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Analysis Terminable and Interminable

Sigmund Freud

Experience has taught us that psycho-analytic therapy—the liberation of a human being from his neurotic symptoms, inhibitions and abnormalities of character—is a lengthy business. Hence, from the very beginning, attempts have been made to shorten the course of analysis. Such endeavours required no justification: they could claim to be prompted by the strongest considerations alike of reason and expediency. But it may be that there lurked in them some trace of the impatient contempt with which the medical profession of an earlier day regarded the neuroses, seeing in them the unnecessary results of invisible lesions. If you were obliged to deal with them, you simply aimed at getting rid of them with the utmost despatch. Basing his procedure on the theory formulated in *Das Trauma der Geburt* (1924) Otto Rank made a particularly determined attempt to shorten analysis. He assumed that the cardinal source of neurosis was the experience of birth, on the ground of the possibility that the infant's 'primal fixation' to the mother might not be surmounted but persist in the form of 'primal repression'. His hope was that, if this primal trauma were overcome by analysis, the whole neurosis would clear up, so that this one small piece of analytic work, for which a few months should suffice, would do away with the necessity for all the rest. Rank's argument was certainly bold and ingenious but it did not stand the test of critical examination. Moreover, it was a premature attempt, conceived under the stress of the contrast between the post-War misery of Europe and the 'prosperity' of America, and designed to accelerate the tempo of analytic therapy to suit the rush of American life. We have heard little of the clinical results of Rank's plan.

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it has not accomplished more than would be done if the men of a fire-brigade, summoned to deal with a fire from an upset oil-lamp, merely removed the lamp from the room in which the conflagration had broken out. Much less time would certainly be spent in so doing than in extinguishing the whole fire. The theory and practice of Rank's experiment are now things of the past—as is American 'prosperity'.

Before the War, I myself had already tried another way of speeding up analysis. I had undertaken to treat a young Russian, a rich man spoiled by riches, who had come to Vienna in a state of complete helplessness, accompanied by physician and attendant. It was possible in the course of several years to restore to him a considerable measure of independence, and to awaken his interest in life, while his relations to the principal people in his life were adjusted. But then we came to a full stop. We made no progress in clearing up his childhood's neurosis, which was the basis of his later illness, and it was obvious that the patient found his present situation quite comfortable and did not intend to take any step which would bring him nearer to the end of his treatment. It was a case of

the patient himself obstructing the cure: the analysis was in danger of failing as a result of its—partial—success. In this predicament I resorted to the heroic remedy of fixing a date for the conclusion of the analysis. At the beginning of a period of treatment I told the patient that the coming year was to be the last of his analysis, no matter what progress he made or failed to make in the time still left to him. At first he did not believe me, but, once he was convinced that I was in dead earnest, the change which I had hoped for began to take place. His resistances crumbled away, and in the last months of treatment he was able to produce all the memories and to discover the connecting links which were necessary for the understanding of his early neurosis and his recovery from the illness from which he was then suffering. When he took leave of me at midsummer, 1914, unsuspecting, as we all were, of what was so shortly to happen, I believed that his cure was complete and permanent.

In a postscript to this patient's case-history (1923) I have already reported that I was mistaken. When, towards the end of the War, he returned to Vienna, a refugee and destitute, I had to help him to

1 Cf. the paper, published with the patient's consent, 'The History of an Infantile Neurosis' (1918). It contains no detailed account of the young man's subsequent illness, which is touched on only when its connection with his infantile neurosis requires it.

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master a part of the transference which had remained unresolved. Within a few months this was successfully accomplished and I was able to conclude my postscript with the statement that 'since then the patient has felt normal and has behaved unexceptionably, in spite of the War having robbed him of his home, his possessions and all his family relationships'. Fifteen years have passed since then, but this verdict has not proved erroneous, though certain reservations have had to be made. The patient has remained in Vienna and has made good, although in a humble social position. Several times, however, during this period, his satisfactory state of health has broken down, and the attacks of neurotic illness from which he has suffered could be construed only as offshoots of his original neurosis. Thanks to the skill of one of my pupils, Dr. Ruth Mack Brunswick, a short course of treatment has sufficed on each occasion to clear up these attacks. I hope Dr. Mack Brunswick herself will report on this case before long. Some of these relapses were caused by still unresolved residues of the transference; short-lived though the attacks were, they were distinctly paranoid in character. In other instances, however, the pathogenic material consisted of fragments from the history of the patient's childhood, which had not come to light while I was analysing him and which now came away (the comparison is obvious) like sutures after an operation or small pieces of necrotic bone. I have found the history of this man's recovery almost as interesting as that of his illness. Since then I have employed the method of fixing a date for the termination of analysis in other cases and I have also inquired about the experience of other analysts in this respect. There can be only one verdict about the value of this device for putting pressure on the patient. The measure is effective, provided that one hits the right time at which to employ it. But it cannot be held to guarantee perfect accomplishment of the task of psycho-analysis. On the contrary, we may be quite sure that, while the impending termination of

the treatment will have the effect of bringing part of the material to light, another part will be walled up, as if buried, behind it and will elude our therapeutic efforts. Once the date for discontinuing the treatment has been fixed we must not extend the time; otherwise the patient will lose all his faith in the analyst. The most obvious expedient is to let him continue his treatment with another analyst, although we know that a change of this sort involves a fresh loss of time and the sacrifice of some of the results of the work already done. No

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general rule can be laid down as to the right time for resorting to this forcible technical method: the analyst must use his own tact in the matter. A mistake, once made, cannot be rectified. The saying that the lion springs once and once only must hold good here.

II

The discussion of the technical problem of how to accelerate the slow progress of analysis suggests another deeply interesting question: is there such a thing as a natural end to an analysis or is it really possible to conduct it to such an end? To judge by the ordinary talk of analysts we should presume that it is, for we often hear them say, when deploring or excusing the admitted imperfection of some fellow-mortal: 'His analysis was not finished' or 'He was not thoroughly analysed'.

