian distinct consciousness of the subject through his discovery of the unconscious, nonetheless left intact the status of the object. Both the "neuronal apparatus" of the *Project for a Scientific Psychology* and the "psychic apparatus" which Freud later introduced into his theory were closed and isolated systems, much like the physical systems that his scientific mentors discussed. It is monadic, energetic, quantitative, and centered on the subject. But Ruffiot discerns another economic conceptualization in Freud, one that is relational and qualitative. The central idea in the second is identification, and it tends to center on the object. He briefly traces these two conceptions through Freud's work. The first, closed conception of the psychic apparatus has led to the criticisms of Bateson, Laing, and Balint, among others. Though there is perhaps a hint of an intuition of the second conception in the *Project*, the relational and qualitative conception begins with the technical papers of 1912, in Freud's discussion of the transference. The relational current becomes quite evident in "On Narcissism: An Introduction." There Freud takes into account the notion of intentionality discussed by Brentano, whose philosophical lectures he followed in 1874-1875. It is quite evident in "Mourning and Melancholia," *Group Psychology and the Analysis of the Ego*, *The Ego and the Id*, and "The Dissolution of the Oedipus Complex." These are the texts in which Freud elaborates his most profound views concerning identification. It is evident in the second topography (the structural point of view). From 1930 on, the subject-object couple will be known by the term "object relation." In Freud's discussion of the themes of love and in his analysis of group psychology are included some of his thoughts on the capacity for object-relatedness and identification. These were further developed by Ferenczi, Hermann, and later in the work of Balint of the Hungarian school, and by Bowlby, and Fairbairn. Pasche, in his 1965 article, "Antinarcissism," elaborated a theory of centrifugal factors influencing the ego to go outside itself.

The Negative Therapeutic Reaction. René Roussillon. Pp. 597-621.

The author traces the gradual development of Freud's thinking on the negative therapeutic reaction and its relationship to the development of his theory of the death instinct. The analysis of the negative therapeutic reaction leads to a series of reflections on both technical (on the problem of construction) and theoretical issues of the topographic distribution of ego and non-ego, trauma and seduction, original repression, etc. He disagrees with authors who would limit Freud's thought on this issue to the series: unconscious guilt, need for punishment, and the death instinct. Currently, the concept of the negative therapeutic reaction has been extended to

encompass every impediment in an analysis, including some aspects of the negative transference. But this was certainly not what Freud meant. Freud described a process that occurred in two phases. In the first, the analysis progresses well and there is an amelioration in the state of the patient. When the analyst communicates his or her satisfaction with the work accomplished, a second phase of aggravation of symptoms results. This biphasic process was, according to Freud, a typical succession of events characteristic of the process; it evokes human diphasic sexuality and the structure of the after-repression. Freud used the biological metaphor of the unicellular organism, the protist, that gradually becomes poisoned by its own excretions. The organism could survive by changing its environment, or by developing into a more complex system with specialization of functions. The first mode he equated with splitting inside/outside, the second with growing psychic complexity. The ego that does not safeguard itself by purifying itself, either by splitting or by symbolization, can be destroyed. This protist model of the biphasic structure of the negative therapeutic reaction suggests that it is a very primitive, archaic, original process of mentalization, conserved in the depths of the superego. The problem of the constitution of the ego and its limits, the problem of the relation of the ego and non-ego, of the relation of the ego to its own proper origins through the primary identifications by which it was constituted and separated, are all involved. The problem is not so much unconscious guilt that the cruelty of the superego introduces, but rather the limits of the ego and its relationship to its own origins, origins which it shares with the superego. The expression of the analyst's approval, experienced as the equivalent of the accomplishment of an incestuous desire, reveals to the patient his or her oedipal culpability. The negative therapeutic response as a confirmatory response to constructions was noted by Freud. Roussillon speculates on the phases of the negative therapeutic reaction as a possible mode of reminiscence of ahistorical experiences, unknown to the self or split-off, hence an indefinite repetition that can only be recovered by and through a precise reconstruction, and activated in the process of a construction. Thus conceptualized, the negative therapeutic reaction appears as the way to approach an elaborate ego functioning that cannot be actualized in the analysis in any other fashion.

The Fate of Aggressive Impulses. Claude Balier. Pp. 623-645.

