

[The Early History Of Boundary Violations In Psychoanalysis](#)

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The notion of professional boundaries is a relatively recent addition to psychoanalytic practice. Freud and his early disciples indulged in a good deal of trial and error as they evolved psychoanalytic technique. The study of these early boundary violations illuminates the study of the evolution of the concepts of transference and counter-transference. The recent publication of the correspondence between Freud and Jung, between Freud and Ferenczi, and between Freud and Jones has provided us with extraordinary insights into the boundary transgressions that occurred in the early days of psychoanalysis. The boundary violations of the analytic pioneers have contributed to the legacy inherited by future generations of analysts. Institutional resistance to addressing these difficulties in contemporary psychoanalytic practice may relate in part to the ambiguities surrounding boundaries in the training analysis itself.

In a letter of December 31, 1911, Freud wrote to Jung about a matter of concern:

Frau C— has told me all sorts of things about you and Pfister, if you can call the hints she drops “telling”; I gather that neither of you has yet acquired the necessary objectivity in your practice, that you still get involved, giving a good deal of yourselves and expecting the patient to give something in return. Permit me, speaking as the venerable old master, to say that this technique is invariably ill-advised and that it is best to remain reserved and purely receptive. We must never let our poor neurotics drive us crazy. I believe an article on “counter-transference” is sorely needed; of course we could not publish it, we should have to circulate copies among ourselves [McGuire, 1974, pp. 475-476].

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- 1115 -

Over eighty years later, similar concerns about countertransference enactments and sexual boundary violations still haunt the psychoanalytic profession. However, unlike Freud, most contemporary analysts agree that discussions of countertransference no longer require a shroud of secrecy. Our journals regularly publish scientific contributions that feature frank disclosures of countertransference issues in the author's work. The analyst's countertransference enactments are widely regarded as both inevitable and useful to the process (Chused, 1991; Jacobs, 1993; Renik, 1993; Gabbard, 1994a). The concept of countertransference enactment is of considerable

heuristic value in understanding boundary violations. Most instances of such transgressions involve a countertransference action that reflects in part the patient's efforts to actualize a transference fantasy (Chused, 1991). In other words, the enactment is a joint creation involving a fit between what the patient has projected and the analyst's preexisting self- and object-representations (Gabbard, 1995).

Much of the enthusiasm for the concept of enactment, however, stems from the assumption that enactments are partial, and that the analyst catches himself before the enactment leads to a gross and unethical boundary violation. Indeed, enactments occur on a continuum from subtle changes in body posture to frank sexual involvement with the patient. More profound enactments that involve significant violations of the analytic frame are less likely to appear in the pages of our journals and in the public forums of our scientific meetings.

Every psychoanalytic institute and society has seen the ravages of severe boundary violations. It would be tempting for us to attribute these transgressions to a small handful of corrupt colleagues who suffer from severe character pathology and a propensity to act rather than reflect. This point of view allows all of us to projectively disavow our own vulnerability to boundary violations and see them as the province of a few who have nothing in common with the rest of us. The facts are otherwise. In my experience both of evaluating and treating individuals charged with sexual misconduct and consulting with psychoanalytic groups about problems in their midst, it has become increasingly clear that all of us are potentially vulnerable. Indeed, institutes and societies are often paralyzed in their efforts to take action when such cases surface because the analyst charged

- 1116 -

is frequently a leader in the field both locally and nationally. Even essentially ethical and apparently well-analyzed practitioners may suffer impairments in crucial ego functions (such as judgment) when they are in the midst of extraordinary life crises such as divorce, the death of family members, or other personal catastrophes.

Rather than condemn and moralize about our impaired colleagues, we need to acknowledge and examine our universal vulnerability that is inextricably linked to the psychoanalytic enterprise. A reasonable starting point is to study the nature of boundaries and boundary violations among the psychoanalytic pioneers as they struggled to define the parameters of the analytic relationship.

HISTORY OF BOUNDARY VIOLATIONS

The notion of professional boundaries is a relatively recent addition to psychoanalytic practice. Freud and his early disciples indulged in a good deal of trial and error as they evolved psychoanalytic technique. Like Josef Breuer, early analysts were often struck by the power of transference in the clinical setting. However, unlike Breuer, who managed to extricate himself from the treatment of Anna O. before disaster occurred, most of Freud's circle persevered in their efforts to define technique and were sucked into the vortex of a host of major boundary transgressions. As Freud noted to Oscar Pfister in a 1910 letter, "The transference is indeed a

cross” (Freud/Pfister, 5.6.1910; Meng and Freud, 1963, p. 39). As Freud's 1911 letter to Jung suggests, the concept of countertransference had not been systematically elaborated, so many of the early analysts lacked a solid conceptual framework with which to understand what was happening to them.