Now we must first decide what is meant by the ambiguous term, 'the end of an analysis'. From the practical standpoint it is easily defined. An analysis is ended when analyst and patient cease to meet for the analytic session. This happens when two conditions have been approximately fulfilled. First, the patient must no longer be suffering from his former symptoms and must have overcome his various anxieties and inhibitions and, secondly, the analyst must have formed the opinion that so much repressed material has been brought into consciousness, so much that was inexplicable elucidated, and so much inner resistance overcome that no repetition of the patient's specific pathological processes is to be feared. If for external reasons one is prevented from reaching this goal, it is more correct to say that an analysis is incomplete than to say that it has not come to an end.

The second definition of the 'end' of an analysis is much more ambitious. According to it we have to answer the question whether the effect upon the patient is so profound that we can be certain that no further change would take place in him if his analysis were continued. The implication is that by means of analysis it is possible to attain to absolute psychic normality and to be sure that it will be maintained, the supposition being that all the patient's repressions have been lifted and every gap in his memory filled. Let us first consult our experience and see whether this really happens and then examine our theory and learn whether there is any possibility of its happening.

Every analyst will have treated some cases with this gratifying

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result. He has succeeded in clearing up the patient's neurosis, there has been no relapse and no other nervous disturbance has succeeded it. We know something of what determines these results. No noticeable change had taken place in the patients' ego and the causation of their illness was pre-eminently traumatic. The ætiology of all neurosis is indeed a mixed one; either the patient's instincts are excessively strong and refuse to

submit to the restraining influence of his ego or else he is suffering from the effects of premature traumas, by which I mean traumas which his immature ego was unable to surmount. Generally there is a combination of the two factors: the constitutional and the accidental. The stronger the instincts the more readily will a trauma lead to fixation, with its sequel in a disturbance of development; the more violent the trauma the more certain is it that it will have injurious effects even when the patient's instincts are of normal strength. There can be no doubt that, when the ætiology of the neurosis is traumatic, analysis has a far better chance. Only when the traumatic factor predominates can we look for that most masterly achievement of psycho-analysis, namely, such a reinforcement of the ego that a correct adjustment takes the place of that infantile solution of the patient's early conflicts which proved so inadequate. Only in such a case can one speak of a definitive end to his analysis. When such a result has been attained analysis has done all that can be required of it and need not be continued. If the patient who has made such a good recovery never produces any more symptoms calling for analysis, it still, of course, remains an open question how much of this immunity is due to a benevolent fate which spares him too searching a test.

The factors which are prejudicial to analysis and may cause it to be so long-drawn-out as to be really interminable are a constitutional strength of instinct and an unfavourable change sustained by the ego in the defensive conflict, a change comparable to a dislocation or crippling. One is tempted to make the first factor—the strength of the instincts—responsible for the second—the change in the ego—but it is clear that the latter has its own ætiology and indeed it must be admitted that our knowledge of these relations is as yet imperfect. They are only just becoming the object of analytic investigation. I think that here the analyst's interest tends to be quite wrongly orientated. Instead of inquiring how analysis effects a cure (a point which in my opinion has been sufficiently elucidated) we should ask what are the obstacles which this cure encounters. This brings me to two problems which arise directly out of psycho-analytic

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practice, as I hope to show by the following examples. A certain man, who had himself been a most successful practitioner of analysis, came to the conclusion that his relations with men as well as with women—the men who were his rivals and the woman whom he loved—were not free from neurotic inhibitions, and he therefore had himself analysed by an analyst whom he believed to be more expert than himself. This critical exploration of his own personality was entirely successful. He married the woman whom he loved and became the friend and teacher of the men whom he had regarded as rivals. Many years passed, during which his relation to his former analyst remained unclouded. But then, for no demonstrable external reason, trouble arose. The man who had been analysed adopted an antagonistic attitude to his analyst and reproached him for having neglected to complete the analysis. The analyst, he said, ought to have known and to have taken account of the fact that a transference-relation could never be merely positive; he ought to have considered the possibilities of a negative transference. The analyst justified himself by saying that, at the time of the analysis, there was no sign of a negative transference. But, even supposing that he had failed to observe some slight indication of it, which was quite possible considering the limitations of analysis in those early days, it was still doubtful whether he would have been able to activate a psychic theme or, as we say, a

'complex', by merely indicating it to the patient, so long as it was not at that moment an actuality to him. Such activation would certainly have necessitated real unfriendly behaviour on the analyst's part. And, besides, every happy relation between analyst and analysand, during and after analysis, was not to be regarded as transference. There were friendly relations with a real basis, which were perfectly compatible with normal life. I now pass on to my second example, which raises the same problem. A girl who had left her childhood behind her had, since puberty, been cut off from life by an inability to walk, owing to acute pain in her legs. Her condition was obviously hysterical in character and it had resisted various kinds of treatment. After an analysis lasting nine months the trouble disappeared and the patient, whose character was truly sound and estimable, was able once more to take her place in life. In the years following her recovery she was consistently unfortunate: there were disasters in her family, they lost their money and, as she grew older, she saw every hope of happiness in love and marriage vanish. But this woman, who had formerly

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been an invalid, stood her ground valiantly and in difficult times was a support to her people. I cannot remember whether it was twelve or fourteen years after the end of her analysis that she had to undergo a gynaecological examination on account of profuse hæmorrhages. A myoma was discovered which made it advisable for complete hysterectomy to be performed. From the time that this operation took place she relapsed into neurosis. She fell in love with the surgeon and was overwhelmed by masochistic phantasies of the dreadful internal changes which had taken place in her—phantasies in which she disguised her romance. She proved inaccessible to a further attempt at analysis, and to the end of her life she remained abnormal. The successful analytic treatment took place so long ago that we could not expect too much from it; it was in the first years of my work as an analyst. It is, however, possible that the patient's second neurosis sprang from the same root as the first, which had been successfully overcome, and that it was a different manifestation of repressed tendencies which analysis had only partially resolved. But I am inclined to think that, but for the fresh trauma, there would have been no second outbreak of neurosis.

