

## OEDIPUS REX: WHERE ARE WE GOING, ESPECIALLY WITH FEMALES?

BY ROSEMARY H. BALSAM

*The Oedipus myth usefully informs triangulated object relations, though males, females, and “humankind” can become overly interchangeable. Freud’s intentions to enlighten sexed gender are nowadays obscured. In 1931, he rejected Oedipus for females. Counterreactive gender blindness forecloses exploration about female development. Loewald’s (1979) view of Oedipus Rex emancipates male heterosexuals from a recurring (universal), regressive pull back to mother. Ogden (1987) offers further insights into earliest female development. The author suggests a lifelong, progressive trajectory of mother/daughter closeness, in synch with a girl’s shared slow body development into maturity and childbearing. Freeing the female dyad from obligatory pathological interpretation may inspire fresh sex and gender clinical theory.*

**Key words:** Female sex and gender, oedipal myth, Persephone, nonpathological female dyads, female bodies.

### INTRODUCTION

Once upon a time in a faraway land, a professor told a five-year-old boy who was afraid of horses “long before he was in the world . . . [he] had known that a Little Hans would come who would be so fond of his mother that he would be bound to feel afraid of his father because of

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it" (Freud 1909, p. 41). He then gently demonstrated the psychoanalytic technique that emerged from a topographical understanding of making the unconscious oedipal situation conscious. "It must be, . . . [Freud] told him, that he thought his father was angry with him on that account; but this was not so, his father was fond of him in spite of it, and he might admit everything to him without any fear" (p. 41).

On October 15, 1897, Freud had written to Fliess:

I have found in my case . . . being in love with my mother and jealous of my father . . . I . . . consider it a universal event in early childhood . . . the gripping power of Oedipus Rex. Everyone in the audience was once a budding Oedipus in fantasy, and each recoils in horror from the dream fulfillment here transplanted into reality. [Masson 1986, p. 243]

In his conquistador style, Freud was "so very certain" (Masson 1986, p. 243) that this inner constellation (revealed to him in a dream) was universal to mankind.

Since the development of postmodern thinking in about the 1960s, we have become usefully skeptical and deconstructive about authority and about theoretical "certainties" and how they are arrived at. Freud and his theory of mind are regularly interrogated and often criticized. While searching hopefully for verities, including through modern neuroscience, we, too, employ dreams dreamt by analysts, like Freud's vision of Oedipus long ago. Techniques vary greatly in the present due to: subtler recognition of ego defenses—capacities of the ego to split, dissociate, and fragment; the expansion of object relations, affect attention, transference-countertransference concerns, and the influence of intersubjectivity; varying attitudes toward anonymity and neutrality; and a deeper appreciation of the impact of early and later traumata. We have no blueprints for psychoanalyses at this time.

Freud's original vision of the oedipal situation abides as a guiding principle of the *shape* of the oedipal sexual and object relational currents. The form of the oedipal complex seems to have superseded its content. Clinically persuasive nowadays is the sense of many *femininities*, *masculinities*, *sexualities* (Chodorow 1994). Some would say we need no such internal principle of family relations to understand either men or

women, and our available and most meaningful psyches are created and socially constructed in the here and now: no assumption of expectable developmental life continuities of oedipal patterning is necessary. Furthermore, nonlinear dynamics (chaos theory) shows that development that follows any rigid sequence is likely to be flawed development, and that in systems as complex as human beings processes that move from a common starting point to a common final point usually do so by many different pathways (Galatzer-Levy 2004; Harris 2005).

Oedipus's mythic tragedy, however, is used as a sweeping generality for mining the human condition—silent, usually, these days on the very sex and gender issues that were so important to Freud in the myth. The Oedipus story has been refashioned and reworked over the years, drawing the focus ever farther away from Freud's discoveries about sex and gender. Oedipus has been reconceived; analogized; metaphorized; split into bits of conscience; quarried for omnipotence and power; mined for powerlessness, fate, and helplessness; excavated for dominance, submission, archaic chaos, and rage; evolved into adolescence and adulthood (Levy-Warren 2008); gone beyond (Greenberg 1991); and placed “beyond . . . biological tropes” (Spurgas 2013, p. 217). He has been turned into a marionette (Cocteau 1934), empathized with (Geist 2010), contextualized in the 19th-century German literary tradition (Rudnytsky 1987), polygendered as allusive to an analyst and analysand's intersubjective impact (Benjamin 1998), viewed as castrated (Brook 1988), and exiled—self-blinded and leaning heavily on the devotion of his daughter/sister Antigone (Almansi 1991).

He has been used as an exemplar of the universal workings of the unconscious, the repetition compulsion, denial, sadomasochism, splitting, and isolation of affect. He has been described as the “Scapegoat of Fate” (Pollock 1986, p. 104), of Tiresias, or of the gods; used to examine the current chasm between drive and interpersonalism (Greenberg 1991); probed for depth insight into incest from a cultural perspective (Paul 2010); used to postulate the field's developmental processes from an intertextual perspective; and blamed for “theory drift” in psychoanalysis (Fellenor 2013, p. 119). He has been interpreted as a source of steadfast existential questions (Ahbel-Rappe 2008), interrogated as an

online presence from Lacanian and philosophical points of view (Flieger 2005), and used to describe evolving forms of love (Davies 1998).

In discussing papers offered at a 2010 symposium on “Contemporary Perspectives on the Oedipus Complex,” Ellman (2010) noted:

This group of articles provides the reader with a variety of choices of how to view Oedipal dynamics. The choices range from (almost) doing away with the concept to continuing to accept the concept as the (somewhat refined) Rosetta stone of neurotic conflict. [p. 563]

Some writers have focused on a contemporary dilution of Oedipus in his original, specific form—in favor of, say, a relational focus on the mind’s processes as interpretive of immediate experience, or on the difficulties of contemporary trainees in detecting relational triangulation clinically, as opposed to their facility with issues of dyadic relations. Many authors prefer the term *oedipal phase* to *oedipal complex*, as the latter has been deemed to assume pathology.

An article for the lay press (Rubin 2012) casts the myth in a fashion quite typical of today, notable for its significance about everything *except* sex and gender.<sup>1</sup> The author claims that Freud misread the myth:

Oedipus, like most of us, falls victim to what he frantically strove to avoid. We identify with Oedipus *not because we wish to possess one parent and eliminate the other*, but because we too end up precisely where we didn’t want to—[for example,] the woman who was abused as a child chooses partners who mistreat her . . . . What Oedipus could teach us is how magnetic the pull is to repeat what we desperately wish to escape. [Rubin 2012, italics added]

The focus here certainly ignores Freud’s sexed and gendered developmental emphasis in the mythic story itself. The author instead recommends a reading about the relational impact of the biological parents’ early murderous abandonment of their son Oedipus. Why use the myth at all, then, if Freud’s use is deemed unsatisfactory and has to be redirected?

<sup>1</sup> By contrast, two authors who remained faithful to the spirit of Freud’s use of the myth are Stimmel (2008) and Ross (1982). Their papers focus on sex and gender while directing us to other figures in the myth and their impact on Oedipus.

Such an author ends up merely quibbling with Freud's meaning making, denying the sexed use to which Freud put the myth, and yet imitating Freud in looking to that particular source for a universal truth about human functioning. Does this author's reading of Oedipus teach about a *girl* child being sexually or physically abused while growing up, and then repeating this pull in an adult partnership? Not much. There seems little point in overburdening the story merely to retain the central importance of the Oedipus myth itself, if one disagrees with Freud's own use of it.

Which elements that Freud explicated in the myth are worth preserving in his description of this phase of development? I would like to show that the *triangulation* of object-related awareness that Freud pointed to in the use of the oedipal myth—say, with Little Hans—has held up to scrutiny well over the years. It is generalizable to both sexes and to heterosexuals, gays, lesbians, and queers. Little Hans had strong feelings about *both* his parents and an awareness of them as a couple engaged with him. Having a girl baby in the family focused Hans on his own body, contributing to his developing questions about sex and gender about the parents as a couple: who was a boy, a girl, a man, a woman? Where did babies come from? Whose bodies were whose? How did these embodied people think, feel, behave toward each other? How did these bodies function? And what did that mean for his own body, his sexual and gendered aspirations for relationships and his future? What sense could he make of what was happening in this procreative family atmosphere?

Such are indeed the questions that may be articulated by boys and girls between the ages of three and five. Most modern analysts who glean from a patient's associations a triangular pattern of the patient and two others will infer that this evoked stage of development is more advanced than an insistent pattern of dyadic coupling of the patient and one other. The creative hunch and conviction of Freud's that still holds was that children of both sexes have lustful and aggressive passions that are developmentally shaped with and by their embodied caretakers.

I would like to show that infantile sexuality and its triadic and dyadic components, then—and not the application of the Oedipus myth itself—were Freud's truly brilliant and lasting contribution. This clarification

underpins my two main purposes: to revive Freud's project of exploring early sexual and gendered experience, and to articulate female developmental experience as distinct from male, oedipal-model development.

## THE CENTRALITY OF OEDIPUS

To what extent, then, does contemporary psychoanalysis still adhere to the Oedipus constellation as a central tenet? There have been countless papers and discussions over the years since Freud first wrote of his Oedipus dream association to Fliess. This arose in the context of his father's death and his self-analysis of dreams as wish fulfillments, which would culminate in *The Interpretation of Dreams* (Freud 1900). The riddle of infantile sexuality, to him, seemed solved. Notwithstanding his doubts about its application to females, Freud, as we know, held that the Oedipus complex was not only at the heart of all neurosis, but was also the foundational source of art, mythology, religion, philosophy, therapy, and even culture and civilization.

This presumed certainty was reflected—and overextended—in the fact that, for many years, the oedipal situation was taught to analytic candidates in North America as not only *a* central dynamic, but as *the* dynamic that trumps all others. This belief was signaled in articles and discussions in the shorthand “*the* conflict”—as in “*the* infantile conflict,” “*the* infantile neurosis.”

The Oedipus complex as a universal central organizer of the psyche (and thus a dominant transference expectation in conducting analysis) has gradually faded in case presentations and at meetings, in teaching, and in psychodynamic formulations. It has melded into the mists and forests of theoretical plurality of theories of mind over the past forty years. However, reflecting that shift and melding, the use of the word *oedipal* remains prevalent in published texts and is commonly used interchangeably for males and females. This indiscriminating gender-blind habit would have troubled Freud. Freud's own original phallogocentric theory of the girl's psychosexual development was in fact consistent with his view that Oedipus represented “all mankind.” But we moderns have challenged the culturally phallogocentric cast to his psychosexual thinking. While we can no longer assume the male myth to be iconic for females,

the dilemma has been sidestepped by many modern analysts, who apparently erase this problem by ignoring it.

Nowadays, “the Oedipus” is perhaps less frequently encountered as a noun with the definite article and an uppercase “O”—but it has not disappeared entirely. The lowercase adjective *oedipal* likely signals politically well-intentioned but sometimes befuddling attempts to use the concept equitably, as in *one size fits all*. A cursory search of Psychoanalytic Electronic Publishing’s electronic database for the words *oedipal complex* for a randomly chosen recent year shows the word *oedipal* used variously in 231 papers. Mostly, the usage unhitches *oedipal* from *complex*, thereby exposing more conceptual uses of the term.

Distinctions between *preoedipal* and *oedipal* are prime, demonstrating the popularity of labeling the most primitive psychic state *preoedipal*, associating it exclusively with “mothers” as if synonymous with babyhood, when a mother and child interact in an exclusive dyad. Conceptual phrases like *oedipal victory*, and a special quality of sexual interest directed at grown-ups as signaled by *the sexual curiosity of the oedipal child*, are taken for granted as understood by the reader.

As analysts expound on new questions of theory, the myth of the oedipal situation may be far from central, and yet, following Freud, its centrality is automatically assumed in these articles as received knowledge. Its familiar terminology is clearly embedded, in spite of criticisms and in spite of drawbacks to a full understanding of many patients, such as gay and transgendered persons, or women, or those from nonpatriarchal family settings, or its glaring illogic as a universal principle.

This is thus one of those consistent inconsistencies of analytic life. As a subculture, we analysts are still romancing this myth, which really originated as a dream dreamt by our father/leader. Our professional identities are perhaps consolidated by our loyalty to it. Despite the mixed reviews about its actual utility to the understanding and treatment of patients, our field obviously still finds it a valuable shibboleth.

In practice, we know that simply cross-dressing Oedipus to try to suit female heterosexual, male gay, or lesbian or variant gender developments in either males or females does not work. Difficulties in discussing these dynamically and sometimes politically charged confusions likely underlie the common, sloppy, and evasive gender-blind usage of the concept.

## WARS OVER OEDIPUS

History has helped shape these atavistic constellations within our current attitudes. There is much evidence from historians who have examined the rich, well-written, and frequent letters of the day that Freud became ever more insistent with his followers about the acceptance of the centrality of the Oedipus myth as the years went by. In his last decades, it became an article of faith for true followers in *die sache*, “the movement” (Gay 1988; Makari 2008; Rudnytsky 2002). This foreswearing of all other ideas meant that no Freudian psychoanalyst worth his salt criticized or questioned these supposedly in-built, “normative” (but patriarchal) elements of family life. All the early dissident theorists suggested—to their peril, though not necessarily in the forefront of argument—an equal power role for females in theory building about the human psyche.

Adler’s (1923) *inferiority complex*, for example, though phallic based, affected the power of both males and females equally. Adler’s follower, Margarete Hilferding, put before the innovative workshop that was the Vienna Psychoanalytic Society, in 1911, her thoughts about pregnancy and the emotional bodily experience of a birth process, as well as its effects on the sexuality of the woman and on each child born (Balsam 2003, 2012, 2013; Nunberg and Federn 1974). Her ideas about birth and maternal sexuality were evaded by the group at the time of her presentation. They were never again referred to after she left later that year, along with Adler.

Up to the present time, childbirth is still ignored by psychoanalysis, unarticulated, and almost untheorized (Balsam 2013). In spite of birth’s everyday but extraordinary nature for females (and for many males, too), psychoanalysts do not inquire about it as part of life’s experience. To contrast, one may think of our clinical fascination in recording retrospectives of childhood separations and assumptions of their later reverberations. Females’ bodily experiences of births are not mentioned at all, nor are their possible impact on later body image shifts. Only a few female analysts allow full appreciation of the sheer power of childbirth in female psychic life, as seen in the writings of Deutsch (1944–1945), Raphael-Leff (e.g., 1995, 2005, 2014), and Kristeva (e.g., 1980, 1983, 2011).

Jung, it is often said, decried infantile sexuality and thus was rejected by Freud. He could not be convinced of the centrality of Oedipus Rex as *the* signature of the psyche. However, to add to my thesis that female issues were deeply involved in Freud's fights with dissidents, Jung had put forward to Freud his idea of a foundational level of ancient matriarchal myths that preceded a patriarchy. This notion was treated by Freud as heresy (Gay 1988; Makari 2008).

In 1924, Rank, then a member of Freud's inner circle, became convinced that being born of a female was central to all symptoms, inhibitions, and anxieties, as well as to all culture and civilization. (His resultant curtailed analyses that supposedly echoed a primal experience of being in the womb and then being extruded/terminated by birth from the analyst, however, were radical in the extreme.) His fellow members of the "Secret Committee," Abraham and Jones, who persuaded Freud, realized that Rank's universal claims for "birth trauma" undermined the centrality of Oedipus. That is why, forcibly and angrily, they ejected him from their circle (Dupont 2012; Lieberman 2012; Obaid, 2012).

The painful but triumphant wars over the centrality of Oedipus that Freud engaged in secured a dominance of male psychic iconography in psychoanalysis. They stamped out any notion that males and females could be internally psychic equals. Cultural bias was thus built into our inception.<sup>2</sup> If we no longer assent to this bias, then it matters—it should matter passionately—which myths and words we choose to describe the inner world, especially if we have an ambition to generalize our findings into stories that begin with "the little girl thinks . . .," as well as little boys' stories.

Ours is a world of language that depends on communication in language (Litowitz 2014). We end up *enacting* Oedipus Rex, together with Freud as the Sphinx. Our Sphinx has made an oedipal prophecy to be lived by and to be identified with, as Freud (1909) once told Little Hans.

<sup>2</sup> Some have argued against Freud's misogyny by citing how friendly and encouraging he was to the collegueship of women. Progressive for his time, he deserves much credit for treating women patients seriously enough to listen to their associations. But his women colleagues—Anna Freud, Lou Andreas Salome, Helene Deutsch, and Marie Bonaparte, for example—all shared a basic phallocratic vision, and Horney, who challenged it, suffered the same fate as men who disagreed with the place of women in the psyche (Fliegel 1973).

We blindly believe. We continue to act as if we still hold to it as a truth (even if many of us have rejected Freud's energy theory, or called psychosexual stages into question, or rejected his accounts of repression, or decried the death instinct, etc.). We distort daily information from the couch about sex and gender to hold to this original truth. We do and do not realize that something is awry here . . . . For the most part, we deny our agency . . . . We *are* Oedipus Rex!

## OEDIPUS REX FOR MALES

It was clear to Freud himself, as I noted earlier, that Oedipus Rex is mainly a story about men. It is also about heterosexual men. Our literature speaks fully to the usefulness of these conceptualizations. Freud's more complex positioning of the negative Oedipus did leave room for a boy to love his father in a lustful and possessive way, and to view his mother as the competitive intruder of whom he disposes mentally and whose place with father he then takes. But of course, there is nothing like that in the content of the myth. Orestes has been offered as a more suitable myth for gay men (Goldsmith 1995). We know that homosexuality is certainly not "explained" by the Oedipus dynamic, as once was claimed. What is still best represented for men in the iconic myth is the heterosexual struggle between the generations.

## LOEWALD: WANING AND PARRICIDE

Loewald's contribution to further thinking about Oedipus Rex is significant in contemporary developments. It is a bridge between more modern object relational forces (which is how the oedipal complex is now most frequently cited and understood) and Freud's original instinct theory. The latter mostly drove his descriptions of psychosexual stages hierarchically from the oral to the genital level, through all the consequences of traversing the oedipal situation and the "phallic" stage, toward psychic maturity.

Loewald has been extremely influential in North America, and in fact is claimed as one progenitor of the relational movement by Greenberg and Mitchell (1983), who launched an attack on the firm grip of

ego psychology in the United States. They argued that, since Freud, the most creative forward exploration in psychoanalysis—given some engagement in mixing instinct and object relations theory—had been in object relational arenas. They thus forefronted decades' worth of an accumulated slant toward two-person psychology that had been emerging within clinical psychoanalysis.

Loewald's vision of early ego development focused much more than did Freud's on a cradle of intertwined object and instinct, flowing between mother and infant. Winnicott (1975), too, had said pithily, "There is no such thing as a baby . . . . One sees a nursing couple" (p. 99). Loewald deepened, in dialogue with Freud, less obvious aspects of Freud's thinking to spell out new dimensions of a past, present, and future impact of that primal bond on each person's growth toward individuality.

Loewald (1979) was explicit that he was talking about boys and men. This seems to me an important affirmation: that the Oedipus mythic situation per se should be used only for males functioning at a triangulated level of object relational development. However, in Loewald's addition of a less gender-specific, infantile, "preoedipal" dyadic inner world, his ideas become relevant to very early female infants, too. He shifted the focus away from Freud's insistence on castration as the great threat of the father in light of the son's burgeoning sexuality toward the mother.

Freud (1924) spoke of the father's *total destruction* of the boy's sexual desire for the mother, necessary for the boy to enter into latency and create his superego. There is evidence that Freud's claim for the total power of the male-based castration threat was influenced by his vigorous reaction against Rank's theory of the dominant power of female-based birth anxiety (see the foregoing).

Loewald's use of *waning* acknowledges our experience beyond Freud that shows the renewal and retraction of oedipal conflicts off and on throughout life. This view of nonlinear development was new at the time; there was no longer any need to view adults as ridding themselves of childhood wishes. (By association, this Loewaldian, nonlinear developmental view allows a reader to join in the observation about females elaborated in what follows—that a girl does *not* need to rid herself of her mother's influence and attachment to "turn" to a father to grow up.)

Leading up to his sense of the transformation of relations between sons and fathers, Loewald then actually intensifies Freud's word, *destruction*, to *parricide*—to the boy's aggression toward the father's or other's power of authority over him. Note that Loewald does not mention the word *sexuality*, which was at the forefront of Freud's thinking.<sup>3</sup> He writes:

The assumption of responsibility for one's own life and its conduct is in psychic reality tantamount to the murder of the parents, to the crime of parricide, and involves dealing with the guilt incurred thereby. Not only parental authority is destroyed by wresting authority from the parents and taking it over, but the parents, if the process were thoroughly carried out, are being destroyed as libidinal objects as well. [1979, p. 756]

Loewald spells out how internalization of the parents takes place in the superego due to processes of atonement and mourning for this crime:

Need for punishment tends to become inexhaustible if atonement, reconciliation, is not eventually brought about by mourning which leads to a mature superego and to the possibility of nonincestuous object relations (the word atone literally and in many contexts means: to become or cause to become at one—to reconcile, to bring to concord or harmony). [p. 757]

To show the object relational developmental trajectory that Loewald has in mind, I quote the following:

We destroy them [our parents] in regard to some of their qualities hitherto most vital to us. Parents resist as well as promote such destruction no less ambivalently than children carry it out. What will be left if things go well are tenderness, mutual trust, and respect—the signs of equality. This depends on, more than on anything else, the predominant form of mastery of the Oedipus complex. [p. 757]

The ultimate choice of a “nonincestuous object” or a novel object is the closest Loewald gets to mentioning the sexual relation, which of course is implied throughout, but is much further away linguistically from Freud's corporeal sense of the boy's attachment to his penis and

<sup>3</sup> This becomes an important point of complaint for me, as seen in my conclusion.

his search for the power to make babies with a woman. Loewald's emphasis is on the role of emancipation in intergenerational creativity.

Later in the paper, Loewald explicitly says:

When I speak of appropriating our desires and impulses—which of course are active forces themselves—I do not mean repressing or overpowering them. I mean allowing, granting them actively that existence which they have in any event, with or without our permission. [p. 760]

This theoretical statement seems to me to be in line with a much more gradual route to emancipation—actually, *emancipations*, in the plural—that is more like female experience. Actually, I have always puzzled over a paradox in Loewald's presentation. On the one hand, he has a preference for gradual psychic rhythmic process—say, atonement for the oedipal “crime” as a healing force in building a reliable superego, and transformations with tolerance for the rhythms of integration and disintegration. On the other hand, he is avid about a psychic act of “parricide” that he believes is necessary to presage emancipation and the choice of an adult “novel object” as partner.

If this is so, then I suggest that it applies to males. But I believe that there is a gender difference here with females. I believe that the gradualness of female psychic rhythms is attuned to the long physical developmental trajectory of females, in which they may need to use the mother psychologically in an ongoing, internalizing way—through their own childbirth experience and beyond.

Males may indeed need to kill off their fathers and partners, their mothers, in their quest for sexual self-expression, and to reestablish themselves as a new woman's sole man (and also a reinvention of mother).<sup>4</sup> I acknowledge that no one else has questioned the notion of psychic murder in this way, and that Loewald's concept of parricide and inner emancipation is widely spoken of as “right,” admired and acclaimed for both sexes. I ask, though, that as a reader thinks about Oedipus, he or she not take for granted an easy amalgamation of the sexes in these matters.

Loewald sums up as follows.

<sup>4</sup> I wonder if Loewald's ideas here could have been colored by the very early loss of his own father to death.

Perspectives on the Oedipus complex are changing, that the different modes of its waning and waxing during life stages give it renewed significance and weight, and that the intermediate nature of incestuous relations, intermediate between identification and object cathexis, throws additional light on its centrality. I have pointed out that the superego as the heir of the Oedipus complex is the structure resulting from parricide, representing both guilt and atonement for the usurpation of authority. We are reminded that the oedipal attachments, struggles, and conflicts must also be understood as new versions of the basic union-individuation dilemma. The superego, as the culmination of individual psychic structure formation, represents something ultimate in the basic separation-individuation process. [1979, pp. 773-774]

Thus, Loewald spoke for the ebb and flow of psychic integration and for an abiding pull toward a symbiotic dyad that struggled with strong desires for emancipation from the original incestuous objects and toward creative individuation. He was invoking the preoedipal period, then newly becoming recognized, as in Mahler's work, to fashion forward movement toward the oedipal situation of a more mature psyche. Loewald's Oedipus Rex, in flight from his adoptive parents and the prophecy of his patricidal fate and marriage to his mother (or, after Freud, fleeing his unconscious temptation to kill off his father in order to take his mother), committed murder at the crossroads. To Loewald, Oedipus in flight was consciously seeking to emancipate himself, to grow up heterosexually and find his own woman: a novel sexual object. Instead, tragically, he fell afoul of incest, a fate foretold by the oracle, paid a heavy price, and was sucked back into the earliest of psychotic bonds (after Klein).

Nowadays, the psychic fluidity that Loewald espoused and valued is fully appreciated.

## OGDEN: TRANSITIONS AND TRIANGULATION

Ogden (1987) is one of only a handful of men who have ever directly critiqued anything of Freud's view of female development—as did, for example, Jones, Blum, and Schafer (Balsam 2013). Ogden's is a mild cri-

tique, but he theorizes something of great value to my own and others' thesis of how a girl oscillates in her distance and closeness from mother, and how that is normative.

Ogden brings his foundational British object relations theory to bear on the topic, but with his signature of lively, original insight. He, too, finds Freud's vision of the girl's "shock" at seeing a penis—or her postulated abrupt disillusion with mother and turnabout to father at about five years of age to become heterosexual—to be a vision of trauma and brittle inner defenses, boding ill for adult relationships. Ogden fills in a step in object relational growth in the preoedipal era for females that would help soften this turnabout to father. This is the feature of his addition that interests me.

Note that while softening the trajectory, Ogden still sustains the Freudian story that the girl *does* need to "turn" from mother to father (differing from those of us who believe she merely *adds* father, without rejecting mother). Ogden allows for more preparation than Freud envisaged. In this process, she learns to appreciate otherness—i.e., a person with sexed gender other than her own (her embodied father).

Loewald (1979), too, in his oscillating sense of object development, implicitly leaves room to challenge a Freudian "turn" (even though he also talks of parricide in boys). Kulish (2006) writes persuasively about the female *adding* a relationship to her father, and not giving up her mother in order to suddenly "become" either heterosexually (or knowingly homosexually, I would add) alert at a more advanced level. Clinical material often shows graduated sensuousness in the cast of inner sexuality of female attachment (Balsam and Fischer 2004, 2006).

Ogden (1987) says:

What is glossed over in [Freud's] formulation of the "shift" [from mother to father] is that the status of the mother as "object" and the status of the father as "object" are not at all equivalent. The transition is not from one object to another, but from a relationship to an internal object (an object that is not completely separate from oneself) to a cathexis of an external object (an object that exists outside of one's omnipotence). The external object encountered is not only the oedipal father, but also the oedipal mother with whom the oedipal father has a relationship. (This relationship between the external mother and the external fa-

ther is at the core of what generates the triangulation that to a large extent defines the Oedipus complex.) [p. 486]

This is a good explication of how “adding” father happens alongside an instantiated internal mother, at an early stage. Freud engaged in obscure mental gymnastics to puzzle over how a girl could possibly manage without putting a man first! It appears, though, to be generally problematic in our field for us to credit this straightforward theory of powerful, female-to-female influence in the matter of a female’s path to sexed gender that so-called oedipal triangulation encodes.

## OEDIPUS REX FOR FEMALES

Freud doubted himself about females and Oedipus, as we know, and said that he could offer no equivalent portrait myth for girls and women that would meet with his own satisfaction. He wrote:

What we have said about the Oedipus complex applies with complete strictness to the male child only and . . . we are right in rejecting the term “Electra complex,” which seeks to emphasize the analogy between the attitude of the two sexes. It is only in the male child that we find the fateful combination of love for the one parent and simultaneous hatred for the other as a rival. [1931, pp. 228-229]

On Freud’s part, for me, this is a *profound* statement regarding females. I will develop later in this paper what he intuited but could not develop—that the girl “hates” her mother in a far more ambivalent fashion than his (or Loewald’s) vision of the boy with his father. Freud’s 1931 and later views, now revised from earlier equivalent readings of the two sexes, explained this attachment as a prolonged pseudo-“male” protophallic/clitoral expression of sexual attachment of the girl to mother as her object. Her attitudes of keeping her internal mother close in her life exist, indeed, for developmental reasons. But I believe that these attitudes predominantly engage forms of identification with the girl’s concern for her own body and mind in an anticipated future, including pregnancy and childbirth, and her role in the formation of the next generation. Chodorow’s (1978) *reproduction of mothering* has a very early start, psychologically, in a girl child’s life.

It is as if no one wanted to take Freud's doubt seriously when Oedipus was at stake. To this day, it is a work in progress—trying, that is, to undo the damage done to the field of psychoanalysis by those practitioners who held (or still hold) to the normality of a view that females are born inferior to males anatomically.<sup>5</sup>

What progress have we made?<sup>6</sup> Following on from Horney in the 1920s and other writers in the 1970s, we have established that *significant* penis envy is unusual in females. Penis envy happens only at a very early age, when every little girl wants male bodily attributes and every little boy wants female equipment (naturally, why not?). So, beyond a brief appearance, sustained penis envy is now considered a difficulty in an individual female's development. The argument against Freud and his followers *defining* females as "lacking" a penis was well articulated in the era of the second wave of feminism in the United States. The correction was increasingly successful and was carried into office practice, and the claim disappeared from the literature.

Stoller (1968) was the first to write of primary femininity. He did the field the service of separating sex (biology) from gender (mentalized responses) and of introducing notions of core gender identity—however these concepts have subsequently been debated. Since about the late 1990s, interest has shifted away from the old alleged focus of the girl on her father in the dual role assigned to him by Freud—*both* to define a girl's body (the father's usually accepted role for boys) *and* to be an object of attachment and sexual stimulation to her. As body definer, we now accept that a girl's mother is her prime focus.<sup>7</sup> As sexual and sensual stimulators, both mother and father play important roles for the female.

Yet there has been a lack of sustained interest, of observation and thinking, about how, then, *do* females develop? What can we view as reasonably typical for heterosexual women and lesbians? There is a continuing need to explore this territory.

<sup>5</sup> Alas, this has been seen to be even more unshakable in writings of those who followed Freud.

<sup>6</sup> COWAP, the Committee on Women and Psychoanalysis of the International Psychoanalytical Association, formed in 1998 specifically to study women—by Otto Kernberg, Joan Raphael-Leff, Mariam Alizade, Helen Meyers, and colleagues—has helped further these aims.

<sup>7</sup> At least, many of us accept this.

Here is an example of a persistent aspect of Freud's original system that is now a misleading feature, given modern observations of the girl's tie to the mother as more substantial than cross-dressed Oedipus would claim: Freud said (even as he questioned the relevance of Oedipus for girls), "The turning-away from her mother is an extremely important step in the course of a little girl's development," and "The path to the development of femininity now lies open to the girl, to the extent to which it is not restricted by the remains of the pre-Oedipus attachment to her mother which she has surmounted" (1931, p. 239).

According to this proposal of Freud's, the girl's radical abandonment of mother is supposed to facilitate a shift toward a kind of brand-new and sexually nurturant relationship with her father, very much at the expense of the relation with mother. A girl who successfully follows this path, as Freud and also Deutsch thought psychologically healthy for the five-year-old—i.e., "killing" mother off to clear the way to her partner, as Oedipus killed his father at the crossroads—usually experiences marked problems in inhabiting her female body as it matures. Freud and many subsequent others assumed that hatred and disdain of the mother (for not providing a penis or for not giving her a penis-baby) was desirable for female growth into maturity.

Holding to this theoretically imagined, radical "turning away" is erroneous if we aspire to theorize a more normative development. The use of *oedipal* to describe maturing triangulation capacities has been additionally confounding, because it recruits *preoedipal* as shorthand for antecedent dyadic object relational phases that are exclusive with mother. This concept, then, has become overly synonymous with *the archaic* in a dramatically f(ph)antastic fashion—conjuring up mostly a primeval devouring versus the all-blissful ecstatic world of the mother imago.

Such a world of primary narcissism is essential, but it cannot exist at the expense of portraits of a gradually more subtly maturing relationship with this same mother, which will also have its dyadic aspects. Calling the early phases of development *preoedipal*, unfortunately, has turned out to so foreclose and pathologize our knowledge of "unseparated" states with mother that we have been unable to explore *progressive maturation within that relation*, rather than simply labeling "mother and child" as necessarily *regressive*, *regressed*, or pathologically *fixated* mental states. Misogyny can take many subtle forms!

Other terminology, such as the Kleinian *depressive* beyond the *paranoid* position, does not really solve this problem, in spite of its desirable flexibility and ability to cut through a specified “preoedipal” phase. Kleinian language and the theory’s thrust convey a herculean effort to accomplish even a wavering “depressive” phase as the best that potential development can offer. Following this Kleinian achievement, there is a disappointing (for me) sense conveyed about processes beyond this, or indications of how a person may continue to evolve into a life with differentiated objects of each sex and gender, together with clarity of body awareness.

Another aspect of modern preoccupation is the tendency to “desexualize” and “degenderize” that three- to five-year-old stage of life, in comparison to the way it was viewed by Freud. Britton (1989), for example, revisited Oedipus to demonstrate current Kleinian thinking. He conceptualized a new *triangular space*. He wrote:

The acknowledgement by the child of the parents’ relationship with each other unites his psychic world, limiting it to one world shared with his two parents, in which different object relationships can exist. The closure of the Oedipal triangle by the recognition of the link joining the parents provides a limiting boundary for the internal world. It creates what I call “triangular space,” i.e., a space bounded by the three persons of the Oedipal situation and their potential relationships. [1989, p. 86]

H. Parens and his colleagues (1976; H. Parens 1990), reforming classical theory, provided clinical experience and evidence of over twenty years of child analysis and observation that showed the errors in imagining a “phallic” phase for a girl that followed from the Freudian penis-envying oedipal situation, with its male-modeled “castration anxieties.” H. Parens et al. (1976) creatively suggested that we change the language of the psychosexual female phases to *first genital phase* and *protogenital phase* (in lieu of a “phallic phase”). Their work acknowledged protosexuality and the girl’s genitals as female. This shift allows for the girl’s pleasures, anxieties, and conflicts that arise from her femaleness, her wishes to have a baby, etc. Curiously—and alas—H. Parens and his co-workers’ clarity has never been actively embraced by psychoanalysis.

## ALTERNATIVE MYTHS FOR FEMALES

In discussing an American Psychoanalytic Association panel (Tucker 2008), Camden (2011) wrote:

Five years ago . . . a panel was convened on “Current Views of the Oedipus Complex” in which, despite its aspiration to currency, the “female” version of the Oedipus complex was never mentioned. Freud’s original conception of the universalized male epitomized the discussion in 2006 just as surely as it had when Freud coined the phrase in 1910. The possibility that half of the human population may diverge from the masculine paradigm patterned by Freud’s interpretation and application of Sophocles’ tragedy was simply not taken up as a “current” view.” [p. 139]

Recognizing the need for feminization of the oedipal complex, Kulish and Holtzman (2008) have contributed the “Persephone complex,” based on the myth of Demeter (the mother), Persephone (the daughter), and Hades (the daughter’s husband). They apply this myth, in preference to Oedipus, to a girl’s psychosexual development.<sup>8</sup>

The story is of a mother goddess and her daughter, who were separated by Hades, King of the Underworld (also the girl’s uncle), when he swooped into a meadow to carry off young, beautiful Persephone to be his wife. She thus became a powerful queen in her own right, but the abrupt separation left mother and daughter bereft of each other. Hades ultimately agreed to the women reuniting on earth for half of each year, come spring and summer. The six months of fall and winter, when Persephone leaves her mother to return to Hades in the underworld, represents on earth the loss suffered by Demeter. As goddess of the harvest, in her sadness, Demeter lets flowers and leaves die, and she restores them in spring to welcome her daughter back to earth.

Holtzman and Kulish (2000; Kulish and Holtzman 1998) point out that this myth metaphorically allows a daughter to keep *both* her mother

<sup>8</sup> Chodorow (1994), too, made a brief mention of the possible preferred use of this myth while thinking about Freud’s (1931) acknowledgment that the girl’s oedipal situation was less absolute than the boy’s, and that her “preoedipal” attachment to the mother was far longer and more passionate than he had at first thought—explaining this, though, as due solely to her phallic strivings toward mother that expressed her own early wish for a child.

and her father/husband/uncle. To enjoy a male bond in grown-up life, she does not need to eschew her female bond. Kulish and Holtzman (2008) write:

We see the triangular situation for the girl . . . as a balancing of loyalties and relationships. The myth of Persephone, is above all, a female's story. Life, death, and rebirth are in the power of the female, and these are themes throughout the narrative, which dramatizes the cyclical nature of female experience. The term "female Oedipal complex" is an oxymoron. [p. 48]

The myth of Kore (also known as Persephone) was discussed by Schmidt-Hellerau (2010), but as an example of Demeter's *awry* mothering, emphasizing how Kore is trapped by this attachment to mother. In the general female population, we undoubtedly deal with a spectrum of mother–daughter closeness. Schmidt-Hellerau repeats the fixed traditional negatives about the girl's closeness to her mother as necessarily destructive to her heterosexuality. Her clinical example substantiates an individual instance of pathology, but it need not follow that every prolonged mother–daughter bond will inevitably lead to inhibition of sexual relations to men.

This negative reading of the myth, and the restatement of the literature's common and foreboding tale of psychological doom due to mother–daughter closeness persisting into adulthood, highlight the originality of Kulish and Holtzman, who allow us to see Demeter's maternal grief at Persephone's loss in a much less judgmental fashion. Kulish and Holtzman describe a nondestructive grief that is ultimately worked through, culminating in Demeter's ability to share her daughter with King Hades, who originally snatched her away but with whom Persephone has gradually become sexual. By contrast, Schmidt-Hellerau reads Demeter as holding on with a tenacious inability to separate from this overattached, sexually stunted daughter.

Halberstadt-Freud (1998), allowing for a range of iterations, says sensibly, "The inner relationship with the maternal image can foster a woman's development, serve as a source of strength, *or* be a well of pathology" (p. 41, *italics added*). She, too, like Kulish and Holtzman, sees the girl's capacity to *add* the father to her object repertoire, as opposed to "turning away" from the mother toward him, in order to build her

heterosexuality upon her homoerotic bond with her mother. Kulish and Holtzman are original in foregrounding the rarely described or contemplated *positive* pole in the mother and daughter's struggle toward individuation that fosters the daughter's progressive development.

We tell the Oedipus story in order to look at the powerful emotions and initiative necessary for a boy to come into his own. Freud pointed us to this positive pole. Freud could have told Oedipus as the story of an adopted young man's paranoid delusions leading to the horrific, random murder of a man, with added chaos in his having sex with the man's widow, his perpetration internally influenced by identification with birth parents who were child murderers—now, in a tragic circle of fate, the self-same couple whom he finally destroys. But Freud did not tell the story this way. Any “negatives” were viewed as secondary or reactive for males. Not so with the theories we choose to tell about females, in which we traditionally begin with the negatives.

As mentioned, another myth that Freud himself once suggested in relation to female development is that of Electra. Proponents of this myth, such as R. Parens (see H. Parens 2012, pp. 212-213), appreciate especially its characterization of female aggression. Halberstadt-Freud (1998), dealing with various aspects of theoretical shortcomings, compares the relative applicability of Oedipus and Electra to females. She comments:

Oedipus and Electra both had infanticidal parents and committed parricide themselves. Unlike Oedipus, who did not mean to kill his father, Electra planned her mother's murder in cold blood. Whereas Oedipus inadvertently slew a total stranger, Electra bore a grudge that became part of her identity. For years, she intended to kill her mother, Clytaemnestra, and finally she succeeded in executing her plan. [pp. 41-42]

Halberstadt-Freud wonders why Electra so idealized her cruel father, Agamemnon, who had killed her mother's first family. Electra felt victimized by her mother. She blamed her mother for her misery, and so on. The author points to the fact that Freud knew well that the story of Oedipus did not fit the girl's story—and neither, in his opinion, did Electra. Here, Halberstadt-Freud believes, Freud demonstrated his lesser

empathy with women (although I do find him admirably honest about what was for him an unwelcome, awkward observation: that the girl does *not* react to her mother as he thinks the boy does toward his father).

"In my opinion," Halberstadt-Freud (1998) says, "the Electra complex describes the much more fateful combination of love and hatred for the same parent and seems particularly applicable to the girl in trouble" (p. 46). This author, too, questions whether the girl actually "surmounts" her attachment to her mother, as Freud fantasized—and *should* she? Halberstadt-Freud thinks that "turning away" indicates marked conflicts with an internal mother. I concur with these opinions.

Female academics, in particular, have studied varieties of cultural reactions to female personalities, attributes, attitudes, and interests. This rich literature employs and examines a great range of mythic figures. For example, Gitter (1984), in describing the social attitude toward women's hair during Victorian times, writes, "as an angel, her shining hair was the aureole or bower; when she was demonic, it became a glittering snare, web or noose" (p. 936).

One can see the tendency in frightened males of equating Medusa, a symbol of the demonic aspects of females, with the vagina.<sup>9</sup> The pleasures of inhabiting the female sexual body have been oddly unspeakable in the psychoanalytic literature (Balsam 2008a; Elise 2000; Holtzman and Kulish 2012). Our literature's main focus is on female pain, and pleasures have usually been noted as occurring either in early childhood or, if in adulthood, in narcissistic states.

Other mythic figures denoting the *pleasurable* genitals have been noted: for example, Baubo,<sup>10</sup> Demeter's old nursemaid, who merrily offered a display of her naked genitals to help Demeter disperse her depressed mood (Kulish and Holtzman 1998); and the English and Irish Sheela-na-gigs—smiling, naughty "grotesques" displaying their open vulvas and carved into 12th-century church archways, possibly to ward off evil, to assert the power of a local aristocratic female estate owner, or to grant blessings in childbirth.

<sup>9</sup> This, of course, was another mythic image applied by Freud (1922), who noted its presence in the male unconscious.

<sup>10</sup> Baubo was included in Freud's collection of figurines.

Far more images and myths of pleasure are yet to be explored. Females look to their foremothers for their past that encodes the history of their bodies and relationships, in the same way that men do for their past.

## THE EVER-NEGOTIATED TIE BETWEEN MOTHER AND DAUGHTER

Many of us believe that fundamental errors made in Freud's conceptualization of female development are still perpetuated in teaching and treating, as in the foregoing example about judging a girl's maturity on the basis of how well she has dismissed her mother to "turn to" father. Many authors have challenged such a shift.<sup>11</sup>

It is my strong impression, having worked in analysis with many young adults—and also, since the early 1970s, in the Student Health Service of Yale University, where I have been exposed to the stories of hundreds of very articulate, psychologically minded developing females—that many daughters and mothers, far from undergoing a permanent, sharp separation in either childhood or young adulthood during the so-called second oedipal phase of adolescent development as described by Blos (1967), foster and constantly negotiate emotionally very close, if sometimes very ambivalent ties throughout life.

In the case of a young girl's heterosexuality, these states of closeness can be consonant with active sexual and object love for a man of her own. In the case of *either* homo- or heterosexuality, this ever-negotiated tie to mother into adulthood, I suggest, may be crucial for the young adult's capacity to inhabit her female body fully and comfortably. Internal images of mother's sexual potency are revived in relation to her partner, and are renegotiated in evolution toward a revived and yet new use of her mother as an essential internal and sometimes external emotional assistant. Mother or sister substitutes may be readily employed by women for internalization. These processes contribute to her further development during pregnancy and childbirth (should she choose that path). Females undergo a long affiliative trajectory of development that extends into their sexual and gendered maturity.

<sup>11</sup> See, for example, two special issues of *Psychoanalytic Inquiry* edited by Balsam and Fischer (2004, 2006).

Freud knew this, too, but for him this element was a matter of despair and darkness. It seems he and many of his followers could not imagine how a mother and daughter could have a productive alliance into adulthood. We see so many women in treatment who are in conflict in their maternal and parental relationships, their other familial or partner and child relations, their bodies, or their workplace, but it has been a mistake to confuse “normative” or average expectable developmental theory with misery.

Freud observed males with relationship problems and castration anxiety. He found a place in theory for this symptom, but he did not assume that standard life with a penis was miserable! Nor did he take the male “castrated” state as normative and turn phallic pleasure into a problem. We have confused symptomatic behaviors of women with theoretical tenets. We regularly fail to conceptualize female body pleasures as a baseline norm (Balsam 2012; Elise 2000; Kulish and Holtzman 2008).

Writers such as Bernstein (2004), Marcus (2004), Kulish (2006), and many others have observed that girls often have an intensely sensual early relationship with their mothers, and either continue or yearn to continue intimately and persistently evolving this relation with her into adulthood. The normative ongoing phase into adulthood is less well charted. Girls are envious and highly competitive about the mother’s baby-making capacities, plus her body attributes that they understand can be theirs as well (and often will be polished and upgraded). Concomitantly, a young girl can sustain a relationship of sexual curiosity and enticement toward her father, revel in his attentions, and harbor the certainty that she would be a far better wife to him than her mother is.

The girl, because of her same-sexed body of which she is aware, keeps her mother in her mirror. No radical moment of disavowal needs to be postulated to appreciate a female’s gradual internalization of her body images of this mother, of aspects of her sexuality, and of her mothering functionality. To make this point, Kulish (2006) quotes the old saw: “When a Man Marries He Gets Him a Wife, But a Daughter’s A Daughter the Rest of Her Life” (p. 7).

It was Oedipus who needed to kill his father to “possess” his mother. Many female patients on our couches talk of fantasies of *including* father as a kind of exciting sheik in a highly competitive, “nasty girls” harem, in which the daughter becomes the first wife but mother is still there,

demoted to the position of a minor helper!<sup>12</sup> Females can want to kill off their mothers, but this wish is often followed by remorseful reunions—only for the pattern to resume again. Diminishment of the mother, but without frank loss, is the general path taken by most girls.

Note that this description does not downplay female sadism and aggression. But it is, I believe, closer to the style of much female-to-female aggression than is frank, definitive murder. Even when mothers and daughters “cut each other off” or don’t speak, they often come back together in ultimately predictable patterns. Women are highly comparative toward other female bodies. Mother’s image remains a flexible shape that can be recalled from oblivion and enlarged again at will, according to the daughter’s inner need.

## THE BODY

Neither Loewald nor Ogden deals directly with the female body, nor do many other psychoanalytic writers. It is a crucial element in this apparent puzzle. The field appears to show a remarkable ongoing satisfaction with overlooking the enduring anatomical distortions in-built as normative theory (as evidenced, say, by a persistence of phallically dominated language, an ongoing lack of interest in the procreative body, and a failure to recognize the unfinished problem in Freud’s work while creating alternative systems of mind that marginalized the body entirely).<sup>13</sup> Examining the uses of the oedipal myth more closely at this time is a logical extension of the inquiry into the missing body. After all, Freud did not shy away from the body, even if he was incorrect about women.

It seems to me that the girl commonly registers her femaleness positively (as well as negatively) through the interactive handling of her body as well as her psyche, principally by her main bodily caretaker, usually the birth mother or adoptive mother, and in addition by the father or other caretakers.<sup>14</sup> The little girl most often develops a positive, envious, admired, and *desired* identification with this embodied and sexual, care-

<sup>12</sup> As with all inner dramas, such a “turn” accompanied by sustained hatred of the mother is possible, but as Horney noticed, it occurs in a more pathological spectrum.

<sup>13</sup> This situation inspired a more in-depth previous contribution (Balsam 2012).

<sup>14</sup> See, for example, my previously published clinical examples of the impact of the mother’s pregnant body image on the developing body image of a young daughter who observes and experiences the change (Balsam 1996).

taking woman. A relation to a primary nurturing father is much rarer and may form a different set of idealized body images (Balsam 2008b).

An idea such as Ogden's (1987) *father-in-mother*—the mother's unconscious identification with her own father, and thus possibly a tenderly encoded, male-inflected relationship—would indeed become communicated in her touch of her little girl, her shared handling of the daughter with a male (say, at bath time or bedtime), or her admiration (or repudiation) of the girl's body. Her own mother's conscious and unconscious attitudes toward this future mother's body is bound to play out internally, too.<sup>15</sup> Negativity—sexual and aggressive—may surely abound as well.

Having unfortunately pushed into the background the physical features of development, Ogden (1987) proceeds laudably, however, with Winnicott and goes on to weave a textured place into the girl's object development that appreciates far more closeness between girl and mother than Freud was able to see. The virtue of Ogden's description of this so-called transitional phase, and thus of the sense of growth of object capacity between young girl and mother, is that it clearly shows the intrapsychic details of a beginning closeness to mother. This is, for me, the early story of a gradual development that can be lifelong. I believe that daughters stay close for developmentally *progressive* reasons—not necessarily primarily for *regressive* reasons. Interactively, this demands of the mother the ability to progress in the relationship, too (Bernstein 2004; Halberstadt-Freud 1998; Kulish 2006). Ogden sets the stage for this evolving sensibility with elegance.

The oedipal vision of the girl's father as an "outsider" to the dyad is quite stark in many analytic writings, reflecting Freud's view. Loewald (1979) and others, such as Herzog (2008), envision the father as healthfully disrupting the symbiotic, blissful bond between mother and child as a spur to growth and differentiation. But there is another way, at least as important, that father is an outsider to the dyad of the girl infant and her mother: he is different in his body habitus from the mother. Bodily contact with him has a radically different sensory feel from the mother's. (To oversimplify, think of "Daddy's scratchy face" in *Pat the Bunny* [Kunhardt 1940].) This set of perceptions and reactions may well be a vital

<sup>15</sup> Stern (1995) mentions this influence but does not note the bodily interplay.

prototype, too, for differentiating processes in the girl's perceptions and registrations and fantasies, which will gradually allow the father as well as the mother to assume a more and more differentiated and meaningfully sexed shape for the girl.

In seeing the girl's mother's attitude as an introduction to men, Ogden (1987) favors the internalized figure of the mother's father. He believes the mother will communicate this consciously—and, importantly, unconsciously—to the girl. Stern (1995) made this point, too, when he spoke of the many manifest and unconscious family relationships that the parents bring to the cradle-side. I agree. Ogden's portrait includes the girl's father in the interchangeable *mother-in-father/father-in-mother* duo. In his clinical case, a young woman patient sought a "hardness in the softness" in her female therapist as a protosexual closeness, on the way to a more developed heterosexuality. This was an example of father-in-mother that the patient looked for in the mother/therapist. This search apparently progressed from so-called preoedipal to oedipal otherness and helped the patient achieve a responsiveness to desirable sexual difference.

In sum, Ogden's inspired idea gives a shape to the inside story of the figured male relations within the early phases of a girl's development. I appreciate his critique that Freud's oedipal picture does not fit girls. Ogden valuably adds a nuanced, graduated, early piece about how a girl may become heterosexual within the sphere of her mother.

There is a downside to Ogden's loyal attempt to retain Freud's myth (in spite of his considerably undermining it!). This can foreclose a fully appreciative sense of the girl's admiration of the mother's same-style sexual, seductive, and responsive female body (as mother communicates this to her) and through her, again, a lively identification with the power to sexually attract father (and ultimately others in maturity).

The girl's strong desire to identify pleasurably with her mother, as well as her conflictual and fearful counterimages of her mother as a fellow female, influences her fate. This includes her desire (or not) to carry children, her pregnancies, childbearing, child rearing, and her sexual attractions and attractiveness (or not) to males. This picture of a mother and daughter, as with the physical aspect of a boy and his father, captures the enchantment of a child who identifies with the adult

body as a vision of how one's own will be one day—watching it closely, hearing about it experientially from that mother, receiving her gendered messages as a female also with male inflections, and being “claimed as belonging” lovingly (if also competitively) within this identification as a junior female member by this parent of the same sex.

Commonly, the mother will be partnered by the father who helped produce this baby, the daughter. Mother's ability to keep both father and little girl in relation with her will be an important inclusive message toward excitement and tenderness as well as aggression. Mother's adult partner may be another female. She, and often they together, will still identify in physical attachment with the girl baby. The necessity of a female biological housing for an unborn baby is early on excitedly appreciated (or may be dreaded) by a girl child. These are some of the pulls toward dreaming of and encoding the messages of being an adult female.

It is not so strange that the girl is very likely to imitate, incorporate, and internalize her mother, and will thus deeply take in her attraction to the father, should the mother engage such liveliness. Loewald (1979) helps us along our way in marrying instinct and human bodies closely to objects within the cradle. Ogden's (1987) is an important step along the way to an account of female triangulation that, I believe, extends into adulthood; its subtleties are yet to be worked out.

## CONCLUSION

I would say that Oedipus is still charging toward that crossroads in his chariot, unconsciously challenging his fate. The myth is widely used in our time, especially generically (and thus, as I point out, inaccurately), and has so caught fire in our imaginations that our very identity as psychoanalysts may hang upon its continuing broad usage.

In my opinion, Oedipus Rex is extremely apt for the development of heterosexual men, marginally useful for gay male development, of unknown use to queer or transgendered development, and says almost nothing that is applicable to females—heterosexual, lesbian, or queer. The greatest contribution in the myth's description is the concept of a developmental stage that involves triangulated object relations for both boys and girls.

In rejecting the Oedipus myth for females, psychoanalysis could open itself to an exploration of much more on females' behalf, I believe—to more about the puzzling, interesting elements that do not fit Oedipus and that I point to here: the role of many lifelong, close relationships between mothers and daughters that do not at all squelch their independence, necessarily, or “spoil” their heterosexuality. My own sense is that the trajectory of female body development toward childbearing is such a long one, compared to male sexual maturity, that the close tie between daughter and mother (or mother- or older-sister-substitute assistants, female friends, aunts, grandmothers, doulas, and nannies) may be developmentally desirable as the single woman grows into sexual adulthood and chooses (or not) motherhood.

These developmental details have not as yet been looked at in this way. We have the beginnings of the female inside story in plotting these developmental paths—such as in alternative myths like the Persephone complex, or in mapping a pregenital, transitional-phase mother-and-daughter interaction that may encode building blocks for male bonding.

Oedipus remains dependably and even irritatingly compelling to our field—in spite of the fact that, logically, we might achieve far more trans-individual and transcultural clarity of theory without using a myth at all. We could so easily substitute *triangularity*, in terms of the object relations shapes, and bodies and protosexuality that represent an advance from dyadic development. We could have adopted H. Parens's (1990) long-ago suggestions for an alternative terminology for girl development. We could refuse to use *oedipal* when we include females as our subjects, and instead draw on other myths and stories.

I believe we would discover more if we opened our minds to alternatives—even, perhaps, to a theory that includes the act of childbirth and its impact on the female body and mind. But as a rule, we simply stick to *oedipal*. Perhaps it is in our nature to be incurable romantics? Or are our foundational dreams that became principles set in stone?

There is a significant consequence to the common amalgamation of Oedipus applied as a one-size-fits-all abstraction. It is that psychoanalysis, in spite of its abundant clinical opportunities, maintains itself in relative ignorance of female development because of such ongoing foreclosures that have evolved with us from our history. Female development is an

area that could yet be vibrant and expansive with the excitement of still-new discovery.

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## PARRHESIA, PHAEDRA, AND THE POLIS: ANTICIPATING PSYCHOANALYTIC FREE ASSOCIATION AS DEMOCRATIC PRACTICE

BY JILL GENTILE

*This essay explores the mostly unexamined analogy of psychoanalytic free association to democratic free speech. The author turns back to a time when free speech was a matter of considerable discussion: the classical period of the Athenian constitution and its experiment with parrhesia. Ordinarily translated into English as “free speech,” parrhesia is startlingly relevant to psychoanalysis. The Athenian stage—in particular, Hippolytus (Euripides, 5th century BCE)—illustrates this point. Euripides’s tragic tale anticipates Freud’s inquiries, exploring the fundamental link between free speech and female embodiment. The author suggests that psychoanalysis should claim its own conception of a polis as a mediated and ethical space between private and public spheres, between body and mind, and between speaking and listening communities.*

**Keywords:** Parrhesia, Euripides, free speech, free association, Freud, Greek tragedy, women’s voices, women’s bodies, ancient Athens, polis, *Hippolytus*, desire, democracy.

