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ERIKSON'S CONCEPT OF EGO IDENTITY RECONSIDERED

Robert S. Wallerstein

This paper explores and essays to explain the paradox, that Erik Erikson, who after Freud, has been undoubtedly the psychoanalyst best known, most deeply esteemed, and most widely influential in the sociohistoric surround of world culture, has at the same time never been properly integrated into the psychoanalytic mainstream, but rather has been marginalized in a persisting psychoanalytic limbo. This I feel is so on the basis of two successive contexts within the historical unfolding of psychoanalysis in America where Erikson worked. First, Erikson's monumental contributions to our understandings of the psychosocial developmental process, of the epigenesis of the ego, of the phase-specific developmental tasks across the eight postulated stages of the life cycle, and of the intergenerational cogwheeling of life cycles, were made during the 1950's and 1960's and could not easily be integrated into the egopsychology metapsychological paradigm then monolithically regnant within American psychoanalysis. And second, as the major paradigm shift took place in America, starting in the 1970's, towards a more relational, interpersonal and intersubjective framework, Erikson's contributions, couched as they were in the structural language of the ego psychology of his time, have been overlooked and not remarked as seminal precursors of the newly emerging emphases. The clear relationship of Erikson's concepts of (ego) identity to the emerging conceptions of self in relation to objects were simply not noticed and Erikson continues still in this unhappily neglected, and not integrated status.

It is especially timely today, in the wake of Erik Erikson's death, in May 1994, shortly before his ninety-second birthday, that we reevaluate the lifework of this giant among psychoanalysts, both to better locate his contributions within the edifice of evolving psychoanalytic theory and practice, and to clarify the paradox that his presence in our ranks has always posed for us. In his lifetime Erikson was undoubtedly the psychoanalyst best known, most deeply esteemed, and most widely influential in the sociohistorical surround of world culture. His books, particularly his first, the seminal Childhood and Society, but also his biographies of Luther and Gandhi and his Identity: Youth and Crisis, have from their publication been part of the core curriculum, nationwide, in university courses on human development, the life cycle, and psychological perspectives on history and biography. During the student rebellions of the 1960's, Erikson became, unasked, almost an icon, and very much a cult figure of almost mythic proportions, his very name a rallying cry.

Yet, despite an impact on our cultural and intellectual life greater than that of any analyst since Freud, Erikson does present a paradox: after the initial excitement occasioned in psychoanalytic discourse by the publication of Childhood and Society and its psychosocial perspective on the developmental process, his work was never properly integrated into the ego psychological metapsychology formulated by Hartmann and his collaborators—a paradigm then dominant, at least in America—and in fact over time became progressively marginalized.
within the psychoanalytic mainstream. When in 1959 and 1968 his powerful biographies, 
Young Man Luther and Gandhi's Truth, appeared, their impact as exemplars of the 
psychosocial perspective, providing insight into the integrating of individual lives with the 
crises and challenges of culture and society in a specific place and time, was profound both in 
the culture at large and among historians and social scientists seeking a psychological 
understanding of religion, social movements, and world politics, but seemed somehow far 
less consequential for psychoanalysts. For reasons I will later elaborate, though the 
concept of identity, so central to Erikson's conceptualizations over a lifetime, has come in 
the past two decades to the forefront of psychoanalytic attention, it has done so under the 
rubric of the self, thereby obscuring the obvious relation of Erikson's earlier theorizing to 
these new emphases. The result is Erikson's continued commitment to that psychoanalytic 
limbos in which he lingers still today, despite his central relevance to the main tenets of much 
of contemporary psychoanalysis.

It is true that David Rapaport, Erikson's colleague at Austen Riggs in the late 1950s, was 
indeed mindful of his friend's profound importance for psychoanalytic thought. In an incisive introduction to Erikson's 1959 monograph, Identity and the Life Cycle, 
Rapaport delineated the contributions of but two men—Hartmann, with his focus on ego 
adaptation and reality relationships, and Erikson, with his focus on psychological development across the life cycle. These Rapaport considered the two most important advances on Freud in formulating the burgeoning theory of the ego and its functioning. Of Erikson's conceptions, Rapaport singled out for description the psychosocial theory of development; the epigenesis of the ego as involving mutual 
coordination between the developing individual and the social environment; the phase-specific developmental tasks across the eight postulated stages of the life cycle, from 
infancy to advanced age; and the intergenerational cogwheeling of life cycles meeting in appropriate complementary fashion. Yet unhappily, as Rapaport indicated, neither Hartmann nor Erikson really attempted to formulate the relations between their contributions. "Here," wrote Rapaport, "a task of integration fuses ego psychology" (in Erikson 1959, p. 16), a task interjected by Rapaport's timely death a year later and 
ever systematically undertaken by any analytic theorist since.

Instead, Edith Jacobson—whose The Self 
and the Object World (1964) was the first major 
book written on the concept of the self from 
the perspective of the dominant ego psychology 
paradigm—set the dismissive tone toward 
Erikson's work that from the start has served to marginalize Erikson and minimize his 
influence in psychoanalysis, both in the U.S. 
and internationally. In Jacobson's chapter, "Review of Recent Literature on the Problem of Identity," she referred on the first page to Erikson's use of the terms identity and ego 
identity, but on the very next page Erikson's concept is three times referred to as a "sociological orientation," in contrast to the genetic approach, metapsychological and therefore, she seems to imply, more truly 
psychoanalytic. "Originally," she wrote, "Erikson did not overlook the genetic approach, 
but he seems increasingly to remove himself from it" (p. 25). A few pages on, she added, as 
her "main criticism of Erikson's ambiguous concept of ego identity," that it "fails to 
distinguish objective identity formation from the corresponding experience" (p. 29). 

Further on, in chapters devoted to latency, puberty, and adolescence, Jacobson elaborated 
his dismissive critique. In the chapter on latency she stated that Erikson's "formulations, 
unfortunately, do not clarify the continual and close interrelations between the infantile (and 
also the adolescent and preadolescent) processes of identification and the concomitant 
process of identity formation. His statement that identification as a mechanism is of limited 
usefulness [in comprehending the complexity and social embeddedness of identity 
formation] is questionable" (p. 140). Jacobson 
next expressed the hope that her "objections to Erikson's formulations will become clearer 
in... chapters dealing with the adolescent and preadolescent periods" (p. 140)—the very 
periods most pivotal to Erikson's own construction of the identity concept. 

In those chapters, Jacobson's first mention of 
Erikson was to accuse him in his paper on identity (Erikson 1956, 1959, chap. 3) of 
dealing "with adolescent object relations in a rather casual manner" (p. 161). This is a 
surprising charge indeed, in view of the centrality of the adolescent period to Erikson's 
complex of constructions, including identity, identity crisis, identity confusion or diffusion, 
and negative identity. On the next page, Jacobson explained herself more fully: "I 
cannot help feeling that somehow Erikson disconnects identity from identifications, and 
both from object relations, and object relations from those conflicts around which the 
emotional turmoil and the disturbances of this stage are centered" (p. 162). I will later 
 elaborate, by quotation from Erikson, my own view of the tendency to overlook in 
Erikson's monumental contribution to our understanding of the identity concept. Here I 
will say only that I have quoted Jacobson's comments in detail because of the powerful 
fluence they seem to have exerted ever since in shaping the overall appraisal (at least within 
American psychoanalysis) of Erikson's place as a theorist.

2 The actual quotation from Erikson on which Jacobson's comment is based is the following: "The limited usefulness of the mechanism of identification becomes at once obvious if we consider the fact that none of the identifications of childhood (which in our patients stand out in such morbid elaboration and amoral construction) could, if merely added up, result in a functioning personality" (Erikson 1959, p. 112). And Erikson went on, of course, to elaborate the nature of the complexity involved in identity formation to which he was referring. For example, "Children, at different stages of their development, identify with those part aspects of people by which they themselves are most immediately affected, whether in reality or fantasy. These identifications with persons, for example, centre in cerem overrated and ill-understood body parts, capacities, and role appearances. These part aspects, furthermore, are favored not because of their social acceptability... but by the nature of infantile fantasy which only gradually gives way to a more realistic anticipation of social reality. The final identity, then, as fixed at the end of adolescence is superordinated to any analytic theorist since.

3 Jacobson, indicated, as one of her starting points in her book, Hartmann's earlier raising, as an issue to be explored and clarified, a distinction between ego and self that was often left ambiguous in Freud's writings, especially in his use of the word Ich to cover both concepts. Hartmann (1956) put this somewhat delicately: "Occasionally... the term narcissism, two different sets of opposites often seem to be fused into one. The one refers to the self (one's own 
and world politics, but seemed somehow far 

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The unfortunate consequence of these views—and many took similar positions, if only by according Erikson scant recognition in relation to their own theorizing—was that his concepts were never properly coordinated with, or integrated into, the dominant ego psychological edifice and therefore never gained a secure place in relation to the tripartite structural theory of id, ego, and superego. Nor did they find a place in the impasse-anxiety-defense-conflict-conflict-resolution therapeutic model then regnant in the ego psychological, “classical” Freudian psychoanalytic world. It simply was not clear—because scarcely explored—how Erikson’s ego identity concept or any other aspect of his contributions could fit into this ego-structural scheme of things, a situation that seems to have led inescapably to a systematic bypassing of his ideas in the theoretical and technical explanatory system that marked structural theory and ego psychology. And this was true not only in America.

For example, in the eight volumes of Anna Freud’s collected works, with entries up to 1980, the only references to Erikson occur in several lists of names (such as a listing of the many world-prominent analysts who had participated in the first child seminars at the Vienna Psychoanalytic Institute in the 1930s)—this despite Erikson’s having been an analyst and student of Anna Freud’s and despite his central contributions having been in the realm of development and the treatment of children and adolescents. This cumulative neglect of Erikson’s proper role in the specifically psychoanalytic household was occurring despite ample evidence not only of the expanded horizons in psychoanalytic theory he opened to us, but also of the direct clinical and technical wisdom he offered. Both were evident in his articles on childhood play construction and in his reworking of classical dream theory and interpretation in his 1954 article, “The Dream Specimen of Psychoanalysis,” arguably the most important paper on dream interpretation since Freud’s dream book of 1900.

It is within the overall framework of the brilliant new illuminations Erikson brought to psychoanalysis, first in Childhood and Society (which after its initial acclaim suffered a progressive decline in its influence on our field, despite its currency in the intellectual world), that I say it is high time, now that Erikson’s life’s work is completed and his own life cycle ended, to reassess that work as regards its specific meanings for psychoanalysis. Such a reassessment might additionally allow us to better understand the discipline-wide lag in our appreciation of him. The specific area I have undertaken to cover here, in order to illustrate the rightness (and the potential benefits) of redressing our neglect of Erikson, is the concept of ego identity. I will approach this task by reviewing the fundamentals of the identity concept. These were laid out in large part in Childhood and Society in 1950 and, somewhat more systematically, in Identity and the Life Cycle in 1959, though they were continually reworked in the dozen or so books that followed.

Although Erikson held that the crystallization and relative consolidation of the sense of “identity” or “ego identity”—he used these terms almost interchangeably—is stated to be the specific task of youth or adolescence (the fifth of eight postulated stages in the life cycle), the process is not restricted to that stage and in fact takes on a transcendent importance in Erikson’s work. It has also become the best known of Erikson’s conceptions, the most widely infiltrated into the culture at large, and the most popularized and trivialized (as negative identity, identity diffusion, identity crisis, adolescent crisis, and adolescent moratorium).

In Childhood and Society, ego identity is evident as a leitmotif from the very start. In the opening clinical vignette, long before Erikson’s systematic laying out of the eight life stages, their tasks, and the positive-negative balance struck in the navigation of each, there is passing reference, in an almost taken-for-granted way, to ego identity as an expression of the ego’s “sameness and continuity” over time and space. That phrase, “sameness and continuity,” is repeated again and again in Erikson’s writings. A more considered definitional effort is made in Identity and the Life Cycle, where in fact a fourfold distinction is offered: “At one time, then, it will appear to refer to a conscious sense of individual identity; at another to an unconscious striving for a continuity of personal character; at a third, as a criterion for the solid doings of ego synthesis; and, finally, as a maintenance of an inner solidarity with a group’s ideals and identity” (p. 102). On a conscious level, this is experienced as “the conscious feeling of having a personal identity... based on two simultaneous observations: the immediate perception of one’s selfsameness and continuity in time; and the simultaneous perception of the fact that others recognize one’s sameness and continuity” (p. 23).

It is this formation and consolidation that is declared to be the specific achievement of adolescence. On the very first page of Identity and the Life Cycle Erikson refers to “the specific psychosocial task of youth, namely, the formation of ego identity.” He elaborates this idea in a statement already cited: “The final identity, then, as fixed at the end of adolescence is superordinated to any single identification with individuals of the past: it includes all significant identifications, but it also alters them in order to make a unique and a reasonably coherent whole of them” (pp. 112-113). Attendant on such a properly consolidated identity is a realistic self-esteem: “For unlike the infantile sense of omnipotence which is fed by make-believe and adult deception, the self-esteem attached to the ego identity is based on the rudiments of skills and social techniques which assure a gradual coincidence of functional pleasure and actual performance, of ego ideal and social role. The self-esteem attached to the ego identity contains the recognition of a tangible future” (pp. 39-40).

But, and here is where identity formation bursts the bonds of the specific life stage assigned it, this formation is built out of all that has gone before in the individual’s development: “The integration now taking place in the form of ego identity,” Erikson (1950) writes, “is more than the sum of the childhood identifications. It is the accrued experience of the ego’s ability to integrate these identifications with the vicissitudes of the libido, with the aptitudes developed out of endowment, and with the opportunities offered in social roles. The sense of ego identity, then, is the accrued confidence that the inner sameness and continuity are matched by the sameness and continuity of one’s meaning for others, as evidenced in the tangible promise of a ‘career’” (p. 228). And by the same dynamic that is extended back to earlier stages, identity identity acquires its final form in the marriage of mates whose ego identity is complementary in some essential point and can be fused in marriage without the creation either of a dangerous discontinuity of tradition, or of an incestuous sameness—both of which are apt to prejudice the offspring’s ego development” (p. 40).

Yet clearly the consolidation of ego identity
is never achieved easily, or decisively, or for all time. There is always a counterbalancing pull to identity (or role) diffusion/confusion—Erikson employs all of these phrases—and the struggle against, or surrender to, unwanted negative identities. Erikson (1959) has described the pressures that can lead to at least temporary identity diffusion rather than to consolidation: "A state of acute identity diffusion usually becomes manifest at a time when the young individual finds himself exposed to a combination of experiences which demand his simultaneous commitment to physical intimacy (not by any means always overtly sexual), to decisive occupational choice, to energetic competition, and to psychosocial self-definition" (p. 123).

It is this struggle of identity crystallization versus diffusion that is carried on during the period designated by Erikson as the adolescent moratorium, a phrase eagerly taken up to justify the dropout behavior of dissent and hippie youth that marked the turbulent sixties and has since become institutionalized, if in milder form, in the life-progression of so many young people today. Erikson (1959) considered the "psychosocial moratorium" to be a period "during which the individual through free role experimentation may find a niche in some section of his society, a niche which is firmly defined and yet seems to be uniquely made for him" (p. 111). The clinical picture of identity diffusion is presented by those "young people who can neither make use of the institutionalized moratorium provided in their society, nor create and maintain for themselves...a unique moratorium all of their own"; these young people "come, instead, to psychiatrists, priests, judges, and (we must add) recruitment officers in order to be given an authorized if ever so uncomfortable place in which to wait things out" (p. 122). This, of course, is the "identity crisis." The healthier one can use the moratorium more successfully, and indeed it became for Erikson (1966) a hallmark of adolescence: "The adolescent mind is essentially a mind of the moratorium, a psychosocial stage between childhood and adulthood, and between the morality learned by the child, and the ethics to be developed by the adult" (p.290). Apropos this, in his own life Erikson, after completing his gymnasium studies, embarked on his own moratorium, a Wanderjahr as an itinerant artist in Europe, before being called to Vienna by his friend Peter Bloch to work with him as a teacher in the psychoanalytic preschool being established there by Dorothy Burlingham and Anna Freud.

Following a different progression, Erikson (1959) noted, identity can crystallize into an unhappy "negative identity, i.e., an identity perversely based on all those identifications and roles which, at critical stages of development, had been presented to the individual as most undesirable or dangerous, and yet also as most real" (p. 131). Two examples are the hypochondriacal invalid and the delinquent gang member. In other cases (the underachiever, for instance, or the dropout), "the negative identity is dictated by the necessity of finding and defending a niche of one's own against the excessive ideals either demanded by morbidly ambitious parents or seemingly already realized by actually superior ones" (p. 131). In all this, to be sure, Erikson's convictions about a progressive and self-righting developmental thrust are evident: "Such vindictive choices of a negative identity represent, of course, a desperate attempt at regaining some mastery in a situation in which the available positive identity elements canceled each other out. The history of such a choice reveals a set of conditions in which it is easier to derive a sense of identity out of a total identification with that which one is least supposed to be than to struggle for a feeling of reality in acceptable roles which are unattainable with the patient's inner means" (p. 132).

Clearly, Erikson, always with an eye to developmental potential, consistently struggled to avoid mere pathologizing; "adolescence," he stressed, "is not an affliction but a normative crisis, i.e., a normal phase of increased conflict characterized by a searing fluctuation in ego strength and yet also by a high growth potential... What under prejudiced scrutiny may appear to be the onset of a neurosis is often but an aggravated crisis which might prove to be self-liquidating and, in fact, contributive to the process of identity formation" (p. 116). Indeed, the fluidity of defenses and the abrupt behaviour reversals commonly seen in adolescence may be necessary aspects of role experimentation and so need not be preferentially read as signs of pathology. And opposites can and do integrate. Positive identity formation requires some of its opposite, role-repudiation, and indeed cannot function without it. In a plenary address to the International Psychoanalytical Association, titled "On the Generational Cycle," Erikson (1980) put it thus: "there can be no identity without some repudiation of unacceptable roles" (p.217), "an adolescent who cannot repudiate any offered roles on ideological grounds may repudiate his own best chances for an identity formation" (p.218). But there, of course, always the fear of wholesale loss of identity and the falling into neurosis or worse. Toward the end of Childhood and Society, Erikson noted that "as the fear of loss of identity dominates much of our irrational motivation, it calls upon the whole arsenal of fear which is left in each individual from the mere fact of his childhood" (p. 368).

Finally, Erikson, toward the end of Identity and the Life Cycle, remarked on the relationship of the identity concept to what then in American psychoanalysis was the little-used concept of the self. "It has not escaped the reader," he wrote, "that the term identity covers much of what has been called the self by a variety of workers, be it in the form of a self-concept [reference is made here to George Herbert Mead, a major social theorist, but not a psychoanalyst] or an identity system (Harry Stack Sullivan is cited, at the time a marginalized "neo-Freudian," the proponent of an interpersonal psychoanalysis largely outside the framework of the American Psychoanalytic Association), or in that of fluctuating self-experiences described by Schilder, Federn, and others [eminent European analysts whose concepts never gained prominence in America]" (p. 147, emphasis added).

It is, however, precisely here, in the real and clear lucidity of the ego identity concept to the concept of the self, which at the time of Erikson's seminal work was but a nascent, as yet hardly visible influence in American analysis, that I see the historical basis for the persistent neglect of Erikson within so-called traditional psychoanalysis—neglect that endures even into the current era, in which a more relationally based psychoanalysis holds the concepts of self and object so dear—and for our collective difficulty in inserting his contributions logically into our evolving theoretical edifice. Erikson's identity concept, though essentially a concept of the self, emerged in the heyday of the structural theory and ego psychology, which during the 1950s and into the 1960s enjoyed an almost monopolistic theoretical hegemony within mainstream American psychoanalysis.

