



BULLETIN

OF THE
SOUTHERN CALIFORNIA PSYCHOANALYTIC
INSTITUTE AND SOCIETY

No. 71

Published Quarterly

Fall 1984

CONTENTS

LETTERS TO THE EDITOR	2
EDITOR'S NOTEBOOK	3
Guest: Martin Grotjahn	
IN MEMORIAM: Marquis Earl Wallace	4
Joseph Natterson—Psychiatry in Hungary	5
Janos Csorba—Analysis of Existence vs. Psychoanalysis	6
Arnold Gilberg—The Analyst's Work—and Fees	9
Sumner Shapiro—Metaphor	11
Scott L. Carder—On Psychoanalytic Training for Nonphysicians	12
Arnold Gilberg—Discussion of "Table for Five"	16
SCIENTIFIC MEETINGS	
Franz Alexander Memorial Lecture	
Michael F. Basch—New Directions in Psychoanalysis	18
Reported by Bradley A. Daigle and Raymond Friedman	
Clinical Case Conference	24
Reported by Jay Martin	
Panel—Poetry and the Media: Implications of Poetry Therapy	26
Reported by Donald M. Marcus	
Panel—Margaret Mahler's film "Psychological Birth of the Human Infant"	27
Reported by Thomas F. Trott	
BOOK REVIEWS	30
Douglas Orr, Peter Loewenberg, Martin Grotjahn, Albert Schrut	
LIBRARY NEWS	38
Lena Pincus	

ANALYSIS OF EXISTENCE VS. PSYCHOANALYSIS

Dr. Janos Csorba
Budapest, Hungary

As can be seen from a consideration of contemporary Swiss and German psychiatric literature, existential psychiatry has developed in a variety of mutually influential trends of research.

In the first trend the phenomenological approach increased our knowledge; the theoretical and semantic concepts of descriptive psychopathology. Apart from Schapp¹ the influence of Heideggerian phenomenology came into prominence in most of treatises and related articles. Heidegger placed Being and Existence at the centre of philosophical inquiry. Since the fore of 1930s these modalities have become and remained the main preoccupations for each phenomenologist. Husserl's intervention was of only secondary importance. M. Scheler, who found his eclectic position between phenomenology and neo-Kantianism also attained a secondary significance.

In the second exchange between phenomenology and psychiatry, the former was confronted with psychoanalysis which led to the "analysis of Dasein" and other existential psychotherapies.

The third trend of research can be regarded as the "post-existential" period of phenomenological psychiatry characterized by elaborations of independent anthropological theories.

A review of the religious trends of psychotherapy, from personal analysis on are beyond the scope of this study. This paper focuses on reviewing the second mentioned trend. It summarizes the view of existential phenomenology concerning psychotherapy, analyzing it and making it more explicit. In order to make a reasonable comparison the paper systematically traces and parallels the components of discernable elements from both of the "two manners of doing psychotherapy."

It tries to avoid semantic flights and metaphysical labyrinths in the hope of remaining on the practical level. Taking the main conceptual schemes of both the analysis of Dasein and psychoanalysis into consideration, the basic intention is to preserve as best as possible the original contextual meaning of the constructs involved. The other task of this paper is to make existential categories more comprehensible to the psychotherapist.²

The debate between existentialism and psychoanalysis originates in the early 1930s. Phenomenologists accused psychoanalysts of the mechanistic view of "homo natura," criticizing the dominant treatment of categories as instances and, moreover, the "rigidity" of Freudian typology. That is to say, that reacted to the latter's insufficiency mostly from an epistemological and philosophic point of view. Psychoanalysts, on the other hand, accused existentialism of the possession of metaphysical suppositions and of "indoctrinizing" the patients. Existentialists failed to elaborate psychotherapeutic techniques, while psychoanalysts lacked developed systematic metaphysical/anthropological/projections of their own theory.

In order to compare similarities and differences systematically, it is worth summarizing the opinions of both psychotherapies diagrammatically. (Tables I-II)

The practical conditions of both trends are similar. There are common certain characteristics: the instruction of free association, the absolute acceptance of the patient, congruency, empathy and tentative interpretations as stylistic ingredients of the therapist's approach. Binswanger, Boss and Weizsacker all studied psychoanalysis from Freud in Vienna, but separated themselves from him at an early age as regards their views on the principles of interpretation at the patient's couch.

Psychoanalysis still values transference and countertransference as valid criteria in the investigation and explanation of the relationship between patient and therapist. On the contrary, Binswanger clarifies this relation in his article "About Psychotherapy" (1935) as individual, unrepeated and having the quality of Dasein as partnership /Mitdasein/, none of which are to be conceptualized in terms of knowing but rather in existential understanding. From the existentialist's position in this context is "beyond the horizon of a thin exploration" and does not serve a "pure function," consequently it remains in its "faithfulness."³

The matrix and explicandum of phenomenological reflections is the individual Dasein, it gives the ultimate basis for inquiries about psychological phenomena.⁴ Binswanger and Boss hoped to take psychological advantage of the speculative ontological method developed by Heidegger. The therapist as existentialist orients himself to recognize the qualities of Individuality, of Wholeness, of Decisiveness and of Being-bale-to-be in each event of personal life; to find how one makes or fails to make his Existence.

Psychoanalysts, on the other hand, observe the changing dynamics of conscious and unconscious events irrespective of their individual or acquired Ego-character. Phenomenology creates a systematic analysis of life history, in which the discussion about present and past possibilities, fulfilled or failed, attain significance in the process of making Existence. Self interpretations may be accepted as respectful levels of Dasein. While Freudian theory and practice proclaims the efficiency of early life experiences and interprets the patient's self explanations as Ego-defenses.

The striking difference is that existentialism prefers to remain on the border of consciousness,⁵ approaching the cultural, religious and ideological views of the patient, affording them a modifying effect in interpretation. In Freud's opinion, Super Ego phenomena serve to defend the personality against instinctive drives and consequently the peculiarities of one's culture and education are marginalized in analysis. The change in the process of analysis of Dasein is connected with the question of whether the patient becomes able to recognize his life events as his own. The change is mostly intellectual. Psychoanalysts do not declare satisfying change in the patient's condition without evoking "agieren," regression, discharge of affects, acting-through. Existentialism presents the contradiction related to the patient's state as existing between the noematic side of the individual mode of Being, *modus essendi*, real modes of one's Existence, and its main principles, existentials, noetic side, *modus intelligendi*.⁶

The eidetic reduction of Husserl focuses on exploring the existentials most typical to the life of the patient. The "reduction process of diagnosis" of Binswanger adopts the same approach in which the psychiatrist departs from the clinical symptoms and labeling methods and arrives at existentials. Psychological terms applied to a patient do not achieve relevance, they have only ontic/individual/validity.

Psychoanalysts conceptualize the main contradiction in the Ego-psychology to exist between the Superego and instinctive drives and it is from here that other antagonisms derive. The analytic tradition, contrary to that of the existentialists, serves as basis for case interpretation, while phenomenologists require to outline new categories for each individual case.⁷

Theoretical differences are even more striking than on the level of practice. Existentialism seems to deny the level of personal psychology by means of reflecting itself immediately to the level of ontology. On the other hand, philosophical categories gain distinctiveness in the process of therapy without arriving at entities on adjoining levels of personal theory. For instance: Binswanger's "Projection into the world"/*Weltentwurf*/does not exist as distinctive entity to other ontological existentials initially elaborated by Heidegger. The lack of personal psychology is clearly connected with the existentialist's shortage in methodological principles and in schedules effective for therapeutic operation. Moreover, despite of its widely known aspiacy for anthropology, phenomenology is incapable of reckoning with the biological, developmental and other traditional qualities of man. Psychoanalysis, in the same time, developed a sensitive methodology, several theories of Ego psychology and elaborated its theory of science providing anthropology with fruitful generalizations, although posing remarkable difficulties because of the predominance of mechanical and energy-oriented attitudes to man.

Notes

1. W. Schapp: *Beitrage zur Phaenomenologie der Wahrnehmung*. Erlangen 1910, cit. L. Binswanger, 1931.
2. This paper is akin to those of G. Sterban and D. Pivniczki as well as H. Edelheit, although it finds Sterban's study mostly of a philosophical nature, while the articles of the psychotherapists are insensitive to the peculiarities of the phenomenological method. G. Sterban: *Freudian Man vs. Existential Man*. *Arch.Gen.Psych.* 17, 598-607, 1967. H. Edelheit: *Binswanger and Freud. The Psychoanalytic Quarterly*, 36, 85-90, 1967. D. Pivniczki: *Paradoxes of Psychotherapy*. In Honour and Memory of L. Binswanger. *Confinia. Psych.* 22, 4, 197-204, 1979.
3. In respect of translation of German categories to English synonyms see: M. Heidegger: *Basic Writings*. (Ed.) D.F. Krell. Routledge and Kegan Paul, London, 1976 and D.L. Grenier: *Meaning and Being in Heidegger's Sein und Zeit*. Inaugural Diss. Heidelberg, 1975. To the phenomenological method: E.G. Ballard: *On the pattern of phenomenological methods*. M. Nijhoff, V. Hague, 1963. K. Hartmann: *The Logic of Deficient and Eminent Modes in Heidegger*. *J.Brit.Soc.Phen.*, 5, 1974.
4. According to other authors, Dasein is not translated. Its meaning varies with the concepts of authors, it is "a special interpretation of a particular being," (Krell) or "the totality of different relations gathered together," (Grenier), furthermore: it is "the pre-predicative ground of the world...constituted by the totality of reference relations...as a result it is inarticulable," (G. Sefler in *Language and the World. A methodological synthesis within the writings of M. Heidegger and L. Wittgenstein*. Humanities Press, New York, 1974 or "the very meaning is one who reflects one's existence" (Ballard).
5. "The principle basic to phenomenological method: limitation of analysis...to the level which is immanent to consciousness," Binswanger, 1947.
6. About parallelism between Duns Scotus and Heidegger see: J. Caputo: *Phenomenology, Mysticism and the Grammatical Speculative. A Study of Heidegger's Habilitationsschrift*. *J.Brit.Soc. Phen.*, 2, 1974.
7. Phenomenological inquiry moves within an understanding of individual to existential and vice versa in the world of analysands, empirical data gathered together from others are irrelevant. Psychoanalysis tends to interchange individual facts and axioms/deductions; the latter are taken over from alive analytic traditions, the suggestions are typical in a particular aspect.

Editor's Note. Table I, Table II and the References are available upon request.

THE ANALYST'S WORK—AND FEES

Arnold Gilberg, M.D.

The psychoanalyst and his work has existed as a subject since the inception of psychoanalysis as a science and profession. The scientific basis of our discipline has regularly been evaluated, but areas germane to our professional growth have received less attention.

Psychoanalysis is a profession where persons gainfully employ themselves while seeking to understand and help people. Freud talked about the importance of fees in the treatment of the patient, as have other authors (Freud, 1913). Lorand and Console (1958) demonstrate how the absence of fees creates an agenda of unresolved problems. Menninger (1958) suggested that a psychoanalysis must be a sacrifice and therefore a fee must be collected. Gedo (1963) views nonpayment of fees as an issue of the transitional object. Allen (1971) attempts to understand the fee based on genetic constructs relative to firmness, permissiveness and matters of integrity. Eissler (1974) talks of matters related to payment and nonpayment of fees with implications for alternative techniques. In a study of Free Psychotherapy: An Inquiry into Resistance, Nash and Cavenar (1976), the point is made that the lack of a fee can lead to insoluble resistances. Langs (1976), too, talks of the variety of meanings patients attach to fees. In a study by Shipton and Spain (1981) the outcome of psychotherapy was not necessarily dependent on fees.