The study of boundary violations in the history of psychoanalysis is also a study of the evolution of the concepts of transference and countertransference. As Haynal (1994) has pointed out, issues of transference, countertransference, and the optimal level of emotional involvement by the analyst were all forged in the context of triangles involving boundary violations. First, Freud was the third party in the Carl Jung-Sabina Spielrein relationship, and shortly thereafter he was enlisted to solve the problematic involvement between Sandor Ferenczi and Elma Palos. Finally, a similar triangle

- 1117 -

was created when Freud analyzed Loë Kann, Ernest Jones' common-law wife.

The recent publication of the correspondence between Freud and Jung, between Freud and Ferenczi, and between Freud and Jones has provided us with extraordinary insights into the underlying dynamics of boundary transgressions in psychoanalysis. The point I wish to stress is that we read these cases not only because of their historical value or because they provide titillating gossip. Rather, we study them to attempt to understand the fundamental vulnerabilities of the psychoanalytic situation. It is essential for analysts to study the history of boundary violations in order to avoid reenacting violations with their own patients.

Early on in his work with hysterical patients, Breuer and Freud (1893-1895) learned that patients often fall in love with the analyst and expect reciprocal feelings: “In not a few cases, especially with women and where it is a question of elucidating erotic trains of thought, the patient's cooperation becomes a personal sacrifice, which must be compensated by some substitute for love. The trouble taken by the physician and his friendliness have to suffice for such a substitute” (p. 301). As Friedman (1994) has stressed, the psychoanalytic situation involves an element of seduction. The patient is misled by the analyst to expect love while the analyst tends to provide an ill-defined substitute for love. Friedman acknowledges the fact that the exact nature of that substitute remains difficult to define.

The vicissitudes of love or substitutes thereof continued to haunt Freud throughout the development of psychoanalytic technique. Recognizing the power of transference love to keep the patient involved, he noted in a letter to Jung that “the cure is effected by love” (McGuire, 1974, pp. 12-13). A little over a month later, a comment in the Vienna Psychoanalytic Society minutes seemed to confirm this view: “Our cures are cures of love” (Minutes I, [p. 101, cited in Haynal, 1994](#)).

It should be noted that Freud's understanding of transference was rather rudimentary in the early years of psychoanalysis around the turn of the century. In his description of a patient who developed a wish that Freud would kiss her, he noted that such wishes arise through the phenomenon of transference, which he attributed to a “false connection” (Breuer and Freud,

1893-1895, p. 302). This was

- 1118 -

the first appearance of the term transference in Freud's writing. In an extensive footnote in his discussion of Frau Emmy Von N., Freud (Breuer and Freud, 1893-1895) elaborated on this notion. His meaning clearly refers to a rather restricted view of transference, namely, that when an unconscious connection is not apparent to the patient, the patient manufactures a conscious or false connection to explain his or her behavior. This idea that transference love was inherently "false" or "unreal" was revisited at some length twenty years later in "Observations on Transference-Love" (1915). A careful reading of that paper suggests that Freud has shifted his view a bit to acknowledge that there were "real" aspects of transference love in addition to those that stem from unconscious connections with significant figures in the patient's past. In his struggle to clarify whether transference love was similar to or different from love outside the analytic setting, Freud appeared somewhat equivocal (Schafer, 1993; Gabbard, 1994b), lending an air of ambiguity to the issue that persists to this day. In a postscript to the Dora case (1905), Freud recognized that transference involved an erotic reenactment of a drama from the past. If the past experiences had been of a positive nature, the patient would be suggestible and compliant in the transference. If they were negative, the patient would be resistant (Kerr, 1993).

Because Freud was influenced by figures like Bernheim, many observers have assumed that he regarded persuasion and suggestion as the active ingredients in psychoanalytic treatment. His position was actually a bit more complex. Freud regarded erotic attraction as the true vehicle of cure, whether the cure was by hypnotic suggestion or psychoanalysis. In his correspondence with Jung, he explained that the patient's erotic attraction to the analyst accounts for the patient's efforts to understand and listen to the analyst's interpretations.

Much of Freud's conceptual struggles with transference, countertransference, and the concept of love can be glimpsed in his correspondence with Jung. In 1904 Jung had analyzed Sabina Spielrein, his first analytic case, for a period of approximately two months (Kerr, 1993). Following termination, Jung and Spielrein developed a working relationship in Jung's psychology lab. When she became a beginning medical student, the friendship between the two intensified. In the midst of this friendship, there were intermittent interviews that revived aspects of the analyst-patient relationship. Four

- 1119 -

years after the original two-month treatment, Jung and Spielrein engaged in a tempestuous love affair that culminated in Spielrein's attacking Jung and drawing blood when he attempted to end the relationship. Her reaction to Jung's efforts to end the relationship is a common development in such affairs and has been described as "cessation trauma" (Gutheil and Gabbard, 1993).