### THE SILENCE WITHIN SPEECH

There is an irony at the heart of our profession: we psychoanalysts (in our literature, in our practice—even, for many, in analytic training) cherish the idea of free association but, as Mahony (1987) remarked

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with surprise, “relative to every other psychoanalytic topic, there are so few sustained studies” (p. 16) of it. Even Freud’s remarks are terse. While he often revisited and restated his belief in the analytic preeminence of free association, “he never got far beyond some early core ideas; and it is just as surprising how often these same ideas have been reiterated in psychoanalytic literature with relatively little advance beyond them” (p. 23). Nonetheless, late in his career, Freud maintained his commitment to free association, observing that it was “considered by many people the most important contribution made by psychoanalysis, the methodological key to its results” (Freud cited in Kris 1996, p. xv).

To be sure, there are several noteworthy meditations on the topic, variously scholarly, clinical, and philosophical. To name a few: Mahony (1987), Kris (1996), Bollas (2002), and Thompson (2004). And free association did for a period receive its due in the literature, at least until theory grew more keenly attentive to transference and resistance, and it became the “somewhat neglected handmaiden to those theoretical step-sisters” (Kris 1996, pp. xiv-xv).

While we have never stopped discussing free association, it remains oddly situated. On the one hand, unreserved, unedited conversation is so primary that we tend to conflate it with the closely linked but not identical *fundamental rule* (Mahony 1987; Thompson 2004)—a pledge of honesty that enlists the patient’s status as a moral agent (Thompson, p. 10). On the other hand, we apply free association idiosyncratically in our practices, bending it for our purposes or adapting it to a clinical situation—as per Sullivan’s (1953) oft-cited recommendation to supplement Freud’s bare guidelines with a guided, detailed inquiry.

Declining attention to free association seems to have coincided with the rise of relational psychoanalysis, which rejects a one-person model of the mind and downplays (when it does not frankly dismiss) drive theory. These relational tenets run contrary to traditional conceptions (and methods) of free association as the product of endogenous processes of a singular mind (Aron 1990).

Hoffman (2006), for example, questioned the efficacy of free association as classically conceived for the patient’s evolving sense of agency and responsibility to the treatment relationship. Hoffman’s provocative challenge essentially inverts Freud’s understanding of the patient’s moral

agency as founded upon her sharing precisely what she might otherwise censor.

For now, let us merely observe that when we conflate free association with the actual fundamental rule, as Thompson (2004) suggests we commonly do, we obscure the ethical imperative that free association implies—to be unreservedly honest, to be truthful. Citing Kris's contention (1990) that "free association is the hallmark of psychoanalytic treatment conducted by analysts of all stripes" (p. 26), Busch (1994) wonders whether this homage obscures conceptual contradictions in methods and goals that warrant critical analysis.

Perhaps this is why we seldom investigate what values underlie free association and its implicitly esteemed partner, free speech. Contemplating the resulting ambiguity, Vivona (2014) writes that it is "both strange and true that contemporary psychoanalysis lacks a full explanation for the therapeutic action of talking" (p. 1025). The reason for this cannot simply be our theoretical differences and the idiomatic ways in which we each invite patients to say whatever comes to mind, or that the concept is ill defined. We recognize that free association is essentially self-contradictory, since it is anything but free, and (as Freud discovered early on) the path to achieving it is riddled with obstacles. Not only do patients unconsciously resist free association and speech; the limits and constraints of language, of words themselves, also defeat it. But we tend to focus a great deal on the obstacles and less on the means by which speech may aspire to "cure."

Though it was already more than 100 years old, American constitutional democracy was still finding its bearings at the time of Freud's discoveries. The free speech privileges nominally set forth in the First Amendment were really only beginning to bloom in the early twentieth century. And only in time, as First Amendment jurisprudence matured, would these privileges be enshrined in the hearts and minds of average Americans, as a matter of faith as well as fact—at least until the controversial and notorious case known as *Citizens United*. The exploitation or co-opting of the First Amendment (Wu 2013) by monied corporate interests and economic libertarians in the aftermath of this case has spawned fresh debate and cynicism among legal scholars and ordinary

Americans alike about what we mean by “free” speech, and about whose speech the First Amendment protects.

Even so, the de facto primacy of free speech (its *firstness*) over other constitutional rights has been so seldom explicitly discussed that constitutional scholar Frederick Schauer (1995) described our valuation of speech as an “orthodoxy,” or more properly an “ideology” (p. 11). Worse, it seems there may be no “philosophically defensible core” to the First Amendment, except for what emerges from its common-law, opportunistic use (for often mutually exclusive ends) as “the refuge of saints and scoundrels alike” (Schauer 2002, pp. 193, 197). In view of the practical results, the confusion and conflict among arguments and decisions, Post (2002) laments “what is now generally acknowledged as the sorry state of First Amendment doctrine” (pp. 172-173).

As with Freud’s treatment of his fundamental rule, the framers of the First Amendment never clarified the meaning or significance of free speech beyond the amendment’s few words. They left no written legacy of their intentions, no record by which to understand this provision—though state constitutional antecedents are relevant and provide rich insights into the federal document (Amar 1998; Wood 1969). And as with psychoanalysis, a pluralism of theories creates ambiguities and conflict with respect to doctrinal implications. In turn, not unlike psychoanalysis, First Amendment doctrine “veers between theory and the exigencies of specific cases” (Post 2002, p. 153). In both contexts, theoretical pluralism prevails and jurisprudential decisions are guided by theory, by “common law,” and by idiosyncratic local and subjective factors.

This paradox—so little speech about why speech matters—lies at the heart of both psychoanalysis and the First Amendment privilege; in fact, it is a contradiction that highlights their surprising and seldom-explored relationship (Gentile 2013; in press, a). It may seem that *free association*, as a clinical technique rarely exposed to the air of “real life,” would share little with *free speech* beyond the first word common to both, given the latter’s definitionally public nature.

Yet Freud’s ideas imply that free association is not simply self-directed but is really a form of address. The patient does not simply speak to herself; she aims her associations (however inadvertently) at an authentic (if only implicitly recognized, or even actively disregarded) other (i.e., the

analyst). By virtue of this structural given, free association is essentially different from either interior monologue or the dream, which Freud (1905) felt was “a completely asocial product; it has nothing to communicate to anyone else” (cited in Mahony 1979, p. 171).

Meares (1992), drawing from both Piaget and Kohut, suggests that what appears as monologic or soliloquistic “chatter” may reflect what is essentially a protodialogue in which the other is experienced as a self-object, i.e., as an extension of one’s own experience (Meares, pp. 36-37). Bollas (2002), meanwhile, notes that, “by asking the person to think out loud, [Freud] referred the monologic nature of solitary inner speech to the dialogic structure of a two-person relation, a partnership we might term the *Freudian Pair*” (p. 7).

The near equivalence between free association and its outlet, free speech, is suggested by Kristeva (2007). “Freud,” she notes,

. . . invented a “speech,” a certain version of language which is perhaps not its truth, but one of its potentialities, and it is the formidable privilege of psychoanalysis to reveal it . . . . And it is indeed this displacement of speech in relation to itself, this infinitesimal revolution, constitutive of our practice, which worries people. [p. 431]

Perhaps what is most scary about free association is that what appears to be a monologue is revealed as dialogue between a speaker and a listener, anchored in its unpredictability, in the irretrievability of words, in space and time. We (as speakers) both fear and desire that we have a listener, that we will be heard, that we will hear ourselves for a first time. And we (as listeners) might (if not must) hear that which we would prefer to remain shrouded in silence—unsurprised, protected.

Bear in mind that the appeal to free association (in the clinic) and free speech (in civil society) emerged in reaction to repressive, even tyrannical elements. Both were conceived as means to release otherwise censored or repressed opinions and desires—political, religious, and (in Freud’s thought) sexual and murderous.

In the therapeutic setting, free association invites a conversation that is (ideally) unreservedly candid, exposing desire and fantasy, forbidden or at least inhibited by social mores and convention. Connecting the

dots in the patient's free associations also entails recognizing the gaps in association. And that means grappling with the silences and the speech that fill the vacuum. What has previously remained unspoken (including what remains unconscious) and congealed in symptoms becomes translated through the transference, gaining resignified expression in time and space, between speaker and hearer.

The allure of free association (for both analysts and their patients) as an ideal is quickly dampened in practice by obstacle, impasse, and interruption. And free speech, a constitutional promise, functions as a democratic symbol more than as an achievable reality (as both lived experience and the fitful evolutions of First Amendment jurisprudence have revealed). Simply put, in both the clinic and in civil society, the pursuit of free speech reveals that speech is anything but free.

There are hidden price tags. First, what we "choose" is determined, not consciously chosen; this was the discovery that inaugurated psychoanalysis. Second, by dint of the fact that words themselves are ambiguous, incomplete, and incapable of symbolizing the totality of experience, free speech is, in practice, impossible. And there is a third paradox: it is *constraint* that ensures the possibility of symbolic discourse, as opposed to mere chatter—the so-called empty speech of Lacan, or the *overnaming* that W. Benjamin (1996), in a famous essay on language, called *prattle*.

The analogy between (psychoanalytic) free association and (political) free speech, which I find persuasive enough to mine extensively,<sup>1</sup> is otherwise flawed on several counts. Free association requires from the analysand a form of consent to say whatever comes to mind, a pledge of honesty not to censor unbecoming, embarrassing, or even seemingly mundane content. And this consent initiates a form of address (however indirect or disowned) to an attentive listener who, too, will bypass conventional forms of social address for the sake of cultivating a distinctly psychoanalytic conversation.

The aim of such a conversation is to translate symptoms that conceal trapped meanings, hidden truths, and forbidden wishes, and to enlist (or reenlist) the subject's discourse as one of desire for which she will

<sup>1</sup> This essay elaborates on a chapter in my upcoming book (Gentile, in press, a) on the larger subject of psychoanalytic free association and free speech.

begin to bear responsibility. The analyst's agenda (to enlist the patient's gestures, utterance, and speech acts into meaningful signs and symbols) leads to a clinical conundrum (one ultimately of power and authority): potential free associations reflect something else unfree, insofar as the patient's speech may be organized by the analyst's theoretical predilections and discursive biases, rather than by the ideal of an evenly hovering attention (which is both free-floating and conditioned by the patient's associations). That is to say, subject to the constraints of transference and resistance, what looks like free association may be a mere doppelgänger of "the real thing."

Free speech, as per the First Amendment, is a "right" that protects expression against the incursions of governmental tyranny. The potential speaker may or may not recognize herself as possessing this right. If she does, she may or may not choose to exercise this right. And so free speech rights, which we normally just presume (as mere inheritance or property right), must be *actively* assumed; one must claim expressive liberty and civic engagement. And, contra the parameters of a therapeutic relationship, whether the citizen's utterance or speech act is recognized by an other will be a matter that is (to some degree) a matter of privilege—both in terms of opportunity to find a hearer, and in terms of curating a means of address that favors the possibility of its meaningful translation and social recognition.

My aim here is to introduce resonances between the actions of speech in each realm (to the degree the realms are distinct)—psychoanalytic free association and civic free speech—by pointing to their shared foundations and their shared ideals. Both require a space of mediation situated between freedom and constraint, between mind and body, and between speaker and hearer. I argue that this space of mediation is essential if we are to achieve an ethical practice of free speech.

Further, although psychoanalytic free association may tilt toward the private and intimate, while free speech tilts toward the public (in terms of where lines are drawn for what is exposed), both straddle borders between private and public. There is simply no free speech that is strictly private; it all inhabits a dialectical space, a space of mediation. And this dialectic, like those between speaker and hearer, mind and body,

freedom and constraint, is as essential to the practice of free speech in psychoanalysis as it is to democracy.

The idea, or ideal, of becoming revealed between private and public was not Freud's invention; it is implicit in the Greek conception of the *polis*,<sup>2</sup> which should thus be of great interest to psychoanalysts, especially those concerned with issues of public discourse and democracy. The polis modeled a space or dimension in which "private" aspects of life could be reconciled with and even expressed through an authentic engagement in public life. The practical result was the rise of Athenian democracy.

But the polis might also serve as a fruitful model for psychoanalytic efforts to foster mutual recognition (J. Benjamin 1995), freedom, and equality<sup>3</sup>—at least in the clinic and perhaps in society at large. As is foreshadowed by others who have contemplated the connection between the polis and psychoanalysis (Cornell 1991; Kristeva 2000; Lear 1998), the conception of a psychoanalytic polis itself, grounded in time and space between personal desire and the public sphere, between the pronouns of a speaking *I* and a listening *you*, holds imaginative appeal. By incarnating a space of mediation, free speech as an embodied discourse of desire, even of unruly desire, gains expression and sets in motion its potential for transformative ethical action. The polis anticipated the bridging between free speech and freedom of assembly that undergirds the First Amendment, and that also anticipates the psychoanalytic assurance of a frame between speech and physical "assembly," by way of the proximate encounter not only between two minds but also between two bodies.

To both ground and help clarify this idea, let us turn back to a time when free speech was a matter of considerable discussion and was considered highly relevant to the project of democracy: namely, the classical period of the Athenian constitution and its experiment with *parrhesia*. Ordinarily translated into English as *free speech*, *parrhesia* first appears in the Greek literature in the writings of Euripides. A historical antecedent of free association and free speech, the notion of *parrhesia* foreshad-

<sup>2</sup> *Polis* is the Greek term for *city*, *citizenship*, and/or *city-state* and is the root of our word *politics*.

<sup>3</sup> The pursuit of equality in the clinic is contextualized by an essential asymmetry in the roles of analyst and patient (see, for example, Aron 1992).

owed later Enlightenment thought about the natural rights of man to self-expression, and subtended the evolution of Freud's psychoanalysis as well as the American founding fathers' vision of democracy.

Though it seems that psychoanalytic theory has never treated this historical concept,<sup>4</sup> the Greek experiment with parrhesia is startlingly relevant to psychoanalysis and to its truth-telling practice. It also offers lessons relevant to how we practice our First Amendment privilege. I will illustrate this point by turning to the Athenian stage and taking up Euripides's popular and prize-winning *Hippolytus* (5th century BCE). This tragic tale of warring goddesses, thwarted desire, and secret shame is a penetrating examination of our responsibilities as participants and speakers in a political community.

At the same time, this drama presents the fundamental link between free speech and female embodiment, which is the ultimate moral of this tale of two freedoms. This moral is as relevant to an inclusive and ethical psychoanalytic practice as it is to a democratic one.

## PARRHESIA

The earliest known experiment in free speech—as a theory *or* as a practice—is found in the nascently democratic Athenian polis of the fifth century BCE. Parrhesia, *to speak everything*—and, by extension, *to speak freely*, *to speak boldly*—was a fundamental component of the democracy of classical Athens (Pasquino 2013). As Foucault (2001) concluded, parrhesia

. . . was a guideline for democracy as well as an ethical and personal attitude characteristic of the good citizen. Athenian democracy was defined very explicitly as a constitution (*politeia*) in which people enjoyed *demokratia*, *isegoria* (the equal right of speech), *isonomia* (the equal participation of all citizens in the exercise of power), and *parrhesia*. *Parrhesia*, which is a requisite for public speech, takes place between citizens as individuals and also between citizens construed as an assembly. Moreover, the *agora* is the place where *parrhesia* appears. [p. 22]

<sup>4</sup> A recent check of the Psychoanalytic Electronic Publishing archives revealed not a single citation.

Pasquino (2013), citing Lewis (1971), notes that “one of the remarkable features of the Periclean democracy was the right of every citizen to address the assembly if he wished.”

Monoson (2000), in a meditation on Athenian politics and philosophy, usefully distinguishes between the formal right of free speech (*isegoria*) and the practice of free speech (*parrhesia*), translating the latter as “frank” speech (p. 54). She notes that, whereas an ethic of *parrhesia* stood for shared participation and democracy, “an intolerance of *parrhesia* marked tyranny . . . a symptom of the watched character of daily life. A citizen of a democracy, on the other hand, was expected to have and to voice his own critical political opinions” (p. 54).

Furthermore, *parrhesia* was associated with daring and courage, for in ancient Greece there were certainly no free speech protections such as we enjoy in the United States today, let alone the confidentiality protections in psychoanalytic practice. Instead, a high value was attached not just to one’s speech, but also to one’s *responsibility* for it, and sometimes that entailed a price (often humiliation and fines and, rarely, execution).

Given the high value attached to truthfulness, efforts were made to protect against deceptive oratory and speech that might exploit the public confidence. After all, “both the speaker and the audience had personal and political stakes in the truth value of ideas,” if democratic *parrhesia* was to flourish (Monoson 2000, p. 64). These personal and political stakes were understood as an essential element of freedom, which in turn symbolized Athens’s successful defeat of tyranny and its status as a democracy.

Foucault (2001), in a series of seminars examining the rise and decline of *parrhesia*, points to the fact that *parrhesia* was granted to all (including the so-called worst citizens). Consequently, he suggests, the odds were high that immoral and deceptive speech would prevail, thereby endangering democracy. Unsurprisingly, then (at least from a modern vantage point)—even necessarily—a tension emerged between *parrhesia* and democracy, “inaugurat[ing],” as Foucault put it, “a long impassioned debate concerning the precise nature of the dangerous relations which seemed to exist between democracy, *logos*, freedom, and truth” (p. 77).

Not only did “real” *parrhesia*, in its positive, critical, truth-telling aspects, meet opposition from reckless orators; there was an additional

pernicious factor: the collusion of a citizenry (the *demos*) who accepted false and flattering oratory, and who supplied an audience for it (insofar as this is what they preferred to hear rather than more “honest,” if less popular speech). Foucault interprets the decline of democratic institutions in the fourth century BCE in part as evidence that parrhesia in its positive, critical sense, “does not exist where democracy exists” (2001, p. 83).

On this account, democracy became associated with a lack of restraint, liberty with lawlessness, and political parrhesia with sophism. Foucault’s pessimistic conclusion underscores his suggestion that “truth is understood as an ethical value” (Ross 2008, p. 67), and the “figure of the *parrhesiastes* has an exemplary moral status because she eschews a safe life for a life of truth and accepts the risks that it may entail” (Ross, p. 68).

Foucault associates another form of parrhesia with Socrates (as we know him from Plato). Socratic parrhesia posited a concordance among *logos*, truth, courage, and the ethical (and ontological) question of how one lives one’s life (*bios*)—or, as Socrates himself proved, how one dies. Although there is no strict chronological order for these different types of parrhesia (Euripides died in 407 BCE and Socrates was put to death in 399 BCE), “the target of this new parrhesia,” says Foucault, was “to convince someone that he must take care of himself and of others; and this means that he must *change his life*” (p. 106, italics in original).

Gradually, with this shift and with the collapse of the ancient *demokratia*, parrhesiastic speech disappeared from the public realm and moved into a different sphere: that of private relations (Pasquino 2013). In that realm, its focus shifted further in the direction set by Socrates, to become an ethical and spiritual practice—one of self-knowledge, of one’s relationship to truth—anticipating the practice that Freud and his patients would set in motion some two millennia later.

## FREE SPEECH AND THE POLIS

The earliest concepts of psychoanalytic free association were developed collaboratively by the “hysterical” patient Bertha Pappenheim (“Anna O.”) and her doctor, Josef Breuer, who invented the cathartic method

that Pappenheim dubbed the “talking cure” (Freud 1910, p. 13). Freud later experimented with and modified Breuer’s method, and thus, in a story familiar to most psychoanalysts, free association evolved to become the essential psychoanalytic technique.

We know that Freud turned to free association after reaching a point of clinical impasse in his earlier pursuits of unmediated paths to cure (such as hypnotherapy and direct physical touch). The talking cure, if it worked at all, did so because free association ran into the constraints of language. Because we cannot simply speak our unconscious desires without introducing mediation, free speech requires surrendering to its limits, its tethering to language, exposing what remains untethered—the gaps in associations—“a temporal collage” (Bollas 2002, p. 56).

Here it is worth pausing for a moment to consider the word *free*—an adjective that captures our imaginations in proportion to its conceptual elusiveness. We discover that free association rests on a series of paradoxes that challenge the very idea of freedom (and with it the idea of truth). As Freud discovered, the value of free association lies in the revelations it yields, exposing not what patients choose to say but what is predetermined. And although it exposes personal desire, that desire is disowned—a repudiated desire.

Of course, a predictable resistance arises when unwanted, previously repudiated ideas or fantasies threaten to reemerge and expose us to pain or longing. But more than that, within the clinic, Freud discovered that repudiated desires are revealed toward and for the analyst who, like the interlocutor in parrhesia, is never a neutral figure. The patient’s speech unfolds in a context brimming with “transference.” Free association finds its greatest ally *in a relationship* that changes the very path of “freedom” itself into an obstacle course.

Psychoanalysis then evolved as an inquiry into the gaps in the patient’s free associations, her resistances to naming desire. And this revealed another tension: that between reason and passion. In Donnet’s (2001) words, there is a “methodic unreason” (p. 155) inherent in the fundamental rule—in its call to renounce *control* in order to reveal *an order* or logic of the passions. This surrender is to a kind of ideational surprise, to the empowering but humbling surprise of self-knowledge, of refuted desire.

And so, unsurprisingly, free association met with resistance and a kind of “counter-will,” leading Freud (1913) to tweak his technical rule with the following recommendations for beginning the treatment:

What you tell me must differ in one respect from an ordinary conversation . . . . You will be tempted to say to yourself that this or that is irrelevant here . . . that there is no need to say it . . . [but you] must say it precisely because you feel an aversion to doing so . . . . Never forget that you have promised to be absolutely honest, and never leave anything out because, for some reason or other, it is unpleasant to tell it. [pp. 134-135]

The truth Freud sought, like the parrhesiac’s truth-telling, requires courage in the face of fear, for it requires speaking truth, exposing secrets, in the face of forces that favor repression. Foucault (2001) identified his concern as not with the truth, but with the truth teller, or with “truth-telling as an activity” (p. 169)—the truth teller “who is able to tell the truth, about what, with what consequences, and with what relations to power” (p. 170). Foucault’s words might apply directly to the project of psychoanalysis, which functions as a kind of polis wherein the patient has rights to parrhesia. Indeed, his quixotically titled compilation of essays on the subject, *Fearless Speech* (2001), proclaims the simultaneous courageousness and impossibility of this truth-telling project—for psychoanalysis, for the polis.

It is not that the polis—at least, as it was conceived by Plato and Aristotle—has remained unexamined or unappreciated within psychoanalysis. Its reality and its metaphorical value have been investigated by such psychoanalytically minded observers of democracy as Lear (1998) and Arendt (1958). Lear, analyzing Plato’s concept of “the socio-cultural political world” (1998, p. 58), points out that the philosopher considered the polis “the only environment fit for human habitation”; human beings are “dependent on it for the very constitution of their psyches.”<sup>5</sup>

Arendt (1958) celebrated Aristotle’s conception of the polis as “an organization of the people as it arises out of acting and speaking together” (p. 198). She recognized in Aristotle’s polis a “guarantee against the futility of individual life, the space protected against this futility and

<sup>5</sup> Note that *psyches* is Lear’s word, not Plato’s.

reserved for the relative permanence, if not immortality of mortals” (Arendt, p. 56, cited in Kristeva 2000, p. 58).

But while these thinkers take up the idea of the polis and its metaphorical appeal for psychoanalysis, a unified conception of a psychoanalytic polis (simultaneously of the unconscious and conscious, private and public realms) has remained oddly situated—both implicitly embedded in and peripheral to our theorizing. Consider Arendt’s (1958) words:

The *polis*, properly speaking, is not the city-state in its physical location; it is the organization of the people as it arises out of acting and speaking together, and its true space lies between people living together for this purpose, no matter where they happen to be. “Wherever you go, you will be a polis.” [p. 198]

This idea—that human beings are dependent upon interaction with others (and specifically, as Lacan posited, upon a confrontation with the desire of the other) for their very constitution as subjects capable of making meaning—is at the heart of contemporary psychoanalysis.

But Arendt also captures the essence of free association, recognizing that an “unpredictability of outcome is closely related to the revelatory character of action and speech, in which one discloses one’s self without ever either knowing himself or being able to calculate beforehand whom he reveals” (1958, p. 192). Freedom (of association, or speech, or assembly) can never be freedom *from* participation. That sort of “freedom” would be meaningless and empty; it would be freedom in a vacuum.

For us to achieve the status of real subjects, of active agents, our freedom challenges us to “contribute in” (Winnicott 1965, p. 103)—to claim our (ever-partial) agency through intersubjective encounter and reparative gesture. We as individuals and as citizens must make meaningful acts; only in that way do we make meaning, do we transform events and private fantasies into lived experiences and realized dreams. As we do so, we—patient and analyst, you and I—create a private-public “location,” anchored in the present moment, a sphere of speech and action between our imaginations and material bodies, between our personal and our civic identities. This is an embodied polis, *our* psychoanalytic polis.

## FREEDOM AND BOUNDARY: THE EXCLUSION OF FEMALE BODIES

This obligation, this entanglement necessary to freedom, has not always been explicit or emphasized in psychoanalytic writings or practice. But we do find intriguing suggestions in Kristeva's (2000) investigations of Arendt's and Aristotle's notions of political engagement and the community of speech. Kristeva asserts that the polis "invites everyone to demonstrate an original courage . . . to leave the shelter of the personal in order to be exposed to others and, with them, to be prepared to risk revelation" (p. 53). The unique power, opportunity, and indeed the challenge afforded by the polis (for those included in it) lies in its provision of the "chances for everyone to distinguish himself, to show in deed and word, who he was in his unique distinctiveness" (Arendt 1958, p. 197, cited in Kristeva 2000, p. 61).

Foucault (2001) emphasized that parrhesia (even for those who have this privilege, at least in its early and positive incarnations) presumes an asymmetry of power between the speaker and his audience. But the speaker is not himself powerless; he is not a slave. In fact, by speaking he gains a position of agency; he rises above mute subjection. In this sense, parrhesia requires exposure, risk, truth, and courage. It takes courage to speak truth to power. Over and over in the ancient texts, an inability to speak freely is likened to enslavement, and the ability to do so is equated with the care or education of the soul. Within the boundaries of those granted citizenship, free speech (and its accompanying democracy) thrived.

Once again, we encounter the paradox that freedom is inseparable from a conception of boundary and constraint. It is noteworthy in this context that the word *polis* derives from an ancient Greek word for *boundary*. According to Cynthia Farrar (1992), the precise derivation is from a root meaning *wall*.<sup>6</sup>

<sup>6</sup> *Online Etymology Dictionary* traces the Greek word back to the proto-Indo-European root *pele*, meaning "citadel, enclosed space, often on high ground" (<http://www.etymonline.com/index.php?term=polis>).

This boundary was not merely a mark of security from external coercion . . . . [It] was directed inward, spurred by the need to institutionalize an intention not to practise or be subject to coercion. The ancient *polis* created a space between slavery and tyranny. This . . . was a glorious achievement. [p. 18]

And yet the glorious achievement of the polis, in lived reality, fell far short of this ideal. The polis that created a space between slavery and tyranny was predicated upon enslavement and exclusion: the very collapse of this space. Within psychoanalysis, Winnicott, our premier theorist of space, became preoccupied with the dialectic between liberty and boundary not just in his work with patients, but also in society. "A democracy," he noted, "is an achievement, at a point of time, of a limited society, i.e., of a society that has some natural boundary" (Winnicott 1950, p. 242). The idea of a natural boundary counterposes the idea of a socially constructed one that is designed to confer status to some members of society while relegating lesser status to others.

After all, in classical Greece, women, like slaves, were denied the right to citizenship, let alone to parrhesia. In her fascinating exploration of the history of women in ancient Greece and Rome, legal and feminist scholar Eva Cantarella (1987) argues that the Greek city "represents the perfect realization of a political plan to exclude women" (p. 38).<sup>7</sup> The first written Greek laws dictated a code of behavior that "unequivocally shows the centrality of the biological function, which was governed by the *polis* in such a way as to guarantee the replacement of citizens" (p. 43). That is, the function of women was to reproduce (if they were "free") or to provide servile labor (if they were slaves).

Either way, a woman's social status was "determined exclusively by her relationship, whether stable or occasional, with a man" (Cantarella 1987, pp. 50-51). These laws established a woman's subordination to men and deprived her of social and political participation, confining her to a part of the house called a *gynaecacum*, thereby ensuring that she would be walled off socially, intellectually, and politically.<sup>8</sup> It is inter-

<sup>7</sup> It is worth noting here that Cantarella refers to the codification of laws that subjugated free women, but she also recognizes the harsh treatment and sexual servitude to which female slaves were subject.

<sup>8</sup> Freud's early Vienna Society Circle was composed entirely of lower-middle-

esting to note that Spartan women had greater influence over their children and husbands, and more liberal sexual habits, than did Athenian women, and that both “Plato and Aristotle attributed the decline of the city [Athens] to this fact” (Cantarella, p. 42).

Cantarella documents the very emergence of the polis in classical Athens as a turning point, after which segregation of the sexes became total—in contrast to at least some flexibility of movement and some limited social (if not political) engagement in the “so-called dark ages” (p. 39). In classical Athens, revered as the first democratic state, there were “iron rules . . . that the *polis* imposed on women, shutting them out and depriving them of practically every chance of freedom: rules that both considered them inferior and made them so” (p. 51).

Cantarella concludes that the Aristotelian classification of men as “spirit” and “form,” and women as “mothers” and “matter,” codified (and thus rationalized) the female essence and role in a way that ensured her inferior status for centuries—nay, millennia. Women, virtually enslaved (as were slaves) in “the realm of necessity,” freed men to participate in the creation of the polis as the “sphere of freedom.” The achievement of a private-public space or polis for men was based upon a rigid, patriarchal split between private and public spheres (Cornell 1991). In short, democracy was founded in a social space that totally excluded women from any form of political participation, suppressed women’s voices, and practically imprisoned women’s bodies.

Indeed, we find that even in so presumably advanced and enlightened a society as the contemporary United States, we are hardly more than a stone’s throw from classical Greece. Gloria Feldt (2004, 2009), the former president of Planned Parenthood, argues that legislation

. . . is badly needed not only to restore liberties systematically carved away out of *Roe v. Wade*, but also to shift the legal framework from one based on privacy to one based on equal protec-

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class, Jewish male doctors. Recent interpretations (Aron and Starr 2011; Gilman 2010) suggest that Freud ascribed to women (and to homosexuals) the feminized, castrated projections common in anti-Semitic literature of his day. It is interesting that Freud and his circle—originally named the Wednesday Psychological Society and later the Vienna Psychoanalytic Society—met in Freud’s home, “functioning as an alternative to conventional domesticity” (Zaretsky 2004, p. 17).

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tion . . . . A woman's right to her own life and body has to be elevated to the moral position that supports a human rights framework. [2009, p. 84]

It would not have been news to Freud that the more things change, the more they stay the same. Such persistent historical imbalances require sustained efforts (and sustained intentions and motivations). Such compulsiveness suggests a very purposive (though not necessarily conscious) act of agency. Freud proposed that the aim of such compulsive action was the suppression, if not repression, of sexual impulses. Even if the compulsive act itself temporarily releases tension, it never extinguishes the originating impulses.

Freud himself was guilty of perpetuating this sort of repression—namely, by repeatedly emphasizing in his work women's inferiority, or at least women's own anatomically based inferiority complexes. To put it another way, he argued, in a fashion that feminists have neither forgotten nor forgiven, that *anatomy is destiny*.<sup>9</sup> The body grounds us, forever and inescapably, in who we are. Anatomy determines the divide between the sexes, and to some real degree, the psychological development of sexual difference and identity.

But Freud, whose arguments are never easily reducible, also lobbied for the power of our imagination. If we direct our imaginations to others and to society, if we transcend the repetitive exclusion of certain groups, we may be able to contribute creative acts to the community; we might generate new meanings instead of repeating old ones. Even in his theory of "penis envy," Freud requires every female child to create her own personal meaning for her alleged lack; the child actively imbues anatomy with subjective meaning and interpretations. As Birksted-Breen (1993) notes, the discovery of anatomical difference will lead to a grappling with meaning, with relationship, with personal identity and status.

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<sup>9</sup> In this essay, I restrict my focus to Freud's thinking on female sexuality in order to develop the parallel exclusions upon which parrhesia (and the polis) and psychoanalysis were initially based. In a voluminous literature, subsequent generations of psychoanalysts and feminists have discredited Freud's phallocentrism. Some especially relevant writings that link the female body and speech include McDougall (1989), Balsam (2012), and Irigaray (1977). Elsewhere (Gentile, in press, b; in press, c), I consider such contributions for their implications to embodied free speech practices.

If it is true that Freud presents the imagination as an antidote to strict materialism, it is also true that his theoretical triumph in creating a dynamic tension between anatomy and interpretation is trumped by a myopic and (many have argued) misogynistic focus. Just as he empowers subjectivity and interpretation, he reduces imaginative freedom. He writes:

We have learnt that girls feel deeply their lack of a sexual organ that is equal in value to the male one; they regard themselves on that account as inferior, and this “envy for the penis” is the origin of a whole number of characteristic female reactions. [1926, p. 212]

Thus, female anatomy will (universally) signify a woman’s lack, and this perception of lack will organize her identity and be linked to a high incidence among female patients of “frigidity” and inhibition (associated with a failure to achieve “a true change-over towards men”) (Freud 1931, p. 226).<sup>10</sup>

*This* Freud averred that the “great riddle of sex” had as its bedrock the “repudiation of femininity” (Freud 1937, p. 252). For men, this means renouncing feminine passivity so as to overcome castration anxiety and attain masculinity. For women, this means renouncing “penis envy” so as to assume their proper sexual identity and their reproductive role.

So what do we make of the fact that *this* Freud also (for example, in several case studies<sup>11</sup>) dedicated himself to translating the female body’s secret knowledge and power? We know from these same case studies that he often erred—imposing his own interpretive authority and phallogen-

<sup>10</sup> It is worth noting that Freud was referring not to the female’s discovery of her vagina but to the discovery of her clitoris. Further, Freud clearly recognized the excitability of the clitoris, seeing this stimulation as marking girls’ retreat to a “fresh wave of *repression*” (1905, p. 220, italics in original). See also D’Ercole (2011).

<sup>11</sup> Especially in his case studies on hysteria (with their signature bodily and conversion symptoms), Freud’s attention is to the patients for whom unspoken mysteries were inscribed upon and “remembered” by the female body: Emmy von N. (anorexia), Elisabeth von R. (chronic leg pains), Katharina (dizziness, breathlessness, and nausea), Lucy (olfactory hallucinations), and Rosalie (constriction in her throat and a feeling of choking). Even in his failed treatment of Dora, Freud seeks to transpose the patient’s somatic symptoms (hoarseness, coughing, aphonia) into speech.

tric epistemology upon the female voice. But he could not help but recognize that women's bodies, so often disembodied and so often plagued with bizarre conversion symptoms, also speak volumes. As Aron and Starr (2011) have shown, Freud's rejection of hypnosis for his female patients coincided with the (less well-documented) rejection of a more obscure clinical method: the "biologically, usually genitally, based somatic treatments of hysteria practiced by his medical colleagues (Bonomi 2009; Gilman 2010)" (p. 222). By rejecting hypnosis (and suggestion), and then by rejecting direct physical manipulation of the genitals for the treatment of hysteria, Freud privileged the female psyche as author of her body's desires (and inhibitions). He taught us that her body not only remembers; it also communicates—and he came to be far more interested in that space between her mind and her body than in shortcuts to a climactic story.

But Freud only dimly perceived this fundamental insight: namely, the significance of female experience—and of *embodied* female space—to the achievement of a healthy, functioning psychesoma, and to our shared psychic, cultural space between speakers and listeners, our polis. Psychoanalysis dares to expose how the historical development of various political and psychological freedoms involves grappling with an embodied feminine space, explicitly or implicitly, successfully or unsuccessfully.

I will begin the next section where the polis was first established: in classical Athens.

## EURIPIDES, FEMALE DISEMBODIMENT, AND THE FAILURE OF PARRHESIA

As everyone knows, Freud was fascinated by the legend of Oedipus, a legend that embodied those tensions—between knowing and blindness, truth and deception, revelation and repression—that he used free association to relieve. Sophocles's dramatization of the Oedipus legend was so useful and appealing to Freud because it lays out in allegorical form a dynamic that he had begun to see everywhere.

Moreover, at least to some degree, Sophocles's particular telling of the tale helped shape Freud's conception of the "Oedipus complex," which is, of course, in its literal unfolding a story of sons' desire for their

mothers. Freud and his followers would attempt to universalize what has become known as the *family romance*, but the Sophoclean touchstone places little emphasis on female experience. Jocasta, Oedipus's mother, is more or less a place-holding figure in the tale, whose role is essentially to enunciate received wisdom (however piquant) and embody a kind of terrible dramatic irony, as when she notes, "How oft it chances that in dreams a man / Has wed his mother! He who least regards / Such brainsick phantasies lives most at ease" (Sophocles, 5th century BCE).

Thus, Jocasta both normalizes oedipal desire and prescribes a cure: one must dismiss it as a "brainsick phantasy." The play shows us the consequences of acting out the fantasy, however inadvertently—one of those consequences being Jocasta's suicide. But her despair is never given voice, nor is her position as queen or as woman examined or elaborated.

Freud might have found equally fruitful grist for his mill in the works of a younger playwright in the same emergent polis, a playwright who had a more developed political model to work with and who showed much more interest in the other gender. This was Euripides, whose portraits of female passion and fury in *The Bacchae* and *Medea*, among other plays, are vivid, strange, and revolutionary. The majority of his plays, in fact, center on women and their particular social and psychological struggles. And in his early, prize-winning play *Hippolytus* (Euripides, 5th century BCE), he provides a very rich and suggestive portrait of how the collapse of (feminine) space, the blockage of desire's expression, leads to tragic ends.<sup>12</sup>

In this particular play, the titular hero, Hippolytus (son of Athens's king, Theseus), not only never marries or sleeps with his mother; he is the chaste and unwilling object of his stepmother Phaedra's otherwise unspoken and unrelenting erotic passions. Phaedra, emblematic of that era's disenfranchised Athenian woman, has no outlet for personal expression in the polis, in its symbolic space of desire.<sup>13</sup> It is worth taking

<sup>12</sup> My goal here is to interpret aspects of Euripides's text along the lines of an analytic session, not to offer a scholarly, classicist appraisal of the play. The interested reader may refer to Barrett (1964) for a useful introduction.

<sup>13</sup> Scholars believe that versions of the Hippolytus and Phaedra stories by Roman writers (Ovid and Seneca) may have portrayed Phaedra as a woman who "gives her passions full rein." And fragments of an earlier lost play, also titled *Hippolytus*, suggest that Phaedra "was similarly uninhibited in her advances to Hippolytus" (Mills 2002, p. 28).

a closer look at this play and its political, psychological, and sexual dynamics; doing so enhances our understanding of the Athenian polis in theory and practice, and furthermore of its relevance to the contemporary “talking cure.”

Euripides was an artist who understood and depicted how we become trapped in rigid social roles and identities. And to the degree that he seems to have intuited what his culture had yet to conceptualize, it is possible to imagine him as classical Freud somehow aware of contemporary relational and feminist trends in psychoanalytic thinking. Euripides, as Macrone (2010) observes, is

. . . imaginatively limited by a static, externalized model of the psyche and expressively limited by the conventions of classical aesthetics. Yet he is still able to conceive of and depict telling moments of resistance to the public gaze and public evaluation; he is still able to suggest, especially in the character of Phaedra, unexpressed and inexpressible inner turmoil.

Reading Euripides from a Freudian perspective, 2,000 years later and 500 since Shakespeare’s so-called invention of *the human*, we may interpret Phaedra’s dilemma as showing that as her free speech—her right to parrhesia—is denied, her body’s speech reveals taboo desires. Given that his culture lacked a concept of the unconscious, or even of mind as separate from behavior, Euripides’s achievement remains uncanny and startling. One might even say that it marked “the beginning of modern psychological tragedy,” as noted by a translator of Greek tragedy, David Grene (Euripides, 5th century BCE, p. 160). Cultural constraints notwithstanding, he was deeply attuned to how we might come alive through authentic self-revelation, through direct expressions of desire, in a space that is both private and public—a space emblemized by the polis. (We might also imagine Euripides as a bit of a rebel, which is indeed how he has come to be regarded by most scholars.<sup>14</sup>)

<sup>14</sup> See, for example, Robert E. Meagher’s edition of Euripides’s *Helen* (1986): “Classical tragedy was a tempestuously diverse art form tolerating works at moral, political, and aesthetic extremes from each other. Euripides, admittedly, was barely tolerated by his contemporary critics, who judged his drama to be the demise of tragedy, discontinuous with the tradition and indeed destructive of it. In short, he was seen then and is best seen now as a rebel” (p. ix).

Just as Euripides understands that Phaedra, as a Greek woman of her era, has no space for desire, he also understands—as would Freud—that a woman in her position paradoxically has no choice but to surrender to the truth of her desire. Such is the case even if this desire is not chosen but is imposed or fated. (In *Hippolytus*, it is imposed by Aphrodite in an act of vengeance against her rival, Artemis, who has won Hippolytus's loyalty and chaste devotion.) Euripides's Phaedra is a surprising Greek protagonist, in this sense, because she recognizes that she has no choice but to surrender to this unchosen desire, which in some way transcends her. She comes to feel what has been imposed from above as if it were her own, from within. That is, for all her obvious lack of agency (as a pawn of the gods), she nonetheless comes to experience her own profound sense of agency.

It is this paradox—namely, that *fated* desire may also achieve the status of *personal* desire—that makes Euripides's accomplishment intriguing. Freud, much later, unable to appeal to the machinations of the gods, captured a similar paradox by invoking the id as the seat of unconscious (and transcendent) desires that are not of our choosing. The id “makes” us do and feel things we might consciously resist. In Freud's structural account, the source of this resistance and its enforcer is the superego, the representation of cultural ideals and taboos.

Euripides also depicts a controlling, repressing, and punishing force, which is shame. Attic culture, like most Western cultures of its time, was what Dodds (1951) called a “shame culture” (p. 17), in which reputation—or, more precisely, the awareness of how one was seen—functioned to impose restraints upon not only actions, but also desires. But Euripides's era was also a period of transition, one in which shame as a governing force was being supplemented by a new, more interior sort of negative motivation: guilt.

Wittingly or not, Euripides depicts the conflict between the older shame culture and a new “guilt culture,” with its emerging “conscience-based morality” (Mench 1976, p. 75), whereby actions are judged more according to the intent of the actor than by their mere outcome. Ultimately, *being* trumps *seeming*. In Athens as Euripides depicts it (with perhaps a retrospective emphasis), Phaedra's sexuality is more than shameful; it is dangerous, and her guilty lust is a crime. It must go under-

ground (and, failing that, she must kill herself). This is not only because her desire is “incestuous”; it is also because desire per se threatens to exceed the limits that partly *define* the “free” Greek woman.

By paying special attention to the *theaters of the body* (McDougall 1989), Euripides evocatively addresses a yet-unarticulated, yet-to-be-conceptualized dilemma of how to express interior psychic life. Some two and a half millennia later, Freud would have the means for contemplating these enigmas, for explicitly linking the body’s displays to repressed wishes and fantasy by means of speech. But Phaedra,<sup>15</sup> unable to speak her desire with words, enacts her drama through her body. She does not eat, thus anorexically erasing her body. She does not speak, thus erasing her (perceptible) mind through silence. The chorus tells us, “She lies on her bed . . . and fever wracks her . . . This is the third day / she has eaten no bread / and her body is pure and fasting” (Euripides, 5th century BCE, p. 169).

The chorus recognizes that Phaedra’s behavior conceals a *black mystery*. They invite, on behalf of Euripides—and the much-later Freud—a *talking cure*. “We would like to hear you, tell us what is the matter,” they implore her. But Phaedra’s words, like her bodily desire, are shameful to her. She is unable to speak her desire, located as it is in her body. “Cover me up,” she pleads (p. 173). But the chorus persists: “There is no remedy in silence, child . . . Say something! Look at me!” (p. 175). This chorus understands, as Freud would later teach, that *words have meaning*, and that *talking cures*.

As if that were not enough, Euripides’s chorus also anticipates contemporary psychoanalytic attention to facial mirroring (echoing the expressions of someone who is being observed or listened to) and the function of the gaze (intent visual attention, or, on the other side, the awareness of being watched) as a vital portal of communication, linking our desiring hearts and minds with bodily states. But Phaedra refuses to signify her desire, to avail herself of any path to communicative agency: that is, she refuses to speak (to use words and language), and she refuses to look (to use gesture). Still, she cannot escape the problem of agency, the problem of initiating action, in a culture in which the exposure of

<sup>15</sup> Phaedra, of course, is merely a character in Euripides’s play. But here I employ her as a metaphor for an analysand.

female desire is shameful. As well, her lust makes her guilty; it is dangerous to the “ostentatious purity” of Hippolytus, as a translator of the play observes (Euripides, 5th century BCE, p. 159): “The stain is in my heart,” Phaedra says, and then adds, “My honor lies in silence” (p. 177).

And so we find on Euripides’s stage that most theatrical of Freud’s characters: the hysteric. She will not speak, but her body betrays her because it does not lie and cannot remain silent. And if that is not enough of a problem for Phaedra, she has a bold (and meddlesome) analyst in the guise of her nurse. Confronting and coaxing her patient to absorb and reflect her own narcissism, the nurse taunts her: “Where honor is, speech will make you more honorable” (p. 177). But in this delicate and challenging quest to open a space for desire, the nurse rushes in, speaking and thereby usurping Phaedra’s agency in naming her desire: “Are you in love, my child? And who is he? . . . Hippolytus?” (p. 178). Phaedra retaliates and recoils from any sense of ownership: “You have spoken it, not I” (p. 178). Tension mounts as we approach a scene of authentic, curative speech; but before we know it, we are back in a world of well-rehearsed roles and masks and its adhesive repetitions that burden free association’s agility and motion.

The nurse’s gross missteps here and later remind us of the treachery involved in psychoanalysis as we strive to create a space of and for desire. Once Phaedra does speak, the nurse seeks to drive the repressed back to the underworld (as Freud himself would later do, at least until he developed his conceptions of catharsis, working through, and compromise formation). The nurse scolds Phaedra and indicts Aphrodite: “Women, this is past bearing” (p. 178).

Then, adding insult to Phaedra’s injury, the chorus also puts the burden back on the suffering queen: “You yourself have dragged your ruin to the light” (p. 179). Once again, the dramatic device—the dramatic convention—seals her tragic fate, while sustaining the audience’s safety by restoring a familiar script.

Now Euripides further lays the groundwork for Freud: where *Eros* is, so, too, is *Thanatos*.<sup>16</sup> Sexual desire (and female sexuality, in partic-

<sup>16</sup> Freud (1920) never uses the term *Thanatos*, however; in Strachey’s English translation, his term is *death drive*.

ular) in Euripides's era—as Freud would much later proclaim in his own era—was tantamount to a plague. Witness Hippolytus's outburst to the nurse: “I hate you women, hate and hate and hate you, / and never have enough of hating” (p. 190). Freud would have understood this diatribe as an expression of Hippolytus's desperate quest to quell the love and desire that was lurking on the edge of consciousness, just around the corner from his fierce attachment to hate.<sup>17</sup>

Phaedra, of course, knows this all too well. “Silence was my first plan . . . . And death is the best plan of them all” (p. 180), she says. In this zero-sum game of winners entailing losers, we lose the ethical space for a successful democratic polity. And those who are the most passionate have the most to lose, especially if they are female. The chorus reinforces the futility of resisting desire, telling Phaedra, “You’ve fallen into the great sea of love and with your puny swimming would escape!” (p. 183).

To make things even worse, the nurse again violates the boundaries of her role (and her prior promise to keep the queen's secret) by breaking Phaedra's confidence. Hers is not the only betrayal, or potential betrayal, in the play. Hippolytus, too, contemplates breaking his own promise not to speak Phaedra's shame, rationalizing this (ultimately un-taken) action by claiming that “my tongue swore, but my mind was still unpledged” (p. 188).<sup>18</sup> The nurse and Hippolytus step up to the edge of the social contract, based on honoring spoken pledges, that binds together a community of speakers; and one of them crosses it.

Phaedra, too, fails to sustain the ethical dimension of acts of listening and speaking, unable to commit (in action) to her own intuitive convictions. “Hush,” she says at one point in the midst of her torment, “let me hear the voices within!” (p. 186). For a moment, we are allowed to hope that Phaedra will respect her own inner discourse, and that she will find a way to speak with an authentic voice. But this hope is dashed when, instead of trusting and speaking her own inner voice, she decides to keep quiet and spy on Hippolytus instead. When discourse is unhinged from

<sup>17</sup> Interestingly, it was from this play that Cantarella (1987) chose the original (Italian) title for her book, which was *L'ambiguo malanno*—the ambiguous evil—a phrase Hippolytus uses to describe not only womanhood, but woman herself.

<sup>18</sup> And here we might say that Hippolytus evokes for us an all-too-modern United States president, Bill Clinton.

an ethical polis (speech community), silence and talking both destroy, and tragic consequences become inevitable.

Hippolytus seems ready to bring matters to such a tragic conclusion when, momentarily defying both Phaedra's silent torment and the nurse's warnings, he threatens to bare all: "You cannot expect that I hear horror and stay silent" (p. 188). But in the end, he speaks only to them and not to the whole community, which is one way in which his ultimate actions will differ from Phaedra's.

As the play progresses, we see the tension mount as, time and again, characters venture towards a realm (a polis) of expressed desire (in which words do have meaning, and in which history cannot be rewritten), but then veer toward a collapse into fated, scripted roles. We watch as Phaedra, in her quest to preserve her name unsullied, ensures the perpetration of existing, repressive power dynamics instead of the riskier, far more complicated possibilities in a relationship of mutuality among multidimensional subjects. We watch as she adds more pressure to a vise-like clamp, enacting (by dint of her finger-pointing, blaming indictment of Hippolytus, who in turn accommodates in his alternately victimized and victimizing roles) what J. Benjamin (2004) has referred to as a *doer/done-to* dynamic. Essentially, this constitutes a moral collapse, foreclosing the (third) space for meaningful, courageous communication with the reverberations of the original power dynamics set in motion by the gods at the outset of the play—a vicious cycle that is inconsistent with ideals of moral agency, social justice, and a well-functioning democracy, and that derails desire's discourse.

By the time Hippolytus's father, Theseus (also Phaedra's husband), appears on the scene quite late in the play, we cannot help but wonder why he was not around before. His earlier disappearance, or lack of appearance, calls attention to itself. He was the absent father, the missing authority, who failed to fulfill his responsibilities as a leader and as a husband.

In a Lacanian reading, Theseus is unable to mark the boundary that instantiates symbolic law (Lacan's Name of the Father) and its (ethical) discourse of desire, of a truthful practice of free association. What is more, Theseus takes no responsibility for his complicity in the tragedy unfolding around him. Rather, he seeks a false moral high ground and

then shifts the burden of responsibility onto Phaedra's final words, the suicide note that he insists speaks volumes ("cries aloud," p. 199). And it is only at this point, after she has extinguished herself, that Phaedra's voice becomes loud, clear, and serious.

Moving the action swiftly on to further death and destruction, Theseus turns next to his son, whom Phaedra has accused of attempted incestuous rape, and leaps over any consideration of evidence or proof, beyond his wife's suicide note. There will be no law or justice for Hippolytus; Theseus dismisses his son's pleas for truth and reconciliation, jumping instead to condemnation and anathema. As Theseus laments the "daring impudence" of men (p. 201), he cannot escape the daring impudence of his own rush to judgment. Hippolytus, though horror-struck at his father's mistrust and failure to uphold an ethical polis, cannot speak the whole truth. He denies his guilt but, honoring his own ethical boundaries, he suppresses the whole truth, remaining silently loyal to Phaedra and to his promise.

After these actions and these silences have their consequences, and Hippolytus meets his death en route to an unjust exile, we recognize that the two goddesses whose tiff is the motive for this tragedy—Aphrodite and Artemis—share in the plight of mere mortals. Their jealous and destructive feud reminds us that classical Greek tragedy was bounded by an ethic of loyalty and vengeance, an ethic that fell far wide of the mark of a true ethical *code* and its essential, inherent space for meaning creation. This space, once we recall that all meaning is rooted as much between the body and words as between speaker and addressee, is ultimately also the location of (female) desire. Put differently, when the space (signified by a woman's body and her receptive organs) essential to ethical communication is bypassed (or trespassed), so are democracy and meaningful discourse. Such semiotic confinement imprisons the voice of desire. Free association and freedom of association (or assembly) both suffer.

In the play's final scene, Artemis reminds us that she has no appetite for mourning and its symbolic compensations, but is instead animated only by an adhesive fealty to the repetitive chain of fated and retaliatory scripts, to its *unfree* aporetic chain of associations that ties and binds us. The play closes as she tallies up the score, noting that Aphrodite's spite

has claimed three victims: Theseus, Hippolytus, and herself.<sup>19</sup> By erasing Phaedra (who does not even achieve status here as a named victim), Artemis once again ensures that it will be Phaedra whom we remember.

## (DIS)EMBODIED VOICE: TOWARD AN INCLUSIVE POLIS

Although Euripides named his play *Hippolytus*, it is Phaedra who speaks to us.<sup>20</sup> And perhaps it would surprise many laymen that Freud “invented” psychoanalysis in consultation not only with male colleagues (Janet and Breuer, for example), but also with female patients. Freud’s surrender to his technique of free association was just that: a surrender to the voices of women. One of them, “named” Anna O., coined the expression *talking cure* (Freud 1910), as noted earlier; and another, Frau Emmy von N., asked Freud not to rush in and attempt to control and wipe out her memory, but to give her the opportunity to speak and to remember (Freud 1893).<sup>21</sup> Just as Phaedra speaks to us, Emmy von N. spoke to Freud.

Freud listened and learned. He was spellbound. He discovered that he could not “evade listening to her stories in every detail to the very end” (Freud and Breuer 1895, p. 61). What he heard was the voice of women and sexual desire emerging from silence, a symptom of their disenfranchisement: women freely associating. The din of democracy could be heard.

Of course, as Foucault (2001) concluded in his studies of the parrhesiastes, the din of democracy is a precarious achievement that requires

<sup>19</sup> This reading of Aphrodite’s list is based on Grene’s translation. Some scholars have argued that Aphrodite intended to list Theseus, Hippolytus, and Phaedra.

<sup>20</sup> The original audience would have well understood Euripides’s choice of a title, even if, despite himself, he seemed much more interested in Phaedra than in his nominal protagonist. In any case, as one critic put it (Clark 1939), if with too much protest, “it is obvious that the central figure of Euripides’s play—as the title would indicate—is Hippolytus, not Phaedra, and that it is essentially a study not of love but of chastity. Phaedra is dead before the play is half over; she and Hippolytus never exchange words on the stage; it is not she, but the nurse, who reveals her love to her stepson” (p. 201).

<sup>21</sup> Anna O. and Emmy von N. are pseudonyms for Bertha Pappenheim and Fanny Moser, respectively. Recognizing “their” voices is riddled with the curious tension between naming and concealing so central to psychoanalytic case history.

a commitment to “fearless speech,” and that also depends on critiquing authority. (Lessons culled from both psychoanalytic encounters with free association and the American political experiment with free speech reinforce this point.) But this is all too often undermined by political calculations and what amount to failures of courage. Foucault reveals that the moral fortitude of the parrhesiaste lies not only in speaking what is invisible to others, but also in speaking what others *choose* not to see.

Euripides’s drama succeeds by exposing that moral courage is necessary, but that it also necessarily fails. He shows how speaking the truth of one’s desire to those who do not want to hear or to know leads us back to repression and tragedy. Like Foucault’s (2001) analysis of parrhesia’s failure, Euripides’s play highlights the need for an ethical space cultivated by values of truthfulness and courage, if free speech—and ethical hearing—is to prevail.

But Euripides’s tragedy reveals the precipice upon which true free speech hinges and falters: the female body. He hints that insisting upon rigidly held, separate spheres for private and public discourses, and upon barring female desire and the female body from the realm of public and political speech, fertilized the very seeds of repression, of democracy’s undoing. Freud’s free association insisted upon restoring these links—between mind and body, between female desire and repressed knowledge, between authority and unauthorized voices.

It is well beyond the scope of this essay to explore the implications of Freud’s claims and those of his followers regarding the relationship of symbolization (above all, speech) to physical experience and sexuality—especially female sexuality. For now, suffice it to say that Freud’s project of “language-ing” the body was rooted in the child’s discovery of sexual difference—that is, of genital difference. This discovery breeds curiosity, and curiosity piques the search for knowledge. This search becomes a quest, as it were, to fill in a perceived *and* real gap: a quest at first to comprehend the mystery of sexual difference, but later to find one’s own freedom in the space between the tyrannical realms of refused knowledge (repression) and imposed knowledge (dogma).