These two cases, purposely selected from a large number of similar ones, will suffice to set going a discussion of the problems we are considering. The sceptical, the optimistic and the ambitious will draw very different conclusions from them. Sceptics will say that they prove that even a successful analysis does not prevent the patient who is cured for the time being from subsequently developing another neurosis, or even a neurosis springing from the same instinctual root, that is to say, from a recurrence of his former trouble. The others will maintain that this is not proved. They will object that both the cases I have cited date from the early days of analysis, twenty or thirty years ago. Since then we have acquired deeper insight and wider knowledge and, in adapting our technique to our new discoveries, we have modified it in many respects. To-day we may demand and expect that an analytic cure shall be permanent or, at least, that, if a patient falls ill again, his fresh neurosis shall not turn out to be a revival of his earlier instinctual disturbance, manifesting itself in a new guise. Our experience, they say, is not such that we must limit so strictly the demands which we may legitimately make upon psychoanalytic therapy.

Now of course my reason for selecting these particular cases as illustrations was precisely that they date so far back. It is obvious

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that the more recent the result of an analysis the less valuable is it for our theoretical discussion since we have no means of predicting what will happen later to a patient who has been cured. Clearly the expectations of the optimist presuppose a number of things which are not exactly a matter of course. In the first place he assumes that it is really possible to resolve an instinctual conflict (or, more accurately, a conflict between the ego and an instinct) finally and for all time. Secondly, that when we are dealing with one such conflict in a patient, we can, as it were, inoculate him against the possibility of any other instinctual conflicts in the future. And thirdly, that we have the power, for purposes of prophylaxis, to stir up a pathogenic conflict of this sort, when at the moment there is no indication of it, and that it is wise to do so. I merely suggest these questions: I do not propose to answer them here. In any case a definite answer is perhaps not possible at the present time.

Probably some light may be thrown on the subject from the theoretical standpoint. But already another point has become clear: if we wish to fulfil the more exacting demands which are now made upon therapeutic analysis, we shall not regard the shortening of its duration as either a means or an end.

III

My analytic experience, extending now over several decades, and the change which has taken place in the nature and mode of my work encourage me to attempt an answer to the questions before us. In earlier days I dealt with a larger number of patients, who, as was natural, wanted to be cured as quickly as possible. Of late years I have been mainly engaged in training-analyses and I have also had a relatively small number of patients suffering from acute neuroses, whose treatment is carried on with longer or shorter intermissions. In these cases the therapeutic aim is no longer the same as before. There is no question of shortening the treatment: the object has been completely to exhaust the possibilities of illness and to bring about a radical change in the personality.

Of the three factors which, as we have seen, determine the results of analysis—the effect of traumas, the constitutional strength of the instincts and the changes in the ego—we are at this point concerned with the second only: the strength of the instincts. Reflection immediately suggests a doubt as to whether it is necessary to use the qualifying adjective 'constitutional' (or 'congenital'). It is true

2 'So muss denn doch die Hexe dran'.

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that from the very beginning the constitutional factor is of crucial importance, but it is yet conceivable that the same effects might ensue from a reinforcement of instinctual energy at some later period in life. If this were so, we should have to modify our formula and say 'the strength of the instincts at a given moment' rather than 'the constitutional strength of the instincts'. Now the first of our questions was this: is it possible for analysis permanently and definitively to resolve a conflict between instinct and ego or to settle a

pathogenic instinctual claim upon the ego? To avoid misunderstanding we must perhaps define more exactly what we mean by the phrase: 'a permanent settlement of an instinctual claim'. We certainly do not mean that we cause the claim to die away, so that it never makes itself felt again. As a rule this is impossible and not even desirable. No, we mean something else, something which may be roughly described as the 'restraining' of the instinct. That is to say, it is brought into harmony with the ego and becomes accessible to the influence of the other ego-tendencies, no longer seeking for independent gratification. If we are asked how and by what means this result is achieved, we do not find it easy to answer. We say to ourselves, 'We must use a bit of magic'²: the 'magic' of metapsychology in fact. Without metapsychological speculation and theorizing—I had almost said 'phantasy'—we shall not get a step further. Unfortunately, here as elsewhere, what our magic reveals is neither very clear nor very exact. We have only one single clue to follow—but a clue the value of which cannot be exaggerated—namely, the antithesis between the primary and the secondary processes, and to this I must refer here. Reverting to our first question, we find that our new approach to the problem makes a particular conclusion inevitable. The question was as follows: is it possible permanently and definitively to resolve an instinctual conflict? that is to say, to 'restrain' the instinctual claim in the way I have described. Formulated thus, the question contains no mention of the strength of the instinct, but it is precisely this which determines the issue. Let us be quite clear that what analysis achieves for neurotics is just what normal people accomplish for themselves without its help. But everyday experience teaches us that in a normal person any solution of an instinctual conflict holds good only so long as the instinct is of a particular degree of strength,

³ If we are to be perfectly accurate, we must say, in a particular area of this relation.

⁴ Here we have a justification of the ætiological pretensions of such indefinite factors as overwork, shock, etc. These have always been certain of general recognition and psycho-analysis has had to assign them rather into the background. It is impossible to define psychic health except in terms of metapsychology, i.e. of the dynamic relations between those institutions of the psychic apparatus, the existence of which psycho-analysis has discovered, or, if our critics will have it so, has inferred or conjectured.