The relationship between Jung and Spielrein is a cogent illustration of why so many "posttermination" romantic relationships present the same difficulties as those concurrent with analysis. Although the treatment had officially ended, the transference and countertransference dimensions of the relationship continued with a life of their own outside the formal confines of

treatment.

Whether or not the two actually engaged in sexual intercourse cannot be established with certainty from the written correspondence and other documents remaining. However, the details of “did they or didn't they” are relatively unimportant in light of the pervasively boundariless relationship that characterized the period of years following the analysis. The scholarship of Kerr (1993) and Carotenuto (1982) has reconstructed the Jung-Spielrein relationship in sufficient detail that much can be gleaned from the data about the development of such relationships.

As Jung's first patient, Spielrein was extraordinarily special. Infatuated with Jung, Spielrein went on to attend medical school and move into the role of student and friend. The two of them soon began to view each other as soulmates who were connected through mystical, telepathic bonds. Jung, who was prone to an interest in the occult and parapsychology, became convinced that Spielrein and he could know what the other was thinking without verbalizing their thoughts. In most cases of sexual boundary transgressions in which there is intense infatuation between analyst and patient, the first boundary to disintegrate is the intrapsychic boundary between self and object. In other words, there is a kind of psychological fusion experienced prior to actual physical involvement.

Another striking feature of many instances when analyst and patient become sexually involved is that the analyst appears to take the transference at face value. In many cases it appears that the analyst approaches the relationship with one particular patient as though the transference feelings are an exception to other situations

- 1120 -

of erotic attachment in the analytic setting. It is noteworthy in this regard that Jung pointedly avoided using the term transference, even after the appearance of Freud's Dora case in 1905 (Kerr, 1993). He eventually used the term transposition instead. There is something inherently humbling in the psychoanalytic notion of transference. The analyst must reluctantly acknowledge that forces are at work that transcend his or her irresistible magnetism. If any other analyst were sitting in the chair, similar feelings would appear. Analysts who fall in love with their patients and become sexually involved with them often are longing to believe in the exclusivity of the patient's feelings toward them and cannot bear the pain of thinking that feelings of such intensity could be transferred to someone else (Gabbard, 1994a).

Another dimension to the Jung-Spielrein relationship was brought to light by Kerr's (1993) analysis of the psychological themes in their scientific writings of the time. Jung was preoccupied with the image of mothers as terrible and destructive. Apparently because of his intense resentment of his own mother, Jung dwelled on an image of a malevolent, incestuous mother who was responsible for man's mythological descent into hellish nether regions. At the same time, Spielrein's writings were concerned with the inevitability of destruction as a necessary accompaniment of love. As Kerr notes, “The two texts, his and hers, adjoin each other like severed halves of a forgotten conversation” (1993, p. 333).

Spielrein's long-neglected thesis deserves further study. Sexuality, in her view, always harbors an

implicit threat of dissolution of the self. From a Darwinian perspective, the survival of the species is superordinate to the narcissistic investment of the individual. Part of her notion that sexuality involved dissolution was based on her view that fusion rather than pleasure might be the aim of the sexual act, a hypothesis that psychoanalytic clinicians often confirm in the exploration of patients' sexual fantasies. The ego, then, must always resist sexuality at some level, and Spielrein suggested that the defenses against disintegration of the self most often took the form of inner images of death and destruction.

Connections between sexuality and death had been observed for centuries—in legend (Tristan and Isolde), in colloquial phrases (the French term for orgasm, *le petit mort*), and in verse (the poetry

- 1121 -

of John Donne). However, the particular connection forged by Spielrein seems to have had specific significance for the relationship she was involved in with her former analyst. Indeed, the relationship nearly destroyed Jung's career and brought Spielrein to the edge of despair. Jung tried to rationalize his way out of his unethical behavior by explaining to Spielrein's mother in a lengthy letter that he had never charged her a fee for his services: "I could drop my role as doctor the more easily because I did not feel professionally obligated, for I never charged a fee. ... But the doctor knows his limits and will never cross them, for he is paid for his troubles. That imposes the necessary restraints on him" (Carotenuto, 1982, p. 94). In another letter he stated to Spielrein's mother that: "I have always told your daughter that a sexual relationship was out of the question and that my actions were intended to express my feelings of friendship" (Carotenuto, 1982, p. 94). He later described his correspondence with Frau Spielrein to Freud as a bit of "knavery."