The author discusses the special aspects of his psychoanalytic work within a prison setting, and maintains that he is able to establish psychoanalytic space within this setting in spite of what might be thought to run counter to the analytic process. He cites the work of Aichhorn, and Freud's preface to Aichhorn's study. He utilizes his experiences within the prison setting to explore the fate of aggression in individuals manifesting psychopathic behavior and, in general, borderline states with a tendency toward impulsive action. He notes the recourse to economic solutions, in which extreme excitation is followed by discharge as a protection against a psychotic disorganization. This is combined with the use of aggressive impulses to maintain both the object and the subject within the framework of external reality. Aggression, in this context, even auto-aggression, has as its aim the preservation of the ego, and, in some cases, the aim of suicide is to protect the integrity of the ego. The mastery of the object by aggression leads to an effacement of representation and a psychic

silence—for that reason a “defect” or failure of mentalization is often spoken of in these patients. However, some rather rich and intense psychological processes in these individuals are simply masked.

Balier emphasizes the presence of phobias, a practically constant element in psychopathic personalities and other impulsive borderline states, and the role of projective identification in the development of these phobias. These are very primitive phobias, called by some “pre-phobias,” the direct heirs of night terrors or anxiety hysteria, distinct from the neurotic phobias such as that of Little Hans. Claustrophobia, with a fear of engulfment, is a central theme and is exacerbated by the prison setting itself. Balier delineates various aspects of the personality characteristics of these patients, emphasizing the dyad of activity-passivity, latent homosexuality as a defense against a phallic mother, and a desperate search for the father, often with the absence, failure, or weakness of the actual father in the family history. There are strong phallic-narcissistic elements also, with emphasis on force and domination, and an anal-sadistic ego ideal that emphasizes a macho image, honor, and contempt for women. Episodic perversions are also characteristic. The frequent association with substance abuse seems a means to reduce the tension.

Two fundamental aspects stand out, whatever the sometimes complex, sometimes impoverished, clinical aspects. One is that the attempts at psychic organization are tentative and precarious, and are more like “arrangements” or compromises than structure. Second, there is always in the background a degree of free, unintegrated aggression, kept more or less apart by splitting, that maintains an excellent perception of external reality. The discharge of this aggression in action is thus often an act that prevents psychotic disintegration before the precarious narcissistic organization. The author is skeptical of those therapeutic approaches that emphasize reliance on the “neurotic part” in the makeup of these patients, for he sees this neurotic aspect as a defense against more primitive aggressive aspects. He believes that in such a therapeutic approach there is a risk of the development of an “as if” personality that would leave the archaic aggressive aspects split-off and unintegrated.

Meeting of the Psychoanalytic Association of New York

Monica Michell

To cite this article: Monica Michell (1992) Meeting of the Psychoanalytic Association of New York, The Psychoanalytic Quarterly, 61:1, 154-160, DOI: [10.1080/21674086.1992.11927339](https://doi.org/10.1080/21674086.1992.11927339)

To link to this article: <https://doi.org/10.1080/21674086.1992.11927339>



Published online: 27 Nov 2017.



Submit your article to this journal [↗](#)



Article views: 1



View related articles [↗](#)

NOTES

Once again, the editors of *The Psychoanalytic Quarterly* express their gratitude to the colleagues whose work appeared in our Abstracts Section during the past year. Their work involves choosing which of a vast number of articles would be of most interest to our readers, and then condensing what they have chosen into brief but comprehensive, clear abstracts. We know that our Abstracts Section is read and valued by many of our subscribers. That it is so valued is due to the efforts of the persons listed here. Again, we thank them for their excellent work.

THOMAS ACKLIN

JAMES R. EDGAR

SYBIL A. Y. GINSBURG

LUKE F. GRANDE

SHEILA HAFTER GRAY

LEE GROSSMAN

JOHN J. HARTMAN

WILLIAM D. JEFFREY

M. PHILIP LUBER

MARIANNE MAKMAN

ANITA G. SCHMUKLER

EMMETT WILSON, JR.

MEETING OF THE PSYCHOANALYTIC ASSOCIATION OF NEW YORK

May 21, 1990. THE PSYCHOANALYTIC SITUATION: SHELTERED FREEDOM. (25th Freud Anniversary Lecture.) Vann Spruiell, M.D.