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or rather, only so long as a particular relation is maintained between the strength of the instinct and that of the ego.³ If the latter becomes enfeebled, whether through illness, exhaustion or for some similar cause, all the instincts which have so far been successfully restrained may renew their claims and strive in abnormal ways after substitutive gratification.⁴ We have irrefutable proof of this statement in what takes place in dreams, when the reaction of the dreamer's psyche to the ego's condition in sleep is the awakening of instinctual claims.

The material relating to the strength of the instincts is equally unambiguous. Twice in the course of the development of the individual certain instincts are powerfully reinforced: at puberty and at the menopause in women. We are not in the least surprised if people who were normal before become neurotic at these times. When the instincts were not so strong these individuals succeeded in restraining them, but they can no longer do so when the

instincts acquire this new strength. The repressions behave like dams in time of flood. That which occurs regularly at both these periods, when for physiological reasons the instincts become stronger, may occur sporadically as the result of accidental influences at any other period in life. Factors contributing to the reinforcement of instinct are fresh traumas, the infliction of frustration and the interaction of the various instinctual tendencies. The result is always the same and it renders the force of the quantitative factor in the causation of illness even more irresistible.

I feel as if I ought to be ashamed of so much ponderous exposition, seeing that all I have said has long been familiar and self-evident. It is a fact that we have always behaved as if we knew these things, yet for the most part our theoretical concepts fail to give the same importance to the economic as to the dynamic and topographical aspects of the case. So my excuse must be that I am drawing attention to this omission.

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Before we decide on an answer to our question, however, we must listen to an objection the force of which lies in the fact that we are very likely predisposed in its favour. It is contended that our arguments are all deduced from the spontaneous processes that take place between ego and instinct and that we assume that analytic therapy can accomplish nothing which does not occur spontaneously under favourable normal conditions. But is this really so? Is not the claim of our theory precisely that analysis produces a state which never does occur spontaneously within the ego and the creation of which constitutes the main difference between the person who has been analysed and the person who has not? Let us consider on what this claim is based. All repression takes place in early childhood; it is a primitive defensive measure adopted by the immature, feeble ego. In later years there are no fresh repressions, but the old ones persist and are used by the ego for the purpose of mastering instinct. New conflicts are resolved by what we call 'after-repression' To these infantile repressions our general statement applies that they depend entirely on the relative power of the various psychic institutions and cannot withstand an increase in the strength of the instincts. Now analysis enables the mature ego, which by this time has attained a greater strength, to review these old repressions, with the result that some are lifted, while others are accepted but reconstructed from more solid material. These new dams have a greater power of resistance than the earlier ones; we may be confident that they will not so easily give way before the flood-tide of instinct. Thus the real achievement of analytic therapy is a subsequent correction of the original process of repression, with the result that the supremacy of the quantitative factor is brought to an end.

So far our theory, to which we must adhere unless we are irresistibly compelled to abandon it. And what is the testimony of our experience? Perhaps it is not yet wide enough to enable us to come to a definite decision. Quite often it justifies our expectations, but not always. Our impression is that we must not be surprised if the difference between the person who has not and the person who has been analysed is, after all, not so radical as we endeavour to make it and expect and assert that it will be. Thus analysis does indeed sometimes succeed in counteracting the effect of the increase in the strength of instinct, but it does not invariably do so. Sometimes its effect is simply to raise the power of the resistance put up by inhibitions, so that after

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analysis they are equal to a much heavier strain than before the analysis took place or if it had never taken place at all. I really cannot commit myself to a decision on this point nor do I know whether at the present time a decision is possible.

There is another angle from which we may approach this problem of the uncertainty in the effect of analysis. We know that the first step towards the intellectual mastery of the world in which we live is the discovery of general principles, rules and laws which bring order into chaos. By such mental operations we simplify the world of phenomena, but we cannot avoid falsifying it in so doing, especially when we are dealing with processes of development and change. We are trying to discern a quantitative alteration and as a rule we neglect, at any rate at first, one of the quantitative factors. In reality the transitional and intermediate stages are far more common than the sharply differentiated opposite states. In studying various developments and changes we focus our attention entirely on the result and we readily overlook the fact that such processes are usually more or less incomplete, that is to say, the changes that take place are really only partial. A shrewd satirist of the Austria of old, J. Nestroy, once said 'Every advance is only half as great as it looks at first'. One is tempted to think that this malicious dictum is universally valid. There are almost always remains of what has been and a partial arrest at a former stage. When an open-handed Mæcenās surprises us by some isolated trait of miserliness or a person whose kind-heartedness has been excessive suddenly indulges in some unfriendly act, these are 'vestiges' of what has been and are of priceless value for genetic research. They show that every praiseworthy and valuable quality is based on compensation and over-compensation which, as was only to be expected, have not been absolutely and completely successful. Our first account of libidinal development was that an original oral phase was succeeded by a sadistic-anal, and this in its turn by a phallic-genital phase. Later investigation has not contradicted this view, but we must now qualify our statement by saying that the one phase does not succeed the other suddenly but gradually, so that part of the earlier organization always persists side by side with the later, and that even in normal development the transformation is never complete, the final structure often containing fragments of earlier libidinal fixations. We see the same thing in quite different connections. There is not one of the erroneous and superstitious beliefs of mankind that are supposed to have been left behind but has

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left a residue at the present day in the lower strata of civilized peoples or even in the highest strata of cultivated society. All that has once lived clings tenaciously to life. Sometimes we are inclined to doubt whether the dragons of primæval times are really extinct.