We know that many patients have been treated in clinic situations and that the success of their treatment has not been necessarily dependent on a fee. How then, can we explain the necessity for a fee for the patient's growth in the analytic situation? It appears to me that the patient might do well in a treatment situation, whether a fee is established or not. What is critical for the patient is whether or not the person can afford to pay for treatment.

For example, if the patient is economically impoverished and has an inability to pay for his analysis, then I think there could be constructive aims that would be achieved through the analytic process. The psychoanalyst would have to be aware of overidealization of the analyst, for example, and such resistances and transference complications would need interpretive work.

We know that the Wolfman was treated by Freud and other analysts frequently without fee (Gardiner, 1971). Many of the treating analysts, including Freud, helped the Wolfman acquire funds for his own personal living situation. If anything, such behavior was not an acting-out on the part of the analyst, but was an effort to reassure the patient of his worthwhileness as an individual. The analytic environment helped support and embellish a lowered self-esteem.

When the patient can afford to pay for a psychoanalysis, and attempts to find low-fee treatment or not pay for treatment, this then is an issue of resistance which needs analytic scrutiny. Developmental arrests such as regressive oral needs, areas of anal obstinacy and control, and lowered self-esteem, could be neurotic reasons to solicit low or no fee situations. Such patients need to understand their reasons for attempting to devalue themselves and the analysis.

The issue remaining is, what makes psychoanalysts so reluctant to recognize that the fees we charge or should charge, are not necessarily related to the patient but to our own needs. The psychoanalysts, as a professional receives less, on an hourly basis, than many other professionals.

Greenson's work on the working alliance clearly demonstrates that the real relationship provides for an adult communication between the analyst and the analysand. This, therefore presumes that the psychoanalyst is ready to work and that the analysand comes prepared to work and pay for this cooperative experience (Greenson, 1963).

It appears that the psychoanalysts's own self doubts professionally and personally contribute in a major way to the issue of fees. Reality suggests that under proper circumstances the analyst is entitled to a fee.

The literature talks little about the reality of the psychoanalyst's work and the just reward for his work. The rewards include emotional satisfaction and a fee. It appears as though the psychoanalyst must attempt to rationalize his work, rather than holding out his work as something that is needed and necessary and that such work also demands a fee.

The psychoanalyst may feel somewhat unworthy of his position. The fee therefore is analyzed as an issue for the analyst while the analyst avoids this self confrontation. It may be that the devalued position that the psychoanalyst frequently plays within the community is unconsciously determined by the psychoanalyst and the fee matter is a derivative of such unconscious destructive strivings.

Psychoanalysis as a discipline and helping science needs to accept the fact that fees are a part of the reality exchange of any service-oriented profession. Therefore, the psychoanalyst is entitled to a regular and customary fee based on the laissez-faire system which provides for fees for services rendered -- an exchange system. Somehow, the psychoanalyst needs to find justification for what he is entitled to. The analyst utilizes psychoanalytic constructs to validate his position.

Authors have suggested different motivations for the psychoanalyst choosing psychoanalysis as a profession (Goodstone, et. al., 1963). Early developmental problems and efforts at resolution through psychoanalysis have been suggested as reasons for entering the profession. The unwillingness to accept the fee as a justified expense incurred by the patient which needs little other interpretation only adds to a new growing awareness of the complicated reasons and motives that are present in the self-selection of psychoanalysts. It could be that the psychoanalyst who already has an injured self-esteem and who feels very separated and uncomfortable with people, finds a profession which can intensify these feelings unless understood.

This matter of fees and psychoanalysis is important and critical to the ongoing issue of the psychoanalytic movement and its relevancy in the world today. Further understanding and awareness of this topic area are critical to the ongoing development and existence of psychoanalysis, as both a research modality and a treatment modality.

Bibliography

- ALLEN, A. (1971). The fee as a therapeutic tool. Psychoanalytic Quarterly, 40:132-40.
- EISSLER, K.R. (1974). On some theoretical and technical problems regarding the payment of fees for psychoanalytic treatment. Intl. Review of Psycho-Analysis, 1:73-101.
- FREUD, S. (1913). S.E. 14:126.
- GARDINER, M. (1971). Wolfman. With the Case of the Wolfman by Sigmund Freud. New York: Basic Books.
- GEDO, J. (1963). A note on the non-payment of psychiatric fees. Intl. Journal of Psycho-Analysis. 44:368-371.
- GOODSTONE, G. et al. (1963). Vocational hazards of psychoanalysis: a panel discussion. Bull. Phila. Assoc. of Psychoanalysis. 13:148-150.
- GREENSON, R. (1967). The technique and practice of psychoanalysis. Vol. I. New York: International Universities Press.
- LANGS, R. (1976). The Therapeutic Interaction. Vol. 2. New York: Jason Aronson, Inc.
- LORAND, S. and CONSOLE, W.A. (1958). Therapeutic results in psychoanalytic treatment without fee. Intl. Journal of Psycho-Analysis. 39:54-64.
- MENNINGER, K. (1958). Theory of Psychoanalytic Technique. New York: Basic Books.
- NASH, J. and CAVENAR, J. (1976). Free Psychotherapy: an inquiry into resistance. Am. Journal of Psychiatry. 133:9. 1066-69.
- SHIFTON, B. and SPAIN, A. (1981). Implications of payment of fees for psychotherapy. Psychotherapy: Theory, Research and Practice. 18:1,68-72.

METAPHOR

Sumner Shapiro, M.D.

And did I learn?

I built a stronger ego. I became increasingly inventive. I devised a score of tactics that were meant to prod, encourage, and invite elaboration yet without "contamination." I won medals for endurance. For persistence, punctuality, forbearance.

Philip seemed an angel. His face. So expressive and gentle. Our trained nosologists alluded to its immobility to make it an example of a classic flatness. And they said it mirrored feelings.

His eyes were blue and pale, washed out, and the skin pulled taut above his cheekbone, hairless and unwrinkled. All of it an aura that suggested waxiness and was in consonance with gravity of mental illness.

"Typical. Withdrawn. A blunted affect. Bland," no word of which he ever contradicted if a member of the staff succeeded in provoking conversation. And what little I had heard of it was weird, laconic, riddled with non-sequiturs, and absolutely never born of spontaneity.

Don't ask why I tried to treat him. Against my Chief's advice. He cautioned me about a pair of tough commodities of which the tyro resident has very little need. Discouragement and disillusion. "He's a waste of precious time. Philip's schizophrenic. Lots of us have tried. First place, he won't talk. And if he does, it's nonsense."

"It's possible I'll learn about the morbid process."

I designed our scheduled sessions for a flexibility of length and locus. If the spirit moved me so, we'd stroll about the grounds. In retrospect I see that I was serving both myself and him because his taciturnity was deadly. And so I bobbed and wove and tried to spar with anything he'd let me get a hold of -- fighting off the awful angury about prognosis. Oh, the dreaded twins were there, Castor, Pollux...and even though repeatedly I steeled myself I couldn't drive away the image of a mummy. Of a waxy catatonic who would drape and hold forever either arms or legs however I had set them.

"The members of your family, I find them hard to follow. Help me put them straight." That last phrase was a blooper. In his concretistic thinking Philip conjured up (I thought) a tight, restraining jacket. "I'm sorry! It isn't what I meant...Let's try another time. Your mother and your father married. And you have a bunch of older brothers and a sister. And you all lived on the farm. But then your mother died, and if I have it strai- sorry! -- correct, your father, he remarried. The woman who kept house. But she had children of her own, and they moved in. The problem was for rooms. They pushed you out of yours since you were youngest.

"Have I got it right?"

Philip simply sat there, leering. Finally he spoke his second mother's name and that was that. Wan and idly sitting. Remoteness in his pale blue eyes that turned their looking inward. But on what? On whom? And with what machination?

A typical New England summer baked and washed the blacktop of the parking area. Twinkled with sunshine the distant surface of the tree-lined lake. Suffered the whining outboards that like playful dogs would growl at one another, waving graceful, liquid tails. Then the fall. It chromed the maple leaves and brittled them. And then the snow.

Philip was assigned to an outdoor work detail that put a shovel in his hand and saw him leaning on it. Like a lifeless Grant Wood painting. His purpose was to clear the pads where staff and weekly visitors debarked. Assignment to a job was part and parcel of prevailing sentiment about the healing properties of work. Connected with an ethic. Why outside? Well, the farm had been shut down, the kitchens were demanding, and the laundry inappropriate. So there he stood, in plaid, with gloves, galoshes, blowing hoar, detailed to snow removal.

(Continued on page 27)

ON PSYCHOANALYTIC TRAINING FOR NONPHYSICIANS

Scott L. Carder, M.D.

The question before us is: Do we as members of the American Psychoanalytic Association want to expand our admission procedures and provide training to qualified clinical non-physicians? Maybe my colleagues who oppose this are correct. We need more discussion to both sides of the problem. At present I am in favor of offering our psychoanalytic training to these clinicians.

We must keep two considerations as the highest priorities. First what will be in the best interest to the greatest number of individuals whether they are candidates, analysts, analytic patients or the country as a whole? And second, what is best for the long range future of the profession of psychoanalysis?

Committees of the American Psychoanalytic in 1975, 1978 and 1981 have reported that clinical psychologists and other doctors of mental health have the basic prerequisites, that providing them psychoanalytic training is feasible, and that it may be desirable for our association to do this.¹

As you know Sigmund Freud expressed favor for training nonphysician analysts in his 1926 paper. Freud said that a medical education is not a prerequisite for psychoanalytic training or practice. He argued that we should obtain the best possible people whatever their background and not let political or economic issues reduce the quality and breadth of psychoanalysis as a discipline. Freud felt the creative thinking, passionate interest and other special qualities in the makeup of the analyst who can most enrich and advance the field are not confined to those with medical training. In fact he said such qualities are sometimes not found in physicians or are discouraged by the medical training itself.²

We currently have a very good nonphysician research associates program. Few among us would deny that our own research members are some of the best contributors to our psychoanalytic activities. Also in reality there are already today many nonphysician psychoanalysts who have demonstrated their clinical competence. As Roy Schafer, Ph.D. stated in our recent American Newsletter: "...many psychologists and social workers, and some others, have already been trained and are being trained to be psychoanalysts."

The pace of analytic training for psychologists is being stepped up, now that there exists a Division of Psychoanalysis within the American Psychological Assoc. This division (#39) has a large and active membership; it has founded its own journal (Psychoanalytic Psychology); it holds national meetings twice a year at which numerous excellent papers on all aspects of psychoanalysis are presented; and it is developing plans to facilitate the organization of training institutes. Psychologists and others are carrying on active practices.