Dr. Spruiell presented his reflections on the usefulness of considering Freud's last structural theory as an organismic model both of the mind itself and of the analytic situation. One of Dr. Spruiell's central theses was that Freud, in his theory-making and in his self-analysis, was guided by unconscious fantasies which resulted in a vision of the structure of the mind in organismic terms. Dr. Spruiell repeatedly underscored the fact that psychoanalytic theory and technique are indivisible and that the organismic perspective provides a unique, evocative understanding of both. Theory and practice feed on and derive from each other, forming continuous loops in which practice derives from theory, is molded by pragmatic experiences, and in turn influences theory. Both may be influenced by external factors, such as knowledge of cognitive development, or by internal factors, such as inconsistencies within the theory. Dr. Spruiell emphasized that although some of these thoughts may be truisms, it is important to reiterate them because their significance is often ignored for unconscious reasons. In conceptualizing the human mind, one is faced with a tremendous number of variables, ambiguities, and uncertainties. Therefore, the temptation to oversimplify and overlook is ever present. The organismic perspective implies nonlinear and linear modes of thought, a combination of fantasy scrutinized by rational deductions. The organismic vision resembles process theory and is characterized by hierarchical and parallel systems that communicate, influence, and control each other by mechanisms which Dr. Spruiell likened to biological mechanisms that maintain homeostasis. Systems are separated by boundaries which re-

semble semipermeable membranes and which allow for fluidity in communication. Communication between systems entails representations that are recognized and translated from one system to another.

Another central thesis is that the *sine qua non* for understanding psychoanalysis is self-analysis, which can best be carried out in the sheltered freedom of the analytic situation. Dr. Spruiell believes that Freud saw the analytic situation as a system in some ways similar to the intrapsychic system. Dr. Spruiell then described the analytic situation in terms of frames, keys within frames, and rules. Frames limit the boundaries of social situations in much the same way as they limit the edge of a canvas. Rules describe the construction and functioning of each frame and are merely descriptions of regularities found in nature or in social interactions. Rules of frames are mutually constructed by one or more persons, usually outside of awareness. Rules may be newly constructed or may simply follow tradition. For example, the social rules of the analytic situation are usually preconscious, obeyed without question, and unnoticed unless broken. Keys denote different levels of similar interactions: for example, different levels of competition between peers. To illustrate these terms, Dr. Spruiell used the example of two boys fist-fighting. The fighting involves unspoken knowledge about and adherence to certain rules, such as the types of hitting permitted and the code used to signify the beginning and the end of the fight. In another situation, the boys play at fighting. Although this involves subtle changes of the various rules, it represents within the same frame a competitive struggle between peers in a different key.

Dr. Spruiell speculated that the organismic perspective was inspired by Freud's self-analysis and by his work with patients. He recalled that as a candidate he held two contradictory images of Freud: one as a warm, humane visionary; the other as a cold, methodical theoretician. Yet it was the mark of Freud's genius that he subjected his self-analysis and fantasies to logical scrutiny, thereby furthering his theory. Freud was strongly influenced by the logical positivism of his day, but he was also swayed by the humanism and relativism that permeate the work of Goethe, Cervantes, and Nietzsche. Freud redefined reality by demonstrating the unconscious world that interacts with the "real world." In this century, the positivist perspective has faded as developments in art, physics, history, biology, philosophy, and in science itself have swept away the notion of one unquestionable external reality. Dr. Spruiell feels that psychoanalysis, to its detriment, has remained wedded to a largely discredited positivist view of the universe.

A consequence of the relativist and perspectival view is the development of methods to examine the ways in which two people agree about some reality. For example, the analytic situation is a sheltered environment in which both analyst and analysand must have the freedom to be candid and to come to an agreement about the realities of the analysand's mind. The rules of the analytic situation are designed to ensure maximum freedom within the minds of both participants. The rules govern and represent the regularities within the analytic frame and its external relations with other frames.