Many modern cases of sexual boundary transgressions by analysts in some ways confirm Spielrein's thesis. One of the most striking aspects is the self-destructiveness in the analyst's behavior that is obvious to everyone but the analyst. It appears that the analyst unconsciously enacts a masochistic scenario that relates to childhood wishes of self-sacrifice. Often the details of this fantasy involve a wish to "go out in a blaze of glory" by acting on incestuous wishes for a parent and experiencing the retaliation and punishment for a forbidden act of pleasure. Sexual consummation with the patient offers a special means of actualizing such motives. The destructiveness inherent in libido may have been particularly apparent to Jung and Spielrein because of their constant struggle with boundaries and boundary violations.

Jung ultimately enlisted Freud's help in extricating himself from the situation, but Spielrein continued to feel that she had been used and deeply hurt by the relationship.

Freud later observed a similar turn of events in Ferenczi's treatment of Elma Palos. Ferenczi had previously analyzed Elma's mother, Gizella, a married woman, with whom he had had an affair. Ferenczi fell in love with Elma in the course of analyzing her and finally persuaded Freud to take over the case (Dupont, 1988; Haynal, 1994). What ensued was a rather remarkable series of boundary violations.

Freud made regular reports to Ferenczi regarding the content of the psychoanalytic treatment of Elma and specifically kept Ferenczi informed of whether or not Elma continued to love him. He also sent confidential letters to Gizella about Ferenczi. Ultimately, Ferenczi took Elma back into analysis, but she ended up marrying an American suitor while Ferenczi himself married Gizella in 1919.

It is clear from the Freud-Ferenczi correspondence (Brabant, Falzeder, and Giampieri-Deutsch, 1994) that Freud found the situation messy and highly disconcerting. In a letter to Gizella Palos in 1911, he made the following observation: “The main difficulty is this: Does one want to build this alliance for life on concealing the fact that the man has been her mother's lover in the fullest sense of the word? And can one rely on the fact that she will take it well and overcome it in a superior manner when she knows it?” (pp. 320-321).

Freud did not try to disguise his feeling that Gizella should be the preferred choice for Ferenczi. In his correspondence with Ferenczi, Freud made a number of disparaging comments about Elma, including that she had been spoiled by her father's lavish attention and was incapable and unworthy of love. Dupont (1994) explained this departure from neutrality as a reflection of Freud's concern that a young wife and children might have distracted Ferenczi from his devotion to the psychoanalytic “cause.”

Ferenczi appeared to gain some perspective on the situation when he interrupted Elma's treatment and sent her to Freud. On New Year's Day of 1912, he noted to Freud, “I had to recognize that the issue here should be one not of marriage but of the treatment of an illness” (Brabant et al., 1994, [p. 324](#)). Later, on January 20 of the same year, he wrote to Freud, “I know, of course, that by far the greatest part of her love for me was father transference, which easily takes another as an object. You will hardly be surprised that under these circumstances I, too, can hardly consider myself a bridegroom any longer” (Brabant et al., 1994, [p. 331](#)).

The relationship between intrapsychic boundaries and the erotized countertransference of Ferenczi appears to have been pertinent. He viewed Elma as psychotic or near-psychotic and was fascinated by the apparent fusion of self and object and by her openness to him. A similar phenomenon occurred later in Jung's career

with Toni Wolff, but the chapter in Jung's memoirs describing this episode was expurgated (Kerr, 1994, personal communication).

Despite this messy situation, Freud subsequently took Ferenczi into analysis, a process that occurred in a series of three meetings (some of which occurred during two- to three-week holidays) between 1914 and 1916. Actually, a more informal analysis took place in the summers of 1908 and 1911. He appeared to have some misgivings about jeopardizing the friendship by introducing an analytic relationship but nevertheless proceeded (Haynal, 1994). The ensuing analysis (I use the term advisedly) took place after Freud and Ferenczi had voyaged to America

together for the Clark University lectures. On the ship they had done a bit of mutual analysis. Blum (1994) suggests that their subsequent periods of analytic work should be thought of as “analytic encounters.” Freud would write Ferenczi letters addressed “Dear Son” in which he would suggest that they would have two analytic sessions a day while also having a meal together. Hence, the analytic relationship occurred in parallel with other relationships, including mentor-student, close friends, and traveling companions (Blum, 1994). Moreover, Freud apparently wished that Ferenczi would ultimately marry his daughter (Haynal, 1994).

To be fair to Freud, this blurring of the roles of friend and analysand had caused him to undertake Ferenczi's analysis with some trepidation. Indeed, the correspondence between the two of them suggests that Ferenczi placed a great deal of pressure on Freud to analyze him and that he finally capitulated only after expressing considerable reluctance. On the other hand, he had analyzed Max Eitingon during strolls through the streets of Vienna, and Kata Levy during summer holidays at her brother's house (Dupont, 1994). Ferenczi apparently entered the analytic process with bitterness that was masked by obsequious loyalty. In a letter of May 23, 1919, he made the following comment to Freud:

from the moment you advised me against Elma, I developed a resistance against your person, that even psychoanalysis could not overcome, and which was responsible for all my sensitivities. With this unconscious grudge in my heart, I followed, as a faithful “son,” all your advice, left Elma, came back to my present wife, and stayed with her in spite of innumerable attempts in other directions [quoted in Dupont, 1994, p. 311].