Of course, elemental physical and psychic forces (sexual or otherwise) played little to no role in the American founding fathers’ conception of “free speech” or a democratic social order; and their constitution

was predicated upon the exclusion of voices—namely, those of women and slaves. Without a real and metaphorical conception of inclusive space, the entire democratic project founders.

The same is true of the conditions upon which the psychoanalytic project prospers or falters. Of course, the power dynamics of the psychoanalytic microculture mirror many of the social arrangements that privilege hegemonic discourses (including internalized ones) while repressing marginalized and disenfranchised voices—risking, time and again, the foreclosure of free speech. This is as true in the historiography of the field as in the clinic. Perhaps for this reason, as Thompson (2004) argues, Freud established his fundamental rule not only as an injunction to speak freely but as a pledge, enlisting the patient's honesty as a moral agent to do so. Ver Eecke (2000) concurs, suggesting that Freud perceived a need "to mobilize additional resources to deal with unconscious resistance to the revelation of truth" (p. 87). Rieff (1959), referring to this pledge of honesty, came to the blunt conclusion—with which Euripides and Foucault may have concurred—that free association "is not an ethic for weaklings" (p. 315).

The same is true for political free speech. Contemporary American discourse casts a spotlight on the need for courage and on the risks associated with free speech and freedom of assembly. Lamentably, as Wu (2013) has recently described, the "mighty, as well as the marginalized" (p. 37) have come to make use of (and exploit) the First Amendment; his remarks highlight how the frankly insincere, cynical, and even sinister *imposition* of restraints—and, perhaps more perversely, the anarchical and tyrannical freedom *from* restraint—breaks down the mediated space and the speech community upon which true democratic expression and ethical action prosper.

Freud, a revolutionary of the mind and the body, a co-conspirator in discovering (and inventing) the talking cure, could nonetheless fall back on his own repressive solutions. To paraphrase Emmy von N.'s challenge to her doctor: "Let me speak these memories before you try to explain them or wipe them away with the tool of hypnotic suggestion" (Roth 2001, p. 180). In response, Freud (Freud and Breuer 1895), not yet convinced of the value of "reproduction in states of uninhibited association"

(p. 11), listened. But he would listen and learn only up to a point, and would then back away from the lessons.

For example, Freud would learn of the widespread incidence of sexual abuse and incest among his female patients, at first articulating what became known as the seduction hypothesis, which granted etiological significance in adult hysteria to (paternal) childhood sexual molestation and premature sexual stimulation. But, over time, unable to accept that there were so many pedophilic fathers (including his own), and increasingly convinced that in the unconscious mind, fantasy often passes for reality, Freud changed his mind (Makari 2008). He devised a new cause for hysteria: childhood sexual fantasy and the childhood masturbation that such fantasy inspired. While not disavowing the reality of abuse in some instances, he now reinterpreted many reports of abuse itself as a symptom or effect, a fantasy rather than a reality. Where Theseus took Phaedra's fantasies for truth, Freud now took his patients' truths for fantasy.<sup>22</sup>

From the vantage point of the codified exclusion of female voice, body, and agency from the spheres of public life that Cantarella (1987) exposes in her analysis of the polis, the enduring but largely erased voices of both Phaedra and Anna O. compel us to reflect on the meaning of tragedy. They challenge us to heed "the ethical drive that inspired parrhesia and the ethical hearing that allowed for truth to be determined in the relation to listening" (Al-Kassim 2010, p. 17). They invite us to consider the need for a genuine and inclusive polis—an embodied relational and semiotic space that honors the courage involved in exposing and symbolizing desire—if democracy in psychoanalysis, and in cultural life, is to thrive.

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<sup>22</sup> To what exact degree, and at what exact point, Freud heard what his patients were telling him, and to what exact degree they knew what they were telling him, have become matters of controversy. See Makari (2008, pp. 90-92, 97-102).

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## NARCISSISTIC DEFENSES IN THE DISTORTION OF FREE ASSOCIATION AND THEIR UNDERLYING ANXIETIES

BY OTTO F. KERNBERG

*This paper examines particular distortions in the process of free association characteristics of patients with narcissistic personality disorders. The author proposes that the dominant narcissistic transference developments typical of the early and middle phases of the analytic treatment of these patients are reflected in these distortions of free association. This paper gathers the various patterns that these defensive distortions present, along with technical interventions geared to deal with them.*

**Keywords:** Narcissism, defenses, free association, Transference Focused Psychotherapy (TFP), personality disorders, analytic technique, countertransference, intellectualization, interpretation, grandiosity, omnipotence, “thick-skinned” narcissistic patients.

A frequent finding in persons with narcissistic personalities who are treated with standard psychoanalysis or Transference Focused Psychotherapy (TFP) is their persistent difficulty in carrying out free association. They may show a particular type of association that reflects an ongoing critical evaluation of what comes to mind, rather than any curiosity about what is unknown or not understood, or about what may emerge that is unexpected or surprisingly new. The prevalence of intellectual speculation over what comes to mind gives the patient’s associations an

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obsessive-compulsive quality. Although such persons may appear much freer than obsessive patients to engage in intense affective reactions, the matter-of-fact, nonreflective assertion of the patient's own feelings indicates his great difficulty in exploring the unknown in his mind.

When the analyst draws attention to peculiar ideas, behavioral reactions, or questions that arise in the course of apparent efforts to engage in free association, the patient's reactions take the form of intellectual speculation, theoretical musings, or reflections about the analyst's intentions. Such patients present, in short, with what may be called an ongoing self-supervision of what emerges in the mind or in reaction to the analyst's interpretive interventions.

This is the nature of the problem with free association that I wish to explore in this paper. It affects particularly the *thick-skinned* narcissistic patients, including those who represent the relatively less severe degree of pathology within the wide spectrum of narcissistic personality disorders (Kernberg 2014).

What follows is an effort to present an overview of the various ways in which the very process of free association is significantly disturbed in patients with severe narcissistic pathology. In earlier work (Kernberg 2007), I have stressed the dominant defensive operations geared to protect the narcissistic patient from any authentic dependency on the analyst as the most important expression of the activation of the patient's pathological grandiose self. In a recent publication (Kernberg 2014), I have related my overall approach to those of other authors. Authentic dependency on the analyst would mean a recognition of the importance of his capacity to provide the patient with psychological understanding and help. That, by the same token, would evoke intolerable envy and resentment, as well as feelings of inferiority and humiliation.

Consequently, it is as if the patient, while carrying out free association, seems to be talking to himself in the presence of the analyst, or to the analyst with the purpose of influencing him. As a result, the analyst's countertransference is as if he were alone in the room, with a painful lack of contact or meaningful interaction with the patient, which may typically cause a sense of boredom and a chronic temptation to distraction. While this development is present in all types of narcissistic per-

sonality, it is most clearly observable over an extended period of time in cases of the *thick-skinned* narcissistic personality (Rosenfeld 1987).

This defense of avoidance of true dependency is frequently matched by a complementary defense of omnipotent control, which is a conscious effort on the patient's part to influence and control the analyst's behavior, in order to avoid both the emergence of feelings of inferiority (stemming from the newness or recognized importance of what the analyst is saying) and a complete devaluation of the analyst (as a consequence of the activation of the patient's contemptuous grandiosity). If the analyst is completely devalued, there remains no possibility of receiving any help, nor any useful consequence of the treatment; if the analyst expresses anything potentially useful, however, this is intolerable and resentment may be unavoidable.

These two mutually complementary operations—the denial of dependency and omnipotent control—may evolve in several ways and may be expressed in an influence on the process of free association, rather than in any specific fantasy or other material emerging concretely in the content of the sessions. It is on the effects of these defensive operations on free association that I wish to focus in what follows.

The instructions given to the patient in explaining the “fundamental rule” of free association include the invitation to try to say whatever comes to his mind, in whatever form that occurs, whether this includes thoughts, fantasies, observations, relationships, fears, dreams, memories, etc., without attempting to order all these contents in any way. The patient is instructed to try to verbalize what goes through his mind regardless of whether that seems easy or difficult, something to be proud of or ashamed about, something important or trivial, etc.

The patient is often told that free association may seem difficult at first, but may be gradually learned, and that the analyst will attempt to help the patient in this regard. Narcissistic patients quite frequently present what comes to mind in an organized way, similar to what would be typical for obsessive patients, but may “learn” to disperse such organized communications with words, thoughts, feelings, or questions that convey a spontaneity that feels more uncontrolled, though this is then followed by an orderly communication of what the patient was trying to present in the first place.

Typical “organizing” comments may include a clarification of what the patient is trying to communicate by enumerating it, or the comment that “I will clarify this later.” The result is a clearly ordered sequence of subjects repeatedly activated with a focus on different angles from which the patient considers this material part of his self-analysis. The total sequence results in an “imitation spontaneity” that makes it difficult for the analyst to perceive what, if anything, is emotionally relevant—other than the patient’s control of the process.

Some patients express concern over whether what comes to mind will be helpful or not, and repeatedly question whether the analyst understands it. They may wonder aloud, throughout a session, whether this is going to be a “good” session or a “bad” one, or they may initiate the session with such a comment. The patient’s “free association” is accompanied by continuous evaluation of the extent to which what is coming to mind right now will foster the analytic process or not.

The patient’s reaction to the analyst’s interpretive comments may show typically repetitive qualities. The patient seems to consider very thoughtfully what the analyst has said, and may repeat it to himself to assure himself that he has understood it correctly and is therefore able to “work” with it. The patient may frequently express agreement or disagreement with what the analyst has said, or ask for further clarification; what seems to be missing is a spontaneous search for his internal reaction, an expression of his emotional response to what the analyst has just said. The patient conveys the impression of being an attentive and interested participant in a dialogue, rather than open to an effort to experience anything new in himself. It usually takes some time for the analyst to become aware of this subtle way of the patient’s protecting himself against any unexpected emotional impact of what the analyst is saying.

Narcissistic patients have enormous difficulty understanding that the analyst’s interpretations are only hypotheses, which will be proven right or wrong by whatever they stimulate in the patient’s awareness of his emotional reactions to them. Rather, the patient will treat them as “theories” or oracles!

Sometimes the analyst may have the experience of an important breakthrough or change, something unexpectedly understood by the patient that sheds a new light on a particular problem. This new emo-

tional understanding, however, disappears without a trace in the days and weeks that follow. This development may be considered a form of negative therapeutic reaction or an unconscious devaluation, or even reflect a silent, conscious dismissal of what the patient has received from the analyst. What is impressive, however, is the patient's reaction when the analyst returns to this particular event as it fits the material of a later session, and when he wonders whether the patient remembers what occurred in that past session. Often a patient may respond with "yes, of course," and repeat almost verbatim the interaction, saying that he remembers it very well, and that in fact it involves an issue that has been discussed in different ways a thousand times, with the implication that he has heard it, remembers it, and therefore has nothing further to say about it.

This sequence of events clearly illustrates the intellectual "learning" of interpretations that do not really touch the patient. The patient "incorporates" the new knowledge and devalues it in the process.

Behind this pattern lies a defensive constellation of omnipotent control and the need to avoid any authentic emotional dependency on the analyst, with the patient's ongoing monitoring of his free association and the analyst's comments in order to develop his own "analytic" understanding of what evolves in the sessions. What may be most helpful at this point is to focus the patient's attention on the risks involved in simply listening to what the analyst is saying, with the open question of whether that will bring about any particular reaction in the patient. Will the analyst's intervention foster his own superiority, putting the patient down, or will it confirm the patient's feared demolition of the analyst?

One may point out to the patient his frequent concern as to whether the analyst's comment is "good" or "bad," whether "correct" or "not correct," whether it implies his accepting the patient or rejecting him. In other instances, it may help to focus on the patient's paranoid attitude regarding the analyst, which emerges as a consequence of pointing to the patient's lack of spontaneity in his response to the analyst's comments.

The development of "filler" subjects in the patient's discourse may also alert the analyst to an underlying difficulty in free association. The patient comes back, again and again, to the same subject matter—for

example, a detailed reference to the technical aspects of his profession, or some particular work project he needs to carry out at home, of similar repetitive contents without reference to any human interaction. This, of course, is in sharp contrast to the repetitive narrative about the dominant conflicts in the patient's life, which, even if repetitive on the surface, usually imply live transferential implications. Thus, repetitive discussion about, for example, the various concrete tasks involved in gardening may serve as a protective avoidance of uncontrolled emergence of new material. One patient returned, again and again, to technical details regarding his scientific research in an area totally unknown to the analyst; eventually, it became clear that his apparently obsessive concern served the function of asserting his superiority over the analyst.

A frequent and, for the analyst, quite disturbing development may be the patient's appropriation of the analyst's language or theory when reporting emotional reactions or conflicts, so that analytic explanations can be included in the patient's discourse without their reflecting any authentic emotional learning. Obviously, the analyst should attempt to talk in concrete, ordinary language rather than introducing technical terminology reflecting his own theories. However, even if interpretive comments are presented in very simple language, the analyst's underlying theoretical orientation may be perceived clearly by the patient and be reflected in the content of his associations. In peer supervision, relating this development in the patient's discourse may lead to amused identification by the group of the analyst's particular theoretical preferences.

The ongoing effort to monitor, absorb, and store the analyst's comments in a continuous "learning" process also reflects the narcissistic patient's need to be admired, rather than any involvement in an authentically loving or dependent relationship. Where does the patient stand regarding the analyst's interest in him? Does the analyst appreciate and feel impressed by the patient's communications? Is he bored, distant, indifferent, or is he angry, resentful, or dismissive and contentious?

The patient may be projecting aspects of his own pathological grandiose self onto the analyst, including the need for admiring confirmation, a devastating hostility, or humiliating contempt. At the same time, the patient cannot form an awareness of those aspects of the analyst's

personality that would ordinarily come through in a long-standing therapeutic relationship, in terms of the analyst's concern, empathy, interest, and emotional sensitivity to the patient's needs.

All this may be unavailable to the narcissistic patient. Under the dominance of the pathological grandiose self, the patient is reduced to evaluating how the analyst's behavior affects him, rather than being capable of an authentic interest in the analyst as a person—an interest that would grow and develop in consonance with a developing dependent relationship, and the development of appreciation and gratitude for what the patient receives from the analyst. And, by the same token, he cannot believe in the analyst's authentic interest and concern for him.

This same difficulty in empathizing with the personality of the analyst shows up, of course, in relationships between the patient and everyone else in his life. It leads to a stereotyped description of the most important persons in his life, and the persistence of these stereotypes throughout lengthy periods of the analysis. Typically, such a patient presents a fixed, rigid view of his family and his own past, with an impressive lack of curiosity or reflection on the wishes, experiences, and motivation of significant others. This conveys to the analyst the painful experience of emptiness that these patients have to contend with in all their interactions, and against which fantasies of grandiosity, superiority, and self-sufficiency provide illusory protection.

The stereotyped panorama of the patient's life combines with the rigid cognitive control of the patient's free associations to convey an arid emotional life experience that can only be penetrated by the analysis of its replication in the transference. The analysis of the patient's fear of listening without his controlling safeguards in place opens up the analysis of his difficulty in listening to others as well, and the consequent ignoring or misunderstanding of communications—an emotional ignorance caused by the underlying paranoid stance that he needs to protect himself against threats to the pathological grandiose self.

Under these conditions, the patient brings narratives about brilliant, exuberant, exciting, and overwhelming experiences that may have a dramatic or exhilarating quality. These reports, in which the patient experiences himself as the center of attention, have a grandiose quality and serve to reassure the patient and impress the analyst, while retaining a

strangely empty quality. The patient may enthusiastically communicate an experience that nevertheless leaves no trace of permanence in terms of some emotional relationship, and, in the analyst's countertransference, leaves him cold or uninvolved in spite of all his efforts to empathize with the patient. Narcissistic patients, however, may find an escape from emptiness in such experiences of exuberance, as they often do in unusual sexual involvements, drug-induced emotional states, or dangerous sports.

The lifeless quality of communication conveyed by the repetitive descriptions of interactions that show very little or no change over time is reinforced by the patient's reaction to the analyst's comments indicating that what is being referred to now seems to be a replica of what has been discussed before, when there is no reference to the contribution made by the analyst in previous discussions of the same material. It is as though these or similar matters have never been previously discussed. A confrontation with this fact may trigger the patient's sense of being attacked—or, to the contrary, his professed agreement with the analyst, with the implication that the patient is communicating precisely the understanding that was reached in the previous discussion. The naturalness with which the patient may assert the latter may actually dovetail with another aspect of the communication that reflects his attempt at omnipotent control of the interaction.

Some narcissistic patients are prone to the repetitive use of semi-automatic statements such as, "as you know," "that we have discussed before," or "that we have seen before"—implying harmonious work together with the analyst in confirming the patient's view or interpretation of an experience. In essence, the unchanging repetition of an experience that has apparently been explored earlier in some depth expresses the patient's emphasis on maintaining his independence from the analyst's interference.

With some frequency, after an extended narrative of what the patient wishes to communicate to the analyst—often expressing an unconscious effort to influence the analyst in some specific way—the patient may remain silent, and may then make a statement such as: "I've said all I've had to say, now it's your turn." Such a statement perhaps reflects, better than anything else, the subtle transformation of free association

into a shared, alternative communication of the respective thinking of patient and analyst, or the patient's implicit reminder to the analyst that it is now his task to make sense of what the patient has been saying and to add something new to it.

Questions directed to the analyst regarding his agreement or disagreement with what the patient is saying may disrupt the patient's free association from time to time, with the implication of the patient's assurance to himself that there is no disagreement or implicit critique, nor is there a negative reaction on the analyst's part that may have threatening implications for the patient. Or, the patient wonders, is there in the analyst's contribution something new, not already known to the patient, which could be a source of humiliation to him?

Obviously, efforts to maintain control and to defend against dependency or any real influence from the analyst affect long-term countertransference developments with narcissistic patients who show a strong combination of these defenses. The analyst's very commitment to the patient may suffer through the patient's unconscious undermining of everything that comes from the analyst, as well as through the chronic absence of an authentic connection with the patient.

The intensity of negative countertransference under those circumstances may take many forms. One analyst, with a very good understanding of her patient (although with still somewhat limited clinical experience), found herself frequently contrasting, with vengeful enjoyment, her own satisfactory love life with the emptiness of the patient's sexual exploits. It was as if she obtained a particular satisfaction from this comparison, clearly recognized by her as an expression of her hostile, resentful feelings in the countertransference.

The artificial, manipulative quality of the patient's communications tends to evoke a sense of meaningless triviality and monotony, and may induce boredom in the analyst that requires ongoing attention to the subtle, transitory shifts in the interaction that may become noticeable in response to the analyst's interventions. As mentioned earlier, the patient's experience of the analyst's comments may be as an assertion of the analyst's superiority and dominance over the patient, or an expression of hostile indifference. At other moments, the patient may experience the analyst as ignorant, incompetent, or helpless, with a sense of

superior security that nonetheless turns into worry over his wasting his time, given the uselessness of this treatment.

Pointing to this rapid—and at first relatively subtle, but gradually more obvious—oscillation between the patient's sense of triumphant superiority, on the one hand, and his humiliating inferiority in his relation to the analyst, on the other, may help the patient become aware of his projection of his pathological grandiose self and his identification of himself with devalued aspects of the self when confirmation of his omnipotence fails. This is an important step in the exploration of the narcissistic transference. It opens the patient's awareness to his deeper sense of total ignorance regarding the realistic attitude he encounters on the part of the analyst, and of his deep conviction that the best he can expect is an analyst who is basically indifferent, thus confirming the patient's aloneness in the world.

At this middle stage of the treatment, the patient's heightened interest in the analyst's relationship with him may clarify corresponding identifications with pathogenic experiences from the past. In other words, there may be a gradual attribution to the analyst of features that replicate aspects of parental figures, reflecting the sources of conflicts with and the power of the parental couple. And by the same token, the patient now enacts his identification with such parental images while projecting his corresponding self experience onto the analyst.

In the countertransference, moments of relatively quiet interest in pursuing the development of the patient's corresponding experience in the hour may be followed by a sense of sudden openness to an authentic emotional experience, a lived intensification of an internal relationship with the patient, that may then be almost brutally dismantled by a subsequent expression of disdainful disqualification of everything that has been evolving in the relationship. Against the background of consistent efforts to deepen transference analysis over a long period of time, months of hopefulness and occasional experiences of emotional closeness may shift again into disappointing disengagement by the patient, and the analyst is faced with a new wave of empty trivialities filling the sessions. Here the dynamics of disappointment, disillusionment, and despair in the countertransference—well described by LaFarge (2015)—may enter the picture.

The patient's incapacity to experience himself in any relationship in which he is loved may become an important issue at this point: he may feel that any positive interest and commitment to him on the part of the analyst is the product of the patient's seductive efforts, the patient's power, and the analyst's weakness and naiveté—and therefore that the patient's contemptuous devaluation is justified. Unconscious efforts to provoke the analyst into a consequent counter-disqualification of the patient may help the patient reconfirm his lack of trust in the analyst and the worthless quality of the apparent emotional investment in him on the analyst's part. Clarification of this issue may highlight the patient's unconscious envy of the analyst's capacity to love, which resonates, of course, with the patient's unconscious envy and resentment of those in his early life who might have become a source of ordinary and trustworthy love and commitment to him.

Narcissistic patients' typical incapacity to commit themselves emotionally to a loving partner is reflected in these complex dynamics in the transference, and highlighting them in working through these issues would seem essential for changing this fundamental aspect of their pathology. The analyst's tolerance of the patient's expression of arrogance and consistent devaluation—precisely at points when the analyst has given evidence of his deep wish to understand and help—and his emotional commitment to the patient may be crucial to avoid his falling into the trap of a reactive devaluation of the patient in response to the patient's contempt of the analyst.

In short, the patient's rejection of moments of the analyst's intense investment in him, and the reinforcement of his distancing himself emotionally from the analyst in a grandiose way, may be crucial preconditions for the discovery of those hidden moments of recognition by the patient of the analyst's authentic interest that the patient, however, cannot tolerate. Boredom in the countertransference may represent a defensive smoke screen against the analyst's resentment in the aftermath of an active effort on the patient's part to destroy the analyst's recognized interest and commitment to him.

I have found it helpful at times to share with the patient my thoughts about what is going on in him at this point in his relation with me, or what I think might have been going on in relation with someone else, as

an expression of the displacement of envious devaluation in the transference. I might communicate these thoughts to the patient even though I am quite certain they will be depreciated or incorporated intellectually in a destructive way. In other words, I am treating the patient "as if" he were a "normal" person able to be interested in listening to me and imagining what goes into my saying what I say. And yet I would be open to a possible subsequent devaluation of what I have to contribute. I might be right or wrong in what I am saying, but that would only emerge in the patient's reaction; if what I am saying were to be taken seriously, this would reflect his awareness—momentary, at least—of a concerned expression of my interest in him.

The patient may surprise me by reacting to what I am saying without immediately "analyzing" it or qualifying it for either its value or its uselessness, and may experience an emotional reaction that he now communicates to me. That would indicate a "normal" attitude that we expect from free association, and would tell me that I was wrong in my pessimistic assessment of the patient.

More frequently, the patient will indeed react in the disqualifying way reflected in the attitude and verbal type of communication referred to earlier. I would then interpret this as his way of avoiding reflecting on what I have just been saying, and instead his tendency to "analyze" it in terms of whether I have said anything new or not, thereby confirming my superiority or uselessness, and so on.

Indicative of the working through of a prevalent narcissistic transference, the patient's increased capacity to depend on the analyst will emerge. Patients may now evince reactions to separations over weekends or other absences. These reactions may have a predominantly paranoid quality, but may also coincide with a beginning awareness of the patient's own aggressive, devaluing behavior as an issue to be examined. They give the hope of some potential for feelings of concern for the analyst. There may be times when the patient provocatively insists that nothing has changed, that he is worse than ever, and flaunts the repetition of old symptoms as an indication of the analyst's incompetence, while at the same time the patient is beginning to be aware that such repetitive provocativeness serves the function of testing the extent to which the analyst is still available to him and has not given up. The patient's fear that he

has exhausted the therapist may be another expression of concern for him and tolerance of a dependent relationship.

Naturally, parallel behavior in relation to others in the patient's life may provide further evidence of change in his capacity to love, to be authentically interested in what happens inside other people, and to be concerned about other people's reactions to him. The patient's developing fantasy life regarding the experiences of the analyst may reflect a deepening of the activation of specific object relations in the transference, in contrast to the long-standing, fixed nature of the relationship between the grandiose self and the devalued aspect of the self. The analysis of dreams will reflect a broader and deeper space of associations, creating a new dimension of dialectical tension between manifest and latent dream content that was not available in early analytic stages; previously, the patient's associations to elements of the dream were simply new versions of intellectualized interpretations of his experiences.

The achievement of the depressive position and with it the capacity to realize that intense hatred and resentment of his objects have been preventing him from perceiving whatever good, valuable, and loving engagements he has encountered in life, as well as the awareness of what he might have received from those who loved him if he had not been so resentfully envious of their capacity to love him, may become a very painful experience. Mourning over the rejection and squandering of potentially good relationships, over the past mistreatment of those who love him, and the realization of time lost indicate tolerance of the depressive position. As the patient can begin to tolerate the exploration of his own mind and feelings, he becomes more and more aware of and interested in the feelings and intentions of others. The experience of guilt over his aggression toward those who love him now motivates impulses to repair relationships, to salvage what is good; and a new capacity to experience gratitude for the good in life may emerge.

At bottom, success in the treatment of narcissistic pathology can be most clearly assessed in these patients' capacity to love, to be committed to life-enriching interests and endeavors that are not bound to narcissistic self-assurance or grandiosity, and the capacity to identify with a value system that transcends one's own existence. With the goal of determining the degree to which patients are able to achieve such a de-

velopment, the case material of the Weill Cornell Personality Disorder Institute faculty has been under review. The range of outcomes studied makes it clear that there are differences in the nature of the analytic experiences of these patients, based on their personalities and life situations; the specific ways in which these impact treatment remain to be clarified.

To say the least, it seems that the extended experience of at least one stable relationship with a parental object in the earliest year of life—a relationship that provided a consistent source of love, care, and concern—is a prognostically important positive indicator. Other significant positive features include some understanding and enjoyment of the emotional values of art, literature, or science; a personal value system not centered on personal triumph or a rationalized system of hatred; and the availability, at some time, of a love object that did not have to be devalued and rejected. Sometimes the emergence of a wish to be taken care of, and the experience of the analyst as a care-taking figure who does not express his superiority or make demands upon the patient, may indicate the potential for dependency that, once dissociated from severely destructive tendencies, might imply a positive potential in extremely lonely patients.

In the end, the achievement of the capacity to love without experiencing this development as a potential source of weakness or inferiority, and without basic self-regard being negatively affected by the painful possibility that this love will not be reciprocated, indicates the transformation of pathological narcissism into the achievement of a normal capacity for object relations in the context of normal narcissistic development.

Perhaps the most significant issue regarding these patients' free association is the analyst's recognition that the patient's capacity to free-associate has been distorted by narcissistic pathology—to the extent that a suggestion to the patient to associate to any apparently significant subject matter will not lead to deepening awareness of emotionally significant material. The nature of the transference must be clarified and worked through systematically before the deeper functions of free association may emerge in the treatment situation. Such extreme cases of narcissism illustrate the relative importance of the analysis of the estab-

ishment of the analytic relationship, rather than the analysis of assumed repressed contents, without losing sight of the eventual emergence of those contents once a more normal object relation evolves in the transference.

In short, all the defenses against exploring the pathological grandiose self—and, particularly, against the development of a dependent transference relationship—protect the patient against the anxieties reflecting underlying conflicts between the pathological grandiose self and the projected devalued aspects of the self in the transference relationship. In essence, this is the conflict between a grandiose, self-sufficient, arrogant, and devaluing representation of an omnipotent self, on the one hand, and a projected, devalued, depreciated, inferior aspect of the self, on the other—with each reflecting, in essence, condensations of more primitive internalized object relations under the dominance of early aggressive conflicts.

Defenses operating through distortion of free association are not the only ones that protect the patient from activation of these conflicts in the transference. Split-off acting out of these conflicts in extratransferential relations, subtle expression of them in the fantasy material produced during sessions, and dreams and somatization may reflect deeper aspects of these problems that have not reached the patient's preconscious or conscious awareness.

The systematic analysis of all these defensive operations tends to activate intense negative affects, including nonspecific anxiety, paranoid fears, and experiences of humiliation and shame—as well as, ultimately, the emergence of the potential for authentic feelings of guilt and concern, as the patient begins to recognize his co-involvement in these transferential developments.

The nature of the anxieties that emerge in the transference reveal the degree to which the activation of the pathological self and the defenses against a dependent relationship in the transference are being worked through and resolved. To begin with, what usually predominates in the early stages of psychoanalytic treatment of narcissistic patients are paranoid anxieties linked to the projection of the grandiose self onto the analyst—a sense that the analyst is a cold, rigid, harshly critical authority who loathes and despises the patient or is sadistically provocative. These

early experiences rapidly turn into fantasies that the analyst is trying to put down the patient and humiliate him, with the surface rationale of confronting him with his difficulties. This is viewed as a disguise of the analyst's true intent of asserting his superiority and enjoying the humiliation of the patient, whose inferiority confirms the mighty position of the analyst. Defenses against experiences of humiliation may dominate the analytic situation for a significant period of time, together with the patient's defensive efforts to ignore and devalue the analyst's interventions. On the surface, the patient's fears of being humiliated and the reactive reinforcement of distortions in free association may predominate at this point.

As the treatment progresses and the patient is able to tolerate the realization that part of his fantasies and behavior reflect a problematic exaggeration of his importance and superiority, feelings of shame may replace those of being humiliated and put down. The patient may begin to realize that his efforts to assert his superiority represent attempts to protect himself against the experience of envy of competitors or rivals who represent threats to his assumed greatness. The activation of intense conflicts around envy in the transference, usually at first displaced onto extratransferential objects, may—in the middle of enormous resistances to the acknowledgment of envious feelings toward the analyst—end up dominating the treatment situation. As the patient begins to realize how the unrealistic nature of his grandiose fantasies and aspirations negatively affects his daily life, causing chronic suffering and feelings of failure, shame may become painfully prevalent.

Shame as a normal, quite prevalent early experience is related to the small child's gradual realization that some spontaneous, naive interests, habits, and behaviors—particularly exhibitionistic and self-affirmative behaviors—may be rejected and powerfully suppressed by those whom he loves. This includes the early enjoyment of oral incorporation of “dirty” objects, of anal play and fecal deployment, and, later on, of infantile masturbation, as well as polymorphous sexual impulses. Critique and rejection of these behaviors lead to conflicts between the ideal representation of the self, loved by an ideal object, and a shamefully devalued, criticized self, cognizant of the discrepancies between this new, unexpected reality and the ideal representation of self (Lansky 1994; Wurmser 1981, 2004).

In this regard, shame is an early affect activated in negatively valenced interactions with infantile objects, one that guides powerful efforts to live up to the critical, newly incorporated aspects of the ego ideal. Under ordinary circumstances, shame is gradually replaced by the development of guilt over unacceptable behavior. This includes the painful recognition that one has failed in one's own responsibility in maintaining the relationship with the ego ideal and with ideal objects, as well as the recognition of unacceptable sexual and aggressive impulses that are part of normal ambivalence in relations with significant others. The development of guilt feelings reflects the integration of the prohibitive aspects of the superego with the ego ideal, a reflection of the overall integration of the superego and a key aspect of the integration of the self in the development of normal identity.

Shame normally acquires a particular, specialized function to protect the privacy and secrecy of infantile sexuality, of sexual desire and activity, and the infantile reaction to and replication of the secretive life of the parental couple. This secretive internal sexual life increases the intensity of erotic impulses in the later achievement of an intimate sexual relation with a realistically available object, the erotically exciting "shamelessness" of the intimate sexual encounter (Kernberg 1995).

In the case of the narcissistic personality, however, shame acquires a particularly important function as an expression of the discrepancy between ideal self and real self. Here what evolves is a discrepancy between the pathological grandiose self and the gradual acceptance of emotional reality, the previously denied, projected, and unacceptable aspects of the self geared to protect the totally idealized nature of the pathological grandiose self. Thus, in early and middle stages of psychoanalysis or Transference Focused Psychotherapy (TFP) with narcissistic personalities, shame may become prevalent, gradually replacing feelings of humiliation as an intermediate stage between the paranoid nature of early anxiety, and the beginning of the capacity to tolerate guilt, concern, and depressive anxieties and defenses. Shame, in short, stands between paranoid fears and painful humiliation, on one side, and development of recognition and guilt over one's own aggressive impulses, on the other.

Obviously, given progressive and regressive moments of analytic treatment, these sequences are not that clear in individual cases, and

these affects may appear in combination or in apparently reversed sequences. Their differentiation, however, is helpful in leading to a clearer picture of the nature of working through the pathological grandiose self in the transference, and of the gradual transformation of the grandiose-self/devalued-self relationship into the more specific object relations that characterize the general transference developments of borderline personality organization. At this point, the treatment begins to reveal the history of the patient's internalized object relations, whose conflictual and traumatic nature underlies pressures in the direction of the establishment of a pathological grandiose self in the first place.

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## THE OBJECT-PRESERVING FUNCTION OF SADOMASOCHISM

BY LEE GROSSMAN

*The terms sadism, masochism, and sadomasochism seem to have become increasingly, if loosely, associated with aggression in psychoanalytic discourse. This is due in part to the fact that Freud's changing ideas generated confusion about the relative contributions of libido and aggression. The author reviews Freud's variable usage and offers a clinical vignette to illustrate the importance of noticing how sadomasochism may maintain a tie to the object by controlling it. The author offers a developmental speculation for the role reversibility typical of sadomasochistic manifestations. He closes with a comment on the role of sadomasochistic aims in adult sexual perversion.*

**Keywords:** Sadomasochism, aggression, libido, perversion, object preservation, Freud, development, *fort-da*, sadistic-masochistic role reversibility, mastery, pleasure, Eros, death instinct.

### INTRODUCTION

Psychoanalytic discourse is sometimes hampered by the way that our vocabulary evolves. As our theories develop, terms take on new meanings, but common usage may blur the distinctions. This process is further complicated when we use terms from ordinary language to connote new ideas; often the two (or more) uses persist, and it is not always clear what is being communicated.

One such term is *sadistic*. It has been used to name a perverse sexual practice, a cruel act, an aggressive act or tendency, a destructive act, a

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“component instinct” of libido, an aspect of normal psychosexual development, a character trait, a manifestation of the death instinct, and a turning outward of masochism. In what follows, I would like to review how this multiplicity of uses arose, and to advocate attention to the implication that sadism, masochism, and sadomasochism contain an object-preserving component. My hope is that this will make it easier for us to be sure we are speaking the same language, no matter what our theoretical dialect.

The emphasis I will advocate is based on an equation or definition that many already accept as a matter of course. It is that the aim common to most uses of the term *sadism* is to control another person. Grotstein (1998), for example, sees no need to elaborate when he makes the distinction between “destructiveness (hate) and sadism (control)” (p. 88). On the other hand, even a superficial glance at the literature reveals the prevalence of the conflation of the two ideas. For example, Blos (1991) uses the phrase “destructive sadistic rage” (p. 424) in a case report. Giovacchini (1990) refers to “sadistic destructive impulses” (p. 13). Casoni (2002) refers to “sadistic destructiveness” (p. 157).

In contrast, the summary of a panel report on sadism and masochism (Cooper and Sacks 1991) reported Cooper’s views as follows:

The issue of sadism is still very much unresolved, in Cooper’s view . . . . Sadism carries the traditional connotation of a drive derived from sexuality. This differs from aggression, which arises from different sources and without the implication that it is gratifying in and of itself in some broadened sexual way. The relation between sadism and masochism remains obscure. [p. 225]

Gabbard (2000) wrote about hatred, saying “To hate is to *hold onto an object* in an unforgiving way” (p. 411, italics added). He elaborated, “Hatred binds the patient to the hated object . . . . While rage tries to remove the object, hatred forges an unbreakable bond between object and self” (p. 412). These are all important contributions, but even in this short sampling we see the equation of hate and control (Gabbard), the opposition of aggression and control (Grotstein, Cooper), the opposition of hate and rage (Gabbard), and the equation of sadism and destructiveness (Blos, Giovacchini, Casoni).

Of course, we must always distinguish between sadism as an inferred unconscious motive and sadism as a manifest behavior.<sup>1</sup> I assume that all manifest behaviors obey the principle of multiple function (Waelder 1936). When later on I offer a hypothesis about the role of the sado-masochistic component in sexual perversion, I do not mean to suggest that perversion is “reducible” to sadomasochism. And, when in a clinical example I suggest a sadistic aim in a patient’s behavior toward me, I do not mean to imply that the behavior has no other, nonsadistic aims. In fact, I will argue that often there is clinical utility in trying to tease out the various aims, including the sadistic/controlling, the hateful, and the aggressive, rather than to lump them all together under the term *sadism*.

With this distinction in mind, I think it will be seen that my goal is a modest one, which is to help us attend to what Gabbard (2000) called the *binding function* in sadomasochism. I suggest that we pay more attention to the effort to *maintain an object tie by controlling the object*, in contradistinction to other aims, especially aggressive ones.

In what follows, I will try to show how the clarification I am advocating matters in clinical work. In addition, I will take a brief look at the fluidity that seems to exist between sadistic and masochistic roles in human behavior, and consider a possible developmental explanation. I will end with an observation about the role of sadomasochism so understood, in adult sexual perverse practices. But to begin, I would like to follow how Freud’s thinking about sadism and masochism developed as his theory of instincts changed.

## THE EVOLUTION OF FREUD’S VIEWS ON SADISM AND MASOCHISM

The *Standard Edition* translation of the *Three Essays on the Theory of Sexuality* (1905) provides a convenient condensation of the changes in Freud’s thinking over time. Freud revised the work three times, the last in 1924. As a result, the work is a palimpsest, revealing Freud’s thinking in four different periods.

<sup>1</sup> I think we should also distinguish hate as an affect from our inferences about sadism and masochism, but I will not pursue that point here.

In the original version, Freud provided Krafft-Ebing's definition of sadistic and masochistic *perversion* (that is, behavior) as the active and passive forms of pleasure in humiliation or subjection. It is of note that, at that time, Freud used the word *aggressiveness* to describe a male's desire to subjugate in sexuality. He concluded with an inference of what lay behind the behavior: "Thus sadism would correspond to an *aggressive* component of the sexual instinct which has become independent and exaggerated" (1905, p. 158, italics added). At this stage of Freud's thinking, aggression would have been included among the (nonlibidinal) self-preservative instincts, but it was not accorded anything like equal stature with libido; his usage often seems more along the lines of ordinary language than technical terminology.

Freud was emphatic about the relation between sadistic and masochistic *behavior* in 1905: "The most remarkable feature of this perversion is that its active and passive forms are habitually found to occur together in the same individual . . . . *A sadist is always at the same time a masochist*" (p. 159, italics added). He attributed this pairing of opposites to innate bisexuality (p. 160). In the 1915 revision of this work, he wrote, "It may be doubted at first whether [masochism] can ever occur as a primary phenomenon or whether, on the contrary, it may not invariably arise from a transformation of sadism" (1905, p. 158). A footnote Freud added in 1924 tells us that he had subsequently changed his opinion in favor of the existence of a primary erotogenic masochism (p. 158, footnote 2). I will consider this change later on.

In the 1915 revision of the second of the *Three Essays*, Freud introduced what came to be known as the psychosexual stages of development. In his description of the sadistic-anal phase of development, he wrote:

Here the opposition between the two currents, which runs through all sexual life, is already developed; they cannot yet, however, be described as "masculine" and "feminine," but only as "active" and "passive." The *activity* is put into operation by the instinct for mastery. [p. 198, italics in original]

### *A Digression: The Instinct for Mastery*

The instinct for mastery is, to me, another concept whose ambiguity is hidden in its developmental history. It is used variously to describe

mastery of one's own body—for example, muscular and sphincter control in the anal phase; mastery of others in the (also ambiguous) sense of sadism and masochism; and mastery of the helplessness of traumatic overstimulation in the form of turning passive into active. The sadistic-anal phase, as Freud described it, is an object-related phase: "Both of these currents [i.e., active and passive] have objects . . . . In this phase, therefore, sexual polarity and an *extraneous* object are already observable" (1905, pp. 198-199, italics added).

Thus the mastery in this context is of an external object. So it seems that at this point in Freud's thinking (circa 1915, as it were, between dual instinct theories), mastery—as an aspect of sadism—was understood as a libidinal instinct subject to gratification in an interaction with an object. In his discussion of the *fort-da* game (which I will discuss further in what follows), Freud seems to wrestle with the placement of mastery in instinct theory—in the very publication where he first articulates the death instinct (1920).

But in a very late summary of his ultimate dual instinct theory, Freud (1933a) gives these two examples of the "alloying" of the erotic and destructive instincts:

Thus, for instance, the instinct of self-preservation is certainly of an erotic kind, but it must nevertheless have aggressiveness at its disposal if it is to fulfill its purpose. *So, too, the instinct of love* [N. B.: not "libido"], *when it is directed towards an object, stands in need of some contribution from the instinct for mastery* if it is in any way to obtain possession of that object. [pp. 209-210, italics added]

It would seem that Freud ultimately settled on identifying mastery as a derivative of the destructive instinct, to be alloyed with libido in object love.

### *Aggression, Sadism, and Masochism*

With the formulation of the death instinct in *Beyond the Pleasure Principle* (1920), Freud altered the status of aggression. At this point, he conceived of it as the projection of a biologically determined self-destructive trend, a kind of psychological entropy that opposed the life

instinct (Eros) that manifested itself as libido. He used the concept to explain various apparently self-attacking actions that seemed to run counter to the pleasure principle—among them, masochism.

The notion of a *primary masochism* that does not originate in sadistic urges, tentatively proposed earlier (1920), was taken as a fact in “The Economic Problem of Masochism” (1924). From this point on, at least one form of masochistic behavior was explained as a derivative of the death instinct, and thus independent of libido. In subsequent work, Freud refers to “the *destructive* cathexes belonging to the sadistic phase” (1926, p. 114, *italics added*).

In his last word on the subject, in a summary of the psychosexual stages of development, Freud (1940) wrote:

During [the] oral phase sadistic impulses already occur sporadically along with the appearance of the teeth. Their extent is far greater in the second phase, which we describe as the sadistic-anal one, because satisfaction is then sought in aggression and in the excretory function. Our justification for including aggressive urges under the libido is based on the view that sadism is an instinctual fusion of purely libidinal and purely destructive urges, a fusion which thenceforward persists uninterruptedly. [p. 154]

In a footnote to that passage, he added:

The question arises whether the satisfaction of purely destructive instinctual impulses can be felt as pleasure, whether pure destructiveness without any libidinal admixture occurs. Satisfaction of the death instinct remaining in the ego seems not to produce feelings of pleasure, though masochism represents a fusion which is entirely analogous to sadism. [p. 154n]

In these two statements, Freud has shifted from a description of underlying instinctual derivatives (e.g., primary masochism) to a discussion of manifest *behavior* as a fusion of instincts. I believe this double use of the same words has contributed to the conceptual ambiguity that persists today.

For my thesis, the importance of Freud’s reformulation of instinct theory has to do with the elevation of the role of aggression as on a

par with, and with the opposite aim of, libido. It does not matter, for my present purposes, whether one conceives of an externalization of the death instinct or of a primary aggressive drive. Once aggression is granted a major role, Freud reconceptualizes various clinical presentations in terms of the fusion (or regressive de-fusion) of aggression and libido. Freud's mature formulation of sadism and masochism incorporates these ideas as follows:

Our hypothesis is that there are two essentially different classes of instincts: the sexual instincts, understood in the widest sense—Eros, if you prefer that name—and the aggressive instincts, whose aim is destruction . . . . In sadism and in masochism we have before us two excellent examples of a mixture of the two classes of instinct . . . . We are led to the view that masochism is older than sadism, and that sadism is the destructive instinct directed outwards, thus acquiring the characteristic of aggressiveness. [1933b, pp. 103-105]

Here I think Freud continues to blur the distinction between sadism and masochism as *component instincts* (1905) and as manifest actions. Furthermore, he has concluded (unfortunately, in my view) that both are consequences of the destructive instinct.

In thus reconceiving sadism and masochism, Freud seems also to have abandoned the clinical observation he made in 1905: that sadism and masochism seem invariably to be paired within the same individual. His view of sadism and masochism as active and passive forms of the same instinct seems also to be mitigated by seeing one (masochism) as "older" than the other.

Freud's most-often-cited reason for writing *Beyond the Pleasure Principle* (1920) was that he had observed (in sexual masochism, in the compulsion to repeat, and in other phenomena) actions that seemed to be motivated by something beyond or "more primitive than [the pleasure principle] and independent of it" (p. 17). But it is worth recalling that he also had to deal with the inadequacy of the pleasure principle as formulated (decreased excitation, or some complex ratio or rate of increasing and decreasing excitation) to describe what is ultimately pleasurable (pp. 7-10). What remains of the tension reduction principle is subsumed under the death instinct (the "Nirvana principle," p. 56).

In his final reformulation, Freud (1940) wrote:

After long hesitations and vacillations we have decided to assume the existence of only two basic instincts, *Eros* and *the destructive instinct* . . . The aim of the first of these basic instincts is to establish ever greater unities and to preserve them thus—in short, to bind together; the aim of the second is, on the contrary, to undo connections and so to destroy things. In the case of the destructive instinct we may suppose that its final aim is to lead what is living into an inorganic state. For this reason we also call it the *death instinct*. [p. 148, italics in original]

Freud's formulation of Eros addresses the issue of what drives growth and change. In the original tension-reduction model of the pleasure principle, it is hard to see why life exists at all, and even harder to see how change is possible. The old model seems to imply that everything strives for death (zero tension) and dissolution (maximum entropy).

With the reformulation of Eros, Freud introduces a life force that counters the forces of inertia and entropy. It gives a name for the tendency in organisms to grow in the direction of more complex organization, heretofore ignored in the theory. It is in this reconception of libido as the psychological expression of Eros that human development and change find motivation (Loewald 1966).

## THE DEVELOPMENTAL ASSUMPTIONS OF THE PRESENT PAPER

Up to this point, I have been using Freud's language, pre- and post-structural, pre- and post-death instinct. I have focused exclusively on the "instinctual" and largely ignored the rest of childhood development because that is the way Freud first recognized the universality of sadism in young children. But now, as I begin to turn to my own hypotheses, I would like to spell out the developmental assumptions on which my subsequent ideas are based.

I begin with the idea that derivatives of bodily pleasure or avoidance of pain, and derivatives of aggression, are motivators of adult human beings. I assume that, at some point concomitant with self-object differentiation, object seeking and pleasure seeking become overlapping goals.

From that point on, one of the ways to distinguish object-directed aims is on the basis of whether, in Freud's words, the aim is to bind together or to break a tie. Whatever names we attach to these classes of aims (for Freud, Eros and the death instinct), they work in opposite directions.

For purposes of this paper, it does not matter if aggression is understood as a manifestation of the death drive (Freud after 1920, the Kleinians) or if it is seen as reactive to early frustration (the British Independent group, the relational approaches) or to narcissistic injury (self psychology); nor does it matter if the "drives" are biological givens (Freud) or if they are organized out of an earlier undifferentiated state (Loewald). Nor does it matter for our present purposes if we see object seeking as a derivative of bodily pleasure, as Freud did, or as a fundamental tendency—for example, as Fairbairn (1963) did. By no means am I saying that these distinctions are unimportant; I am saying that they are beside the point of this discussion.

I accept Freud's observation that, at some point in early childhood development within what Piaget called the *preoperational stage* (Sandler 1975), sadism appears naturally as one such derivative of pleasure as an object-related aim. By way of contrast, note that the "ruthlessness" described by Winnicott (1965, pp. 22-23) in the younger infant does not take account of the external object.

I assume that the capacity for full object relations, i.e., the appreciation of another as an independent self, develops gradually from an earlier state in which others exist only as means to, or obstacles to, a subject-centered end. Again, for my immediate purposes, it does not matter if this is understood as preceded by a primary undifferentiated state, an "all-id" autoerotic state, a (part-) object-seeking state, or a "core self" (Stern 1985, p. 69) present in the earliest months of life.

I am being as spare as I can in describing these assumptions. My hope is that some analysts will recognize these ideas as compatible with their own, and that those who do not share these assumptions will be clear on where we differ.

### FORT-DA REVISITED

At this point, I would like to revisit one of Freud's observations. Along with the formulation of the death instinct, *Beyond the Pleasure Principle*

(1920) included an observation of a game played by a boy of one and a half. The boy had a spool attached to a piece of string. He would throw the spool over the edge of his cot, saying *fort* ("gone") as he did so. Then he would pull it back by the string with a joyful *da* ("there"). Freud connected the game to the mother's temporary absence. Since the mother's departure was clearly not pleasurable, Freud raised the question of how this game could be motivated by the pleasure principle. But by the end of his discussion, Freud has made the case that the game is indeed so motivated:

[When his mother left, the child] was in a *passive* situation—he was overpowered by the experience; but, by repeating it, unpleasurable though it was, as a game, he took on an *active* part. These efforts might be put down to an instinct for mastery that was acting independently of whether the memory was in itself pleasurable or not. But still another interpretation may be attempted. Throwing away the object so that it was "gone" might satisfy an impulse of the child's, which was suppressed in his actual life, to revenge himself on his mother for going away from him. In that case it would have a defiant meaning: "All right, then, go away! I don't need you. I'm sending you away myself."<sup>2</sup> . . . We are therefore left in doubt as to whether the impulse to work over in the mind some overpowering experience so as to make oneself master of it can find expression as a primary event, and independently of the pleasure principle. [1920, p. 16]

Here Freud finds that "mastery," in the form of turning passive into active, may be a pleasurable experience, in the form of gratifying a vengeful wish.

I would like to offer an additional interpretation of the nature of the pleasure in the *fort-da* game: I would like to call attention to the function of the string. It makes sense to me that the child takes a vengeful pleasure in his activity, and that there may also be a satisfaction of an aggressive, destructive urge toward the mother. But what strikes me as an important neglected element is the representation of the mother as under the control of the child—the spool is tied to him. Many will recognize

<sup>2</sup> This interpretation is consistent with Cooper's (1988) formulation of the function of masochism as protecting the infant from the narcissistic blow of facing his helplessness.

the similarity to Winnicott's (1953) transitional object—"the first 'not-me' possession" (p. 89). If the string represents the tie to the mother, then the child's connection to the mother is preserved and enjoyed on his terms. Then the child's (adultified) message, besides being vengeful and defiant, might be: "I am not at the mercy of your whims. In fact, I am the one who determines when you come and go. I can dictate your presence on my schedule."

## AGGRESSION AND SADISM: A PROPOSAL

What I have just described, I think, is a clinically useful way to think about sadism, in contrast to aggression. As Freud pointed out, the two aims typically occur in varying admixtures in a given situation (i.e., in manifest behavior); but it is often important to distinguish what is sadistic (in service of maintaining an object tie) from what is aggressive (in service of destroying one) in a clinical moment, so that one may consider the opposing contributions of each. Furthermore, theoretically conflating sadism and aggression may lead to problematic and erroneous conclusions—if, for example, a patient's effort to control the analyst and the analytic situation, in order to preserve them, is interpreted *only* as his envy-driven wish to destroy the analysis or the analyst.

From this perspective, outwardly directed "mastery" seems intimately related to sadism as connectedness. The maintenance of a master–slave relationship (or some derivative of it) is precisely the kind of tie to an object that is defined as sadism. A master, in order to be a master, must control a slave. In order to do so, he must preserve the relationship. A master who kills his slave, or a torturer who kills his subject, has failed; he has lost his relationship and his role.

## SADOMASOCHISM AND REVERSIBILITY: A DEVELOPMENTAL SPECULATION

I would like to return to two of Freud's observations of sadism and masochism already cited from the *Three Essays*: first, that the two trends occur together in the same individual—"A sadist is always at the same time a masochist" (1905, p. 159). Second, concomitant with the devel-

opment of sadism, a polarity between activity and passivity is established, and the role of an “extraneous object” of the subject’s sadism and masochism is in play (pp. 198-199; passage added in 1915). We may be able to understand these observations and draw some further tentative conclusions if we briefly consider the course of development of relations to that “extraneous object.”

If we think of a developmental line of self and object definition as emerging from an initial undifferentiated state,<sup>3</sup> and ultimately arriving at a state in which other people are appreciated as fully autonomous beings who exist even when absent, we imply a transitional state. As the mother and infant begin to emerge as separate, I would speculate that the mother is at first experienced as a “me-possession”—that is to say, as something intermediate between the child *being* (at one with, identified with) her and *having* her, perhaps as if she were a part of his body that he could look at.

As the mother moves further toward separateness, she becomes more of a “not-me” *possession* (Winnicott 1953, italics added), as if she were under the control of the child, as in the *fort-da* game. The gradualness or piecemeal process of self-object differentiation suggests an intermediate, unstable equilibrium, and possibly an oscillation, between identification (being) and object relating (having). Such a state would be marked by efforts to individuate, accompanied by fears of losing the object and feeling the need to merge with the mother, accompanied by threats of losing the emerging self (Loewald 1951).

These observations suggest a possible explanation of the phenomenon of the pairing of sadism and masochism in the service of object relations that Freud observed in 1905. The state of ego development (especially the object-relating functions) in the beginnings of separation and individuation creates the conditions not only for the well-known power struggles, but also for psychic role reversibility. The child begins to recognize objects, but the realization of their independence is threat-

<sup>3</sup> I find Loewald’s (1951) developmental ideas compelling, but the only developmental assumption that I think would be incompatible with the speculation I am advancing is one that presumes self and object constancy to be present from birth. Even Stern’s (1985) observations include the notion of an alteration of the sense of the relation between self and reality that unfolds over time.

ening prior to the establishment of object constancy (Mahler, Pine, and Bergman 1975) because he is not yet equipped to trust what he cannot control. Thus relations at this stage are marked by efforts to control the object as a possession, and by the perception of the object as attempting to control the self. But the differentiation of self and object is still fluid; once that is consolidated, the task of controlling the object is replaced by the challenge of relating to it in its independence. Until then, that fluidity allows the child to move psychically between the roles of controller and controlled, i.e., to imagine and live out a kind of relating, for which the script is the same—sadomasochism—regardless of the role being played at a given moment.

Loewald (1973) proposed that internalizing processes are the basis of psychic structure formation, including self and object differentiation. This view suggests that the movement between sadistic and masochistic roles originates in the alternation of projection and introjection during this period of development. Introjection and projection tentatively (and reversibly) assign previously undifferentiated states as belonging to one-self (being) or to one's object (having).

The key to the above situation is that I am describing sadomasochistic relating, in the sense of controlling/being controlled, as a developmentally appropriate mode of relating for the child on the way to full object relations. Freud (1905) suggested that being told by a parent to control one's sphincters may be the first instance of an individual's having to renounce an instinct for social reasons (p. 187n). At first, this can make no sense to the child, except as a submission to the whims of a loved object (Anthony 1957). The child may then comply out of love or refuse in defiance; in either case, the child's working definition of love—his judgment about what happens between two people that keeps them together—will be a dyad of dominance and submission. In this context, we might consider that the arbitrary "no" characteristic of toddlers (often in an imitation of the parent's voice) represents an internalized version of a parental prerogative—in other words, part of an alternation between seeing oneself as the parent and as the child. Thus the awareness of generational differences at this stage may be mapped onto the reversible distinction between activity and passivity, just as Freud suggested was the case for sexual differences.

Spitz (1958) describes the origin of the “period of stubbornness” (p. 378) as a consequence of handling a conflict between the infant (age fifteen months, in his study) and a frustrating parent, which is internalized via an “identification with the *aggressor*” (p. 383, italics added). But he also notes that the identification is motivated by the libidinal attachment to the parent. It might be more accurate to propose an “identification with the controller,” which leaves room for the child’s interpretation of the parent’s frustrating (controlling) actions as (sadistic) signs of love.<sup>4</sup>

### *What Does This Distinction Look Like?*

We expect that, in the course of normal development, the child will come to feel relatively safe with the independence of the object, although as we know, this is far from always the case. As an extreme illustration, I might mention a profoundly isolated psychotic woman with whom I worked for over sixteen years.<sup>5</sup> As our time together progressed, she became more and more controlling of me and what I was allowed to say, until I was restricted to five words: yes, no, I don’t know. If I departed even in small ways from that script, she would feel “raped.”