...the institutes of the American would be well advised to accept the fact of historical change and on this basis (1) open their doors to nonmedical applicants, whose training, experience and personal qualities suggest that they will become creditable analysts, and (2) assist, in a collegial manner, new nonmedical Freudian institutes in their efforts to develop strong faculties and to establish and maintain the highest standards of selection, training and practice. As Dr. (Ken) Calder emphasized, our chief concern should be the future of psychoanalysis.³

The analyst who chaired our 1978 committee on feasibility was Ken Calder, M.D. In the October 1983 Newsletter of the American he stated that most nonphysician analysts sense that they are treated as second class citizens by members of the American and there is ample evidence to support their view.

Ultimately we pay the price for the discrepancy between the competence of these nonphysician analysts and our less generous attitudes toward them. To outsiders we appear to be insensitive, parochial, shortsighted and unfair. The quality of our human relations is questioned...If we exclude qualified individuals from improving their services to the community for what appears to be our defensive and self-serving reasons, we may alienate individuals who could benefit from psychoanalysis as therapy or could learn and use the concepts in other fields, as well as those who might become practicing psychoanalysts.⁴

Some colleagues that are concerned that we will lose our medical identity and that this change will damage our relations with other physicians. Those of us who come and will continue to come to psychoanalysis from the medical route shall always have a special interface position in the biopsychosocial world. As long as we from medicine chose to practice and keep abreast in medical and psychiatric activity we will continue to be recognized as practicing physicians and psychiatrists. We will not lose our individual medical identities, but as psychoanalysts we will share an identity with psychoanalysts from different mental health fields.

John Talbott, M.D., a psychoanalyst who is President-Elect of the American Psychiatric Association and George Pollack, M.D., an analyst who is their current treasurer are both concerned that our equal treatment of nonphysicians will lessen the effectiveness of our psychoanalytic voice in the psychiatric association.⁵ However, as our Newsletter of October 1983 stated these arguments are overconcerned with image rather than substance.

We should be concerned with what is good for psychoanalysis as a science and for society as a whole, rather than narrower personal and organizational concerns.⁶

This change will strengthen our relations to other much larger and more influential organizations such as university faculty, psychological, and other mental health groups. We should not be fooled by the current enticement of biologic psychiatrists and of the general psychiatric organization. The biologic vs. psychodynamic conflicts will continue and the psychiatrists who are biologically oriented are not our emotional brothers -- most often they do not appreciate our awareness of unconscious dynamics like a psychoanalytically trained psychologist does.

Many analysts do not have full practices and they fear the increased competition by nonphysicians. This fear is, however, displaced and misdirected. Their fear prevents them from seeing the opportunity we have by training nonphysicians. It also causes them to resist being aware of the fear's real origins. There is not now nor will there be a shortage of psychopathology in any of our communities!

The problems of not having a full practice often are our own internal difficulties and are due to our own resistance to change and to adaptation in the face of present day realities. For instance in the past, public relations was not as necessary for a psychoanalytic practice as it is today. Those who want a referral based office psychoanalytic practice and who do not go into the community to hospitals and other areas to generate interest, may not have a full practice in today's world. But by understanding and adapting to this reality we may better serve medicine and society as a whole while keeping our practice at a desired level. We need to work more today than in the past to let people know that psychoanalysis really does have 'something better to offer'!

As for myself and for people I have worked with, the external competitive fears have frequently been an internal problem of not having enough conviction about what we do. Too often resistance to our own unconscious psychodynamics prevents us from confronting character traits that inhibit the full development of a psychoanalytic practice.

SCIENTIFIC MEETINGS

FRANZ ALEXANDER MEMORIAL LECTURE*

Michael Franz Basch, M.D.

New Directions in Psychoanalysis

Bradley A. Daigle, M.D., Reporter

Dr. Basch, of the Chicago Institute, is one of the a small group of thoughtful and scholarly workers engaged in the development and extension of the clinical insights of Heinz Kohut, and the author of the popular book, Doing Psychotherapy. At the outset he emphasized that the "New Directions" in his title referred not to departures from the basic psychoanalytic endeavor, but to evolutionary steps in a larger historical perspective of scientific development.

Basch, speaking from a deep knowledge not only of psychoanalysis, but of the literature of several allied areas of modern science, proposes that we may not be able to find answers to questions of fundamental importance for psychoanalysis by scrutinizing the relevant work from other fields. Of these disciplines outside of psychoanalysis, he enumerated information theory and cybernetics, system theory, developmental and cognitive psychology, and the affect theory of Sylvania Tomkins.

In the early stages of Freud's development of psychoanalysis, his clinical experience led him to depart from Charcot's theory that traumatic experience in childhood led to brain disorders responsible for neurotic suffering in adults. He found the brains to be not demonstrably disordered and further, through empathic listening, he found in neurotic productions not meaningless gibberish, but "a cleverly designed attempt to resolve a motivational conflict." Freud thus drew the conclusion that neurotic problems were psychological not organic in origin and as such required psychological solutions.

Dr. Basch pointed out that epistemologically, the above insight was the high point of Freud's theoretical achievement. In an attempt to ground psychoanalysis in physical science, Freud subsequently elaborated four speculative hypotheses which served as departures and distractions from the already sufficient model of ideational conflict. These

four hypotheses were: The brain hypothesis developed in The Project and carried over to the dream book as "the mental apparatus," the theory of instinctual motivation, an energy theory meant to explain the intensity of neurotic ideas, and a linguistic hypothesis intended to explain how somatic instincts could be converted to psychological wishes, a theory he repudiated in 1938.

Efforts to maintain and defend the above physicalistic models have served to impede the development of psychoanalysis as a method for investigating the meaning of human behavior. Ferenczi was the first in a long line to call attention to the fact that all analyses did not lend themselves to a technique based on first fostering and then interpreting a neurotic transference. He was denounced for not practicing psychoanalysis because his ideas ran counter to the instinct theory.

Dr. Basch has written extensively on the subject of empathy -- its definitions and uses. This evening he emphasized that empathy was not, as some of its enthusiasts seem to maintain, a new and superior way of listening to patients, and was certainly not a synonym for "gratification." He believed that "empathy" should be used as an adjective modifying the noun "understanding," empathic understanding being an understanding that "takes into account the affective component of a person's communication." Freud's affect was simply the conscious manifestation of instinctual discharge, a reductionistic concept creating untold problems for psychoanalytic practice and metapsychology.

A better theory of affect was first developed by Tomkins in 1962. Basing his views on Darwin's observations, Tomkins suggests that human communication is based on subcortically generated and autonomically mediated responses to intensity of stimuli and to stimulus gradients. Infants demonstrate affective responses from birth which adapt the infant to his environment interpersonally, insofar as they serve as communications, and intrapsychically, as they add quality to the memory traces being encoded by the infant brain. "Affect thus becomes the necessary motivational amplifier that determines not only how we act but how vigorously we pursue various particular behaviors."

*Los Angeles, March 1984.

To be empathic thus means to be aware of the affective message that is being sent, and, in psychoanalysis, to explore the nature and origin of that message with the patient. In The Restoration of the Self, Kohut restored psychoanalysis to its original effectiveness as a method of the psychological investigation of purposefulness or meaning in human behavior.

Kohut was also led by his clinical experience to formulate a theory of development quite different from Freud's. He saw that we are not born as asocial beings whose instincts are in need of taming but, instead are eager from the beginning for appropriate validating responses from others of our kind -- the basis for the selfobject theory of development. We now know from the findings of developmental sciences that organized goal-directed activity is present from birth, and that the infant's greatest pleasure lies in making things happen, so-called "pleasure in being a cause." Infants are hungry for stimuli, especially those provided by interaction with other humans. It is not the stimulation, but the baby's repeated failure to make contact and achieve communicative closure that produces first stress and eventually withdrawal and depression. This leads to the establishment of the defenses, symptoms, and other secondary problems that bring our patients to us.

What Kohut calls the selfobject function of the analyst is precisely the analyst's capacity to immerse himself in the patient's psychic reality and to resonate to the affective message being sent and respond appropriately -- i.e. first to convey his understanding of the patient's experience and when appropriate, follow with an explanation or interpretation. This is exactly what Freud did in the case of neurotic patients and it can now be used to include a wider range of disorders.

Basch clarified that Kohut's notion of a bipolar self was a model depicting the relationships between ambitions and ideals, and not an explanation for those relationships. Likewise, "self" is a term which belongs to information theory and may be defined as "a collective term for the supraordinate that ultimately governs the behavior of the individual in deciding upon programs of action."

Psychoanalysis can illuminate how a self develops, but the elucidation of why a self develops is a matter that lies outside the explanatory range of psychoanalysis proper.

In addition to the inborn affective propensities or templates described above, there are other innate tendencies such as the inherited transformation rules postulated by Noam Chomsky. (Dr. Basch, in his papers, has also applied the findings of Piaget to psychoanalysis.) These sorts of inherited propensities that prepare us for survival in a social milieu are what biologists now mean by "instinct." This is a view of instinct very different from the one which has been part of psychoanalysis -- a blind force leading to specific behavior if let run rampant, which must be directed, tamed and sublimated by constraints imposed upon it from without.

The notion of early empathic failure or lack of fit, means that the appropriate releaser for mobilizing affective response has either not been present or has been inappropriate in quality or quantity. Then defensive constraints are laid down which, though experienced as necessary at the moment to prevent pain and permit the adaptation of sorts, ultimately have the effect of thwarting or impeding growth in the affective sector. It is these defenses against affective experience which must be understood and analysed before a therapeutic transference can be formed which, when worked through, will lead to structural change.

For those of us who believe that psychoanalysis is essentially a hermeneutic science, Dr. Basch's presentation was indeed gratifying. In an exemplary and scholarly way, he has clarified, deepened and extended the stimulating work of Heinz Kohut, and has pointed to some "new directions." It will be for others to adduce the misuses and logical inconsistencies of this approach.



DISCUSSION OF DR. BASCH'S PAPER BY JOSEPH NATTERSON, M.D.

Raymond Friedman, M.D., Reporter

My assignment, which is to comment on Dr. Basch's paper, "New Directions of Psychoanalysis," primarily by discussing Dr. Joseph Natterson's critique, has proven to be a difficult one. The paper is long and complex, but the difficulties imposed on a reviewer revolve around claims that are only indirectly stated, or even implied, in the text. For example, Dr. Basch asserts that Dr. Kohut's contributions rival Sigmund Freud's discovery of psychoanalysis in importance. He treats Kohut's discoveries concerning pre-oedipal development as if they are the sum total of our knowledge in this area. In the process, Dr. Basch dismisses or ignores the contributions of two generations of workers interested in the very same territory. Dr. Basch thus sounds a strident chord and continues the zealousness which Dr. Kohut struggled against toward the end of his life. Throughout his formal discussion Dr. Natterson argues indirectly for integration of knowledge instead of exaggerated claims of supremacy for one line of thought.

Dr. Natterson quickly began to outline the deficiency in Dr. Basch's argument by stating, "Since Dr. Basch does not deal here with new psychoanalytic developments other than Kohut's, we must ask whether he regards Kohut's work as the only important new contribution." The force of Dr. Basch's claim for dominance of the Kohutian paradigm is reflected in Dr. Natterson's attempt to both satisfy and simultaneously place Dr. Basch's need for recognition in perspective. In a soothing fashion Dr. Natterson states,

The self-psychologists may validly claim to understand best what transpires during the very earliest period of childhood development. One might regard this as the very important period of pre-conflictual identifications. The Kohutians tell us a great deal about these processes, how they change but persist throughout life, and how they assert themselves in psychoanalysis.