3 Arnold Cooper (1994, in his discussion of this paper, speculated that the psychoanalytic propensity to focus preferentially on the pathological might be a factor in the failure of psychoanalysis to grant Erikson his deserved place of pride. "Perhaps," Cooper stated, "the term [identity] is superseded by self and surely, as Wallerstein reminds us, the lack of interest in identity reflects the analytic one-sided focus on pathology... Wallerstein posits that Erikson [by contrast] was very little interested in 'pathologizing.' He was interested in the circumstances under which a variety of developmental paths may be fostered or hindered."
Naturally, then, identity was coached by Erikson in ego language. Nonetheless, though Rapaport, the self-selected systematizer of ego psychology, tried manfully in his introduction to *Identity and the Life Cycle* to relate the conceptions of Hartmann and Erikson, he was forced to conclude, usefully, as we have seen, that “here a task of integration faces ego psychology.” The overarching psychology of the ego as then articulated was not a psychology of the self, and if the self was included at all, it was by being subsumed by the ego.

At this point I will simply define the self as Jacobs did in 1964, five years after *Identity and the Life Cycle* and fourteen years after *Childhood and Society*. "The term 'self,'" she wrote, "which was introduced by Hartmann (1950)" will in agreement with him, be employed as referring to the whole person of an individual, including his body and body parts as well as his psychic organization and its parts. As the title of this volume *The Self and the Object World* indicates, the 'self' is an auxiliary descriptive term, which points to the person as a subject in distinction from the surrounding world of objects" (p. 6).

Since then, of course, we have had the explosive rise of Heinz Kohut's self psychology, a full-blown object-relational perspective built around the concepts of the British Independent Group or Object-Relational School, particularly those pioneered by Winnicott; and Otto Kernberg's ongoing efforts, starting in the 1970s, based on the conceptions of Jacobson and Margaret Mahler, to combine object-relational and drive/structural theoretical perspectives into a superordinate model in which the earliest developing self- and object representations and the affective valences that bind them become the building blocks for the maturational unfolding tripartite structure of id, ego, and superego. These influences have together helped consolidate a substantial object-relational perspective in American analysis, a tendency abetted by the increasing circulation in America of books by British Kleinian and object relations theorists, as well as by increasingly frequent scientific visits by them. A concomitant influence is the reentry into the mainstream of contributions by the hitherto marginalized Sullivanian interpersonalists (e.g., the series of books by Edgar Levenson, Jay Greenberg, and Stephen Mitchell).

Even within the so-called mainstream of American ego psychology there has been a growing involvement over recent years with such conceptions as the interactive, the interpersonal, the intersubjective, a two-body psychology, and an enhanced focus on the subjectivity of the analyst. This has brought with it an increased attention to the countertransference (broadly conceived as the totality of the emotional involvement of the analyst) as a guide to understanding the patient's psychology via such mechanisms as projective identification, empathic resonance, and immersion. Examples include Gill's refocus on the understanding of the transference within the frame of a two-body psychology (1983); his joining Hoffman (1983, 1991) in formulating a social-constructivist view of the psychoanalytic situation; Poland's description of the transference as the "mutual creation" of analyst and analyst (1992); Boesky's comparable description of some resistances as likewise the joint creation of analyst and analyst (1990); Renik's focus on the "irreducible subjectivity" of the analyst's involvement in the interactive analytic situation (1993), and Jacobs's thorough exposition (1991) of the great therapeutic gain for the understanding of the patient that can derive from detailed attention to countertransferentially induced affects, memories, and reveries. All of these conceptions, either explicitly or implicitly, accommodate, and in fact may demand, a conception of the self as contrapuntally with the other, the object, in interactive analytic dialogue.

Yet despite the more congenial home many of Erikson's conceptions, particularly his identity concept, find in contemporary psychoanalysis, his views, embedded as they are in the ego psychology, structural theory language of his day, have for the most part not been drawn upon, or even recognized, as vital forerunners to so much of today's analytic thinking. For example, Bacal and Newman (1990), in their comprehensive and scholarly exegesis of the various object relations theorists whose contributions fed logically into the structure of self psychology (even if this is not properly acknowledged by Kohut), at no point even mention Erikson's concept of self and identity—this despite the fact that they make a most plausible case for considering Kohut's self psychology the quintessential object relations perspective, one that finally gives the self coequal valence with the object in the dyadic self-object relation. From his side, in his three books elaborating the psychology of the self (1971, 1977, 1984) makes in each but a single passing reference to Erikson. For example, in *The Restoration of the Self*, Erikson is included in a list of ten theorists "whose areas of investigation, even if not their methods of approach or their conclusions, overlap the subject matter of my own investigations to varying degrees" (p. xx).

This same neglect of Erikson's seminal role in drawing American psychoanalysis into a concern with the self and its relatedness has characterized almost all those theorists, "ego psychological" or not, who have been identified as proponents or expositors of the massive paradigm shift occurring in contemporary psychoanalysis—the shift in theory whereby the relational is placed in dialectical juxtaposition to drive/structural explanatory models of the mind, and the concomitant shift in theory of technique whereby the analytic relationship between self and other is accorded a status equal to that of the interpretive process in effecting therapeutic change.

For example, Heinz Lichtenstein (1965), in his comprehensive effort at a metapsychological understanding of the concept of self, makes only scant reference to Erikson. Arnold Modell, who has played a major role in bringing British object relations conceptions, especially those of Winnicott, to the notice of American psychoanalysts, includes in his four books (1968, 1984, 1990, 1993) but a few scattered references to Erikson, only a single one in each of the two
latest. Only in Modell's most recent book, *The Private Self* (1993), does the single reference to Erikson allude to any ostensible connection between the concepts of identity and self. "At the height of ego psychology in the 1950s," he writes, "psychoanalysis had only a peripheral interest in the self as such, but they devoted some attention to the topic of ego identity. Erik Erikson, who coined the term 'identity crisis,' understood that one's identity is something that is both self created and bestowed upon the individual by the culture. For Erikson, the concept of identity lies on the border between psychology and sociology" (p. 13). One may detect here an echo of Jacobson's dismissive comments from an earlier era, certainly there is no crediting of Erikson's catalyzing role in the current conceptual evolution in psychoanalysis.

A decade after Liechtenstein, Sander Abend (1974) essayed another review of the topic—this one with the title "Problems of Identity"—based on discussions of a *Kris Study Group*. Abend began with a quote from Kohut (1971), explicitly disavowing any linkage between the concepts of identity and self, identity, like personality, "although often serviceable in a general sense...is not indigenous to psychoanalytic psychology; it belongs to a different theoretical framework which is more in harmony with the observations of social behavior and the description of the (pre-conscious experience of oneself in the interaction with others than with the observations of depth psychology" (p. xiv-v). Contrarily, Kohut's formulations about the self, which evolved into the full elaboration of self psychology, he declared to be quintessentially depth psychology, i.e., psychoanalysis.

In his few direct references to Erikson in this review of the identity concept, considered both theoretically and clinically, Abend stated that Erikson "appears intentionally to maintain a certain elusive quality." He cited the multiple elements invoked by Erikson as melding together into the conception of identity, and noted that other writers did not accept Erikson's views; by contrast, they considered identity in a considerably more circumscribed way as referring "to an individual's unique personal identity, a mental entity which comes into existence as a consequence of the separation-individuation phase of early psychic life" (p. 667)—as if this were a less elusive construction than Erikson's far richer array of determinants. Over all, in Abend's several other references to Erikson, at no place is a direct connection made between his views on identity and the more recently evolving conceptions of the self. The closest the paper comes to such a connection is the single sentence, "I believe that sense of identity and sense of self are as useful clinically" (p. 615) as each other, a very cryptic acknowledgement of their relatedness, at least in terms of their technical consequences.

In a more recent overview of the concept of the self, William Meissner (1993) makes several references to Erikson, though like Modell and Abend he fails to link Erikson's emphasis on an established, coherent identity as central to life functioning, to the related concept of self. This is particularly surprising, as Meissner's own emphasis here is on self-as-agent, "the notion of the self as the theoretical equivalent of the person in his or her role as active, self-understanding, and self determining agent" (p. 490). He also acknowledges that "Erikson's model of the psychosocial integration of the human person has brought to light the pertinence of a more encompassing level of theoretical conceptualization—particularly in the articulation of concepts like identity and ego autonomy which seem to embrace larger aspects of the internal psychic organism than can be satisfied by appeal to the ego alone" (p. 487). Despite all this, Meissner concludes that "the most functional and meaningful concept of the self for psychoanalytic purposes is that of the self as a supraprodimate and structural construct that includes the tripartite entities as component substructural systems. The self so conceived is the theoretical equivalent of the total person and includes and expresses all aspects of the human personality" (p. 492). Here all linkage to identity and to Erikson's pioneering role in regard to these conceptualizations is omitted. The single concession to Erikson occurs much earlier in the article: "Erikson's...notion of identity," writes Meissner, "shares some of the previous ambiguities [in descriptions of aspects of the concept of self] but seems to emphasize the subjective and experiential aspects of the self organization. The mature and stable sense of identity seems to represent the subjective dimensions of a well-integrated and cohesive self" (p. 466).

Otto Kernberg, the last I will cite in this context, is in his third book (1976, 1976, 1980), which lay out his conceptions of borderline pathology and its treatment in the context of a combined object-relational and drive/structural theory, in fact gives a considerable amount of credit to Erikson's place in his thinking, though this fact is seldom remarked. Two quotations, both from Kernberg's second book (1976), make this clear: "Jacobson's and Erikson's contributions to the study of early object relations and their influences on the organization, integration, and development of ego structure were extremely helpful bridges between metapsychological and especially structural analysis of the psychic apparatus, on the one hand, and the clinical study of the vicissitudes of object relations, on the other" (p. 27). The second quote focuses specifically on ego identity. According to Kernberg, it "represents the highest level in the organization of internalization process, and Erikson's conceptualization is followed here closely. Ego identity refers to the overall organization of identifications and introjections under the guiding principle of the synthetic function of the ego" (p. 31-32).

And yet Kernberg could alter and bend Erikson to his own purposes. For example (Kernberg 1980), he could separate Erikson's concept of the normative adolescent struggle over identity formation versus identity diffusion (in which a preponderantly positive balance is struck in the dialectic in cases of normal outcome) into a sharp dichotomization of the healthy, who establish a consolidated identity, and the disturbed, whose identity diffusion, however phase-limited, is seen to be a hallmark of the borderline disorder, a pathology that Erikson, of course, always eschewed.

It is clear that nowhere in the literature cited is there the equivalent, vis-a-vis Erikson, of what Bacz and Newman (1999) have sought to do in establishing how several decades' worth of contributions by object relations theorists from around the world feed logically, almost seamlessly, into the structure of Kohut's evolving self psychology, regardless of his failure to acknowledge this. Unfortunately, Bacz and Newman did the signal disservice to Erikson of omitting even a single mention of his name as one among the impressive stream of contributors whose work they reviewed. Interestingly, Cooper (1994) has stated that "it seems...as if Kohut, who did not acknowledge a debt to Erikson, swallowed up the concept of identity under the rubric of self, even though there were vastly different intentions behind their descriptions."

Cooper summarized his overview of the current fate of Erikson's contributions and influences as follows: "in a recent scan through the JOURNIT titles, my computer turns up almost no references to identity in Erikson's sense, within the past decade. Perhaps the term is superseded by self." In elucidating the
implications of Erikson's extension of psychoanalytic theorizing to the entire life cycle, Cooper noted that "the open-endedness of our adaptive capacities sheds a new light on what clinical psychoanalysis may achieve and how it achieves it. It is consonant with the increasing emphasis in clinical psychoanalysis on the contemporary, here-and-now experience and how that experience is constructed out of inner scripts of desires and its object-relational fantasy outcomes. The very idea of adult analysis assumes the capacity for adult development." (p. 6)

But clearly, despite occasional but infrequent acknowledgments of theoretical indebtedness—Kernberg's, say, or, more distantly, Meissner's—Erikson's lifework, magisterial though it is, remains for the most part in a psychoanalytic limbo. Collectively, we are uneasy and puzzled about where his achievement fits in the evolving psychoanalytic edifice. It is my view that Erikson, a creature of his time and a sociohistoric surround (a conception that he, more than any other analyst, insistently has brought to our attention), developed his ideas on psychosocial development, the life cycle, identity, and the self at a time when we had not yet, at least in America, developed a language of the self. He and his explicators, Rapaport for instance, felt constrained, therefore, to accommodate his views to the language of structure and the ego, the tripartite model of the psychic agencies, where they never properly fit. Unfortunately then, when gradually the object-relational, interpersonal, intersubjective, phenomenological, and other subjectivistic renderings of psychoanalytic phenomena (which together accorded concepts of self and object a central theoretical place), succeeded in transforming American analysis over recent years, Erikson's strivings in this area were dismissed as remnants of the era of ego psychology and the structural theory.

Regardless, however, of the reasons for our neglect of Erikson, it is indeed timely now that we attempt both a reassessment and a rectification of his proper place in the evolutionary building of psychoanalysis.5

References


5 In the panel on which this paper was originally presented, Cooper, in his discussion, and John Mundcr Ross, in his introduction, offered their own thoughts on the matter. Cooper (1994) put it as follows: "It may be that one reason we marginalize Erikson, celebrating him in historical context as we do today, is that, as with so many other advances in psychoanalysis, we have ingested some of the message without acknowledging the extent of the shift of our thinking. I have elsewhere referred to this as the "quiet revolution in psychoanalysis." Thus put it more skeptically: "What I didn't gather at the time (when he first encountered Erikson and his work at his instigation) was the degree to which Erikson had been marginalized by mainstream psychoanalysis, and the depth of the envy stored in his colleagues by the immense popularity of both his writings and his person. Because he was so famous, his peers in psychoanalysis concluded that he was a pedestrian (Wuth that psychoanalysis were no popular now) and therefore an intellectual adornment. Failing to appreciate his place in the contemporary culture, they underestimated his thought and the depth and extent of Erikson's contributions to the field."


Charles Hanly

In an earlier work (Hanly, 1978), I raised some questions about Freud’s death instinct. I proposed that one could account for individual and collective human aggression (including the prevalence of destructive aggression throughout history) by assuming that aggression is a reactive instinct tied to spontaneous object and narcissistic libido and triggered by the frustration of libidinal needs. The argument was, perhaps, more theoretical and philosophical than clinical. In this paper, I consider the bearing of repetition in the fate neurosis on the question of the death instinct after some preliminary theoretical considerations.

Repetition is ubiquitous in everyday life. It is found in the basic habits of people, in waking and sleeping, in patterns of sexual arousal, in learning and mastery, in work and much else. And we take pleasure in repetition in poetry, music and dance. Children relish the repetition of their favorite stories and songs. Our individual habits respond in various ways to nature’s repetitions in the succession of day and night and the changing of seasons. The repetitiousness of individual habits that often commemorate identifications and attachments can be sources of reliability, adaptation, creativity and effectiveness, but may also impose habits that are the vehicles of conflicts that make them rigid, ritualized and compulsive prerequisites for sleep, sex or work. The question I shall consider in this paper is whether or not there is a special class of repetitive activities that answer to Freud’s (1920) hypothesis of a compulsion to repeat that goes beyond the pleasure principle and that, consequently, provides us with evidence of a death instinct.

Why should the hegemony of the pleasure principle be circumscribed? After all, as Freud well knew, the pleasure principle has had a long and distinguished history in the search for human self-understanding. That human beings seek pleasure and avoid pain has not been doubted by philosophers, over the centuries, otherwise as diverse in their thinking as Plato, Aristotle, Epicurus, Hobbes, Spinoza, Hume and Mill. The ethical question for philosophy has been, “What pleasures are most worthy of human beings and what pain must be suffered, if necessary, for the sake of worthwhile pleasure?” Freud (1895) began with a neurological account of the pleasure principle. Beyond an optimal level of excitation required by the exigencies of life, excitations seek discharge. The discharge of excitation is experienced as pleasure, the arrest of discharge is experienced as pain that can go beyond disappointment to anxiety and anger. Later, Freud translated his neurological account into a psychological account. Wishes, desires, needs (drive derivatives) motivate behaviour fitted to their satisfaction, giving rise to pleasure. Pain arises when these motives and behaviours are thwarted internally or externally, although the pain of internally thwarted sexual or aggressive pleasure can be mitigated by the narcissistic satisfactions of moral masochism. The pleasure principle commits us no less to the avoidance of pain than to the pursuit of pleasure.
Theoretical Considerations

Two issues have given rise to theoretical doubts about Freud's account of the pleasure principle. Freud himself pointed out that the intensification of desire, of which sexual desire is the most conspicuous example, is pleasurable. And masochism involves taking pleasure in pain. Rosenberg (1991) has made clear the problem of a logical contradiction in Freud's early formulation of masochism and the pleasure principle. How does rhythm make an increase in satisfaction possible? The intensification of desire, of which sexual desire is pleasurable, up to a certain point, so long as the ego is supplied with intense pleasure; the appearance of a contradiction as soon as the process is understood in its proper complexity.

Freud's Evidence for a Compulsion to Repeat

Freud (1920) explored five phenomena for evidence of a compulsion to repeat: traumatic neuroses, traumatic dreams, play of children, transference neuroses, and fate neuroses. Freud's evidence for pleasure seeking in its quest for mastery in symbolic play of the repeated painful experience? If so, it is not evidence of a compulsion to repeat. The pleasure principle is not neurologically tied to physical desires and can encompass narcissistic as well as object libidinal conflict. But these theoretical considerations must give way to empirical inquiry.
altemations in dangerous drive demands. Freud (1926) concluded, "We are apt to think of the ego as powerless against the id, but when it is exposed to an instinctual process in the id it has only to give a ‘signal of unpleasure’ in order to attain its object with the aid of that almost omnipotent institution, the pleasure principle." (p. 92).

But there is a problem with the first premise of Freud’s argument that assigns to the pleasure principle pride of place in the regulation of drive life. How “nearly omnipotent” is the pleasure principle, if a competition to repeat driven by a death instinct operates beyond it?

It must be acknowledged that problems are generated by the abandonment of Freud’s death instinct hypothesis. For example, one has to find other ways than Freud (1923) found to account for the deontological severity of conscience when it imposes duty for duties sake in sublime indifference to pleasure seeking. Does not one also lose many of Klein’s contributions to psychoanalysis? One would lose the drive explanation of the paranoid-schizoid position that could no longer be understood to be a normal and inevitable paranoid-schizoid position that could no longer be understood to be a normal and inevitable paradigm shift.

Mr. A was a recently graduated mechanical engineer, the son of poor, uneducated parents who lived in a small, rural Ontario town. He had a married sister a year and a half his junior. A striking feature of his life was a series of calamitous self-inflicted failures.

His parents had been unable to afford a good school but their parish priest had arranged his admission to an excellent parochial school and in exchange for fees he was to serve as altar boy and undertake some janitorial duties in the church to which the school was attached. All went well until his graduating year. He failed subjects in which he had previously done well and did not graduate or gain university admission let alone win the scholarship he would have needed. He had rationalized his neglect of these subjects with the idea that his religious and menial work would be more important than his studies. The priest had not been a hard taskmaster. Something in himself had prompted him to neglect his studies. He recalled that he had also derogated these subjects in his own mind for thinking of them as unimportant “sissy subjects.” His corner hopes were in ruins. An initial impression might suggest the possibility that he had rebelled against his parent’s ambitions for him and that in the ruination of their hopes he could forge his independence and individuality.