Applying these remarks to our particular problem, I would say that the answer to the question how we explain the uncertain results of our analytic therapy might well be that our success in replacing insecure repressions by the mastery of instinct in ways that are reliable and ego-syntonic is not always complete, i.e. is not radical enough. A change does occur but it is often only partial: parts of the old mechanisms remain untouched by analysis. It is difficult to prove that this is really so. We can only judge by the result which it seems to explain. But the impressions we receive during our analytic work do not contradict this hypothesis—rather, they confirm it. We have to be careful not to

imagine that the clarity of our own insight is a measure of the conviction we produce in the mind of the analysand. This conviction may lack 'depth', so to speak; the point in question is always that quantitative factor which is so easily overlooked. If we now have the correct answer to our question, we may say that analysis is always right in theory in its claim to cure neurosis by ensuring the mastery of instinct but that in practice its claim is not always justified. This is because it does not always succeed in laying sufficiently firm foundations for the mastery of instinct. The reason for this partial failure is easy to discover. The quantitative factor—the strength of the instincts—in the past opposed the efforts of the patient's ego to defend itself, and now that analysis is called in to help, that same factor limits the efficacy of this new attempt. If the instincts are excessively strong the ego fails in its task, although it is now mature and has the support of analysis, just as it failed in earlier days in its helpless state; its mastery of instinct is greater but not complete, because the change in the defence-mechanism is only partial. This is not surprising, for the power of analysis is not infinite; it is limited, and the final result always depends on the relative strength of the conflicting psychic institutions. No doubt it is desirable to shorten analytic treatment, but we shall achieve our therapeutic purpose only when we can give a greater measure of help to the patient's ego. At one time it seemed that hypnotic influence was a splendid way of achieving our end; the reasons why we had to abandon this method are well known. Hitherto no substitute for hypnosis has been discovered, but we realize that it

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was with this aim that such a master of analysis as Ferenczi devoted his last years to therapeutic experiments which were, alas! in vain.

IV

The two related questions: whether, when dealing with one instinctual conflict, we can guard a patient against such conflicts in the future and whether it is practicable and advisable for purposes of prophylaxis to stir up a conflict which is not at the moment manifest must be treated together. Obviously the first task can be accomplished only if one performs the second, i.e. if one turns a possible future conflict into a present one and then brings analytic influence to bear upon it. This new problem is really only an extension of the earlier one. In the first instance we were considering how to guard against the return of the same conflict: now we are considering the possible substitution of a second conflict for the first. This sounds a very ambitious proposal but we are really only trying to make clear what limits are set to the efficacy of analytic therapy. Tempting as it may be to our therapeutic ambition to propose such tasks for itself, experience bids us refuse them out of hand. If an instinctual conflict is not a present one and does not manifest itself in any way, it cannot be influenced by analysis. The warning that we should 'let sleeping dogs lie'—as we are so often told in connection with our investigation of the psychic underworld—is peculiarly inapposite when applied to the relations existing in psychic life. For, if the instincts are causing disturbances it is a proof that the dogs are not sleeping and if it is evident that they really are sleeping, we have not the power to wake them. This last statement, however, does not seem entirely accurate and we must consider it in greater detail. Let us consider the means we have at our disposal for transforming a latent into a present instinctual conflict. Clearly there are only two things we can do: either we can bring about situations in which the conflict becomes

actual or we can content ourselves with discussing it in analysis and pointing out that it may possibly arise. The first of these two alternatives can be accomplished in two different ways, either in reality, or in the transference. In either case we expose the patient to a measure of real suffering through frustration and the damming-up of libido. Now it is true that in ordinary analytic practice we do make use of this technique. Otherwise, what would be the meaning of the rule that analysis must be carried through 'in a state of abstinence'? But we use it when we are dealing with a conflict which is already present. We

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try to bring this conflict to a head and to develop it in its most acute form in order to increase the instinctual energy necessary for its solution. Analytic experience has taught us that the better is always the enemy of the good and that in every phase of the patient's restoration we have to combat his inertia, which disposes him to be content with a partial solution of his conflicts.

If, however, our aim is the prophylactic treatment of instinctual conflicts which are not actual but merely possible, it is not enough to deal with the suffering which the patient is inevitably undergoing. We must make up our minds to conjure up fresh suffering—a thing which we have so far rightly left to fate. Public opinion would warn us against the presumption of vying with fate in putting wretched human beings to such cruel experiments. And what sort of experiments would they be? Could we, for purposes of prophylaxis, take the responsibility of destroying a happy marriage or causing a patient to give up work upon which his livelihood depended? Fortunately there is no question of having to justify such interference with real life. We have not the plenary powers which such intervention would demand and most certainly the object of this therapeutic experiment would refuse to co-operate with it. In practice then, this method may be said to be excluded and there are, besides, theoretical objections to it, for the work of analysis progresses best when the patient's pathogenic experiences belong to the past so that the ego can stand at a distance from them. In conditions of acute crisis it is almost impossible to use analysis. In such states the whole interest of the ego is concentrated on the painful reality, and resists analysis, which seeks to penetrate below the surface and to discover the influences to which the patient has been exposed in the past. Thus to create a fresh conflict will only make the analysis longer and more difficult.

It may be objected that all this discussion is quite superfluous. Nobody imagines that a latent instinctual conflict can be treated by purposely conjuring up a fresh painful situation. As a prophylactic achievement this would not be much to boast of. Let us take an example: we know that when a patient recovers from scarlatina he has become immune from a recurrence of that illness. But it never occurs to a physician on that account to infect a patient with scarlatina in order to make him immune. It is not the business of prophylactic treatment to produce the same dangerous situation as that of the illness itself but only something much more mild, as in the case of vaccination and many similar modes of treatment. Similarly, in the analytic prophylaxis

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of instinctual conflicts the only methods which we need really consider are the other two: the artificial production of new conflicts in the transference (conflicts which lack the

character of reality) and the rousing of such conflicts in the imagination of the analysand by speaking to him about them and telling him that they may possibly arise.