The idea that empathically attuned parents can minimize or even eliminate conflict in an ideal development is presented by Dr. Natterson as both the logical and "absurd" outcome of the Kohutian paradigm. Dr. Natterson then argues that such a theoretical point of view produces ideas which collide with common sense experience and which beg for modification. The solution offered by Dr. Natterson is to fuse the Kohutian paradigm and the Freudian conflictual paradigm. He argues for the Freudian conflictual model as applicable to later stages of development, and he generously assigns the Kohutian model with the task of explaining pre-oedipal development. In Dr. Natterson's words:

So, let self psychology be paradigmatic for the dyadic-presexual, presocial, pre-conflictual periods of life. Let it claim a continuing high order of relevance, but not dominance, for the rest of life.

Dr. Natterson's plea for some territory most directly reflects the indirect force of Dr. Basch's claims. Below, I will demonstrate how Dr. Basch implies, but does not directly make, the powerful assertion that Dr. Kohut discovered pre-oedipal issues and, for all practical purposes, created the only utilizable model of pre-oedipal development. Dr. Natterson also reacts to a more remote and indirect assertion in Dr. Basch's remarks, which is that the Freudian paradigm should be discarded entirely. Dr. Natterson attempts to resurrect it, and in the process he joins Dr. Basch in a power struggle, which only promotes the grandiose idealization of psychoanalysis on both sides of the issue, and which violates the teachings I have always attributed to Dr. Kohut.

Meetings in New York in 1979 and in Berkeley in 1981 provided my last opportunities to hear Dr. Kohut discuss his work. At the meeting of the American Psychoanalytic Association, Dr. Kohut proclaimed a desire to fit his work into the corpus of psychoanalysis, while attempting to preserve its uniqueness. Later, at the Berkeley meeting, Dr. Kohut decried the flagrant misunderstandings and the abuses of his position regarding empathy. Dr. Kohut was attempting to save his clinical and theoretical contributions from over-generalization, over-popularization, and lack of integration within psychoanalysis. Dr. Basch's paper fosters the very excesses Dr. Kohut deplored, and I will attempt to explain how I view Dr. Basch proceeding in this manner.

Hyperbole is one of Dr. Basch's chief tools. He ricochets off the hyperbolic notion that psychoanalysis is "dead" by proclaiming

...these are exciting times; both from within and from without. There are developments that, taken together, herald advances in both the theory and application of psychoanalysis, whose significance is matched only by Freud's basic recognition of the psychological nature of neurotic problems and his development of the psychoanalytic method for investigating the motivation for human behavior.

That is a significant claim. What significant advances does Dr. Basch offer us?

Two categories of development are designated; those from within and those from without psychoanalysis. Dr. Basch states:

From without we now have available information theory, and the attendant discovery of cybernetics, and the theory of systems, progress in developmental psychology, and the affect theory of Silvan Tomkins; and from within psychoanalysis, there are the Standard Edition of the Complete Psychological Works of Sigmund Freud, the Jones' biography, and the clinical concepts advanced by Heinz Kohut.

Tomkins' affect theory is over thirty-five years old, and has been eclipsed by the contemporary work of Dr. Emde and his colleagues in Denver. Systems theory was indirectly introduced by Hartmann many years ago, and of course was formally presented by Peterfreund in the last generation. However, its direct impact on psychoanalysis has been minimal. The Standard Edition is an important resource, and to a lesser extent so is the Jones' biography. But neither is monumental. Thus, four of the six categories are of secondary importance, leaving only two major ones, namely: developmental theory (which Dr. Basch does not systematically discuss) and the clinical contributions of Dr. Kohut.

I was surprised that Dr. Basch did not bypass the work of the British Object Relations theorists, and the work of Dr. Mahler, by considering them as developmentalists, and thus outside of psychoanalysis. This argument, which was first advanced by Dr. Charles Brenner and then by Dr. Kohut, is neither unfamiliar not totally unacceptable to me, for I too wish to preserve psychoanalysis as a primarily reconstructive endeavor. Dr. Basch, however, disqualifies the above workers and developmental knowledge en masse in a rather obtuse and peculiar way. His argument develops in the following manner: Dr. Basch states, "The oedipal conflict, postulated as the central problem for everyone's development," is regarded as the Freudian position. He then draws attention to the fact that not all patients form transferences at this level of human relatedness. Dr. Basch then states that Ferenczi was one of the first to dispute the prevailing theory, and that

his observations were met by a storm of protest from organized analysis to the effect that what he was advocating was not psychoanalysis because it ran counter to the instinct theory, which postulated that the oedipal conflict and its vicissitudes were focal for all development.

Dr. Basch then makes the assumption that anyone who subscribes to a drive theory automatically holds the oedipal conflict as the center of development, and also remains rigidly blind to pre-oedipal problems. Such tenuous reasoning allows Dr. Basch to virtually dispense with the work of significant explorers of the pre-oedipal world. Dr. Basch states:

Alexander, Balint, Feder, Fairbairn, Winnicott, Mahler, the British object theorists, and others who have remained within psychoanalysis, while recognizing the need for modifications in various aspects of traditional psychoanalytic thinking, have not questioned the idea that basically it is the vicissitudes of instinctual energy that motivate our behavior.

CLINICAL CASE CONFERENCE

R.E. Brooks, M.D., Presenter

M.F. Basch, M.D., Commentator

Jay Martin, Ph.D., Reporter

On Saturday morning Mar. 24, 1984, following his Franz Alexander lecture of Friday evening, Michael Franz Basch, M.D. commented on an analytic case presented by Robert E. Brooks, M.D., a candidate in the Southern California Psychoanalytic Institute.

Dr. Brooks summarized and read process notes from a case of a forty-two year old woman, a patient in the Clinic. She had been married for sixteen years, but was divorced and remarried before beginning treatment. Her second husband is a writer, in politics, a radical, but in person a demanding tyrant. She has two adolescent children from her previous marriage. Her presenting complaint was that she felt uncontrollably angry, as evidenced by a recent argument and emotional break with her mother, to whom she had always been very close; and anger at her husband's adopted son, a latency-age boy of mixed Black and Puerto Rican parentage. She found herself unable to accept him; indeed, she was bitterly resentful at the attention which he got from her new husband; she was angry at the loss of attention that sharing affection with the boy meant for her; and she was angry at herself for her bitter feelings.

In her background were the following circumstances: her parents divorced early, and her mother had had numerous boyfriends. After her mother remarried, the patient, as a girl, had been sexually abused -- by manual stimulation -- by her stepfather.

More recently the picture has been complicated by the fact that the patient's husband has become angry at the patient's mother, causing the patient to be split between them in her allegiance. Moreover, she suspects her husband of possible infidelity. She now sees him as controlling, arrogant, and infantile. She attributes the problems in their relationship as his fault. Dr. Brooks, as I understand his presentation, tended to agree that the husband's deficiencies cause a large part of his patient's pain.

As Dr. Brooks presented his process notes, Dr. Basch began to intervene with a variety of questions: What had she meant by this or that? What was her reason for saying this? How did she connect x and y? What sense could be made out of such and such a comment? Clearly his emphasis was on trying empathetically to make sense out of the patient's communications. His recommendations included the suggestion of some confrontational comments and questions and in response to a query from the audience (from Dr. Jeffrey Weinberg) explained that it may be empathic to confront a patient with the patient's need to disavow, in that confrontation of this defense allows the patient to reinvest his or her world with meaning: it gives, in short, permission to the patient to acknowledge the meanings which have been split off so as to avoid anticipated narcissistic inquiries.

Disavowal formed the substance of Dr. Basch's commentary. His analysis of the case suggested that he believed the patient did not so much suppress memory or repress instinctual drives, but disavowed meanings connected with events, sensations or perceptions. He saw the patient as willing to communicate her anger and disappointments, but not to see their relevance to her.

As to treatment recommendations, he proposed that due to her disavowal of meaning, the case showed a wide array of problems in the here and now, and probably should not have started as a psychoanalysis. Instead, the case should have been treated psychotherapeutically and in a problem-oriented fashion.

That her central defensive mechanism was disavowal rather than repression seemed to be supported by one of the dreams reported by Dr. Brooks. The patient dreamed: "Someone, a woman, is giving me something out of a refrigerator. It is crabmeat and expensive. Then a wave comes and washes everything away." Dr. Basch saw the process of disavowal represented in the dream, interpreting the

patient's perception that her mother was cold (and "crabby"?), but then wiping away the painful meaning of this perception in the dream, as in consciousness. This was a telling point. Dr. Basch added a particularly brilliant point in indicating that the dangers of countertransference distortions are particularly strong in cases where disavowal is a predominating defense, since the analyst may be drawn into filling the gaps of meaning offered by the patient, with his own meaning, assumptions, guesses, hunches, etc. On the unconscious level, the patient can persuade the analyst himself to accept and not challenge the patient's disavowals through generating meaning on his own. Thus, the analysis may seem to be full of meanings, but they are largely provided by the analyst.

One of Dr. Basch's main research interests concerns disavowal as a defense, and so it is not surprising that he chose to emphasize this aspect of the case. Among the papers of his which those interested in the subject should consult are: (1) "Interference with Perceptual Transformation in the Service of Defense," The Annual of Psychoanalysis, 2(1974), 87-97; (2) "Psychoanalytic Interpretation and Cognitive Transformation," International Journal of Psycho-Analysis, 62(1981), 151-175, especially pp. 170 ff; and (3) "The Perception of Reality and the Disavowal of Meaning," The Annual of Psychoanalysis, 11(1983), 125-154. One of his main themes, in terms of its usefulness to us, has to do with the relation of the defense of disavowal to the narcissistic disorders. In the second of the above articles (1981), Basch writes:

It seems that disavowal rather than repression is the main defense of narcissistic character disorders, and that the task of overcoming the second censorship through interpretation is the main one in the analysis of such patients (p. 171).

...The narcissistic patient's disavowal of meaning makes him blind to the significance of his own behavior (p. 172).

In his most recent article (1983) he adds some very interesting remarks on the relation between disavowal, narcissism and non-psychotic splitting, and he relates the processes involved to the work of Vygotsky (1934) and Luria (1961) with speech and its impact on knowing.

Disavowal as a mechanism was certainly relevant to the discussion of the dynamics of Dr. Brooks' patient, and its impact upon the transference-countertransference manifestations was instructive. Dr. Basch's comments focussed an important perspective upon the case, and allowed us -- with Dr. Brooks -- to rethink the case from an interesting angle.

That angle would be enriched by a reading of Dr. Basch's papers. But the papers of René LaForgue, written in the 1920s, are by no means superceded by Basch's work, and anyone interested in the subject of disavowal -- "scotomization" is LaForgue's word -- should begin with his great article "Scotomization in Schizophrenia," which first appeared in German in the Zeitschrift (1926) and then in English in the International Journal of Psycho-Analysis, 8(1927), 472-478.