Mr. A joined the military. He had long had an interest in flying and in military aviation history. He was sent for boot training preparatory for flight training for which he had been selected. A boyhood dream of his own was coming true; he would be a pilot and an officer. Mr. A found himself in a squad under the heel of a sadistic sergeant major who enjoyed humiliating the young recruits. They all bitterly resented the sergeant major and complained about him to each other, but it was Mr. A, who, toward the end of his boot training and, unlike the others who suffered in silence, committed an open act of insubordination. He rationalized his refusal to obey an order on the grounds that he was making a legitimate protest on behalf of all of them against the sergeant major’s abuse of authority. He was brought before the camp commandant. The commandant had him washed out of pilot training and informed him that he would never become an officer on account of his insubordination. Now his dream of a career as a military pilot was destroyed. He completed his tour of military duty as a common soldier in an infantry unit.

Having completed his military service, Mr. A discovered that he was now eligible for university admission as a mature student without matriculation and that an educational programme for veterans would cover the cost. At last a foreign gate appeared to be opening. Despite the crushing disappointment of his military defeat, he was now able to pursue his old ambition of a university education and a professional career. All went well until his final year when he was required to undertake some independent research and write a thesis based on it. Instead of doing the work himself, he hired someone else to do the work that he successfully presented as his own. He rationalized his plagiarism on the basis of the sixties idea that professors use false standards to wield power and make students jump through hoops. He graduated and became qualified in his profession. He had at last realized his dream, but now his dream was hollow. He was qualified in appearance but unqualified in reality. His guilt made him deeply anxious about his competence, an anxiety that he denied to himself with grandiose boastful claims to exceptional abilities.

The obscure intent that seems to link these untoward events in the life of Mr. A is the destruction of career achievements for which his endeavor equipped him and which circumstance placed within his grasp. Such an intention could be the work of a death instinct. Its self-destructiveness exhibits the regressive masochistic organization. But is it really evidence of a primary masochistic organization of aggression? These self-destructive actions were by no means pure manifestations of a repetition compulsion. Over determined intentions were at work. In his failure to complete high school, there was evidence of a rebellion against his parents involving an aggression against them and simultaneous punishment for himself. His act of insubordination in the army was punished externally but he was able to ask himself why it was he who did what his comrades also wanted to do and suffered the punishment for it. His cheating on academic requirements that grew out of feelings of inadequacy and fear of failure provided him with a certificate of competence that did nothing to improve his self-confidence. Beneath his conscious fear of failure, there was at work a deeper fear of success. The punishment that took the form of severe anxiety about his professional abilities was self-inflicted. His self-inflected image of himself did not mitigate the anxiety or render it less relentless. It was inevitable that, once a certain amount of analytic progress had been made, a transference repetition of his need to fail would occur.

The dominant transference that accompanied and facilitated the analysis of these unfortunate events was Oedipal...
Charles Manly

Promethean and ambivalence. I was made powerful by idealization. Phantasies, dreams and transference enactments made evident Mr. A's wish to be empowered by me so that he could realize his oedipal strivings without retaliation or guilt.

However, it would be a mistake to suppose that pre-oedipal trauma had played no part in his neurosis. The birth of his sister, when he was not yet two, resulted in his being sent to a neighbour for day care. He had not been able to form a comforting attachment to this stranger. He envied his baby sister who was cared for by his grandmother when, soon after the birth, his mother returned to work. The intensity of his envy and hatred, his inability to form an adequate attachment to the neighbour suggested the possibility of an even earlier oral trauma. During the anal phase, he had suffered a further trauma. He had been given a puppy. The opportunity to love and care for a creature even more helpless than himself allowed him to form a narcissistic identification with the puppy through which he could seek to repair the abandonment and helplessness he had himself suffered by caring for the puppy as he wanted to have been cared for. This effort at self-repair ended in disaster. His mother, who was extremely house proud (she had her living room furniture fitted with protective plastic covers), got rid of the puppy.

These childhood calamities had their effect on Mr. A's oedipal complex. He recalled that, as a preschooler, he was frequently spanked for naughtiness by his mother with a much grandiose ambitions he had for himself in his childhood sexual and aggressive wishes had been suppressed by the cold aloofness of his oedipal desire and phallic ambition, the small boy found himself in a new relation to his mother. She let him know how dissatisfied she was with his father. Father did not provide enough. He had to go out to work. Father was not ambitious. He had never advanced in his work. These complaints nourished the son's oedipal ambitions. The effects of the mother's reductiveness joined forces with his need to deny his past misery with phantasies of great expectations and a triumphant future. He rationalized her earlier mistreatment of him as the consequence of misfortune and unhappiness caused her by the father's shortcomings. It became his mission in life to make her happy. This oedipal triumph greatly intensified his hostility toward, his contempt for and his fear of his father.

In his adulthood, Mr. A's real abilities and strengths were depreciated and compromised by his grandiose phantasies of triumph. He dreamed of becoming enormously wealthy in the fashion of a Renaissance prince. He would use his wealth generously to assist needy men to get on their feet, making them dependent and subservient. He would have the choice of their women. But his fear of retribution was proportional to his narcissistically aggrandized aggressive phantasies. It was fear of the retaliation that awaited him that drove him to defeat himself whenever opportunities for success were within his grasp.

Mr. A developed a family romance transference in which I was assigned the role of the all-forgiving, all-caring, altruistic, sacrificially giving father. Early in the analysis, he used this transference to bring about yet another defeat. He persuaded himself that the grandiose ambitions he had for himself in his work were immediately attainable; he acted accordingly with the result that he was dismissed. These phantasies, at times, had a destructive character that prevented him from working within the limits of the pleasure principle. By inflicting upon himself the lesser pain of failure, he avoided the greater pain of failure, he avoided the greater unconscious phantasized catastrophe of castration (Grunberger, 1956).

Mr. B was a graduate student writing his Ph.D. thesis in the days before computers and back-up discs. He habitually worked in the university library. He had completed more than half of the thesis. One day, he was obliged to leave the library to do some shopping down town. He was making his way back to his car on a small side street, when he began to feel anxious about having left his briefcase containing his thesis in the car. He could not recall having locked it. He rushed back to the car only to find the car unlocked, as he feared. The briefcase was not there.

Mr. B fell into an angry, despairing depression. He inveighed against one of the delinquent winos who frequented the area; he imagined that he had dumped the precious contents of the briefcase in a garbage can before selling it. He despaired of retrieving it. He thought of informing the police but had no hope that they could or would be of help. He spent several miserable days until the will to start reconstructing the work revived. He returned in a wretched mood to the library. Upon his arrival, a librarian rushed up to him to tell him that she had found his briefcase with his papers in it and had put it in the library office for safekeeping when he had not returned. He had left it on the librarian desk at which he worked; he had never taken it to the car as he had believed.

Analysis of the error made it apparent that, far from wanting to get rid of it because he was dissatisfied with it, Mr. B knew that it would be a highly regarded contribution to the scholarship of his field as, indeed, it turned out to be. He sought, by means of the parapraxis, to rid himself of it because he feared its worth and the academic success it would bring to him. Mr. B's father had been a distinguished academic. He had recently died shortly after his retirement. Mr. B's widowed mother had become largely dependent on him for her care. This circumstance and his mourning had revived and intensified his childhood oedipal feelings of ambivalence toward the dead father causing him to triumph unconsciously over the death he consciously mourned. Behind the phantasy of the delinquent stranger who had stolen his thesis was the memory of the accomplished professorial father who had stood in the way of his childhood oedipal ambition. The replay of his childhood sexual and aggressive wishes had become linked to his own legitimate and realistic academic ambitions rendering them unconsciously murderous and making him vulnerable to retribution. Fear of the dead father's retribution had caused the psychological error as though it were a supplication to the dead father whose memory was still alive in him, "Father, you see how my guilt punishes me. You may rest in peace. You need not punish me". This supplication expresses a negative oedipal promise.

The evidence suggests that the aggression,
turned by Mr. B against himself, was not a
reversion to an original masochistic
organization of his aggression but rather a
redirection toward himself of his sexually
motivated oedipal aggression against his
father as a consequence of the intensification of his
identification with his father caused by
castration anxiety. Mr. B developed a
transference phantasy that his father had failed
to give him the confidence he needed to realize
his intellectual potential. The delirious thieft
of his patrimony was this depriving father of his
childhood experience. His associations
revealed a preoccupation with subtle faults in
his father's attitude to him while forming an
idealizing transference to me as the good father
who would empower him, a transference that
fastened on my own professorial status.

Unquestionably at work in this idealization was
a negative oedipal seductive aim which found
expression in a transference enactment. At the
time, my office had no waiting room. I asked
patients to knock on the door at the agreed
upon time of their sessions. I became aware
that Mr. B was regularly using this opportunity
to begin his sessions a minute or two early. I
had to overcome my countertransferring wish
to see his coming to his sessions a bit early as
a mark of his therapeutic zeal, in order to avoid
appearing niggling and ungenerous. Idealizing
transferences can be seductive. But then, it was
equally naive to raise the matter to release
the underlying meaning of his associations the way
a Psych分析师 might want to discuss something
from me, in this apparently trivial detail. In a
different form, with a lesser intensity and
defensiveness, we came upon the same
childhood negative oedipal wishes found in the
transference of Mr. A. But this wish did not
need to be treated coldly, nor did the patient
need humiliation. His affective response to my
sensing the aggression in this bit of analytic
zeal was embarrassed shame. The disturbance of his
adult sexuality and of the frustration of his
legitimate professional ambitions were

sufficient motives for Mr. A's analytic quest
for maturation and for the mourning and
resignation it required.

The fate neurosis of Mr. B was mild by
association with that of Mr. A. In a scale of
severity it was much closer to what one might
call the fate neurosis of everyday life. What I
am calling the fate neurosis of everyday life is
made up of the small ways normally nervous
individuals sacrifice some of their capacity
some of the time for achievement, pleasure and
happiness out of guilt. Many lives are in some
degree haunted by a sense that marks in consciousness this unrecognized
series of sacrifices and their unconscious
motives. Perhaps, it is an intensification of this
inevitable flaw in the human condition that
experienced as depression, results in the
widest reliance upon anti-depressive
medication. This view, which is reached here
along a different path, is also a corollary of
Loewald's (1979) assertion that "there is no
such thing as definitive destruction of the
Oedipus complex" (p. 763). It is also
consistent with the widening scope of neurosis,
that is really a return to Freud (1937), as
opposed to the idea of an etiologically distinct
work as a whole and, in particular, his clinical
investigation of "soul murder" supports this
point of view.

Mr. C was a multi-talented person in his
mid-thirties. He had scientific gifts that had
enabled him to become a medical specialist and researcher as well as an exceptional
aptitude for musical performance. He had
mastered two instruments to a professional
level in his youth. His fate neurosis was
constructed out of the self-destructively
infamous way he exploited his multiple
talents. It was clear that he would once more
ruin his chances of success in an excellent new
university appointment that motivated him to seek analysis.

Mr. C had become aware of a chronic
pattern of behaviour in which he used his
exceptional abilities against himself. By his
late teens, he had achieved a high level of
performance in a musical instrument. But no
sooner than he began to receive offers of career
building public performances, he decided that
he should devote himself to another
instrument. He rapidly mastered this
instrument but, then, decided that he should
concentrate on a professional career. But upon
graduating from medical school with honours
and excellent opportunities, he decided to take up
his original instrument again by accepting an
offer to join a chamber ensemble. Nevertheless,
three years later, with critical acclaim and a
beguiling reputation, he once again abandoned the instrument to take up a
general medical practice in a backwater. From
this beginning, he added to the study of a
scientific and clinical specialty. Once more his
abilities were recognized and he was awarded a
three-year fellowship for advanced study and
research at one of the world's best medical
schools. He managed to limp through his
fellowship, despite some promising research,
because of some ruinous personal
enmity that destroyed his marriage and
left him depressed, maiming and anxious
about his future. Even as he took up his new
scientific appointment, he took up yet a third
musical instrument. Although he had been
successful in his youth, a parallel theme was a repetitious falling in and
out of love. He would fall in love with one
woman, then become bored and dissatisfied with her even as he hung onto her until he had
fallen in love with another. In this way, he
reached together a series of relations with
women stolen from other men. His difficulties with women were entwined with his vacillating
career choices like the elements of a baroque
column. The exception was a marriage of some
years that succumbed to the more dominant
unconscious need for affairs during his

fellowship abroad with the damaging results for his career already described.

Mr. C was the elder of two sons. Precocious, talented and engaging, he was
favoured by his mother to the extent that he believed himself to be the favourite eclipsing both
brother and father in his mother's eyes. His
father, who after only minor business
successes unexpectedly inherited a fortune,
favoured his younger son. He let my patient know that he thought that he would not amount
to anything and thwarted his quest for
maturation wherever he could. For example,
he would never allow him to drive his car,
even as the brother was of age, motives,
he taught him to drive and gave him free
access to his car. The father was residually
with his eldest son and punitive. The mother
couraged her son's pursuit of an oedipal
appraisal. My patient said of his mother that
she "was always considerate of my father in a
way, but she had evicted him emotionally from
such thing as definitive destruction of the
Oedipus complex" (p. 763). It is also
consistent with the widening scope of neurosis,
that is really a return to Freud (1937), as
opposed to the idea of an etiologically distinct
work as a whole and, in particular, his clinical
investigation of "soul murder" supports this
point of view.

His oedipal anxiety was denied by an
infatuation of almost manic proportions of his
erotic and aggressive feelings. With a new
woman and with the approval of colleagues
and superiors at work, he could "take off" in
his work producing rapid, excellent results or,
at least, the believable promise of them. But
he could also become hyper-sensitive to any
disregard, slight or hint of criticism as
unconscious guilt and anxiety mounted
resulting sooner or later in an explosion of rage
at someone whose good opinion he needed.

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resulting sooner or later in an explosion of rage
at someone whose good opinion he needed.

He would settle into a paranoid feeling that
people who had been friendly were now
against him or, even, out to get him. This fall
into angry, resentful isolation, mistrust and opposition would either severely hamper his work or provide him with all the reasons he needed to take flight into an alternative project or career.

Mr. C saw his father as an angry, resentful, isolated loner who had difficulty in business because he could not manage good relations with people. His identification with this father was the internal nemesis of his restless renewed oedipal ambitiousness that produced the repetitive cycle of overweening, if brilliant, achievements followed by ruination or flight as an angry, isolated loner. The source of his manic-like overweening state of mind was the denial of the inherent impossibility of his wish as an angry, isolated loner. The source of his manic-like overweening state of mind was the denial of the inherent impossibility of his wish to have all of his mother's love with the admiring approval of his father too.

These men carried out acts of self-injury because of their pursuit of libidinal and aggressive pleasures that put them at too much risk. The repetition came not from a compulsion to repeat driven by a death instinct but from an inability to give up the forbidden pleasures. In each there was a negative oedipal compulsion to repeat beyond the pleasure principle that, in his unconscious phantasy, he took from his penis and his father’s, by means of a narcissistic inflation of his own, a denial that can lead to a perversion. It is interesting to note that the strength of the “feminine” defense of identification with the mother was not so strong as to lead to perversion in these three cases; although it was sufficiently strong to foster, in the transference, a repressed perverse anal method of attempting to acquire the equipment from the analyst/father needed to realize the dominant positive oedipal aim. Mr. A was too busy serving the fathers to spend the time required by his studies. Mr. B’s phantasy of having his thesis stolen from him was the reverse of an unconscious Promethean wish. Mr. C’s pride in being “the cock of the walk” denied the sexual potency of other men that, in his unconscious phantasy, he took from them to enhance his own and elevate it to a quasi-romantic intensity.

Concluding Reflections

Reflections give rise to doubts and questions. The most obvious and most fundamental questions are the following: would an analyst, committed theoretically to the death instinct and its effects on early development such as the schizoid-paranoid and depressive positions have analyzed these patients differently? Would such an analysis turn up associative evidence of a compulsion to repeat beyond the pleasure principle? If it did, nothing could more thoroughly demolish my argument that there are some fate neuroses, at least, that do not provide evidence for a compulsion to repeat beyond the pleasure principle. But there is also the question as to what this different evidence might be. Here there is a potential problem with Freud’s view of the “silent” way in which the death instinct works. The silence cannot be so complete that no precise statements of what observations would count as verifications of the work of the death instinct can be made; for, in that case, the theory would be unverifiable. The theory would be more akin to a metaphysical thesis rather than to a scientific hypothesis.

If the clinical evidence is sound, the data has a further implication. In the three cases, a transference neurosis developed. Transference neuroses, in which re-editions of the oedipal constellation are revived, are also cited by Freud (1920a) as evidence of a compulsion to repeat beyond the pleasure principle. But in these cases, the revival of oedipal conflicts in their transference neuroses were not motivated by a purposeless repetition of an earlier painful situation over-riding pleasure seeking. They occurred in an attempt to find satisfaction for reactivated oedipal wishes in the pursuit of forbidden pleasure in the hope that this time it would not be forbidden. It is the task of the analysis to help patients to abandon and mourn the passing of these still forbidden pleasures in exchange for real improvements in their capacities for mature sexual and aggressive pleasures. These cases of fate neuroses, then, also cast doubt on Freud’s argument that transference neuroses provides evidence of a compulsion to repeat beyond the pleasure principle.

Loewald (1971) has raised the question of the relation between obsessive compulsion and the compulsion to repeat. Our present theme adds the further questions of the relation of each of these to the general phenomena of repetitions in well-adapted, reality bound habits in the motivation of which pathological conflicts are not sufficiently involved to cause inhibitions or symptoms.

We should not forget that there is a repetition involved in the action of all instincts because of their regulating principle, the pleasure principle. We have to altogether give up a form of pleasure once known with great intensity and which was once essential to our well being. Freud (1920a, 1933) called it the conservative nature of the instincts. These repetitions do not require a repetition compulsion that depends upon a death instinct beyond the pleasure principle. This conservatism is the tendency of instincts to continue to demand attenuated substitute satisfactions in one form or another of earlier phase appropriate primary drive demands. The dominant exemplar of this conservatism in normal life is found in the paths traversed by the intensifying sexual excitement en rout to genital satisfaction, the need for which repetitiously arises. Libido has a spontaneity that quite apart from current conservatism, motivates periodic seeking after pleasure. When oedipal stage erotic and aggressive drive demands remain overtly intense as a consequence of fixation, a condition for the formation of a fate neurosis, with its repetitive self destructiveness being satisfied, without the need for a contribution from a death instinct internal developmental vicissitudes and external happenings decide whether the conservation of instincts will assume a normal or a neurotic form.
COUNTERTRANSFERENCE, SUPERVISED ANALYSIS AND PSYCHOANALYTIC TRAINING REQUIREMENTS*

Lee Jaffe

Because psychoanalysts have had an ever-expanding appreciation for the many factors that contribute to the psychoanalytic treatment process, the analysis is no longer viewed simply as the receiver of the patient's transferences. When patient and analyst meet in the consulting room, they both bring with them a blend of intrapsychic and external ingredients—including countertransference—that make up the analytic soup. Candidates in psychoanalytic training must contend with even more sources of indirect countertransference reactions (Racker, 1968) than experienced, graduate analysts due to aspects of the training experience itself. The author contends that minimum graduation requirements for supervised analyses are one such source of indirect countertransference. Four clinical examples of control analyses demonstrate this form of indirect countertransference during the assessment, opening, middle and termination phases. These examples are followed by implications and recommendations for: didactic psychoanalytic training curricula, countertransference awareness, supervision of control cases, institute governance policies and procedures, publication of clinical material and future research.