Dr. Spruiell elaborated on the development of Freud's scientific fantasy and its unconscious determinants. Citing Grossman, he reminded us that scientists use unconscious fantasy in the creation of scientific theories, just as children use unconscious fantasy in their construction of theories about the world. In Freud's fan-

tasy, the mind was seen as comprised of a number of systems which are separated by boundaries and are in hierarchical relation to each other. A centrally important part of Freud's model was based on the concept of representation of one system by another. These representations are never point-by-point translations, but are new combinations of different elements. For example, a specific transference is never exactly like the corresponding infantile relationship. Compromises of rules and frames which are unconscious are needed for socialization, but may sometimes become so "frozen" that they become maladaptive. Pathology, in Dr. Spruiell's terms, arises from undue rigidity in frames and boundaries, which results in interferences with communication and creates functional separations and gaps. The essence of therapeutic action is to increase communication among systems, thus allowing the highest freedom of associations. This produces the best possibility of internal liberty and external responsibility in actions.

Freud's view of the human being was basically a humanistic one, a fact which is sometimes obscured by the positivist influence. This view of the human automatically requires most of the attitudes encompassed in the analytic stance: respect for the autonomy of the patient; appreciation of the strength and persistence of infantile wishes and conflicts; appreciation of the fact that the patient is always operating in response to various compromise formations and is therefore always "doing the best that he or she can"; and finally, appreciation of the fact that the patient is often driven to confuse reality and illusion.

Dr. Spruiell pointed out that one important but often neglected area is understanding the dynamics of the analyst's compromise formations which lead him or her to make interpretations and interventions. The analyst's task is to let his or her mind run freely and associate to the analysand's verbalizations. But the analyst is constantly stimulated by the analysand's verbal accounts, and thus freely hovering attention is not the same as silent free association. The analyst must filter associations and translate them into verbal forms that divert the patient's associations into new tracks. The analyst must rapidly oscillate between primary and secondary processes. When these oscillations stop, the analyst is involved in his or her own "frozen" transferences to the patient. Because the analyst's mind, as a result of his or her own analysis, is more highly structured and organized in regard to the analysand's conflicts, the analyst is usually able to understand and interpret these conflicts.

Another overlooked area is the communication between the unconscious of the patient and the unconscious of the analyst. One of the difficult but crucial parts of the work is maintaining the analytic situation as an avowedly true interpersonal relationship, but also as a professional relationship. It is a myth to think that one can frame a "purely professional" relationship. The analysand will naturally incline toward converting the relationship into a more interpersonal one, particularly when caught in the throes of a transference neurosis. Fortunately, most "good enough" analytic patients are able to frame off the analytic situation from other interpersonal situations. The analyst works to maintain the analytic frame and observes most technical rules. They represent reality in terms of the analytic situation and, more important, in terms of the ultimate aims of analysis: inner freedom, choice, and the capacity to change.

Although Freud kept philosophers at arm's length, today's analysts grapple with some crucial philosophical issues. Likewise, philosophers must try to understand

psychoanalysis, because it is the only coherent body of information about the human mind. In Freud's day, the Cartesian view of the universe was beginning to be challenged by Kant, Hegel, Nietzsche, and other philosophers. However, the developments in biology and later in relativity and quantum theory dealt the final blow to this view and led to the concept of interacting systems. Alfred North Whitehead, the renowned mathematician and physicist, was among those who espoused and developed a process philosophy, which in many ways is compatible with biological organismic philosophy. Whitehead's is the only systematic metaphysics and cosmology developed in our century.

Dr. Spruiell then advocated the integration of this organismic philosophy with psychoanalysis. The resulting theory would be a system theory that would be applicable to psychoanalysis, and perhaps to biology, but not necessarily to all other complex systems. Dr. Spruiell was critical of the General System Theory advocated by von Bertalanffy, because it became so inclusive that it lost its explanatory power. Dr. Spruiell also did not concern himself with the attempts to integrate psychoanalytic concepts with neural sciences. Advances in the neural sciences are admirable, but knowledge about the brain's activities in psychological events remains rudimentary.

Among the greatest challenges to psychoanalysis is theory-building. Other challenges include the epistemological and methodological problems of scientific investigation. Until more comprehensive philosophical and psychoanalytic frameworks are developed, analysts must continue to rely upon their own tests of truth, which do coincide with some philosophical tests of truth. Dr. Spruiell feels that the pragmatic theory of truth, first espoused by such American philosophers as James, Peirce, Dewey, and Whitehead, is the most relevant philosophical framework for psychoanalysis. He made a plea for further attempts at integration, noting that while premature attempts to conceptualize the integration of systems may be dangerous, ignoring integrations is more dangerous.