Had Basch not confined his remarks so exclusively to the interpretation of defenses, we would also have been able to look at Brooks' case from another angle. The patient, in my opinion, used speech not to convey meaning, affects or information but to draw the analyst into her compelling narrative of her own (narcissistically entitled) dramatization of herself as a tragic heroine, so that she would not have to face the pain of feelings of separation in the transference. She left "gaps" in her narrative not to disavow meaning -- or not only to do so -- but because those lacunae caused the analyst to ask questions (his most frequent style of intervention) and to enter her story, helping her to make it. She clearly wishes to be central in his life and she succeeded in inducing him to become an important part of hers -- not only in her transference wishes, but in fact. The interpretation of her emotions surrounding separation would have presented a highly interesting and relevant technical problem for a rich discussion. But what was studied was certainly rich enough and Dr. Basch's contributions to Dr. Brooks' case were warmly received and are likely to be long remembered.

POETRY AND THE MEDIA: IMPLICATIONS OF POETIC THERAPY*

Donald M. Marcus, M.D., Reporter

Often the best experiences are serendipitous. Such was the case on Sunday, May 6, 1984. I was curious as to how the speakers were going to link poetry to the media and to our work as analysts. It was not auspicious that there were only nine members in the audience when I arrived, and one of them left as I entered the room. The title turned out to be deceptive since only the chairperson, Dr. Shainess, made any reference to the media. I think the others were more inclined to think of poetry as itself a medium.

The first speaker was Dr. Owen Heninger, a psychiatrist from Whittier. He spoke of his using the patient's poetry in his work with four patients. This enabled them to put into words feelings which had been deeply buried. It put them in touch with themselves as well as with Dr. Heninger. He described a young woman patient, who had been rejected by her lover. She wrote a poem expressing her hurt and anger. As she lived with the poem and reworked it, she became aware that a slight shift in emphasis allowed her to see that, in addition to causing hurt and anger, the experience had left her feeling much stronger. Dr. Heninger, in a very moving presentation, gave examples from the poetry of Frost, Keats, Byron and Dickinson of the deep understanding that poets have of their own and the human condition.

The second speaker was Dr. Morris Morrison, a poetry therapist and workshop leader from Texas. He continued the theme of the possibilities for poetry to enable both patient and non-patient to reach and express deep experiences of pain, love, hatred and joy. He called attention to Freud's belief that poets were true psychoanalysts and that we analysts only attempted scientific understanding of what they already knew. In one, the author demonstrated that Emily Dickinson had, in her poetry, written about what Freud later discovered. In the other, the author put forward the proposition that William Blake was a psychoanalyst and Sigmund Freud, a poet.

The final panelist was Natalie Shainess. She chose two areas where she felt the media had a powerful effect, and she described the poetic response to it. The first is the plight of the middle-aged woman who has no man. She described the stereotypical view of the woman who is useless, has lost her youth and beauty and, worst of all, is not even seen by young people who "react to her dog and not to her." She read examples of poetry from patients and others who expressed the anguish of these unwanted and lonely women.

She wondered, in passing, whether a male analyst with a wife twenty years his junior would be able to "see" truly a middle-aged woman. The second area is how little poetry there is about women's breasts and the painful reaction of the flat-chested woman to the stereotype of the more "womanly" larger-breasted woman. She read a poem called "Flatsie," written by a woman who expressed her anger that even after nurturing her husband and three children she was still called "unwomanly" because of her flat breasts. Dr. Shainess also read a beautiful piece of her own poetry about buying a necklace from an Indian named Na-Ta. She told the Indian that they had something in common since her name was Na-Ta-Lie. It led to a very moving experience in which the Indian embraced her and she felt a spiritual connection occurred between them. Now, whenever she puts on the necklace, she has something of that experience.

One of the members of the audience, (which had grown from nine to twenty-five persons as the news of the beauty of the panel had spread) told of her experience analyzing two patients who wrote prolific amounts of poetry. She used the poetry and analyzed it as though it were dream material. At the end of successful analyses, one patient, a professional poet, continued to write poetry, while the other stopped. She worried that perhaps her analysis had harmed the second patient's creativity. The panel all agreed that a professional poet will continue to write because he or she needs to make his inner experience public. The patient who stopped writing was not a professional poet and had no further need to write poetry after the successful analysis. (I would add here that whatever the patient brings into the analysis is a communication and is, therefore meant to be analyzed. The patient who was not a professional poet apparently needed to communicate only with the analyst and, of course, himself.)

This panel was satisfying because it was so alive and the audience had an experience that was touching, poignant, sad, painful and joyous at different times. It left me with the thoughts that sometimes our patients speak poetry; sometimes we analysts speak poetry; and sometimes patient and analyst create it together.

*American Academy of Psychoanalysis Los Angeles meeting, May 1984.

MARGARET MAHLER'S PSYCHOLOGICAL BIRTH OF THE HUMAN INFANT*

Thomas F. Trott, M.D., Reporter

A fifty minute film by Margaret Mahler and her co-workers was shown to a capacity audience. After viewing the film concerning Mahler's work, its application and the implications to both adult and child therapy were discussed by the panel. The panel was moderated by Kato van Leeuwen and members included Al Schrut, Miriam Williams and Justin Call.

The film was a tightly edited work and represented eleven years of effort by Mahler, McDevitt and Bergman. It was begun in 1959 at the Master's Children's Center in New York. The Birth of the Human Infant and Mahler's other writing, with the noble exception that the normal autistic phase prior to symbiosis has been dropped in both the film and, I understand, from Margaret Mahler's own conceptualization. For me, the exciting thing about the film was that it allowed one to witness the symbiosis and phases of separation-individuation with the author. A picture is truly worth a thousand words and a movie with narration is even more valuable.

The film proceeded through symbiosis and the four sub-phases: differentiation, practicing, rapprochement and consolidation of object constancy. Symbiosis was defined as being at one with mother, and proceeding from symbiotic molding with mother to the stiffening with mother as boundaries are formed in separation-individuation. Mahler again emphasized the role of locomotion in the movement away from the symbiotic parent. Mahler brought friendly laughter from the audience with terms such as "checking back to mother" and "fully hatched child." She described the role of the "good-enough mother" as one who gently pushed the child toward the outside world. To be nearby, not interfering, but available for "emotional refueling" is necessary. "Low-keyedness" was discussed as a general lowering of mood and activity level to conserve energy in order to preserve the internal image of oneness with mother and to protect one's self from awareness of the separateness from mother. The transitional object was demonstrated as allowing exploration while mother was not physically present. The end of the film emphasized the importance of walking in psychological development. The joy of locomotion and the sense of mastery achieved by locomotion was clearly shown.

Dr. Al Schrut was the first discussant to speak and he lauded Mahler and her co-workers for their direct observation and development model as increasing the prestige of psychoanalysis as a science. He went on to discuss the role of early phases of separation-individuation in adults showing marked problems with ambivalence. Based on his own work in the Cedars-Sinai Parenting Project, Dr. Schrut talked about the role of separation-individuation in obsessive-compulsive neurosis. The more intrusive or unpredictable parents are, the less they will be able to modulate their child's emotional state. Between the practicing subphase and rapprochement, the child does not learn control over ambivalent feelings toward the mother. Autonomy is interfered with and the result is that the obsessive-compulsive never fully feels in control of his thoughts or actions.

Dr. Miriam Williams was the second discussant who observed that often one should look to the mother-child relationship to understand the origins of adult pathology. She presented a case history in which expected separation and loss abounded in the life of her patient and every day was anticipated as the last session of the week. She addressed also the need for skilled child care centers to understand the issues raised by separation from the working mother.

Dr. Justin Call was the last discussant who referred to Mahler as a grand theorist along with Erikson and Freud. Dr. Call pointed out that separation-individuation is largely determined by what happens in the symbiotic phase. He went on to describe five issues which were not addressed in the film: (1) The role of the transitional object and of phenomena in allowing the child to organize his ambivalence toward the mother and work it through. (2) The role of language and true language development and its importance in the way the child is organized both in relationship to the mother and to the outside world. The mutuality of language enriches the mother-child relationship in the last half of the second year of life. (3) The successful resolution of the rapprochement subphase is largely dependent upon other people, especially the father, who allows the child to

* UCLA/NPI, Los Angeles, October 1984

separate from the symbiotic connection with mother. (4) The role of aggression and limit setting discipline (not punishment) appropriately introduced in the rapprochement subphase facilitates development, whereas premature separation-individuation leads to defensive mechanisms and the inability to tolerate ambivalence in object relations. (5) Splitting of good and bad with projection, which Dr. Call feels is very common in dyadic relations, originates in the rapprochement subphase.

Dr. Leon Wallace raised several questions including whether adult schizophrenia is a defense or a regression and if a regression, to a normal or pathological infantile state. He reminded the audience also that we should be cautious that these are theories to be validated. Dr. Call answered Dr. Wallace's question by stating that there are simply not enough adequate data from infant observation in the first two years of life as to the development of adult schizophrenia.

Both Drs. Williams and Schrut discussed the current research by Emde, Brazelton and others which has invalidated the idea of a normal autistic phase. Dr. Schrut described patients with life long depression as victims of an imperfect symbiosis phase. I raised the question of whether "low-keyedness" was a forerunner of depression or represented a different emotional state. Dr. Call responded that "low-keyedness" was not depression, but is a mastery of separation and a turning inward for reflection. This represents a part of normal withdrawal as a form of "self-refueling" by one's own resources. He elaborated that this process may, however, develop with depression.

Dr. van Leeuwen raised the question of depressed affect even before rapprochement subphase. She pointed out also how much is demanded of the mother, especially during the rapprochement phase as pictured in the film. She gave a case example of how a mother's own conflict over separation-individuation was reactivated by the child's going through separation-individuation, and how this affected the way she dealt with the toddler's struggle in the rapprochement phase. The meeting adjourned with the audience feeling emotionally and intellectually refueled.

(Editor's Notebook continued from page 3)

Even the detailed and sometimes unfair sounding critical review by Susann Heenen (Frankfurt, A.M.) in the prestigious Psyche (June 1984) of the same book would be no reason for me to answer her. She puts my book on the Art and Technique of Analytic Group Therapy (Aronson, New York), by intention or oversight, in a wrong perspective by treating it as dealing with the science of group psychotherapy -- instead of as the title (given in misleading abbreviation only) implies: not as a science but as an "art and technique" of analytic group therapy. It was my conviction that analytic group therapy is more based on empathy, countertransference reaction, spontaneous responsiveness than exclusively on a scientific analysis. Only under this perspective of analytic experience can my work be judged. I am not a scientist -- in the sense and meaning Freud gave it; I am underscoring the humane side of relationships. However, psychoanalytic theory is a science too, not a physical, but a psychological one.

Martin Grotjahn, M.D.

(Chapiro, continued from page 11)

When the leadman led Philip to my office for our three o'clock appointment, I watched him doff his belted mackinaw and scarf. The movements were a mannequin's. A six-foot, wooden puppet. "You mean to wear your overshoes, or take them off?" I asked him. He said nothing. I waited for a moment then I posed again my questions.

"Or take them off," he echoed.

"Do you want to keep them on?"

"To keep them on," he mumbled.

"I suggest that you undo them. You'll be uncomfortable. It's pretty warm in here." He held the simple grin. I volunteered that I had seen him shoveling. I urged him on, inquiring about the job and if he liked it, working when it snows.

"It snows," he mimicked, somewhat clanging in that echolalic way that we ascribe to his disease. Although, I thought I saw a grimace. Just a fleeting twitch that drew the muscles of his jaw together.