Yogi Berra's paradoxical quip captures some of the complexities that challenge the candidate in psychoanalytic training, whom analysands, candidates, and supervisors do indeed "pair up in threes." The training analyst is likely party to the supervision as well. But a careful look at the situation reveals an additional complexity, yet another presence in the candidate's consulting room. I am referring to the institute policies that regulate control analyses and minimum requirements for graduation. Institutes determine when cases may start. All require some reporting of the progress of control analyses, and all require minimum hours of analysis and supervision without which cases cannot count towards graduation. Some institutes determine which patients can be selected for control analyses, who will supervise, or if a "successfully" terminated case is required for graduation. In questions like the one about whether or not a termination was "successful," institute policies are enforced through the authority of the supervisor. Thus, during the time that candidates are working up control cases and then analyzing them, the analysts, the supervisor, and the institute's policies all participate in the unfolding process of the control analysis. Consider these complexities from another angle. In a paper on the possibilities and limitations of psychoanalysis as a treatment, Freud (1937) included psychoanalysis as a third "impossible profession," along with education and government. He explained that by "impossible" he meant that it is not possible to master the challenges presented to any of these endeavours. Freud's observation raises...
an interesting question, for if psychoanalytic treatment is "impossible" where does that leave psychoanalytic training, an endeavour that embraces all three impossible professions? To become a psychoanalyst, the candidate undergoes analysis and conducts analysis, the candidate is educated, and the candidate's progression is governed. With all three impossible professions collapsed into one, it should come as no surprise that psychoanalytic training is fraught with challenges. The graduate analyst's work is difficult enough, but the candidate in training must contend with additional challenges to analytic work that are endemic to the terrain of the psychoanalytic training situation.

To begin with, the candidate is attempting to carry out an unfamiliar procedure. For this reason, the supervisor is called in to serve as a guide who is familiar with the analytic terrain. Unfortunately, at the same time that the supervisor provides needed and helpful input, the presence of the supervisor introduces a third party into the candidate's analytic work. The candidate is not only affected by the realities of being evaluated by the supervisor and the institute, but also by fantasies of these evaluations; all of these, consciously and/or unconsciously, become part of every control analysis. At times it may be difficult for the candidate to distinguish these fantasies from the realities of the training situation.

While the literature has addressed many complications related to the supervisor as a third party in the control analysis, far less concern has been raised about the impact of the supervisor's governing role (real and/or imagined) over the candidate's progression. Furthermore, the concerns that are raised do not appear consistently in the literature, giving the impression that they are not yet solidly established in the psychoanalytic community. For example, two panel discussions at meetings of the American Psychoanalytic Association took up special problems in the management of countertransference issues in supervised cases (Keiser 1956, Sloane 1957), but not with respect to governance of the candidate's progression. Kubie (1958) felt that the evaluative role of the supervisor must have an impact on the analytic process, but he merely suggested that it was an area in need of further research. Five years after Kubie's suggestion, DeBell's (1963) review of the literature on psychoanalytic supervision did not mention any articles on the evaluative role of the supervisor. Racker's (1968) interest in "indirect" forms of countertransference did not lead him to address directly the issue of the candidates' reactions to supervisors' authority.

Also, in a comprehensive review of the countertransference literature, Jacobs (1999) refers both to Lacan (1966) and Racker (1968) as two authors who have considered how candidates' wishes to please supervisors can derail the analytic work in control cases. In Jacob's review of 98 articles on countertransference, however, these are the only two references he cites as directly concerning candidates and training.

Frijling-Schreuder (1970) touched on the authority of the supervisor in his consideration of how the candidate's own intrapsychic development can be affected by identifications with the supervisor, but this topic was not delineated or emphasized. That same year, Grinberg (1970), writing about problems related to the fact that supervisors do not all share the same philosophy of supervision, took up the analyzing role of the supervisor, but he did not specifically take up the governance role. Oremland and Windholz (1971), in an article about analyzing patients with narcissistic personalities (and including difficulties supervising such cases), mentioned that they began studying one case during a candidate's training and continued to study it after the candidate's graduation; in their words, "after the complicating factor of training was eliminated." While they recognized the training situation as a "complication" in conducting the control analysis, their study did not include an exploration of the nature of such complications. In 1975, Weiss & Fleming described 5 dimensions of evaluating candidates' progression in supervision, but they made no mention of the impact of such evaluations on the analytic work itself. Martin et al. (1978), in an interesting study where candidates evaluated supervisors, found that the candidates wanted supervision to include more discussion of "unacceptable" areas like countertransference and the supervisor's styles of supervision. While this study certainly implies that candidates may be inhibited due to the supervisors' governing role, this subject is not the focus. Frijling-Schreuder et al. (1981) took up the effect of the supervisors' evaluations on the candidate-supervisor relationship, but they did not address the direct effect of evaluations on the candidate's analytic work.

In 1986, Otto Kernberg wrote at length about the ways that institute systems concentrate authority with training analysts, resulting in a pathological idealization of them. In his view, the negative and positive transferences from the candidate's training analysis are readily displaced onto supervisors or faculty, and acted-out in the candidate's supervision, seminars, etc. Since his agenda in the article had to do with institutional problems, he focused on the impact of such acting-out on the institute's organizational dynamics, not on the candidate's supervision. Nevertheless, the potential for such displaced transferences to complicate supervision does exist. One solution that Kernberg proposed for the institutional problems he described was to shift authority from training Analysts to supervisors; but again, he did take up the need to be aware of the impact that such a shift in authority might have on candidates' analytic work with control cases. Later, in 1993, Bandy took up the general idea of a parallel process between the supervision and the control analysis, but the supervisor's evaluative functions were not specifically addressed.

Clearly all of these considerations about supervision are important, yet the literature is inconsistent in recognizing how the supervisor's governing and evaluative functions (real and imagined) impact the candidates' first efforts to conduct analysis. Nevertheless, supervisors give feedback to candidates on the efficacy of their interventions, they evaluate candidates in written reports that influence progression, they participate in committees that oversee progression, and sometimes supervisors' input will determine if a completed case meets the institute's requirement for a terminated case. Thus, it seems important to ask: What is the impact, if any, of these governing procedures on the analytic work of fledgling analysts?

Two authors have recently taken up this question. They conclude that the evaluative authority role of supervisors may be detrimental to the candidate's training. More specifically, Casement (1993) discussed why the supervisor should not be a model of correct psychoanalytic work, and Haaster (1993) described how the supervisor's evaluative role could put the process of supervision out of balance. Both authors emphasize the advantages of reducing the evaluative functions of the supervisor, so they clearly recognize that the supervisor's governing role has a significant impact on the candidate's analytic work, and they believe that impact is counter-productive. More recently, Kernberg (1996), in an ironical article about how institute policies could be optimized to destroy creativity in candidates, "encouraged" institutes to have methods that keep progression policies and supervisors' authority secret; in doing so, he recognized the
importance of these governance aspects of the training experience in the candidates' minds. He not only emphasizes the real impact of the supervisor's authority; he also speaks to the ways the institute's atmosphere and policies can 'foster' the candidate's paranoid fantasies of the supervisor.

The Question of Case Requirements

So far I have focused on the literature related to the governing, evaluative role of supervisors in general; now I want to take up an aspect of governance directly related to the institute's educational policies. Specifically, I want to consider how graduation criteria for training cases, which for simplicity sake I will refer to as "case requirements", can influence a candidate's analytic work—in other words, the impact of the institute's case requirements on the analytic process in supervised treatment.

On this subject less has been written in the literature. Searching through the "Psychoanalytic Index", for example, there are no search categories based on the words requirements, graduation, or perfectionism, and the words candidate, control, case, analysis, and training do not yield any references on the subject of case requirements. The PEP CD-ROM, with its advanced capacity to search the psychoanalytic journals based on specific words, does include most of these search categories, but actual searches yield little by way of articles that directly pertain to the effect of institutes' control case requirements for graduation on the analytic process of control cases.

There are some exceptions. In 1965, Kernberg recognized the combined impact of institute and supervisor's governing roles on the candidates' struggle with temptations to use patients narcissistically to meet graduation requirements. Kantrowitz, Katz, and Paolillo (1990), did a follow-up research study on the stability of psychoanalytic change. They indicated that it was important to keep in mind that the analysis in the study were all candidates at the time they were analyzing the patients. They went on to say that the candidates' experiences, and the presence of supervision and "other training requirements" may have affected their judgement of their work, thereby influencing the results of the study. In other words, even though an exploration of these factors was beyond the scope of their study, Kantrowitz and her colleagues recognized that the institutes control case training requirements could influence both the candidates' analytic work and their perceptions of their analytic work.

Also in 1990, McWilliams & Lependorf reported the impact of institute requirements on a control analysis and supervision; since it involved a candidate with a narcissistic personality disorder, however, it is a special case. In this instance, the candidate idealized a supervisor and asked her to falsify the number of supervisory hours, only to divulge the supervisor when she refused to cooperate. Nonetheless, the candidate stayed with the supervisor long enough to meet other graduation requirements that depended on more supervisory hours with that supervisor. Although it is difficult to generalize from such a pathological case to a candidate with healthy narcissism, it is nonetheless a striking example of the potential impact of case requirements.

There is another interesting consideration concerning this question of minimum requirements for control analyses. Institutes do not all agree on the same training requirements. In a recent, comprehensive study of psychoanalytic training, Morris (1992) describes in detail the variation among the institutes of the American Psychoanalytic Association in policies that govern the number of cases needed to graduate; whether or not a case will count toward graduation; whether or not candidates will need to have a terminated case to graduate; the minimum number of supervision hours needed for a case to count towards graduation; and the minimum required number of treatment hours. Given the lack of literature on the subject, what does it mean that psychoanalytic training institutes around the world do not share uniform criteria for case requirements, even when they are members of organizations like the International Psychoanalytical Association and the American Psychoanalytic Association, that set standards of training? Is the variance in case requirements insignificant?

Still, why is it that local Education Committees can be so careful about changing their institute's case requirements, and why can some training analysts hold a strong conviction that a particular case requirement is necessary, even though other institutes belonging to the same psychoanalytic organizations do not have that particular case requirement? Some institutes, for example, have dropped their requirement for a terminated case, considering the requirement detrimental to the psychoanalytic training experience, whereas others still require it.

Since there can be many ways to understand these discrepancies, and since many interesting questions can be raised about them, there is so little literature about the impact of case requirements on candidates' analytic work? It appears that case requirements have been viewed primarily as criteria for psychoanalytic education, whereas their impact on the analytic process of control cases has been mostly overlooked. This might explain why case requirements are discussed in Education Committees and in other forums for discussing educational concerns, but they are not taken up in the literature as a subject for scientific investigation. Perhaps these case requirements have been viewed as a constant in all candidates' training that does not impact the analytic work itself, or maybe good cases were so plentiful in the past that a candidate's progress was largely unaffected by case requirements. Alternately, it is possible that such requirements, being external influences, have been under emphasized in deference to concerns about intrapsychic phenomena, like those countertransference reactions that are directly caused by the patient's transferences. Or maybe idealizations of psychoanalytic dedication and excellence lead to a dismissal of the candidate's realistic concerns about graduation. In that instance, the candidate might fear that concern with the case requirements would give the appearance of insufficient commitment to the work. Other "unacceptable" motives might include the case requiring the appearance of being too greedy, or too perfectionistic, or too competitive. At a panel on supervision at the 1996 meetings of the American Psychoanalytic Association (Jaffe, 2000), there was considerable discussion of candidates' difficulties discussing certain issues with their supervisors. Overall, numerous comments during the panel emphasized that there are important aspects of the supervisory, training experience that do not get effectively processed by the supervisor and candidate.

Whatever the reasons, there is a lack of scientific literature addressing the effect of case requirements on candidates' analytic work. Furthermore, in researching the literature, I made a serendipitous discovery that also supports the idea that the special factors influencing control cases are overlooked. I discovered that in scientific papers, authors (e.g. Burland, 1976; Bockstoll, 1985, Gauteur-Lery, 1985, Richards, 1981, Shoppe, 1967) often do not mention the fact that their clinical material is taken from analyses performed while they were candidates. To my surprise, I learned this while using the Psychoanalytic Bulletin Board on the Internet to query analysts for papers they had written about their-
control cases. Because I was having so little luck searching for scientific articles about control cases by title, I turned to the Psychoanalytic Bulletin Board. Several analysts were kind enough to take the time to reply to my query, giving me citations of articles they had written using analytic material from their training cases. In reading these articles, I noticed that none of the authors had mentioned the fact that they were discussing clinical material taken from training cases done under supervision and conducted under the case requirements for graduation. As far as I can tell, there is an unspoken community standard that it is not important to mention that a case was done during one’s training, which again disregards the unique properties of analyses conducted as control cases. Since candidates must write up their control cases, giving them ready-made material for publishing, I wonder how much more of the clinical material described in the literature is based on training cases.

A similar observation can be made about Stephen Firestein’s informative book on termination (Firesstein, 1978). Although he explains that the clinical data for his study is taken from training cases, he rarely mentions that the analysts are candidates in the discussion of the cases, it does not come up in the substantive conclusions section of the book, and it is not raised in a section on methodological considerations. In his introduction he notes that record keeping was incomplete after candidates graduated from the institute, and later he explores how changes in the analyst’s life may impact the termination phase of analytic treatment, but the two are never put together. Since these were control cases, it is important to consider several possibilities, for even with the best of conscious intentions, candidates are subject to distinct influences. For example, some institutes require a terminated case for graduation, so a candidate may unconsciously have a termination to complete the training. Also, if a case was very difficult and/or seen at a very low fee, a candidate may wish to ended the case after graduation. And last, because the control case is needed to meet the training requirements, a candidate may persevere with a case that should have been stopped or converted to psychotherapy. The more candidates and supervisors openly consider such influences, the less likely they are to exert a hidden influence on the analytic process of the candidate’s control cases.

With all this in mind, one observation struck me during my own training locally and in my work with the Affiliate Council, the national candidate organization of the American Psychoanalytic Association. Both locally and nationally, as I conducted an informal survey about candidates’ attitudes towards graduation requirements, most candidates spoke with were aware of the progression status for each of their cases. They were also aware of whether or not a case currently counted towards graduation, and they had some sense that their concerns about meeting graduation case requirements did impact their analytic work. They also had the sense that these issues frequently did not enter into supervision, perhaps for some of the reasons cited above. I make these observations knowing that candidates are prone to many complaints about the shortcomings of their psychoanalytic training. As candidates encounter the reality that no training is perfect, and as internal conflicts are displaced onto the training experience from various sources including the training analysis, candidates can “find” numerous flaws in their institutes, faculties, advisors, supervisors, and curricula, as well as the rules that govern their training. Although I am aware that case requirements can be a target for displaced conflicts, I want to emphasize that these requirements are a potential source of countertransference as well.

In what follows I have selected clinical examples taken from my own clinical psychoanalytic training, which was completed in 1995. I have chosen clinical moments that exemplify and highlight the impact that case requirements can have on the assessment phase, the opening phase, the middle phase, and the termination phase of control analyses. First, however, consider the following theoretical ideas in order to put the clinical examples in a conceptual perspective.

Theoretical Considerations

Early on, Freud (1910) was aware that an analyst could be swayed by the patient’s influence on the analyst’s unconscious feelings, but his discussion of countertransference did not extend beyond the analyst-patient dyad. Since that time, however, awareness of the scope of the influences on the analytic process has been expanded considerably. For example, Winnicott (1949) pointed to the analyst’s personality traits as an influence on the analytic process. Racker (1968) devised a theoretical framework for understanding the transference-countertransference interplay of the inner object worlds of both analyst and patient. Buber and Arow (1974) wrote about how another parson in the patient’s life can impact the analytic process; similarly, Bernstein and Glenn (1978) described how the child’s parents and family members can impact the analysis of a child.

More recently, Jacobs (1991, p. 184) summed up the situation as follows: “Each patient brings to the consulting room a world of people, and, in the course of his working day, an analyst will find himself hear about and responding often with strong emotions— both of individuals; chaotic, phlegmatic husbands, rebellious wives, long-winded uncles, stingy bosses, pranksish children, indulgent grandparents, joyous lovers, loyal friends, dull witted colleagues—short, to a cast of characters worthy of a Chekhovian drama. Frequently the patients’ portraits of these individuals contain aspects of themselves and perceptions of their analyst.” In the same book he also touches on the world of people that the analyst brings into the consulting room. More to the point, he touches on the analyst’s relationships to authority figures at the analyst’s institute, and he describes how these issues can impact the analyst’s progression to training analyst status. He makes it clear that the governance role of the institute can become a significant presence in the consulting room, and he describes an instance where understanding that presence was central to understanding his patient. If the progression requirements are important for the analyst’s work, it is responsible to consider they are even more important for the candidate, who is less experienced and in an earlier, more formative stage of professional development.
Of all those writing on the subject, however, Racker (1968) gave the most detailed accounting of the multiple internal and external factors that impinge upon the patient-analyst relationship. In his theoretical scheme, he bases countertransference on complimentary identifications, a process whereby the analyst identifies with the patient's attempts to treat the analyst as one or more of the patient's internal objects. He further divides countertransference into a direct form induced by the patient, and an indirect form, induced by the analyst's relationship to anyone other than the patient, like a supervisor. It is this latter form of countertransference, the indirect countertransference, that I believe should be expanded to include the candidates' case requirements. In such a case of indirect countertransference, the candidate first identifies with the institute's expectations, and then, in part, experiences the patient in terms of the progression status of the case. These indirect countertransference reactions are distinct from direct countertransference reactions, which are based on the patient's inner object world, because they introduce a complication into the analytic process that lies outside the patient-analyst dyad.

Some Clinical Examples

Assessment Phase: Early in the assessment phase of a potential control case, I found myself faced with a young adult patient who stated that he had chosen to go into analysis with a candidate in order to obtain a very low fee. When I inquired into his financial situation, he refused to discuss it. At the same time, his lifestyle seemed to speak of far more financial resources than would justify a very low fee. At first I thought my reluctance to discuss the fee was a direct countertransference reaction to his aggression—that in some way I feared this powerful man who was telling me how much he would and would not pay. I also considered that perhaps I just was green and anxious where dealing with fees was concerned, or that I did not feel sufficiently trained to be worth more than he was willing to pay. Then, coincidentally, a colleague let me know that he had planned to refer a patient who might be a potential analytic case. Much to my surprise, I found myself far more comfortable confronting this patient about the fee issue in our next evaluation session. When I suggested that we explore his feeling that he should have a very-low-fee analysis despite his considerable financial resources, he became enraged and stated that he could not work with me a direct 

requirements I was less willing to explore his affects tolerance and his sense of entitlement, which in retrospect I believe would have made for further difficulties had analysis begun. Although I had a conscious sense of wanting the first case to succeed, I did not appreciate until afterwards the extent to which the case requirements had influenced my interventions. I have since come to appreciate that my initial reluctance to confront the fee issue resulted from the patient's hostility; this produced in me a direct countertransference reaction that was greatly exacerbated by an indirect countertransference reaction based on the external case requirement. Thus, it is important to appreciate that case requirements interact with all the other external and internal forces that impact the analytic process of control cases.

Opening Phase: Now I want to describe a case I took on with some hesitation, in part because the case selection committee had voiced considerable pessimism about the patient's analyzability. Members of the case selection committee felt her chronic somatization indicated a significant problem with affect tolerance, on top of which there were indications that despite being in her late 20's, she still had not separated from her parents. Nonetheless, this being my third case, they were willing to give me the go ahead. At the assessment phase she had been cooperative, introspective, thoughtful, and enthusiastic about beginning an analysis. As soon as we began the analysis, however, the patient's disorganization came, she was aware only of feeling pleased when the analysis resumed, she claimed to have no feelings about the break, except that she did not know if she had time for the analysis in her life. All attempts to explore the disappearance of her enthusiasm fell flat as she offered rationalized explanations. She increasingly mentioned her family and co-workers, and she lamented that in psychoanalysis she felt on her own, as in life.