- 1124 -

After the analysis, Ferenczi continued to have resentment toward Freud because he had not analyzed his negative transference. Freud defended himself in a letter of January 20, 1930: “But you forget that this analysis took place 15 years ago, and at that time we were not at all sure that this kind of reaction must happen in all cases. At least, I was not. Just think, taking our excellent relationship in account, how long this analysis would have had to go on to allow the manifestation of hostile feelings to appear” (quoted in Dupont, 1994, [p. 314](#)).

In that same letter, Freud seems to have come to the recognition that analyzing someone with whom one has a preexisting friendship is ill-advised: “I notice that, in connecting things with our analysis you have pushed me back into the role of the analyst, a role I never would have taken up again toward a proven friend” (quoted in Dupont 1994, [p. 314](#)).

Although Ferenczi renounced his wish to marry Elma, he went on to engage in other forms of boundary violations that were also problematic. After his break with Freud, deeply bitter about his “training” analysis, he began to experiment with mutual analysis. With four female American patients, he tried analyzing them for an hour followed by an hour in which he would let the patient analyze him. Entries in his diary at this time demonstrated his confusion of his own need to be healed with that of his patients: “Our psyche, too, is more or less fragmented and in pieces, and, especially after expending so much libido without any libido-income, it needs such repayment now and again from well-disposed patients who are cured or on the point of being cured” (Dupont, 1988, p. 13). A few months after this January 17, 1932, entry, he abandoned

mutual analysis, apparently because of the obvious problems with confidentiality. If he stuck to the basic rule of saying whatever came to his mind, he would be telling one of his patients about the personal disclosures of other patients.

Another form that Ferenczi's wish to be loved and healed took was an effort to provide his patients with the love they had not received from their parents (Gabbard, 1991). He saw his patients as victims of actual sexual trauma and abuse, and he sought to repair that damage. His technique included kissing and hugging the patient like “an affectionate mother” who “gives up all consideration of

- 1125 -

one's own convenience, and indulges the patient's wishes and impulses as far as in any way possible” (Grubrich-Simitis, 1986, [p. 272](#)). He had grown up in a family with many siblings and never felt he received the love that he wished to have from his mother (Grubrich-Simitis, 1986; Blum, 1994). She was apparently harsh and cold, in Ferenczi's view, and he thus tried to give to his patients what he himself did not receive as a child (Gabbard, 1991). This pattern is a common one in which analysts desperately attempt to provide love to their patients, with whom they are overidentified as victims of mistreatment. When the love is not reciprocated, or the patient does not improve, the analyst may escalate his loving efforts in a defensive attempt to avoid his growing resentment and hatred of the patient (Searles, 1979; Gabbard, 1991, 1994c).

On December 13, 1931, Freud expressed his growing concern about Ferenczi's technique in a famous letter:

we have hitherto in our technique held to the conclusion that patients are to be refused erotic gratifications. ... where more extensive gratifications are not to be had milder caresses very easily take over their role. ... A number of independent thinkers in matters of technique, will say to themselves: why stop at a kiss? Certainly one gets further when one adopts ‘pawing’ as well, which after all doesn't make a baby. And then bolder ones will come along who will go further to peeping and showing—and soon we have accepted in the technique of psychoanalysis the whole repertoire of demiviergerie and petting parties, resulting in an enormous increase of interest in psychoanalysis among both analysts and patients. ... Father Ferenczi gazing at the lively scene he has created will perhaps say to himself: maybe after all I should have halted my technique of motherly affection before the kiss [Jones, 1957, [p. 164](#)].

Clearly, Freud was already aware of the well-known “slippery slope” phenomenon in which boundary violations that begin as minor and apparently harmless gradually escalate to major violations that are damaging to the patient in the process.

Freud was involved in another boundariless menage à trois when he undertook the analysis of Loë Kann. Ernest Jones and Kann had been living as husband and wife (although not technically married) since shortly after they met in London around 1905. Jones' comment in a June 28, 1910, letter to Freud suggests she apparently came to

him as a patient: “Now I have always been conscious of sexual attractions to patients; my wife was a patient of mine” (Paskauskas, 1993). In 1908, when Jones moved to Canada, Kann joined him there.