I do not know if we can assert that the first of these two less drastic procedures is out of the question in analysis. No experiments have been made in this particular direction. But some difficulties at once suggest themselves which make the success of such an undertaking very problematic. In the first place the choice of such situations for the transference is very limited. The analysand himself cannot embody all his conflicts in the transference, nor can the transference-situation be so employed by the analyst as to rouse all the instinctual conflicts in which the patient may possibly become engaged. We may incite him to jealousy or inflict upon him the pain of disappointed love, but no special intention is necessary for this purpose. These things happen spontaneously in most analyses. But in the second place we must not overlook the fact that any such deliberate procedure would necessitate unkind behaviour on the part of the analyst towards the patient and this would have an injurious effect upon his affectionate attitude towards the analyst, i.e. upon the positive transference which is the strongest motive of the analysand for co-operating in the work of analysis. So we shall not form any high expectation of the results of such a technique.

This leaves only the other method, which is probably the only one originally contemplated. The analyst will tell the patient about possible instinctual conflicts which may occur and will lead him to expect that they will occur in himself. This is done in the hope that the information and warning will have the effect of activating in the patient one of these conflicts in a moderate degree and yet sufficiently for it to be dealt with. But here experience speaks with no uncertain voice. The result hoped for is not achieved. The patient hears what you say but it rouses no response in his mind. He probably thinks to himself, 'That is very interesting but I see no sign of it in myself'. We have increased his knowledge but effected no other change in his mind. We have much the same situation when people read psycho-analytical writings. The reader is 'stimulated' only by those passages which he feels apply to himself, i.e. which refer to conflicts that are active in him. Everything else leaves him cold. I think we have a similar experience when we enlighten children on matters of sex. I

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am far from maintaining that this is a harmful or unnecessary thing to do, but it is clear that the prophylactic effect of this liberal measure has been vastly over-estimated. After such enlightenment the children know something that they did not know before but they make no use of the new knowledge imparted to them. We come to the conclusion that they are by no means ready to sacrifice those sexual theories which may be said to be a natural growth and which they have constructed in harmony with and in dependence on their undeveloped libidinal organization—theories about the part played by the stork, about the nature of sexual intercourse and about the way in which children are born. For a long time after they have been enlightened on these subjects they behave like primitive peoples who have had Christianity thrust upon them and continue in secret to worship their old idols.

V

Our starting-point was the question how to shorten the tediously long duration of an analysis and, still pursuing the question of time, we went on to consider whether we can

achieve permanent cure or prevent illness in the future by prophylactic treatment. We saw that the success of our therapeutic work depended on the influence of traumatic factors in the ætiology of the neurosis, on the relative strength of the instincts which have to be mastered and on something which we called modification of the ego. Only the second of these factors has been discussed in any detail and we have had occasion in so doing to recognize the paramount importance of the quantitative factor and to stress the claim of the metapsychological standpoint to be taken into account in any attempt at explanation. Of the third factor, the modification of the ego, we have as yet said nothing. The first impression received when we turn our attention to it is that there is much to ask and to answer, and that what we can say on the subject will prove very inadequate. This impression is confirmed when we go into the problem further. We know that the essence of the analytic situation is that the analyst enters into an alliance with the ego of the analysand to subdue certain parts of his id which he has failed to master, i.e. to include them in the synthesis of the ego. The fact that in the case of psychotics this co-operation is never successful brings us to our first definite conclusion. If we want to make a compact with the patient's ego, that ego must be normal. But such a normal ego is, like normality in general, an ideal fiction. The abnormal ego which is of no use for our purpose is unfortunately

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no fiction. Now every normal person is only approximately normal: his ego resembles that of the psychotic in one point or another, in a greater or lesser degree, and by its distance from one end of the scale and his proximity to the other we may provisionally estimate the extent of that which we have so indefinitely called the 'modification of the ego'.

If we ask what is the source of the infinite variety of kinds and degrees of ego-modification we cannot escape the first obvious alternative that such modifications are either congenital or acquired. The second case will be the easier to treat. If they are acquired it must certainly have been during the individual's development from the very beginning of his life. From the very outset the ego has to try to fulfil its task of acting as an intermediary between the id and the outside world in the service of the pleasure-principle, to protect the id from the dangers of the outside world. If, while thus endeavouring, the ego learns to adopt a defensive attitude towards its own id and to treat the instinctual demands of the latter like external dangers, this is at any rate partly because it understands that gratification of instinct would lead to conflicts with the outside world. Under the influence of its upbringing, the child's ego accustoms itself to shift the scene of the battle from outside to inside and to master the inner danger before it becomes external. Probably it is generally right in so doing. In this battle on two fronts—later there is a third front as well—the ego makes use of various methods of fulfilling its task, i.e. to put it in general terms, of avoiding danger, anxiety and unpleasure. We call these devices defence-mechanisms. Our knowledge of them is as yet incomplete. Anna Freud's book has given us our first insight into their multiplicity and their manifold significance.⁵

One of these mechanisms, that of repression, provided the starting-point for the study of neurotic processes in general. There was never any doubt that repression was not the only method which the ego could employ for its purposes. Nevertheless, repression is

something quite peculiar, more sharply differentiated from the other mechanisms than these are from one another. I think I can make its relation to these other mechanisms clear by a comparison, but I know that comparisons never carry us very far in such a context. Let us imagine what might have happened to a book at the time when books were not printed in editions but written out separately by hand. We will imagine that such a book contained statements which at a later time

5 Anna Freud, *The Ego and the Mechanisms of Defence*. Hogarth Press.

6 Robert Eisler, *Jesus Basileus*. Religionswissenschaftliche Bibliothek, begründet von W. Streitberg, Band 9, Heidelberg bei Carl Winter, 1929.