MONICA MICHELL

MEETING OF THE PSYCHOANALYTIC INSTITUTE OF NEW ENGLAND, EAST

October 22, 1990. 1924: THE DAWN OF NEW PSYCHOANALYTIC PERSPECTIVES. Ernst Falzeder, Ph.D.

Dr. Axel Hoffer introduced Dr. Falzeder and spoke briefly about his work as chief editor of the Freud-Ferenczi correspondence, undertaken in collaboration with Judith Dupont of Paris and André Haynal of Geneva. Some 1236 letters have been transcribed, edited, and prepared for publication. The first of this three-volume work will be published in French and German in the spring of 1992. Harvard University Press will publish the English translation.

Dr. Falzeder opened his presentation, which was written in collaboration with André Haynal, by discussing the year 1912 when Jones and Ferenczi formed "the committee" of seven, which was to protect psychoanalysis from heretics following

the defections of Jung and Adler. Mistrust from within began almost immediately. According to Jones, Ferenczi asked Rank if he would be "loyal," and the question was experienced as an insult. The committee members were supposed to inform each other if anyone developed ideas that questioned the fundamental principles of psychoanalysis. Rank and Ferenczi were both accused. Jones ascribed Rank's and Ferenczi's ideas to the "failure of their mental health." For many years Jones's writings were considered the authoritative works on the early years of psychoanalysis. With the Freud-Ferenczi letters, as well as the Jones-Abraham and Freud-Rank correspondence, we now know more about those early days. Serious conflicts began with Ferenczi and Rank's book, *The Development of Psychoanalysis* and Rank's book, *The Trauma of Birth*, both published in 1924. These books threatened to split the group apart, with Jones and Abraham as the opposition. Freud tried to remain a mediator between his "warring disciples" to preserve his life's work. This stormy time was important in the history of psychoanalytic ideas, especially for the correlation between theory and practice.

Dr. Falzeder then shifted to August 1923, to a meeting of "the committee." There was a heated argument between Rank and Jones. (Freud's cancer had already been diagnosed at this time.) Personal insults inflamed feelings, and Rank demanded Jones's expulsion from the committee. Freud called this group his "circle of paladins." Dr. Falzeder noted the important works that were published during this period. Freud revised his drive theory in *Beyond the Pleasure Principle* and then reaffirmed the "new" theory in *The Ego and the Id*. In "The Infantile Genital Organization" Freud presented a controversial hypothesis—the primacy of the phallus for both sexes in the oedipal period. Ferenczi and Rank's book on the development of psychoanalysis emphasized repetition over recollection of infantile material as playing the main role in psychoanalysis. They also introduced the technique of setting a date for termination in each case. Rank's book, *The Trauma of Birth*, postulated birth trauma as the core of the unconscious, relegating oedipal conflict to a secondary role. Analytic treatment was thus seen as attempting to bring to a close the incompletely mastered birth trauma. The maternal transference was emphasized. Freud was markedly ambivalent about these ideas and about Rank himself. Other members of the committee were very upset, especially Abraham, who called it a "scientific regression" and a turning away from psychoanalytic methodology. Ferenczi became allied with Rank, finding his ideas clinically useful. Yet, for Ferenczi, it was unthinkable to be in disagreement with Freud. Personal conflicts began to overshadow the scientific discussion.

Modification of technique was the starting point of the controversy, i.e., setting a date for termination in all cases. Freud was cautious, Ferenczi enthusiastic. In addition, Ferenczi did not hesitate to use psychoanalysis in "intimate relationships." He analyzed Jones and was analyzed by Freud. He had already analyzed his mistress and her daughter. Dr. Falzeder reported that the consequences of the blurring of private and professional areas and his multiple roles of analyst, analysand, lover, disciple, and friend made Ferenczi realize that psychoanalysis cannot function independently of the person who uses it. Freud and Ferenczi agreed that it is difficult to distinguish the differences between transference love and "real" love. The Freud-Rank letters reveal that the growing strain was caused not by theoretical differences alone, but also by members of the group feeling hurt, offended, and misunderstood. Rank

wrote that the whole psychoanalytic movement was a fiction, which were the words of the "enemy," Adler. The friendship between Freud and Rank ended, but their scientific dialogue continued at least until 1928. In *Inhibitions, Symptoms and Anxiety* Freud continued the debate with Rank. Rank answered with a little-known book, *Fundamentals of a Genetic Psychology*. Rank's work focused on the mother-child relationship and the tendency toward regression: the "original" relationship is with the mother and is the primary model for all relationships. Rank also disagreed with Freud's concepts of the psychology of women.