Jones' reputation in Canada was marred by rumors that he was recommending masturbation to patients, sending young men to prostitutes, and even showing obscene postcards to patients to stimulate their sexual feelings. A former patient threatened to charge him with having had sexual relations with her, so Jones paid her \$500 in blackmail money to prevent a scandal. He explained this situation in some detail to James Jackson Putnam in a letter of January 13, 1911 (Hale, 1971). He clarified that he had seen this patient four times for medical purposes and that there was no truth to her claim that she had had intercourse with him. She had also attempted to shoot him, so he was protected by an armed detective. Jones described the patient as a hysterical homosexual woman who, after leaving his care, went to a woman doctor of strict moralistic views with whom she fell in love. Jones inferred that his female colleague had encouraged the former patient to bring charges against him. He felt he was foolish to pay the blackmail money because it would be harmful either way. In a footnote to the Freud-Jones correspondence, Paskauskas (1993) suggests that the female doctor was Emma Leila Gordon, an extremely religious member of the Women's Christian Temperance Union who frowned on alcohol consumption and loose living.

Concerned that he would lose Kann, Jones asked Freud if he would analyze her. She was afflicted with a number of somatic symptoms as well as morphine addiction. In 1912, Kann and Jones moved to Vienna so Freud could begin his treatment of her. Freud was evidently quite taken by her; he told Ferenczi in a letter of June 23, 1912, that “I will be pleased to be able to expend much Libido on her” (Haynal, 1994). The bond between Freud and Kann grew stronger as the treatment continued, even to the point where he invited her to spend Christmas Eve with his family (Appignanesi and Forrester, 1992). Freud made regular reports to Jones, apparently without regard for confidentiality, just as he had done with Ferenczi when he analyzed Elma. In fact, a major topic of the Freud-Ferenczi correspondence was their parallel observations about Jones, who Ferenczi was analyzing, and Kann.

As Jones felt increasingly excluded from the process (more by Kann than by Freud), he became sexually involved with his maid Lina. Meanwhile, Freud steered Kann in the direction of Herbert Jones, a young American to whom she was drawn (Appignanesi and Forrester, 1992).

Freud clearly saw Ernest Jones as sexually impulsive, and the correspondence during this time reflects his disapproval of Jones' behavior. In a letter of January 14, 1912, he said to Jones, “I pity it very much that you should not master such dangerous cravings, well aware at the same time of the source from which all these evils spring, taking away from you nearly all the blame but nothing of the dangers” (Paskauskas, 1983, [p. 124](#)). Paskauskas suggests that the reference to his cravings as “dangerous” might have reflected Freud's concern about Jones' sexual boundary violations with patients. Paskauskas also quotes Jones' letter of April 1, 1922, regarding his

analysis of Joan Riviere: “It is over twelve years since I experienced any [sexual] temptation in such ways, and then in special circumstances” (Paskauskas, 1993, [p. 466](#)). It is also significant that Freud's technique papers were written during this same time frame, which suggests that their emphasis on abstinence and objectivity may have grown out of concern for the boundariless behavior of his disciples (Barron and Hoffer, 1994).

Freud's need to place himself in the role of consultant to his male protégés regarding their women was clearly an overdetermined role that he found himself repeating again and again. Phillips (1994) notes that Freud appeared to take considerable glee in his ability to handle women that Jones found unmanageable, like Loë Kann and Joan Riviere. He also was patronizing to the point of condescension in his attitude toward Jones on these matters.

Freud's attitude about sexual relations between analyst and patient, however, was not nearly as cut and dried as implied by his correspondence with Jones and by his 1931 letter to Ferenczi. Although Jung expected a severe rebuke for his dalliance with Spielrein, Freud was surprisingly understanding and empathic. He wrote to Jung

Such experiences, though painful, are necessary and hard to avoid. Without them we cannot really know life and what we are dealing with. I myself have never been taken in quite so

- 1128 -

badly, but I have come very close to it a number of times and had a narrow escape. I believe that only grim necessities weighing on my work, and the fact that I was ten years older than yourself when I came to psychoanalysis have saved me from similar experiences. But no lasting harm is done. They help us to develop the thick skin we need to dominate “counter-transference,” which is after all a permanent problem for us; they teach us to displace our own affects to best advantage. They are a “blessing in disguise” [McGuire, 1974, pp. 230-231].

Freud took a similar attitude of tolerance when a sexual transgression of Tausk came to light (Eissler, 1983). Eissler noted that in contrast to the high ethical standards we have today in psychoanalysis, Freud quite possibly felt less puritanical about sexual boundary transgressions. Freud, like Jung, appeared to blame female patients for the transgressions of analysts: “The way these women manage to charm us with every conceivable psychic perfection until they have attained their purpose is one of nature's greatest spectacles” (McGuire, 1974, p. 231). Despite this censure of women, however, Freud also expected the male analyst to be skilled enough to avoid the seduction (Eissler, 1983).