During the third month of the analysis she continued to request changes in our appointment times, and there were increasing periods of silence during the hours. All my attempts to encourage her to explore what was going on in the analysis were to no avail, and she continued to put her feelings into actions. Since silence had been so difficult for her in the first two months, I tried to be more active, suggesting we look at her thoughts during the periods of silence. I soon realized that she was using the silence to get me to change after her, but, again, she found no use in my attempts to interpret this. I felt increasingly doubtful that this analysis would ever get off the ground. Then, I uncharacteristically allowed her a 20-minute silence towards the end of a session.
where I said nothing. When I finally asked her what she was thinking, she told me she was resting, thinking about food, and planning her menu for the day, after which she recognized that we were out of time, and she left. I understood her thoughts as an expression of her underlying wishes that I be more nurturing, combined with a more overt appearance of indepedence. The next day she came into the session, said that all the silence was a wasted of time, and announced her plans to end the analysis. She experienced all my efforts to explore her wish to quit, including my effort to explore her silent thoughts from the day before, as evidence that I was only concerned with my needs, and within a week she quit.

In going over the events of this failed attempt at analysis, I was struck that I let her be silent for so long in a session when I knew she had a low tolerance for prolonged silences. Although I believe she might have ended the analysis eventually no matter what I did, my silence did seem to hasten it. I recalled a fantasy of mine during one of our sessions in which I imagined that she would quit the analysis just before I had enough supervisory hours for the case to count toward graduation. Although I had considered this fantasy as a direct countertransference reaction to her rageful hunger, her masochism, and her need to be in control, I did not appreciate how my desire to be in control of the case requirements led me to want her to leave sooner rather than later. In supervision I was working on how to promote her capacity to settle into the analysis, and I was discussing how much my helper did not realize that I had unconsciously cooperated with her wish to quit. In this case, I had again been swayed by the interaction between direct and indirect countertransference reaction to the external case requirements.

**Middle Phase:** This next clinical vignette comes from an analysis of a middle aged, neurotic woman who agreed to treatment based on her appreciation of long-standing masochistic character traits that had contributed to numerous self-defeating life choices. Prior to the analysis, and with the help of psychotherapy, she left a 20-year marriage to a narcissistic man to whom she had catered for years. In the first year of the analysis she worked hard to keep a "professional" distance from me. I was her doctor. When there were breaks in the analysis she came back unsure why she was coming to see me, yet it would take only several sessions before she was back in the swing of the analytic work, which was progressing well. Even as she wondered if she needed the analysis, she came to the sessions, paid her bill, and kept up the analytic work between sessions. I was aware that she was keeping a distance from me by questioning the need for analysis, and I was aware of her commitment to the analysis; my experience with the previous case had also made me aware that I was reacting to the case requirements. That is, I was preoccupied with her role in my progression in a way that interfered with an optimal analytic stance.

For example, I felt reluctant to confront her questioning of the need for the analysis for finding me unavailable. In response to my interpreting her view (wish) that analysis would take care of her, she pointed out that it had always felt safer for her to take care of both herself and others. As a child she had grown up feeling like a Cinderella who never got to the ball. From an early age she took care of all the household chores for her mother. As a wife, she took care of all her husband's needs, and as an analysand she tried to minimize the expression of any needs for me. For example, she would come into sessions after troubling weekends saying that she had almost called me, but adding that she would never actually call me. She rationalized not calling me in terms of respecting my need for time away from work and in terms of protecting my need for privacy.

I tried to understand my fear of her ending the analysis as direct countertransference, but the anxiety resurfaced each time we were poised to explore her ambivalence. It was not until I knew that the case had met the criterion for the case requirements, however, that I realized how much my fears that she would abruptly end the analysis were an indirect countertransference reaction to the graduation requirements. Though the analytic work had gone well for that first year and a half, she clearly moved deeper into the middle phase as I felt freer to interpret both the libidinal and the aggressive sides of her fears of intimacy, unhindered by the fear that such interpretations would drive her from the analysis and interfere with my progression. Later she came to appreciate the central role that I and the analysis occupied in her life. Thus, satisfaction of the case requirements eliminated an external source of anxiety that had attached itself to her apparent lack of commitment to the analysis and was interfering with my ability to analyze fully. Given that her case completed all the case requirements I needed for graduation, it was especially primed for such indirect countertransference reactions to the case requirements.

**Termination Phase:** The last clinical example is from the three and a half year analysis of a single man in his early 30's whose premature termination due to a wish to move near his family did allow for a month planned termination phase, albeit not a fully analytic one. It was a challenging analysis, in part because of my incompetence, and in part because of his underlying narcissistic vulnerabilities. To a great degree he maintained a sense of stability by carefully controlling the extent of his intimacy and involvement with others, a lifelong pattern that repeated itself in the transference. This dynamic played a significant role in his desire to terminate prematurely, which I interpreted a number of times and in various ways to no avail. He had never had a long-term relationship with a woman, and although he made his first attempt at a committed relationship during the analysis, he was unable to maintain his commitment to this woman any more than he could maintain his commitment to me. While he never got completely past his need to devalue and to control women, he did come to understand that it was really about women.

This analysis certainly had its shortcomings, and as the termination approached I felt dissatisfied with the outcome, both for the patient and because of my own idealized notions about analytic terminations. Complicating the matter was my uncertainty about whether or not my supervisor thought it was a good ending. Again, for her analytic responsibility, she was critical of my termmi nation. At the same time, however, I "knew" that she was committed to the analysis. Every time I pushed myself to explore her questioning the need for analysis, we got closer to understanding her fear of depending on me, her fear that she would be in analysis forever, and her fear that she might need me only to maintain her commitment to the analysis and was interfering with my ability to analyze fully. Given that her case completed all the case requirements I needed for graduation, it was especially primed for such indirect countertransference reactions to the case requirements.

5 In this case, the requirement was the completion of at least 30 hours of weekly supervision.
psychoanalysis, including termination. Nonetheless, I wondered if my supervisor’s silence on the subject meant that this control analysis would not meet the institute’s requirement for a terminated case. With this issue of the case requirement in the background, the work of the analysis and the supervision proceeded.

Finally we came to the last supervisory session which followed the last session with the patient. With several minutes to go, I decided that I had to know if my supervisor believed that the analysis should count as my terminated case. He said yes, and we agreed that it had been a difficult analysis for a first case. As I left his office for the last time, I wondered why I had experienced such difficulty asking him this question in light of his immediate, straightforward reply, “yes.” I realized that the graduation requirement was a much greater concern in my mind than in his, and that I had misunderstood his silence for a negative response. I had unconsciously assumed that “no news was bad news”, whereas for my supervisor, it had simply not been newsworthily. Based on my incorrect assumptions, I avoided asking him for fear of bad news—news that would have postponed my graduation for an uncertain period of time.

When I went to write the termination report a few months later, I experienced a curious change in my attitude about this case. Whereas previously I had felt very discouraged about the outcome of limited, analytic work, I realized how I had been affected by an indirect countertransference reaction to the terminated case requirement. In hindsight, I can see how useful it was to overcome my inhibition and discuss in supervision the case requirements as they related to the analytic material. I would have felt more positive in the last months of the analysis, and I would have conveyed a greater sense of accomplishment to the patient. Considering his need to distance feelings of intimacy and warmth, he might have had a more affectively genuine experience of termination phase.

Reflecting on my more positive view of the case, I realized how I had been affected by an indirect countertransference reaction to the terminated case requirement. In hindsight, I could see that I did not end supervision with the relief and happiness that might be expected upon completing a control case that met the requirement for a terminated case. More importantly, feeling that the analysis had not counted for me led to a parallel feeling that the analysis freed of some very troubling symptoms and with greater awareness of the nature of his inner conflicts, despite his still being limited by them.

Again in hindsight, I can see how useful it would have been to overcome my inhibition and discuss in supervision the case requirements as they related to the analytic material. I would have felt more positive in the last months of the analysis, and I would have conveyed a greater sense of accomplishment to the patient. Considering his need to distance feelings of intimacy and warmth, he might have had a more affectively genuine experience of termination phase. Whereas for me to think that he might have experienced a difference in the termination phase is speculation, I clearly did experience a difference based on an indirect countertransference reaction to the terminated case requirement.

Concluding Remarks and Recommendations

I have attempted to show that case requirements for graduation can induce indirect countertransference in all phases of the supervised analyses that candidates conduct during their training. This is yet another extension of a tradition of psychoanalysis to expand our understanding of the many factors that contribute to the psychoanalytic treatment process. The analyst is no longer viewed simply as the receiver of the patient’s transferences. When patient and analyst meet in the consulting room, each one brings along a mixture of intrapsychic and external ingredients that make up the analytic soup.

It is essential to consider what the analyst brings to the hour to understand the patient’s
3. Supervisors need to be mindful of one of the underlying conventions that govern "horizontal" peer relationships and "vertical" power relationships; in the latter, subordinates rely on superiors to define the degree of equality and openness between them (Brown, 1965, pp. 47-151). Given that there is considerable organizational research on the ineffectiveness of subordinate initiated communications (Katz & Kahn, 1966), it is important for supervisors to realize that they are in a much better position to promote openness in the supervisory dialogue than the candidate. If they do promote that openness, the candidate's supervisory experience is likely to be significantly enhanced.

4. Institutes' education committees should continue to question and, where appropriate, reform the policies that govern the case requirements for graduation. For example, are there some case requirements that tend to promote more indirect countertransference reactions than useful training experiences? Also, given that case requirements are likely to trigger the most indirect countertransference after a candidate has fulfilled didactic requirements, it would be useful to look at the case requirements that tend to delay graduation the most, like the requirement for a terminated case. Do institutes with a terminated case requirement tend to have students who take longer to graduate, and if so, do those students experience the cases differently when their graduation hinges on the case requirements alone? In the study of institute policies, such as the criteria for a terminated case, it will be essential to include the views of candidates.

5. Authors of psychoanalytic publications should keep in mind that control analyses are subject to influences unique to the training situation. Articles and books that present the supervised clinical work of candidates should say so. In this way, both author and reader will be alert to these special conditions of the analytic work, and the literature will be a resource for understanding them.

6. Given that not all institutes share the same case requirements, and that individual institutes have changed their requirements, there exists considerable opportunity for the comparative study of the impact of case requirements on candidates supervised analytic work. Possible research methods include but are not limited to: conducting national surveys that explore institutes' requirements; examining the history of changes in the training requirements at individual institutes; and, promoting joint supervisor-candidate panels at scientific meetings, especially panels that present differing points of view. Through such investigations, the importance of training requirements as a source of indirect countertransference in the supervised work of candidates will be recognized along with the importance of studying the clinical and educational aspects of psychoanalytic training. Again, it will be essential to include the views of candidates.

References


A PSYCHOANALYTIC REVIEW OF
THE LOVER BY MARGUERITE DURAS
ABENG BY MICHELLE CLIFF

Madhu Sarin

The setting of these two novels are Indo-China and Jamaica respectively. Written by two well-known women novelists based in Paris and Trinidados and bearing a distinct autobiographical matrix, each focuses on the coming to age of their young female protagonists. The heroine of Abeng is Clare, the 12 year old daughter of the Savage family. It is not entirely clear who is the central character in The Lover: a 15 and a half year old girl contending with the raging and bittersweet conflicts of adolescence or the retrospective self-reflection and mourning of a 67 year old woman after the death of the last member of her family of origin. In this review, I attempt to examine how gender, race and class intersect with the developmental vicissitudes of female adolescence in these two novels.

The Lover by Marguerite Duras

Who is the protagonist in this book? The 15 and a half year old girl contending with the raging and bittersweet conflicts of adolescence or the retrospective self-reflection and mourning of a 67 year old woman after the death of the last member of her family of origin. In this review, I attempt to examine how gender, race and class intersect with the developmental vicissitudes of female adolescence in these two novels.

A sadness pervades the book... I've always been sad. That I can set the same sadness in photos of myself when I was small. But today, recognizing it as the sadness I've always had, I could always call it by my own name, it's so like me. Duras' writing takes place in the shadow cast by her father's death when she was a four year old child (and never mourned; we don't even take notice of own death, any funeral, any remembrance). Her older brother's terrifying pathology and dominance in the family as the major male influence, and her mother's depression and manic episodes. All her experiences are coloured by the ubiquitous, archaic, split and overwhelming presence of a pre-adolescent mother image. There's just her (i.e., my mother); my memory of men is never lit up and illuminated like my memory of women.

Duras treats fiction what is essentially an autobiographical reconstruction of her life. The narrative in this novel reflects her self-experience and experience of others: discontinuous, jagged, fragmented and split—and may be not wholly real. This is reflected in the formalistic aspects of her locution when she shifts in a manner, which unsettles, from the first to second person narrative. Difficulties in

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self and object constancy are paralleled by difficulties in the articulation of self-love and object love. This reflects a defect and lack of integration of two levels of identification, with the cathexis of inner reality, for subjective self-awareness, and for the ability to love as two autonomous objects rather than as part-objects of a dual unity. (Bach, 1985). Duras' writing seems to function as a repeated attempt to repair an absence: a stable and internalised sense of self-drawn from the integration of the complex identifications, which make up parental introjects. The story of my life does not exist....there's never any center to it....no path, no line....great spaces where you pretend there used to be someone, but it's not true, there was no one....

**Family and personal history**

From the information provided in this novel, we know Duras is a writer, a beautiful woman with few features, which have been ravaged by alcohol and the aging process. We know little of how her life has gone or the relationships, which have given substance to it. (I have not read anything else by Duras and can only go by what she says in this text). We know she feels that she has never been able to surmount her family and its history and still feels tied to them by invisible bonds of love and hatred. It's as if she feels she can never be wholly separate. I'm still part of the family, it's there I live, to the exclusion of everywhere else. Its in its aridity, its terrible harshness, its malignancy, that I'm mostly sure of myself, at the heart of my essential certainty, the certainty that later on I'll be a writer. Everyone she has ever loved or everything else she has ever done or achieved, pales in comparison: I've never written, though I wrote, never loved, though I thought I loved, never done anything but wait outside the closed door.

She was born in 1917 as the middle-child of a French family who worked in the colonies of Indochina. She had an older brother whom she refers to as the murderer or hunter (possibly 17 years older? - he is 50 years old in 1950) and another brother, Paul, who is two years younger. (The figures do not always add up). The nature of her father's work is not entirely clear from this novel—he probably had an administrative position in the French colonial office. He was posted in Hanoi and then worked in Phnom Penh at what was once the palace of the king of Cambodia. While in Hanoi, he was diagnosed with a terminal illness (there is an allusion to the fact that her mother possibly contracted the same ailment), went back to France for treatment but died a few weeks after returning to Phnom Penh. While in France he bought a home which Duras' mother later sold to pay off her older son's debts.

Her mother, Marie, worked as a schoolteacher and after she was widowed, chose to bring up her three children in Indochina. Her job required her to relocate frequently and at the time the novel was set, she was a headmistress of a girl's school in Saigon and owned land in Cambodia. This was not the only reason the family was constantly on the move: her mother's internal psychic states were marked by a profound restlessness which lead her to keep buying and selling property in different places. Duras refers to her mother's many siblings, brothers and sisters who came from a poor farming family, the Legrands from Roubaix, Picardy in the north of France. Another member of their household was Désiré, their housekeeper, a local Vietnamese/Cambodian woman brought up by nuns and who continued to live with her mother and brother, in the midst of all the to-and-froing.

**Indochina, France, Indochina, France.**

There is little mention of her father or her father's family. He died when she was four, and was not mourned by other members of the family. She does not talk about her father's family either. The protagonist does well at school. She is at the top of her class in French, and is clear that she wants to be a writer early on. Her mother gives up her ambitions for her sons and vests them with her daughter: she wants Duras to go to college and study mathematics. Duras has her own ideas about what she wants to do and does better than her brothers. She is close to her younger brother and joins him in an alliance against the tyranny of their elder sibling and the special place he occupies in their mother's affections. When Duras was 17, she accompanied her mother and younger brother to France after which, although it's not stated explicitly, she stayed on, seemingly to create an independent life for herself, unlike her brothers who eventually returned to Indochina with their mother.

Her younger brother completed school through taking correspondence courses, became an accountant's clerk in Saigon, and lived in his own apartment. He died of heart failure at the age of 27. Her older brother was sent away to study at a technical school in France; he never completed his studies and lived off with their mother, till she died. After that he rapidly ran through the inheritance which Duras allowed him to appropriate for himself. For the next fifteen years or so, he worked as a messenger for an insurance company, his first job. He fell ill, was hospitalised and shortly thereafter, was found dead in his room and was finally laid to rest in his grave by his mother.

From the description in this novel, her mother seemed to have a bipolar disorder with manic features and her older brother an antisocial personality with border-line features. (Kaplan, Sadock, and Grebb, Eds. 1994). The atmosphere in their home was suffused by her older brother's violence (I see wartime and the reign of my older brother as one), her mother's depressions and manic episodes (daily maternal neglect, the sudden scrubbing out of the house, the going off on pony rides, buying sprees of houses when they were financially stretched, the furious beating up of her daughter as an adolescent) and their poverty as white members of a colonial power. Her mother had little frustration tolerance and huge swings in affect: she frequently engaged in litigation all of which she lost because she doesn't know how to keep calm, wait, go on waiting, she can't, she makes a scene and spoils her chances. At one point in the book, Duras says, It went on for a long time. Seven years. When it began we were ten. And then finally hope was given up. Abandoned... My mother is quiet at last, mute. We, her children, are heroic, desperate. This seems to be a reference to some phase of her mother's condition although its not clear what this was. All three children are described as "brooding", this being attributed by those who knew them to the hot sun of the colonies and their poverty.

We know she was married and her husband deported during the second world war. She had a 37 year old son (although the only image we have of him is a thin, arrogant 20 year, a reflection of his mother when she was 15 and a half). There is a fleeting reference to men who have remarked on her beauty and portraits of two women she had known during the war years: Marie-Claude Carpenter and Betty Fernandez. When she talked about any person it was always in reference to herself although not completely explicitly: there is a poignant and desperate tone in her cold, sharp and vivid depictions as she pursued lost, severed or inexplicable aspects of herself in others she describes.
Dynamics

In adolescence, there is a movement towards consolidation of identity while contending with bodily changes and the resurgence of intense sexual impulses. Enhanced hormonal stimulation (principally pubertal) greatly increases the influence of the drive. Minor physical changes generate anxiety and regressive defenses. A common phase-specific defense in girls is a regressive pull which revives her relationship to the pre-oedipal mother (Tyson and Tyson, 1990). The references to the powerful rivers which are carried rushing to the ocean evoke the internal changes taking place inside Duras’s body and psyche.

As Duras begins to make sense of these changes she comes to an awareness of herself as attractive and sexually desireable. This gives her a sense of power in her dealings with objects: her brother, her mother and the Chinese lover. Her relationship with the Chinese lover is partly to enable her to separate from her mother/family. As soon as she got into the black car she knew: she’s excluded from the family for the first time and forever.

A sense of herself as perverse, disturbances in body-image and pre-occupation with the effect her looks have on others are lifelong concerns. The novel opens with changes in her face and body as perceived by herself and others as a metaphor for imbibing her life with meaning and significance and the important role her writing has in providing coherence. Apart from consolidating or repairing the lack of an internal centre, her writing also seems to have a seductive intent: a deliberate creation of an image which becomes a provoking choice of nature. There is a kind of subtle, exhibitionistic revelation which reduces and charms and which serves to divert the reader from Duras’ lack of real empathy with others and her loneliness, vulnerability and anguish. She says to her lover, I’m not to be put, no one is, except my mother. Later in life, Duras drinks alcohol, a common form of warding off intolerable painful affect effects (associated with loneliness, sadness, loss of love and loss of object) and also a form of self-stimulation to ward off feelings of inner emptiness, boredom and disintegration.