"Can you talk to me about it? Do you like it?"

"Nice. I like it."

"Fine! That's fine. You like to shovel snow. So, can you tell me more?" His stare was absolutely vacant. I recriminated. My therapeutic conversation on its own had taken on the quality of senseless gibberish and in my deeper parts I wondered if he wondered whether I was mocking.

So there dropped a veil of silence. My contribution to it owed to a perplexity. For his, I didn't know the reasons. Then I queried inwardly if it really mattered. Philip's psychic life was banked down to a tiny pilot flame that hardly even flickered. Perhaps he didn't think at all. Or feel. Quite possibly exploring him had been a waste of time, the way the boss had cautioned.

"I shovel snow," he verbigerated. Out of nowhere.

"Oh, great! So...why the parking lot?" I pressed my luck.

"I have to make more room," upon which

followed silence. I wished him to continue. He did not. Nor did our psychotherapy. For very long, that is. A psychiatric resident must up and go in service of his training. The chronic patients at the hospital were periodic victims of that obligate abandonment.

So did I learn from Philip?

Anything beyond a tolerance for verbal incommunicado? He never did improve. It's possible a wizened character, approaching ninety, still is leaning on that shovel. So, was there any point?

At the close of that brief session that I mentioned, there had been a follow-up remark. It scored my thinking deeply. Repeatedly I have wondered and belabored the workings of the secondary process. And the deeper layers too, where two items that are similar become identical. Resemblance makes things equal.

"You have to make more room?"

"For more snow."

"I see...I think" And possibly I did. Because a stratum of my mind (where poetry is written) viewed that other farm, his mother, her demise, the subsequent re-marriage. Then the most un-kindest cut: his giving up his room. His displacement.

A myriad of cold, unwanted, ineluctable, impersonal, engulfing objects from above.

BOOK REVIEWS

Charles E. Hession, John Maynard Keynes: A Personal Biography of the Man Who Revolutionized Capitalism and the Way We Live. New York: Macmillan Publishing Company. 1984, Pg. 400.

A biography of Lord Keynes^{*} is really not required reading for psychoanalysts. This is of interest, however, because it attempts to link Keynes's genius to his homosexuality or bisexuality or androgeny. These terms are not well differentiated here. Lytton Strachey, for example, is described as an overt and confirmed homosexual with an androgynous mind. Hession has drawn upon the works of Arieti, Kris, Kubie, Marmor, Socarides and others.

Keynes was born in 1883, the son of a Cambridge don and a mother who was active in social work and, for a time, mayor of the town of Cambridge. A sister was born when Maynard was a year-and-a-half, and a brother when he was four. The former eventually became a social worker and married A.V. Hill who was to win a Nobel Prize in physiology. The brother became a distinguished surgeon in the R.A.F. as well as a renowned editor of the works of William Blake.

Keynes was a frail child who had rheumatic fever at five and a mild case of chorea. His nurses complained that he was "spoiled" by both parents. His father read bedtime stories to him, and reluctantly spanked him at times. He suffered the inevitable rejections of an eldest child, displaced by siblings; but he gained ever-increasing attention for his intellectual precocity. He repeatedly expressed a preference for his mother, and did not hesitate to tell his father that he came second. Hession considers that both parents were androgynous.

Keynes went to Eton where his height protected him from undue abuse by older boys. He did well, partly under pressure from his parents to qualify for a university scholarship. He still had time for golf and was socially successful. As was almost the fashion, he was infatuated with one or two other boys; apparently having an overt homosexual experience as an experiment in his final year at Eton. Homosexual love was as rampant in the schools and universities as it was in Fifth Century Athens; much of it was platonic, but it was commonly overt as well.

From Eton Keynes went to King's College, Cambridge. His principal interests were mathematics and social clubs. He soon became intimate with five men -- three years his senior -- who were to become founders of the famous Bloomsbury Group -- Thoby Stephen, Clive Bell, Leonard Woolf, Lytton Strachey, and Saxon Sydney-Turner. The future Virginia Woolf and Vanessa Bell were soon included. The emotional climate at Cambridge was that of "loving friends," but overt homosexuality among the group mentioned was probably limited to Keynes and Lytton Strachey. The intellectual atmosphere was one of rebellion against Victorian mores, and the cult of homosexuality, platonic or overt, was very much part of this.

After Cambridge, Keynes took the civil service examination in which he was second. The first place man took the Treasury leaving Keynes the India Office where he soon became the expert on international finance. He also began a thesis on probability theory. During this time he had an affair with Duncan Grant -- Vanessa Bell's painting partner. Despite tribulations this lasted until 1914. James Strachey and Adrian Stephen (Virginia Woolf's younger brother) -- both future psychoanalysts -- were regarded as "sodomists" at this time, but both had heterosexual affairs until they married during or just after World War I.

Keynes ultimately moved to the Treasury, became known for his writings on finance, and led the Treasury group at the Peace Conference in 1919. By this time he was wined and dined in the highest social circles, having friendships with many attractive young women. He was very close to Vanessa Bell despite her affair with Roger Fry and ambivalent attachment to Duncan Grant. When Keynes became disillusioned with the punitive Treaty of Versailles (along with such other bright young men as Leonard Woolf, Harold Nicolson, and Walter Lippmann) he came home from Paris in disgust. First General Smuts, then Bloomsbury friends urged him to write what became The Economic Consequences of the Peace. This was a brilliant dissection both of the terms of the Treaty and of its principal architects -- Wilson, Lloyd George, Clemenceau, and Orlando. The famous (or infamous) biography of Wilson by Freud and William Bullett confirms much of Keynes devastating portraits of the Big Four.

*The name rhymes with "brains" or Cain's."

Keynes's book brought him worldwide fame in his mid-thirties, and he was to go on in a few years to write The Economic Consequences of Mr. Churchill, protesting Britain's return to the gold standard. The basis of Keynesian economics, including the merits of deficit financing to deal with depressions, was laid in the 1920s, and culminated in such monumental technical works as A Treatise on Money and The General Theory of Employment Interest and Money.

In the early 1920s, Keynes fell in love with Lydia Lopokova, the premiere danseuse of the Diaghilev Ballet. This caused consternation in Bloomsbury, and in Cambridge she was considered a chorus girl. She had already jilted Heywood Broun in New York to marry Diaghilev's secretary, and was unfaithful to him because of a mysterious Russian officer; but she was soon back with the Ballet. There is no doubt that Lydia Lopokova was a pixie, but she could get off profound remarks in the guise of whimsy; and later she played Ibsen successfully on the London stage. The relationship with Keynes lasted and, after her divorce, they were married in 1925. Apart from a segment of Bloomsbury, the public response seemed to have been:

Was e're such a union of beauty and brains,
As the fair Lopokova and John Maynard Keynes.

During his Bloomsbury years, urged on by Vanessa Bell and Duncan Grant, Keynes collected Cezanne, Picasso, and other then contemporary paintings. Later, with Lydia, he was a patron of the theater, ballet, symphony, and opera as well as a bibliophile. A crowning achievement, as chairman of the Board, was his restoration of Covent Garden after World War II. He dies suddenly several months later on Easter Sunday, 1946. He was survived by both parents and by Lydia who lived until 1981.

As one reads this biography of Keynes, one discovers that his homosexuality was largely confined to his student years, and the years before World War I. Virginia Woolf, among others, noted that he matured during and after the War. He remained devoted to both parents and had close friendships with

Vanessa Bell, Lady Ottoline Morrell, Mary Marshall -- and his wife. Speculation on his androgynous makeup says mostly that he identified closely with both parents, that he was eventually at ease with members of both sexes. I do not find that this explains his genius. Parental pressures and the vicissitudes of being the eldest child, combined with inherited capacities, seem to be explanation enough. The homosexual phase was much longer and more overt than we attribute to early adolescence, and I think this was par for the course in pre-World War I British public (read private) school and Oxbridge cultures. As a psychobiography, this book is, for me, a good try.

Douglass W. Orr, M.D.
Ukiah, California

Fearful Warriors: A Psychological Profile of U.S.-Soviet Relations. Ralph K. White. (Free Press).

If only we could empathize with the leaders of the Soviet government, as distinguished from the Russian people, we could reduce tension, de-escalate the Cold War, and begin serious unilateral disarmament -- this is the proposition that White wants us to buy in order to solve the current world crisis. In making his case White surveys the histories of both twentieth century world wars and the four decades of tension with Russia since 1945. He finds many parallels between the present arms race and 1914.

White uses history poorly. He plays around with the facts to suit his wishful thinking. When he discusses ways that World War One could have been avoided, he suggests that Austria-Hungary "could have permitted much more rapidly increasing autonomy for its subject nationalities." Sure it could have, but then it would not have been what it was -- a dual monarchy dominated in foreign policy by a Magyar ruling class determined to remain so. White further proposes that in 1914 "Germany could have sponsored a plebiscite in Alsace-Lorraine to determine whether it should be returned to France," and not sought an overseas empire or built a navy. Yes, and the moon could be made of green cheese. If White's fantasies about what Germany could have done had happened it would not have been the Kaiser's Germany with its Junker agrarian-industrial oligarchy and jingoistic middle class. Most historians of the Second Reich admire Bismarck's restraint in not taking all of Lorraine in 1871 as the Prussian General Staff wished. If the German Empire would have held a plebiscite and returned the two provinces to France, the Reich would have been something so entirely different in nature and power structure from what it was as to make any lesson learned meaningless. We might as realistically speculate on the consequences of a Swiss referendum to give up neutrality or international banking.

I am reminded of an account by Ambassador Jean Jusserand who represented France in Washington during Theodore Roosevelt's presidency. Full of well meaning good will, Mrs. Roosevelt said to him: "Why don't you learn from the United States and Canada, we have a 3000 mile unfortified peaceful frontier. You people arm yourselves to the teeth." The good Ambassador replied: "Ah, madam. Perhaps we could exchange neighbors!"

White has an evident anti-Jewish and anti-Israeli bias. He refers to Hitler's "Crystal Night," November 9-10, 1938, as consisting "mainly of Nazi instigated window breaking." The broken glass was the least of it. Kristallnacht also meant the brutalization and imprisonment in concentration camps of 30,000 Jewish men over eighteen and the systematic burning or desecration of all synagogues and Jewish houses of worship in Germany and Austria.

Under the heading of "Exaggerated fear and Freud's 'Neurotic Anxiety'" he connotes unrealistic fears resulting in aggression and lists Israel's pre-emptive attack on Egypt in 1967. Here White's memory is short. How unreal was the Egyptian expulsion of the United Nations force and the closing of the Gulf of Aqaba? What was unreal about the mobilization of armies on Israel's borders for weeks coupled with threats of annihilation?

A "scenario" of the coming of World War Three has Israel seizing the Arab capitals of Beirut, Damascus and Amman, then blowing up Cairo, Alexandria, Baghdad and Riyadh with nuclear weapons only to have Israel itself totally obliterated while "the rest of the world heaves a great sigh of relief." There we have it! White heaves a great sigh of relief. At last the troublesome Israelis are disposed of. It is interesting that with all of his sweet reasonableness about conflict the author's most hostile fantasies of destruction come out against Israel and presumably in the service of peace. This

"scenario" is in contravention of the repeated Israeli restraint in capturing or occupying Arab capitals such as Cairo, Amman or Beirut when the road was open and it could have easily been done. White wants to blame the Jews for the danger of nuclear annihilation. Are we going to hear about Jewish well poisoning and ritual murder next?