The dialogues between Freud, Rank, and Ferenczi explored themes of regression, early mother-child relations, the relationships between parents and infants and between analyst and analysand, and gender identity. Dr. Falzeder feels certain that the available evidence refutes the idea that Ferenczi and Rank were "insane," that their concepts were products of "mental illness." He quoted Michael Balint to the effect that the discord between Freud and Ferenczi was a "trauma for the psychoanalytic world," to which the dispute with Rank added. Subsequently, analysts became more cautious in their discussions of analytic technique. Discussions of regression and countertransference nearly vanished through 1936. This later changed, partly under the influence of Balint, Ferenczi's analysand, friend, and colleague, who brought his ideas to England where they were picked up by Winnicott, Fairbairn, Paula Heimann, and Margaret Little, among others.

DISCUSSION: Dr. Samuel Silverman asked about the clinical usefulness of Ferenczi's and Rank's ideas. Dr. Falzeder responded that their emphasis on the "here and now" of the transference and resistance was very useful. Dr. Arthur Valenstein noted that Rank's "will therapy" involved an actualization in the analysis—that of forcing a crisis, a choice, and a resolution. Dr. Evelyne Schwaber wondered about Ferenczi's "classical analysis." A discussion ensued about insight versus reliving and re-experiencing in analysis. Dr. Robert Pyles asked about the negative transference in Rank's technique. Dr. Valenstein responded that the negative transference is mobilized, but the patient emerges into the independence of his or her own self through a "battle of wills." This was clearly a birth trauma metaphor for Rank. The patient is forced to "take a stand." Dr. Schwaber wondered whether a "secret" committee was necessary to protect psychoanalysis. Dr. Falzeder revealed that Freud did not finish reading Rank's book on the birth trauma, about which he commented so strongly. Dr. Sanford Gifford noted that a manuscript exists which describes an actual study of newborn infants in a Vienna hospital at that time. Freud, who was rarely interested in statistics, was reputed to have asked Rank for "data" to prove his theories. Dr. Ana-Maria Rizzuto proposed that the struggle, the conflict, was over an unconscious search for "the mother," for there was no female in this male society. The maternal may be represented by Ferenczi and Rank in their emphasis on feelings, especially on warmth and love. Dr. Ira Lable asked about the "legend" of Rank's and Ferenczi's mental illness. Was Ferenczi mentally ill? If so, was it a neurological manifestation of his pernicious anemia? Or was the suggestion of mental illness a way to silence disagreement? These questions were discussed at length. Finally, Dr. Axel Hoffer asked the group members whether they had found clinical evidence of birth trauma. There were numerous clinical examples presented of birth fantasies, especially at termination but also after nine months of treatment. Termi-

nation was also often seen as "rebirth." Dr. Gary Goldsmith observed that the true way to explore birth trauma in analysis would be after termination; otherwise this would be "prenatal" analysis. Dr. Falzeder commented that birth trauma consists of separation, the wish to return, and its impossibility. He identified in these issues the birth of ambivalence. The lively discussion stimulated by his paper, "1924," supports Dr. Falzeder's thesis that the year was a crucial one in the history of psychoanalytic ideas.

IRA LABLE

The Annual Meeting of THE AMERICAN PSYCHOANALYTIC ASSOCIATION will be held April 29-May 3, 1992, at the J. W. Marriott Hotel, Washington, DC.

The Jefferson Medical College and The Philadelphia Psychoanalytic Society and Institute announce the 23rd Annual MARGARET S. MAHLER SYMPOSIUM, to be held on Saturday, May 16, 1992, at Twelve Caesars in Philadelphia. The title will be "Prevention in Mental Health: Today, Tomorrow, Ever?" For further information, contact Ms. Gloria Schwartz, 1201 Chestnut St., 14th Floor, Philadelphia, PA 19107.

The Austen Riggs Center is once again pleased to invite nominations for the position of ERIK H. ERIKSON SCHOLAR. 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 to three years, beginning July 1993 and beyond. For further information, contact: M. Gerard Fromm, Ph.D., Chairperson, Erikson Scholar Search Committee, Austen Riggs Center, Stockbridge, MA 01262.