I mention this example to illustrate an extreme of what sadomasochistic relating might look like. I am not making a point about treatment. There were, no doubt, multiple functions to the interaction, some of which may be obvious, some not. I do not even presume to compare the relative weights of the various possible functions. The inference I want to draw is based on one feature of the case, namely, that it went on for *sixteen years*, during much of which we both felt tortured and we both felt like torturers. The sadism of her rigid, controlling script for the interaction, the masochism of her experience of being tortured and raped, and the fluidity of the roles of controller/controlled effectively *bound us together*.

In this instance, I had no shortage of murderous feelings toward the patient, along with other reactions. I think most of us would entertain the idea that those feelings signaled something about the patient,

<sup>4</sup> For examples of later pathological consequences of a child’s interpreting parental sadism as love, see Berliner (1958) and Renik (1991).

<sup>5</sup> For a fuller account of my work with this woman, see Grossman (2014).

as well as about me. But if one assumes that my murderous feeling is a simple transcription of the patient's experience, one might be prone to overlook what I am now calling the *sadomasochistic* component to the interaction, namely, the patient's effort to maintain the attachment to me by controlling me. In this instance, it was also true that the murderous wishes were my own; I even found them comforting. In any case, I found it useful to separate the patient's (and my) *aggression*, conceived as a wish to rupture the relationship, from what I am calling the *sadistic aim*, to maintain the connection by controlling it. I believe they were both present but worked in opposite directions.

### A LESS EXTREME CLINICAL EXAMPLE

The case I have just described is not the kind of problem one typically confronts in an analytic practice. A commoner problem is illustrated in my work with Geraldo, a lawyer who came to see me because of problems in his marriage, tension at work, and difficulty making decisions. Geraldo described how his wife nagged him constantly about a "promise" he had made her when they were married: that after he got established at his firm, he would transfer to their East Coast office, which would be nearer to her family. The quotes around "promise" are to indicate his qualification: "Yes, I said it, but it wasn't really a promise."

At the time we began, he was in a position to transfer but could not make up his mind. It did not seem like a bad idea; he saw pros and cons; he just had not decided. The tension became apparent when his wife started pressing the issue: the more she wanted to go, the more he felt unable to decide. He blamed the pressure she put on him for his paralysis, and implied that if she would just let up, he would be able to make a choice.

It was a predictable irony that, as an initial consultation extended into an ongoing treatment and then into an analysis, the analysis became a major factor in the conflict between Geraldo and his wife. At the beginning, I tried to show him that, by starting analysis, he was making a decision to stay in town. He seemed to understand that, but quickly turned it into a situation in which, since the analysis was undertaken to help him make a decision, once he did so he would leave. As one might imagine,

the analysis itself then took on a one-foot-in, one-foot-out quality. He soon began to see me as having an overridingly selfish interest in his decision, although the form of the selfishness he assigned me oscillated between my wanting to force him to stay and my wanting to kick him out.

As time went on, Geraldo made it clear that he did not find me at all helpful. When I said something, he would typically respond in one of two ways: either he would parse my words microscopically to find the flaw in them, or he would say, "I don't disagree," which conveyed the notion that what I said was too obvious to address—and, incidentally, was somehow different from agreeing with me. At times his view of me, ranging from being useless to causing him pain, would be phrased as a threat to ruin my reputation—followed by the words "No, I'm kidding!" I was not laughing.

After the analysis had gone on for some time, it became clear that Geraldo's state of being "on the verge" of a decision—e.g., giving up his unhelpful analyst and moving to the East Coast—was not temporary or transitional; in fact, he lived "on the verge": uncommitted, tormenting his wife and analyst as he felt tormented by us.

At one point early in the analysis, I made the observation that he almost invariably arrived five minutes after the start of our time. He referred to it as a typical problem of his, of being late; he gets caught up in whatever he is doing and does not want to interrupt himself to leave for an appointment. I commented that calling it being "late" did not seem quite right. After all, he always arrived at exactly the same time; in that sense, he was in fact very punctual. He realized that he did not like to spend time in the waiting room; he did not even like the phrase *waiting room*. "I don't like to wait on people." I noted the phrase "wait on," rather than "wait for," and asked about it. He thought of waiters "servicing" people. "Servicing," I said; "different from serving?" He got uncomfortable, acknowledged he had an "icky" thought, but then got caught up in criticizing my tone of voice, which he felt was accusing him of something.

It was some time later—in his own time—that Geraldo got around to acknowledging the "icky" homosexual act he had pictured. It is important to note that I heard something in my tone of voice at the same time he did. I thought I sounded a little like a lawyer conducting a cross-

examination. It seemed that we were enacting the adversarial approach to relationship that I was trying to address. He then wanted to argue whether the “icky” thought was actually his or an artifact of the analysis; that is, he wanted to insist that it was me forcing something into him.

Once I heard my own controlling tone, I caught on to the longing for me that was expressed in disguised fashion in our debates—or, as we later came to think of them, our wrestling matches. I came to think of this sort of interaction as the kind of intimacy with which he was most comfortable.

I hope this description is adequate to suggest how, in both his marriage and in his analytic relationship, Geraldo enacted (and drew us into enactments of) scenarios about being controlled that he used to control the other. In his mind, the only safe way to love people was to bind them to him, to control them in order to be assured of being loved back. The sadomasochistic component was plain, and there was no doubt that aggression also played a role in Geraldo’s actions. Yet I think it would have been a mistake in this case to think of aggression as the only motivating force, that is, to focus on the destructive aims of his behavior. In my view, his sadomasochism was a desperate effort to preserve something that he imagined to be fragile.<sup>6</sup>

As I put it together, Geraldo’s sadism served to reassure him that he could control both himself and his love object. It helped him maintain what he felt was an optimal distance from me—not too close, but never unavailable. Once I noticed my own participation in the power struggle, I was able to see that he was more at home with his aggression—that is, it was more consciously available and therefore subject to his will—than he was with his affectionate and/or sexual longings. When at a later date we did take up his aggression, it was his use of it as a counter to the “icky” feelings that was more prominent.

I offer this very ordinary example to illustrate my thinking, not to attempt to prove anything. I think it is useful to distinguish the sadomasochistic from the aggressive contribution to manifest behavior, and also to notice how one may be used to counteract the other. If we conflate

<sup>6</sup> It is beyond the scope of this paper to explore why Geraldo thought relationships, ours included, were fragile. Suffice it to say that he was convinced since childhood that he was unlovable.

the libidinal (object-preserving) and the aggressive (object-destroying) components under the heading of sadism, it is easier to miss one or the other.

## SADOMASOCHISM AND PERVERSION

I would like to turn briefly to a consideration of how the differentiation between sadomasochism and aggression may add something to our understanding of sexual perversion. I wish to make two things clear at the outset: first, I want to avoid an almost inevitable confusion. I am not talking about sadomasochism as a perverse practice, but rather the extent to which sadomasochism is common to all forms of sexual perversion. The discussion would apply equally to, say, fetishism or obligatory transvestism. Second, I have no intention of reviewing the extensive and ever-growing literature on the subject of perversion, nor do I imply any social judgment about elective sexual practices. What I am talking about is what we might call non-elective sexual practices.

If we are to retain the term *sexual perversion* at all, the one indispensable part of its definition should be its compulsive, ritualistic nature. The sex lives of some people are organized around a specific, obligatory, predetermined script, an assignment of roles from which neither party can depart. In order for this to be the case, the subject has to control his<sup>7</sup> partner, or at least to convince himself that he is controlling his partner. In other words, sadomasochism as I am using the term is an element common to all perverse sexuality.

It follows that sexual perversion is another subject for which understanding depends on how one conceives of the contributions of the erotic and the aggressive in sadomasochism. For example, Stoller (1974) wrote, "the term 'perversion' implies consciously preferred, habitual sexual fantasy or acts at whose root lies hostility." The acts themselves are not pathognomonic; rather, "perversion lies in the meaning of the act, wherein is hatred and a need to damage, not love, one's partner . . . . The study of perversion is the study of hostility more than libido" (pp. 428-

<sup>7</sup> I choose the male pronoun here because the best-understood perverse practices seem to be much more prevalent among men than among women; but the argument I am advancing does not require a gender distinction.

429). He concludes his article by advocating more analytic study of perversions “for clues [to] how aggression (activity) is converted into hostility (hatred and violence)” (p. 433).

My impression is that Stoller is mixing his instinctual metaphors. “Hostility” and “hatred,” in Stoller’s formulation, are derivatives of aggression—that is, they are expressions of the wish to destroy. But if instead we entertain the possibility that perverse practices are grounded in the sadomasochistic need to *control* the object, then we are in a position to consider a perversion as an act of love as understood by the actor—controlling love or damaging love, dictatorial love or punishing love, but love, in which the partner is constrained from opting out.

In the clinical situation, it is typically the case that the perversion will be enacted in the transference. If, as Stoller suggests, hatred is prominent, and if it is a derivative of aggression, then one would expect that the patient will be attacking the analyst in some form or other. I have not confirmed that in my work, except in the form of the patient’s attempts to belittle or one-up the analyst, to dictate the terms of engagement. Of course, every case is different, but in general, I have not found that focusing on the presumed attack has been especially helpful. But when I have been able to see the object-preserving aim in the patient’s actions, in and out of the transference, I have found the anxiety underlying it to be more accessible. I hope other analysts might compare their own experiences and see if they come to similar conclusions.

## SUMMARY AND CONCLUDING REMARKS

As we have seen, Freud’s thinking about sadism and masochism changed over time, largely but not entirely in parallel with the evolution of his instinct theory. The situation has been further complicated by Freud’s somewhat inconsistent use of some key ideas—notably, aggression and mastery. My impression has been that clinical practice has not taken sufficient account of the distinction between what belongs to conjoining and what belongs to destroying in sadomasochistic relations. I have tried to show that a clarification of that distinction, and in particular the recognition of the effort to bind oneself to an object via sadomasochistic

control, as opposed to the effort to destroy an object via aggression, is often clinically important.

I have argued that recognizing the inherently dual nature of sadism and masochism—the reversibility of roles—expands our understanding of the clinical situation, including the transference. I have speculated that the fluidity of roles may be a pathological persistence or regressive reemergence of the uncompleted developmental task of moving from internalizing to object relating. Role reversibility may represent the oscillation between being (identifying with) one's object and having it.

I have offered the suggestion that sadomasochism, as a mode of relating appropriate to the developmental challenges faced in toddlerhood, is an element common to all sexual perversion, and explains the rigidity of action (the "script") in perverse practices. It is a way to deny the threatening experience of dealing with a desired object who is independent of the subject's will.

I have had the impression that the object-preserving meaning of sadomasochistic relating has been relatively neglected lately, in favor of emphasizing its destructive aims. Nonetheless, it has not been my intention to argue that one should always take up sadomasochistic *behavior* in terms of its inferred erotic meaning—*instead of*, or even *before*, taking up aggressive derivatives. That is a clinical decision that can only be made in context. My central point is that, if one does not consider the libidinal meaning of sadism and its components separately from aggression, then one risks missing powerful motives shaping the patient's life. People treat other people with love, hate, fear, and indifference; as analysts, we cannot afford to ignore any of those trends.

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## INSIGHT AGONISTES: A READING OF SOPHOCLES'S *OEDIPUS THE KING*

BY EUGENE J. MAHON

*In this reading of Sophocles's Oedipus the King, the author suggests that insight can be thought of as the main protagonist of the tragedy. He personifies this depiction of insight, calling it Insight Agonistes, as if it were the sole conflicted character on the stage, albeit masquerading at times as several other characters, including gods, sphinxes, and oracles. This psychoanalytic reading of the text lends itself to an analogy between psychoanalytic process and Sophocles's tragic hero. The author views insight as always transgressing against, always at war with a conservative, societal, or intrapsychic chorus of structured elements. A clinical vignette is presented to illustrate this view of insight.*

**Keywords:** Insight, defenses, Sophocles, prophecy, *Oedipus the King*, Jocasta, child development, oedipal complex, anxiety, truth, Greek drama, psychoanalytic process, repression.

Freud's reading of Sophocles's *Oedipus the King* (5th century BC, a) led to his coining the concept of the Oedipus complex, a remarkable insight that changed the way people have thought about the human mind and its psychological development ever since. Like many revolutionary ideas, it has been embraced and rejected, and in an age of nonreaders, there is a danger that both Sophocles and Freud will be scorned or ignored, rather than studied and evaluated scientifically, philosophically,

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aesthetically. Sophocles's play paraded astonishing insights on the stage in Greece almost 3,000 years ago, just as psychoanalytic process has paraded the terror of its insights on the stages of consulting rooms since the talking cure began to take hold a little over a hundred years ago.

It would be a shame if Freud's remarkable insights into Sophocles's masterpiece blinded the reader to just how skillfully this mirror house of ironies is crafted. It is for that reason that I begin with a close reading of Sophocles's text, before attempting an analogy between what Sophocles wrought and what Freud and subsequent psychoanalytic scholarship made out of it many years later. I have entitled this paper *Insight Agonistes*, since insight explored on the one hand and disavowed on the other seems to whipsaw audience and reader alike, as the hubris of the hero leads him inexorably toward the doom of his enlightenment.

It is a fascinating exercise in fantasy to imagine the original audience in ancient Greece, immersed in the irony of knowing the Oedipus myth ahead of time and therefore Oedipus's fate, while the characters on stage are the only ones not in on the secret! *Oedipus the King* is the reverse of a whodunit: everyone in the theater knows whodunit except the characters on stage. There is one extraordinary aesthetic difference of course: your average whodunit, after the mystery is revealed, seems a shallow trick cleverly packaged; *Oedipus the King*, on the other hand, goes on revealing its tragic insights century after century to generations of astonished, enlightened readers and theatergoers.

I will describe the play in some detail and withhold most of my psychoanalytic commentary until after the description.

## *OEDIPUS THE KING*

The play opens with Oedipus having solved the riddle of the sphinx; he is therefore elected in triumph to rule Thebes. He has married Jocasta, whose husband, Laius, was killed under mysterious circumstances. The killer has not been apprehended.

Oedipus has a crisis on his hands: the fertile lands of Thebes are barren, as are its women, and the gods will not restore crops or wombs to their healthy status until the crime has been solved and justice has been done. Oedipus, whose genius unraveled the sphinx's riddle, is confounded by this new dilemma, whose deconstruction will unrelentingly

lead to his own tragic downfall. Dramatic irony insists that he remain in the dark until the enlightenment of the play's terrifying denouement.

If the irony of insight is the topic being explored on stage and throughout this paper, there is offstage irony, so to speak, as well—in the riddle of the sphinx itself. That Oedipus should unpack this enigma only to be ensnared in a more tragic one—namely, the enactment of his own Oedipus complex—is an irony that Freudian explication has rendered even more layered and overdetermined than the original Sophoclean insight itself. But the irony of the riddle is on stage with Oedipus as the play opens.

The riddle itself, though not spelled out, was surely known to every member of the audience. It reflects a developmental, philosophical, and even existential concern that is quite profound. "What begins on all fours, then rises up on two feet, but ends on three?" This genetic depiction refers to a man's development from an infant (a dependent creature who, before the acquisition of upright locomotion, must crawl on all fours) to a child and then an adult (who walks upright, standing tall on his two pillars of locomotion), only to be rendered feeble again in old age, when he must get around with the assistance of a cane—the third leg in the arresting imagery of the riddle.

That the Greeks should encase this profound developmental, almost Beckettian sketch of human existence in the riddling sadism of a nightmarish, devouring sphinx is a mystery unto itself. In Greek tradition, the sphinx has the haunches of a lion, the wings of a great bird, and the face of a woman. Those who cannot answer the implicit question of the riddle are killed and eaten by this ravenous monster. From a psychoanalytic point of view, the metaphor of the sphinx suggests a regression from differentiated, civilized identity to undifferentiated, polymorphous orality—a flight from the guilt and castration anxiety of the Oedipus complex into primitive regressive states. The riddle is a kind of compressed tragedy written years before Sophocles's play by anonymous authors who knew a lot about life, conflict, irony, and in their own way bequeathed to Sophocles the sense of the riddle that would inform his great tragedy.<sup>1</sup>

<sup>1</sup> It is impossible for me to believe that Sophocles was unaware of the intrapsychic implications of his play—or that any writer, for that matter, is not to some extent aware of the unconscious affects that spawn the words he or she crafts so inspirationally.

If we imagine insight as the true protagonist of the tragedy, in flight from itself, the first clash between Oedipus and Tiresias, the blind seer whom Oedipus has summoned, illustrates the conflict dramatically and is a masterpiece of coiled irony. Furthermore, if we consider Tiresias and Oedipus to be two sides of one conflicted, insightful mind—the contretemps between Tiresias, who knows the truth, and Oedipus, who disavows it—we see an uncanny description of insight at war with itself!

Tiresias, who knows the awful truth he has come to deliver so reluctantly, begins: “Alas, how dreadful to have wisdom where it profit not the wise. Aye, I knew this well but let it slip out of mind; else would I never have come here” (p. 84). This is a most poignant parapraxis, indeed: Tiresias suggesting that he knows his knowledge of the truth will not profit either messenger or recipient. In fact, he had to repress this knowledge or he could never have come to see Oedipus at all.

Sophocles is here addressing a countertransference reaction in the great seer, an unconscious wish to be unburdened of the enlightening truth to which he must reluctantly bear witness. Is there a psychoanalyst who has not often struggled with a similar countertransference issue? With the first few strokes of his “quill,” Sophocles has already introduced the torments of insight and the shattering truths to which it is privy. Denial, disavowal, and the dynamics of parapraxis are depicted with great dramatic subtlety. Their defensive nature seems obvious.

But Oedipus misconstrues Tiresias’s hesitation to deliver his prophetic information that augurs such tragedy for the hero. He assumes that Tiresias’s wish to go away in silence is an affront to the state, which he should be assisting with his knowledge rather than refusing to help out. He accuses Tiresias of being in league with Creon—Jocasta’s brother, and therefore third in line for the throne—against him. He even denies that Tiresias is a seer at all: it was Oedipus, after all, who un-riddled the Sphinx’s baffling mystery and saved Thebes, not Tiresias. In Oedipus’s own words:

There was need of a seer’s skill, and none such were you found to have, either by help of birds or as known from any god. No, I came, I, Oedipus the ignorant, and her [the sphinx] made mute when I had seized the answer by my wit, untaught of birds. [p. 86]

After this diatribe against Tiresias, Oedipus becomes more angry, and his anger has an element of paranoia in it. He says: "And it is I whom you are trying to oust, thinking to stand close to Creon's throne" (p. 86).

The chorus then tries to calm down both men: "To our thinking, both this man's words and yours, Oedipus, have been said in anger. Not for such words is our need, but to seek how we will best discharge the mandates of the god" (p. 87). But Tiresias will not be calmed or silenced: "And I tell you, since you have taunted me even with blindness, that you have sight but see not in what misery you are; nor where you live, nor with whom. Do you not know what stock you are?" (p. 87).

Oedipus can take no more. He rages: "Are these taunts to be borne from *him*? Hence, take you! Hence this instance! Back! Away, depart from these doors" (p. 87, *italics in original*). The following dialogue ensues:

TIRESIAS: I would never have come, not I, if you had not called me.

OEDIPUS: I did not know that you were about to speak folly; else it would have been long before I sent for you to my house.

TIRESIAS: Such am I, as you think, a fool; but for the parents who begot you, sane. [p. 87]

The mention of parents seems to capture Oedipus's curiosity, and he detains the seer he was dismissing only a moment earlier with further questioning: "What parents? Stay . . . and who of men is my sire?" (p. 87). He seems to have a doubt in his mind as to the identity of his true parents—a first glimmer of insight, perhaps, into his doomed lineage. Sensing this vulnerability, Tiresias delivers the coup de grâce: "This day shall show your birth and shall bring your ruin" (p. 87).

Oedipus tries to recover by accusing Tiresias of double talk: "What riddles, what dark words you always speak" (p. 88). But Tiresias counter-punches with even deeper sarcasm: "Nay, are you not skilled to unravel dark speech?" (p. 87). Oedipus attempts to recover by accusing Tiresias of criticizing him for his great skill in un-riddling the Sphinx's dark speech: "Make that my reproach in which you find me great" (p. 88).

Tiresias, not to be outdone, shoots back: "Yet it was just that fortune that undid you" (p. 88). Oedipus, proud of his achievement of saving Thebes from the devouring sphinx, will not be diminished: "If I delivered this town, I care not" (p. 88).

Tiresias orders his boy to lead him away, but not before delivering the knockout punch. He tells Oedipus that Laius's murderer is a Theban:

A blind man, he who now has sight, a beggar who now is rich, he shall make his way to a strange land, feeling the ground before him with his staff. And he shall be found at once brother and father of the children with whom he consorts; son and husband of the woman who bore him; heir to his father's bed, shedder of his father's blood. [p. 88]

After Tiresias leaves, Creon enters, complaining to the chorus that he has been wrongfully accused by Oedipus of consorting with Tiresias against his king. At first, the chorus seeks to calm Creon, saying that Oedipus's taunts against him "came under stress, perhaps, of anger, rather than from the purpose of the heart" (p. 89). Oedipus enters and immediately lashes out at Creon: "You there, how could you come here . . . you the proved assassin of its master, the palpable robber of its crown?" (pp. 89-90).

The two men engage in rapid-fire dissent. Oedipus asks Creon how long since Laius was killed, and when he receives the answer—"The count of years would run far into the past" (p. 90)—he wonders aloud why Tiresias did not speak up at that point, after they had searched for the killer and learned nothing. Creon responds, "I do not know; where I lack light it is my wont to be silent" (p. 90).

Oedipus will not be deterred. He insults Creon with a subtle innuendo: "So much at least you know and could declare with light enough" (p. 91), to which Creon retorts: "What is that? If I know it I will not deny" (p. 91).

Oedipus insists that, if Tiresias had not conferred ahead of time with Creon, "he would never have named *my* slaying of Laius" (p. 91, italics in original). Creon denies the charge and tries to convince Oedipus that he has no interest in the crown, given that he is third in line for it (after Jocasta), and he already has the people's goodwill—all the benefits of

power without its headaches. "Now, every man has a greeting for me; now, those who have a suit to you crave speech with me, since that is all their hope of success" (p. 91), he says, and then advises Oedipus to consult the oracle once more. And if the oracle implicates Creon in any way, or suggests that he, Creon, was "in consort with the soothsayer," Oedipus should "take and slay me, by the sentence not of one mouth but of two—my own no less than yours. But do not make me guilty in a corner, on unproved surmise" (p. 91).

The chorus supports Creon's restraint and wisdom, but Oedipus's paranoia cannot be silenced: "When the stealthy plotter is moving on me in quick sort, I too must be quick with my counterplot" (p. 92). The two men continue to cross swords (figuratively), with Oedipus insisting that Creon must die! Jocasta, alarmed by the din, enters and tries to calm them. Oedipus, somewhat mollified by Jocasta's and the chorus's pleading, agrees to spare Creon and let him go, but not to stop hating him!

Creon captures Oedipus's character with bitter words of his own as he storms out: "Sullen in yielding you show yourself, even as you are vehement in excesses of wrath. Such natures are justly sorest for themselves to hear" (p. 93). Here Sophocles seems to suggest that character is fate, condemning the self to its neurotic miseries.

Creon exits with these most prophetic words reverberating in the air. Oedipus's insights at this juncture in the play seem to be clouded by rage and its projection. But his keen intelligence and curiosity will assert themselves as he consults further with Jocasta and the chorus. When Oedipus tells Jocasta that her brother has accused him of the death of Laius, Jocasta asks if Creon was speaking for himself or "on hearsay from another" (p. 94). Oedipus responds: "He has made a rascal seer his mouthpiece; as for himself, he keeps his lips wholly pure" (p. 94).

Jocasta tries to pacify Oedipus by discrediting the oracle's prediction that Laius should die by the hand of his own child. She describes how Laius had taken steps to ensure that his child would not be his murderer: "And the child's birth was not three days past when Laius pinned its ankles together and had it thrown, by others' hands, on a trackless mountain" (p. 94). Laius "at least rumor says—was murdered one day by foreign robbers at a place where three highways meet" (p. 94). There-

fore, she argues, "Apollo did not bring it to pass that the babe should become the slayer of his sire" (p. 94).

Jocasta continues to try to show Oedipus that prophecy is not reliable, that the messages of seercraft have "mapped out the future incorrectly." She continues, "Do not you regard them. Not at all. Whatever fearful thing the god seeks he himself will easily bring to light" (p. 95).

At this stage of the play, Sophocles is suggesting that insight or absolute psychological truth belongs only to "the god." The seer tries to arrive at it through seercraft, which is imperfect in its agency. Man has a hard time reaching it on his own because of his self-deceptions (rage, projection, and a host of other deceiving defense mechanisms).

Ironically, Oedipus is not at all calmed by Jocasta's logic, since something from her lips has completely unhinged him.

OEDIPUS: What restlessness of soul, lady, what tumult of the mind has just come upon me since I heard you speak!

JOCASTA: What anxiety has startled you to make you say this?

OEDIPUS: I thought I heard this from you, that Laius was slain where three highways meet. [p. 95]

Jocasta answers this and many other questions about the time and place of the murder. When she tells Oedipus that the "news was published to the town shortly before you were first seen in power over this land" (p. 95), Oedipus cries out as if the dagger of insight had finally found his flesh!

OEDIPUS: Oh Zeus, what have you decreed to do to me? . . .  
What was the stature of Laius?

JOCASTA: He was tall, the silver just lightly strewn among his hair. [p. 95]

With Jocasta's next utterance, Sophocles tightens the noose of irony around his victim's neck! She says, "His form was not greatly unlike yours" (p. 95). With insight dawning on him mercilessly, Oedipus laments, "Unhappy that I am! I think I have been laying myself even now under a dread curse without knowing it" (p. 95).

From a psychoanalytic point of view, one could argue that before repression is lifted, unconscious insight feels more like a curse than self-knowledge. But curiosity surely anticipates insight, spurring Oedipus on to seek the truth, wherever it will lead. He insists on talking to the messenger—"a servant, the sole survivor who came home" (p. 95) after Laius and his party of five were slain. Jocasta is eager to know what Oedipus needs to learn from the messenger: "What lies heavy on your heart, my king?" (p. 96).

Oedipus tells her about his father, Polybus of Corinth, and about his mother, the Dorian Merope. He recounts that a drunk once revealed to him, that he "was not the true son of my sire" (p. 96). Distraught at these words, Oedipus had then gone to Delphi, where he was told that he would defile his mother's bed and that he would be "the slayer of the sire who begot me" (p. 96). So Oedipus had fled far from Corinth, but reveals that he "came to the regions in which you say this prince perished" (p. 96). Where the three roads intersect, he met "a herald and a man seated in a carriage drawn by colts, as you have described," and when they tried to thrust Oedipus "rudely from the path," he retaliated: "I slew every man of them" (p. 97).

Oedipus asks mournfully, "But if this stranger had any tie of kinship with Laius, who is now more wretched than the man before you?" (p. 97). He insists that he is vile and must be banished, or else he will slay his sire, Polybus, "who begot and reared me" (p. 97). He cries out in horror, as though seeing a vision of the cruel fate that chance has so mercilessly foisted on him.

OEDIPUS: Would not a man speak aright of Oedipus if he judged these things sent by some cruel power above man?

CHORUS: Yet have hope until at least you have gained full knowledge from him who saw the deed. [p. 97]

Oedipus agrees that "so far alone hope does rest with me" (p. 97), until he actually accosts the messenger. He explains to Jocasta that, if the messenger agrees with her version of events—that there were many robbers who slew Laius and his party—then Oedipus, who was only "one lonely wayfarer" (p. 97), could not be guilty.

Jocasta reassures Oedipus that her version is correct, and that, in any case, the prophecy is false in that it foretold Laius would perish “by the hand of my child”—which clearly did not happen, since “that poor innocent never slew him, but perished first itself” (p. 98). She continues to rail against the false science of prophecy: “So henceforth, for what touches divination, I would not look to my right hand or my left” (p. 98).

Oedipus is somewhat consoled. “You judge well,” he says, but nevertheless insists that she “send someone to fetch the peasant” (p. 98). Oedipus is determined to leave no stone of information unturned.

In the next scene, a messenger from Corinth arrives, announcing, “Good tidings, lady, for your house and for your husband.” He brings a message of joy that contains some grief in it as well, however, for Polybus is dead, and therefore Oedipus is to become king of the Isthmian island as well as Thebes. Jocasta is delighted and orders her handmaid to tell Oedipus immediately. She triumphantly derides the false accuracy of prophecy once again: “Oh you oracles of the gods, where stand you now? This is the man whom Oedipus long feared and shunned, lest he should slay him; and now this man has died in the course of destiny, not by his hand” (p. 100).

Oedipus is overjoyed with the news, and now he, too, derides the foolishness of prophecy:

Why indeed, my wife, should one look to the hearth of the Pythian seer, or to the birds that scream above our heads, on whose showing I was doomed to slay my sire? But he is dead and already beneath the earth; and here am I, who have not put hand to spear. [p. 100]

But Sophocles is not through tormenting Oedipus, who immediately begins to worry that “surely I must fear my mother’s bed?” (p. 100). Jocasta reassures Oedipus with her oft-quoted words: “Do not fear touching wedlock with your mother. Many men before now have so feared in dreams also; but he to whom these things are as nothing bears his life most easily” (p. 100).

Oedipus cannot be completely consoled; Sophocles twists the knife of irony in Oedipus’s wounds even further. Although the messenger ex-

plains to Oedipus that his fear of killing his father and espousing his own mother are groundless, since Polybus was not Oedipus's father, the joy the messenger thinks he is bringing is short-lived, as he continues with his story of finding Oedipus as a babe in Cithaeron's winding glens.

Oedipus asks, "What pain was mine when you took me in your arms?" The messenger's answer gashes the very marrow of Oedipus's soul!

MESSENGER: The ankles of your feet might witness.

OEDIPUS: Ah me, why do you speak of that old trouble?

MESSENGER: I freed you when you had your ankles pinned together. [p. 102]

Oedipus insists on knowing who gave the babe to the messenger—his father or his mother. The messenger replies that it was another shepherd "who gave you up to me," "one of the household of Laius" (p. 102).

Sophocles delays the ultimate denouement for a few more excruciating, dramatic moments, leaving the shriveled soul of Oedipus lingering upon the rack of its own fate. It is clear by this point in the unfolding tragedy that Jocasta has become aware of the awful truth that Oedipus has not yet sensed completely; he questions her further.

OEDIPUS: Lady, you remember the man we lately summoned? Is it of him that this man speaks?

JOCASTA: Why ask of whom he spoke? Do not regard it . . . Do not waste a thought on what he said . . . It is futile. [p. 103]

But Oedipus is relentless. At this stage of the play, his heroic greatness of character begins to assert itself daringly, tragically. He senses that he is close to the insight into his genetic past that he must fully grasp, regardless of the consequences. He challenges Jocasta.

OEDIPUS: It must not be that with such clues in my grasp I should fail to bring my birth to light.

JOCASTA: For the god's sake, if you have any care, for your own life, forbear this search! My anguish is enough. [p. 103]

In terror, Jocasta is now begging Oedipus to forgo his insistence on learning all. But Oedipus's need to know seems to blind him to his wife's anguish. It is as if he believes that Jocasta is concerned only about the diminishment of her princely status if Oedipus is discovered to be of lowly birth. He counsels Jocasta to "be of good courage" (p. 103).

OEDIPUS: Though I be found the son of servile mother, yes, a slave by three descents *you* will not be proved base-born.

JOCASTA: Yet hear me, I implore you: do not do this.

OEDIPUS: I must not fear of discovering the whole truth.

JOCASTA: Yet I wish you well, I counsel you for the best.

OEDIPUS: These best counsels, then, vex my patience.

JOCASTA: Ill-fated me! May you never come to know who you are.

OEDIPUS: Go, someone, fetch me the herdsman here, and leave yonder woman to glory in her princely stock.

JOCASTA: [uttering her final words before her suicide]: Alas, alas, miserable!—that word alone can I say to you, and no other word henceforth forever. [p. 103, italics in original]

Jocasta runs into the house. When the chorus asks Oedipus, "Why has the lady gone, Oedipus, in a transport of wild grief? I misdoubt a storm of sorrow will break forth from this silence" (p. 103), he responds with a ferocity that prefigures the emotional catastrophe he is about to experience. However, in this astonishingly existential speech, one senses that Oedipus is the spokesperson for the noble, philosophical, most modern voice of Sophoclean wisdom that seems to transcend its own aristocratic, undemocratic prejudices in speaking to a visionary world citizenry, to the history of ideas themselves, so to speak, rather than to the petty concerns of any one nation-state! Oedipus declares:

Break forth what will. Be my race never so lowly I must crave to learn it. That woman perhaps—for she is proud with more than a woman's pride—thinks shame of my base source. But I hold

myself son of Fortune that gives good and will not be dishonored. She is the mother from whom I spring; and the months, my kinsmen, have marked me sometimes lowly, sometimes great. Such being my lineage, never more can I prove false to it, or spare to search out the secret of my birth. [pp. 103-104]

Oedipus then insists on interviewing the herdsman about his knowledge of the babe abandoned on Mount Cithaeron. The herdsman, sensing how damaging to Oedipus his truthful disclosure will be, stalls in responding. From a psychoanalytic point of view, one senses that the battle between repression and insight is being waged in a last-gasp encounter. From a playwright's point of view, of course, this is but one closing flourish in the unfolding of an irony that has been the engine of dramatic propulsion throughout the entire tragedy.

Oedipus commands his men to pinion the herdsman and force the knowledge out of him, whereupon the herdsman finally relents and answers Oedipus's questions.

OEDIPUS: Did you give this man [pointing to the messenger]  
the child of whom he asks?

HERDSMAN: I did—and would I had perished that day.

OEDIPUS: You will come to that unless you tell the honest truth.

HERDSMAN: Much more am I lost if I speak . . . Ah me—I am on  
the dreaded brink of speech.

OEDIPUS: And I of hearing; yet I must hear. [pp. 105-106]

If Oedipus and the herdsman are seen as a composite of one mind's anguish, rather than as two distinct dramatic voices, has the dreaded brink of insight—its ability to overhear itself, its capacity to speak truth to a coercive power within that would silence it—ever been more accurately intuited?

Under duress, the herdsman blurts out the truth: it was Jocasta who gave her own child to the herdsman, "from fear of evil prophecies." Oedipus inquires about these prophecies:

OEDIPUS: What were they?

HERDSMAN: The tale ran that he must kill his own sire.

OEDIPUS: Oh, oh! All brought to pass, all true! You light, may I now look my last on you, I who have been found accursed in wedlock, accursed in the shedding of blood.  
[p. 106]

Toward the end of the play, Oedipus discovers Jocasta's suicide. In fierce sorrow and anger, he gouges out his own eyes. When the chorus asks the blinded Oedipus, "Man of dread deeds, how could so quench your vision? What more than human power urged you?" (p. 109), he responds as follows:

Apollo, friends, Apollo was he that brought woes of mine to pass, these sore, sore woes; but the hand that struck the eyes was none save mine, wretched that I am. Why was I to see when light could show me nothing sweet? [p. 110]

The chorus, in agreement with Oedipus that he is "wretched alike for your fortune and for your sense of it" (p. 110), makes an interesting psychological distinction between "fortune" and a man's "sense of it"—emphasizing a most psychoanalytic subtlety that differentiates fate, human trauma, and experience from whatever is made of it by unique individual psychology!

Oedipus explains that he blinded himself because he could not bear to look "on my father when I came to the place of the dead" or "on my miserable mother." He goes on to declare:

If there were yet a way to choke the fount of hearing, I would not have spared to make a fast prison of this wretched frame, that so I should have known neither sight or sound; for it is sweet that our thought should dwell beyond the sphere of griefs.  
[p. 111]

Here Oedipus imagines that he could shut himself away, beyond his senses, and escape from grief in such a magical flight—surely a metaphor of defense and what the mind hopes to accomplish in invoking it.

The play ends with Oedipus asking Creon to banish him to Cithaeron, "which my mother and father while they lived set for my appointed tomb, that so I may die by the decree of those who sought to slay me" (p. 112). His words that follow seem charged with prophetic power:

"Yet of this much I am sure, that neither sickness nor anything else can destroy me; for I would never have been snatched from death except to be reserved for some strange doom" (p. 112).

Oedipus here seems to be prefiguring what Sophocles has planned for him in a subsequent play, *Oedipus at Colonus* (5th century BC, b). In his *Antigone* (written before *Oedipus the King*, 5th century BC, c), the hubris of Creon brings destruction to Oedipus's successor. By contrast, in *Oedipus at Colonus*, the tragic Oedipus becomes transfigured in death, with both Athens and Thebes vying to become the site of his grave, since divine decree has proclaimed that wherever Oedipus's grave is, victory shall reside also. Theseus, King of Athens, behaves very lovingly toward Oedipus and his daughters, Antigone and Ismene (rescuing them from the clutches of Creon), and it is in Athens that Oedipus is buried, at an undisclosed site known only to Theseus and his successors in perpetuity. Not even his daughters are allowed to see the actual spot where Oedipus makes his final exit from earth as bolts of heavenly lightning flash.

If the myth of the hero's birth is essentially a family-romance fantasy, as Rank (1909) persuasively suggested, the myth of the hero's death may well be equally complex, from a psychoanalytic point of view. Poland (2014) questioned whether the secrecy surrounding the death of Oedipus is not comparable to the similar treatment of Moses or Jesus in the Bible or New Testament, respectively. He suggests that a denial of aggression and death may lie at the root of such literary reticence.

In a sense, Oedipus seems to represent a variation on the myth of the hero's birth: in this case, the hero was not set afloat on the river at birth, as in many examples of the myth, but his abandonment on the mountain can be seen as a disguised equivalent. If the myth of the hero's birth is a literary treatment of the sacrifice or infanticide that preceded it historically, the myth of the hero's death seems to be an even more obvious—though disguised—reference to the murderous climate from which it emerged.

Both these birth and death myths seem to share a common motif in their basic denial of the helplessness of man in the face of the existential forces that usher him into and out of existence. The entire genre of Greek tragedy dramatized on a stage has often been interpreted as a sublimated, more civilized version of the sacrificial altar that the stage replaced.

Sophocles, who was born and died at Colonus, seems to be indulging in a fantasy of immortality as he buries Oedipus at Colonus, under a veil of secrecy so complete that only the royalty of Athens and their successors will ever have access to it. Is this a self-reference, perhaps, to Sophocles and his revered works, and the kind of literary immortality bestowed upon reader and audience in perpetuity as these plays of a master dramatist continue to ennoble the human spirit through the ages?

## DISCUSSION

### *"That Old Trouble"*

Toward the harrowing denouement of *Oedipus the King*, when the messenger answers Oedipus's poignant question "What pain was mine when you took me in your arms?" with the ironic answer "The ankles of your feet might witness," a despondent, deflated Oedipus, again invoking ancient defensive disavowals, can only respond, "Ah me, why do you speak of that old trouble?" (p. 102).

My reading of Sophocles's extraordinary play suggests that "that old trouble" cannot be repressed totally, and is in fact the source of the music of anxiety that runs like a tragic background bass throughout the play. I have characterized this gnawing anxiety as if it were the tragedy's only protagonist, albeit one who masquerades as all the other *dramatis personae* of the play.

I would like to propose that this anxiety is a composite of both of Freud's theories of anxiety, with an additional component that is perhaps the most adaptive of all. In other words, if Freud's (1895) first theory of anxiety could be called *hydraulic*—in the sense that Freud imagined repression damming up libido, with anxiety the psychological manifestation of this hydraulic overload—his 1926 theory was a much more sophisticated, dynamic theory that reflected the structural model rather than the earlier topographic one.

In the 1926 theory, anxiety has a signaling function that alerts the mind, helping it to choose the defensive strategies most adaptive for the occasion. Sublimation is one of the key defenses mobilized by anxiety's signaling function to assist it with conflict resolution. But sublimation, while acting as a defense, to be sure, also seems to act as an agent of

curiosity—an aspect of transgressive insight that seems not to rest until self-knowledge is arrived at, regardless of the psychological cost. This is the additional component mentioned earlier.

Of course, sublimation can be viewed as simply yet another component of the signaling function of anxiety that is strategically chosen—instead of repression or disavowal, for instance—as the optimal defense. But it could also be viewed as such a unique psychological response in its own right that it warrants a separate definition of its own.

Be that as it may, when Oedipus insists on knowing the precise details of his genetic origins, regardless of whatever peril the information will lead to, such dogged, courageous curiosity seems to insist on knowledge and insight rather than settling for self-deceiving defense. There is an irony, of course, in Freud's notion that the insistent curiosity of children is a reflection of all that repression has concealed from them: it is as if they cannot get answers to all the sexual questions that intrigue and baffle them, so they endlessly question everything else around them in an act of zealous, compensatory displacement.

Oedipus's behavior reflects this duality: he wants to disavow "that old trouble," but he also insists on knowing. Such moments are common in psychoanalytic process as well, when resistance is repudiated and daring, free-associative, transgressive insights insist on having their way. The mind may retreat defensively, to be sure, after such insightful victories are declared, but if insight can learn to stand its ground, there can be no absolute turning back. Such are the psychoanalytic moments when Sophocles's play and analytic process seem to "speak" to each other.

### *The Anxiety of Curiosity*

My concept of *insight agonistes* reflects this marriage of relentless curiosity and concomitant anxiety. I am proposing a dual function of anxiety: it can thwart the advance of insight by threatening it with fantastic imagined calamities, or it can whet the appetite and momentum of insight, assisting it in its transgressive ambitions. Sophocles's play embodies these two features of anxiety.

From a psychoanalytic point of view, by imagining *Insight Agonistes* as the only character in the play, I am dramatizing the ego with all its de-

fensive choices arrayed on stage around it—as if gods, seers, the chorus, Jocasta, Creon, etc., were the concrete expressions of particular defenses that Sophocles illustrates as the drama unfolds. Oedipus has obviously tried to repress “that old trouble” of which his scarred ankles are a constant reminder. And yet, memory will not let him rest until he picks open the scar of the past and reveals its secrets, no matter how disturbing they prove to be.

Oedipus is depicted as a king, to be sure, but his human frailties are on stage with him, albeit disguised by the craft of the playwright. Auerbach (2003) argues that it is not until the creation of New Testament literature that one finds the hero depicted as a common man—Jesus, the carpenter’s son and his group of fishermen taking center stage, rather than the kings and princes of earlier Greek literature. *Oedipus the King* surely depicts the conflicts of a king; his queen, Jocasta; and his brother-in-law, Creon, who rules after him. But in the reading of Sophocles’s play that I propose, it is Oedipus’s shaky status—his conflicted anxiety, his tormenting insights, his identity as *wretch* more than his identity as *Rex*—that takes center stage. In fact, at play’s end, when Sophocles pits the precariously held wits of the lowly herdsman against the fast-diminishing power of Oedipus, it is hard for the audience to know with whom to empathize more: the herdsman whose life is threatened if he refuses to divulge the truth, or the wretched king who is doomed if he embraces it!

Sophocles masterfully dramatizes not only the anxiety of the king, but also the anxiety of the human condition itself, so that by play’s end, the herdsman’s fears and the king’s seem identical. In fact, I propose that it is *insight agonistes* itself that Sophocles highlights as the play lurches toward its most existential denouement.

Shakespeare accomplished a similar stripping of the defensive shreds of identity from kings and commoners alike in *King Lear* (1606), where in the final analysis, it is the “bare, forked animal” (3.4.115) nature of man that is exposed in all its frailty and foolishness. In fact, whatever dignity man possesses seems not to lie in his worldly acquisitions, but in whatever is left of him as he batters his way, naked, through life’s storms. Oedipus sounds like Lear *in extremis* when he raises the fist of his voice against the gods at play’s end.

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Break forth what will. Be my race never so lowly I must crave to learn it . . . . I hold myself son of Fortune that gives good and will not be dishonored. She is my mother from whom I spring; and the months, my kinsmen, have marked me sometimes lowly, sometimes great. Such being my lineage, never more can I prove false to it, or spare to search out the secret of my birth. [p. 103]

Oedipus claims a most existential lineage, from chance and time as much as from flesh and blood—a nascent insight, perhaps, into the primal anger he must feel at parents who sought to murder him at birth.

### *The Drama of Psychoanalytic Process*

I now propose to shift gears dramatically and compare the hero of Sophocles's drama and his "Oedipus complex" with a typical protagonist of the drama of psychoanalytic process today—as it can be witnessed not two and a half thousand years ago on a Greek stage, but on its miniature equivalent, the psychoanalytic couch. In psychoanalytic process, I believe insight can be seen to travel as tortured a pathway as it does in Sophocles's drama, even though its psychological odyssey is often defensively disguised and hard to recognize.

Once the fundamental rule has been embraced and free associations begin to flow, one could postulate that insight and its conflicted vicissitudes are set in motion. If insight is always transgressive, as I have argued elsewhere (Mahon 2015), progressive enlightenment and regressive self-deception stride forward and lurch backward as the analytic momentum ambivalently proceeds. Any in-depth study of psychoanalytic process demonstrates this graphically. In fact, a verbatim account of one hour of clinical process can illustrate this progressive/regressive gait of insight in the consulting room, as if each analysand were a conflicted actor on the stage of his own exfoliative performance.

As Freud put it in the oft-quoted letter of October 1897, when he first outlined his ideas about the Oedipus complex, "everyone . . . was once a budding Oedipus in fantasy" (Masson 1985, p. 272), thus accounting for the aesthetic, discomfiting thrill felt by each member of the audience at a performance of *Oedipus the King*. Psychoanalysis, of course, is an even more harrowing and enlightening emotional reen-

actment of oedipal conflict than a trip to the theater can provide, with the analysand as subjected to *insight agonistes* as is Sophocles's tragic character.

### *Clinical Vignette*

A clinical example will illustrate this point. A male analysand—let us call him Ed (in honor of his illustrious forbear)—had achieved remarkable professional success throughout his ambitious life, and he often credited his driven mother as the abiding catalyst of his achievements. This idealization of the mother, and its complementary defensive mirror image in transference, came to be challenged by the recovery of genetic memories, however.

After a dream in which a young woman squeezed his testicles, arousing great sexual pleasure in him—but great guilt as well, due to a significant age disparity (he was so much older than her in the manifest content of the dream)—Ed had a memory of how seductive his mother could be during his latency years and early adolescence. He hesitated to describe a memory that was deeply troubling to him. When he was twelve years old, his mother had told him how shocked she had been the previous evening when her husband made a sexual advance toward her. This was announced by the mother as if her sexual life with her husband was a thing of the past, and any resuscitation of her husband's desire for her was tantamount to rape.

The 12-year-old Ed, who completely identified with the idealized mother at the time, was also shocked at his father's "bestiality." Later, he left the house and walked around a nearby public square. He remembered a "railing-ed park" as an important feature of the dream-like screen memory. As he walked around the park in his analysis, so to speak, *railing* against his father's "bestiality," he began to deconstruct his railing-ed mind. Now, in the revised history of his development that psychoanalytic process had made possible, he could appreciate the absolutely defensive nature of the idealization of his mother and repudiation of his father's "base" character. He was now able to imagine himself as a developing 12-year-old whose hormones were beginning to assert themselves and embrace *the fierce order of virility*, as Michel Leiris (1992) dubbed it.

The mother's diatribe against the father was as confounding as it was seductive. On the one hand, her provocative behavior throughout Ed's childhood seemed to be preparing him to become a young sexual adolescent; on the other, it meant repudiating not only the man to whom she was married, but also the one with whom the 12-year-old had to identify, and to emulate, as he negotiated the sexual/aggressive rapids of adolescent development.

Years earlier, walking around the park and railing against his father, Ed had had no inkling of the wrath he felt toward his mother. Now, in the transference enactments of psychoanalytic process, he could feel how deeply troubling his dual identifications with father and mother had been as he struggled to develop. "How was I able to structure a sexual life for myself at all?" he questioned—marveling at the complexity of development, the equal complexity of analytic process, and the revisions of history it makes possible.

Ed's analysis had enabled him to remove the railings from his mind, thereby allowing him to feel safe in railing against mother and father as he restructured his thinking. His identification with the defensive grandiosity of his mother had made him an oedipal "king" for as long as the illusion lasted, but the anxiety that plagued his mind throughout all those years of development had fundamentally compromised his happiness. It was only when he destroyed this illusory crown that his real manhood and all its conflicts and achievements could be solidified.

Like Oedipus, who needed to embrace the whole truth of the parental assault on him as a babe or risk not fully knowing himself, Ed needed to let himself know that the splitting his mother fostered had to be exposed as the concealed violence that it actually was. Having the courage to rail against such parental follies allowed Ed to use his analyst and his parents as objects, in the Winnicottian sense, that could relish his aggression and foster his growth and development.

Ironically, years later, on returning to the area of his childhood home and the railing-ed park, Ed was amused to find that the railings had been removed to give more immediate access to pedestrians strolling through. "It seemed as if the park could breathe better," Ed mused. He realized, of course, that he was talking about a constricted mindscape as well as, or even more than, the illusion of a railing-ed landscape. In fact, he

began to doubt whether the park railings had ever existed in other than psychological reality; perhaps they were part of the psychic architecture of a screen memory he had defensively concocted so many years earlier.

### *Insight as a Dramatic Character*

Having completed a brief *reading* of a portion of Ed's psychoanalytic process, I want to return to Sophocles's achievement and a reading of the play in which a tragic anxiety about the nature of the human condition may be seen as the only protagonist on stage, even if it masquerades as several disparate characters. Sophocles hides his sole intent in many displacements of itself, not unlike the way that dream-work hides a latent, primal motif in a myriad of manifest sideshows.

If one merges all the characters in *Oedipus the King* into one composite called *Insight*, the play can be seen as not unlike analytic process itself, where the insights of the analysand—and the great conflicts that they both emerge from and generate—take center stage. The composite character that I propose to call *Insight Agonistes* incorporates the gods (who possess all knowledge); the chorus (who counsels caution and warns the hero about the consequences of too much insightful transgressive hubris); Tiresias, the blind seer who seems to be the mouthpiece for some of the gods' insights; and all the other characters (Oedipus, Jocasta, Creon, the messenger, the herdsman, Antigone, and Ismene). In that sense, I am comparing the whole play to the *mise-en-scène* of a dream: its manifest imagery and the latent content beneath it.

If the gods are viewed as total knowledge or insight, Jocasta's denials could be seen as a total flight into ignorance. The chorus could be viewed as the conservative social aspect of reality that needs to put the welfare of the state above all individualistic hubris. Oedipus himself would represent an extraordinary mixture of impetuosity, volatility, impulsivity, sensitivity, paranoia, and rashness, as well as a heroic, courageous embrace of insight, which insists on knowing its lineage even if it leads to death's door. His nobility is as impressive as his pathology when, at play's end—as a child of Fortune and Time—he insists on knowing all no matter where it leads; insight is staring down its great anxieties as it strides unflinchingly toward its tragic goal.

*Oedipal Themes as Universal Psychic Reality*

The king who speaks such lines at play's end is the mouthpiece not of royalty, but of existential reality itself, where scepter and crown, scythe and spade are all one in the democracy of mortality. We are all children of Fortune, exciting experiments of evolution's game of chance, making the most of the hands that nature, nurture, and experience have dealt us. Reality insists that we endorse Oedipus's ultimate insight; such being our oedipal lineage also, we can never again prove false to it, nor fail to search out the secrets of our birth.

This is the Oedipus complex in a new key. The first iteration of the complex is the dawning in a child's mind—as he emerges from the illusion of a dyadic, exclusive, anaclitic love affair with mother, into the conflicted society of triadic negotiations—that his father is a rival and that mother is less faithful than the first unconditional contractual arrangement suggested. This shattering realization, of course, is most generative from a developmental point of view. It is the reality principle itself in all its complexity, a developmental challenge that must be engaged. If it is operative for boys and girls from ages three to six, approximately, there is an even more robust engagement with it in adolescence and adulthood; and in old age, in the third stage of the sphinx's riddle, the Oedipus complex would seem to be at its most poignant and tragic of all. At this point, the rival no longer seems to be the father or the mother of old, but Mother Nature herself, with whom every gesture of defiant remaining life seems to arm-wrestle competitively to its last breath.

*The Genius of Sophocles*

Sophocles captures all these nuances, using prophecy at one moment, mythology at another, to depict life from start to finish. Laius and Jocasta, terrified of prophecy, banish their child lest the potential father-slayer grow to enact such dreadful foretellings. Given how common infanticide was in early times, Sophocles was no doubt echoing this primitive custom. But surely he was also dipping into his own unconscious creativity as he sought to portray the mind itself, the human condition in all its exuberant, tragic glory and heartache. The Laius complex is

nothing other than another name for the Oedipus complex, given that Laius himself must have had an Oedipus complex, as his father before him had, in perpetuity. I use the word *perpetuity* here to expose the belief that the myth of Oedipus was well known to Sophocles's audience, liminally and subliminally, and was therefore an irony that Sophocles could exploit with arresting and relentless momentum, using the unity of time and place, as well as the fierce compression of affect that Greek drama insisted upon, to hammer the evolving insight home.

The myth of Oedipus is rendered even more potent as a complement to the myth of the sphinx. For is not the riddle a disturbing and uncanny depiction and compression, all at once, of the all-too-brief totality of life from birth to death, from womb to tomb? The sphinx's riddle seems to highlight man's elective ignorance of his own animal mortality, for none could un-riddle its developmental allusions before Oedipus's arrival in Thebes. It is as if Oedipus's insight into the nature of developmental progressions, as embodied in the Oedipus complex and its tragic embrace of sexuality and aggression, was the only key that could unlock the riddle of development itself—a riddle that seems to mock man's ironic progress from the first helplessness of infancy to its final iteration in the second childishness of senility, “sans teeth, sans eyes, sans taste, sans everything” (Shakespeare 1600, 2.7.166). In other words, oedipal insight must engage with sexual desire and patricidal impulse: as it integrates death wishes and incestuous desire into its affective repertoire, it must also integrate the inevitability of human mortality and its ultimate developmental limitations.

From a psychoanalytic vantage point, one could argue that the sphinx is none other than a dramatization of repression itself and of the tragic consequences of such elective ignorance and disavowals of insight. The sphinx—part animal, part human—may foretell man's realization of his descent from animals, with Sophocles prefiguring Darwin, just as he seems to have prefigured Shakespeare and Freud. But surely, from a psychoanalytic point of view, as suggested earlier, the sphinx also represents insight rejected and insight projected, an iteration of repression and regression, a retreat to the polymorphous when the developmental challenges of differentiation, individuation, and identity seem too anxiety-provoking. Be that as it may, my point is that the plight of Oedipus

is rendered even more psychologically layered when prophecy and mythology—projections of man's interiority, to be sure—nevertheless terrify him with his own superstitious illusions and self-deceptions.

If the concepts of mythology, prophecy, and omniscient gods are all perfect, objective correlatives of their own psychic interiorities, which Sophocles exploits so well in the *mise-en-scène* of his play, the name of the play's hero has an uncanny insight embedded in it also, a little masterpiece of compression in and of itself. In Greek, the name *Oedipus* is comprised of two elements: *odi*, meaning *swollen*, and *pes*, meaning *foot*. It is as if Oedipus in myth, and Oedipus in Sophocles's dramatization, cannot escape the image of an infant chained to a mountain, his life forever branded with the tragedy of its existential origins.

This depiction of man and the development of his mind as wounded flesh seeking to heal itself in the anxieties of its own developing insights and experience is at the heart of Sophocles's play—and certainly at the heart of this reading of *Oedipus the King*. In other words, man begins in a speechless, wounded helplessness that nevertheless embraces its frailty and dependence as it reaches toward a differentiated, individuated identity, culminating in a daring engagement with the Oedipus complex and all its attendant derivatives and conflicts, throughout the life cycle. This means engaging with an abiding anxiety throughout development, an anxiety that can only be mastered and integrated by undoing all the self-deceptions that would defensively shield it from recognizing and embracing its own identity.

#### Philoctetes

I think Sophocles's ultimate play, *Philoctetes* (5th century BC, d), confirms my basic argument. *Philoctetes* depicts a stricken hero whose leg, not unlike Oedipus's feet, becomes his undoing. The leg was bitten by a snake and has developed a wound that refuses to heal. Philoctetes is left abandoned on an island, such is the stench from his unhealing wound.