The world is not in good shape. The threat is great. What is needed more than anything is hard realistic thinking. Instead White gives us sloppy, naive, sanctimonious sermonizing that if only we will "make nice" and see the other guy's point of view, all will be well. Often, the most dangerous thing in a crisis is to indulge in fantasies of the other person's basic good sense and restraint.

This book is one of the most aggravating, sweet, and soft-minded approaches to international conflict to come out since Henry Stimson closed the code room of the State Department saying "Gentlemen don't read each other's mail." If wishful thinking about the mendacity and rapacity of others could have prevented wars we would never have had either of the two World Wars of the twentieth century or a Cold War with Russia.

Peter Loewenberg, Ph.D.

The New Poverty, Michael Harrington. Holt, Rinehart and Winston, 1984.

There is something obnoxious about a book discussing American poverty in the delta of Mississippi and the steel towns of Pennsylvania written while the author was in Paris, Holland, Greece and Israel.

Harrington made his reputation as a journalistic mediator of poverty to America's oligarchy who were oblivious to the bag ladies, the crowded barrios and the aging poor of this land. In 1962 he wrote The Other America describing the poverty that exists within the so-called affluent society. That book, he tells us, "struck lightning in 1963" when it was picked up by the Kennedys and alerted them to the fact that there was a problem of economic inequality in America.

Harrington had lunch with Sargent Shriver and was recruited to the task force that shaped Lyndon Johnson's "War on Poverty." He gives a first hand description of these heady days. It was hard work being a poverty warrior in the White House. From 1968 to 1972 he was head of the American Socialist Party and led the U.S. Delegation to the Socialist International. He is an editor of Dissent.

In the interim the problems of American inequality have not been solved. This is poverty revisited a dozen years later to find technological unemployment, a decline in social mobility, and the U.S. with the worst aggregate health care of any advanced nation. Our inner cities have turned into fortresses, the rich evade taxes, and we have proportionately more people in prison than any country except Russia and South Africa. The alarm is valid and perhaps a fire ball directed anywhere should be welcome. It took Harrington to get through to John Kennedy and who knows to whom he will get through today? He paints a somber largely statistical picture of the weak spots in the American social fabric. Unfortunately he offers no new ideas for dealing with the sad realities of underemployment and hopelessness. His stock is limited to tired old Norman Thomas socialism which was novel sixty years ago. As the Rev. Martin Luther King, Jr., told him with tongue in cheek, "Why, Mike, we didn't know we were poor until we read your book."

Harrington was annointed to bring the reality of poverty to the encapsulated super-rich and powerful who view the world from the windows of chauffer-driven limosines as they shuttle from Manhattan apartments to Hyannis Port. Some people never have to handle money because others do it for them. For these few who pay no bills, Harrington's revelation of "the dirty little secret of our country...that most Americans don't have enough money" will come as shocking news. The book is addressed to cocktail parties he attended at the Dakota, "perhaps the most chic apartment building in New York City." It is patronizing, full of worn out ideas, a radical chic travesty recalling a thought attributed to Woody Allen, "if you mix Dissent and Commentary, you get dysentery."

Peter Loewenberg, Ph.D.

Medieval Christian Iconography, Talmudistic Thinking and the Psychoanalytic Approach.
Wilhelm Fraenger. (Bosch, Illustrated, New York: G.P. Putnam, 1983.)

Wilhelm Fraenger, East Germany, spent a lifetime studying the paintings of Hieronymus Bosch in the framework of his time (end of 15th and beginning of 16th century). Fraenger worked as an art historian and collected all his material until after the Second World War, The American military administration published a part of his manuscript at that time. Highly respected in East Germany, Fraenger finished his work -- more or less -- on Hieronymus Bosch and then died in 1964. He does not speculate, does not associate as an analyst may be tempted to do when looking at these strange and startling paintings. All his interpretations are based on comparing Bosch's cryptographic messages with the iconographic tradition of his time, especially the secret teachings of the "Homines Intelligentiae," the Free Adamites or the Brothers and Sisters of the Holy Spirit. They were a most heretic sect and had all to be burned to ashes on the stake when they were discovered and confessed. They behaved with great sexual freedom, believed in man's God nature and symbolically speaking, strove to eat all the fruit from the Tree of Knowledge in the Garden of Eden. They hoped to recreate Paradise on Earth.

For the analyst this religion of freedom has great attraction, especially since Hell, according to the Adamites is not eternal but will be terminated at the end of time. Many analysts have written about Hieronymus Bosch, always carefully staying away from the religious issues if they remembered Freud's warning and his personal experience with Christian mysticism. Any inclinations Freud may have had in this respect were buried deeply under the ruins of his friendship with C.G. Jung.

Besides insight into the more enlightened aspect of Christianity, analysts (who are pitted by Fraenger and not taken seriously) could learn from him the limitation of analytic interpretation. As the symbols of a patient's dream may open to very individual memories, so the symbol in history may be based in iconographic history and may be read like a cryptographic message.

This beautiful book appeared approximately at the same time as a much smaller book by Maccoby (Hyam Maccoby: The Sacred Executioner. Human Sacrifice and the Legacy of Guilt. Thames and Hudson, 1983.) Unknowingly, Maccoby analyses the essence of Christian dogma, the meaning of crucifixion and its symbolic rituals. He also does not seem to realize that this is a trespass into a field which Freud would never have penetrated by analytic thought.

Like Fraenger, Maccoby too came to his startling conclusion without analytic interpretation. He does not even seem to know more than Freud's Dream Interpretation and does not mention Freud's Moses or Totem and Taboo; neither does he give credit to Theodor Reik whose late works on Judaism were rightfully Reik's special pride.

Maccoby, who is much more difficult to read than Fraenger, is a Thalmud student, the librarian of the Leo Baeck College in London, well known by his work on Jewish topics, now at work on a study of St. Paul. He reads the Torah, studies the meaning of the text, disregarding the manifest content and looking for the latent meaning. All this he does with admirable skill, knowledge, intelligence and persistence. His methods are ridiculously similar to those an analyst would apply to the analysis of his patients' dreams. Associations are not free, but they are replaced by strict Thalmudic reading, thinking, researching and concluding.

It is reminiscent of the told truism: a good description contains already the interpretation, almost like in a free associative anamnesis as given by a psychosomatic patient.

It seems as if human sacrifice was a generalized ritual in history and Maccoby is full with information, as, for instance, that only the Aztecs seem to have been able to offer human sacrifice without guilt. Cain and Abel, Abraham and Isaac, are details of a long story leading and culminating with sacrifice of Jesus and the ritual "betrayal" by Judas.

It is reassuring for the always doubting skeptical psychoanalytic clinician to see how Fraenger, Maccoby and Freud worked with different methods but arrived at the same insights. There are no contradictions, no necessary corrections because when true insight is reached the methods to get to these insights had become irrelevant.

Martin Grotjahn, M.D.

The Evolution of Group Analysis. Malcolm Pines (Ed.). Institute for Group Analysis (London) and the Tavistock Clinic (London), International Library for Psychotherapy and Group Process. Routledge and Kegan, London, 1984. Pp. 391.

Originally it was planned to create a Festschrift for Michael Foulkes, honoring his pioneer work in group analysis. Michael's sudden death changed the intended Festschrift to a commemorative volume, with Malcolm Pines, a colleague and friend of S.H. Foulkes, as editor. Malcolm Pines aimed to produce a work with broad perspectives on the evolution of group analytic theory (and to lesser degree on the practical aspects of group analysis).

The book contains three S.H. Foulkes' memorial lectures by speakers who all have been collaborators of Dr. Foulkes from his days as a military psychiatrist during the war until his death.

T.F. Maine and James Anthony portray Dr. Foulkes in such vivid ways that their essay will bring this extraordinary man closer to group analysts who have not known him personally. Wilfred Abse describes his group work, especially in regards to the treatment of narcissistic behavior disorders. Patrick deMare relates memoirs of Dr. Foulkes, illustrating his work and way of thinking. M.L.G. Abercrombie, Hutton and Tampson, who all have known Dr. Foulkes for a lifetime, illustrate the value of group analytic thinking outside of the clinic. Helen Durkin combines an enviable skill of dynamic thinking, with a group analytic approach and develops the potential foundation for a unified field of general system theory.

James Home, Richard Skynner and, as always, Malcolm Pines show that it is possible but difficult to find a place for Lacan and C.G. Jung in this enormous field of group analytic work. The indefatigable Dr. Malcolm Pines used his essays to serve as an outline to the rich mine of Foulkes' writings which still remain to be explored, refined, expanded, discussed and integrated into the theoretical framework of group analysis. It is hoped that these aims will be realized in future volumes; perhaps they will deal also with more practical questions appealing more to the mind of the American therapist who is a practitioner first and a theoretician later.

Martin Grotjahn, M.D.

Beyond Case Histories: Better To Know Thyself. Sumner Shapiro, M.D. Dubuque, Iowa: Kendall-Hunt Publishing Co., 1984.

In his latest major work, the newly-released Beyond Case Histories: Better To Know Thyself, Sumner Shapiro has again given us a collection of finely-etched characters behaving with complete humanity in startlingly real situations.

Each of the eight "short stories" in the collection presents the reader with a slice-of-life vignette of sometimes-aching familiarity. ("Pagoda Bell" and "Lost and Found" are gems in this regard.)

The book's final entry is "Damon and Phintias," which, at 132 pages, is the length of a short novel in itself. It is not short, however, in tackling a rarely-mentioned topic, latent homosexuality, with wit and style.

The subtitle of Shapiro's book is Better To Know Thyself. What better way to see ourselves is there than seeing ourselves reflected in the eyes of another? Shapiro's characters make excellent mirrors.

I shall review only one of the vignettes, "Damon and Phintias."

The story begins with a nostalgic note of a medical doctor's internship in a Jewish hospital. Clever repartee and good humor fill the initial pages along with vivid, realistic pictures describing what goes on in the life of the overworked and overburdened intern during his year of subjugation and internment as a virtual slave within the medical system.

Descriptions of the director and other personnel are so cleverly and sharply delineated that anyone who had been an intern, as was this reviewer, can sense very readily the scenes and sounds, smells and tastes of the hospital life in which he was once immersed.

Scheinberg was a senior physician in the hospital who suffered in the medical world. He was forced to take more clinical medicine in order to pass the state medical examination, as were all physicians, but he had difficulty passing the exam.

Much humor and snappy dialogue take place between him and the protagonist, Sandy, regarding medicine, hospitals and philosophy of life in general.

Many of the common major diseases are described in medically accurate terms, but with a sense of humor and lighthearted play from the viewpoint of a young physician who feels he will live forever, unless he succumbs to a fear of some of the diseases he treats.

The flavor of the story may be seen in the following episodes.

Farfel is the administrator and Sandy comes to talk to him about a raise. He uses his usual wit and indicates that he has lost money in the stock market, sinking every penny "into nursing homes."

The administrator asks him how much they are paying and he says \$40.00 a month.

"Farfel crossed his legs. 'Nu then, what else what you want with the administrator.'"