The only relationship she describes in detail (apart from familial ones) is the theme of the novel, ie, her intense one and a half year relationship with the Chinese lover in that it expresses her oedipal and pre-oedipal longing towards her mother converging to frightening and intense yearnings. Harsh, archaic, and destructive images predominate with the affection and anxieties associated with such primitive states. There are also references to the sexual attraction she felt towards her older brother who in addition to the favoured hated and envied sibling who received the greatest amount of maternal care, attention and love (which possibly explains the relative severity of his pathology), seems to occupy the intrapsychic space of paternal/male for Duras. Given her brother’s character and temperament, it is impossible for Duras to use him to act as a bulwark against this regressive pull of the pre-oedipal mother.

There are oedipal overtones in her relationship with the Chinese lover in that it had a forbidden, prohibitive aspect to it because of the difference in class, race and age. He was 12 years older than she was—maybe close to the age of her older brother? However, the predominance of pregenital aggression also leads to sadistically infiltrated, polymorphous perverse infantile drive derivatives which contaminate all of Duras’ internalised and external object relations. There is a direct expression of oedipal impulses such as in masturbatory fantasies involving the original parental objects—her mother and her older brother. She is unable to integrate libidoally determined and aggressively determined self and object images which is reflected in maintaining object relations of either a need gratifying or of a threatening nature.

There is also a narcissistic, object-choice: like her, he has lost one parent and experiences parental neglect too, his thin, weak, (androgynous) body-image reflects her own as does his impotence in relation to his tie to his father/family. Their relationship exhibits two poles of a pre-oedipal tie to an idealised object. Instead of being able to internalise these longing into a positive self aspect or express them as an aspect of a loving relationship with another person, or neutralise or sublimate them, they remain a constant source of unfulfilled yearning. They both feel safe in this relationship because they know it has no future and no real connection with each other. She doesn’t feel anything in particular: no hate, no repugnance either, so probably it’s already desire.... she knows, knows that he doesn’t understand her, that he never will, that he lacks the power to understand such perverseness. And that he can never move fast enough to catch her..... Because of his ignorance she suddenly knows: she was attracted to him already on the ferry.... It depended on her alone..... I tell him like the idea of having many women, the idea of me being one of them, indistinguishable.

Duras provokes the lover and teases him about her own future lovers till he treats her with the same rough handling she receives from her mother and older brother. He becomes rough, desperate, he throws himself on me, devours the childish breasts, shouts...

A PSYCHOANALYTIC REVIEW OF THE LOVER BY MARGUERITE DURAS ABENG BY MICHELLE CLIFF

46 SAMISÁA

47 SAMISÁA
This unconscious libidinisation of suffering caused by aggression from within or without replicates early experiences of frustration and the absence of loving care. The intolerable guilt and punishment of self-criticism fluctuates. Usually I have no opinion. I can see that all options are open now. At a later point, she sees no difference between the moral standpoint of Marie Carpenter who collaborated with the French and herself, a communist.

Duras' capacity for experiencing concern and guilt is impaired and her basis for self-criticism fluctuates. Usually I have no opinion. I can see that all options are open now. At a later point, she sees no difference between the moral standpoint of Marie Carpenter who collaborated with the French and herself, a communist.

There is a common thread which runs through the novel as it spans the period of Duras' adolescence, and with time as she evolves from old age and begins to sense she is losing her beauty and power. The lack of firm object attachments, the preponderance of personal attachments which provide mirroring or just enough emotional feedback to satisfy her self-esteem, the obvious concern with personal appearance, grooming and styles, the self-absorption and demand for feedback wanting to be told how beautiful she is (and experiencing a slight when someone says how pretty her hair is implying that she isn't), fluctuations in self-esteem, lack of self and object constancy, no consistent value system, no emphasis on punishment or negative outcomes and depressed mood, all indicate a narcissistic personality disorder.

**Abeng by Michelle Cliff**

The protagonist of *Abeng* is Clare, the 12 year old daughter of the Savage family. The year is 1958, she is approaching puberty and the image of the juices of the sweet, wild, ripening mangos with which the novel opens, evoke the stirrings within Clare as she enters this stage of life (the movement towards consolidation of her identity as she contends with bodily changes and the resurgence of intense sexual impulses). Goldstein, E. (1995) and Erickson, E.H. (1963). Just as the islanders, long ravaged by forces both external and internal, hoard this fruit for themselves and refuse to share it with outsiders, Abeng closes with the onset of menarche for Clare, for whom "there was not another living soul to tell it to."

At another level, Clare functions as a symbol for the historical and social conflicts of the people of Jamaica: the struggle to cope with the developmental tasks at hand is an important transition on the way to maturity and suggests a parallel process the islanders have to undergo at a macro level in order to create a competent community. Fellin, P. (1995). They too have to integrate many conflicting forces as they struggle to construct an identity for themselves as a newly "independent" nation, freed from the shackles of a slave society and the colonial "motherland". Michelle Cliff knits personal and public, individual and social in a seamless, allegorical chronicle in which Clare represents the hope that every new generation holds for the future as she grapples with the burdens of the past.

**The Savage Family**

Clare is "of both dark and light", a "Christian Mulatto girl", born in 1945, to Jack Savage, a middle-class liquor salesman, who traces his ancestry to wealthy English plantation owners and Kitty Freeman, the daughter of poor sugar cane cultivators. She has a sister Jenny, who is 5 years younger. It is implied that her parents' marriage was an outcome of Clare's unanticipated conception. The parents often fight and there is an atmosphere of violence in the home, although there is no outright physical abuse. Clare is sometimes sent to stay with friends and relatives when the tension between her parents escalates. Little is said about her sister, Jenny, except that Kitty has a greater sense of identification with her younger, dark skinned, breath-born child.

Psychological factors inextricably fuse with those of race, gender and class as Cliff creates a narrative in which she depicts and interrogates the binary oppositions and cultural
polarities which infuse the identities Clare's parents have created for themselves as chosen methods of adaptation to their life circumstances. Each family constructs a mythology based on colour, class and religion to protect their identities. Despite the identification adopted by each parent, like others in their culture, neither is wholly "black" or "white". Kitty perceives herself as a feminine, subordinate, black, poor, oppressed, simple, country dweller and Jack perceives himself as a masculine, powerful, white, middle-class, privileged, sophisticated town dweller. At puberty, Clare's personality, self and body are the ground on which these polarities play themselves out, sometimes in counterpoint and sometimes in complementarity. In a sensitive and poignant portrayal, Cliff delineates the complexity and ambiguity underlying these apparently sharply demarcated postures and identifies their defensive aims.

Despite being middleclass and having a black housekeeper, the Savage family share similar patterns of family history, behaviour and adaptation as the more impoverished families on the island. Economic survival entailed that families were often separated and children farmed out to others. Belle, D. (1989) has described some of the gender differences in the construction of social reality and proposes recommendations for how this might be changed for a different generation. As theorised by Pinderhughes, E.B. (1988), culture is a mediator in individual and group interaction, functioning as a coping response to systematically engendered powerlessness which links micro and macro systems.Duras' equilibrium and feedback is maintained in the connection between people's responses to these conditions and the balance maintained in a particular system. Poverty and oppression entrap people in a systemic process that is circular and reinforcing. "Victims" of poverty and minority oppression serve as maintainers of systemic equilibrium and timezone realism: they develop a high tolerance for conflict, confusion, contradiction and paradox. Kitty and Jack pretty much fit the stereotype in Cliffs depiction of gender differences in adaptations to poverty and racism in Jamaica. The men cope by living for the moment and anaesthetising the painful reality and drudgery of their daily existence with ganja and alcohol; they displace their need for intimacy and security by womanising and gambling. The women seek to fulfill their emotional needs through their role as caretakers of the family but are driven by poverty to look after rich people's families. They transform their sorrow, loss and anger into guilt and self-blame and try to expunge their sense of inner "worthlessness" through church rituals.

Although the motif in Abeng is the "second" separation-individuation of Clare's burgeoning adolescence, reverberations of different kinds of separation resound through the novel. Mahler, Duras and McDovitt, (1980) and Goldsclin, E. (1955). Jack, "Boy-Boy" Savage never sees his mother who leaves the island to make good. After he is born, his mother sends him back to the island to be brought up by his aunt (her sister) and uncle where he is neglected as they spend their time on the racetrack, socialising and drinking. Boy retreats into a fantasy world as a child and as an adult, spends time at the racetrack himself, counts women, drinks and abuses from job to job. He spends his time immersed in dreams of a fabulous mythical past and waits for an equally glorious future, which will magically occur through divine intervention, not through actual accomplishment. He uses the defences of denial, compensation, rationalisation and idealisation. Freud, A. (1966) and Goldsclin, E. (1955).

Kitty's father, now incontinent and senile is a "shadow-figure" in the background, like many other men on the island. Kitty, resembles her mother, Mattie, who keeps her experience of sorrow to herself; both have learned to displace their own sorrow and pain by empathising with those in need outside the family circle using the defence of altruism and control their intense dependency needs by withdrawal, remoteness and isolation. Gilligan, C. and Wiggins, G. (1989), draw attention to the costs entailed in becoming remote and cold when genuine attachments fail, associated more currently with girls and women. This is a generational pattern of dealing with object-loss and loss of object love: Brenner, C. (1973). Kitty's silence is a weapon used against her husband and her children: a withdrawal of affection and a device to protect herself from disappointment. With this history in both parents' families, it is not surprising that neither Jack nor Kitty can be available to Clare in the appropriate way, at critical moments in her development, since they do not have much in their own experience to draw upon. Clare too, learns to keep things to herself.

Clare

Although Clare favours one parent - she has been designated her father's daughter by everyone in the family and enjoys a special relationship with him (she is his light-skinned, tall, "golden", "Aztec princess"), "visibly, she was the family's crowning achievement, combining the best of both sides." Clare has successfully circumvented previous developmental stages as theorised by Brenner, C. (1977). Mahler, Duras (video) and Mahler, Duras and McDovitt, Duras (1988), Erikson, E.H. (1963), Faget as quoted in Miller, P. (1959) and Bowlby, J. (1988), is evident in the achievements she brings to this stage: she has reached self- and object constancy and has clear representations of self and other, has good object relations, a well defined ego and superego, has basic trust, is autonomous, takes initiative, is industrious, is attached and affectionately attuned towards others, is aware of her own internal states and has resolved the conflicts at the oedipal level appropriately (when her parents fight, her fantasy is that her father will kill her mother and she will be held responsible). The developmental task now facing Clare, is to integrate the complex identifications which make up her parental interests into a stable identity structure and make sense of her self and environment, both cognitively and normatively.

The characterisation of Clare in this novel, aptly fits the standard definition: at the end of latency and the beginning of adolescence, enhanced hormonal stimulation (particularly adrenal) greatly increases the influence of the drives. Minor physical changes generate anxiety and regressive defences; and levels of self-object organisation and the return of negativism are common the malady and recognisability, characteristic of latency age children's needs. As an attempt is made to separate from parental object, there is a parallel movement in the formation of peer groups which involves changes in superego function. Tyson, P. and R. Tyson (1990). Clare has begun to experience the physiological, anatomical, and hormonal criteria of sexual maturation: pubic and underarm hair has appeared along with a newly intensified sex drive. Both she and Zoe are mesmerised by the newspaper articles about the 5 year old Peruvian girl who gets pregnant and the disease which turns girls into boys. It is as if their bodies are in the grip of some mysterious force over which they have no control and which will change their lives totally. They feel that their bodies might not belong to them at all.

A common phase-specific defence in girls is a regressive pull which revived her relationship to the pre-oedipal mother. There are references right through the novel to
Clare’s longings for physical intimacy with her mother: she wants to suck at her breasts, she wants to be alone on a desert island with her without her father or sister present. When Clare masturbates it is with fantasy material concerning her mother; when she feels attracted to Zoe as they lie naked near the river, she senses it has something to do with her wishes directed towards her mother. There are references to her mother’s church which seem only full of women, the authority of the male clerical dissolving. Oedipal and pre-oedipal longings towards her mother converge into frightening and intense yearnings.

Boy’s character and temperament make it difficult for Clare to use her father to act as a buffer against this regressive pull of the pre-oedipal mother; he doesn’t have the necessary strength or authority. He is frightened by the shark and never returns to the water again; he fails Clare when she wants him to show some bravery when she confronts him with a hypothetical question about his possible actions if his family was in danger and disconnects her from his world. When she looks to him for courage in resolving ethical dilemmas concerning racism and anti-semitism, he is also a lingering egocentrism in his thinking which is characteristic of this stage of development.

Clare is ambitious for herself but does not know which parent to turn to as a role-model: both have dealt with the vicissitudes of their lives in ways which are disappointing to her. Her mother, Kitty, relinquishes her aspiration to be a teacher and run a school after she gets pregnant (she wants to go further than Mr. Powell and develop a history from a vantage point that reflects the experience of the islanders, not their colonial “masters”) and settles for the accepted social norms for women: marriage, family and compliance with her husband’s wishes. Kitty is restrained with her daughters—she doesn’t believe in too much physical emotion. Clare can sense her mother’s defensiveness about her own dependency needs and feels it will hurt her mother to be asked questions about pregnancy and breastfeeding. Freud, A. (1966). Clare also learns to associate passion and object-connection with violence because the only times her mother expresses intensity of feeling is in violent fights with her husband.

It is her father who is instructed by Kitty to respond to Clare’s enquiries. His father is brutal in his responses to his daughter about the biological processes associated with female sexual maturation—women are likened to animals or else their pain and suffering in childbirth becomes a reason to respect the Duras. This reinforces other cultural reinforcements of women’s masochistic Duras. Children turn increasingly to their peers in middle childhood to learn about social roles and rules as they begin the process of separating from their parents. (“Childhood” video series, Amongst Equals). Clare eventually turns to Zoe to help her understand the changes that are taking place inside her body, since Zoe has been able to seek and learn from the help provided by her own mother. Zoe helps her deal with the reality of differences in class and colour in a more realistic way than either of her parents, firstly, when Clare unthinkingly adopts her grandmother’s attitudes and refuses to let try on her bathing costume, and later, in the incident when Clare accidentally kills the bull. Clare’s father disapproves of her in other ways too: she feels an overwhelming sense of loss and betrayal when she actually visits the “great house” of her father’s ancestors and confronts the reality underlying his father’s grandiose idealisation of the Savage family’s past. The great sadness she associates with the house is what she senses lies beneath the surface of her father’s day-dreams and fantasies. She is beginning to see her parents as independent and real objects. Goldstein, E. (1995) and Freud, A. (1966).

As Clare attempts to separate from parental objects she develops a friendship with Zoe, wants to play with boys her age and has different interactions with her schoolmates. Clare wants to understand who she is and where she fits in. (Video 6, Amongst Equals). As a child she had to rely on statements from the grown-ups because she was not yet equipped to judge herself. When Claudius, a classmate dies of cancer and she turns to her grandmother to deal with the reality and pain that people of her own age, children could die, her grandmother is stern and dismissive: Clare puts Claudius’s death out of her mind and deals with it by denial. Adults begin to assign her gendered roles and her movements are restricted: she is not allowed to play with boys and she can never wander about alone. Clare has a clear sense of her gender identity although she questions existing gender roles. Honig, A. (1983). Her female sexuality becomes a source of potential danger: she is warned that she can be raped and/or “ruined”. She begins to question the roles associated with gender when she is excluded from engaging in the same activities as boys her own age, like Ben and Joshua. This makes Clare feel separate from the older women: the boys had the power to hurt her because they were allowed to do so much where she was not. The older women could not understand these feelings in her she can never tell these women what had happened in the kitchen when she wanted to share the boys’ power and power, or explain to them how it made her feel. Later, when she decided to go hunting for the wild boar and maybe eat it “private”, it is a primitive, oral way of intuiting, “taking in” the “privacies” that are denied to her—“lek on de mulhorn of de hog.” Freud’s concept of penis envy can be considered in this light: given the subordinate position of women in many societies, it is not remarkable that the source of libidinal potency in men is enviéd. This is not to disregard that women’s sense of their own body-image is formed on the basis of their own unique anatomy. Brenner, C. (1973).

Clare begins to develop a moral sensibility of her own and question the ethics laid down by her parents and society. Gilligan, C. and Wiggins, G. (1983). In trying to make sense of the Holocaust she wants to understand why Anne Frank was killed and why Kitty Hart was saved. Cliff suggests this is Clare’s way of confronting the reality of racism and privilege in her own society at the same time as figuring out her parents’ coping/defensive mechanisms.
The standard response she receives from the adults is either a denial of reality or an attempt to blame the vicDuras. She becomes aware of the contradictions in her parents' responses to her questioning, which reflect their internalisation of conflicts in society. She looks to her father for conceptual guidance concerning right and wrong, and to her mother for the emotional and empathic dimension in the moral sphere. She wishes her mother was more like Kitty Hart's mother rather than Anne Frank's and fears that her mother has not equipped her to deal with dangerous situations. She confronts the differences between herself and Doreen, both scholarship girls. But when Doreen suffers an epileptic fit she is asked to leave because she is black and poor. She tries to understand why the darker-skinned girls draw back from helping the poor, black woman who seeks help, and is not yet able to analyse their attempt to defensively draw back from an identification with her.

Cliff describes Clare's situation. "She was at that point at which some children find themselves—when to move forward is to move away. She was not ready or prepared yet, later she might be able to bring it off. Right now, she felt she was doing something wrong...it became connected to a forbidden act. "It is not easy for Clare to take initiative because of the way her parents and other adults react to the incident in which she accidentally kills her grandmother's bull. Clare is aware of the multi-determined and complex nature of her motives. In the face of the adult assault and condemnation of her actions without any attempt to seek an explanation, it is sad that Clare begins to lose sight of the rightness she feels when she starts out as well as the accidental nature of the outcome. Instead she begins to internalise the adult condemnation and the process of self-blame and self-hatred is reinforced. She was attempting to express her independence and feel a sense of her own power. She wanted to show her mother that, like her, she was also comfortable in the country. There are sexual overtones of the negative oedipal in wanting to thrust her power to her mother, and a pre-oedipal element from the practising period of the rapprochement period'. I can do it on my own. She was scared when the cane-cutters came across the two naked girls: after all, she had been taught it was shameful to reveal her body, and the fear of rape had been drilled into her. She was also angry that he had violated the intimacy and privacy that she and Zoe had shared. Eventually, when she blames herself for doing something wrong, in part, this must refer to the unconscious guilt she experienced at the forbidden pleasure of that moment. She leaves Zoe out of the picture because she wants to protect her. Zoe makes her aware that because of her class background she will be treated more harshly than Clare. Instead of commanding Clare for her courage and initiative and her concern for a friend (it must have been difficult to fire the second bullet which killed Zoe), the adults unite in their negative judgement of her action.

Since Clare has violated the social order, she is sent by her parents to Beatrice Phillips to be "resocialised" and become a "proper", "white" "lady." Will she comply?—will she be "resocialised" and become a "proper", "white" "lady." Will she comply?—will she remoVe herself like her mother or disappear into a fantasy world like her father? "We hope not: we hope she has sufficient ego strength and capacities to take on the conflicts of race and class and gender, and resolve them along different lines from her parent. It will be difficult for her, since all those who don’t "fit in", the two gay men, Ms. Stevens who has a child with a black man and wanted a career instead of marriage, Mad Hannah who refused to accept the stigmatisation of her homosexual son, all either commit suicide or are designated mad.

Clare's silence at the end of the novel can have two different meanings—it refers to her sense of loneliness and isolation. She is silent because no adult can understand her struggles or hear her particular individual voice and she has no peers, like Zoe, to turn to. But her silence also conveys a sense of nurturing the forces that are burgeoning in her—she enjoys the "sweetness" of her menstrual blood. She has not entirely internalised the negative values associated with her feminine identity and she still has a sense of the strength dormant in her.