However, when the Greeks realize that Philoctetes is in possession of Herakles's bow—a magic weapon without which they will never achieve victory at Troy—they send Ulysses and Neoptolemus to trick Philoctetes into surrendering the bow to them. Ulysses is all guile and treachery,

but Neoptolemus (at least in Sophocles's rendering of the story), after initially embracing Ulysses's plan, later has second thoughts that lead to Philoctetes being allowed to accompany his bow to Troy. He becomes healed of his chronic wound and eventually secures victory for the Greeks.

In this play, Sophocles seems to be stressing that Herculean magic is not enough in life; human frailty must also be acknowledged. A hybrid of mortal limitations and seemingly superhuman effort is the best that the human condition can come up with in its struggles. In *Oedipus the King*, a similar message of hope seems to emerge from direst tragedy. With his wife/mother dead by suicide and his eyes gouged out, a defiant, insightful Oedipus seems to look ahead to the vindication that Sophocles has planned for him in *Oedipus at Colonus* (5th century BC, b). In that equally remarkable play, Theseus will welcome Oedipus, protect his daughters from the rapacious Creon, and claim Oedipus's body for its final resting place in Athens, not in Thebes as the self-serving Creon would have engineered without Theseus's intervention.

## SUMMARY AND CONCLUSIONS

Overall, Sophocles seems to be acknowledging that the human condition, and its profound insights and experiences, oedipal and tragic as they must be, has a transcendence that seems to take the measure even of mortality. Sophocles relies on no religious *deus ex machina* to achieve this extraordinary sense of insight's transcendence over death. The transcendence comes not from the magic of a mythical bow, but from an acceptance of the reality of existence on its own brutal terms. The scars of Oedipus's infantile life can never be erased or healed out of existence; they can only be embraced, cherished, and used as a foundation for all subsequent experience. Sophocles, invoking psychoanalytic developmental psychology, seems to suggest that, if we must metaphorically kill our fathers at fated developmental crossroads in our lives, we must also learn to fashion a good enough morality out of the inevitability of our crimes and claim a Colonus of empathy for ourselves throughout the journey, and even at journey's end.

*Insight Agonistes* can only become relatively at peace with itself when, through psychoanalytic work and empathy, the whole panoply

of formerly repressed affects have been acknowledged and integrated. When primal aggression and the resultant anxiety and excessive guilt—to single out a few of the most crucial affects—have been tracked to their genetic, debilitating sources and turned into signals rather than panic-inducing threats, self-possessed insight is ready to replace *Insight Agonistes* in the theater of psychodynamic life.

In other words, the great Greek mandate to *know thyself* may lead initially to conflict and agony, but its ultimate *raison d'être* has to be the sober, reflective wisdom that only insight and its agonized, transgressive nature can accomplish. Human nature that learns to integrate all its components, animal instinct as well as all its myriad transformations, comes closest to the Sophoclean ideal that integrates *wound and bow*, as Edmund Wilson (1941) argued, as well as pride and misery, into its most nuanced definition of the heroic. Hero and antihero thrived on the Greek stage centuries before existentialism made the latter term such a mantra of modernity. *Know thyself* did not exclude agonized, transgressive insight from its purview; it embraced it.

Why is insight agonized at first? Why do I stress *Insight Agonistes* in the title of this paper? I wish to propose that insight must embrace all that has been repressed, repression being a kind of elective psychological infanticide that each child must endure in the service of progressive development. Repression and identification pave the way as defense transforms instinct into social poise and competence. Development does not have to lead to infanticide proper or actual soul murder, but the child's instincts do have to be tamed by the socializing process. Reasonable parents do not chain their ward's ankles to a mountain, but they do rein in his wild sexual and aggressive impulses. Handled well, parental controls and guidance gently transform instincts into a complete defensive repertoire (sublimation, repression, identification, etc.). This transformation emerges from an elaborate dialogue, of course, between parent and child. It is the child's ego that essentially effects the transformation, but parental facilitation is crucial.

The treatment of Oedipus was barbaric, and the prophecy that demanded it was a poor excuse for and a tragic reflection of sadistic social policy that condoned infanticide. But as a metaphor of child development, Oedipus is most revealing. Since infantile amnesia, at age six,

approximately, attempts to “cleanse” memory of its tumultuous oedipal and preoedipal early years of life, the extraordinary psychological work of instinctual taming and transformation tends to be forgotten. The return of the repressed, unwittingly in symptomatology and wittingly in the psychoanalytic free-associative process, tries to reprise the formerly banished mental content.

If there is a force that needs to repress, there is a countervailing force that needs to *re-press* what has been banished and recycle it into the metabolism of development (Mahon 2005). The human mind seems to insist on this agon between repression and insightful enlightenment. Surely, this was as true in ancient Greece as it is now in current psychoanalytic process. Why else would Sophocles insist on writing about a hero whose name reflects his traumatic origins? Why else would my patient Ed concoct a screen memory reflecting the duality of aggression and defense in a pun on the word *railing*?

*Oedipus the King*, to an ancient Greek audience, must have had the same dramatic effect that a play entitled *King Swollen Foot* would have on an audience today. There is nothing subtle about what is being announced in the king’s unusual name. A very ancient, repressed trauma is concealed in the irony of Oedipus’s ignorance of his past; but this is tantamount to hiding the secret in plain view, out in the open, burying it and revealing it all at once. The *Insight Agonistes* of my title is an attempt to highlight this ironic game that insight plays with repression and with all the other defensive self-deceptions that the evolving psyche insists upon.

I have emphasized the agon, the conflict at the core of insight as it struggles to *know thyself*, but conflict resolution is, of course, the ultimate ambition of a self-actualizing mind. Agony reaches insistently toward adaptive resolution—not so much *per aspera ad astra*, but *per aspera ad terra firma*, the solid ground of deep psychological understanding of consciousness and the complex unconscious underworld that informs it.

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## THE USE AND ABUSE OF OMNIPOTENCE IN THE JOURNEY OF THE HERO

BY JOHN STEINER

*The author uses Joseph Campbell's (1949) account of the "Journey of the Hero" to examine a sequence of stages in which the hero must first use omnipotence in order to embark on an adventure, and then relinquish it in order to return to the ordinary world. The author detects parallels to this theme in descriptions of the fate of Lucifer in Milton's *Paradise Lost* (1674), and in the development of toddlers as described in Mahler's (1972) observations on separation-individuation. Finally, he traces a similar process in clinical material drawn from near the end of a patient's analysis.*

**Keywords:** Joseph Campbell, Margaret Mahler, hero's journey, omnipotence, child development, *Paradise Lost*, Lucifer/Satan, exhibitionism, adventure, fantasy, self-confidence, idealization, separateness.

In this paper, I will use Joseph Campbell's (1949) account of the "Journey of the Hero" to examine a sequence of stages in which the hero has to first use omnipotence in order to embark on an adventure, and then, toward the end of his journey, to relinquish it in order to be able to return to the ordinary world. I will outline a similar sequence of events that takes place in Milton's *Paradise Lost* (1674), suggesting that Lucifer began as a true hero who challenged the established order in heaven, but ended as a failed hero who was too proud to accept his rightful place in God's family.

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I will then describe what I see as a similar sequence of stages in the developing child, using Mahler's observations of toddlers in the course of separation-individuation as an illustration. Finally, I will trace the process in material from near the end of a patient's analysis.

These three different situations can each be seen as a heroic quest that involves a temporary assumption of omnipotence, followed by a more or less painful deflation and disillusionment in the course of confrontations with reality. As the hero picks himself up following the disillusionment, a critical choice confronts him: either to renew attempts to make omnipotence succeed, or to take the painful steps required to relinquish it.

In all these situations, we can observe an initial stage of uninhibited pleasure in achievement as the hero breaks free from earlier limitations to explore and master himself and the surrounding world. Then, however, we are obliged to watch as disillusionment sooner or later brings his freedom to a halt. The deflation can be sudden and shattering, most significantly when it is felt to undermine confidence based on the security of being loved. The outcome can be catastrophic, and in some circumstances can lead to a profound disturbance of development.

I intend to focus on the process of disillusionment in these three very different situations, using an approach that owes a great deal to Sodr  's formulations on the fate of disillusionment. Some of her conclusions are presented in her published papers (e.g., Sodr   2008), but I found a personal communication that she sent to me (Sodr   2012) to be particularly apposite to my theme. I had shown her an early draft of a paper on Milton's *Paradise Lost* (Steiner 2013), and in her reply, she wrote:

The Ideal Object always causes some humiliation at the moment of the first realization of separateness because, as the object is seen more realistically, i.e., no longer as a possession and with the idealization gone, the Fall is too great.

Any response that challenges the idealization may lead to a feeling of catastrophic collapse in which the disillusionment opens up a gap between the self and the object—a gap that to start with is filled by Chaos, leading to panicky feelings of falling into a terrifying unknown.

Normally, the mother's love saves the day, since it creates a link and is felt to rescue the baby from the abyss. But if this fails and the pain, humiliation, and fear are unbearable, the "horizontal" gap between self and breast becomes a "vertical" gap with only two positions, triumph or humiliation. The longing for love is then replaced by a longing for power. The patient inhabits an up-and-down universe in which strength fueled by hatred is idealized and love is seen as weak and contemptible. [Sodré 2012]

My particular concern is to examine the difficult task by which the hero, the toddler, and the patient can find their way back from a position in the vertical gap, where a struggle over power dominates, to one where the horizontal gap can be addressed and the relationship restored. Central to this struggle is the need to relinquish and mourn omnipotence (Segal 1994), which early on had been necessary for the subject to find the courage and confidence to embark on and to enjoy an engagement with life.

## THE JOURNEY OF THE HERO

In a now-famous book, Joseph Campbell (1949) describes a universal structure of myths in which the hero travels from the known world into the unknown; there he faces challenges and temptations, and engages in battles with superhuman forces. In his struggles, the hero sometimes derives hope and assurance from a helpful female figure, by whose magic he is protected, but eventually he is let down, defeated, and descends into an abyss connected with death and despair. Heroically, he picks himself up, and taking advantage of his descent into despair, he is able to gain important self-knowledge—sometimes, for example, through a visit to the underworld. This knowledge makes him powerful and allows him to recover the confidence to embark on further adventures.

However, the hero's wish to return to his home in the world of ordinary mortals begins to assert itself, and in order to go back, he must agree to relinquish omnipotence. Such relinquishment is always difficult and involves further trials, centering on the capacity to relate to forces more powerful than he is. Campbell sees this as a need for *atonement*

*with the father*, and in this task, the hero again usually needs the help of a female figure so that he can survive the anticipated power of the threatening father. If he is able to face and to submit to this power and relinquish his omnipotence, he can return to the real world, sometimes with a gift to bestow on mankind. Campbell likens the hero's journey to the inner journey each of us is obliged to make in order to understand ourselves.

If the hero fails to embark on his adventures, he is not really a hero at all; he remains an ordinary mortal, perhaps ashamed of his cowardice or perhaps simply recognizing his limitations. He conforms to the habits, dogma, and prejudice of his time and is unable to break new ground. His failure to rebel denies him the experience of life-enhancing adventures, such as those involving heroic battles leading to both victories and defeats. The true hero has the capacity to tackle adventures, even if they seem to be grandiose, and he has to be willing to suffer the defeats that failure brings.

At other times, the hero is able to begin in truly heroic fashion, but is unable to give up omnipotence and return to the ordinary world. If he remains unrepentant and determined to hold on to omnipotence, he is trapped in the world of unrealistic fantasy, where power leads either to triumph and superiority or to defeat and humiliation. The hero who cannot relinquish and mourn his omnipotence is a failed hero, and such failure is often a step toward becoming a villain. Indeed, the persistent belief in omnipotent prowess is likely to become the core of a delusional system leading to the infliction of humiliation with unrestrained cruelty.

The situation in which the hero finds himself as he recovers from defeats is critical. Sometimes the recovery leads to a return to heroic battles and renewed searching for triumph and revenge, but the true hero, unlike the villain, is determined to return home to the world of ordinary mortals. He has the courage to relinquish omnipotence and to acknowledge the reality of his place in a human family.

The sequence of events as it takes place in Milton's *Paradise Lost* (1674) suggests, in my view, that Lucifer ended as a failed hero because he could not relinquish omnipotence, and rather than accept his rightful place in God's family, he became the very personification of evil. Envy played a major role in his failure to relent, and his envy was greatly

augmented through the fact that he felt himself to have been undeserv-  
edly demoted from the position of favorite.

## THE DESCENT OF LUCIFER INTO THE ABYSS

Milton's (1674) detailed description of the fall of Lucifer allows us to follow his descent from a position as the highest, most brilliant, and most favored of God's archangels, as he is thrown into an abyss of chaos, despair, and humiliation.<sup>1</sup> The disillusionment is presented as an expulsion from heaven and is Lucifer's punishment for attempting to overthrow God:

Him the Almighty Power  
Hurl'd headlong flaming from th' Ethereal Skie.  
[Milton 1674, Book One, line 49]

Lucifer's fall evokes the image of an infant who is abruptly disillusioned from a position in which he was comfortably confident that he enjoyed omnipotent control over the breast. Suddenly, the assumed patronage of the ideal object is withdrawn and, instead of occupying a special position, the infant is thrust into what feels like an abyss.

Milton is clear that it was Satan's envy of God and jealousy of his newly begotten son that led to his disobedience:

. . . yet fraught  
With envie against the Son of God, that day  
Honour'd by his great Father, and proclaim'd  
Messiah King anointed, could not beare  
Through pride that sight, & thought himself impair'd.  
[Book Five, line 665]

Lucifer's punishment was dreadful, but Milton saw that the disillusionment was sudden and cruel. He had been sorely provoked when, with the other angels, he was summoned to witness the arrival in heaven of God's newly begotten son. Christ was introduced to the assembled angels—not only as God's favorite, but as their leader with a divine status, to whom all must bow in submission.

<sup>1</sup> These themes were explored in more detail in Steiner (2013).

. . . your Head I him appoint;  
 And by my Self have sworn to him shall bow  
 All knees in Heav'n, and shall confess him Lord.

[Book Five, line 608]

Lucifer had not expected to be so abruptly displaced from his earlier position as

. . . [one of] the first,  
 If not the first Arch-Angel, great in Power,  
 In favour and preeminence.

[Book Five, line 665]

Lucifer felt himself to be impaired, that is, reduced, by the raising of another. I think the horizontal split and fall from grace was at this point so great that Lucifer could not believe he was loved, and that his rebellion added to the impairment by destroying potential bridges back to the primary object. His only option was to engage in a power struggle and face either triumph or humiliation. So he incited his supporters to rebellion and embarked on the great war in heaven that eventually led to his expulsion.

There is something heroic about Lucifer's disobedience, perhaps especially when it is contrasted with the behavior of the "good Seraph" Abdiel, who, in speaking to Lucifer, argues that he should be receptive to God's benevolence, accept his place in the hierarchy, and obey God's laws<sup>2</sup>:

As by his Word the mighty Father made  
 All things, ev'n thee, and all the  
 Spirits of Heav'n . . . .

Crownd them with Glory, and to thir Glory nam'd  
 Thrones, Dominations, Princedoms, Vertues, Powers,  
 Essential Powers, nor by his Reign obscur'd,  
 But more illustrious made.

[Book Five, line 842]

<sup>2</sup> Abdiel is the conforming, obedient son, praised but also presented as something of a wimp with no heroic qualities. A similar role is that of Don Octavio in Mozart's *Don Giovanni*.

Milton emphasizes the hierarchical system in which everyone, arch-angels included, must know their place in the great chain of being.<sup>3</sup> Having been abruptly displaced, Lucifer cannot accept his new status as just; instead he responds with “high disdain, from sence of injur’d merit” (Book One, line 98).

However, Abdiel gets no support, and Lucifer, encouraged by his allies and imbued with a sense of injustice, embarks on a war of extraordinary destructiveness. He leads a rebel force comprising as many as one-third of all the angels, and, although doomed to ultimate defeat because of God’s superior powers, he gains significant victories in the course of heroic battles.

Lucifer also makes important scientific discoveries, including the invention of gunpowder, which is brought to light as a result of his ability to look beneath the surface of things. Others merely “superficially survey” heaven, “adorned with wonderful plants and fruit,” and pay no attention “from whence they grow” (Book Six, line 477). But Lucifer does, and finds

. . . deep under ground, materials dark and crude,  
Of spiritous and fierie spume, till toucht  
With Heav’ns ray, and temperd they shoot forth.

[Book Six, line 480]

We are reminded here of Freud’s heroic willingness to search beneath the surface of things, to find “materials dark and crude.” He was exploring dangerous things, and if he had not been heroically rebellious, psychoanalysis would not exist today. Freud saw himself as a hero in the role of a conquistador (Masson 1986), and he also had a remarkable view of the artist as a hero who refuses to submit to reality, but yet finds his way back to it through his craft:

An artist is originally a man who turns away from reality because  
he cannot come to terms with the renunciation of instinctual

<sup>3</sup> The idea of a great chain of being can be traced to Aristotle, who postulated a perfect being and arranged all animals along a single, natural scale, according to the degree of perfection of their souls. Here Milton seems to adhere mostly to the classically defined *nine orders of angels*; in descending order of status, they are Seraphim, Cherubim, Thrones, Dominions, Virtues, Powers, Principalities, Archangels, and Angels.

satisfaction which it at first demands, and who allows his erotic and ambitious wishes full play in the life of phantasy. He finds the way back to reality, however, from this world of phantasy by making use of special gifts to mould his phantasies into truths of a new kind, which are valued by men as precious reflections of reality. Thus in a certain fashion he actually becomes the hero, the king, the creator, or the favourite he desired to be. [Freud 1911, p. 224]

Lucifer cannot abandon his demand for revenge, and the knowledge he acquired cannot be used in a creative way because he cannot relinquish omnipotence to resume his rightful place in God's family. His knowledge of human nature is remarkable—and is wonderfully demonstrated in his ability to seduce Eve—but this knowledge is used to refuel his desire for power and revenge. The gap between the primary object and the infant is felt to be unbridgeable and, in despair, the infant believes his only option is to return to the up-and-down world of power politics.

As they pick themselves up after their descent into hell, Satan and his crew (he is no longer to be referred to as Lucifer) are inspired to rejoin the fight against God and his goodness:

What though the field be lost?  
 All is not lost;  
 but of this be sure,  
 To do ought good never will be our task,  
 But ever to do ill our sole delight . . . .

[Book One, line 160]

Farewel happy Fields  
 Where Joy for ever dwells: Hail horrors, hail  
 Infernal world, and thou profoundest Hell  
 Receive thy new Possessor:  
 One who brings  
 A mind not to be chang'd by Place or Time.  
 The mind is its own place, and in it self  
 Can make a Heav'n of Hell, a Hell of Heav'n.  
 Better to reign in Hell, then serve in Heav'n.

[Book One, line 263]

This is a terrible philosophy, but who can deny that there is something heroic about it? Omnipotence has not been relinquished, and a rekindled attack on God is directed at his newest creation, man.

Is there no way out of the vertical world that is created after the fall? Sodré (2012) suggests that, normally, it is love that rescues the deflated child. The mother reaches down to pick up the child and finds a way of restoring in him the belief that he is loved and can return to the family. Even Satan wavers and considers the possibility that he, too, could repent and make his peace with God:

Is there no place  
Left for Repentance, none for Pardon left?  
None left but by submission; and that word  
Disdain forbids me . . . .

[Book Four, line 82]

In sadness, Satan realizes that submission is too humiliating—that there is no way back—and it is this that leads him to espouse evil as his goal:

So farewell Hope, and with Hope farewell Fear,  
Farewell Remorse: all Good to me is lost;  
Evil be thou my Good.

[Book One, line 110]

We can see that Satan's dedication to evil arises from his belief that he is unable to repair the original relationship with the good object, represented by God.

## SEPARATION-INDIVIDUATION IN THE DEVELOPMENT OF THE CHILD

In order to embark on and then return from his quest, the hero must first acquire omnipotence and subsequently relinquish it, as described in the foregoing sections, and I think we can see the same pattern in the observations of Mahler (1972, 1974; Mahler, Pine, and Bergmann 1975) of toddlers beginning to walk. In her research, Mahler was impressed with the way that, toward the end of his first year, the baby begins to

become delighted and excited by his new achievements. He is not only pleased, but wants to show off his newfound skills, embarking on what Mahler refers to as his *love affair with the world*.

This is the *practicing phase* of a series of developmental stages making up the separation-individuation cycle, in the course of which the infant gradually develops a sense of separateness from his mother. In the practicing phase, toddlers enjoy an elated preoccupation with locomotion and exploration, and become so thrilled with their performance that they do not even mind when they fall over or bump into things. They are unashamedly exhibitionistic and narcissistic and, as observers, we share their pleasure and do not begrudge them their excitement. Indeed, we can see the germs of the hero in the toddler embarking on his adventures, even though we are aware that his confidence is based on identifications with powerful objects that help to conceal the reality of his smallness and dependence.

Sadly, it does not last, and the phase of narcissistic confidence is followed by a *rapprochement crisis*, set off by the collapse of the illusion of omnipotence. Pine (1980), a colleague of Mahler's, concludes, "Now he is small and alone in a big world, rather than sharing in the (imagined) omnipotence of the mother-child unit" (p. 226). The crisis introduces the *rapprochement subphase*, in which the child once again stays close to his mother and becomes anxious when his physical mobility leads to a sense of separateness from her. The toddler becomes tentative, wanting his mother to be in sight so that he can gain reassurance through eye contact, and he is evidently in conflict between staying with his mother and being more independent. Mahler observed that, if the mother reacts with impatience or unavailability, a fear of abandonment may arise in the toddler.

In the past, Mahler's observations were mostly neglected by Kleinian analysts—in part, perhaps, because of a reaction against Mahler's (1974) early view, later amended, that in the first few weeks of life, the baby is detached and self-absorbed in an autistic state, without forming object relations. This would make it difficult to trace the stages in the separation-individuation cycle back to early infantile experience.

Subsequently, however, just as with the Oedipus complex, it became possible to see early precursors of the various stages described by Mahler,

and indeed, some of her observations of toddlers have parallels in observations of babies only a few weeks old. For example, Murray and Trevarthen (1985) filmed sessions in which they asked mothers to talk to their infants while they viewed each other through a television link. A lively interaction took place in which it was often the baby who set the pace and the mother who followed. If the communication was interfered with, however, these babies became profoundly disturbed and indeed seemed to collapse; their faces fell, and they became bewildered and distraught. This occurred if the mothers were asked to abruptly put on a deadpan face and stop playing, or equally so if the interaction was de-synchronized through the introduction of a delay between the baby's gestures and the mother's response. Murray (1992) later linked these findings to disturbances in the babies of nonresponsive, depressed mothers, and it seems to me that such a situation represents an early version of a rapprochement crisis.

Initially, it was difficult to link Mahler's observations of children in a day nursery to the analyst's experience in the analytic setting, but this, too, has changed, as I hope to show in the clinical material that follows. Indeed, in psychoanalysis, we recognize that separation-individuation is a critical issue for development, even though we tend to use different terms to describe the process. In particular, we are now much more aware than previously that disillusionments from idealized fantasies commonly occur in analysis and have a very precise parallel with the disillusion described by Mahler as a rapprochement crisis.

Once we recognize these parallels, we can use Mahler's observations to alert us to some of the complex anxieties, excitements, and disappointments that patients experience in the course of their analyses, as they go through the process of relinquishing their omnipotence and begin to forge a separate identity. A feature of the struggle for separateness is that embarrassment, shame, and humiliation may become prominent as a protective pathological organization is relinquished.

I have thought of this in terms of a sensitivity to being seen as patients begin to emerge from a psychic retreat (Steiner 2011), and I have been struck by similar experiences described in relation to the rapprochement crisis.

For example, in surveying Mahler's work, Schore (1991) described how the toddler expects his sense of self-admiration to be met by a similar state in the mother, leading to confirmation of a shared omnipotence. Instead of a maternal smile of confirmation, there is the shock of deflation as the child is confronted with a mother who lets him down, sometimes in a catastrophic manner. She may be preoccupied with a sibling, her husband, or another rival, or she may simply not share the child's wonder and excitement with his achievement. If he is not confirmed as a hero, he feels himself to be nothing, and the fall is associated with collapse, shame, and humiliation.

Of course, the deflation is a step toward relinquishing illusion and facing reality, but if it is too sudden and unexpected, the infant is shattered. This is especially so if his grandiosity and exhibitionism have been extreme, and if the gap between success and failure is therefore too great. Similar crises may follow future deflations of narcissism, and these occasions can be difficult for mothers and their children, as well as for analysts and their patients. It is the mother's failure to admire that produces the deflation, and the hateful attacks this provokes from the infant may make it difficult for her to see that the child is in special need of her support.

Winnicott (1953) proposed that "the mother's eventual task is gradually to disillusion the infant, but she has no hope of success unless at first she has been able to give sufficient opportunity for illusion" (p. 95). I take this to mean that the infant must be allowed the pleasure of the practicing phase, and then be supported through the rapprochement crisis.

As indicated earlier, I think it is possible to compare the stages in the journey of the infant toward independence to the stages through which the hero passes on his journey. Indeed, there is something heroic in the toddler's excited and omnipotent voyage of exploration and, like the hero, the toddler has to survive the descent into an abyss of despair and dejection when the omnipotence collapses. As with the hero, the outcome of the infant's journey depends on what happens next. Can the infant recover his confidence? Is his subsequent behavior based on a resumption of omnipotence, or can he return to the real world, bringing with him the lessons he has learned?

As the infant deals with the aftermath of the rapprochement crisis, he faces tests of his capacity to relinquish omnipotence and mourn it. If mourning is successful, he is strengthened to endure the ordinary discomforts of reality, including those of shame and humiliation, a degree of which is inevitable in the course of achieving separateness.

In our clinical work, we are aware of how central it is for the analyst to support the patient as he struggles to survive such experiences and to resist the pull toward the omnipotent world of conflicts over power. This final struggle in his return to the non-omnipotent world of ordinary human endeavor involves a deference to the reality of difference and hierarchy, similar to what Campbell (1949) called *atonement with the father*. As with the hero, a great deal will depend on the mother's capacity and willingness to help her infant regain his place in a family where he can be loved.

## DISILLUSIONMENT IN THE CONSULTING ROOM: CLINICAL MATERIAL

These kinds of experiences, portrayed in myths and described in observational studies, have their counterpart in psychoanalytic observations made in the consulting room. While disillusionments are inevitable and universal, the way that these are handled by the patient—and by the analyst—can have a critical effect on the outcome. If the shame and humiliation accompanying the deflation are too painful to bear, the patient feels rebuffed and rejected, and may come to believe that, if he is not admired, he can no longer be loved. He loses confidence in his capacity to love and be loved, and he strives to reestablish an omnipotence in order to deal with humiliation by inflicting it on others. In this way, a conflict over power replaces the conflict over love, and leads to cycles of triumph and humiliation in which issues of power and dominance override all other considerations.

I want to look at these situations and try to trace them to what I have come to think of as clinical rapprochement crises, in which the object fails to confirm an ideal fantasy that, up to that time, had encouraged heroic adventures. It is the rapprochement crisis that creates the horizontal gap described by Sodr  (2012) and that leads to feelings of chaos and

disintegration, and it is these in turn that come to be organized into a pathological structure based on omnipotence and power. I will examine some of these issues in the clinical material that follows, in which I have in mind a parallel between the patient's journeys and those of the hero.

This material comes from the analysis of a patient, Mr. C, who embarked on innumerable projects very similar to the adventures of the heroes of mythology. Even though the projects had a grandiose flavor, they also had creative potential, and several got off the ground with the support of one or another patron in his field of business. Then, when the project ultimately failed, usually after some initial success, he collapsed into a period of extreme anxiety, accompanied by somatic symptoms chiefly of joint and muscle pain.

Mr. C sought the help of numerous medical doctors and pressured them to embark on what seemed to be dangerous and heroic treatments, concurrently putting enormous pressure on me to agree that immediate relief was imperative. Gradually, his panic would give way to dejection, and after a period of despair and self-recrimination, he typically picked himself up and resumed his quest—having, for the most part, learned little from the experience. Each new project held the same promise of great achievements, and to my mind was fueled by the same omnipotent fantasy designed to transform humiliation into triumph, in order that he might regain his rightful place alongside an ideal object.

Marital problems accompanied Mr. C's failures, and his need for business triumph was linked to the belief that success in his working life was a precondition of his wife's love. At times of failure, he felt humiliated and wronged, and his primary goal was to get me to agree that he had been treated unfairly.

If I failed to support his ambition, Mr. C saw me as dislodging him from his place as a partner in an ideal couple and adopting that place for myself. This provoked a renewed experience of humiliation and a renewed accusation of unfairness. The predominant complaint was one of injustice, and the patient's failure to find the support from me that he so desperately sought engendered indignant incomprehension and resentment.

Gradually, following many such experiences, Mr. C established a business with more modest goals that was more in keeping with his re-

sources. His anxiety lessened, the somatic pain was no longer mentioned, and he was more able to examine what usually happened in his attempts to restore both his business and his marriage. This improvement allowed us to talk about ending his analysis and, especially after we had decided on a termination date about a year hence, a calmer atmosphere prevailed. A new development was the emergence of sadness—for example, when he contemplated ending the analysis and wondered what it would be like not to come to his session every morning.

Mr. C often extended breaks in the treatment by taking holidays or business trips of his own. These trips began to occur less frequently, but some two months before his termination date, he decided to accept an invitation to give a talk at a business convention in Germany, which would necessitate his missing a Friday session.

#### *A Thursday Session*

In the Thursday session immediately before this business trip, Mr. C began by launching into a description of what he called a very difficult situation. His wife had suggested that he might help his son find a job. He was in a position to do so through business contacts, but had avoided this previously, thinking that his son could manage on his own and that he himself might be accused of pulling strings. The patient recounted that, at the cost of considerable effort—and feeling uncertain about whether it was right—he had eventually followed his wife's suggestion and arranged some possible contacts, which he sent to his son in an e-mail.

This had led to disaster. Instead of winning approval from his son and his wife, the patient received an angry e-mail from his son in which he was accused of interfering and of trampling on his son's independence. At this point in the session, what had earlier been described as a difficult situation became a catastrophe. Mr. C insisted that he was a terrible failure, that there was something wrong with his thinking, that wires were connected up wrongly in his head, and that he was beyond salvation.

Moreover, the patient decided that this failure must be an act of revenge for the feeling of complacency he had felt in recent weeks, when things had been going deceptively well. Mr. C had felt good about a

directors' meeting at work, and about his relationship with his wife, with whom he had relaxed in the garden over the weekend. He had gazed with pride at the work he had done on their stone patio—the flower beds and the water feature, which looked quite nice. It all made him think that he had built things up again and reestablished a better link with his wife. Now he reiterated that he had managed to pull the rug out from under himself, and everything had come crashing down.

I linked the patient's description of disaster with his anxiety over the business trip to Germany he was to make the next day, and interpreted that he was trying to persuade me that if I did not join him in his excitement of what he could do in Germany, and support him as a father should support a son, everything would collapse. In the course of the session, I pointed out his uncertainty as to *how* a father might best support a son. I suggested that, although he felt that he and I had done some useful analytic work, he also knew it was far from complete and far from perfect, and this left him unsure of the solidity of our relationship. He seemed afraid that everything between us could collapse, that he would be thrown into an abyss of despair and self-recrimination—and I think he was relieved that I did not make a big issue of his trip to Germany.

Mr. C seemed to listen, but continued to insist that the disaster was real. He went on repeating that, just as he had built up something better with his wife and felt he had a family and a home, it all collapsed, and he now felt he had lost everything.

### *Discussion*

It seemed to me that the situation between the patient, his wife, and his son was the enactment of a fantasy that his trip to Germany was a heroic adventure that he expected me to admire, like the work he had done in his garden. Even my neutral stance was felt as a failure to confirm what was meant as a triumph over a father figure, in order to regain his position as his mother's admired partner. This fitted with repeated attempts to get me to stand down as a father and accept that he should take my place. When I treated the business trip as something he could make his own judgments about, he felt I was failing to confirm his superiority.

Now it seemed that the patient was describing a crisis in which he collapsed into an abyss of ruin and recrimination. These periods of collapse were familiar, and at the point of crisis, he was probably right that the wires were connected up wrongly in his head and that he was beyond being saved, because he seriously believed that he had a defect in his capacity to understand himself and his objects, which I could not put right.

However, at other points in the session, Mr. C seemed to have quite a bit of insight. Until persuaded to the contrary by his wife, he had confidence in his son and believed that pulling strings was wrong; he was then able to question his own omnipotence, both in solving his son's career problems and in repairing his marriage through working in his garden.

### *The Next Session*

After the trip to Germany, Mr. C came back on Monday pleased that his talk had gone well and relieved that his son was no longer angry with him. In a long, warm, and apologetic e-mail, his son had told him much more of his feelings and plans. However, his son now complained that the patient's aunt, who had given him some money, was trying to control him through expressing an interest in how he used it. The patient was surprised because this aunt was very generous, and had been an ally for him against his father. Mr. C had always been curious about why it was that his aunt, and not his father, had been the one to take him camping when he was a boy. Then, while watching a television documentary about World War II and D-Day, he felt a wave of sympathy toward his father, who had taken part in the landings in Normandy and fought through northern France to Germany. Mr. C thought that camping with his son might have reminded his father of the dangers and anxieties of the war.

I interpreted that the improved relationship he had established with me—perhaps in part because I had not collapsed on Thursday—had helped him to enjoy the weekend. He could partly accept that I did not want to go with him on some of his projects, but he could go on his own, perhaps supported by my confidence in his ability to make his own choices.

Mr. C replied that he had some thoughts about Germany, and reminded me that there had been tension between his mother, who ad-

mired Germany, and his father, who, because of his bitter experiences in the war, had an antipathy to all things German and instead idealized the French. Over the weekend, the Germans had been impressed by his talk, and Mr. C had felt a wave of excitement. Now he wondered if he was siding with his mother against his father.

I suggested that he might think that I, and psychoanalysis as well, had a history connected with the war, and consequently that, like his parents, I might take sides. He said that he realized the Germans had annexed Austria and that psychoanalysis was Austrian and Jewish. He himself had always wanted to study at Heidelberg.

Then he remembered a remarkable day many years earlier when he had been sitting in a café in Germany, near the French border. He had had a good meal and some wine, and wrote what began as some notes for a business venture he was planning. As he wrote, he realized that his writing was being transformed into a personal manifesto. It was long and involved, but it had flowed easily, and he remembered being very impressed with it. But now he had the thought that if he were to look at it, he might see it as nonsense.

After a silence, Mr. C's anger returned and he complained that he felt controlled by his father, who was always trying to cut him down to size. Even the plants in his garden had to be pruned in order to keep them in their place. Then, in a sadder mood, he returned to the documentary about the D-Day landings, in which survivors of the event were interviewed. It was mentioned in the documentary that this would be the last program of its kind because soon there would be no veterans left.

I interpreted that he was now more aware of the end of the analysis, which linked to a time when I would no longer be here. This created a conflict. He could easily see me as controlling and as demanding that he submit to my authority. Then, if he rebelled, he expected a terrible collapse unless he could defeat me. He said that, yes, it was a manic sort of freedom and dangerous. He knew it was connected with fascism and power. He said that he realized his father was getting older, and he would not be there to see what use he made of his inheritance. He said he thought that his own son was wrong to worry about being controlled by his aunt; she was generous and gave him money, knowing that she would not be there to see how it was spent.

I suggested that he was more aware of having regrets. Mr. C did get resentful when he felt that I cut him down to size, but now he was less convinced that his actions and fantasies would lead to a catastrophic loss of love and to a collapse. He had become excited when his fantasies involved an alliance with powerful forces, but he was not so certain now that one of us had to triumph and destroy the other. Instead, he was more aware of my age and of the ending of the analysis, and he felt more free to make use of what he had gained from it when he realized that, in the future, I would not be there to control him.

### *Discussion*

I found it useful to consider the patient's business projects as heroic adventures in which he formed an alliance with an admiring figure, usually his mother, who sustained his omnipotence by confirming his superiority. When he failed to impress his wife, his son, or his business associates, he collapsed into anxiety and chaos. The dominant demand he made on me was to offer him praise and admiration in order to sustain his omnipotence, and when I failed to do this, he felt humiliated and blamed me for cutting him down to size and making him feel small. After a period of chaotic anxiety and self-recrimination, he was able to pick himself up and recover some self-esteem. However, it was always finely balanced as to whether he resumed his omnipotent attempts to recover his superiority, or whether he could learn from the experience and find sufficient satisfactions of a more ordinary kind.

In the second session I have reported, Mr. C described becoming superior and triumphant when the German audience admired his ideas, and he was reminded of the manifesto he had written in the café on the French-German border, which he connected with a sense of freedom and power in alliance with powerful fascist figures. In this omnipotent fantasy, success was based on an alliance with a German-loving mother against a French-loving father, but ultimately involved fantasies of destroying both parents in images connected with Nazi power and cruelty. This made reparation impossible and gave rise to despair and self-recrimination.

## CHALLENGES FOR THE HERO, IF HE WISHES TO RETURN

To move from the omnipotent world of power, triumph, and humiliation to return to the ordinary world of human scale and endeavor involves two challenges. First, the omnipotence must be relinquished and mourned, and second, the relationship with the primary object must be resumed. Both give rise to difficulties.

Before we can relinquish omnipotence, we have to recognize how much pleasure it gives us, and especially when it is erotized, how addictive a hold it can have on the personality. Paradoxically, this seems to be true even when defeats and humiliations are repeatedly experienced—perhaps because of masochistic gratification, but also, I think, because defeat gives rise to renewed fantasies of triumph and recovery. Relinquishment involves saying goodbye to these exciting ups and downs, and the loss is painful and has to be acknowledged and mourned.

The second challenge, namely, that of returning to the ordinary world, also presents problems, usually quite similar to those that led to the rapprochement crisis in the first place. Even if we are able to return to a place in the family that is neither omnipotently inflated nor catastrophically reduced, we are left with the need to address the horizontal gap and to embrace and renegotiate the relationship with our primary objects. This means that we are obliged to tolerate feelings of need and dependence, and it is these that create special difficulties.

In his analysis, Mr. C often restated his longing to come home to an ordinary family, and like Odysseus he never lost the yearning for his wife and home. However, this return, and the relinquishing of omnipotence that went with it, seemed to demand a special form of courage. To support him through this part of his journey required sensitivity to a tenderness within him that, initially, he found effeminate and unacceptable. Mr. C would often repeat how intolerable it was for him to see his father put his arm around his mother's shoulder, insisting that it made him cringe. Like Satan, he could not bear to see them "imparadis't in one anothers arms" (Milton 1674, Book Four, line 506), and he denied that this could be a genuine expression of affection.

Later, he came to think that, although flawed, his parents' relationship did have loving moments, and it was clear that it was precisely such affectionate gestures that he longed to be able to enjoy with his wife. Returning home to a world without omnipotence involved the de-idealization of this kind of scene, and perceiving it as more ordinary meant that it did not seem quite as false and cringe-making.

Of course, these formulations about the trajectory of the hero mostly apply to men, although women, too, may identify with powerful male figures. However, the role of the hero in female development needs separate consideration, which I hope to address in a paper based on Freud's (1937, pp. 250-251) theme of the "repudiation of femininity" (Steiner, in preparation).

### ADAM AND EVE'S ABILITY TO ACCEPT REALITY AND TO TOLERATE THE LOSS OF OMNIPOTENCE

Perhaps it is the return to reality and the acceptance of our place in the great chain of being that requires truly heroic qualities. We have to accept that, with the recognition of difference, envy is unavoidable, and disillusionment and humiliation are part of the experience of separateness. In this sense, it is Adam and Eve who are the real heroes of *Paradise Lost* (Milton 1674). Unlike Satan, they gradually accept their humanity and reconcile themselves to living once more in the ordinary real world. No longer in paradise, they must accept the need to work and suffer, and—most important of all—if no longer omnipotent, they have to accept the reality of their eventual death.

The final departure from Eden is both sad and splendid—partly, I think, because we see their obedience as a submission to reality rather than a compliance with authority:

They looking back, all th' Eastern side beheld  
Of Paradise, so late thir happie seat,  
Som natural tears they drop'd, but wip'd them soon;  
The World was all before them, where to choose  
Thir place of rest, and Providence thir guide:

They hand in hand with wandering steps and slow,  
Through Eden took thir solitarie way.

[Book Twelve, line 649]

Certainly, the conflict is never finally resolved one way or the other, but the myth of the hero can help us recognize that it is important to take on the monsters of our inner fantasy world in order to go through experiences that enable change to become more possible.

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## ON LOVE AND MELANCHOLIA IN MARGUERITE DURAS'S AUTOFICTION

BY VASSILIKI N. SIMOGLOU

*In the Durassian melancholic atmosphere, past and present, fantasy and reality come together as one. This paper addresses the themes of love and destruction in Marguerite Duras's life that pervade her oeuvre, allowing us to discern a melancholic structure within her autofiction. Writing down her melancholia—the impossible mourning of a loved object—Duras captures nothingness and loss—in order not to die of love. In a constant exchange with her readers, she searches for herself and delivers herself to her readers. This renewable creative process of writing enables her to engage in an ongoing experience of identity reconstruction, in a way similar to the patient in psychoanalysis re-creating his/her life's fiction.*

**Keywords:** Love, destruction, melancholia, loss, lack, desire, Marguerite Duras, autofiction.

### INTRODUCTION

A hundred years after Marguerite Duras's birth, "depression" dominates contemporary subjectivity, just as "hysteria" did in Vienna circa 1900, while a multitude of more or less scientifically proven treatments seem apt enough to provide each consumer with an honorable solution. The depressive subjects of our time, struggling to fill in the void of their desire, try every possible treatment without taking the time to reflect upon their sorrow. Devoid of desire, they long for love; unconditional, narcis-

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sistic, idealized, “true” love transcends the relationship to the object, substituting cathexis with dependency. On the couch, it is the vicissitudes of love, its failures, its pains, that subjects deliver more and more, being confronted with a sense of helplessness and the loss of meaning characteristic of the melancholic position.

Marguerite Duras (1914–1996)—the French novelist, screenwriter, playwright, film director, and chronicler—filters destruction through love and conveys melancholia, the *malady of death* (Duras 1982), as an ever-contemporary tragedy, public and private. Within our postmodern neoliberal societies, her multifaceted *oeuvre* still invites psychoanalytic attention. Love, be it platonic, incestuous, impossible, lost, ravaging, deadly, passionate, real, unconventional; sensuality, (sexual) desire, *jouissance*, lust, (willful) prostitution; childhood, siblings, loneliness, family, mother; poverty, misery, the sea, separation, absence; waiting, memory, secrets, remembering and forgetting; hatred, crime, darkness, alcohol, death, destruction, war: all these themes are played out in her novels and in her own life story.

Throughout her adult life, Duras continued to navigate between autobiography and fiction, taking her place within a new genre that Doubrovsky (1977) called *autofiction*. Melancholia, the impossible mourning of a loved object affecting the subject in his/her very structure, holds a specific place within Duras’s autofiction. I propose the following hypothesis, which is inevitably an interpretation, shaped by my subjective reading: Duras’s autofictional writings exemplify (her) melancholia in that they allow her to write about love and destruction, relegating her existence to a nothingness that she tries to capture through writing.

In studying melancholia in Duras’s works and in her life, and in noting the parallels between these two, the themes of love and destruction emerge as constituting her melancholia. I will focus on *L’Amant* (1984), her most significant autofictional novel, as exemplifying a melancholic problematization, in order to highlight the act of writing as an always renewable opportunity for identity reconstruction. My approach to psychobiographical criticism aims at a deeper understanding of the dialectical relation between the artist as an individual and the creative process in which her subjectivity finds an expression.

It is in this constant exchange with her readers—at the same time both searching for herself and delivering herself to her readers—that I

found myself drawing a parallel between Duras's writing and the analytic situation: the patient by delivering his/her psychic reality, actually reconstructs it, each formulation being a reformulation.

Interestingly, Jacques Lacan acknowledged in 1965 that "Marguerite Duras turns out to know without me what I teach . . . that the practice of the letter converges with the use of the unconscious" (p. 193).<sup>1</sup> Isn't it the practice of the letter<sup>2</sup> as it is marked by the effects of the unconscious that inaugurates the creative process—in psychoanalysis as in literature? Later in this paper, I will present a clinical vignette to illustrate how autofiction can be played out in the clinical encounter.

## MELANCHOLIA AND THE PROBLEM OF DESIRE

According to Freud's definition in his foundational text *Mourning and Melancholia* (1917), melancholia is

. . . a profoundly painful dejection, cessation of interest in the outside world, loss of the capacity to love, inhibition of all activity, and a lowering of the self-regarding feelings to a degree that finds utterance in self-reproaches and self-revilings, and culminates in a delusional expectation of punishment. [p. 244]

Freud clearly distinguishes mourning, a normal reaction to the real loss of a beloved person, from melancholia: "In mourning it is the world which has become poor and empty; in melancholia it is the ego itself" (p. 246). He specifies the mechanism of melancholia as follows:

An object-choice, an attachment of the libido to a particular person, had at one time existed; then, owing to a real slight or disappointment coming from this loved person, the object-relationship was shattered. The result was not the normal one of a withdrawal of the libido from this object and a displacement of it on to a new one, but something different . . . it was withdrawn into the ego. There, however, it was not employed in any unspecified way, but served to establish an identification of the ego

<sup>1</sup> Unless otherwise stated, all translations from works originally published in French are my own.

<sup>2</sup> This is the literal translation of Lacan's phrase, *la pratique de la lettre*.

with the abandoned object. Thus the shadow of the object fell upon the ego, and the latter could henceforth be judged by a special agency, as though it were an object, the forsaken object. [1917, pp. 248-249]

Abraham and Torok (1978) identify the mechanism of incorporation of the object as determinative of melancholia. They view incorporation as the fantasy of introducing, maintaining within or expelling from the body, of acquiring, keeping, or losing an object, either whole or in part, in an effort to respond to a psychic situation of imposed loss. Incorporation thus accomplishes—literally—what the subject cannot achieve symbolically:

Not wanting to “swallow” the loss, the subject imagines swallowing what has been lost, in the form of an object . . . . To absorb what the subject is lacking . . . is to deny mourning and its consequences . . . to refuse to know the true meaning of loss, the one that would imply that, once you know it, you will never be the same again; briefly, it is to refuse its introjection. [p. 261]

Unable to supplement the lack with language and signify how helplessly in pain he/she is, the melancholic subject becomes a sort of crypt:

All the words that will not have been said, all the scenes that will not have been remembered, all the tears that will not have been cried will be swallowed, together with the trauma causing the loss. Swallowed and preserved. The unspeakable mourning installs a secret cave into the subject. In this crypt lies alive—reconstructed out of memories of words, images, and affects—the object corollary of the loss, as a full person, together with the traumatic moments—real or imagined—that rendered introjection impossible to practice. [Abraham and Torok 1978, p. 266]

Neither actually lost nor truly missing, the melancholic’s encrypted object is longed for, and waiting provokes restlessness. How can one experience and act on desire, when lack cannot be experienced and assumed?

Throughout his teaching, Lacan isolated the speaking subject as a desiring subject since it is affected by a fundamental lack. Desire cannot

be experienced without the experience of lack, according to Lacan. This lack is no other than the lack of the object. The first other's primary presence, integrated and then lost, introduces the subject to the symbolic order, the Other, and becomes a precondition for the capacity to mourn and desire. By demonstrating how object loss and the feeling of lack it creates underpin the subject's desire, Lacan (1956–1957) identified the *object a* as the cause of desire, forever lost and unattainable. Serving as a symbol of the lack, the *object a* is the pivot around which desire is organized (Lacan 1964).

In this perspective, melancholia may be thought of as *a malady of desire*: the experience of loss is not integrated, and therefore lack cannot be experienced and the object cannot be constituted. Thus, melancholia is characterized by “impossible mourning of the maternal object” (Kristeva 1987, pp. 19–20), to the point that the subject identifies with the *object a*. When not recognized by reference to the Other, “it is impossible . . . for the melancholic to articulate a demand” (Hassoun 1997, p. 60), out of which desire would emerge.

This depression takes place, as Green (1983) demonstrated with the dead mother complex, “in the presence of the object, itself absorbed by mourning” (pp. 255–256). With her deadly presence or living absence, the mother is experienced as dead. She carries away,

. . . together with the decathexis whose object she had been, the greatest part of the love she had been cathected with before being mourned . . . . She had been buried alive, but her tomb itself had vanished. The hole lying in its place weighed down the subject with loneliness . . . [resulting in an] identification with the hole opened by decathexis. [Green 1983, p. 262]

In other words, this is an identification with the crypt, where the *object a* lies intact. Impossible loss of the object modifies “the signifying bonds attached to it, and consequently to the outside world in general” (Kristeva 1987, pp. 19–20). Thereafter, the melancholic subject withdraws from the world by means of self-destructiveness, even to the point of suicide, in order to create a lack in the actual world.

If the object's structural function is precisely for it not to be found so that desire can flow, the suffering characters in Duras's autofiction

seem to refuse to lose the object, unable as they are to stop letting go of each other or leaving. With Hassoun (1997), I believe that Duras's literary creations are marked by melancholia as "an attempt to create a proper object that will allow for the work of mourning to be accomplished through the text that is written, published, and thus offered to the Other" (p. 125). Insofar as it enables the writer to postpone separation, writing renders waiting bearable.

## MARGUERITE DURAS: A LIFE, A STORY

The considerable amount of contradiction in Duras's biographies, which she nourished with her frequent public appearances and interviews, contributes to the blurring between her life and the stories she recounted in her books, making it difficult to obtain consensual data on her life history. Among her biographies, one by journalist-historian Laure Adler (1998), and the most recent by Jean Vallier (2006–2010), offer the best-documented and most comprehensive overview of who Marguerite Duras was; they are my core references here.

Marguerite Duras was born Marguerite Donnadieu in Gia-Dinh, a suburb of Saigon, in French Indochina—now South Vietnam—on April 4, 1914, a few months before the outbreak of World War I. Her parents, schoolteachers who had left France seeking a better life in the French colonies of Indochina, had both lost their first spouses to death and were subsequently married to each other in 1909. Their first two children were boys: Pierre, the "older brother," born in 1910, and Paul, "the little brother," who arrived in 1911, three years before Marguerite's birth.

Infected with malaria when Marguerite was barely one year old, her father had to be repatriated to France for treatment. Following about two years in France, the family returned to Hanoi in 1918. However, the father was still quite ill and again left for France in 1921, this time alone and never to come back. Marguerite was seven when he died in the village of Pardaillan, France, having asked to be buried in his first wife's family vault.

A few months after the father's death, the family left Indochina and returned to France. The period of time during which they lived on the property her father had bought became the setting for Duras's first two

novels, *Les Impudents* (1943) and *La Vie tranquille* (1944).<sup>3</sup> But only two years later, Marguerite's mother took the family back to Indochina and purchased land in Cambodia with the aim of developing it. She found herself owning land impossible to cultivate, however, and lost her savings, trying in vain to have walls built to protect her rice plantations against the annual encroachment of the sea. Memories of these experiences led Duras to her first literary success, *Un barrage contre le Pacifique* (1950). Although the novel depicted poverty and tormented family relationships, her mother was not a victim of colonialism who lost everything, nor were the family relationships as troubled and violent as Duras portrayed them in her fiction, according to Vallier (2006–2010).

In 1931, Marguerite, her mother, and "the little brother" moved to Paris, the older brother having already relocated there for health reasons. Marguerite began college studies that she would eventually complete in Saigon before returning to Paris permanently in 1933, where she then studied law. After obtaining her degree in 1937, she was employed at the Ministry of Colonies during the Vichy government, where she was asked to write a military-colonialist propaganda on the French nation. Later, she worked for a censorship agency that dealt with printed items, an organization that came under the control of the Germans during the Nazi occupation.

Duras married writer Robert Antelme at the age of twenty-five, lost a child at birth, and a few months later her "younger" brother died of bronchopneumonia. These two ravaging losses impregnated her first novels, with her writing already functioning to re-create what had actually been experienced through the introduction of fantasmatic material. In a much later novel, in a character called Elisa (Duras 1969), she elaborated her grief over the lost baby.

During the same period, Duras met Dionys Mascolo, with whom she had an affair and joined the French Resistance led by François Mitterand in 1943. It was the beginning of a long friendship and lifelong political engagements. Her husband Robert Antelme, already a member of the resistance group, was arrested by the Nazis in 1944; he survived the concentration camp of Dachau and was liberated by Mitterand a year

<sup>3</sup> These two early works have not been translated into English.

later. In a later novel (1985), Duras recounted the profound suffering of the period of awaiting his return.

After Liberation, Duras joined the Communist Party, only to be expelled in 1950 for so-called deviance. Despite her disillusionment with communism once it took a Stalinist turn, she remained a leftist throughout her life, strongly opposed to war and social injustice. In the creative cultural and political melting pot of the postwar period, while in her thirties, she was already part of the Parisian intellectual circle.

In 1946, she divorced Antelme, and a year later she had a son with Mascolo, from whom she separated in 1956. After the war, Duras wrote for the magazines *France-Observateur* and *Libération*, demonstrating that “within the psychic microcosm of the subject, private pain absorbs political horror” (Kristeva 1987).

How can one understand Duras’s politically cooperative stance during the German occupation of Paris and her relatively late support of the resistance movement—three years after the crimes committed during occupation? How could she possibly not have known what was happening? Could she have been opportunistic, self-centered, indifferent? If her early position is considered “a call for parental recognition” (Vircondelet 1991, p. 40), her change of allegiance can be thought of as a manifestation of remorse. Her late realization was followed by a guilt complex that haunted her until the end of her life, which can be seen running through her works; with the reminders of the genocide found in her novels, she identified herself with the suffering of the Jewish people. For Duras, along with the political trends of her time, “always, writing is there—replacing everything; rather, absorbing everything. Threat, promise, fear, challenge, failure” (Ligot 1992, p. 150).

After she met Gérard Jarlot (the lover with whom she started drinking heavily), Duras’s extraordinary talent continued to unfold. It was with *Moderato Cantabile* (1958), *Hiroshima Mon Amour* (1960), and other titles—such as *Le Ravissement de Lol V. Stein* (1964) and *Le Vice-Consul* (1965)—that Duras reached the full potential of her prose and proved herself a major figure of contemporary literature. This period was marked by her active participation in the sociopolitical events of May 1968 and the feminist movement. From 1970 to 1980, she concentrated on theatrical playwriting and filmmaking, becoming both the writer and

the director of numerous feature films, such as *India Song* (1975) and *The Lorry* (*Le Camion*, 1977).

In 1980, she met Yann Andréa, a man thirty-eight years younger than she, who moved in with her and ended up living with her until her death in 1996. Their tumultuous relationship and her alcohol addiction pervade Duras's later creative period; she devoted an entire chapter to alcoholism in one of her novels, in which she wrote: "Drinking doesn't necessarily mean wanting to die, no. But you cannot drink without thinking you are killing yourself . . . . Alcohol is no consolation whatsoever, it doesn't furnish the individual's psychological spaces, it doesn't replace anything but the lack of God" (Duras 1987, p. 22).

Devastated by alcohol, Duras eventually undertook detoxification treatment in the American Hospital of Paris in 1983. When she later spoke openly about her alcohol addiction in an interview, she connected it to a spiritual quest leading to death or to challenging death: "In alcohol, it is as if God existed. Alcohol is God. How the world is beautiful, resplendent. But for sure alcohol leads to death" (Alphant and Duras 1984). She admitted having written *La Maladie de la mort* (1982) "in a bath of alcohol" but was alcohol-free while writing *L'Amant* (1984).

The more the reader delves into the Durassian opus, the more that boundaries between objective reality and subjective, psychic truth become indiscernible. In the same way, there seem to be no borders between her life events being transformed into novels, her novels into theatrical plays or screenplays, and her journal articles into novels—all these merging into the formation of her persona and culminating in *L'Amant* (1984). Here Duras tells a story of love for a lover, but the novel is even more a story of love for the mother. Its publication not only won her the prestigious 1984 Prix Goncourt; it also had a print run of around 3,000,000 copies, and there were more than 50 translations into 37 languages, garnering exceptional worldwide success. She became a cult author, a society phenomenon; her writing evoked the highest praise as well as ferocious critiques.

Vallier's (2006–2010) well-documented research refutes many of the myths that were long believed about Duras—including early poverty, her mother's preference for the older brother, and avowals of being prostituted and beaten by both her mother and her brother, as Duras de-

scribed in *L'Amant* (1984) and as Adler (1998) wrote about in an earlier biography. Instead, Vallier (2006–2010), in discussing the author's relationship with her mother, stresses the young Marguerite's feelings of not being loved enough by the mother and shame over the mother's attire and bad luck in business.