"I'll come right to the point. I need money."

"Again?" A pained expression contorted the detective's face. It shylocked Sherlock -- so to speak, elongating the strong, admirable, eagle-beak, metamorphosing it into a rather wretched-looking, over-sized red gourd. Then Farfel squinted and he belched. "Pardon." His fingers found the slit. Money sets his thoughts a-whirr. "Money? Ach! Did I ever tell you what I supported my family on when I was your age?"

"I'm afraid so -- I mean, yes. The day we met. I mean, yes, 'again'. But also, yes, I heard about your humble origins."

"Are you sure?" A shoe string we lived on. Of course, things did cost a trifle less. How old are you, twenty-one?"

"Give or take."

"So what on earth could you be spending on? We furnish room and board."

"Stocks. I'm heavily into stocks. Margin calls. I sank every penny into Nursing Homes. They seemed so bright." Sandy didn't blink. He knew that Farfel had a soft spot and that he could introduce this much sarcastic levity. It turned out he was right.

"It isn't horses, is it?" Farfel winked. "More money? You told me the same thing two months ago--"

In another area of the story, Sandy finally makes it with Maureen, the Brodsky charge night nurse, who had a child to support and was Irish. Shapiro's prose is filled with a lilting and poetic description: "He clicked the lock in place. No protest from Maureen. He touched the reddish hairs that graced her supple neck. She shuddered. Then he took the fraying collar and he slowly parted it. For a tiny split in time the garment quite defied the laws of gravity -- then fell.

Slithered temptingly along the sinuosities that bound her femininity and crumpled on the floor.

Milk-white femininity.

And then beyond."

The book redounds with humor and warmth while it depicts enormous pathos which takes place within a hospital.

Various patients are discussed with diseases of all sorts, including the "octopus." She is a cereberal palsy victim afflicted at birth and is totally handicapped.

"She was the mistress of the 'octopus.' The CHS -- or central nervous system to the laity -- The ganglion that made the synapses with the outside world. And though constructed with a physical flaccidity, paretic Lu had awesome powers at her board. Inexorable flirt. Very Yiddish. Never apt to marry or bear kids. To compensate she talked. Banter. Come on glibness. Behind it like a rock, of course the truth.

She wore excessive amounts of garish purple lipstick. Not at all flattering. Tell-tale smears recorded how her uncoordinated fingers over-shot her mouth. Not pleasing either the abundant rouge. The application of cosmetics needed more than flabby wings -- nor had she opted surgically to normalize her beak. No aspirations for the screen, she'd jest. And so? And so its graceless parabolic curve resembled a banana upside down, sharp-edged, inverted on her sad, dark face."

The intern, Sandy, struggles from his ward rounds to his relationships with various administrators, older physicians who are senior to him, nurses, aides, technicians in a remarkably poignant and detailed description of the thoughts and feelings of an exquisitely sensitive young physician.

The pace of the dialogue is fast-moving, vivid, filled with intensity, around a skeleton of light-heartedness which makes the pain and sorrow of such a hospital bearable to a bright and energetic intern.

Sandy continues his work as an intern, and descriptions of the intern's work intermingle with flashes of free association and analytic work with his analyst.

At one point, his analyst indicates to him his homosexual attachments ("unconscious homosexuality") to Marco. This is especially indicated during the trip that he takes with Marco and another young man to Mexico on vacation from his internship.

The analysis (like the entire writing) is conducted with great insight, with the analyst sometimes quipping with his patient, although an analysis is being conducted.

An interpretation is made that if A makes love to B and tells C, his confidant, about it, then C makes love to B because his friend did. Algebraically, B may be subtracted leaving us with the formula that A and C made love.

Evidence is gathered throughout the analysis to indicate the homosexual attachment that Sandy has for Marco, another physician, although there are no overt or conscious homosexual longings. Here is a scene from the protagonist's Mexican trip:

"Saguaros, pampas, mesquite. Workmen shouldering machetes on their way to the fields -- on foot. Burros. Thick adobe walls and glassless windows. Vintage jalopies held together with an ingenuity of parts. A sombrero lying by the road and its owner 'stoning up' his car with a tree trunk and big rocks. Scenes that National Geographic brought to children at their desks: cattle, unfenced, wandering at will, dark-skinned children, bony dogs, and alien, bilingual traffic signs.

"Was it rude to snap a photo? Imperious to tip? Vista after vista, tableaux so unreal that each in his own way was literally awe-struck. 'Like stepping through the looking glass', from Sandy -- whose prior southernmost was Washington, D.C."

The author's own words regarding "Damon and Phintias" explicates a much-neglected theme, that of "latent homosexuality."

In Shapiro's words, "two men, functioning nicely in socially redeeming work and productive in the main, unwittingly reveal their love

for one another through the bridge that is offered by a girl whom both explore." The story shuttles back and forth smoothly from couch to narrative.

As the story ends, Sandy is able to express his strong feelings for the woman, Ellen, whom he feels he loves, and yet able to countenance any contrary homosexual feelings which existed within him.

Dr. Shapiro has established himself as a writer of great depth and range of expression. We will be hearing much about him in important literary circles.

Albert Schrut, M.D.

Editor's Note. Dr. Shapiro is a frequent contributor to the Bulletin (see page 11).

FRANZ ALEXANDER LIBRARY
Some Recent Acquisitions

From the General Fund.

Michael E. Lamb, (Ed.) Role of the Father in Child Development. 2nd Edition. Complete revision, updating. Theoretical advances single original 1976 edition.

Paul E. Stepansky. In Freud's Shadow: Adler in Context. History of the early days of analysis in Vienna, and a critical interpretation of Adler's ideas, using previously untranslated material.

Andrew Scull. Madhouses, Mad-doctors and Madmen. Transformations in treatment methods of insane during Victorian era in England and America.

Wayne A. Myers. Dynamic Therapy of the Older Patient. The feasibility, effectiveness and special problems in psychoanalysis of older patients.

Michael Franz Basch. Doing Psychotherapy. What actually happens in dynamic therapy, especially with patients whose pathology is minimal but whose personal relationships are troubled.

Jan Ehrenwald. Anatomy of Genius. Left and right hemispheric ascendancy in the brains of neurotics and of geniuses such as Leonardo, Beethoven, Mozart, Einstein and Freud.

M. Rosenbaum and M. Murodd (Eds.) Anna O. Fourteen clinicians of varying schools of therapy (i.e. psychoanalysis, family therapy, object relations) discuss how this famous patient would be treated today.

Rebecca S. Cohen, et al, (Eds.) Parent-hood. Developmental, psychosocial and clinical perspectives, psychoanalytically oriented.

Irene Fast. Gender Identity. Developmental psychology from infancy, stressing Piagetian concepts. Discusses Wolf Man.

Developing Child Series.

J. Dunn and C. Kendrick. Siblings.

P.M. Greenfield. Mind and Media.

Catherine Garvey. Children's Talk.

New additions to this excellent, beautifully illustrated series.

J.M. Masson. The Assault on Truth. Much publicized and highly controversial book by former Freud archivist.

Leon Edel. Stuff of Sleep and Dreams. Psychological influences on the works of many writers, e.g. Henry James, T.S. Eliot, Thoreau, Virginia Woolf, and others.

Sidney J. Blatt. Continuity and Change in Art. The importance of both the individual development and the cultural epoch on artistic and scientific creativity.

G.E. Atwood and R.D. Stolorow. Structures of Subjectivity. Phenomenological framework of psychoanalytic issues -- theory and clinical material.

Heinz Kohut. How Does Analysis Cure? Kohut's last work, published posthumously, "in responses and afterthoughts to The Restoration of the Self."

Gifts.

From Beatrice Kotas Memorial Fund.

Norman Kiell, (Ed.) Blood Brothers. Siblings as writers. The importance of the sibling relationship in the creativity of some distinguished artists -- as the Manns, Huxleys, Stracheys, Shaifers and others.

From Dr. Rose Fromm-Kirsten.

Twenty books from her library, including:

E.J. Anthony and T. Benedek. Depression and Human Existence; H.Z. Winnik, et al., Psychological Bases of War.

From Dr. Arnold Gilberg.

In memory of Rabbi Edgar Magnin.

J. Gedo and G.A. Pollack (Eds.) Psychoanalysis: The Vital Issues: Volume One. An interdisciplinary collection including essays on philosophy, conscience and on creativity through the life cycle.

From Dr. Peter Loewenberg.

Jean-Paul Satre. No Exit.

Andre Gide. The Immoralist.

Ludwik Fleck. Genesis and Development of a Scientific Fact. Using the concept of the Wasserman test as an example.

From Dr. Leon Wallace.

his book: Pleasure and Frustration.

Expansion of the definition of the pleasure principle, and its application to psychoanalytic therapy. Case histories.

From Dr. David Markel.

Thirteen psychoanalytic classics.

From the Curriculum Committee.

Donation of excess funds from meeting.

Used to purchase: Morris N. Eagle, Recent Developments in Psychoanalysis. Critique of modern theoreticians, as Mahler, Kohut, G.S. Klein and others.

From Dr. Louise Tyler.

Thirty-five issues of the SCPI Bulletin, an eleven year run.

From Valerie Davidson.

Collection of postcards with views, interior and exterior, of Freud's house in Vienna.

From Dr. Scott Carder.

Videotape of Franz Alexander Lecture, "Franz Alexander Revisited," 1984. Includes Drs. Eisenstein, Rogawski, Levy, Marmor and Pollock.

From Dr. John Lindon.

Audiotapes of meetings on Self Psychology, 1983.

From Dr. Morris Vilkin.

Videotape of interview with Dr. Martin Grotjahn on the development of family therapy.

ANNOUNCEMENT

A group of Mark Wallace's friends and colleagues have undertaken to establish a Marquis E. Wallace Memorial Fund to sponsor low-fee analysis of a needy child.

How better can we honor his memory than by initiating such a Fund in his name? Those who wish to contribute may do so by sending a check to:

THE MARQUIS E. WALLACE MEMORIAL FUND
Southern CA Psychoanalytic Institute
9024 West Olympic Blvd.
Beverly Hills, California 90211

GREENSON AUDIO VISUAL CENTER

The Ralph R. Greenson Audio Visual Center at the Los Angeles Psychoanalytic Society and Institute was dedicated Nov. 4, 1984. Dr. Greenson gave many community lectures applying psychoanalytic principles to everyday life. In these, as well as in his many other responsibilities, he emphasized the use of the latest in audio visual communications techniques. After his death in 1979, a Memorial Fund was established for the purpose of continuing his efforts in psychoanalytic education. One of the ways to pursue this goal was the development of the Ralph R. Greenson Audio Visual Center. The Center has available basic equipment for audio and video tape recording and viewing, including a VCR, a video camera, tape recorders and monitors, as well as a slide projector and screen. Presently there are over 400 various audio tapes forming the basis of the audio library including a collection of sixteen psychotherapy teaching videos made by Dr. Greenson.

Lena Pincus
Librarian

SOUTHERN CALIFORNIA PSYCHOANALYTIC INSTITUTE
9024 OLYMPIC BOULEVARD BEVERLY HILLS, CALIFORNIA 90211

Non-Profit Org.
U.S. Postage
PAID
Beverly Hills, Calif.
Permit No. 1073