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would be regarded as undesirable. For instance, Robert Eisler⁶ maintains that the writings of Flavius Josephus must have contained passages about Jesus Christ which were offensive to later Christendom. At the present day the only defence-mechanism to which the official censor would resort would be the confiscation and destruction of every copy of the whole edition. At that time other methods were employed to render the book innocuous. Either the offensive passages were heavily obliterated, so that they were illegible, in which case they could not be transcribed and the next copyist of the book produced a text to which no exception could be taken but which had gaps in certain places, probably making the passages in question unintelligible. Or, not satisfied with this, they tried to conceal any indication that the text had been mutilated. They therefore proceeded to tamper with the text. Single words here and there were left out or replaced by others and whole new sentences were interpolated; at best, the passage was completely erased and replaced by another in exactly the opposite sense. When the book was next transcribed the text aroused no suspicion but had, in fact, been falsified. It no longer contained the author's statement and very probably the correction was not in the interests of truth.

Without pressing the comparison too closely we may say that repression is to the other methods of defence what the omission of words or passages is to the corruption of a text, and in the various forms of this falsification we can discover analogies to the manifold ways in which the ego may be modified. It may be objected that this comparison breaks down in an essential particular, for the corruption of a text is the work of a tendentious censorship to which we have no counterpart in the development of the ego. But this is not so, for this tendency is amply represented by the compelling force of the pleasure-principle. The psychic apparatus is intolerant of unpleasure and strives to ward it off at all costs and, if the perception of reality involves unpleasure, that perception—i.e. the truth—must be sacrificed. For quite a long time flight and an avoidance of a dangerous situation serve as expedients in the face of external danger, until the individual is finally strong enough to remove the menace by actively modifying reality. But one cannot flee from oneself and no flight avails against danger from within; hence the ego's defence-mechanisms are condemned

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to falsify the inner perception, so that it transmits to us only an imperfect and travestied picture of our id. In its relations with the id the ego is paralysed by its restrictions or blinded by its errors, and the result in the sphere of psychic processes may be compared to the progress of a poor walker in a country which he does not know.

The purpose of the defence-mechanisms is to avert dangers of various kinds. It cannot be disputed that they are successful; it is doubtful whether the ego can altogether do without them during its development, but it is also certain that they themselves may become dangerous. Not infrequently it turns out that the ego has paid too high a price for the services which these mechanisms render. The expenditure of energy necessary to maintain them and the ego-restrictions which they almost invariably entail prove a heavy burden on the psychic economy. Moreover these mechanisms are not relinquished after they have helped the ego through the difficult years of its development. Of course, no individual makes use of all the possible mechanisms of defence: each person merely selects certain of them, but these become fixated in his ego, establishing themselves as regular modes of reaction for that particular character, which are repeated throughout life whenever a similar situation occurs to that which originally evoked them. They are, in fact, infantilisms and share the fate of so many institutions which struggle to maintain themselves when they have outlived their usefulness. 'Reason becomes unreason, beneficence a torment',⁷ as the poet laments. The adult ego with its greater strength continues to defend itself against dangers which no longer exist in reality and even finds itself impelled to seek out those real situations which may serve as a substitute for the original danger, so as to be able to justify its clinging to its habitual modes of reaction. Thus the defence-mechanisms produce an ever-growing alienation from the outside world and a permanent enfeeblement of the ego and we can easily understand how they pave the way for and precipitate the outbreak of neurosis.

For the moment, however, we are not concerned with the pathogenic rôle of the defence-mechanisms. Our purpose is to discover how our therapeutic work is affected by the ego-modification they produce. The material for the answer to this question is contained in Anna Freud's work, to which I have already referred. The main point is that the analysand repeats these modes of reaction during

⁷ 'Vernunft wird Unsinn, Wohltat Plage'.

analysis itself, exhibiting them, as it were, before our eyes; in fact that is the only means we have of learning about them. This must not be taken to imply that they make analysis impossible. On the contrary, they constitute half of our analytic task. The other half, the first to be tackled by analysis in its early days, is the revelation of that which is hidden in the id. In our therapeutic work we constantly alternate between the id and the ego, analysing now a fragment of the one and now of the other. In the one case our aim is to bring a part of the id into consciousness and in the other to correct something in the ego. The crux of the matter is that the mechanisms of defence against former dangers recur in analysis in the shape of resistances to cure. The consequence is that the ego's attitude to the cure itself is that of defence against a new danger.

The therapeutic effect of analysis depends on the bringing into consciousness of that which is, in the widest sense, repressed within the id. We prepare the way for this operation by our interpretations and constructions, but so long as the ego clings to its former defences and refuses to abandon its resistances we have interpreted merely to our own satisfaction, not to that of the patient. Now these resistances, although they belong to the ego, are nevertheless unconscious and, in a certain sense, they are in a position of isolation within the ego. The analyst recognizes them more easily than the hidden material in the id; one would suppose it would be enough to treat them as parts of the id and to bring them into relation with the rest of the ego by introducing them to the patient's consciousness. This would mean that half of our analytic task had been accomplished: we are hardly prepared for a resistance to the discovery of resistances. But what takes place is as follows. While we are analysing the resistances, the ego—more or less of set purpose—breaks the compact upon which the analytic situation is based. It ceases to support us in our efforts to reveal the id, it opposes these efforts, disobeys the fundamental rule of analysis and suffers no further derivatives of repressed material to emerge into consciousness. It is too much to expect that the patient should have a firm conviction of the curative power of analysis, but he may have come to the analyst with a certain amount of confidence and this, reinforced by the various factors in the positive transference which it is our business to evoke makes him capable of doing his share. The effect of the unpleasurable impulses which he feels stirring in him when his defensive conflicts are once more roused may be that the negative transference takes the field and the

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whole analytic situation is broken up. the patient now regards the analyst simply as an alien personality who makes disagreeable demands upon him and he behaves towards him exactly like a child who does not like a stranger and has no confidence in him. If the analyst tries to explain to the patient one of the distortions which his defence has produced and to correct it, he meets with a complete lack of comprehension and an imperviousness to valid arguments. We see then that there really is a resistance to the discovery of resistances and the defence-mechanisms do deserve the name which we originally gave them before they had been more closely examined; there are resistances not only to the bringing of id-contents into consciousness but also to the whole process of analysis and so to cure.