Although Marguerite's mother lived in Indochina during World War II, she moved to Paris in 1949 and was shocked to discover that her daughter had become a communist. She did not recognize herself as portrayed in Marguerite's novels *Un barrage contre le Pacifique* (1950) and *Des journées entières dans les arbres* (1954), and in fact was infuriated with her daughter for humiliating her in this way; their relationship was ruptured once and for all. Following this, the mother arranged to leave the majority of her assets to the older brother; she died in 1956.

If the mother figure is central in Duras's books and plays—portrayed as courageous and obstinate, loving and hating, worshipped and denigrated, all at once—there is no figure of a symbolic father in her writing; his authority is undermined (Marini 1977). In the final pages of *La Vie matérielle* (1987) can be found one of the few occurrences of the signifier *father* in Duras's *oeuvre*. In describing her acute alcoholic withdrawal hallucinations, she writes about a man whom she keeps seeing in her apartment, “either a Jew or my father . . . . He is like someone I should recognize and that I do not recognize . . . . He knows something about me that I cannot know” (Duras 1987, pp. 157–158).

How does one recognize a father when one is not recognized by him? Identifying herself with the Jewish people through her father's name, *Donnadiou*—meaning *give to God* in French—Duras would continue to be haunted by this father whom she could not stop losing, who so often departed to France for his treatments, who disappeared one day in a boat and whom she never saw again, without the closing rites of burial or mourning. Significantly, she wrote under the pen name *Duras*, the name of her father's homeland in France, forever anchoring her art in paternal identification.

The long-awaited recognition of her work was soon followed by severe physical distress, which continued until her death at her apartment in Paris in 1996. “For a whole lifetime I wrote,” she writes in her last book with the premonitory title *C'est tout* (1995). “My mouth is tired.

There are no more words. I have nothing left. No more paper" (p. 46). She wrote her life *for* life—in order to live.

I believe that Duras's all-consuming writing about a love so unbearably lost that it became destructive allowed her to recount her melancholia and thereby remain psychically alive. For her, writing fulfilled a function of identity reconstruction, and, like the sea wall, it would be built and rebuilt while remaining a chimera.

## LOVE AS LOSS AND DESTRUCTION

Suffering from the so-called *malady of desire*, Duras's melancholic characters are "caught in the swirls of love impossible to domesticate" (Lacan 1965, p. 197). Through these characters, she does not tell love stories; she tells the sad story of love, a love where the object is everything and the subject is nothing, on the verge of death. Silence, words, glances, sounds account for the brief instant of the amorous encounter that does not need to be consummated, for it consumes the ones subjected to it. Impossible and self-destructive, the love Duras writes about is one that takes over her characters not to make them feel fuller or happier, but on the contrary, to expose them, naked, to their irreversible incompleteness.

The quest for the missing love object wears out Durassian characters: love for them is prohibited, a love of the flesh that the mind does not approve of, leaving them with no option other than to surrender to it. Defended against with hatred, it is a destructive, deadly love, and the characters can never have enough of it. Whether they deny it or succumb to it, they will be left emptied, sorrowful, indulging in nothingness.

In *Hiroshima mon amour* (Duras 1960), which describes a 24-hour love affair between a French actress and a Japanese architect, love and death are more interchangeable than ever. The text returns to the then-recent past to trace the horror of World War II Hiroshima via a particular love affair, one that was bound to end. If the Japanese man carries Hiroshima within himself as the signifier of pain, destruction, and death caused by the release of the atomic weapon, the French woman carries within herself Nevers, the French village that was her homeland, as the signifier of her first love. During the German occupation, she had

fallen in love with a German soldier who was then assassinated during the liberation, and she was severely punished by her family and society for having committed the dishonor of loving the enemy.

Forever losing the object makes the subject feel as if the lost object were indeed the one she desired. When the missing object is crystallized in this way, loss must be distinguished from lack; rather than producing lack, loss fills it in and obstructs its function. Therefore, to love, for the subject in this novel, is to love a dead man, and her desire is desire for a dead man, a desire for death. In a set of crossed projections and transferences, in the context of this brief and impossible love affair in a Hiroshima ravaged by war, the heroine's Japanese lover's body merges with the corpse of her first love, the German soldier.

Hiroshima and love are no longer distinguishable, and death and destruction melt together with love, endowing it with irreversible ambiguity. "Not having died as he did, having survived their dead love, she becomes as though dead" (Kristeva 1987, p. 239), and the heroine can love only within death. "Mourning becomes impossible and transforms [her] into a crypt inhabited by a living corpse" (p. 241): what she struggles to hide, to encrypt, is an open wound caused by the loss of the lover whom she cannot let go of. Not only does the crypt shelter this narcissistic wound that does not heal; it also impedes the process of internalization that Loewald (1962) described as a transformational process enabling separation. "To lose or to destroy, to lose memory thereof, to wish to destroy the object of love so as not to have to lose it" (Laufer 2005, p. 244)—such is the process of the subject's destructiveness, fixating her in a permanent state of mourning.

Like Duras's alcoholism, defying death and destroying her body from within, destructiveness integrates political traumas, hatred, and guilt, and is inextricably linked to the amorous state. Hence the erotization of suffering that compels Duras to write, operating as a defense against the death instinct (Kristeva 1987, p. 30): "I feel crushed from existing. It makes me want to write" (Duras 1995, p. 35). To write is to convey to the Other the impossible experience of lack, characteristic of melancholia:

The melancholic is someone who has not experienced loss and a primary subjectifying mourning . . . . Something was sacrificed

for him, but nothing was given to him. The gift, that is to say the loss of the other in the Other, could not manifest itself to him. He could not have access to it. And this impossibility is one he cannot recover from. [Hassoun 1997, p. 98]

Excluded from her mother's legacy, Duras cannot recover from the impossible gift of love, whose ambivalence she tries to symbolize in *L'Amant*:

I think I have told of the love we had for our mother, but I do not know if I have told about the hatred we had for her, too, and the love we had for each other and the hatred, too—terrible, in this common history of ruin and death that was this family's . . . and which still escapes my full understanding, which is still inaccessible to me, hidden in the deepest part of my flesh, blind like a first-day newborn. It is the place on the border of which silence begins . . . I never wrote, believing I did; I never loved, believing I loved; I never did anything but wait behind the closed door. [Duras 1984, pp. 34-35]

Waiting behind a closed door to get what the mother was unable to give, finding refuge from the ruined family behind the closed door of her fantasmatic world, Duras allows her writing to reveal that what lies at the heart of her preoccupations is the impossibility of loving the mother and being loved in return.

## THE MOTHER FIGURE IN *L'AMANT*

With *L'Amant* (1984), Duras returns to her youth in Indochina as it had been depicted thirty-four years earlier in *Un barrage contre le Pacifique* (1950) and radically exposes the familial constellation, marked by an omnipotent mother and an absent father. She thus demonstrates melancholia in her autofiction in an unprecedentedly truthful way, admitting even in a cult television interview with Bernard Pivot (1984): "It is the first time I am not writing a novel. All my other books are fictions."

In *L'Amant* (1984), a mature woman recollects her youth in colonial Indochina. On a ferry crossing the Mekong River, a wealthy, 27-year-old Chinese man approaches a petite, 15-year-old white girl. Intrigued by her provocative attire, he takes her in his limousine to his luxurious

apartment, where he initiates her to love. Characterized by the ambivalent structure of the girl's desire, "by her simultaneous attraction to and repulsion of the racialized others of the French colonies" (Ruddy 2006, p. 77), this love story is undermined by the young man's father, who has planned for his son to marry a wealthy Chinese girl, while the girl's family acquiesces and gradually accepts the money that the girl begins to bring home. Central to the novel's plot, the lovers' prohibited relationship sets the background for the unfolding of the girl's relationship with the first love object, the mother.

The Chinese lover becomes the girl's confidant; she unveils her family's story and her own sorrow, her love for him joining the love for her family in all its ambivalence:

He asks me to tell him what I am thinking. I say that I am thinking of my mother, that she will kill me if she finds out the truth . . . I tell him that I am in the sorrow I was waiting for and that comes from within me. That always I have been sad. That I can see this sadness in the photos of my childhood. That today this sadness, in the same way I can identify it as having always been mine, I could almost give it my name, it resembles me that much. [Duras 1984, pp. 56-57]

Sadness becomes the primary signifier in the place of the Other. Speaking to the lover allows the girl to create "a concrete holding space where a metaphorical space can develop" (Kristiansen 2010), a space where she will try to mourn.

I cry. He places his head over me, and he cries at seeing me cry. I tell him that in my childhood, my mother's misery occupied the place of dreaming. That the dream was always my mother and never the Christmas trees, always her, only her. [Duras 1984, pp. 58-59]

In crying out the bond to the mother and its lack, the girl strives to symbolize it; but how can words be strong enough to transcend the mother's despair, which dominates the imaginary mother-daughter relationship?

The girl identifies with the mother instead of with the mother's desire that could be directed elsewhere, introducing otherness into their

relationship. She thus becomes the (m)other's object, rather than the subject of her own desire, and flirts with madness:

In the end . . . it's right here that I can clearly see my mother's madness for the first time. I see that my mother is clearly mad . . . . That I had never seen my mother in the state of being mad. She was. At birth. In the blood. She was not sick from her madness; she lived it like sanity. [p. 40]

With maternal insanity being "lived like sanity," the girl escapes into fear, a fear so profound that it will erase the mad mother. But by deleting the mother, the daughter at the same time takes her place. She substitutes herself for the mother and becomes insane:

I stared at my mother. I hardly recognized her . . . . There had suddenly been, there, next to me, a person sitting in my mother's place, it was not my mother, she had her countenance, but never had that been my mother . . . . There was a freshness in her traits, in her look, a happiness that she repressed because of a shyness she was accustomed to . . . . I knew that nobody was there in her place but herself, but that this irreplaceable identity had vanished, and that I had no way to make her come back, make her begin to come back. Nothing proposed itself to inhabit the image. I became mad in plain sanity. Time to shout. I shouted . . . . My mother turned. [pp. 105-106]

In this dissociative experience, fear turns into strangeness; the mother is no longer recognizable in the mirror. Perceiving the mother as present yet absent can be thought of as an experience marked by the dead mother complex: "a mother who remains alive, but who is, so to speak, psychically dead in the eyes of the young child in her care" (Green 1983, p. 247)—a primordial experience in which the mother is proximal but not psychically connecting with the child as a separate entity of its own.

The characters of *L'Amant*, unable to break the ambivalent bond to the mother, become susceptible to the malady of fear and death:

I was afraid of myself, I was afraid of God. When it was day, I was less scared and death seemed less serious. But it wouldn't let go of me. I wanted to kill my elder brother, I wanted to kill him,

manage to prove him wrong, once, just once and watch him die. It was to take away from my mother the object of her love, this son, punish her for loving him so much, so badly, and mostly to save my little brother, I believed so too, my little brother, my child, from the living life of this brother put over his, from this black sheet over daytime, from this law represented by him, enacted by him, a human being, and which was an animal law, and which every instant of every day of the life of this little brother put fear in this life, fear which one day reached his heart and made him die. [pp. 13-14]

"The little brother died in three days of bronchopneumonia; his heart didn't make it. It is at this very moment that I left my mother . . . She died, for me, of the death of my little brother. My elder brother, too" (p. 37).

The little brother's death, so unbearably painful that it becomes contagious, designates the mother and the elder brother as responsible for his death and makes them die, too.

The little brother. Dead. First it's unintelligible and then, suddenly, from everywhere, from the depth of the world, sorrow comes, it recovered me, took me over, I couldn't recognize anything, I never existed unless for sorrow, which one, I didn't know which one, if it was the one of having lost a child a few months ago that was coming back or if it was a new sorrow . . . From the moment he was dead, himself, the little brother, everything had to die after him. [pp. 126-127]

The lost brother is introjected, ensconced in the same crypt where her stillborn child lies. "From the moment I knew that my little brother's body was mine, too, I had to die. And I was dead. My little brother assembled me to him, he drew me to him, and I was dead" (pp. 128-129).

The crypt attracts and disperses death; it makes it impossible to mourn, remember, and forget. There is no possible burial for the stillborn child, the brother, the father—all of them so prematurely lost; even feasting is associated with burial, and the failure of the Symbolic dominates childhood memory: "Not only no feast was celebrated in our family, no Christmas tree, no decorated cloths, no flower ever. But also no dead, no burial, no memory" (p. 72).

Weighed down by incorporated sorrow, this family, the family of the sea wall, is one whose members are accustomed to living with walls between them. Language cannot compensate for the suffering that overwhelms them:

Never good-morning, good-night, Happy New Year. Never thank you, never speak, never need to speak. Everything remains speechless, distant. It is a family made of rock, petrified in a thickness with no access whatsoever. Every day we try to kill ourselves, to kill. Not only do we not speak to each other, we don't even look at each other . . . We are together in a fundamental shame of having to live life. [p. 69]

Shame and guilt intertwine, forming the background noise of the relationship. Anything that will ever be built, will be built on this frail foundation.

It's here that we are in the deepest part of our common history, that of being, all three of us, children of this person of goodwill, our mother, that society assassinated. We are on the side of this society, reducing our mother to despair. Because of what we have done to our mother—so lovable, so trustful—we hate life, we hate ourselves. [p. 69]

Introjection of the mother's despair is associated with feelings of guilt for having damaged her. Could this also be a sign of an identification with the aggressor (Ferenczi 1949), related to the sufferings of the Jewish people?

Guilt takes over the entire capacity to cathect and demolishes it, implying that separation has not been achieved since it was experienced as a ripping off. Life is not worth living, and hatred is the only way to relate to others and continue to live.

Our mother couldn't have imagined what we would have become following the spectacle of her despair . . . Had she imagined it, how could she have concealed what had become this history of hers? Make her face, her look, her voice, her love, lie? She could have died. Delete herself. Disperse the community impossible to live in. Separate the elder from the two younger ones. She did not do so. She hadn't been wise enough, she had been inconse-

quent, irresponsible. She had been all that. She lived. We loved her, all three of us, beyond love. Because of the very fact that she wouldn't have, that she couldn't shut her mouth, hide, lie, however different all three of us were, we all loved her the same way. [pp. 69-70]

The mother did not erase herself, nor did she respond to her daughter's calls. "Behind the complaints related to the mother's actions loomed large the shadow of her absence" (Green 1983, p. 262). When encountering emptiness in addressing the Other, the subject feels as though it has been dropped. This vertiginous fall, a failure of the symbolic function, will be replaced in Duras by self-destructiveness and its corollary, a constant need for self-creation, rendered possible through her autofiction.

## AUTOFICTION: BETWEEN CREATIVE PROCESS AND CREATION OF ONE'S SELF

*Autofiction* is a term introduced by Doubrovsky in his novel *Fils* (1977) as a "fiction of events strictly real" (p. 10). He defines this genre as the fiction an author decides to give to him-/herself, "*incorporating*, in the full sense of the term, the experience of analysis" (Doubrovsky 1980, p. 77, italics added).

In proposing to study Marguerite Duras's autofiction, I engage in a psychobiographical criticism whereby the relationship between author, reader, and text is considered an interdependent, mutually enlightening one. I propose that, for Duras, the creative process merges with the creation of one's self, in a way similar to the psychoanalytic experience.

Duras's creative process, taking place within an interplay of disoriented space and chronology, encompasses a process of transformation of lived reality into tragedy and/or myth, through writing. Real events are simultaneously the creative process's source and its aim. In this respect, I agree with Segal's (1952) statement about psychoanalytic aesthetics, when she argues that an artist's success in creating a tragedy depends on his being able to "fully acknowledge and express his depressive phantasies and anxieties," accomplishing "work similar to the work of mourning in that he internally re-creates a harmonious world which is

projected into his work of art" (p. 204). Through this reestablishment of harmony, the aesthetic experience can become an experience of catharsis, ensuring a form of therapeutic action within autobiography.

However, I consider that this is not the case in Duras's autofictional writing: its uniqueness lies in the fact that her art does not aim at catharsis as repetition and relief; it is rather a quest for elaboration and psychic integration,<sup>4</sup> and as such it participates in an ongoing process of identity reconstruction.

"I answered her that what I wanted to do above all was to write, nothing else, nothing," says the young child to her mother (Duras 1984, p. 31). If writing is done in opposition to the mother—to let go of her, but also to join with her—then, in meeting up with her again, "the narrated story cannot be told once and for all; it never stops being transformed; the mother's image never ceases to change under the gaze questioning it" (Ligot 1992, pp. 152-153).

I propose that the sea wall introduced in *Un barrage contre le Pacifique* (1950) becomes a metaphor for the act of writing: "When I write, I am of the same insanity as in life. I join masses of rock when I write. The rocks of the Sea Wall" (Duras 1995, p. 20). A solid wall could represent a radical separation from the mother, between fact and fantasy; instead, Duras's sea wall cannot hold back the Pacific and is bound to be reconstructed ad infinitum. Faced with collapsing walls, the writer not only narrates; she demolishes and reconstructs.

The propensity for reconstruction can be detected in another feature of Duras's writing, namely, that her novels are often already contained in a different form in previously published works. She tends to revisit previous plots and characters, sometimes providing them with a different focus. For example, in the trilogy of *Un barrage contre le Pacifique* (1950), *L'Amant* (1984), and *L'Amant de la Chine du Nord* (1991), and in the sequence *Le Ravissement de Lol V. Stein* (1964), *Le Vice-Consul* (1965), and the screenplay of the film *India Song* (1975), Duras seems to be rewriting the same story and/or reinventing the same characters.

The author gives a reason for these re-creations in *L'Amant* when she writes: "I've written a lot about these people of my family, but while

<sup>4</sup> For a consideration of psychoanalytic aesthetics in terms of elaboration and psychic integration, see Hanly (1986).

I wrote, they were still alive, the mother and the brothers, and I wrote around them, around these things without going to the bottom of them" (1984, p. 14). She eventually gets to the bottom of them through her unique writing style, which incorporates expressions taken from everyday life, lengthy phrases, last-minute additions to prepositions unprepared for them (by which she confers a totally different, unexpected meaning), superlative and overly sophisticated words placed alongside trivial expressions, an artificial and troubled grandiloquence, shifts between first-person narration and third-person narration, named protagonists alongside those who remain unidentified . . . All these stylistic features synthesize Duras's autofiction as profoundly depressive, a type of writing in which sorrow is reduced to a fundamental tension, and inner torment is projected onto the page via tormenting language.

In a similar way, Lacan (1975–1976) reinvented the *sinthom* by introducing it as the ancient way to write what would later be written as *symptom*. Lacan taught that novelist James Joyce *dislocated language*, giving it a different usage, one far from ordinary:

In the continuous progress that constituted his art, it is difficult not to see a certain relationship to speech that is increasingly imposed on him—namely, this speech that has just been written, to break it, demolish it—to the point that he ends up dissolving language. [p. 96]

Joyce's writing thus propels us to reconsider writing itself, since "it is through writing that speech is decomposed by imposing itself," in a deformation leading to an ambiguity: "does writing dominate or is it dominated by the phonemic properties, the polyphony of speech?" (Lacan 1975–1976, p. 97).

"I tell things as they arrive to me, as they attack me, as they dazzle me," Duras said to Pivot (1984). This treatment of language in Duras—of being struck by it, defined by it, and appropriating it—is not so different from the use of language in the practice of psychoanalysis.

For the fact is, as Duras and . . . [Lacan] insist with equal force though in different ways, the reader/writer couple is not a two-some but a threesome ("il faut se compter trois"), and the third party is none other than language itself, the Absolute Other. [Lydon 1988, p. 368]

It is this address to the Other of the symbolic order that is commonly shared by Duras in her writing and the patient who draws from the well of his/her unconscious during the analytic situation. Even though language is used in the psychoanalytic process in a specific way, inventing a means of communicating that is absolutely personal to that patient at that moment in the analysis (Ogden and Ogden 2013)—thus making therapeutic action possible via the working through of transference and the analyst's interpretations—I believe that these latter factors, too, can be thought of as effects of language. For how else can interpretation and transference take place if not within language?

Beyond any therapeutic goal—such as sublimation allowing for re-direction of an instinctual drive, or, from a Kleinian perspective, reparation following attacks on the good object (Klein 1940)—Duras's creative process emerges as a foundational act of subjectivity in the sense of re-creation of the self within a melancholic structure.

## CLINICAL VIGNETTE<sup>5</sup>

With the following vignette, I will try to show how the clinical encounter becomes a space enabling the subject's identity reconstruction through the "writing" of his or her own autofiction.

I first met B in the psychological support service of the infertility clinic where I was working.<sup>6</sup> She has undergone two failed in vitro fertilization (IVF) cycles and is advised to turn to egg donation IVF. She is married to a man whom she does not desire—married because she was "tired of begging for love—this had to stop"; she "needed to get married" and this man proposed to her.

B always longed to have a baby, and the couple turned to IVF primarily because of the lack of sexual relations between them. Her history of abortions while in passionate, tumultuous relationships with men who "failed" her and let her go emerged rapidly in the treatment; she made

<sup>5</sup> Ethical issues of anonymity have been assessed on the basis of Gabbard's (2000) recommendations; the strategy chosen to protect the patient's privacy has been the disguise of identifying elements.

<sup>6</sup> This work was also part of my doctoral research on oocyte donation failures at the Doctoral School of Research in Psychoanalysis and Psychopathology of the Paris Diderot University, under the supervision of Professor Christian Hoffmann.

it clear that her husband is not like that—but also that she is not in love with him. Being married ensures that “she has someone to return to at night,” with every homecoming being a return to what was already there before.

B’s rate of speech is fast, the tone of her voice often takes dramatic turns, and every session is a struggle for her to say as much as possible, to “get it out of my system.” It is empty speech, but it is only as she keeps speaking that she gradually begins to listen to herself.

During her adolescence—like the woman in *Hiroshima mon amour* (Duras 1960), who was kept hidden in the cellar by her parents in order to punish her for her love affair with a German soldier—B had transgressed; in her case, the transgression was to be the recipient of love letters from a classmate. As a result, she had been locked in the bathroom by her father, physically and verbally abused, accused of being a whore. Her mother was present during these incidents, yet distant; B could not hope to be protected by her.

Haunted by the tragedy of love, she married a man for whom love was not in her. For B, to love is to be a whore; love is prohibited, deadly, and dangerous, and love means to abort, to be childless, punished, and abandoned. Depression was her chief symptom, and motherhood through adoption was the solution she would come up with, in order to make up for the love she could not face losing, the kind of love she had never been given by her mother. Never having received it, she would now pass it on to her child. A contemporary Durassian character, she indulged in sorrow, and to her need for a mother she responded with the mother within herself.

Motherhood was to provide B and our therapeutic work with a new perspective: a few months before adopting her child, she dropped out of treatment, asking to return when her child reached the age of three months—only to drop out again and return a few months later. With these comings and goings during her treatment, she tested the constancy of my presence—acting out in the transference the fact that she was worn out by the quest for the missing love object, the maternal object par excellence. There is no absolution, only release and continued working through, made possible by the rewriting of her story in treatment.

## CONCLUSION

Endlessly indulging in the ravage of death, in writing that confronted horror in herself and the world, Duras created characters who are not delivered from their suffering. After following them in their almost imperceptible facial expressions, in the minor inflections of their voices, the reader ultimately closes the book feeling numb—without tragedy, without enthusiasm. Thus, far from providing liberation or catharsis through identification with its characters, Durassian literature confronts readers with their own private Hiroshimas, violent yet universal. In this respect, reading her books entails active participation in her autofiction, and the reader cannot escape countertransference to the Durassian legend. Love and loss, deracination and estrangement—these are aspects of my own transference to the text that drove the writing of this paper, my acquaintance with French literature overall having begun with Marguerite Duras.

If her melancholia signals that she would rather destroy herself than lose love, writing allows Duras to hold onto an identity as long as she can find a paper and a pen, and to aim at symbolization as Segal (1957) conceived it in relation to the creative process: “a continuous process of bringing together and integrating the internal with the external, the subject with the object, and the earlier experiences with the later ones” (p. 397). Similarly to a patient in analysis, through the stories she creates, Duras brings together her own story and re-creates the lost object whose mourning she can thereafter—fictionally—hope to provoke.

“What strikes me is that not everyone writes. I have a secret admiration for people who do not write,” Duras declared to Porte (Duras and Porte 1977, p. 11), as if autofictional writing were a marker of psychic health. Like Joyce, for whom “it is his art that supplemented his phallic retention” (Lacan 1975–1976, p. 15), Duras’s art keeps her together, ravished and ravishing. “Insofar as the unconscious is tied to the sinthom, which is what is unique in each individual, we can say that Joyce, as it is written somewhere, identifies with the *individual*” (Lacan 1975–1976, p. 168; the last word of this quotation is in English and is italicized in the original text).

Couldn't Duras's writing be categorized as *sinthomatic* in the same way that Lacan found Joyce's to be—a form of supplementation holding the structure together? Rather than striving for reparation, beyond the melancholic's struggle with what she was not given, Duras's autofiction becomes a supplementation sustaining psychic reality. For in the end, what does it serve to write? To fill in the lack with black and white, and hand it over to the world: writing as "a confidential suffering" (Duras 1995, p. 54).

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## ADVENTURES IN PSYCHOANALYTIC CONCEPTS AND TREATMENT

BY LEON BALTER

*A Psychoanalytic Odyssey: Painted Guinea Pigs,  
Dreams, and Other Realities.*

By Eugene J. Mahon. London: Karnac, 2014. 256 pp.

**Keywords:** Dreams, child analysis, classical analysis, Freud, mourning, oedipal complex, history of analysis, repression, insight, structural theory, development, analytic process, play.

The *odyssey* in this book's title refers to the reader's journey through the book, from chapter to chapter, each of which discusses a psychoanalytic topic. Author Eugene J. Mahon holds consistently to the metaphor of Odysseus's sea journey home from Troy, with "ports of call" and exciting "adventures" at each stop. And in fact the book relates many adventures in psychoanalysis at the ports of call portrayed in the various chapters.

The reader of this book, and of this review, will become aware that Mahon's theoretical orientation in psychoanalysis is "classical"—a poor term, but the one most conventionally used to designate the stream of development deriving directly from Freud's structural theory, embodying the centrality of conflict and adhering to the technique and methodology of free association. The reader will search this book in vain for references to the many transiently popular proponents of radical change in psychoanalysis since the late 1960s. Though it is not Mahon's intention, his book demonstrates that classical psychoanalysis is, and continues to be, a powerful orientation that promotes ongoing creative innovation in the field.

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*Chapter 1: "A Painted Guinea Pig"*

The painted guinea pig of the book's subtitle refers to an actual guinea pig, the collective pet of a class composed of thirty three-year-olds. The guinea pig died and was buried in a park by an adult, and all this was factually explained to the class by their exceptionally sensitive teacher. This was probably the first time death had been presented to many of these children, and they seemed to have a hard time conceptually and emotionally processing what had happened.

After several days, another guinea pig was brought to the class. The second guinea pig was chosen deliberately to resemble the first one *but not to look exactly like it*. Upon its introduction to the class, one child asked, "Who painted him?" This question was immediately taken up by all the other class members.

Mahon interpreted this question as indicating that the children denied the loss of the first guinea pig, saw the second one as the first one returned in a slightly different guise, and rationalized the difference in coloring as the result of painting. Of equal interest, the children collectively refrained from petting the second guinea pig or bringing it food, much in contrast to the extravagant fondling and feeding they had lavished on the first. According to Mahon, "Clearly, the children were angry at their old pet for leaving them and took it out on the new one" (p. 3).

Over the next six weeks, the children managed to work through their grief and finally accepted the second guinea pig as their pet. They gave it a different name, thus acknowledging a distinction between the first and second animals. This psychological transformation was effected through the ministrations of their very sensitive teacher, "in consultation with a psychoanalyst" (p. 4).

This incident of a class of three-year-olds and their deceased pet leads to a more general question raised by Mahon: can young children mourn? This is a much-discussed topic in the psychoanalytic literature. The consensus there is markedly in the negative, mostly because true mourning supposedly requires greater mental complexity.

Mahon presents an alternative view. He first makes a distinction between *primary objects* (family members, loved adults) and *secondary objects* (pets, toys, friends, and imaginary objects). He argues that the

death of a secondary object provides a “playground” (p. 9) where irretrievable losses can be experienced, worked on, and mastered in a way that enhances development: “I would like to suggest that a pet is one of the important *dramatis personae* of such secondary worlds. The child has this living theatre at his disposal to help his psychological growth and development” (p. 9).

The loss of primary objects, however, makes such mastery much more difficult, if not impossible. Mahon presents clinical observations of a 10-year-old boy whose beloved grandfather died. The boy displayed various kinds of active behavior, appropriate to his age but unusual for him personally. His behavior was manifestly unrelated to the death of his grandfather. However, it was not difficult for Mahon (or any psychodynamically oriented observer) to relate the behaviors to the boy’s emotional pain over his grandfather’s death.

Mahon argues that young children do mourn, but in ways that do not correspond to the typical, slowed-down, low-key, inward-directed, depressive style seen in adults:

The child is mourning in his own way. Children are more active than adults, and therefore also need the motor discharge pathways in mourning . . . He will mourn in another way, commensurate with his level of development and psychic organization: he will be sad, in an active way. He will “surround” his sadness with current developmental issues. [pp. 11-12]

Mahon describes another difference from adult mourning that this boy displayed. Most adult mourners purposefully seek conventional *social* practices, rituals, and ceremonies—e.g., funerals, wakes, eulogies, obituaries, etc.—as aids to their mourning. This boy mourned by himself; to be sure, through active behaviors, but they were *solitary* ones. He did not seek company. Mahon does not further discuss this difference. Are such behaviors private by default, because adults do not understand what is going on in the child? Or is the solitude itself an inherent aspect of children’s mourning? Observation of a single case may not give all the answers.

When a death or other loss occurs in a family or in a wider group context, the sadness of adults claims center stage. The mourning of

young children may well go unnoticed because it is so anomalous in comparison to adult norms. Mahon, in this exposition of mourning in young children, has brought out from a dim background an important mental process that adults may not understand, or even simply not see. This clinical observation has great practical importance in unveiling bereavement reactions in children and in attending to them with proper empathy and respect.

### *Chapter 2: "Repression and Its Vicissitudes"*

In this chapter, Mahon asserts that repression does not absolutely eradicate psychic content from consciousness (or from the ego). Rather, repressed mental contents "return" in various subtle forms:

The additional feature of repression which I want to emphasize suggests that there are perhaps a myriad of representatives of the repressed that parade themselves before the ego with a subtlety that renders them practically invisible to the ego's radar system. These representatives are not as ego-dystonic as symptoms, and when they present themselves "before the ego" the court of the ego may not even recognize the presence of these ambassadors of the unconscious . . . I want to introduce the idea that repression does not only expel ideas from consciousness, it seems to struggle to recycle them back into consciousness in many derivative forms. [pp. 16-17]

Thus, Freud's concepts of the *failure of repression* and the *return of the repressed* as psychopathological processes must be rethought. These processes, far from being pathological or pathogenic, are part and parcel of repression itself. Mahon uses an extensively described psychoanalysis to demonstrate this thesis quite convincingly. He introduces a neologism, *re-press*, coined by a patient and taken from the recording industry's (now archaic) procedures of reproducing previous recordings by pressing them again into vinyl.<sup>1</sup> Mahon presses the new term into the service of psychoanalytic theorizing. (Later in the book, he uses it again several times.)

<sup>1</sup> This case and the resultant new term were previously discussed by the author elsewhere (Mahon 2005).

However, this reviewer missed any reference to the fact that Brenner (1982), in his formulations about conflict and compromise formation, made the very same points about repression and for the very same empirical reasons. He, too, criticized the concepts of *failure of repression* and the *return of the repressed*, asserting that this psychic process is not peculiar to psychopathology at all; rather, it occurs in all mental life.

### *Chapter 3: "Insight as an Act of Transgression"*

Mahon begins this chapter with the clinical observation that, often, "insights that begin as epiphanies quickly become co-opted back into the neurotic status quo" (p. 29). (This reviewer can confirm Mahon's disheartening observation.) Of considerable interest, in an effort to understand the frequently observed "ahah!" phenomenon and its retrogressive vicissitudes, Mahon relates an epiphany of this own. It came to him while he was reading a nonfiction book (Muffs 1995) in which the author points out an intriguing repetitive phenomenon in the Bible: namely, when a hero or prophet challenges God's seeming ill treatment of the Jewish People, he begins his complaint with "AHAH!"

Mahon quotes the relevant biblical passages on pp. 30-31 of *A Psychoanalytic Odyssey*. From the book of Joshua (6:6-7): "Ahah, Lord God, why have you brought this people across the Jordan only to give them into the hands of the Amorites to destroy us?" In the book of Jeremiah (4:9-10): "Behold on that day, says the Lord, the king and the priests will be shocked . . . And I said, 'Ahah, Lord God. Is it you who have misled this people . . . by saying "Peace is yours?"'" From the book of Ezekiel (11:13): "Ahah, Lord God, are You about to destroy the remnant of Israel?"

Mahon is pointedly very cautious about making a possible connection between the psychoanalytic "ahah" phenomenon of sudden insight and the accusatory prophet's challenging "Ahah, Lord God." Nevertheless, he notes that

. . . it is as if insight as messenger or prophet is always in danger of being over-ruled by God-like Superego decree . . . How insight becomes less and less intimidated by such Superego decrees, making such hauteur of conscience the raw material of

fresh deconstructions and incremental insights, is the story of psychoanalytic process. [p. 31]

Thus, Mahon correlates the two very disparate *ahahs* through a hypothetical commonality of transgression against the superego. This is very clever. The question is: is there in fact such a correlation?

In the clinical section of this chapter, Mahon recounts an analysis that demonstrates his thesis of how some patients react to sudden insight with moral intimidation and with a very quick erasure of the insight. The particular patient he presents is a woman whose whole upbringing was characterized by her not daring to express her own genuine feelings and thoughts—especially those that manifested ambition. She had a character trait of trying to control everyone around her, “a habit that could alienate not only professional colleagues but her own children and in-laws as well” (p. 33). In the course of the analysis, she complained that the analyst was not as deeply informed about her hidden needs as he should be. Mahon comments:

At this point in the analytic process, one interpretation, which seemed no different from many other formulations we had explored together, produced an “ahah” phenomenon. The analyst said: “You need to control the outside because you feel so out of control inside.” . . . The analysand reacted excitedly, “Ahah, that’s it. That’s it,” with a whoop of recognition, as if all the previous spadework had cleared off one archeological artifact that could now be seen in full exposure, as if for the first time. One insight seemed to spawn several others . . . .

By the next session, she retreated from this insightful state of enlightenment, describing her wish to control her daughter and have her parent her child the way the dictatorial grandmother insisted, as if the previous session had never happened. When we explored the “ahah” moment and the rather sudden repression of it, she said: “It was too much to hold on to.” She went on to describe her mother’s typical reaction to any ambitious developmental progress . . . . This maternal contempt for assertion of any kind had a tendency to “shrive the soul,” to use the analysand’s poignant words. When I invoked the transference with the suggestion that the same hostile reaction might be her expectation in the analytic process itself, she said: “But I

need you to be yourself,” and before these words were half out of her mouth she began to weep. [p. 34]

This clinical material bears out Mahon’s thesis that analytic insights have a transgressive, personally immoral nature. They “challenge complacencies, self-deceptions, and the status quo” (p. 40). “Superego threats intimidate the ego’s transgressive insights” (p. 40).

Though Mahon does not say so explicitly, this formulation explains the quasi-manic excitement, exuberance, and exhilaration of the “ahah” phenomenon. It is a whoop of triumph, the typical reaction (albeit temporary) to the sudden lifting of the superego’s domination (Fenichel 1939).<sup>2</sup>

#### *Chapter 4: “Transference: The Past in the Present, the Present in the Past”*

Mahon defines transference in the conventional manner, as “the unconscious displacement of a genetic relationship onto a current relationship. In its most classical terms, current relationship means the relationship with the analyst in the analytic situation” (p. 47). However, Mahon’s unconventionality comes alive here also. “What I plan to do is to reimagine transference as a developmental phenomenon” (p. 47), he declares.

In approaching this reimagination, Mahon recounts stages in which the child builds progressively more integrated, differentiated, realistic, and complex concepts of unique entities in the environment—most crucially, those pertaining to *primary objects* (see my earlier description of Mahon’s definition of this term). This process proceeds through late adolescence. As these concepts become more distinct mentally, so do the transference phenomena with which they are correlated.<sup>3</sup>

Mahon’s method of exposition, in all the book’s “ports of call,” seeks to illustrate his more abstract notions with clinical data. Here, before he

<sup>2</sup> Mahon (2015) further discussed the “ahah” phenomenon in a recent contribution to this journal.

<sup>3</sup> Here, as with the chapter on repression and its vicissitudes discussed earlier, this reviewer missed some reference to Arlow’s (1980) masterful exposition of the development of object representations, which Mahon generally follows.

makes the attempt to examine transference as a developmental phenomenon, he first clues in the reader as to his method of approach: he will use the transference *neurosis*, not simply transference *phenomena*, as a beacon to illuminate the genetics of transference. This distinction is no mere nicety. It requires some theoretical preparation, which may appear to be a digression . . . but it is not.

Mahon makes a very sensible but nevertheless unconventional statement—one that this reviewer had not previously heard or read. It is reproduced here in all its terseness and boldness:

By adulthood, the ego's reality testing and capacity to differentiate are, ideally, as completely developed as possible. But this normal developmental ideal is an abstraction and *most human beings are not models of ideal development. They are complex mixtures of normality and pathology*, their developmental goals achieved in some ways, not in others. [p. 49, italics added]

Acknowledging the ubiquity—indeed, the universality—of pathological elements in all development sets the stage for Mahon to discuss transference in terms of its pathological variant: the transference neurosis. The latter phenomenon is the way in which the psychoanalytic situation peculiarly exposes the past through observation of the present. Mahon effectively asserts that analysis of the transference neurosis is the only procedure by which to fully investigate the past in an individual's life. Thus, *the therapeutic endeavor cannot be divorced from the investigation of the past*. The analytic process “will expose it [the past] well enough for its flaws and errors and magical assumptions and convictions to emerge from repression, and then be *re-pressed* into a new, more adaptive, utilitarian working image of itself” (p. 52, italics added).

Mahon chooses an analytic case that speaks directly to his view of how childhood neurotic distortions in the self-object differentiation manifest themselves in the transference neurosis. Here the patient *manifestly* blurred the self-object differentiation; but *latently*, that differentiation was not only present but actually necessary for the analysis to take place at all.

This analysand, age forty-eight, had lost his father at age six through death preceded by a protracted illness. The analytic work could defini-

tively establish that the six-year-old boy developed an unconscious, comprehensive magical fantasy system: he killed his father; his father was not dead; the analysand could resurrect him at will; the analysand had to die in order to merge with his father in death. That merger would defensively obviate the anger, guilt, frustration, anxiety, love, and dependency that the boy felt toward his dying father.

Of great importance, the analysand constructed all his main object relationships on the model of this merger with his father—that is, in relation to his wife, his child, and his analyst. This was not a form of psychotic object relations. In Mahon's own words, the analysand's "lack of a sense of differentiation seemed highly defensive. It was not a constitutional ego defect that hampered his emotional acuties" (p. 59).

The clarification of these neurotic distortions in childhood constituted most of the work of this analysis. But ultimately, there had to be a showdown in the transference—in fact, in the transference neurosis, as Mahon explicates in the following passages:

Transference was the analytic achievement that allowed us to expose the primitive denial of the immensity of the tragic loss. It was memory reclaiming what was initially too painful to acknowledge. Eventually however, this repetitive transference enactment became a resistance. It was a wedge [the patient] drove between himself and the development of intimacy with me. This phase of analysis was most poignant and most fruitful. His dilemma was tormenting: if he allowed me to be a real person in his life, then the real loss of me, the eventual termination of our work together, would be unbearable. If we were differentiated people, who actually had individuated real relationships with each other in a finite world, then his fantasy of undifferentiated existence, in which he and his father were forever one in the intimacy of death, would be untenable. [pp. 54-55]

*Transference resistance seemed to be the only form of transference that was safe.* The analyst as a "dead man" could be managed. The self of the analysand could "play dead." The two corpses, united in an eternal embrace, could not "damage" each other. This collusion of the two "dead" parties seemed to be the only way to contain the aggression that might destroy the living analyst. This transference enactment seemed "obligatory." When

challenged, the self felt the need to regress, run away, stop listening, somatize, or pretend it was an undifferentiated entity that couldn't be expected to know what was going on. [p. 58, italics added]

Toward the end of this chapter, Mahon elaborates on the subtitle of this chapter: "The Past in the Present, the Present in the Past." It is a bold statement of the psychoanalytic credo concerning the centrality of transference in psychoanalytic treatment.

Analysis is an attempt to use the ever present, and the transferences from the past that forever seek to distort it, as an instrument of therapeutic leverage. To be present in the present is required so that the transferences that complicate the present, augmenting it and diminishing it all at once, can be understood in all their complexity. To be present in the past is a metaphor that attempts to envision the genetic hypothesis of psychoanalysis at work. [p. 59]

Mahon gives his analysand the last, summarizing word: "If I can allow myself to be present in the present, and present in the past as well, the future will be a safe place to visit" (p. 60).

#### *Chapter 5: "Play in Child Analysis and Adult Analysis"*

Mahon, a child analyst as well as an adult analyst, begins this chapter on play in child (and adult) analysis with the truism that free association is the method of adult analysis and play is the method of child analysis. He asks why this should be so, and in regard to child analysis, he answers:

To ask a child, who has only quite recently begun to master sphincters and instincts, to abandon his newly acquired linguistic skills, through which much of his mastery has been accomplished, would be inappropriate. A child would feel threatened by the idea that language itself could be rendered unstable by imaginative linguistic horseplay. One couldn't expect any sensible child to go along with it. The analyst might be accused of corrupting the morals of a minor with such a licentious invitation. [p. 63]

Mahon begins his discussion of play in child analysis with deep insights of Freud's: (1) thought/fantasy is trial action, the mental postponement of physical action; (2) fantasy and play are practically synonymous, and the only difference between them is that the latter expresses itself through the use of external, inanimate props.

This leads Mahon to his "working definition of play":

[Play is] action that does not seek immediate gratification of desire or aggression but seems rather to explore alternative or multiple possibilities of experience . . . . Play is the vehicle that allows the mind the opportunity to inhibit the immediacy of the [instinctual] aim and explore other options. [p. 64]

Mahon's exposition then shifts to actual material from the analysis of a four-year-old boy, who is intensely in the oedipal phase and who is charming, humorous, remarkably verbal, and . . . playful. Mahon documents the boy's preoccupation with the fantasy of stealing the paternal phallus by playfully using a concrete symbol in the analytic situation (the analyst's chair). The analysis went on for two years with symptomatic success, but with no insight into the etiology or pathogenesis of the neurosis. When the boy came back into analysis five years later, these could be analyzed in retrospect. Also, the boy's superego conflicts over oedipal aggression could be elucidated and his misconceptions about sex, erections, menstruation, and birth canals could be clarified. Of relevance to the distinction between analytic methodologies, the first analysis, from ages four to six, was carried out through play; the second analysis, from age eleven into puberty, was carried out through free association.

In an extension of this chapter, Mahon elaborates on the provocative idea that play and working through are effectively the same process. They both overcome "psychological inertia" (p. 79) in that the patient, whether child or adult, must examine in the analytic situation the many points at which the persisting unconscious attachments to infantile objects are expressed. Mahon notes that, even in adult analysis, various aspects of working through may take place through the use of concrete aspects of the analytic situation. This breaks down the distinction between play (involving material items) and fantasy (purely mental processes).

Mahon gives examples from both child and adult analyses in which palpable facets of the analytic situation proved to possess transference and resistance properties, ones that become analyzable. Here again, Mahon displays an admirable capacity to describe the details of analytic process in an evocative and informative manner.

These analyses prompt Mahon to end this chapter with the statement that: "In a sense, play is the working through of childhood, and working through is the newfound play of adulthood, both informed by fantasy and relentless, realistic criticism, as adaptation and compromise try to wean themselves from self deception" (p. 91).

*Chapter 6: "Manifestly Misleading: The Cunning Artistry of Dream"*

As the title of this chapter indicates, Mahon views the dream work as being particularly intelligent, sly, creative, and hell-bent on deceiving the dreamer while he or she is awake. This is very much in contrast to the more conventional view of dreams as primitive, infantile, inchoate, primary process, illogical, etc. Though he does not elaborate explicitly on this point, he is effectively saying that—in the dream work—mature ego functioning is very much present and operative. He illustrates this by examining instances of dreams that contain unusual elements.

Here is Mahon cluing in the reader on what is to come:

In fact the displacement of disguised meaning from a latent sphere to a manifest sphere is essentially the whole argument of this chapter. What I emphasize over and over is that the manifest content of a dream can be ingeniously infiltrated with puns and parapraxes, jokes and even a dream itself embedded within the envelope of another dream, in an elaborate facade of disguise. In other words, dreams can be playful in the most confounding ways, as if the unconscious mind was a perverse tease that believed in depositing communications of the utmost importance on the doorstep of awakened consciousness, but in such a disguised code that the awakener would be mostly bewildered and exasperated rather than enlightened or enchanted with his strange nocturnal gift. [pp. 93-94]

Mahon's first example is a dream within a dream. However, the structure of the dream is more complicated and more subtle. The dream

begins with the dreamer waking up in the dream to a sound outside his house. As the dream proceeds, he then wakes up again and realizes that all that preceded in the dream was a dream. The dream then goes on until the dreamer actually does wake up. Of importance here, Mahon does not get distracted by Freud's maxim that the dream within a dream depicts a denied reality: "It's only a dream." He rather addresses with equal interest *both* the containing *and* the contained dreams.

Unfortunately, even a brief summary of the very rich and complex analysis of this dream would take up too much space for this review. Suffice it to say that Mahon's analysis demonstrates that the splitting of the dream into containing and contained parts was *a defensive, diversionary maneuver by the dream work*. The whole dream had a coherent meaning to which all its elements contributed.

After presenting that vignette, Mahon demonstrates that the actual nesting-nested structure of the dream itself had unconscious transference meaning:

If that was the seamless vision of the [whole] dream, why was the illusion of dream within dream necessary at all? To all the defensive reasons alluded to earlier, the analyst added that a dream-within-a-dream is like one dream spawning another. The wish to have an oedipal baby with the analyst, with the mother, with the father, could be represented through the formal disguise of one dream giving birth to another, one dream invaginating in the other in an act of oneiric copulation. One dream was the dream child of the other, so to speak. [pp. 102-103]

Mahon goes on to describe and analyze a joke in a dream, which he states has an ironic quality "of a sleeping ego that seems to be wide awake in the middle of the night" (p. 103). Here is the joking dream:

I go to a restaurant. You (the analyst) are there too with your wife. Suddenly I bite my tongue. You (the analyst) say, "Oh, at least one of us will have a good meal." Paul Newman is in the restaurant also, and I comment, "Oh, he comes here too." [pp. 103-104]

Mahon admits to having found the included joke funny. However, he was not distracted by the humor. After all, it celebrated "sadism's

comic triumph over misery's self-inflicted wounds"; it was "a piece of savage cannibalistic self-sacrifice" (p. 104). Mahon grimly comments: "Was masochism ever better captured symbolically than in this caricature of nourishment, horror masquerading as humor as the self makes a meal of the self?" (p. 104).

At the time of the dream, the analysand was experiencing a professional success that boded a successful future. Guiltily, he was symbolically murdering his depressed father, whose own career had first been promising but later dashed any prospect of his ultimate success in life. The patient's promising future, his becoming a *new man*, was one pole of the dream's conflict, while the dreamer's autocastration dominated the other pole. As this conflict became more explicit in the analysis of the dream, the use of the joke became clear: it would be fun to get away with murder, but neurosis is a bad joke against the self; it is no laughing matter.

The next dream inclusion is a pun.<sup>4</sup> The dreamer was a professor of English literature who had been in analysis for many years. As the day residue, a friend of the dreamer had just died the day before. The patient related the dream as follows:

I am at the closing of a real estate transaction. All the parties are assembled around an official-looking table in a typical room of a bank or some such institution. The lawyers are present, but the deal cannot go through because the *didn't*er isn't present.  
[p. 106]

At first, the dreamer did not make any sense of the dream's neologism. But when he did see it, he was jolted. Mahon notes that "*didn't*er, with a slight change in pronunciation, became *did inter*, did bury the body" (p. 106). Analysis of the dream first led to the dreamer having just reread Shakespeare's *Julius Caesar* (1599), and particularly the lines: "The evil that men do lives after them;/The good is oft interrèd with their bones" (3.2.75-76). The analysand had very recently visited his dying friend in the hospital. He was unconsciously angry with his friend for reminding him to "ask not for whom the bell tolls," since "it tolls for

<sup>4</sup> This dream is described in detail elsewhere (Mahon 2007).

thee.” Also, unconsciously, he was happy that his friend was dying and not himself. His guilt about this derived from his guilt about the death of his father, also a professor of English literature. Alcoholism had destroyed his father’s career and social life.

These and other associations clarified the presence of guilty themes. In analyzing the pun in the dream, Mahon comments: “The pun had become a useful sop for the dream work to employ in keeping an unwitting Cerberus (the dream censor) beguiled” (p. 108).

Mahon goes on to address a parapraxis in a dream. The dreamer was a 60-year-old lawyer in his eighth year of a very productive analysis: “I’m walking down a city street—New York, probably. Skyscrapers all around. I am walking with Nelson Mandela, but I am calling him Tomás Magadin in error” (p. 111).

Analysis of the two names ranged far and wide. They all pointed to issues of bisexuality via *Mandela* ending with the feminine *ella*, Lord *Nelson*’s blindness in one eye, the boxer Roberto Duran’s refusing to continue to fight Sugar Ray Leonard with the words *no más*, the three *Magi* bringing gifts to his royal highness, the baby—and others, too.

The next dream inclusion is the uncanny in a dream.<sup>5</sup> A patient dreamt about the proper name of an author (Thomas B. Costain), which he believed at first to be a fictitious name and a concoction of the dream. He later Googled the name, supposedly “for the hell of it.” It turned out *uncannily* to be the actual name of a moderately well-known, 20th-century author, whose most famous book was *The Silver Chalice*. The dreamer was further brought up short by remembering that, when he was a child, his father would make him chalices out of silver paper.

As with the previous instances of dream inclusions, Mahon was not beguiled by the uncanny appearance of what must have been a forgotten name. Here is the patient’s account of the dream:

I am at a conference. A journalist is being interviewed. His name is Thomas B. Costain. The interviewer inappropriately asks the journalist if his chronic depression had compromised his professional life in any way. I cringe at the interviewer’s crassness and would have undone the insult if I could. [p. 115]

<sup>5</sup> See Mahon (2012).

Mahon reminds the reader of Freud's formulation that uncanny experiences occur "when infantile complexes which have been repressed are once more revived by some impression, or when primitive beliefs which have been surmounted seem once more to be confirmed" (1919, p. 249). Before realizing that the name was indeed an actual one, the patient had associated to the *cost* of the analysis and wished it would be without cost. *Stain* brought to mind the phrase *we are all stained with mortality*. *B.* referred to Hamlet's "to be or not to be" (Shakespeare 1601, 3.1.55), while *Thomas* was the name of his dead brother.

After the realization that the name was actual, the analysand had to further realize that a repression had been in effect. The cringing in the dream referred to his wish that he had challenged his father rather than transforming his anger into masochism, guilt, defensive identification, and reaction formations. The paper silver chalices were a screen for all the developmental gifts his father had *not* given him. His father was in fact a writer, but not famous like Thomas B. Costain; he was also a chronic manic-depressive who was often unemployed because of his illness.

The patient surmised that he had repressed the name of Thomas B. Costain at the time when his father's neglect and poignant debility were too painful to acknowledge. Shortly before the dream, the patient's retarded older brother, named Thomas, had died in a freak accident to which the patient reacted with intense grief. That latter reaction was closely associated with chronic depression about his father's life of failure.

The name Thomas B. Costain wove together many overdetermining threads that so tightly linked the patient, his brother, and his father that the patient could hardly establish his own unique differentiation from them. The uncanny in this dream was a diversion from the patient's very painful pathological identifications.

The last subject addressed by Mahon in this chapter about dreams is a comparison of three dreams of the same patient at ages five, thirteen, and twenty. The rendition and analysis of the latter two dreams took place on two updating visits by the initially very young patient. Suffice it to summarize that Mahon could demonstrate that the patient's same infantile id wish—to wield his phallus in an oedipal context—was present

in all three dreams. The latter two dreams and their analyses demonstrated the maturation and development of the ego and superego, which had taken place in the intervening time. Those developments allowed the dream work to use progressively more sophistication and ingenuity in the service of disguise.<sup>6</sup>

Mahon ends this chapter with the following observation:

One can only marvel at the mind's repertoire as it hides from itself in the night and dares to open its eyes in daylight as it reclaims in analytic process all that it formerly believed to be objectionable and unthinkable. [p. 140]

### *Chapter 7: "Screen Memories"*

In this chapter, Mahon elaborates on the analysis of screen memories. As he points out, Freud took an interest in these "memories" from childhood at the time he was writing his monumental *The Interpretation of Dreams* (1900). It is not surprising that he used dreams as his model for screen memories. But Mahon's discussion of screen memories provides some intriguing "spins" on this phenomenon:

A screen memory is often quite dream-like in appearance. It has a primitive, luminous presence, as if it possessed a "halo" around it. It is dream-like also in the sense that it "uses" [for other purposes the ego function of] memory as opposed to merely recording it. Historical accuracy is not its *raison d'être*. Deception and truth are both treated equally in its surreal democracy of disguise. It is a hybrid of actual experience and fabrication, a wish to reveal and conceal all at once, sharing that love of ambiguity with many other psychic products we have been examining (transference, repression, even insight itself as we have seen in previous chapters). [p. 142]

Mahon notes, with Freud, that the important events of childhood seem to be omitted in screen memories, and trivial impressions appear to be retained. As in dreams, there is a stress on the visual as opposed

<sup>6</sup> Again, this reviewer would have welcomed at least a citation to Arlow (1961) on ego psychology and mythology, demonstrating the heuristic concept that an id wish can give rise to a series of derivative fantasies expressing different developmental "moments"—different stages of ego/superego development.

to the verbal. And also, along with Freud, Mahon points out that the historical time supposedly referred to in the screen memory, when it is analyzed, actually refers to issues relevant to later times in life. Indeed, there are no memories *from* childhood but only pseudomemories *about* childhood. Screen memories, like dreams, represent the forgotten years of childhood.

On the genesis of screen memories, Mahon states:

I am inclined to believe that the dissolution of the Oedipus complex and the massive repression that ushers in the infantile amnesia leave islands of memory that must erupt into the seas of latency with some chronological regularity that we can only guess at. [p. 146]

Mahon notes that there has been very little said about screen memories in the literature. Thus, characteristically, he is quite intrigued by them. He states that he is trying to expand on Freud's contributions by emphasizing an issue that Freud did not address: the fate of screen memories as the analytic process effects its structural changes by reclaiming more and more of the once-discarded, repressed conflicts of the mind. He asks: "As patients changed in the process of analysis, would their evaluation of their own memorial processes change also?" (p. 146).

Mahon answers this question through the depiction of several analyses. Suffice it to summarize here some of the results of these analyses. One patient's screen memory was analyzed pretty much as one would a dream, and interestingly, when the unconscious in it was made into meaningful consciousness, the screen memory as such did not change. Rather, both its emotional valence for the patient and the memory's ultraclear quality lost their specialness.

A second screen memory lost its "cathexis" as a secondary effect when the infantile conflicts to which it referred were analyzed in the course of the analysis. Yet another vicissitude of a screen memory occurred in another analysis: that of a nine-and-a-half-year-old boy who obtained photographic evidence that directly contradicted a particular screen memory, supposedly from age three years of age. This allowed the analysis of the defensive posture embodied in the screen memory.

Of great interest, in another case, Mahon recounted what appeared to be a screen memory *in statu nascendi*:

Willie, a four-year-old in the full passion of his oedipal romance, was seen in consultation for a sleep disorder, a reaction to the recent divorce of his parents. He described his conflicts in a displaced manner that suggested an incipient screening process. In the second session, he related the following memory: "You know, I had a dog when I was a baby. His name was Silver. He could not be with three people. He bit my daddy who was away a lot; so he did not know him well enough." . . . The trauma of the parents' separation had occurred one year before the consultation, when Willie was three; yet, the child created a displacement from the human object to the animal and the concomitant distortion of time as if he needed to soothe himself by saying this did not happen last year, it happened three years ago; moreover, it was not I who was angry with my father, it was a dog. [p. 154]

Mahon ends his clinical descriptions of screen memories with a long and complex account of an analysis containing not only a screen memory, but also a symptom and a dream—all of which shared the same manifest content (a sense of suffocation or drowning, breathlessness). All three also shared the same defensive function.