It is possible that Freud did not view ethics as a paramount concern to his new science. In a letter to the Protestant minister Pfister, who was a practicing analyst, Freud made the following comment:

Ethics are remote from me. ... I do not break my head very much about good and evil, but I have found little that is “good” about human beings on the whole. In my experience most of them are trash, no matter whether they publicly subscribe to this or that ethical doctrine or to none at all. ... If we are to talk of ethics, I subscribe to a high ideal from which most of the human beings I

have come across depart most lamentably [Quoted in Roazen, 1975, p. 146].

There is no doubt that Freud was skeptical about the capacity to harness and sublimate the power of the drives. His letter to Pfister addressed boundary transgressions as inevitable miscues in the development of a new science. In another effort to reassure Jung about his fiasco with Spielrein, Freud drew an analogy in a letter of June 18, 1909: "In view of the kind of matter we work with, it will never be possible to avoid little laboratory explosions. Maybe we didn't

- 1129 -

slant the test tube enough, or we heated it too quickly. In this way we learn what part of the danger lies in the matter and what part in our way of handling it" (McGuire, 1974, p. 235).

Kerr (1993) frankly doubts that the revelation of Jung's relationship with Spielrein would have caused Freud much concern. He points out that sexual transgressions between analyst and patient were veritably ubiquitous among Freud's early disciples. Wilhem Stekel was well known as a "seducer." Otto Gross, who believed that the healthy solution to neurosis was sexual promiscuity, engaged in group orgies to help others relieve themselves of their inhibitions (Eissler, 1983). Jones had married a former patient. Even the clergyman Pfister was infatuated with one of his patients. Kerr (1993) emphasizes that disagreements with Freud's theories were much more troubling to Freud than sexual transgressions.

A more cynical view of Freud's attitude was that the advancement of psychoanalysis as a clinical and scientific endeavor was of such paramount importance in his hierarchy of values that it superseded considerations of ethics. Recent discussions of the Frink case (Edmunds, 1988; Gabbard, 1994b; Mahony, 1993; Warner, 1994) have made it clear that Freud was willing to lift his proscription against analyst-patient sexual relations if the cause of analysis might be advanced as a result. Frink's former patient, Angelica Bijur, was the heiress of a wealthy banking family, and clearly Freud saw the marriage between Frink and Bijur as potentially leading to a large donation to further the cause of psychoanalysis. In November 1921 he made the following comment in a letter to Frink:

May I still suggest to you that your idea Mrs. B[ijur] had lost part of her beauty may be turned into her having lost part of her money ... your complaint that you cannot grasp your homosexuality implies that you are not yet aware of your fantasy of making me a rich man. If matters turn out all right, let us change this imaginary gift into a real contribution to the Psychoanalytic Funds [Quoted in Mahony, 1993, p. 1031].

The results of this marriage were, of course, disastrous, and Freud's behavior can only be viewed as reprehensible. Mahony (1993) comments on the historical double standard applied to Freud and argues that Freud's way of comporting himself must be judged by the same set of standards used for other analysts.

- 1130 -

A RETROSPECTIVE ASSESSMENT

One way to understand these historical events is to see them as the inevitable labor pains accompanying the birth of a new field. Personal and professional lives were intertwined in almost every conceivable way. Freud melded friendship and analysis in the treatment of Marie Bonaparte, during which he disclosed a good deal of personal information about himself. Bonaparte later was in treatment with Rudolf Loewenstein, only to ultimately become his lover (Appignanesi and Forrester, 1992). Jones sent the Stracheys to Freud for analysis as well as to be future translators of his work. On several occasions Jung analyzed Trigant Burrow aboard a sailboat. Rangell's (in press) view is that many of these early boundary violations must be viewed in the historical context of a new science struggling to define its parameters and should not be regarded as indications of lax technique or immoral character.

While this perspective undoubtedly has some validity, it is also true that complications surrounding a mother's labor may indelibly scar the child. Moreover, the early boundary transgressions of the pioneers in psychoanalysis can be viewed as a legacy inherited by future generations.

One of the main aspects of the legacy is a lack of clarity about the boundaries of the analytic situation. Certainly nonsexual boundary violations are far more pervasive than frank sexual relations between analyst and patient. Both Freud and Melanie Klein analyzed their own children. Anna Freud acknowledged later that she felt exploited by many aspects of this process, including her father having published accounts of her daydreams (Young-Bruehl, 1988). Klein also encouraged analysands to follow her to the Black Forest for her holiday, where she would analyze her patients while they reclined on her bed in her hotel room (Grosskurth, 1986). Winnicott held Margaret Little's hands through many hours as she lay on the couch, and on at least one occasion broke confidentiality by telling her about another patient he was treating and about his countertransference reactions toward that patient (Little, 1990). Judy Cooper (1993) reports that when she was in analysis with Masud Kahn, he continued to give her papers he had written and asked her to read them.