Bibliography


With the holistic approach in medicine, understanding mind-body continuum became a must. Thereby psychological factors are included in medical treatment. Due to stress and psychic conflict several physiological systems like endocrine, immunology etc gets affected. These in turn, result in what are called “psychosomatic symptoms”. Therefore, till the psychological factors are put right all the correct medical treatment does not get the cure. Hence, psychosomatic medicine, has become an inevitable part in all medical condition.

Working as a psychosomatic specialist at The Gujarat Research and Medical Institute, Ahmedabad, I had maximum opportunity to work with cardiac cases and their psychological imbalance. That is, the conscious or unconscious anxiety and guilt. As it is well known, people very seldom come for treatment of their psychosomatic symptoms. Actually psychosomatic is a defense against deeper problems. D.W. Winnicott pointed out “This dependence phase will be very painful for the patient….. There is no other way. There is another way….(they)will break down into psychosomatic illness, which produces the much needed nursing but not the insight or the mental care that can really make a difference”.(Winnicott, 1965, p.253)

Most of my experience has been with cardiac cases. However, there have been few borderline cases with whom I had an opportunity to have deeper analytical therapy. It came to notice that during treatment the psychosomatic existence came into viewing. According to Winnicott’s theory of development, infant development during the holding phases has the following living realities: primary process, primary identification, auto-eroticism, and primary narcissism. Associated with this attainment is the infant’s psychosomatic existence. The patient with whom I was working, Miss R exhibited all the traits but the most noticeable point was her attainment of psychosomatic existence. This became overt in the fact that her sensory sensitivity came to be expressed in a marked degree. Thus, her rubbing her face, which resulted in big pimples, became less and less as she did not rub the face and irritate the skin. When this was pointed out she further said that she gets pimples anywhere on her body, whenever the skin was rubbed and irritated. The marked proneness for infection and low immunity power changed, and the skin surface took its normal function.

Another area where Miss R showed improvement was her ability to have sensations of appetite and taste. All these were not the attainments for which she came into therapy, but it was more of a psychotic pathology for which it was the mother who had brought her for therapy. In her daily life she was showing anxiety such as, marked fear of losing her mother, therefore would cling to her throughout the day and even at night. Such a dependency and anxiety of losing the mother had its roots in her infancy, when she would not take the milk bottle and suck. The mother had to distract her attention by keeping her
exposed to road traffic. There are other factors that contributed to such a lack of mother-child "unit status". This had resulted in psychosomatic "indwelling in the soma", as Winnicott would say. With further development there comes into existence what might be called a limiting membrane, which to some extent (in health) may be equated with the surface of the skin, and has a position between the infant's 'me' and his 'not-me'. Therefore, the infant comes to have an inside and an outside, and a body-scheme. In this way, meaning comes to the function of intake and output; moreover, it gradually becomes meaningful to postulate a personal or inner psychic reality for the infant.

The mother who was not in a position to maintain the unit status caused and maintained a "muddle" in the consciousness of the infant by exposing her to the outside and having no clainty between what is inside and outside. The skin acting as a limiting membrane to all the abnormality further, this patient had a very specialised feeling about "me" and "not me". In favourable circumstances the skin becomes the boundary between the me and the non-me. In other words, the psyche has come to live in the soma and an individual psycho-somatic life has been initiated. The establishment of a state of "I am", along with the achievement of psychosomatic indwelling or cohesion, constitutes a state of affairs, which accompanied by a specific anxiety affect that has an anticipation of persecution. This persecutory reaction is inherent in the idea of the repudiation of the 'not-me', which goes with the limitation of the unit self in the body, with the skin as the limiting membrane. In psychosomatic illness, there is in the symptomatology an insistence on the interaction of psyche and soma, this being maintained as a defense against threat of a loss of psycho-somatic union, or against a form of depersonalization.

In the present case, Miss R had an intense anxiety about undressing and taking a bath, because she had the fear that with the bath her body would be washed away.

Her narcissistic demands could never be satisfied, and she had this much intelligence to know that others are not interested in her nor are going to give her recognition or satisfaction. This awareness made her withdraw from all contact with others except the mother. Because of this withdrawal she would be mostly in a depressed state of mind. However, with the mother, whenever she got gratification she would show her pleasure and excitement. These swings were diagnosed in the psychiatric terminology as "Bipolar depression" and were given drugs accordingly. This modified the condition to some extent, but could not cure. Hence, after several years of psychiatric treatment her mother brought her to the clinic for psychotherapy as a trial.

With psychotherapy, it became evident that there was a weak attachment to the object and the object libido was easily withdrawn on to the self. This type of shift has been noticed by Freud resulting into hypochondria, which he equated to the anxiety of the transference neurosis.

Case Study

I would like to illustrate the above points by giving two short case vignettes. The first case is of a lady who came for psychotherapy with a problem of migraine headache. She had been suffering from it for the past several years. Her family dynamics showed a rather docile mother and a very dominant father. As a child, she was neglected and therefore she lived in her own fantasy world. She was a good student therefore nobody bothered about her. Coming from an affluent family her basic needs were taken care of. The conflict started during the adolescent period with gender identity. Her individuality, which was strong, was in conflict with the cultural model of femininity. As we know, it is the frustrating parent that is internalized more than the gratifying one. This resulted into a greater masculine identification. Even as a child she was rebellious and would give back verbally to the parents. A major conflict did not occur as she went abroad for higher studies. However, the issues could not be pushed away or could be kept suppressed for long since marriage precipitated the conflict and her migraine was the cause for coming for psychotherapy.

She went through deep trouble in her married life—troubles about her own son, and deep depression. Fortunately, with the help of therapeutic insight she achieved growth and success. Her relationship with the father has remained acrimonious. She on her side has developed indifference and distance. It is the father who even now tries to dominate but cannot, as she is fully independent and has her own family.

The second case is of a man—well educated, well settled in business, also having an adjusted family life. His psychosomatic symptoms appeared during therapy. He came for analysis as he was himself not happy with his aggressive outburst. He belonged to a middle class family. His father was an Ayurvedic practitioner of good repute. He had a dominant mother while the father was more mature and had warm relation with them. They are four brothers amongst them, he is the youngest. As he had good relation with the father, he took up his father's profession, though not as a practitioner of Ayurveda, but as a manufacturer of Ayurvedic medicines. Here, he showed his creativity and innovations by introducing modern mechanical devices and tools in manufacturing the medicines. His father gave him a lot of importance and he became his father's ideal son. Still the difficulty was that he was not the object of love of the mother. He rebelled against the mother whenever possible. For example, he married against the choice of his mother and though living in the joint family, he would side with his wife and oppose the mother. All this on the surface showed his marked masculinity but under cover there was a feeling of frustration and desire for the mother's love.

As we have noticed earlier, it is the non-gratifying mother who became the deeper identified one. In the psychodynamically oriented psychotherapy, this unintegrated femininity came to surface. The cavity erositism caused psychotherapy, this unintegrated femininity came to surface. The cavity erotism created and occupied the patient's attention. As first, he noticed that there would be sensation in his stomach of acidity. This burning sensation in his words "Some thing like hot oil in the stomach", it did not go for deeper resolutions of his identity problem and left the therapy with symptomatic relief. He had other psychosomatic problems but he would tackle them by his own self, in a self-analytical way.

Discussion

Clifford Zinyke says, "It is well known, that in depressive hypochondria with delusional body disorders—such a belief that the body is rotting or failing to pieces—is not uncommon in severe psychotic manic depressive depressions and in the involutional form of that disorder". Otto F. Kernberg notices that withdrawal of object libido is also occurs in normal conditions like sleep or physical pain and illness. He suggests that hypochondria reflects such a withdrawal but in contrast to the normal withdrawal, withdrawal in hypochondria, schizophrenia reflect the extreme of such withdrawal of the object libido. The question of hypochondria raising the problem of withdrawal of libido made Freud show his great clinical intuition in locating hypochondria closer to psychosis. Hypochondria predominantly based on the psychic primitive body scheme.
In my work, the type of body scheme I came across was more of a primitive psychotic type. Here, I believe there is good reason to notice the socio-cultural attitude with all its philosophical background. I mean the dichotomy of body and mind is deeper than what we see in the west. Hindu philosophy and in general religious mentality body is considered not as “me” but as “not me”. David Rosenfeld has also noted those patients functioning with a primitive psychotic body scheme have lost the psychological notion of skin and above all, feel that their body scheme is a vital fluid, sometimes conceptualized as blood, contained by a weak membrane or wall. This is a way of expressing through the body scheme how the patient’s ego becomes de-structured, liquified. These two schemes are present in an alternating and mobile way; they are not static and rigid modes of mental functioning but rather alternative prevailing conceptions of one’s own body image. (D. Rosenfeld, 1982).

Now that we know and accept the body-mind continuum even medically, we have come to correlate expression of anxiety through body sensations. We will not here go into the different varieties of body symptoms like hysterical conversion symptoms, body language, organ neurosis, hormonal and vegetative dysfunction etc. Nor are we primarily interested in discussing their variations of dynamic factors.

In the case of hysterical symptoms, there is an unconscious fantasy, but in psychosomatic symptomatology there is no such unconscious fantasy. The impulse from the unconscious breaks through the ego barrier somewhat similar to psychosis. Before we go into the dynamics of this process, it will be easier to understand when we have taken clinical illustrations. In actual practice, we find migraine headache much common among women and gastro-intestinal problems with the males. The tension and anxiety, which is responsible for such an outcome is because of lack of integration and guilt around “bisexual identification”.

Identification and integration are not only based on individual interactions but also is effected through socio-cultural values. Some of the specific factors that go into the formation of superego have their roots in religion and philosophy. What I want to focus attention is on the general attitude that has developed because of the religious philosophy is the demarcation of body-ego and mental-ego. Whatever the importance this has in the development of mind and spirituality it has reduced the importance of body cathexis. From a clinical point of view, this has resulted in poor integration of body image in a strong self-system. In practice, we therefore find an easy tendency to slip into psychosomatic symptoms. In addition, this has generated obsessive characterlogy. Of course, the advantage is to defend against full-blown psychosis. These dynamic considerations have a lot of importance from the therapeutic point of view. Here, we see the need of making “upward interpretations”.

Conclusion

The first conclusion that we can make is that psychosomatic outbreaks helps the patient to avoid a full-blown psychotic breakdown. As in most cases they get what they need the most—help and support, but cannot attain relief or insight. This is were Ayurved medicine appears to be somewhat suitable. It is something supposed to be taking a long time for cure. Secondly, in this manner of treatment a stable interpersonal pattern of interaction can be established.

References


According to the guidelines for clinical presentation followed by the IJPA, I'll try to present you a group of four sessions of the second year of a four times a week analysis, with the aim of carrying you into the sessions as I experienced them, consciously, at least.

The humour of this person was, actually, mixed with a variable quantity of sarcasm, whose relative abundance or scarcity conferred a pleasurable or annoying quality to her utterance. Nevertheless, it was for both of us, a necessary first step to approach painful areas of her life, even if in a split manner, reducing the sense of failure of her entire life: an otherwise unbearable awareness!

From the very first encounter she declared her need to utilize humour and its variants to lift the weight of her life. She likes mostly the so called English Humour as in the example reported in the George L. Christie's paper (1994) quoting: "Winston Churchill, during a speech in the House of Commons once said of Clement Attlee, 'Mr. Attlee is a very modest man—and, he has much to be modest about'.

I would like to stress the abrasive, wounding effect it conceals with a most appreciated virtue.

The sequence I choose to share with you, seems to me to be representative of the above considerations, with a special emphasis on the dynamic relationship among sarcasm, humour, unbearable failure and meaninglessness.

Case Presentation

This patient got my name from a training analyst of my institute who is a friend of her husband. She declared from the start she knew many analysts and from her point of view many of them are quite in need to be cured more than able to cure. (An Italian motto says: "The good day is announced by the morning").

Winfred was 48 years old when we met the first time (I was 44), married eight years before with a man twelve years older, divorced with two sons, now 40 and 42 years old. In the previous years of marriage the patient tried unsuccessfully to have a baby even against the scarce enthusiasm and determination of the partner. Outwardly Winfred is a resolute, self-asserting person to the point to be quite provocative. Frankly overweight and in bad shape, her lineament revealed a hint of a past prettiness. She is the only daughter of a couple of parents she dared to define as two mentally ill persons. The father was a journalist expert in classical music, who worked mainly at home but always closed in his artistic, musical world; the mother, a clerk working as personal secretary of important congressmen, was completely unreliable as parent even if more close and warm-hearted. The patient till the age of five, was reared by the maternal grandparents in their large flat where they all three lived till the age of five. She especially remembered the affectionate humanity of her grandfather in whose arms she found refuge, the grandmother was less sensible to her needs but at least was able to cook much better than...
From the age of nine she cooked for the family replacing the inept mother after she was hospitalised for a month for a serious illness. She feels herself as the only parent of two handicapped children. The arrival of her menses at 9 years of age caused an hysterical reaction in the mother-in-law and a substantial malaise, on her father. Her intense sense of holding on to, apart from the grandparents of the first years, was always the pearls, the schoolmates and her cat.

She came into analysis as a consequence of a terrible nightmare which forced, literally, her to seek help. The dream was an announcement of death!

A mighty and frightening professor of my faculty warned me: “In five years you’ll die in Milan!” Terrified, Winfred asked if there was any way to escape from such a fate: “May I try to supplant?!” “I don’t know, you may try!”... was the bitter reply.

FOUR SCENARIOS

Finding your own poetry

I’m overwhelmed... I’m just coming from the dentist!

A: how do you do?
I have nausea from a bitter medication he put in my mouth... I feel an increasing itch in my throat (she starts to gasp as strangling... I felt startled and knowing her difficulty of producing enough saliva due to Sjogren’s disease, I decide, as other times in similar occurences, to bring her some water).

After having drank, relieved, she continued:

The contract went fine, (yesterday’s session in Milan!) Terrified, Winfred asked, if there is need of a holding and soothing relationship.

Forgetting her measure of Philosophy, her relationship lasted three years but ended abruptly with various psychosomatic sequels, in particular a chronic vaginitis and dermatitis. Actually she always suffered from allergic autoimmune disease starting from a severe paediatric asthma and ending to the present Sjogren’s Syndrome, diagnosed six months before meeting me, that consists in an increasing depletion of body fluids such as saliva, tears, vaginal lubricants, and arthritis. She uses artificial tears already from and after that. Winfred fell in love again... Ten years ago... She thought... but another duty!

I think about the anger she feels I have to support the wish of her husband when he did nothing or not enough to help her about having a baby.

A: What would you like (Instead of this)?
To disappear! (with an increasing joyfulness to roaring laughter) Taking the first flight to Timbuctu (I think about Edgar in the Dalmatians) then, after three months, I’ll send you all a postcard from there ah ah ah...

(Author’s music defence, I think) Moreover I’ll invite Kepler to come with me... Kepler, my dearest, let’s escape together.

A: (Is she thinking about a romantic reconciliation with her?) Neurotic scenery.

Yes! I need confirmation instead of avoiding and have no courage! To tragic is a pleasure but I’m not sure that writing will give me a visibility, a confirmation?

A: Hmmm... you could get pleasure at least.

Oh yes... I want to end the book on Kepler, than save energy and investment from the project of a new museum if there are difficulties again, and take care of me.

A: What comes to your mind on this (taking care)?

Well, I can’t think of, my mind got blank... wait a moment please! (As other times when I take her by surprise she freezes, moreover she seems to be not easy in touch with the internal.)

Silence... some minutes.

A: What are you thinking?
A mental image came to me: a long rolling list of duties reaching the floor.

A: As soon as you try to concentrate on yourself, a list of duties appears!

Exactly (quite surprised)... Paola, my close friend, comes to my mind now. She is in love with her Head of the clinic, every time I have a conversation with her she fills me up with descriptions of the most extraordinary details: the way he looked at her that day, how he moves and so on (more ironic than sarcastic). I would have reacted in a completely different manner but I have no time to waste... Nonetheless, she has found her poetry: the one that makes her happy. What really matters is this: she has found her own poetry!

A: and not a duty list!

With duties for sure you can't write poetry. (I translate to myself: to act poetically/to fall in love/to experience emotional life).

A: Desires are needed, maybe!

Yes, of course.

Wednesday
The lost capacity to fall in love

What a weird thing happened to me, today! My colleague and friend of the museum, Luigi, told me today that he met another fellow of the faculty of Mathematics who said to greet me at the first occasion since he remembered me as a real beauty... 20 years ago. Well, I barely remember who he is but in any case who cares? After all these years.

(If feel quite curious on reverse, she is now such a fat and ugly woman while 20 years ago...?)

A: so you were quite a beauty 20 years ago and what happened at that time, what was your life like?

I was a pretty woman, I aroused the attention of men but I didn’t feel so, I mean, it didn’t suit me. At that time I was always busy with the university trying to get a position there and had a love relationship with a Sicilian colleague who was a student like me. (It’s amazing, I think, how she dives into the past recalling emotions and memories without the strong resistances she showed at the beginning of our relationship. At that time she literally refused to talk again about parts of her personal history if already mentioned in previous sessions, accusing me to waste time in repetitions or worse to not having listen to her with the necessary concentration.)

I had just moved from my family house to live alone for the first time and he came with me but actually from the start he maintained a parallel secret relationship with a married woman but I discovered it only after two years. It was a tremendous blow but I recovered rapidly, as you well know, and cut off all the bonds with him. He tried for years to rescue the friendship at least but I was inflexible. You know how tolerant I am, but when I cut off is forever. I drop a nuke on it and nothing survives! (not to mention the fall out on her self esteem, I think) In a previous occasion we discussed about the self damage of such a massive rage! Terrific nuclear forces are released!

A: I wonder how it could have been possible. Didn’t you have the least suspicion, previously?

At that time, I must say, I knew nothing on how to manage with emotions in love relations and it not surprises me too much with the kind of example I got from my parents: I had been always out of their sight... not seen! Therefore with that man, the Sicilian, whether he was there or not there with me, seen or not seen, for me then it was quite normal... it went like usual.

(Feel feel the pain... she was not accustomed to be seen... to be loved...she can't deserve to have it... she wasn’t worth while not even as a pretty girl!)

After this painful event I suffered from recurrent vaginitis (plus generalized dermatitis), that several different gynaecologists tried to cure unsuccessfully with those topical applications, I hate. After many months I resolved to ask for a consultation by one of the leading dermatologists in Italy. He became a good friend to me after having decided to stop those awful internal medication for vaginitis. Moreover (laughing) he called directly my gynaecologist to warn him, literally, to stop this treatment before my cunt would fall to the floor since in such occurrence he will have sued him for malpractice. Up to that time Luigi is her Allergologist of reference but nonetheless she never found a new trustworthy gynaecologist (Male or female).

(A think of Luigi as a long wish for father who gives value and defends her femininity)

Luigi the dermatologist was inclined to think of my vaginitis as another form of allergic disease in line with the severe asthma of my infancy (in a tone of voice as she is now looking for a confirmation).

A: as if you became allergic to men, afterwards?

In a way, yes! I always thought, regarding men, that they must propose me to marry or get away. I have too many things to do. I can’t waste time with romances, I have always been on the first line of the battle with my eyes wide open and alone. Married men go away from me! I need to have a family. (translate to myself: I need a family to be finally a woman).

After the session is over, I am surprised by the paradox. After ten years of solitude she fell in love with this man, the present husband, who was actually 12 years older, divorcee but still strongly bond with his ex-wife, with two sons of quite the same age as Winfred herself. It seems that she was the primary school girl who fell in love with a father-analyst, a father-dermatologist, a husband father.

Friday
To laugh in order not to cry... getting in touch with the abuse?