Mahon closes this chapter with a very intriguing and provocative thesis. He notes that dream content and form, symptom removal and character analysis, do not in themselves provide proper assessment of the structural change wrought by analysis—or, therefore, of readiness for termination. He suggests that the vicissitudes of screen memories, as demonstrated in this chapter, may provide such indications. Screen memories do not have the flux, fluidity, or contemporary relevance that dreams, symptoms, or even character do; they are remarkably static and unchangeable amid the change and instability of everyday, and every night, life. This, according to Mahon, can be used for assessment of therapeutic progress. He writes: "It is this standstill quality of the screen memory that allows one to measure significant increments of change as the memory gets revised in the process of working through" (p. 164).

Mahon also quotes Greenacre (whom he honors on this subject) in the same vein, as follows.

Screen memories are especially helpful, but are often disregarded . . . . Because they are less fluid than dreams and firmly organized in their enduring defensive function, immediate free association cannot be demanded. Their use depends on the alertness of the analyst for detecting their discrepancies, especially in time and content. [p. 164]

Mahon elaborates this idea in an extremely radical manner. In doing so, he in effect turns analytic processes, and particularly the transference neurosis, on their head. That “head” is the screen memory. According to the author:

Surely, what comes between the screen memory and our understanding is the infantile amnesia. If we consider the transference neurosis as a complicated, long-winded association that explains the infantile amnesia, it becomes clear that the screen memory cannot be understood until all its associations, which lie hidden in the transference neurosis, are revealed. In a sense, *all associations throughout an analysis can be thought of as associations to the screen memory*. Obviously *the screen memory itself is an association to the total metapsychology of childhood experience* . . . . A simple, more clinical way of saying this would be that the gap that exists between the screen memory and its total elucidation in the transference neurosis is a measure of the repression that exists between childhood psychology and the mental life of adults. In a sense, *the transference neurosis is a newly created screen memory that allows screen memories to speak* . . . . Analytic work slowly extracts what the infantile amnesia hides by means of screen memories. [p. 165, italics added]

Mahon is thus stating that the screen memory is a psychic indicator that not only points toward the content of the unconscious, but also can serve as a gauge of analytic progress and ultimately of when enough has been analyzed—that is, when the screen memory has undergone some understandable change in content or has lost its aura of specialness.

This is a very provocative and creative formulation. There is, however, some difficulty in it. Quantitative changes in the aura of a screen memory, its “halo,” its specialness, its “cathexis,” may often be very subtle and difficult to ascertain. While the changes that occur in this respect,

or qualitatively in the screen memory's content, may on occasion be dramatic, the remarkable stability of the screen memory may more often obscure the changes that Mahon and Greenacre refer to.

This reviewer questions whether such changes can adequately bear the responsibility for the weighty decision to terminate analysis. Even so, since the decision to terminate is often impressionistic, changes in the valuation or content of the screen memory—when they can be discerned—can only help in making that determination. Still, an enigma continues to surround the screen memory: why, for all that, is it so stable?

### *Chapter 8: "Symptom as Irony"*

In this chapter, Mahon discusses a patient with an extremely subtle and effectively innocuous symptom. Unlike most neurotic symptoms, it did not poison the patient's life, but rather inconvenienced her to a very slight degree. As Mahon describes the situation:

The symptom of extreme light sensitivity had been present for many years without being noticed because it was only on summer vacations, when she could sleep late, that she became aware that she was very sensitive to light. The least amount of morning light would awaken her, and she could not get back to sleep again, try as she might. Lucy [the analysand's alias, pointing to the centrality of light] would try to ensure that the windows were "dawn-proof," so to speak, by closing the shutters and sealing the curtains carefully and tightly when she retired for the night, a ritual that took on a somewhat comical meaning for her and her bemused husband . . . . In fact, most of the time, when not on vacation, Lucy awakened early, and the "symptom" was not even worth considering. [p. 169]

The patient was sixty years old and had been in analysis five years. Concerns about death were coming up in the analysis.

The analyst was startled when Lucy asked: "When there is no light at the end of the tunnel, then what?" The question was rhetorical, but it seemed to clamor for an answer nonetheless. It led to the telling of a dream that in turn led to the dismantling of the symptom being highlighted here.

“In the dream, there is a Venetian blind flapping a little in the wind,” the analysand related. “One broken slat is piercing the otherwise darkened room with a single beam of dawn light.” [p. 170]

The associations were very rich. Of some importance, several previously examined traumata had been emphasized earlier in the analysis, but they were now nevertheless seen in a new light. The patient, born a French Jew, experienced during the Nazi occupation German soldiers shining flashlights into the faces of terrorized civilians, waking them from sleep. Further, before the war, at the age of three and completely unprepared, she had an adenoidectomy performed by a surgeon with a beam of light on his forehead. This led to a cynical but often correct appraisal of her caretakers, and a demand for “straight talk” and full disclosure. Mahon states that this stood her well in her analysis.

Mahon continues his account of the fascinating analytic work with this fascinating patient. The analysis went further back to one year of age, when the patient was traumatically weaned in a most callous way. For all her cynicism, she had an intense need to be defensively—and ironically—deferential toward her analyst. This had to be analyzed and resulted in a trove of repressed affect becoming accessible. Through analysis, the irony embodied in her symptom became understandable—an irony that, until analyzed, had been necessary.

One detail was particularly evocative to this reviewer. It referred to the patient’s lifelong attitude toward light and her character trait of demanding *enlightenment*:

In a very early prewar but post-adenoidectomy memory, Lucy remembered having talked to a chandelier in her room as if to get answers or to break out of her loneliness in its company. This personification of an inanimate source of light is a poignant depiction of a child’s search for insight in the midst of self-deception as conflict is being engaged by the immature mind. This memory, which is probably a screen memory and had an intense luminosity in her mind’s eye, eventually lost its “haloed” status, no doubt as analysis stole much of its thunder (and lightning!) in the free-associative plunder of analytic process. [p. 178]

*Chapter 9: "A Psychoanalytic Conception of Character"*

Mahon defines character by using the same metaphor of the book's title: "Character could be viewed as a stable, almost automatic deployment of . . . compromise formations throughout the flow of psychological time, a psychological compass that charts the course of human sensibility and reactivity throughout the psychological odyssey of each unique life" (pp. 181-182). He elaborates on this definition, bringing it into relation with symptoms and stating: "I want to suggest that, even in adulthood, character can be more symptomatic than its definition as a stable psychic entity seems to claim" (p. 182).

Mahon uses Shakespeare's *Hamlet* (1601) to argue that character is the relatively stable confluence of *all* or *most* of the disparate elements in the personality. Thus, there should be no consistency in character, no dominant trait or style. And so, for the very reason that literary critics, psychologists, psychiatrists, and psychoanalysts have had such a hard time pinning down Hamlet's psychology, Mahon effectively argues that such an endeavor must necessarily be fruitless. The flaw (tragic or not) is not in Hamlet or *Hamlet*, but rather in the fallacious assumption that character must be internally consistent.

Mahon draws on a very close reading of the play and particularly of Hamlet's speeches. He demonstrates that Hamlet makes a slip in stating that his father was killed even before he actually dies. Mahon infers that Hamlet "stumbled on his own wish to dispatch his father even earlier than Claudius did" (pp. 185-186).

In another speech, Hamlet indicates he is quite at ease with his femininity. Along these same lines, he shows bisexual playfulness in calling Claudius "Mother," over Claudius's (homophobic?) protests. Yet, in still another speech, he characterizes his anxious misgivings as like those of a woman, and so disavows them; he would not want to be like a woman. For all that, he sees himself as manly in the vicious intrigues of high politics at Elsinore (a transparent stand-in for the duplicitous court of Queen Elizabeth I, according to Mahon).

At another point, Hamlet intuitively feels that foul play will be involved in his approaching duel with Laertes. He states that not the outcome, but a readiness to courageously, maturely engage in the possibly fatal duel

is the important thing. Mahon sees Hamlet as a very complicated but nevertheless well-rounded, predominantly healthy man. In contrast to the grotesque psychopathology and psychopathy all around him in the rotten state of Denmark, Hamlet is in touch with the whole complexity of being human. He implicitly puts down all those who would reduce Hamlet to a nosological syndrome. Mahon states:

It may take five acts to mull things over, but anyone who believes that Hamlet's inaction is other than a tragic mulling over all the ingredients of the human condition seems to miss the whole point of Shakespeare's complex subtleties. [p. 189]

He also notes: "Character could be called the guardian of the repressed, the witness that insists on its re-pressing itself into the complicated living of life" (p. 189).

However, even with Hamlet's robust and strong character, tragedy still awaits him. Mahon continues:

But by Act Five, when he re-presses all of the information he had partially hidden from himself and allows himself to know that "the readiness is all," his capacity to act in his own self-interest and in the interest of all no longer eludes him. He insists that Horatio not kill himself, since Horatio is a character witness that must survive to set the record straight and proclaim that Hamlet's character was the equal of his father's, a character "taken for all in all, we shall not look upon his like again." [pp. 189-190]

Mahon elaborates on his view of character—very much in line with his view of psychic development—as necessarily embodying pathological elements, even in the best of circumstances (see above). He states that in real life, there is no such thing as a "perfect" character, and in fact there should not be:

Character could be conceptualized as the great synthesizer that gathers all developmental components into a cohesive, relatively stable matrix . . . . Character seems to be the voice of passion and reason "commingled." . . . The synthetic, integrative work of the ego and its observable manifestation in smooth characterful

functioning is an achievement of the utmost importance not only for the individual but for society at large. [p. 192]

This is Mahon's view of character, "the great synthesizer." Mahon bypasses any qualitative consideration of character nosology. Rather, he stresses the quantitative (greater or lesser) functional integrity and stability of the individual's unique assimilation of all aspects of mental life and its development.

*Chapter 10: "Mourning, Dreaming, and the Discovery of the Oedipus Complex"*

In this, the last chapter of the book, Mahon takes up the relationship between Freud's mourning his father's death (October 23 or 28, 1896) and his discovery of the Oedipus complex (October 15, 1897). Mahon terms the latter, with ironic understatement, "a *yahrzeit* of great significance" (p. 197). Correlating these events is avowedly "an exercise in imaginative speculation" (p. 196).

Nevertheless, Mahon succeeds in mobilizing threads of evidence from a multitude of sources: Jones's (1953–1957) biography of Freud and the Freud–Fliess letters (Masson 1985), as well as Freud's own *The Interpretation of Dreams* (1900) and "Mourning and Melancholia" (1917), among other sources. With these he cobbles together a convincing argument. Although this complex and authoritative argument will not be reproduced here, I hope its outline will give the reader the gist of Mahon's reconstruction.

Mahon makes the plausible assumption that Freud's mourning process of 1896–1897 was actually described in non-autobiographical terms much later, in 1917, with the publication of "Mourning and Melancholia." Mahon states that Freud's rendition of mourning "seems to encapsulate the Oedipus complex in its very form and structure" (p. 199). Accepting painful reality can take place only in piecemeal fashion. "Essentially the work of mourning 'kills' the object intrapsychically at a slower pace than reality, which finishes the object off in one fell swoop" (p. 199), according to Mahon.

Mahon then quotes Freud describing the mourning process—that is, missing and then "de-cathecting" the lost loved object—in remark-

ably hostile and aggressive (indeed, *murderous*) terms. This passage from “Mourning and Melancholia” is quite familiar to any analyst. However, Mahon’s quoting it in the context of the newly discovered Oedipus complex (back in 1897) casts a very surprising light on it.

Just as mourning impels the ego to give up the object by declaring the object to be dead and offering the ego the inducement of continuing to live, so does each single struggle of ambivalence loosen the fixation of the libido to the object by disparaging it, denigrating it and even as it were *killing* it. [Freud 1917, p. 257; quoted by Mahon, p. 199, italics added by Mahon]

In this historically oriented perspective, we see nothing less than Freud—in describing his own mourning of his father—cryptically admitting to his own parricidal *oedipal* impulses.

Another thread of evidence reconstructing the formulation of the Oedipus complex is represented by the particular dreams Freud recounted in *The Interpretation of Dreams* (1900). Freud’s mourning process took place in the middle of his self-analysis, prompted by his father’s death and carried out predominantly through dream analysis. Mahon lists the relevant dreams Freud dreamt between the death of his father and his announcement of the Oedipus complex in his letter to Fliess of October 15, 1897. These eleven dreams

. . . could be thought of as stepping-stones on the road to discovery . . . . [They] were some of the essential raw materials of Freud’s intense self-analysis during that most fruitful year, nocturnal gifts he extracted from sleep and his capacity to remember his dreams. [pp. 200-201]

Mahon actually recounts the dreams successively, all the while showing Freud inching progressively toward his great insight (according to Mahon, doing so blindly, Oedipus-like) about himself and about all humanity. Mahon comments:

In the final analysis, what is crucial, of course, is the fact that Freud was able to open both eyes in an act of triumphant, transgressive insight and make the Oedipus complex a cornerstone of psychoanalytic thinking for the last 115 years and a major

contribution to the history of ideas for all the years to come. [p. 208]

Mahon ends this chapter with the following comments on the dialectical synergy of dreaming and mourning in the genesis of Freud's great discovery:

Mourning seems to insist on a brutal confrontation with reality; dreaming seems to need to disguise truth in an elaborate finery of self-deception. Working together they seem to churn the mind, by appealing to reality and fantasy all at once, an ambiguous state of affairs that genius, in its most creative iteration in the mind of Sigmund Freud, exploited with extraordinary results. When dreaming learns to fathom its own disguises and mourning learns to bury its own guilt with its dead, so to speak, reality testing is enhanced and even the confounding affects of the Oedipus complex can be integrated into a good enough adaptation of fantasy and reality. [p. 209]

To paraphrase Mahon in ironic understatement: this depiction of Freud's seminal discovery is of great significance. It is, in fact, a solid reconstruction of a crucial episode in the history of psychoanalysis. To be sure, very early psychoanalytic history is congruent with the mental and professional development of Sigmund Freud. And in future histories of psychoanalysis, this detailed set of micro-events should be represented. Whether that will happen is quite another matter. The methodology is purely psychoanalytic, and that already marks it as probably too esoteric for most historians of science. Nevertheless, our profession—always obsessed with origins—will find Mahon's mental and scientific archeology of very great interest.

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It is hoped that this review, a pale reflection of the rich and profound contents of this book, has indicated to the reader the value of reading it. While Mahon, in taking up discrete psychoanalytic topics in the various chapters, tries to recount the psychoanalytic theory basic to each subject, it nevertheless struck this reviewer that at least a moderate degree of psychoanalytic sophistication would be necessary to properly

understand his discourse. The same might be said about the exquisite descriptions of analytic process, which may well bewilder a novice but will enlighten and broaden an experienced clinician.

By this point, the reader will have recognized that Mahon is a rare bird who writes in a poetic, metaphoric style and still makes clear, mind-stretching sense in discussion of theory and clinical process. And this is done with a minimum of psychoanalytic jargon. Further, although his discourse is squarely within the province of classical psychoanalysis, Mahon is not rigidly doctrinaire. Indeed, he modifies and even contradicts received wisdom.

There is a lesson in this. Classical psychoanalysis still has enormous potential to pose challenging questions, to elaborate and advance the field in both theory and technique. And this book demonstrates this thesis. *A Psychoanalytic Odyssey* is tremendously edifying and provocative, quite mind-blowing, and a treasure trove of exciting ideas. For all this (and more), this is an important book that deserves serious attention.

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## BOOK REVIEWS

FAIRBAIRN AND THE OBJECT RELATIONS TRADITION. Edited by  
Graham S. Clarke and David E. Scharff. London: Karnac, 2014. 498  
pp.

This comprehensive volume, comprising thirty-eight chapters, is part of a series edited by Norka T. Malberg and Joan Raphael-Leff to validate and honor those pioneers in the psychoanalytic field who have transformed our understanding of the human psyche in significant ways. This volume, honoring W. R. D. Fairbairn, is a compendium of papers addressing his work by various authors; the book's editors are Graham S. Clarke and David E. Scharff.

Four categories have been designated by the editors for the material they present: "Historical," "Clinical," "Theoretical," and "Applications." They introduce each category with an overview of the mostly original, solicited contributions grouped within it. The overviews, together with the fine papers themselves, have increased my understanding of how psychoanalytic thinking has evolved and been enriched with the significant contribution of Fairbairn.

In his introduction, James S. Grotstein credits Fairbairn with introducing the need for basic dependency and relationship in the development of the psyche. Although not fully acknowledged in his time and marginalized by some, he set the stage for a different understanding of psychic structure that led to what has become known as the object relations school.

Chapter 1 of the "Historical" section, "From Instinct to Self," was coauthored by David E. Scharff and Ellinor Fairbairn Birtles (Fairbairn's daughter), who have also coedited a volume of Fairbairn's papers.<sup>1</sup> This chapter describes the context in which Fairbairn developed his model

<sup>1</sup> Birtles, E. F. & Scharff, D. E., eds. (1994). *From Instinct to Self*. Northvale, NJ: Jason Aronson.

of personality structure. His definitive change in thinking and language reflected a more humanistic model. In contrast to Freud, who pursued a more objective and scientific view of psychic structure with his tripartite model, Fairbairn worked within a philosophical and religious belief system. Kant, Hegel, and Aristotle provided him with a dialectical, reciprocal way of thinking and being in keeping with his Presbyterian training. His first degrees from the University of Edinburgh were in philosophy and religion.

It was after Fairbairn's experiences in World War II that he sought medical training and became involved in psychoanalysis in London, in order to understand what he saw as the traumatic effects of war—much as Bion did. Fairbairn was also influenced by his work in institutions and with abused and neglected children. His early papers of 1940 to 1944 describe the beginnings of a model in which relationships from infancy to maturity are seen as potentially meeting necessary dependency needs and consequently leading to more reciprocal adult relationships. Fairbairn felt that disappointment and ambivalence in this basic relationship with the mother or caretaker is frequent, unfortunately, and has a negative effect on personality structure. Dissociation and repression serve to deny or minimize difficulties in order to preserve the relationship at all costs; this results in a schizoid personality. Fairbairn believed that splitting, with dissociation and repression, occurs in all individuals.

In 1952, Fairbairn's earlier papers led to the publication of a more definitive work.<sup>2</sup> During this period, he emerged from his more isolated life in Scotland to become part of the Independent group in London and a member of the British Psychoanalytical Society. Klein's paranoid-schizoid category was influenced by Fairbairn's work (though she did not acknowledge him). His contributions during these years have been summarized elsewhere.<sup>3</sup> Expanding on Fairbairn's thinking, Guntrip initiated use of the term *self* as synonymous with *ego*.<sup>4</sup> Both Sutherland and

<sup>2</sup> Fairbairn, W. R. D. (1952). *Psychoanalytic Studies of the Personality*. London: Tavistock.

<sup>3</sup> Sutherland, J. D. (1963). Object relations and the conceptual model of psychoanalysis. *Brit. J. Med. Psychol.*, 36:109-124.

<sup>4</sup> Guntrip, H. (1969). *Schizoid Phenomena, Object Relations, and the Self*. New York: Int. Univ. Press.

Guntrip are discussed in detail later on in *Fairbairn and the Object Relations Tradition*, in the “Theoretical” section.

Fairbairn described personality development differently than did Freud, Klein, and others of the day. He introduced the *endopsychic structure of the mind*, made up of a central ego that interacts with libidinal objects (relationships) that it has internalized in the hope of satisfying its basic needs for love and nurture. The central ego, or *self*, interacts with the libidinal object as exciting and potentially meeting its needs, or as disappointing, rejecting, and antilibidinal. In order to preserve the dependent relationship and not suffer loss of the need-satisfying object, the central ego represses or dissociates whatever is disappointing. Fairbairn introduced the term *saboteur* to describe the way in which the patient blames himself for his neediness in order to preserve the idealized view of the rejecting libidinal object. (Tomkins and others describe affect as a response to these internalized objects.<sup>5</sup>) Calling this the *moral defense*, Fairbairn observed that the anger and disappointment behind the defense, as well as hope and loyalty toward the object, later become a part of the transference and treatment process.

Fairbairn described aggression as a reaction to the negative libidinal experience, not an inherent part of the personality, as Freud, Klein, and Klein’s followers believed. His religious beliefs stressed redemption and reciprocity, not aggression and retribution. Fairbairn also replaced the Kleinian emphasis on fantasy with his model of the libidinal structural system, wherein the mind is inhabited by real people in the internal object world, not structured by fantasy.

In his chapter, “From Oedipus to Antigone: Hegelian Themes in Fairbairn,” Gal Gerson explores Hegelian thinking in Great Britain during Fairbairn’s time and how this impacted not only Fairbairn himself, but also Winnicott, Suttie, and others. Hegelian dialectics place the individual in a broad social context involving family and state and never existing in isolation. Fairbairn felt strongly that the mature adult’s first loyalties are to the community and the social surround, as well as to family; thus, the anxious ego must split itself between these three libid-

<sup>5</sup> Tomkins, S. S. (1970). Affect as the primary motivational system. In *Feelings and Emotions*, ed. M. B. Arnold. New York: Academic Press.

inal objects by utilizing repression and dissociation. This splitting creates an ambivalence that interferes with mature relationships, and the result is a struggle between loyalties. This was particularly so during wartime.

While Fairbairn was pessimistic about individual maturation, he believed, in keeping with his religious beliefs, that struggle and conflict revive the need for morality and ethical values. Winnicott and Suttie held a more positive view, feeling that good enough maternal care facilitates mature independence and results in only marginal aggression, with less social unrest.<sup>6</sup> With the reinterpretation of the Freudian oedipal complex in Hegelian terms, castration fears and competitive aggression to obtain what is “forbidden” are replaced by an emphasis on kinship fostered by good maternal care.

Several chapters in this book emphasize the need to relate psychoanalytic thought more closely to the natural sciences, away from Freud’s instinct theory. Gavin Miller, for example, contributed a chapter called “Making Fairbairn’s Psychoanalysis Thinkable: Henry Drummond’s Natural Laws of the Spiritual World.”

In his chapter, Gabriele Cassullo discusses what he calls “Splitting in the History of Psychoanalysis: From Janet and Freud to Fairbairn, Passing Through Ferenczi and Suttie.” I find it interesting to follow how psychoanalytic pioneers such as these and many others managed to come to a more or less common understanding of dissociation and the schizoid personality disorder, despite personal and political differences.

Cassullo notes that, based on his treatment of hysterics, Janet described the phenomenon of dissociation in his case studies, but the young Freud, even though less experienced clinically, refused to acknowledge Janet, while claiming similar results of his own. In working with Charcot, Freud observed his patient Emma to have similar symptoms; when she did not respond to his treatment, he noted a degenerative process and did not offer much hope. Janet, however, continued to claim success in his work with dissociation.

It was Ferenczi who combined Freud’s findings on infantile sexuality with Janet’s ideas on early trauma and the resulting dissociation. In this

<sup>6</sup> We might speculate that these differences in viewpoint reflect the authors’ early experiences; Fairbairn did not have a good beginning, as his mother was depressed and his father was ineffectual.

way, he concurred with the splitting and dissociation that Fairbairn later proposed. Influenced by Suttie's work's,<sup>7</sup> Fairbairn's writings established early relationships as the primary basis for personality development.

In her contribution, Hilary J. Beattie writes about Fairbairn's personal and sexual life, examining his diaries and personal notes of 1939–1940, as well as his case histories. Fairbairn rejected Freud's theory of bisexuality and described homosexuality as a regression and as arrested early development, referring back to the failure of early mothering. The longing for the father's penis is a substitute for the mother's breast, he felt. He did not believe that homosexuality can be treated in regular analytic practice.

A rich history of how Fairbairn's ideas have flourished and evolved in innovative directions in South America is described in a chapter co-authored by Mercedes Campi, Adrián Besuschio, Luis Oswald, Isabel Sharpin de Basili, and Rubén M. Basili. These authors discuss how the Argentine Psychoanalytic Association has evolved its own unique "Fairbairn Space" by translating object relations in new terms: as "links," or social structures, that come into play in human interactions. The social environment is thus internalized in the form of identifications with libidinal objects. Study groups on these themes have developed, and Fairbairn has become part of training programs.

Part I of *Fairbairn and the Object Relations Tradition* concludes with Otto F. Kernberg's comments on the impact of Fairbairn's work on current psychoanalytic practice. Kernberg attributes to Fairbairn and Jacobson the contemporary understanding of the personality's psychic structure. Kernberg discusses how Fairbairn's ideas about the central ego dealing with ambivalent libidinal objects are played out in the transference with more disturbed, borderline patients. He feels that Fairbairn did not properly acknowledge the aggressive death drive as described by Freud and Klein. Nonetheless, Kernberg published a book in which Fairbairn's contributions are noted.<sup>8</sup>

The contributions in part II of *Fairbairn and the Object Relations Tradition*, designated "Clinical," form the heart of the book. Thomas H. Og-

<sup>7</sup> Suttie, I. (1935). *Origins of Love and Hate*. London: Free Association Books, 1988.

<sup>8</sup> Kernberg, O. F. (1976). *Object Relations Theory and Clinical Psychoanalysis*. New York: Jason Aronson.

den's paper, "Why Read Fairbairn?," translates Fairbairn's dense and abstract language into a more humanistic one, with clinical examples from Ogden's own practice. Ogden sees Fairbairn as introducing the notion of a traumatic experience occurring when the infant or child realizes his dependency on a mother who cannot meet his needs. He is at the mother's mercy and feels shame and humiliation, blaming himself for his neediness. Ogden describes how the child internalizes the mother both as an enticing and hopeful libidinal object, and as a rejecting and disappointing one, in order to maintain a sense of self and avoid psychic death. Ogden connects this with Freud's "Mourning and Melancholia" (1917).

Ogden goes on to describe how the individual works to maintain a pathological addiction with the care-taking object, almost a physical bondage, with the hope and belief that he can make this rejecting libidinal object love him. This mobilizes the motivational system of the central ego. Ogden calls on this central ego (or self) as that part of the endopsychic structure that can be freed up to observe and learn. The goal in treatment becomes one of accepting oneself and the other, coming to terms with internalized negative identifications with negative libidinal objects. The relationship with the therapist makes this possible. Because transference and countertransference conflicts are played out as projections of internalized libidinal objects, it is vital that the therapist resolve his own issues in this regard, and is able to acknowledge to the patient his own struggles as he interacts with those of the patient. The therapist emerges as a "real person" and serves as a new object.

The role of the therapist is also taken up by Neil J. Skolnick in his chapter, "The Analyst as Good Object: A Fairbairnian Perspective." The therapist he describes came to represent the relational school.

In exploring the origins of the internalized object, Bernhard F. Hensel compares Fairbairn to Klein. The latter, following Freud's drive theory and influenced by Abraham, described a guilty baby born with aggressive fantasies. Klein's baby starts to develop a superego in his first year, and grows into the early oedipal phase and depressive position with accompanying fantasies independent of his environment. In contrast, Fairbairn described an innocent baby who takes in his environment and is vulnerable to traumatic maternal failures; this baby interacts with real

figures. Fairbairn saw the internalization of these figures as the building of the endopsychic structure of the personality. Klein discussed internalization as well, but as part of a system involving projection and paranoia. Influenced by Fairbairn, she labeled this behavior *paranoid schizoid*. The influence of parents and environmental factors was minimized in her work with children, and interpretation prevailed.

Eleanore M. Armstrong-Perlman elaborates a redefinition of the oedipal stage in terms of Fairbairn's model. The child is faced with the move from a dyad with the mother, with its internalized libidinal objects, to a triad involving a parent without a breast, who offers a relationship that is more emotional than erotic and physical. The central ego of the child must begin the task of separating from the mother, and relies on its internalized object to deal with the anxiety in doing so. The child must share the mother with the father, physically as well as emotionally, and this is a blow to his self-esteem, triggering jealousy and envy. He now interacts with both parents, dealing with his internalized libidinal objects for both, depending on the nature of the interactions within the triad.

Fairbairn's contribution to the study of personality disorders and multiple personality is taken up in several chapters. Carlos Rodríguez-Sutil points out that Fairbairn's model is crucial in understanding early pathology and some borderline pathology, but is not as germane to hysterics and neurotics. His description of the schizoid personality has been compared to the "as-if" personality and Tustin's autistic states. Fairbairn's concern was with inner reality as it exists before the oedipal phase, superego development, and the depressive stage. Narcissism is not part of the early structure, according to Fairbairn.

Valerie Sinason writes that Fairbairn added tremendously to the understanding of the treatment of trauma and abuse in England during his time. Attachment to the abusing object reflects the need to preserve the inner world at all costs and speaks to strong unmet dependency needs.

In a chapter called "Fairbairn and Ferenczi," Graham S. Clarke, one of the book's coeditors, tells how a landmark paper of Ferenczi's describing parental sexual and emotional abuse<sup>9</sup> alienated Freud, who

<sup>9</sup> Ferenczi, S. (1933). Confusion of tongues between the adults and the child. In *Final Contributions*. London: Karnac, 1980.

had earlier espoused but retracted similar beliefs.<sup>10</sup> Fairbairn shared the concern regarding trauma and child abuse; he agreed with Ferenczi that traumatic abuse results in repression and dissociation. Ferenczi's description of the *introjection of the offender* is similar to Fairbairn's *moral defense* and *saboteur*, used as defenses by abused personalities. Both authors affirmed that guilt and anger as they affect superego development must be addressed in treatment.

In 1941, Fairbairn made revisions and elaborations to his model to incorporate transitional developmental stages. His view of the oedipal triad did not focus so much on three persons; instead, he saw the inner representatives of this triad as the central ego, the libidinal ego, and the antilibidinal ego. His concern was primarily with early splits in the ego and the resulting schizoid personality. He distinguished between deficit pathology and conflict pathology, but also questioned whether pathology does not always reflect early deficits. These revisions in Fairbairn's thinking are discussed further in the next section of the book, called "Theoretical."

Paul Finnegan and Graham S. Clarke point out in their chapter, "Fairbairn and Multiple Personality," that Fairbairn's early papers and MD thesis demonstrated an interest and concern for multiple personality as related to dissociation and repression. They point out that Fairbairn considered dissociation a defense against early anxieties, particularly abandonment fears. Clarke adapts Fairbairn's structural model to topographical categories that include learning from experience; he and Finnegan offer five cases with differing dynamics and with whom varying levels of success were achieved. These authors describe an expansion of the powers of the central ego and the ideal ego in the process of identifying libidinal and antilibidinal structures, with the goal of making them conscious. There is also a review of recent research on the subject of multiple personalities, as well as of contributions to this topic by other authors.

<sup>10</sup> As is well known, Ferenczi was initially part of Freud's inner circle and worked closely with him. He was the analyst of Klein and Balint, among others. Sharp disagreements between Ferenczi and Freud led to a schism that had not been repaired at the time of Ferenczi's death in 1933. Balint had tried unsuccessfully to reconcile their differences, particularly in regard to the need for regression to make up for early deprivation, as Ferenczi advocated.

The "Clinical" section of *Fairbairn and the Object Relations Tradition* also includes chapters about the adaptation of Fairbairn's model to other treatment modalities, including work with couples; this is addressed by Molly Ludlam in "Sitting with Marital Tensions: The Work of Henry Dicks in Applying Fairbairn's Ideas to Couple Relationships." Joshua Levy contributed a chapter on further thoughts on the interpretation of dreams, and there is a discussion of "Emptiness Pathology" by Basili, Sharpin de Basili, Besuschio, Campi, and Oswald.

Coeditor Scharff concludes this part of the book with a summary of the influence of Fairbairn's thinking on attachment theory; he also discusses neurological research involving emotional response and facial expression. Analytic field theory as put forward by the Barangers has enlarged our understanding of the psychoanalytic relationship and communication patterns as well, Scharff notes. I have found that, although Fairbairn's role in these developments is sometimes recognized, his work in this regard has not become part of many training programs.

In the following section of the book, "Part III: Theoretical," the editors credit Sutherland, Padel, and Guntrip with establishing object relations theory in the United States and clarifying Fairbairn's ideas. Sutherland's biography explains Fairbairn's model of the mind in the context of his origins and history, offsetting the then-critical view of Winnicott, Kahn, Klein, and the Middle Group in London, even as these authors shared Fairbairn's ideas. Winnicott remained convinced of primary ambivalence in the newborn, even though, like Fairbairn, he emphasized the maternal role as crucial to emotional growth.

Meanwhile, Winnicott became famous in France and England with his original and humane style. Like Fairbairn, he elaborated an idea of transitional space between baby and mother, emphasizing optimism, creativity, and the beginnings of play and origins of culture. Fairbairn introduced transitional space as evolving in three stages toward maturity, but remained pessimistic about achievement of so-called mature dependence. Mitchell and Modell described Fairbairn as too theoretical and not clinical enough.

Padel's laudatory overview of Fairbairn's contributions is praised by Graham S. Clarke for its detailed discussion of clinical implications in a chapter entitled "John Padel's Contribution to an Understanding of Fair-

bairn's Object Relations Theory." In "Fairbairn Elaborated: Guntrip and the Psychoanalytic Romantic Model," Michael Stadter notes that Guntrip wrote about his analyses with both Fairbairn and Winnicott.<sup>11</sup> Guntrip experienced Fairbairn as formal and classical, while he found Winnicott more romantic and humanistic, enabling Guntrip to reach his "more schizoid self" that had suffered due to his mother's depression.

Aleksandar Dimitrijevic contributed a chapter outlining Mitchell's effort to integrate what Mitchell considered Fairbairn's revolutionary model with his own training at New York's William Alanson White Institute, which emphasized Freudian and Sullivanian interpersonalism. Mitchell believed that new ideas should be synthesized with existing ideas in order to see each contribution as inspirational in its own right, toward building a more inclusive understanding. In 1983, he and Greenberg published what is now considered the foundational text for relational psychoanalysis.<sup>12</sup>

The remaining chapters in part III raise specific theoretical issues. Jill Savege Scharff describes her work with couples, families, groups, and communities, using a model developed in South America to deal with crises such as war, intergenerational conflicts, and trauma; she writes about the effects of these on the individual and his libidinal objects, including anxiety, guilt, and conflict. In an interesting chapter called "Fairbairn and Pichón Rivière: Object Relations, Link, and Group," Lea S. de Setton explains in detail how she worked with a patient's response to internal libidinal objects in reaction to external events.

Ricardo Juan Rey's chapter is "The 'Intuitive Position' and Its Relationship to Creativity, Science, and Art in Fairbairn's Work." Rey asserts that the trauma of birth and separation from the mother's body results in a loss that the baby attempts to fill by creating an external experience of the mother and her body, based on early external interactions. Rey sees this attempt as the basis for artistic creativity. The creative act seeks to connect inner life with outside reality and give it meaning.

<sup>11</sup> Guntrip, H. (1975). My experience of analysis with Fairbairn and Winnicott. *Int. Rev. Psychoanal.*, 2:145-156.

<sup>12</sup> Greenberg, J. & Mitchell, S. (1983). *Object Relations in Psychoanalytic Theory*. Cambridge, MA: Harvard Univ. Press.

David P. Celani questions Fairbairn's structural model in "Revising Fairbairn's Structural Theory." What is the origin of the first object—is it self-generated or was it already there? What role is assigned to the central ego? Fairbairn struggled with these issues himself, initially seeing the central ego as in charge, much as Freud had seen the ego "riding" the id. Fairbairn questioned this in his later attempts at revision. Celani suggests that there may be a struggle among libidinal objects, with the critical superego often overtaking the central ego; he has witnessed this in his clinical practice, he states. Celani feels Fairbairn never clarified the role of aggression in these interactions.

The remaining papers in this section discuss specific problems. What kind of mind do these egos or selves require and represent? Is it a unitary mind that reflects the different needs of both mind and body? In his chapter, "Fairbairn and Partitive Conceptions of Mind," Tamas Pataki argues for a so-called *partitive mind* that responds to specific needs and selves while allowing identification as an *I* and a *me*. Clinical examples illustrate his view. A concern is that Fairbairn saw libidinal objects as interacting in isolation, as though they are not connected to the outside world; this seems a contradiction, since Fairbairn introduced object relationships as the primary goal, taking precedence over Freud's emphasis on instinct and drive satisfaction. Fairbairn struggled with various hypotheses to explain whether libidinal objects exist outside the mind; his *dynamism* hypothesis suggests that the mental structure of the mind originates from an outside source of energy, such as the original libidinal object, and does not exist in isolation.

James Poulton discusses "Fairbairn and the Philosophy of Intersubjectivity," suggesting that the recent work of Merleau-Ponty would have provided Fairbairn with the revisions he and his critics sought. Merleau-Ponty proposes a reality outside the mind—a bodily experience of otherness shared by another body, an embodiment of consciousness. External perception validates the outside and coexists with the inside; inside and outside become inseparable. Fairbairn wavered in spite of his hypotheses about these issues, and Poulton describes his retreat to internality in his later writing. Had Fairbairn led a less isolated life, Poulton suggests, he would have broadened his thinking and might be recognized today as

one of the founders of contemporary intersubjectivity. Instead, he was marginalized and not sufficiently recognized.

Part IV of *Fairbairn and the Object Relations Tradition*, "Applications," highlights the little-known but significant contributions that Fairbairn made to the psychology of art and creativity, as well as to the social extension of the individual in group and political action. Steven Z. Levine describes Fairbairn's understanding of creativity in "Fair Play: A Restitution of Fairbairn's Forgotten Role in the Historical Drama of Art and Psychoanalysis." Levine characterizes Fairbairn's view of creativity as an expression of conflict and restitution, in keeping with his theory of development. His many papers on the subject surpass the writings of Freud and Klein, the author states. Fairbairn felt a strong moral obligation toward social and political action; he questioned the effects of dictatorships and communism on individual freedom.

Rainer Rehberger wrote a chapter entitled "Viewing Camus's *The Stranger* from the Perspective of W. R. D. Fairbairn's Object Relations." Rehberger discusses the grieving process and the "dry tears" of the hero of this 1942 novel for his dead mother.

\* \* \* \* \*

Overall, this book conveys a deep appreciation for Fairbairn's contributions and gives us a better understanding of him as a man who championed the need for human relationships. I concur and recommend this volume for its historical clarification of how psychoanalytic thinking evolved toward a theory of relationships. It highlights the evolution from Freud's structural model, with its emphasis on biological drives, to more recent object relations models that highlight relationships and early nurturing. As Mitchell suggested, new perspectives should be integrated with the old and the familiar.

Together with Ferenczi, Fairbairn stands out as an innovator who introduced ideas that in his time directly challenged established thinking. Even though some of his contemporaries, such as Klein and the Independent group in London, were applying new ideas to psychoanalytic practice, they continued to pay homage to Freud.

Before Fairbairn, Ferenczi focused on the early maternal relationship and the traumatic effect of parental neglect and abuse, whether

physical or sexual. He called for the analyst to repair this early damage with a loving and responsive relationship. Although Ferenczi was marginalized and disqualified during his lifetime for what was then a radical viewpoint, he paved the way to the development of a relational mindset by Fairbairn and others.

Fairbairn drew on his theological and philosophical background to offer an alternative structural model for personality development. Like Ferenczi, he focused on the early years of life as the basis for personality development. His original model included a libidinal, ambivalent ego that continually sought love and nurture from an object that inevitably frustrated and disappointed, leading to the individual's self-blame for his neediness. This "moral" position of self-blame can be compared to Freud's repetition compulsion, by which he pessimistically explained the motivation for the compulsion to the death instinct. Fairbairn, however, believed that all pathology is due to inadequate mothering, which is pervasive; like Ferenczi, he believed that trauma occurs as the result of neglect and abuse. He did not develop his model beyond the early years of dependency, in later years struggling with many unresolved theoretical questions.

In spite of their somewhat marginalized positions in today's psychoanalytic world, both Fairbairn and Ferenczi made significant contributions that greatly influenced psychoanalytic thinking and practice in the direction of relational models.

**MARY SAN MARTINO (BROOKLINE, MA)**

**INDEPENDENT PSYCHOANALYSIS TODAY.** Edited by Paul Williams, John Keene, and Sira Dermen. London: Karnac, 2012. 448 pp.

As many readers know, the *Independent group* in psychoanalysis is the designation given in the 1960s to what had formerly been known as the *Middle group*, so named because its members wished not to align themselves with either of the polarized groups formed by the followers of Anna Freud and Melanie Klein, respectively. *Independent Psychoanalysis Today* is a compendium of articles by several prominent analysts of the Independent tradition practicing in London today.

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As John Keene points out in his very extensive and fascinating introductory essay, "Reflections on the Evolution of Independent Psychoanalytic Thought," Klein arrived in London in 1926, and her ideas became the subject of debate for some time. Her position in the psychoanalytic community was complicated by the antagonizing presence of her daughter, Melitta Schmideberg, and Schmideberg's analyst, Edward Glover, which fueled a sense of animosity and rancor. When Freud arrived in 1939 with his daughter Anna, a more explicitly polarized set of positions emerged.

Klein's work aroused emotionally heated and contentious reactions that spawned productive but fractious discussions, known as the Controversial Discussions of the 1940s. As Keene describes, the debate was "three-cornered": it arose out of staunchly pro-Klein and anti-Klein groups, along with a "third non-aligned group who approached Klein's work with a questioning and analytical stance" (p. 5). Keene tells us that Anna Freud and her followers "withdrew to Hampstead" (p. 5), while Glover, disappointed in his wish to be president of the British Psychoanalytical Society, left the Society. Thus, discussion fell to the Kleinians and those who came to be called the Middle group. Sylvia Payne became president of the Society; she initiated an agreement that devised a two-stream structure for psychoanalytic training that kept the British Society in one piece, so to speak.

The first several essays in this book, placed under the rubric of "Orientations," are lengthy historical/political, theoretical essays about the Independent tradition itself—a tradition rooted in the play therapy of Winnicott and the work of Balint and Ferenczi. These influences are traced and elaborated in this introductory section. Keene uncovers other important influences: that the role of affect is thought to be key in countertransference responses, for example, and Ella Sharpe's view that the analyst must be "in profound contact with his/her feelings" (Keene, p. 38).

These essays are intended to situate the Independent approach as a tradition unto itself—arising in between the Kleinian and Freudian positions articulated in the 1940s, as mentioned, but having its own identity, particularity, and value. There is a sense in these essays that, historically and politically, the Independents have at times felt sidelined by other,

more prominent voices/theories/positions within the British psychoanalytic scene—namely, those of the Kleinians. Although I think the book means to function as an important corrective to this, some of the papers inadvertently wind up presenting the Independent approach as junior or inferior to Klein's—simply because of a defensive tone that creeps in and weakens the presentation of this tradition.

The sometimes polemical aspect of the introductory articles intends to establish the true contribution of the Independent tradition in relation to a contrary position, which here can be a sometimes-implicit straw man either of Klein herself or of the contemporary Kleinians, whose theoretical orientation is being countered. Particularly at certain moments in the book's introductory essays, the Independent tradition is described *less for itself* and more through its contrasts with the Kleinian approach. This tends to weaken our picture of the Independents—a significant, unintended consequence of the rhetoric of comparison.

Keene points to two crucial “illuminating and unifying threads” (p. 8) in the Independent tradition, deriving from Ferenczi's and Winnicott's responses to Freud's 1911 paper, “Formulations on the Two Principles of Mental Functioning” (a paper Bion later engaged with as well). The emphasis for the proto-Independent thinker is on interaction. Ferenczi, in particular, underscored the individual's relation with his world from birth through adulthood. Winnicott authored the statement that Keene says most typifies the Independent tradition: “There is no such thing as an infant.”<sup>1</sup>

Keene explicitly notes a point of the Independents' departure from Klein (who had been analyzed by Ferenczi). Klein's theory includes an emphasis on primary envy and aggression, which as portrayed in these essays becomes unitary. Keene states, “Independent analysts have resisted the pressure within the Kleinian development to take explanations of all behavior back to oscillations between paranoid-schizoid and depressive positions, and tendency to attribute all pathology to the vicissitudes of destructiveness” (p. 9). Still, the Independents do not subscribe to Freud's notion of hallucinatory wish fulfillment alone. Drawing on Win-

<sup>1</sup> Winnicott, D. W. (1960). The theory of the parent-infant relationship. *Int. J. Psychoanal.*, 41:585-595. Quotation is from p. 587n.

nicott (see footnote 1), they believe that primitive anxieties, along with real maternal deprivation and trauma, often mitigate against the satisfactions of the infant described by Freud.

There is no doubt that the Kleinian position is unflinching about the role of phantasied destructiveness in the infant's psychic development—but, far from being a unitary position, for Klein, aggression and hate are always in a kind of dialectic with reparation and love. Hate is seen as in tandem with love and reparation, and it is this tension that fuels the development of the ego and of object relations. Keene hones in on the destructiveness, neglecting the vulnerability and need that also drive Klein's infant, making the point that the Independents favor the idea of a more well-rounded infant and therapeutic approach—"a fully interactive model" (p. 11) distinct from other approaches.

The fact that his rendering of Klein's theory is reductive, overlooking the dialectic that is crucial to her theory, weakens Keene's presentation not only of Klein's views, but also of the Independent approach. When the counterexample wobbles, the contrast that leans on it wobbles as well. It becomes difficult to grasp the concept that is meant to be clarified by the comparison. I want to be clear at this point that what I am objecting to is not the Independent approach itself, but the way in which it comes to be argued for here, which I think puts it at some disadvantage.

Such rhetoric is also present in Michael Parsons's paper, "An Independent Theory of Clinical Technique." He states, "The Independent analysts have tended to organize their analytic identities around underlying intellectual and human values rather than analytic doctrines" (p. 65). He goes on to say that the Independents value human uniqueness over theory. Citing Ferenczi as a central figure of the Independent tradition (passed through Balint, in particular), Parsons notes the privileging of what he calls *an ethical position over a theoretical one* in the Independent approach.

Parsons implies that, because Klein and Sigmund Freud were developing a theory of the mind (which Parsons summarizes in an unfortunately reductive way), such a theory of mind takes precedence over both the human values to which he refers and the view of the individual as a particular or unique subject. The Independents are put forth as a group that does pay attention to these factors—unlike their theory-bound (and

less humane) colleagues. The same claim is made about ethics—for example, in relation to tact.

This effort to establish the Independents' position by situating it against an unnamed set of determinants constituting the contrary position again falls short. It does not give us much of a picture of what the Independents do that distinguishes them, and it sets up a straw man of Kleinian colleagues who, presumably, in their insistence on primary aggression, fail to be human (warm, attentive, and good listeners) with their patients.

Parsons seems to suggest that a key value for the Independents is fostering in patients *what comes from themselves*, rather than *what comes from the analyst*. He states:

For analysts in the Independent Tradition, it is a natural habit of mind to think in terms of quality of psychic life, using ideas like elasticity and flexibility, intellectual freedom, emotional availability, openness to relationships, tolerance and enjoyment of relationships, and a sense of being real. [p. 69]

Lest he be accused of relying on too much goodness, however, Parsons hastens to rectify the impression that Independent analysts ignore the negative transference.

What distinguishes the Independent tradition, then, from the other (presumably Kleinian) position is a "quality of object relating" that supersedes the emphasis on transference. "A quality of object relating needs to be a fundamental bedrock of the analytic setting, whatever the vicissitudes of the transference" (p. 73). This has implications for the frame, Parsons notes—though, frustratingly, he does not specify what this quality is; he simply asserts there is such a thing. Similarly, he extols the virtues of "a quality of listening" (p. 75).

Object relating, listening—surely, these are important notions to all analysts, irrespective of theoretical orientation. It is true that how one employs them derives from a theoretical perspective, a way of listening—i.e., what one hears, what one attends to, how one thinks about what one is hearing, etc. But Parsons wants to designate what gives the Independent tradition its specificity, and he intends to show us that these capacities in particular constitute the Independent orientation. Parsons

gives us a tour of the history of various thinkers in the tradition—and yet I think that what he winds up with fails to offer specificity about what the Independent tradition does (as opposed to the values they hold) that distinguishes them from other analytic traditions.

In her article, “The Intersubjective Matrix,” Joan Rafael-Leff further clarifies the Independent approach. She states:

In addition to a “two-person psychology” and the belief in psychosocial actualities as foundational to psychic reality, Independents were seen to practice selective eclecticism, to have respect of empiricism, and a predilection for playfulness, paradox, and illusion, combining spontaneity with disciplined clinical restraint. [p. 89]

She goes on to note that the Independents view psychoanalytic process as *dialogical*—that is, drawing on an examination of both sides of the interspsychic exchange. For Rafael-Leff, the Independent tradition has seen a shift from object relations to subject relations, and she notes key papers and ideas that have been central in the formation of the intersubjective perspective that lies at its heart. Her thesis, as she tells us, will be that the crux of all psychoanalytic theorizing inheres in how the infant’s mind is “humanized in the context of the nuclear family” (p. 90).

Rafael-Leff’s paper is not as polarized in its position, instead seeking to show how this intersubjective matrix, long developed by the Independents, now finds a place not only in the work of contemporary Independent analysts, but also in that of contemporary Freudians and Kleinians. Deeply rooted in neonatal research, it seems, Rafael-Leff sees the baby as a co-constructor of her “uniquely refracted reality” (p. 123). This co-construction, arising in infancy, has important implications for the technique of the working analyst. Rafael-Leff states, “Once the human mind is seen as constituted interactively, and psychoanalysis is regarded as intersubjective, the analyst can no longer be regarded as an aloof neutral arbiter of the patient’s reality” (p. 123).

According to this author, the analyst’s recognition of the importance of the intersubjective matrix leads to the patient being viewed as a subject who has come into formation through experiences with other minds—and this will obtain no less on the analytic couch. Thus, Rafael-

Leff inserts intersubjectivity into the Independents' contribution—and in this extensive paper, she demonstrates its centrality.

Part 2 of *Independent Psychoanalysis Today* is entitled “Interventions” and includes a number of more explicitly clinical papers. The first in the sequence is Paul Williams’s chapter on “Incorporation of an Invasive Object”—an arresting title, to be sure. The paper presents the clinical story of a patient in analysis who is by turns enraged and suicidal, and whose internal world is under the sway of a most intrusive internal object—what Williams calls an *invasive object*. This object takes over and dominates the patient’s mind, inevitably dominating the analyst as well and impinging on his capacities to think and work in sessions.

The presence of this object originated in a complex early world in which the patient’s mother and father were rageful and terrifying figures, but were nonetheless objects of identification. They shattered the patient’s sense of clarity, capacity to think, and ability to know the difference between love and hate. His mother’s violence, in particular, was a devastating current in the formation of his ego, and her attacks on him as a child had often left him disoriented and confused. Williams beautifully formulates a state of psychic and somatic disruptions as follows:

A primitive introject appears to have been installed in their minds and their experience of their bodies that was held by them to belong to their own self-representational system. Contradictorily, at the same time, this introjected presence was experienced as a concrete presence of a disturbing “foreign body.”  
[p. 185]

Williams describes a state of mind in which childhood identity is buried behind an “impenetrable seamless second skin” that affords a “false sense of integration” (p. 192). In this valuable contribution, Williams theorizes this psychic formation—including the presence of an invasive object—drawing on an array of psychoanalytic writers and terminology, spanning the gamut from Klein to more Independent authors, to describe the experience of a foreign presence taking root in the unconscious and the body, which lacks representational capacity.

Space constraints necessitate my limiting myself here to brief summaries of some of the many fine papers contained in *Independent Psycho-*

*analysis Today*. Most take as their challenge the illumination and explication of the Independent mode of working clinically. Chapter 6, by one of the book's coeditors (who also authored its introductory essay), Keene, is called "Boundary in the Recovery from Trauma and Abuse." This paper echoes Parsons's call for flexibility in the work of the Independent psychoanalyst. Keene is reminded of Sandler's term the *unofficial theories of the analyst* in his own sense that his technical flexibility was a source of both appreciation and threat for the patient whom he describes.

In another chapter, Susan Budd writes about the need to interpret outside the transference—and underscores the importance of the context of an interpretation as much as its content. In discussing transference, Budd usefully puts Kleinian analysts in clear, undisguised conversation with Independents—and the contrasts yielded by this more explicit comparison have less of a straw-man quality and are more constructive. She believes that Kleinian analysts are too welded to transference interpretations, and that this interferes with the establishment of a partnership with the patient. Again, the critique of contemporary Kleinians seems to be that their overriding attachment is to theory-guided interpretations rather than to patient-informed approaches.

Gregorio Kohon, in his paper on the oedipal complex, reminds us that shifts in theory—such as Klein's emphasis on the maternal breast as the site of early disappointment, ushering in the move to the father's penis—have important consequences for our theoretical suppositions and the clinical assumptions that follow. Kohon calls our attention to the slide that can occur when the Oedipus complex is read in such a way that its unconscious dimension is denied, elided, or forgotten. He reminds us of just that—that the wishes, desires, and phantasies related to the Oedipus complex are indeed unconscious.

In her contribution, Rosine Perelberg investigates sexuality, violence, and hysteria through the analysis of a young man. In so doing, she explores the fluid identifications present in hysteria and borderline states and their implications for both sexuality and violent behavior.

My favorite paper in the book is by one of its coeditors, Sira Dermen, titled "Endings and Beginnings." I find that, in this beautiful clinical contribution, Dermen's understanding of her patient—who asks "but what do I do?" in response to almost every analytic intervention—resonates

with my own clinical experience. It is also germane to the experiences of many supervisees, who are only too often disheartened by such a question from a patient in response to what has seemed to be a thoughtful, careful analytic intervention. Dermen explores the patient's use of evasion—what Bion theorized as the infant's (and infant–mother pair's) inability to tolerate frustration. In Dermen's view, such tolerance is crucial to the capacity to bear emotional experience, including that evoked by an analytic interpretation. Those who cannot bear emotional experience often wind up asking, "But what do I do with this?" Dermen exposes this query as part of an instrumental approach to analysis and to emotional experience more generally.

At its best, *Independent Psychoanalysis Today* yields strong comparisons between the Independent tradition and those it arose in relation to. It offers several beautiful clinical papers that illustrate the workings of the Independents.

**LYNNE ZEAVIN (NEW YORK)**

**SHAME AND HUMILIATION: A DIALOGUE BETWEEN PSYCHOANALYTIC AND SYSTEMIC APPROACHES.** By Carlos Guillermo Bigliani, Rodolfo Moguillansky, and Carlos E. Sluzki. London: Karnac, 2013. 207 pp.

This book, a dialogue between psychoanalytic theory and systemic theory, is part of the excellent International Psychoanalytical Association series edited by Gennaro Saragnano, "Psychoanalytic Ideas and Applications." There are nine chapters: three by each author, plus a joint prologue and epilogue. The format is interesting: each chapter is followed by a commentary written by the other two authors. All three trained and worked together in Argentina. Bigliani is now in São Paulo, Moguillansky in Buenos Aires, and Sluzki in Washington, DC. All have other international affiliations. They have adopted divergent approaches in their clinical work, and this volume came out of their search for a bridge between them. They work with individuals, families, and international political organizations.

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The authors emphasize the social context of the hidden emotions of shame and humiliation—"the oppressive power of the opinion of the

Meaningful Others" (p. xi). Their range is a broad one: from the well-known tale of Freud's father's hat thrown into the mud by anti-Semites, to those who suffered in the Holocaust, to the atrocities of Abu Graib, and from adolescent bullying to Nazi bullying to today's terrorism.

Bigliani discusses the dynamics of shame and humiliation, describing the movement away from exclusively intrapsychic explanations. He finds some approaches to be so extreme that they throw the baby out with the bathwater, so to speak. More and more, cultural determinants are considered. Channeling Faimberg, he describes the transgenerational humiliation of Freud and his family, from his great-grandfather to his daughter Anna and the reviled incident in which Freud's father's hat was thrown into the mud and he merely walked away. According to Bigliani, "transgenerational humiliations can facilitate the suicidal idea as an answer to a situation perceived as inescapable (and even have an influence on the appraisal of the situation)" (p. 10)

As for bullying: "Today it is a classmate, next a minority, then a foreign country: the composition of the foreign ground for genocide or war is not unlike these childhood group phenomena" (p. 11) The book contains many diagrams depicting these influences that could easily accompany and illustrate an instructor's lectures.