These transgressions were not limited to the field's pioneers practicing in Europe. Farber and Green (1993) have chronicled the

- 1131 -

history of a number of star-struck analysts in Southern California, who conducted boundariless analyses with their celebrity patients. Analysts served as technical advisors for films produced by their patients. Others collaborated on screenplays with their patients. Still others encouraged donations from their patients to various foundations with which the analyst was connected. Most of all, there was a general blurring of the boundary between an analytic and a social relationship.

The historical response of psychoanalytic organizations within the United States to boundary violations has been variable. In many cases the solution to any transgression of professional boundaries was to prescribe more analysis. We can speculate that one significant factor

influencing the organizational and institutional responses to violations of professional boundaries has to do with the training setting itself. The training analysis may be viewed as the historical heir to the early violations in the field. There is a dual relationship—i.e., the treatment is both didactic and therapeutic—inherent in the training analysis. Moreover, following the analysis, the former analysand becomes a colleague to the training analyst and will be involved in committees, scientific meetings, and teaching alongside the former analyst. As Bernardi and Nieto (1992) observed, “The paradox is that while no one would take a patient with whom such an enterprise was shared, in this case, this is precisely what is necessary” (p. 142).

The problems arising from using one analysis for both educational and therapeutic purposes have been discussed exhaustively. As long ago as 1964, Kairys concluded, “The problems of analyzing within a training program are intrinsically insoluble and no longer worth discussing” (p. 485). Nevertheless, it is timely to reconsider the complexities of the training analysis lest we fall into the trap of a double standard, in which we are advocating one set of boundaries for nontraining analyses and another for candidates.

One of the most powerful resistances operating in training analyses relates to the analysand's fantasies about a posttermination relationship. In this regard the feelings of grief and mourning associated with termination may be short-circuited. The fundamental issue is that in reality, training analysts and analysand will have some form of ongoing relationship after termination. This feature makes the

- 1132 -

training analysis irrevocably different than other analyses (Novick, 1995; Weigert, 1955).

In nontraining analyses, boundary violations appear to be particularly problematic near the end of the process, as both analyst and patient wish to deny the painful feelings of loss associated with the ending of the analysis. As Novick (1995) stresses, there may be an inherent risk in the way we train analysts in that the analytic candidate's own termination in the setting of a training analysis may be taken as a model for conceptualizing all terminations.

As candidates terminate their own training analyses, they also may experience to varying degrees the impact of the training analyst's countertransference. Greenacre (1966) cited the training analyst's wish to maintain the candidate's allegiance after termination as one of the three main areas of countertransference in training analyses (the other two are overzealousness regarding the analysand's academic performance and active participation in training matters pertaining to one's analysand). She noted that rationalizations involving “saving” a promising younger colleague for the future of psychoanalysis may be conjured up to justify the training analyst's narcissistic need to control the candidate. Greenacre also observed that the training analyst's narcissistic needs may take the form of subtle indulgences that gratify instead of frustrate the patient's transference wishes.

The loyalty bind deriving from the training analyst's indulgences not only breeds discipleship in the posttermination period. It also establishes an intergenerational cycle that is difficult to break. Young analysts will repeat the behavior of their training analyst, even when they do not fully

understand it or approve of it.

While the training analysis may be more inherently problematic, the supervisory situation has more recently become the focus of considerable concern. Sexual relationships between supervisors and supervisees have been called to the attention of education committees within institutes, and in some instances, nonsexual boundary violations have also been reported. While much has been written about the boundary between analysis and supervision, there is no consensus about more general boundaries of the supervisory setting. In the absence of any systematic discussion of supervisory boundaries, the candidate's own experiences of supervision become internalized and passed from one generation to the next.

- 1133 -

The intergenerational transmission of attitudes about the concept of boundaries, whether through supervision or training analysis, can be extraordinarily powerful. In the mid-1960s a training analyst in an institute was charged with sexual misconduct. Two decades later two analysts he had analyzed were also charged with sexual misconduct in the same city. What is scotomized in one analytic generation may well be scotomized in the next. Our emphasis on our historical legacy can be problematic, however, if we misuse it to blame our analytic parents rather than address basic challenges of the analytic situation that transcend time and place.

If we are to prevent destructive enactments of boundary violations, we must begin with a psychoanalytic understanding of how such enactments evolve. In addition, we must enrich our understanding of the impact these violations have on our patients. For too long institutes and societies showed greater concern for the protection of the transgressing analyst than for the patient who was deprived of an analytic treatment. This legacy of the “old boy system” is now being corrected by greater attention to the patient's suffering and appropriate reparation.

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