The session started with a detailed sarcastic account of a residential course on administration she had to attend in spite of her working on a completely different matter. She tells me accurately of the mastery of the teacher, his remarkable skill compared with the absolute nonsense and distance from what she really matters. (At first I think this is another thing for me to a countless series, it’s really amusing sometimes her desolation... or we may say pena envy and phallic defence. Letting it pass goes, I have the clear sensation that her tone of voice is more humorous than sarcastic and, moreover she seemed really to appreciate the teacher’s skills, mine too therefore. Then I realized that, after all, she is also laughing about herself, her own meaningless life, taking a distance from an unbearable pain to begin to accept it a little more, maybe).

She is very smart and witty with words and I found myself laughing with relief and she is very happy to hear my partly concealed laughs.

Actually, even if she is worried about the coming end line for the book she is writing about (the Kepler’s discovery of the integral), our common Inclusivity got higher when she changed target (from the teacher to the professor of Analysis). She began to joke about the surrealistic behaviour of her colleague Luigi who, asked to participate in mathematical paragraphs of the book, had edited the original Kepler’s formulations in Latin.
I mean the Latin itself not the formulate! Exactly as he was a secondary school teacher with Keplero as student! A Buster Keaton's style gap (she comments, rocking on the couch with laughter). Luigi annuls time, he doesn't have the least historical sensibility, how could you edit the original Keplero's Latin? We were shaken by our laughs simultaneously (a sort of climax, I think).

In elated mood she continued with her experience about writing this book; by now she could define herself as the "DIBOUK" in Yiddish (medium) of Keplero she talked with him continuously in her mind after having read so many books on his life and his most important writings in the original Latin and German Gothic. Often, plays in German words came to her mind, spontaneously, since Keplero first, was a funny writer, used to play upon words.

A: you're full up to the right point, you must give birth to (in the previous months I proposed often this parallel between her never born son and her intellectual but true emotional creative books).

You're right. I need the proper time and space. I feel him right inside me...don't worry if I started to talk in German.

A: To give birth to Keplero is a pleasure for you, it's something you're really able to do; it could be a possibility to express your creativity...historical novels for example. But it seems this gives us the possibility to underline your conflict between delimitating (the internal) or being overwhelmed by the outside (the external world). (Expressing these ideas I am following mentally the images of one of her last dream: she was running for her life to escape from a sadistic doctor and the policemen, finally she found shelter inside a marvellous 17th century palace with noblemen and noble ladies, but she had to defend this space against the policemen with the help of the noblemen. At the end a furious battle started.)

Uhhmm, I remember I had a dream after our last session. It contradicts my previous convictions. In that session I talked about my friend's falling in love. God blessed her since she could dream of a man this way! For me real facts or nothing! (I think of an abduction of the transitional space).

Well, I was saying in that session that I would have felt that way at the end of the primary school when still innocent. No! I was wrong. My unconscious made me remember it.

I only dreamt of an acquaintance with my family. A man, an old man of 70 years old, he was an hero having flight above Vienna with the famous poet Gabriele D'Annunzio during the 1st World War. An hero like Keplero, I would had liked he had been Keplero, at least!!! (how excited she seemed: The most decadent Italian Poet and famous lover, the aeroplane).

I was 9 years old with already two tits so big and this old man always brought me red roses, adding comments on my body that made me blush. I experienced it as an abuse or maybe as a sort of kindness (Strange reversal in the opposite, I think), but I was annoyed and my parents never rescue me from that situation. If he would have given the flowers to my mother at least!!! As usual my parents didn't understand that he was too seductive... maybe only a romantic behaviour in the D'Annunzio's style... but for me there was something suspicious, was he a paedophile? Well, where had they gone for Christ? They were never around. And if I would dare to say something to my mother she would be prone to beat me instead. (I remember the mother's reaction just around that age at her first menses, I remember in particular an episode in a bra shop, also a member of the stuff took her defence against the incomprehensible rage of the mother).

A: (with sadness and concern in my voice) It looks like something you experienced as an abuse. To be desired as a woman by such an old man...

Two episodes come now to my mind: in the first (incredible, I was thinking exactly of this) when I was only four or five years old, they told me this story several times. It's not my own recollection. I concealed with the skirt my mother's tights, she had fallen asleep in a train cabin while men were casting sidelong glances at her. My mother was an inexcitable, I swear, nothing to share with malice.

The second recollection: always in the train heading to the north for holidays, I remembered how much I liked the ham sandwiches they served, compared with the disgusting cooking of my mother. A torso of celery with a human face!

I think, after her leaving, who is the real abuser? Maybe is it the absence of the caring parents that transforms the other in a persecutor through a displacement? What seems clear to me is that my participation in the comic play had reduced her suspiciousness in me as a persecutory professor/superego, opening the way to a deeper self disclosure.

Monday
Help me! Protect me!

I have enough of rushing from one place to another and not to be seen since none thanks me! My boss called me hundred times in panic for a letter that should have to be posted today... even during my massage session... this afternoon, a real pleasure for me! (She is overwhelmed, but at the same time she tells the story with an attempt to transform it in a sort of pantomime, as per her usual defence mechanism, I decide to follow her and wait).

At least you do listen to me, help me do! (My attention is aroused: it's the first time she openly asked for help even if this time too, it is said in a disguised form: fifty-fifty anguish and irony). Look at what a dream I had: I went out of the course and a colleague, I am always exactly in front of my seat (while I am always on her back, I think), an architect of the archaeological department asked me to get engaged! I was very surprised, but answered affirmatively, not contradicting him, he behaved like a madman to me (the fool again, I think). Then I went back home resolute to tell all of this to my husband to get his protection. But, instead of supporting me, he said: "behave as you like and stop annoying me!"

I felt hopeless. (as in the announcement of death dream, I think)

After a short silence she added that she talked the last days with this man regarding a statue of Erna (a Goddess linked with Pythagoras the mathematician) she would like to present in her museum. She got the impression that she should accept to have sex with him to reach her goal.

A: As in the previous dream with Berlusconi (Italian Head of the Government), do you remember? In that dream you were invited by Berlusconi's secretary to have sex with him, you refused with indignation since even a direct proposal was denied to you. Again male devaluation, the powerful man and the prostitute.

Maybe there could be a link with the Friday session: the abuse and not being shield from.

Yes, it could be. Actually I'm taking another responsibility on my shoulders about the architect to have the new house remodelled, just now that I'm so overwhelmed, another weight to carry on!!!
In the associations, in the transference, as again in her dreams, a character frequently represented—that of the dangerous fool: from whom she needs to be defended, to be kept under control by force or to be cared for. From time to time, the fool is the old father, the inconsistent mother, the boss, the angry driver in the traffic jam, a character in the dreams and last but not the least, the analyst who dares to offer foolish interpretations or comments.

A turning point in this analysis was the fear of having a cancer of the salivary glands, that worried us for a couple of months and pushed the patient towards an acknowledgement of her fragility realizing in a way the death pervasion of the above mentioned dream. Luckily it was a false alarm on a biological level but quite the contrary on our psychological realm. The outcome of the working through of this experience was an increased strength on affirming her needs in every situation: public or personal as well as a more secure bond with me.

My internal emotive reactions to this phase were expressed through one of my dreams on her:

We were in the consultation room. She was lying in the couch and asked me for a glass of water. I brought her. After having drunk it, she moved from the couch stretching her head in put exactly on my belly as two lovers or a father with a daughter. I felt an intense cuddling sensation.

I asked myself how the presence of the supervisor influenced my relationship with Winfred?

With this supervisor I had already treated another patient for a year, therefore I was well acquainted with him. I may say that he gave me the kind of emotional support I needed to stand such a destructive, scaring and vengeful woman. At the start, he made an immediate foreseen of what the transference could have been, i.e., the magic wishful thinking that I could give her the baby her husband didn’t or and to become for her the mighty father she was looking for. All these unconscious wishes were masked with continuous devaluations and sarcasms on behalf of the man in general and of me as analyst in particular. A lot of jokes and laughs, which were common in our encounters since the paradox of the patient’s verbalizations were often evident. The split of her personality in two opposite parts sometimes reached the appearance of a comic gag. In this way what happened was that the sarcasm inside the sessions was slowly elaborated and transformed into humour by the couple supervisor-supervisee through painful insights of the essence of Winfred’s internal world, beyond the facade and the make up. This transformation gave momentum to a parallel process between me and the patient, allowing me to cry the tears Winfred had lost for ever, some times literally, as well as to laugh with real pleasure at her jokes.

The supervisor’s presence functioned, also, as a protective shield against the potentially dangerous effect of my fear to accept and eventually express fully my feelings of support for the disastrous situation of the couple, taking the patient’s side as she needed, against her sadistic/uncaring father-husband. I mean the conflict between being loyal to me and to her, as analytic couple, even if this implied a profound critique of her husband (and senior training analyst) due to a certain way of utilizing our profession and theories to rationalize or keep at bay our own troubles. Nonetheless, which one of us could claim himself out of this risk? This thought helped me to cope with this Cedipal issue, central for our training as autonomous analyst.

Conclusion

To be able to think “by ourselves”, it is necessary, firstly, to feel our own emotions otherwise we imitate thinking. In Winfred’s internal world a persecutory superego attacked the emotions impeding their transformation in to autonomous thoughts. A false self structure of a intellectual hyper-rational type was built thus facilitating a variety of somatizations.

Playing on words, she listens herself saying things (feelings), she cannot express on face (straight) but, in a figurate sense, only from behind, by means of paradoxes and ambiguities. So, the superegoic control is bypassed, the emotions slide in and make us (me and the patient, in the order) think.

Sarcasm seems to have a more evocative function but it reveals too, the repressed, to the by-seeing analyst who, at the start, has to limit himself to an encouraging and comforting function (holding the painful void concealed under the sarcasm). It was not infrequent, after the sarcastic outburst, that Winfred could let herself go to a painful insight of her real emotional states.

Winfred as not an enough loved child, internalized a detached, punitive, even sadistic parental object who continued the persecutory relationship from within. One of the main goal of this internalization is to fill the void of parental love. As a consequence in adult life this child will have the tendency to behave to the other in the same way she behaves to the self, maintaining a vicious circle that protects from disillusionment of the always wished for love as well as from the possibility of such an illusion of love to exist. I say illusion of love in reference, of course, to Winnicott’s transitional space of play. To play on words and humour have this capacity to “unslave” us from our vicious circles: from a too tight adherence to external or better logical-rational reality in favour of a wider and open understanding through paradoxes and creativity (G. Pasqualli, 1987; D. Meghagi, 1991).
In my view mental pain is the fuel of the work of humour. In this patient, persecutory anxieties, sometimes of psychotic intensity, an unbearable internal void of love and meaning, gave the way of a personality organization based essentially on a sadistic superego who strangles from within any possibility to “play” with illusions, to get in touch with potentially transformative and creative aspects of herself. In synthesis: not allowing to be the mother of her (as a) baby!

Bibliography


Shame and jealousy are frequently experienced emotions, yet paradoxically enough we are “ashamed” to acknowledge them for what they are! At last in Phil Mollon’s Shame and Jealousy: The Hidden Turmoils we have a book that explores these “hidden turmoil that pervade human life, exerting their secret terror and control from within” (Preface). In a style which is unambiguous and lucid, the author Phil Mollon analyses the causes and effects of these emotions which in extreme cases lead to a chronic condition necessitating therapy.

Phil Mollon is a psychoanalyst of the British Psychoanalytical Society, a psychotherapist and a clinical psychologist. His interest in shame, narcissism and other disturbances in the experience of self are reflected in his earlier works, The Fragile Self and Releasing the Self: The Healing Legacy of Heinz Kohut. He has also written about the impact of trauma on the self in Multiple Selves, Multiple Voices and about the nature of traumatic memory in Remembering Trauma and Freud and False Memory.

The remarkable feature of Shame and Jealousy is the fact that though the author has drawn on recent contributions made by psychoanalysts, developmental psychologists, social scientists, neuro-scientists and proponents of evolutionary psychology in order to write a book relevant to clinical thinking, yet the simple and clear manner in which he presents complex ideas helps the lay reader to gain an insight into the witherto unexplored areas of the human psyche.

The first part of the book deals with shame, which according to Dr. Mollon, lies buried “in the gaps and clumsy steps in human intercourse, in the misunderstandings, the misperceptions, and misjudgements, in the blank mocking eyes where empathy should be, in the look of disgust where a smile was anticipated, in the loneliness and disappointment of inarticulate desire that cannot be communicated because the words cannot be found, in the terrible hopeless absence when human connection fails, and in the empty yet rage-filled desolation of abuse.... Shame is where we fail.” (Preface).

For greater impact the author opens with several revealing case-studies which illustrate the devastating effects of shame. The author’s sensitivity to the victims of shame finds suitable expression in the analysis of cases like “Pedro and Natalie’s”. The book is thus both an objective analysis of shame and jealousy and a subjective plea for greater empathy on the part of analysts when dealing with these emotions. With the systematic precision of a scientific observer, Phil Mollon goes from particular instances to a general study of the subject matter in his section on “Shame.” The author’s contention that the basis of shame lies in the individual’s relationship with the mother (or early caregiver), is clearly explained in clinical vocabulary, leaving no scope for doubt. The effects of shame help not only the specialist but make the ordinary reader analyse his own “shame-filled” persona as well.

This study would be particularly useful to parents with high and unrealistic expectations of their children. Segments like “Shame and Schizophrenia” and “Shame and Social Inadequacy” are almost passionate in their intensity. Thus the author describes the deepest depths of shame as a “no-place” where there
are "no eyes to see us, for the others have
verted their gaze—no-one wishes to see the
dread that has no name." Similar poetic
devices are used to drive home the connection
between shame and guilt, factors which not
only prevent the forging of healthy
relationships but hinder the development of
the self as well the author does not forget to
include the socio-political outcomes of shame
in his study and this insight helps the reader
draw parallels between shame and ostracism
and the increase in ethnic violence across the
globe. The book in attempting to deal with
different planes of reality is intellectually
stimulating and at the same time encourages
introspection in the discerning reader. And
herein lies the measure of success of a treatise
on psychoanalysis and therapy.

The reviewer would strongly recommend
sections like the "Psychic Murder Syndrome"
to young mothers. She herself found the book
compelling reading and a means of self-
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The author's preference for a syncretic
approach to the problem, combining
psychodynamic and psychodynamic
explanations is an indication of his broad outlook and wide
scholarship. This is further substantiated by his
summary of Freud, Riviere, Fenchel and
Melanie Klein's insights regarding jealousy.

The critical study of shame and jealousy is
neatly summed up by the author's advice to
follow analysts to be wary of unwittingly
inflicting shame upon their patients. Certain
experiential guidelines have been provided to
enable analysts to minimize shame in those
under their care. The author's understanding
of the people prey to extreme forms of these
emotions is evident in his advocating the use
of "bare" over "bare" truth in dealing with such
cases. No matter how alarming the
manifestation of these feelings, the author's
tone is compassionate and his attitude non-
partisan and non-judgemental. He believes that
treatment should be modified to conform with
the mental condition and needs of the
individual and eschews a pedantic approach
to his subject. Dr. Mollon combines realism
with scholarship in his analysis and lays great
emphasis on the role of the mother (or early
care-giver), in either making or marring the
individual personality.

The author has very thoughtfully appended
a final section explaining psychoanalytical
concepts to benefit the lay student and enhance
readership.

A well crafted book, marked for its sense of
balance both in outlook and form, the literary
quality of this work deserves mention.
There is a subtle shift in focus in Phil
Mollon's treatment of the theme of "Jealousy".
When dealing with the condition of shame,
both pathological and psychological, the
author had derived its definition from the case-
instances and emphasized the importance of the psyche, in the form of anxiety, which were
constantly "ensure that bad objects, associated
with aggression, remain unarticulated and split-
off in the psyche."

In exploring the significance of neutralization,
Cartwright pointed out that in the early years
of Klein (1932), based on clinical observations
with children, she argued envy and
destructiveness to be the dominating agents in
the psyche, in the form of anxiety, which were
actually derivatives of the death instinct. How-
ever, in the later works of Klein, envy and
greed committed by women calls for an altogether
independent and different study of their intrapsychic,
interpersonal and social dynamics.

Cartwright uses an original concept called
the "narcissistic exoskeleton" in order to un-
derstand rage-type murderers from an intra-
psychic perspective (p.20 of the book). The
"narcissistic exoskeleton" is an apparently sta-
 ble personality but is characterized by a partic-
ular kind of splitting that "stresses to keep
split-off in the psyche.

Recounting the theoretical
classifications of aggression down history,
Cartwright pointed out that in the early years
of Klein (1932), based on clinical observations
with children, she argued envy and
destructiveness to be the dominating agents in
the psyche, in the form of anxiety, which were
actually derivatives of the death instinct. How-
ever, in the later works of Klein, envy and
Graziadei (1957), one notices an attempt to
understanding creative forces in the psyche.
In exploring the significance of neutralization,
it is worth observing that the author mentions
"aggression can be used in the service of the
ego, emerging in acts or states of assertive-
ness to further personal growth." (p.16). Fur-
ther sifting through theories on aggression, it

In the introduction of the book, Psychanaly-
sis, Violence and Rage-Type Murder, author
Duncan Cartwright begins with a quotation
from Abrahamson's The Murdering Mind,
saying, "Murder, despite our reluctance to
admit it, is part of our humanity because it is
rooted in human emotions." Violence is often
mystified and glamorized in media or other
popular mediums of culture, giving it an un-
neccessarily dehumanized perspective, thereby,
placing it beyond the reach of scientific inves-
tigation. This is precisely the significant point
of intervention that the present book under-
discussion makes. It is a collection of assess-
ments made from the Psychoanalytic Research
Interview (Cartwright, 2000), the Thematic
Apperception Test, the Rorschach Test and
court reports on the prisoners of Durban
Prison, South Africa, who consented to par-
ticipate in the research programme. Though
violence is not restricted to men alone, how-
ever, the author has consistently dealt with the
study of male violence alone because rage
committed by women calls for an altogether
independent and different study of their intrapsychic,
interpersonal and social dynamics.
is elaborated in the book that both Winnicott and Fairbairn emphasize the origin of aggression lying between objects through its interaction and relationship with objects.

While analyzing the aspect of rage, Cartwright explicitly explains the origin of it as a "narcissistic injury" (drawing theoretical material from Chessick, 1993; Kohut, 1972; Lewis, 1993; Morrison, 1988; Parens, 1993; Schafer, 1997; Shengold, 1991), which gives expression to a primitive explosive affective state of mind. Interestingly, the ultimate formation of violent individuals is often due to the absence of a coherent paternal introject. Shoham (1997) further exemplifies that those who are more attached to families are likely to commit impulsive acts of violence while those who have not received any form of punishment during childhood are more likely to commit planned acts of violence.

There has always been a fine line of connection between sex and violence. Three dominating stimulating agents work together, i.e. excitation, omnipotence and destructiveness—all pointing towards a preoedipal regressive fixation. Joseph (1997, part-I of the book) holds an important distinction between mature sexuality and sexualization. According to him, mature sexuality is characterized by a rich, progressive and creative exchange with the objects. While, sexualization essentially refers to the eroticization of parts of the body. It serves as a defense against mature object relationship. Crimes committed out of rivalry, power, revenge, jealousy or competitiveness clearly show oedipal related conflicts. Other forms of murder like in patricide, matricide, against authority figures or threatening groups, between siblings—all show dominating oedipal themes.

In chapter five of the book, the author cites works by various authors to elaborate his position on formulations of rage-type murder. Some of them are Wertham's 'the catathymic crisis', Bromberg's 'the cuckolding reaction', Weiss 'the dependency trap', Ruotolo's 'the damaged pride system' and so on. Much as how Cartwright gives different theoretical perspectives on formulations on rage-type murder, similarly in the last chapter of the book, he gives a well-organized list of points in order to assess and identify individual vulnerability to rage and violence. Indeed, it is a rather courageous study of human rage and violence. Moreover, perhaps, the most significant aspect of the work lies in its ability to uphold and integrate rage and violence as part of humanity itself.

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