Bigliani goes on to discuss some contemporary theories of shame versus guilt:

When we approach the symptom of shame in the intersubjective space, we can reverse misunderstandings in which the other becomes a representative or an executor of the ideal, modifying it, magnifying or diminishing it, or even giving it a different meaning. Shame emerges within the framework of a love relationship, with the reappearance of fantasies that waken the subject in relation to the ideal. [p. 27]

Basically in agreement with Bigliani, Mogueillansky notes that the other two authors and he himself were trained at a time when the social environment was considered relevant, as well as the intrapsychic. He summarizes in a very helpful way Bigliani's view of the various meanings of shame, as follows:

1. part of a continuum, a link between man's desires and guilt;

2. a negative assessment of the self;
3. the same as culpability;
4. a defense against exhibitionism;
5. the ego invaded by the infantile grandiose self;
6. associated with identity and narcissistic problems;
7. emerging as a process of individuation;
8. an expression of something forbidden;
9. signaling a confession of a defeat.

In his comments, Sluzki focuses on the *witness* in the experience of shame. He gives the example of the photos of the Abu Graib prison in Iraq. He sees humiliation as magnified by, and possibly activated by, the presence of a witness. Another example is that of Austrian Jews herded into the streets, made to kneel and brush the paving stones while being watched.

In his chapter, Sluzki tells the colorful story of an unknown composer chosen to guest-conduct his own piece with an orchestra. He was given a coat too small for him, and it ripped apart while he was conducting, resulting in much laughter from the audience. He was reduced to tears of humiliation (anger) and shame (self-reproach). This was relieved when the orchestra's regular maestro took off his own jacket, and all the men in the orchestra removed theirs. The composer forgave those who laughed and continued conducting.

Sluzki makes the point that we are all affected by the opinions of others. However, much of this is outside our awareness. He asks the reader to remember and write down a situation in which he or she felt humiliated, and another one in which he or she humiliated someone else. Most people find it *more comfortable* to be victim than perpetrator!

Sluzki gives an example: suppose you trip on the sidewalk while carrying a bag of groceries. Either no one sees you, or there is a friendly witness, or there is a hostile witness who laughs. He differentiates between circumstances of shame (agreement with the criteria of the public eye and our own) and humiliation (others do not agree with us) versus guilt (more nonfocalized than shame). In guilt, we believe that we did something wrong. In shame, we believe that we are bad. In humiliation, we believe that we are unfairly debased by the other.

The author thus makes complex differentiations between each emotion and the circumstances under which it arises. In particular, he points to the social advantage of the victim position. The victim receives empathy from others, who distance themselves from the perpetrators. This polarization can stand in the way of more flexible narratives. I found this to be of much interest, for in my clinical work I have seen a number of patients who embrace the role of victim and its secondary gains.

Sluzki goes on to apply this to the therapeutic process. The story needs to be destabilized. He gives the example of a patient who had been raped and responded with self-blame and shame. He notes: "Victims of extreme violence are able to free themselves from the one-note trap of revenge when their story is enriched as we recover or evoke the experience of shame" (p. 52).

In his comments on this chapter, Bigliani free-associates. He remarks on the battle for the role of victim, giving the example of those with symptoms of melancholy and self-accusations. Freud called this *melancholic self-humiliation*; it is difficult to treat. Bigliani reminds the reader of the limits of psychoanalysis! Some such conditions can be biological and require different treatment.

Moguillansky's chapter, using Freudian theory as its basis, is entitled "Shame, Humiliation, and the Hero." He views shame and humiliation as among the ego's misfortunes. Shame arises when the ego feels inadequate to its ideals. Humiliation involves a loss of respect for oneself due to a wound to the ego, a narcissistic injury. Moguillansky writes: "In humiliation there is not only a painful distance from the ideal, as happens in shame, but the pain also hurts the ego and questions its essence" (p. 144). The solution then becomes a reversal of the situation through heroic identification. When shame can be processed, it proceeds to humiliation, and can then (possibly) be worked through to forgiveness.

In their epilogue, the three authors report that they are quite content with the outcome of their work and believe they have erected the bridge they were looking for between Freudian and systemic theories. They have dialogued with one another and made some interesting comparisons.

While I found much of this book interesting (and think that it could be of help to political scientists), I was surprised at its insularity. I agree

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The volume begins with a wonderful piece by Akhtar entitled “Revenge: An Overview,” which I recommend to anyone curious about the phenomenon of revenge. After tracing the somewhat meager psychoanalytic literature on the topic, from Freud through Kohut, Searles, Horney, and a variety of other writers—and traveling from the Freudian drive-based notion of revenge as a reaction to oedipal loss, through a more Winnicottian notion of revenge, or an antisocial tendency as a reaction to early childhood deprivation—Akhtar creates a diagram of *good enough revenge*, on the one hand, and *vindictive revenge*, on the other, with their respective characteristics. He makes it clear that revenge exists on this continuum, and that it is possible for the desire for revenge to be a healthy defense when it does not become obsessive or sadistic.

Revenge can be thought of from three perspectives (with the first two perhaps more obvious than the third): defect, discharge, and defense. Defense seems the most interesting, and in fact, the theme of revenge as a defense permeates a number of the subsequent chapters. Here is Akhtar, about this dynamic:

From the perspective of defense, revenge constitutes the ego’s attempt to reverse humiliating passivity into triumphant activity, to restore traumatically depleted narcissism, and to extrude a malevolent “interject” . . . that is, an object that has been violently inserted into the self. Revenge, insofar as it carries the hope—mostly unrealistic—of permanently erasing the trauma one has suffered, also acts as a preserver of the good internal object and a defense against sadness and mourning. [p. 11]

Unfortunately, the concepts of a continuum and of healthy revenge are not further adumbrated in the remainder of the volume, and the focus becomes pathological revenge.

Following this introduction are clinical papers with commentaries. Kerry Novick depicts a remarkable, four-times-weekly child analytic treatment in a chapter entitled “Green Wounds: Revenge as a Preserver of the Self.” She recounts her heroic effort with Ali, an out-of-control 10-year-old boy who had been subjected to a kind of *soul murder* in which his mother encouraged him to be like the girl she wanted, and his father rejected him for his feminine identification. In effect, says Novick, “Ali constructed a creature who was neither boy nor girl . . . not like anyone

else in his family; he met no one's expectations, and disappointed everyone's hopes in order to avenge himself" (p. 25).

The case hinged on an incident to which every child therapist can relate. At one point, Novick had finally had enough, and she told Ali

. . . midway through a flailing tantrum that he was fired. He looked at me in shock, shaking his head in disbelief when I ushered him right out of the office and to his startled mother's car. His parents and I told him that he would have to earn back his treatment. [p. 29]

I will leave it to the reader to discover the results of this surprising and unplanned development, which appears to have succeeded because the fear of the possible complete loss of a loved object disabled the revenge "defense."

Barbara Shapiro's commentary on this case points out, among other things, that there was a certain strength in Ali's rageful attacks, which employed aggression and self-agency, as contrasted to the selfless compliance and conviction of unworthiness that may afflict adults and children who are traumatized. She also describes different kinds of revenge: *hot*, *cold* (as in calculating), and *malignant*:

Revenge is on a spectrum of hot to cold. Hot revenge . . . doesn't involve much executive function. It is immediate, stormy, impulsive, and poorly planned. Cold revenge is carefully planned and executed so as to have the pleasure of getting back at someone without getting caught. This requires a higher level of executive function. [p. 36]

And then she adds a third category, malignant revenge:

Finally, malignant revenge is sticky. It has a life of its own . . . . This makes the therapeutic work very slow and difficult, and prone to negative therapeutic reactions . . . . It is difficult to give up chronic vengefulness toward a particular person or group without a terrible loss of pride. [p. 37]

Shapiro's vivid metaphors have much to recommend themselves because they will be recognized by all of us as essentially true.

A second clinical presentation, by Daniel Freeman—of two child cases—is equally compelling and remarkable, and also uses a vegetative metaphor as a title: “As the Twig Is Bent, So Grows the Tree.” The first case is of a nine-year-old boy, Chris, subjected at six months to a separation from his mother, which led to her alienation from him. It is a beautifully described case, replete with early childhood traumatic memories, the use of a ventriloquist dummy by Chris as a latency child to contain his splitting, and his struggles to deal with aggressive desires unacknowledged by his mother. The case is so complex in many ways, however, that one is hard put to think of it primarily in terms of revenge.

The same can be said for Freeman’s next case, that of Ruth, born with strabismus in one eye, which required an operation and hospitalization at the age of two, attended by separation trauma. Ruth was also afflicted with a mother with unacknowledged sadism. Her mother decapitated her daughter’s pet chicken, served it for dinner without telling her, and then teased her as she was eating by asking, “Where is your pet chickee?”

That Ruth grew up with psychosomatic symptoms and feelings of terrible rage was more than understandable; and the narrative and angry cries reported by Freeman from Ruth’s treatment, as she works through her feelings during the analysis, are heart-rending. Her mother’s statement to her at one point, “Spare me your rage,” and Ruth’s unfortunate identification with her mother and that statement, tell the story.

Frederick Fischer, in commenting on Freeman’s two cases, highlights the separation-individuation attempts of Chris, but only when speaking of Ruth does he distill from the treatment the theme of revenge, doing so in a vivid manner: he compares aspects of her psychopathology to that of Shakespeare’s *Richard III* and of Ahab in *Moby Dick*. He makes a very poignant reference to Freud’s discussion of Richard III’s character in his paper “The Exceptions,”<sup>1</sup> in which a bodily defect becomes the focus of the need to take revenge (just as the loss of a leg does for Ahab). In Ruth’s case, the strabismus and attendant traumatic childhood operation are comparable to Richard’s deformed body.

<sup>1</sup> Freud, S. (1916). Some character-types met with in psycho-analytic work. *S. E.*, 14.

Otto F. Kernberg contributes a chapter on "The Spectrum of Narcissistic Transferences," which is replete with examples of different types of narcissistic patients, running the gamut from those who function on a "high, stable level," to those who are at a "fluctuating, borderline level," and finally to those who express "extreme non-depressive suicidality and self-destructiveness" (p. 88). Kernberg's descriptions of these different narcissistic types are masterful, and one is likely to recognize, particularly, the narcissistic patients of borderline quality through Kernberg's description of a combination of aggressiveness, arrogance, and incapacity for cognitive reflection.

For these and more disturbed patients, Kernberg recommends his approach of Transference-Focused Psychotherapy, or TFP, "whereby the therapist points out, at every point, the kind of relationship the patient's experience is activating in the transference" (p. 85). The reader is more or less expected to be familiar with TFP; in fact, the strict parameters that pervade this form of treatment are not explained here. And, as fascinating as Kernberg's article is, it does not focus on revenge (in fact, this is the chapter in which the word *revenge* does not appear), although rage, envy, and destructiveness are central features of the patients about whom Kernberg elaborates.

What follows are two applied psychoanalytic chapters concerning revenge. The first, by Eve Howell, is entitled "Three Literary Characters in Search of Revenge." The author examines Euripides's *Medea*, Bronte's *Wuthering Heights*, and Melville's *Moby Dick*. Howell admits that any choice of representative literary works risks being arbitrary, but one would have hoped that *Hamlet*, such a central drama to Western culture, might have been one of them.

Regardless, Howell nicely begins her piece with a Freud quotation: "If you want to know more . . . enquire from your own experiences of life, or turn to the poets."<sup>2</sup> She distills out of these character studies the common psychodynamic element of rage as a consequence of narcissistic injury, and she ends the piece with a quotation from Kohut, which says it all with reference to the pathological desire for revenge:

The need for revenge, for righting a wrong, for undoing a hurt by whatever means, and a deeply anchored, unrelenting com-

<sup>2</sup> Freud, S. (1933). *New Introductory Lectures on Psycho-Analysis*. S. E., 22, p. 135.

pulsion in the pursuit of these aims which gives no rest to those who have suffered a narcissistic injury—these are features which are characteristic for the phenomena of narcissistic rage in all its forms and which sets it apart from other kinds of aggression. [Kohut quoted by Howell, p. 117<sup>3</sup>]

Of course, none of these literary character studies depicts the type of early childhood and developmental steps—explored in the child clinical studies in this collection—that lead to personalities in which narcissistic injury gives way to the desire for revenge. Instead, the characters appear as adults already full-blown in their revengeful tendencies.

A second applied psychoanalytic piece, by Rama Rao Gogineni and April Fallon, “The Ubiquitous Nature of Revenge,” explores the topic from a “biopsychocultural perspective” (p. 119). This free-ranging summary, which invokes everything from ancient Greek myths to Judeo-Christian traditions, to honor killings to romantic killings to school shootings, also brings in evolutionary speculations, brain studies, and chimpanzee studies (to name just a few). It is rather turgid and overwhelming, and concludes in a way that is somewhat grim and disturbing: “We view revenge as a deterrent of harmful behavior serving an evolutionary function. There is accumulating evidence for a biological and genetic basis . . . . Studies from social psychology suggest that the appropriateness of the revenge response varies depending upon perspective” (p. 142).

Because Gogineni and Fallon throw so many elements together, the clear exposition of a continuum from healthy to pathological revenge, with which Akhtar began the collection, is not apparent, and the authors’ conclusions are neither cogent nor entirely convincing.

Last, Henri Parens, in a synopsis of the book’s articles, returns in a refreshing way to theoretical concerns about the genesis of revenge as a characterological feature in early childhood development. He favors his own theory, which he calls “the multi-trends theory of aggression.” This theory posits as one of its trends that “*hostile aggression/destructiveness* is generated by (*excessive*) *psychic pain*” (p. 146, italics in original).

<sup>3</sup> Kohut, H. (1972). Thoughts on narcissism and narcissistic rage. *Psychoanal. Study Child*, 27:360-400. Quotation is on p. 380.

While this seems to clothe the obvious in new language, it derives from a project begun in 1970 that incorporated 1,350 hours of observation of a group of ten psychologically healthy mothers and their sixteen newborns. The study extended over seven years, and the subjects were later followed up at nineteen, thirty-two, and thirty-seven years of age!

In reviewing the clinical cases in this book, Parens emphasizes the physical and psychic pain endured by the children described; he then challenges whether Freud's model of the "death instinct," favored by Kernberg, is explanatory of aggression. Not only does Parens contend that there is greater validity to his own theory of psychic pain, but he also suggests that, as a theory, the "death instinct" merely confirms the belief of some parents that an angry and aggressive child is "evil"; it fails to help them see that the child suffers from psychic pain and has a need to grow.

In this respect, Parens makes much of the importance of the child's development from birth to two years of age, contending that we have yet to fully appreciate the child's capacity to wonder and learn at an early age, and that traumas occur that can best be understood using a Mahlerian model (as in the case of Freeman's child patient, Chris, whose separation from his mother at six months threatened his sense of object constancy). However, Parens fails to leach out the particular phenomenon of "revenge" from the aggressiveness that can follow from such early narcissistic injury.

He then ends his essay by pulling back his lens and focusing on man's societal tendencies that speak of revenge, referencing Freud's discussion with Einstein on war.<sup>4</sup> And on an optimistic note, Parens concludes that there is an upward trajectory in our social lives, so that the phenomenon of "an eye for an eye" is giving way to forgiveness. As an example of this, he cites an improvement in black/white race relations in the United States, as described by civil rights leader Julian Bond. It is very nice to read a psychoanalytic chapter that even mentions the Civil Rights Movement (this has happened much too infrequently in psychoanalytic literature, in my opinion) but, unfortunately, Parens's sense of a general upward trajectory—for which he cites only this one example—may be overly optimistic.

<sup>4</sup> Freud, S. (1933). Why war? *S. E.*, 22.

The fact is—pulling the lens back further myself—I am writing this review shortly after the Charlie Hebdo and Jewish supermarket murders in Paris, the barbarous burning to death of a Jordanian pilot and the beheading of reporters by ISIS, the continued killings by Boko Haram of civilians in Nigeria, and the seventieth anniversary of the freeing of Holocaust survivors from Auschwitz. All these are symptoms of revenge acted out on a broad social scale.

The Kouachi brothers who killed at Charlie Hebdo were orphaned at twelve and fourteen when their mother died, their father having died years earlier; they grew up in a French orphanage under impoverished circumstances.<sup>5</sup> Undoubtedly, early psychic traumas ensued for both of them. The studies in this book suggest how such trauma can lead to the desire for revenge. When a social movement or segments of a society (or even the majority of it) give way to aggression for perceived wrongs projected onto vulnerable people, those for whom revenge occupies an intrapsychic space can be pulled along and enlisted. Their need for revenge and the desire to act out their vengeful fantasies become increasingly and brutally malignant.

*Revenge: Narcissistic Injury, Rage, and Retaliation* is a significant examination of the effects of early narcissistic injury that leads to rage and sometimes to revenge. As such, and with its excellent case examples, it is to be recommended to clinicians. Although it also touches upon the broader societal forces that ensnare those whose developmental psychic traumas make them susceptible to vengeance, it does not succeed in truly addressing this process. It does try, however, and that is an important step.

**RICHARD REICHBART (RIDGEWOOD, NJ)**

#### THE PSYCHOLOGY OF BEAUTY: CREATION OF A BEAUTIFUL SELF.

By Ellen Sinkman. Lanham, MD: Jason Aronson, 2013. 173 pp.

In *The Psychology of Beauty: Creation of a Beautiful Self*, Ellen Sinkman draws on her years of clinical experience to highlight the complex nature of beauty and ideals surrounding it. She argues that fantasies about

<sup>5</sup> Callimachi, R. & Yardley, J. (2015). From scared amateur to Paris slaughterer. *New York Times*, January 26, pp. 1, 14-15.

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beauty and wishes to be transformed are often central to treatment, even as they are frequently overlooked, and that analysis of beauty matters, both verbalized and enacted, can further progress in the clinical situation, while failure to understand issues of this sort will often impede it.

Sinkman mines a wide range of subject matter throughout the book, as is evidenced by a synopsis of her many chapters:

- “Prehistoric and Literary Eras: Seeking a Beautiful Self,” a discussion of fables, mythology, and collective wisdom of the ages, places beauty in a historical context.
- “Ordinary Beauty and Timeless Fantasies” introduces Medusa and Rapunzel, archetypes who draw attention to the centrality of hair as an aspect of beauty throughout time.
- “Rebirth, Transformation, or Growth: Narcissistic Hurdles in the Quest to Become Beautiful” compares neurotic-level struggles for beauty with those in individuals who are more narcissistically vulnerable.
- “The Misplaced Therapist: In Search of Pygmalion On and Off the Couch” illustrates how Pygmalion-like transformations are sought in beauty salons, and considers how individuals seek to be transformed in words or through action both inside and outside the treatment.
- “Reaching Farther for a Pygmalion Experience: Artistic Beauty or Pathological Excursions?” delves into the subjects of body modification and the external body.
- “Perverse Sadomasochistic Aspects in the Urge to Become Beautiful: Use and Abuse in Pygmalion Dyads” considers, among other things, how sadomasochism is played out through body modification.
- “The Intersection of Biology and the Psychology of Beauty” applies neuropsychology to the subject of beauty and discusses its implications in psychotherapy.
- “Understanding the Invisibility in Clinical Work: Translating the Unseen” explains in practical terms how a desire for beauty can be acted upon if verbalization is the only focus of treatment.

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- “Doing Versus Talking in Clinical Work: Cautionary Tales of Working Successfully with Beauty Issues” alerts us to transference-countertransference pitfalls that arise in the treatment of those struggling with neurotic and more pathological concerns around beauty.
  - “Creating Beauty: Evolutionary and Cutting-Edge Perspectives” considers the bio-evolutionary and neuro-aesthetics of beauty throughout the ages.
  - “Variations on Definitions of Beauty” considers beauty across cultures.
  - “Beauty, Gender Identity, and Primary Femininity” contrasts Freud’s central assumptions about male versus female genitalia with current views and notions about the psychology of bodily integrity.
  - “Origins and Endings of Beauty” looks at influences of the early mother–child dyad on feelings about and attitudes toward beauty.

Sinkman does an admirable job of addressing the relative dearth of relevant literature, demonstrating first that beauty touches upon every aspect of existence, and then building upon this insight to guide the reader on an interesting journey through the realms of art, anthropology, neurobiology, and Freudian theory, among other subjects. She grounds her topic in the body and then applies her ideas to a discussion of beauty across cultures and throughout the ages.

It is by drawing our attention to and highlighting the existence of beauty in myriad realms that *The Psychology of Beauty* invites and successfully persuades us to consider clinical issues that arise with respect to beauty, ideals, and physical phenomena. Sinkman contends that such issues, conscious and unconscious, both within and outside the consulting room, can provide a window into a patient’s psychology and can offer access to and insight into transference-countertransference phenomena. And indeed, in reading this book, one is reminded that our focus on words—on what is “inside” another person, or on the content of what is said—can cause us to fail to consider action, which affects aspects of

the therapy and analytic process, particularly as these occur outside the consulting room. As Sinkman explains:

Action in extra-analytic settings, as opposed to verbalization and symbolization in psychoanalysis, must of course be evaluated . . . . Sometimes this action/activity may be a repetition of forgotten emotional conflicts and patterns of behavior from childhood transferred onto the stage of adult life. [p. 101]

It is such discussion of enactment and transference-countertransference concerns that are, in my estimation, the most compelling portions of the text, and particularly useful are the clinical examples offered throughout. In these parts of the book, Sinkman demonstrates that analyzing frequent enactments as they occur within and outside the clinical situation, and understanding fantasies about beauty, can offer clinicians a means with which to better understand what is going on with patients. As a backdrop to her thesis about ideals of beauty and consulting room enactments, she offers the Pygmalion myth to illustrate the potency of our collective and visceral wish to be transformed by the treatment process. As she notes, "A great number of patients unconsciously long for their analysts to function as Pygmalion" (p. 100).

If there is any way that this book suffers, it is only that its very thorough and broad discussions of anthropology, history, mythology, art, biology, and neuroscience, while thought provoking, left me hungry for more clinical material to mull. Likewise, the chapter on transference and countertransference, while compelling, was somewhat theoretical. In my view, the reader would benefit from the experience and wisdom that the author has acquired during years of treating patients who present with beauty concerns, conscious and unconscious. In-depth case studies with some process (disguised, of course), in addition to the briefer vignettes already included, might have enhanced the book by possibly deepening and enlivening its already stimulating discussions. In a related vein, examples of individuals presenting with eating disorders, Body Dysmorphic Disorder, or with elaborate fantasies about plastic surgery might also have been interesting for readers to consider.

Despite such comments about my wish to see deeper clinical material and process, I feel that *The Psychology of Beauty* is a book of substan-

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tial practical value. I believe the author goes a long way in highlighting the very important issue of beauty in the treatment setting. As I read, I found myself thinking about different individuals whom I have seen, wondering whether I had enacted a Henry Higgins to my patient's Eliza Doolittle, and if so, and if ongoing, how to address such concerns in order to see what emerges. For it is in this way that *The Psychology of Beauty* does what all good books aimed at analysts and therapists do: it gets us thinking about patients and how to bring to light what seems a frequently overlooked issue in our field.

I imagine Sinkman's book will provide a similar function for others; and I expect that this text will pave the way for us to further consider her questions about why so many individuals whom we treat have been known to distort an ideal of beauty, even as they engage in a never-ending quest to attain it.

**STEPHANIE NEWMAN (NEW YORK)**

## ABSTRACTS

### REVISTA URUGUAYA DE PSICOANÁLISIS (URUGUAYAN JOURNAL OF PSYCHOANALYSIS)

Translated and Abstracted by Israel Katz

Number 116 (2013)

**Entre el sueño y la vigilia [Between Dream and Wakefulness].** By Fanny Schkolnik, pp. 21-34.

The work of psychoanalysis takes place in the breach that opens between fantasy, dream, and wakefulness. Patient and analyst become actors and authors in a new stage that involves them in a relationship in which differentiation becomes essential in order to maintain the asymmetry of the analytic situation. This differentiation is achieved by the abstinence that the analyst modulates according to the singularity of each situation (Schkolnik 1999). It is necessary to pass through moments of lack of differentiation while trying to find a way to maintain the position of the analyst through self-analysis. This position is threatened by narcissistic aspects of the transference and countertransference.

According to Schkolnik, Taoism tries to overcome differentiation through dreams in order to arrive at what is taken to be an aspiration toward true identity. The psychoanalytic path also implies an approach to the undifferentiated, which is linked to work on the borders between preconscious-conscious and unconscious, in that particular situation created by transference that favors a certain blurring between dream and fantasy, on the one hand, and reality, on the other. A difference from the Tao is that there is also a necessary differentiation in psychoanalysis that is promoted by abstinence—the elements of the frame and the po-

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sitioning of the analyst, which contribute to working through and facilitate access to the subjective condition of transference in the field. From this perspective, the author notes that Chuang Tzu (third century BCE) achieves important changes in his "Dream of the Butterfly": he dreams that he is a butterfly, differentiates himself from it upon awakening, and at the same time preserves traces of this and other dreams in the field of the fantasmatic.

Schkolnik points to a difference between *sense* and *meaning* (Mounin 1979). *Meaning* presupposes a universal, fixed relation to the referent, while *sense* applies to the singular, is always mobile and relative, and varies according to place, moment, interlocutors, and matter. There is an opening to new senses in psychoanalysis through the work of binding and unbinding different texts, fragments of memories, and occurrences in the interplay of transferences between patient and analyst.

Conditions for analyzability involve the capacity and desire of the subject to confront the unknown and the enigmatic, to tolerate pain and anxiety, and to establish a bond with someone who is invested as a particular partner in a journey in which traveling is perhaps more important than the destination.

The author describes different possibilities for analyzability based on the different ways in which patients can bring the same external event into the analysis (Roussillon 1995). A man is walking in the garden. There is a gust of wind and a statue suddenly falls on him. The first patient describes this as an accident, something that he does not associate with anything personal but with something external and objective. A second patient lives it as something painful. The accident takes on the value of an enigma; reality is not indifferent but reflects something about himself. He wonders why this had to happen to him. A third patient does not defend himself; the statue crushes him and he remains immobilized.

In the first situation, the analytic task will encounter important resistances. The patient does not connect the event to anything related to his internal world and does not allow any links to his history or drives. An analysis will only be possible if these defenses can be modified.

In the second case, there is a transient partial blurring between external and internal reality. The fall of the statue allows the subject to

encounter something about his internal world, to come closer to his enigmas, and to be in touch with psychic pain. Previous memory-traces in which he felt crushed are updated and reactivated, and the drive impregnates objective reality. There is an approximation to fantasy and to what is insistent in the unconscious, which establishes the subject of psychoanalysis. The work of elaboration will make possible the emergence of new senses in the analysis, as long as the subject can tolerate the necessary limitations of what will always remain unknowable (Schkolnik 2001).

The third scenario leads us to think about important failures in symbolization that compromise primal repression and that make the patient unable to sustain himself as a subject. He is imprisoned by his destiny and can only appeal to splitting and primitive defenses. The possibilities for analysis in this case imply a broadening of psychic space through sustained work in the transference, the establishment of representational links, and the promotion of differentiation and disidentification with pathogenic identifications. These constitute an attempt to diminish the incidence of archaic defenses while achieving better conditions for symbolization (Schkolnik 2003).

The possibility for the subject to differentiate ego from non-ego is linked to an essential intricacy of drives, in turn linked to experiences with primordial objects. Primal repression establishes the division of conscious from unconscious and the first outlines of the ego. If this differentiation between ego and non-ego is not sufficiently achieved, the patient will resort to rigid defenses or acting out on the level of speech, the body, or motility, which distances her from analytic work because she cannot tolerate the necessary experiences of depersonalization that occur as part of the transitory blurring of borders between internal and external worlds (de M'Uzan 1995).

The patient has to make contact with the pain of lack and loss in order to be able to get closer to the split and repressed unconscious without being invaded or paralyzed by the emotional impact of the process. The possibility of confronting this pain without quickly sealing it over with disavowal or substitutions is fundamental in order to process it. Pontalis (1978, 1981) states that pain is at the limit of body and psyche, of life and death, and that an analyst who ignores her own psychic pain

does not have a chance to be an analyst, while one who ignores psychic and physical pleasure does not have a chance to continue being one.

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## Number 117 (2013)

**Violencia materna [Maternal Violence].** By Silvia Flechner, pp. 19-32.

Flechner notes that *the maternal* (Abensour 2011; Anzieu-Premmeur 2011) is not a psychoanalytic concept per se, but is located within a broad spectrum that includes maternity in relation to the maternal object, its functions, its madness, and its transformations. This formulation takes into account that the maternal is not only the mother, but also the father, who even while absent acts as a third. Primary identification, the intimacy of fusion, and the capacity to separate are found in the womb of the maternal.

How can the maternal be approached in relation to the origins of the infant's psychic functioning? Perhaps what is most difficult is to come closer to those aspects of the maternal that are more obscure and

terrifying—the maternal that represents the drive element that generates work between the biological and the psychic, the strange and the familiar, and between love and hate (Abensour 2011).

The mother is the only member of the oedipal triangle that maintains a relationship with the body of each of the other two. She is therefore a sexual bond and a bond that establishes the difference between tenderness and sensuality.

García Vázquez (2010) takes up Gil's (1995) idea about identification and elaborates on primary identification, which is constitutive of the ego. It is a new psychic act that includes neurophysiological maturation, desires, and fantasies generated in the relationship between the child and the environment. García Vázquez emphasizes tactile and auditory stimuli, aggression, and the tenderness of the other in the constitution of the child's ego; she also includes gender identification as part of this process.

The first contact is that which unites and separates mother and infant. We speak about fusion, undifferentiation, and symbiosis, but we also consider that there is a fear of incest that generates horror and violence and that can produce confusion, sometimes at a very early age. Racamier (1995) introduces the notion of *the incestuous*, which differentiates incest at an oedipal level from a primordial incest that is not elaborated as fantasy, but that leads to the extinction of external and drive excitations. He proposes a *natural aggressive current* that reinforces the feeling of rejection of the child-intruder over whom the mother has the power of death. It is an approximation to what is prohibited, the horror of maternal incest, which should not be confused with incest at an oedipal level. The maternal as a prolongation without limits in relation to the newborn will generate an indivisible continuity and may come to dominate the infant, who may not get to become a subject in her own right.

Casas de Pereda (1988) speaks about helplessness/defenselessness at birth, a two-faced concept that points to failures in the field of the other (who does not protect) and the fragility of the subject (defenselessness). The encounter with a failing maternal function promotes adhesion to the other in order not to deal with the anxiety of absence that points to failures in mourning, which is essential for psychic growth.

Flechner presents two clinical vignettes that illustrate the violence of the maternal and the consequences of maternal failure. She was a consultant to the treating analyst and psychiatrist on the first case, that of Pía, who at eighteen had come from the interior of the country to pursue medical studies. Her mother did not care for her and perhaps had never loved her.

Pía started having suicidal ideation and was hospitalized. Mother was experienced as cold and uncaring during her visits. After leaving the hospital, Pía got a tongue piercing that entailed a lot of bleeding and led to an inability to eat solid food. She was hospitalized again after a suicide attempt; mother rarely appeared during this second hospitalization, while the patient's father only came once and did not say anything. After this hospitalization, Pía came to the last session she had with her analyst, who found her very depressed. He tried to find some way of keeping her linked to some modicum of reality and to life by asking her to call him on his cell phone. Pía's last words in the session were "if I have credit left on my cell phone . . ." She killed herself that same night.

Pía suffered from very early failures in her psychic development. Piercing her tongue prevented her, perhaps once again, from receiving food and love from a distant mother who did not seem to be interested in her. Instead of receiving milk, she bled from an aggressive and violent encounter that may have been experienced during the first moments after birth as something very painful and impossible to process. These adolescent acts designate the actual and current malaise and pain, evoking the first failed encounters between mother and newborn.

Flechner's second case example shows how a separation between mother and daughter led to a struggle between life and death. The parents of the patient, Mara, asked the author to see their daughter at an intensive treatment center. Mara was twelve years old and weighed twenty-eight kilograms (61.6 pounds). The doctors had done everything they could and felt there was no hope. Mara occupied a minimal space in bed; her thinness was striking and her eyes looked enormous in comparison to her expressionless face.

Flechner started to see Mara every day at the intensive treatment center. Mara said little, and whatever she did say centered on her invincible wish not to eat. Something about parenteral nutrition and the

continuous presence of the analyst at the same time each day may have led Mara to choose to live. Flechner continued the treatment for a long time as part of a multidisciplinary team. Mara's parents kept asking members of the team to leave as she started to get better. They alluded to economic difficulties or conflicts with members of the team. The father said that he would open a bottle of 12-year-old whiskey the day that his daughter got cured. The mother seemed to wait every day for the beginning of a relapse.

The relapse had not arrived after quite some time, however. One early morning, the analyst received a call from Mara's mother, who was crying and saying that she had given Mara one of her own medications by mistake, an appetite suppressant that she was taking in order to lose weight.

The impossibility for this mother to maintain enough distance from her daughter may have led her to choose between seeing her daughter dead or killing her before she began to live as a separate subject. Would the mother then avoid dismantling her supposed narcissistic wholeness, achieved by experiencing her daughter as a partial object that completed her in her illness?

For the father, this 12-year-old adolescent could be seen as an intoxicating object. Could it be possible that opening that bottle of whiskey "if she gets cured" implied giving Mara an option to drink another kind of milk that would be the same or even more poisonous than the one she had drunk from her mother's breast?

Schkolnik (2007) notes that we encounter expressions of archaic functioning (which Freud took into account when he spoke about *residual phenomena*) when we deal with structures that go beyond neurosis. The archaic is not the originary, but an expression a posteriori of failures in primal repression and a strong disavowal of alterity that leads to the persistence of primary narcissism. This narcissism in turn affects the establishment of secondary repression and the constitution of the ego. The resultant tendency toward a lack of differentiation leads to fusional bonds and a conflict between panic at imprisonment in fusion and an equal panic at the possibility of rupture with the object.

Adolescent acting out could be understood as an effect of maternal failure, be it from the psyche of the mother in the present or from traces

of maternal failure in earlier times. The maternal is the territory of the stark interplay between love and hate, indicating that deadliness is always present and interwoven with the life drive in different ways.

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**Sufrir en otro. Historia de un secuestro** [To Suffer in Another: History of a Kidnapping]. By Vivian Rimano, pp. 47-62.

This article discusses the pathogenic aspects of the transgenerational intrusion and transmission of trauma—a kidnapping of subjectivity across generations, with the silent birth of an unconscious parasitic organization, a blurring of the agencies of the psychic apparatus, and a topographical dismantling that paralyzes any process of working through. Transference and countertransference become turbulent, and intense psychotic anxieties are frequent. The work of disidentification and the loosening of transgenerational pacts of disavowal and symbiosis challenge the patient's psyche, the patient's family, and the analyst, imposing limitations that may be impossible to overcome.

The unconscious organization of the secret is an indiscriminate group of psychotic anxieties, poorly symbolized memory traces, primitive defense mechanisms, bizarre partial objects, alienating identifications, and symbiotic pacts. All this is agglutinated into a conglomerate whose goal is to maintain an invisible nucleus of silent suffering across generations, the effects of which appear in the clinical situation in the form of strange details, gestures, tones of voice, or a certain material object; this conglomerate can even parasitize words themselves.

Rimano mentions the idea of “guardians of the secret” (Rouchy 1995), who use splitting and disavowal. This type of “not knowing, no knowledge” is encrusted as a harsh command from the superego, which approximates what Laplanche (1987) describes as *psychotic enclaves*. The command spoken by these guardians is transmitted many times through the paradoxical use of language, generating the experience of a dissociated and distorted reality. These unconscious commands allow the child only to establish symbiotic pathological bonds, but at the same time, this is the only type of bond that alleviates intolerable suffering. All this forces the child to live in a climate of ambiguity, confusion, and lack of differentiation.

In many cases, the infant’s psyche is trapped within the secrets of both parental lines, which transmit unconscious pacts of disavowal in a condensed and simultaneous way. It is common for the analyst to pay more attention, through the transference and countertransference, to one generational line over another. The analyst may become kidnapped in this pact of disavowal and paralyzed in her capacity for reflection.

Rimano presents the case of Pedro, an eight-year-old boy who comes to treatment in order to be able to sleep better. He has a great deal of fear and nightmares about body parts, persecutory gazes, frightening hieroglyphs, and remnants of Egyptian civilization. Insomnia is the only way that he manages his anxiety about the nightmares. The analyst understands this flirting with death as a silent scream in reaction to the enigma of other deaths in previous generations of Pedro’s family and the pacts of silence around these deaths.

The analyst relates two moments in the analysis in which she experienced perplexity and confusion. The first one occurred during the first month of analysis, when Pedro brought in a rag doll. The analyst

observed Pedro treating the rag doll as though he were a loving mother who was very worried about her child, and interpreted that perhaps Pedro would have liked to be taken care of in the same way. Pedro said, "Nobody needs a mother like that." The analyst felt some confusion until Pedro explained that the rag doll's name was "Nobody."

The second moment took place during the fifth month of analysis. Pedro was invaded by terrifying internal images. He referred to *Ritatan-jovencita* (in English, "Rita-so-young"), which sounded to the analyst like a foreign word. It was not a slip of the tongue, but a strange yet familiar expression that had already been heard. It was the parents, during the initial interviews, who referred to Pedro's aunt and maternal great-grandmother as "so young, and she got pregnant!" Both women were named Rita, and both had sons whose tragic deaths went unmourned and were sealed by the family with a pact of silence.

The analyst felt that she needed to be careful not to interpret everything in light of the manifest content of the "secret histories" that were being told. She noted differences between conscious, narrated secrets and unconscious secrets whose manifestations emerged in the work of analysis.

As they were playing, Pedro started to use different tones of voice, like a ventriloquist. The analyst told him it seemed that there were many people inside of him who spoke. Pedro told the analyst in a feminine voice, "Shut up! Don't scream like a shrill, crazy woman. Enough, enough! It is only me—I am nothing!"

The analyst grabbed Pedro firmly by the arms, looked him in the eye, and told him, "You are Pedro, with a lot of fear of being 'nothing,' like 'Nobody'—that is why you have to 'scream like a shrill, crazy woman.'" Pedro calmed down and said that he would like his sister to come to his session some time.

One of the effects of transgenerational intrusion was manifested through Pedro's use of words, which turned into *word-things* (Abraham and Torok 1987, 1994; Tisseron 1995). We may be able to listen to the phonetic echo of a kidnapped unconscious memory-trace if our psychic functioning allows it in moments of transference and countertransference that are filled with confusion and anxiety. The author wonders

whether she was able to transmit in a quasi-bodily way her wish to recognize Pedro.

The agencies of the psychic apparatus become blurred in cases of transgenerational intrusion. This intrusion from others of different generations is insidious and cannot become an internal alterity that would lead to something resembling a subjective appropriation. The patient suffers, without knowing it, the suffering of others. There is suffering in another and suffering in place of another.

The metapsychological Freudian model of melancholia (Freud 1917) helps us think about this internal alterity that has not been integrated. The object that must be mourned in transgenerational intrusion is an undifferentiated conglomerate formed across different generations. The shadow of the (unconscious) secret falls upon the ego.

The author wonders why the psyche can be so open to the intrusion of the unconscious of the other; this destructive violence of the unconscious of the other hinders an appropriate "closure" of the psyche, creating fissures where intrusion does not cease. Analysis repairs these fissures and allows a closure of the psychic apparatus, which in turn allows the functioning of repression that will structure and protect psychic life at the same time.

The analyst must work with and within symbiotic moments of transference in order to diminish the effects of the external-internal intrusion, aiming to transform confusion into psychic conflict; it is an experience that has never been lived by the patient. This task implies a re-creation of the process of primal repression, a task prior to the disidentification of alienating identifications that sustain and kidnap the patient, since he needs greater ego strength in order to tolerate the anxieties linked to this process of disidentification. Working with the parents and building a therapeutic alliance with them are essential.

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**Avatares de la estructura familiar en el siglo XXI. La función paterna. Declinación/transformaciones** [Avatars of Family Structure in the Twenty-First Century: The Paternal Function—Decline/Transformations]. By Marcelo Viñar, pp. 137-160.

Viñar examines the notion of the paternal function and cultural changes from three perspectives: customs and habits, the social sciences, and psychoanalysis. He approaches these issues from a constructivist and anti-essentialist viewpoint, with cultural and anthropological reference points and a preference for the transience of a particular knowledge to the fixity of invariable components that originate from God, biology, or structure.

The paternal function refers back to the symbolic transmission between subjects and generations, a consequence of our status as speaking beings who construct the social in order to live. The paternal function cannot be thought about outside its sociopolitical, historical, and cultural context.

The paternal function as a cardinal vector of family structure emerges with the Freudian discovery of infantile sexuality and the Oedipus complex as the nuclear organization of the neuroses. According to the author, the nuclear family and the clear differentiation of gender functions reached their peak around 1900, with a Victorian or Calvinist morality that legislated the interval between sexualities considered le-

gitimate, on the one hand, and those that were transgressive and pathological, on the other.

The mentality and sensibility of our time have seen changes (Barrán 1989–1990), with the expansion of scientific and technological progress and the decline of a religious discourse that condemned the search for pleasure and hedonism with the stigma of guilt and sin. Changes have emerged in the subject, who was formerly subjected to the demand for sacrifice and obligation that the established order imposed upon him, and who is now a postmodern subject proud of his self-sufficiency and secure in the certainty that no social order can prevent the self-realization of his desire.

The author presents three vignettes from daily life to demonstrate cultural changes over time. The first is a memory from his own childhood in which he was impertinent toward his mother, and his father gave him a slap in the face and told him, “You do not speak to a lady that way.” The second vignette is taken from the occasion of the author’s civil wedding a couple of decades later. The municipal official who performed the ceremony emphatically and solemnly declared that the author’s new wife owed him obedience, while he owed her protection.

The third vignette is from recent times. A young man is crossing the street in Montevideo while talking on his cell phone and not paying attention to traffic. An older male driver, who has the right of way, honks his horn repeatedly. The young man finally pays some attention and makes an obscene gesture. The enraged driver emerges from the car and starts insulting and hitting the young man. The fight is resolved only through third-party mediation.

The father’s slap in his child’s face signaled vague limits between the bonds of authority and those of reciprocity in the definition of limits and the internalization of authority. The text of marital law pointed to the place given by the law to women in society; with the emancipation of women from their subordinate role within a hegemonic, patriarchal Western order, this text has now been replaced by spouses’ mutual support of one another. The anecdote of the traffic incident demonstrates a lack of agreement between generations in regard to discipline and transgression. Reading Barrán’s (1989–1990) book on sensibility has led

Viñar to reaffirm that seemingly insignificant events, which Freud would call the *residues of psychic life*, often reveal the mentality of an era.

Anthropological law establishes the structure of kinship and the horror of incest and creates heterogeneity between the bonds of blood relations and the bonds of alliance, thereby consolidating a group's humanity. The legal norm creates pacts that try to define the limit between what is allowed and what is prohibited or punished. Social rules question and challenge the prevailing hegemonic values of an era to establish others that will in turn become hegemonic and refutable. The three vignettes illustrate how these three registers interact, or at the very least exist in tension with one another.

For Viñar, protopsychism originates in the mother–infant dyad and the universe of senses that is created in the bond between the mouth and the breast. There is an originary time in which the newborn conceives of the breast as a prolongation of himself and not as a separate being. Initial psychic life is a relational fact that precedes and constitutes interiority. Basing himself on the observations of Henri Wallon, José Bleger speaks about a primal undifferentiation or syncretism in order to designate that state of mind that cannot distinguish between an interior and an exterior. There is no distinction between ego and non-ego, and there is no mental differentiation between the external world, the body, and the mind. This syncretism is correlative to the biological immaturity of the extrauterine beginnings of life.

The primary mission of protopsychism is to cut off the annihilation anxiety that is inherent to extreme biological immaturity. The importance of the helpful object is proportional to the fragility of the being in gestation. Alternation between hunger and satiety, presence and absence, and satisfaction and uneasiness appears as a result of the loss of the nirvana of intrauterine life, where temperature and food were constant.

This threshold of senses in a world of extreme contrasts leads to an overcoming of initial syncretism, with the discovery that the helpful object is not a possession of the subject himself, but an autonomous and distinct being—a discovery closely connected to neurological maturation and the alternation of experiences of presence and absence.

Viñar attributes foundational value to the passage from the ontogenesis of psychism to a logical moment of transition between primal

undifferentiation and recognition of the object as a different and independent other. A fragile, incomplete, and lacking subject is born, and there is a collapse of the preceding nirvana. Perpetual tensions emerge throughout life from this foundational act of fusion versus the recognition of incompleteness and alterity.

The other that thinks us, who was initially the founding mother—or, later, the religion, prohibitions, or taboos of any culture—becomes the basic structure of the paternal function. It is necessary to have the function of setting a limit to the indispensable support and tenderness of parenting and nurturing. The *not-all* that is imposed is a necessary limit to the wild chaos of the intimate; its prohibiting and restricting function could hide or make less visible its organizing and structuring characteristics. There is no desire without prohibition.

The exploration of the enigma of sexual difference is a specific task of psychoanalysis. The backbone of the paternal function, whether exercised by a man or a woman, is the recognition of incompleteness and the need for the other—the different one, the alter—as an essential and unavoidable complement to define her/his humanity.

The definition of limits between what is allowed and what is prohibited has been one of the permanent vectors of the paternal function in the conflict between generations. Explicit absence of the paternal function suppresses the border between prohibition and transgression; suppression of prohibition abolishes transgression. Viñar observes an adult world that is timid and in retreat from an admired and rampant idealization of youth, inhibiting necessary manifestations of authority.

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#### Number 118 (2014)

**Problemas de la ética del psicoanalista: paciente y analista en «mundos» no compartidos [Problems of the Psychoanalyst's Ethics: Patient and Analyst in Nonshared "Worlds"]**. By Ana María Chabalgoity, pp. 51–67.

The author alludes in her title to Puget and Wender's 1982 paper on "analyst and patient in overlapping worlds," in which there is a de-

scription of the difficulties in maintaining the position of the analyst when both patient and analyst belong to the same institution. The concept of *superimposed worlds* is broadened to the zone of external reality that is shared by analyst and patient and that enters the analytic field through the patient's speech.

Chabalgoity explores difficulties that arise for the analyst when patients refer to codes and worlds that are not only alien and unknown to the analyst, but that also enter into frank contradiction with the analyst's own values and ideals. These are situations that question the ethics of the analyst. The author wonders whether what she calls *nonshared worlds* can be considered, along with the concept of overlapping worlds, as *a moment of analytic eclipse* (Puget and Wender 1982). Confrontation with these stories and presentations of nonshared worlds can induce a traumatic reaction in the analyst, which may lead to a tendency on the part of the analyst to *exit the transference* (Puget and Wender 1982).

There is then a transient loss of the position of the analyst, who tries to avoid the effects of the experience by bringing in various theories and pseudointerpretations, by adopting an attitude of defensive withdrawal through silence, or by asking all kinds of questions that do not emerge out of evenly hovering attention. Puget and Wender (1982) note that the epistemophilia of the analyst gives way to scopophilia in these situations.

The author thinks that the analyst can encounter the same kind of reactions and challenges in both situations, that is, in overlapping worlds and in nonshared worlds. We are challenged in our clinical work with all kinds of changes. Many analysts grew up during the modern era and work with patients who have been shaped by the ideals and values of postmodernism, or with patients who have had to adapt to these changes. There is a decline of the grand narratives of modernity and the installation of a hegemonic, neoliberal narrative guided by the logic of contemporary markets. Chabalgoity wonders whether these changes have led to a narcissistic collapse that affects not only the intrapsychic dimension, but also social bonds and configurations.

Chabalgoity notes a change of paradigm: the private, intimate, and opaque that was privileged in modernity has lost its value and has been replaced by the ideals of the public, the exhibited and the transparent

of postmodernism, and with the popularity of reality shows and the culture of the image. She wonders how the analyst can best position herself while encountering these values of "everything is allowed" and "anything goes."

Kaës (1995) postulates that, in crisis situations, there is a special request for the full operation of the analyst's preconscious to lend itself as a bridge that may allow the work of representational binding to facilitate meaning making. Chabalgoity thinks that this work also applies to the analysis of countertransference.

Chabalgoity presents the clinical vignette of Rafael, a 50-year-old man who has difficulties in his relationship with his wife, Claudia. He shares with the analyst the couple's sexual activity as swingers at a time when such activities are still considered new and uncommon in the culture at large. Rafael starts to describe their activities in detail. The analyst notices that she is feeling quite affected and is experiencing very contradictory feelings that throw her off from her position as analyst. She experiences Rafael's detailed speech as an erotizing invitation to participate in a fantasmatic group sexual scene, but she also perceives an invitation from him to share his experiences of pain and frustration. She wonders aloud with the patient about whether these aspects of his life were present at the time he first consulted her some years earlier. He replies that it was not necessary to share them at that time since the fantasies were only sporadic, and Claudia had vehemently rejected his proposal of such activities. The patient finally convinced Claudia, and now feels terrible because she has begun to look like a queen, while he is being rejected by the group. Rafael elaborates on his feelings of rejection by the group, on his physique and obesity. He wants to stop their activity as swingers, while Claudia is desired by everyone and would like to continue.

The analyst wonders about possible interventions. She is aware of the dangers of entering into a voyeuristic attitude or a defensive withdrawal. She also questions herself about her own possible prejudices and evokes the customs of the Guaraní.<sup>1</sup> As far as she understands, the Guaraní lived with one another in communities, and their sexual practices took place

<sup>1</sup> The Guaraní are a group of culturally related indigenous peoples of South America.

in groups that formed part of their social and cultural codes. The analyst remembers a cacique's rebellious speech against the colonizing attitude of the Spaniards, who in addition to taking away the lands of the Guaraní also wished to impose their monogamous Christian morality and despoil the deities and traditions of the Guaraní. The analyst attempts to question herself about her ideology, while at the same time searching for cultural references that link her to a structuring, symbolic law.

She decides to intervene by noting that the patient is not willing to lose or renounce anything, that he wants to be only with his wife but also only in a sexual group setting, and that he always finds something missing that causes him anger and anguish/anxiety. There are further associations and an intervention from the analyst in which she wonders with Rafael whether he and Claudia have established a rule of mutual abuse and self-abuse in their relationship.

Chabalgoity ends by reflecting that this vignette illustrates the Freudian formulation that what is repressed is sexual par excellence, and that when the veil of repression is lifted, anguish and anxiety unexpectedly occur for both patient and analyst.

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**La sexualidad en la constitución del sujeto psíquico y sus fracasos. Pensando el trastorno del espectro autista. [Sexuality in the Constitution of the Psychic Subject and Its Failures: Thinking about Autistic Spectrum Disorder].** By Sandra Press, pp. 68-82.

The author begins by noticing the increased frequency of requests for consultation from parents who worry about their children being autistic, as well as an increased prevalence of the diagnoses of autism and autism spectrum disorder (ASD). She also notes the need to explore the nuances of ASD that make a clear demarcation between children who do

not achieve symbolization or communication—which would refer to autism proper—and those who have symptoms but have nevertheless been able to achieve symbolization.

The descriptive symptomatology of ASD covers a wide range of presentations. Psychiatric nosography does not mention infantile psychosis or psychotic functioning, and the change of paradigm toward the neurologization of ASD excludes the importance of the libidinal and emotional development of the child in diagnosis and treatment. The author thinks that contact in the transference with the suffering of both the child and of the parents, and with mourning and traumatic repetition, may in some cases facilitate the development of psychic resources.

Press comments on the role of the drive that differentiates us from animals and that turns us into desiring, thinking, creating, and speaking subjects. A child who can say “I am” has already traveled through a long process; his “to be an I” (*ser Yo*) is the result of an arduous psychic operation that accounts for a large *structural movement* (Gil 1995) that touches the body from the libidinal and is registered as mental representations. Such representations provide density for symbolic resources that will organize language, thinking, psychomotricity, cognitive appeal, fantasy, and creativity.

Press reminds us that Freud thought that the nucleus of the ego starts out from the Perception-Consciousness System, a surface area of the psychic apparatus constituted from the projection of experiences of the bodily surface (Freud 1923). Press thinks about this projection as a protosymbolization—a transcendental, primordial psychic action through which the skin, the orifices of the body, vision, hearing, the emission of sounds, and speech acquire a libidinal quality and stop being or belonging to organic or neurobiological functions. She relates this protosymbolization to the indication of perception in Freud’s letter 52 to Fliess (Freud 1896) as a first transcription of perceptions that establish the unconscious. This movement of projection of the bodily surface to the psychic pole (Perception-Consciousness/nucleus of the ego) is multiple and varied and will depend on the drive to travel in the manner of a loop through its circuit of departure and return.

It is important to distinguish within ASD those children who have achieved mechanisms such as expulsion or projection of what is bad and

painful outside the ego from those who have not done so. The author agrees with Tustin's idea of the mechanisms of projection and introjection as primitive beginnings of separation that the autistic child has not yet reached. The autistic enclaves, for Tustin, remit to a much more primitive stage of communication with the body of the mother at a very concrete level. The infant *lives* the mother as a physical extension of himself. This functioning is sensory, previous to autoerotism and the paranoid-schizoid position, and is defined as autosensual and a vehicle for primitive communication with the maternal breast (Tustin 1990, 1992).

If this sensory communication fails or is abruptly interrupted, the child will experience a very early depression, with episodes of extreme mutilation, tearing to pieces, drowning, and liquefaction, a kind of falling into a black hole similar to a shattered and bleeding physical wound. Tustin (1990, 1992) states that some patients do not have these massive critical experiences of the autistic child, but may nevertheless resort to autistic defenses in certain situations.

The author presents a vignette that illustrates the use of these autistic defenses: that of a three-year-old boy who does not look at or speak to his mother and avoids contact with her. He does not work together with other children in groups at school, which leads his teachers to wonder whether he has ASD. The mother has noticed differences between him and her other children since he was born. The child has acquired language, but the parents state that it is not available for communication with them.

The child enters the consultation room without looking at the analyst at all during the first interview. The analyst tries to introduce herself, but the child ignores her. She shows him toys and he leaps on them with interest. He continues not to look at her, however, and does not respond to her. He puts child dolls and baby dolls inside a house. He takes a bus and runs over the baby doll in the house with great violence. The analyst tries to interact with him several times, but he does not respond. He then starts putting the dolls inside a hole in the house; they are all crowded together and hidden.

The analyst tells him: "Those children are hidden, and they do not look or speak like you. Are they angry?" At that moment, he looks into her eyes and tells her: "I am not hidden!" Then he cuts himself off from

the analyst again. The play becomes more violent and disorganized; he runs over all the dolls several times, kills them, and crowds them all together when he returns them to the house. Fragments of bodies stick out the doors and windows, together with other objects that he forcefully pushes into the house.

This child is not autistic, but shows his suffering and aggression through play. He projects his anxieties of persecution and fragmentation onto the environment; his defenses isolate him in order to protect him from a persecutory object. His ego is split at the expense of schizoid defenses.

His verbalization of "I am not hidden!" points to the establishment of the capacity to attribute and give existence to the ego and objects. He speaks about being angry through negation, but also speaks especially about identifications established beyond the symptoms that led to consultation by his parents.

Press thinks that there is a barrier in autism that blocks the proto-symbolization linked to the projection of the bodily surface that organizes the nucleus of the ego. There is no erogenous body or ego without this primordial psychic action. Autism demonstrates that the experiences of the sensory organs must achieve some organization in order to acquire mental qualities of pleasure and dialogue with maternal holding and caresses.

The treatment frame requires that the analyst's sensory capacities be available, including the use of the body, vocalizations, and other noises, to function as allies in order to promote symbolization. The analyst enters into the world of echolalia, of the imitation of noises and stereotyped actions in order to build a link that, after a long period of time, may allow the possibility for contact—of a look either directly or in a mirror, of a naming of situations or affects that may get to the naming of the person herself.

There may be other symptoms when autistic defenses start to fall off, such as terrifying psychotic anxieties of drowning, death, and liquefaction, and changes in relation to and separation from the mother and other objects. There may also be modifications in sphincter control, disturbances of sleep, or disorganization of thinking or behavior, as well as psychosomatic phenomena. Paradoxically, these are symptoms that point

toward the beginning of a process of psychic existence that had been dismantled up until that point.

The author does not see immutability and clinging to objects as oppositional behaviors on the part of children who must be reeducated, but thinks that these serve calming and supportive functions. This vision of the symptom generates a different type of attitude when one is dealing with children with severe pathologies, and when one recognizes the homeostatic function of defenses against anxiety and respects their importance.

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