The effect which the defensive activities produce within the ego is rightly described as 'modification of the ego', if by this we understand the deviation of the ego from an imaginary norm which would ensure the patient's unswerving loyalty to his undertaking when he entered upon analysis. We can well believe what our daily experience suggests, that the outcome of an analysis depends principally upon the strength and depth of the roots of the resistances constituting the ego-modification. Once more we realize the importance of the quantitative factor and once more we are reminded that analysis has only certain limited quantities of energy upon which to draw when matching itself with the hostile forces. And it does seem as if victory were really for the most part with the big battalions.

VI

Our next question will be whether all ego-modification (in the sense in which we are using the term) is acquired during the defensive conflicts of early childhood. There can be no doubt about the answer. We have no reason to dispute the existence and importance of primal, congenital ego-variations. The single fact is decisive that every individual selects only certain of the possible defence-mechanisms and invariably employs those which he has selected. This suggests that each individual ego is endowed from the beginning with its own peculiar dispositions and tendencies, though we cannot predicate their nature and conditioning factors. Moreover, we know that we must not exaggerate the difference between inherited and acquired characteristics into an antithesis; that which has been acquired by our ancestors is certainly an important part of what we inherit. When we speak of 'archaic inheritance' we are generally thinking only

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of the id and apparently we assume that an ego was non-existent at the beginning of the individual's life. But we must not overlook the fact that id and ego are originally one, and it does not imply a mystical over-estimation of heredity if we think it credible that, even before the ego exists, its subsequent lines of development, tendencies and reactions are already determined. The psychological peculiarities of families, races and nations, even in their attitude towards analysis, admit of no other explanation. Nay, more, analytic experience convinces us that particular psychic contents, such as symbolism, have no other source than that of hereditary transmission, and research in various fields of folk-psychology seems to justify the assumption that in archaic inheritance there are other, no less specialized, deposits from primitive human development.

When we recognize that the peculiarities of the ego which we detect in the form of resistances may be not only acquired in defensive conflicts but transmitted by heredity, the topographical differentiation between ego and id loses much of its value for our investigations. When we advance a step further in analytic experience we come upon resistances of another type, which we can no longer localize and which seem to be conditioned by certain fundamental relations within the psychic apparatus. I can give only a few examples of the type of resistance to which I refer: this whole field of inquiry is still bewilderingly strange and has not been sufficiently explored. We come across people, for instance, of whom we should say that they display a peculiar 'adhesiveness of the libido'. The processes to which their analysis gives rise are so much slower than in other people because they apparently cannot make up their minds to detach libidinal cathexes from one object and displace them to another, although there is no particular reason for such cathectic fidelity. Then we meet the opposite type in which the libido seems specially mobile: it readily enters upon the new cathexes suggested by the analysis, abandoning its former ones for these. The difference between the two types is comparable to that experienced by a sculptor according as he works in hard stone or soft clay.

Unfortunately in the latter type the results of analysis often prove very evanescent; the new cathexes are soon abandoned and one feels not as if one had worked in clay but as if one had written in water. The old saw 'Light come, light go'⁸ proves true here.

In another group of patients we are surprised by an attitude which

⁸ 'Wie gewonnen, so zerronnen'.

we can only put down to a loss of the plasticity we should expect, an exhaustion of the capacity for change and development. We are indeed prepared for a certain degree of psychic inertia in analysis; when new paths are pointed out for the instinctual impulses, we almost invariably see that there is an obvious hesitation in entering upon them. We have described this attitude, though perhaps not quite rightly, as 'resistance from the id'. But in the cases which I have in mind all the mental processes, relations and distributions of energy are immutable, fixed and rigid. One finds the same state of affairs in very old people, when it is explained by the so-called force of habit, the exhaustion of receptivity through a kind of psychic entropy; but I am thinking of people who are still young. Our theoretical knowledge does not seem adequate to explain these types. Probably some element of time is at work here, changes in some rhythm in the development of psychic life which we have not yet apprehended.

In yet another group of cases the patients' resistance to analysis and the obstacles in the way of cure are probably due to variations in the ego which spring from another and even deeper root. Here we come to the ultimate phenomena to which psychological research has penetrated—the behaviour of the two primal instincts, their distribution, fusion and defusion, things which we cannot imagine to be confined to a single province of the mental apparatus, whether it be id, ego or super-ego. Nothing impresses us more strongly in connection with the resistances encountered in analysis than the fact that there is a force which defends itself by all possible means against recovery and clings tenaciously to illness and suffering. We have recognized that part of this force is the consciousness of guilt and the need for punishment, and this is undoubtedly correct; we have localized it in the ego's relation to the super-ego. But this is only one element in it, that which may be described as psychically bound by the super-ego and which we perceive in this form. We may suppose that other portions of the same force are at work, either bound or free, in some unspecified region of the psyche. If we bear in mind the whole picture made up of the phenomena of the masochism inherent in so many people, of the negative therapeutic reaction and of the neurotic's consciousness of guilt, we shall have to abandon the belief that psychic processes are governed exclusively by the striving after pleasure. These phenomena are unmistakable indications of the existence of a power in psychic life which, according to its aim, we call the instinct of aggression or destruction and which we derive from

the primal death-instinct of animate matter. It is not a question of an optimistic as opposed to a pessimistic theory of life. Only by the interaction and counteraction of the two primal instincts—Eros and the death-instinct, never by one or the other alone, can the motley variety of vital phenomena be explained.

How the elements of these two types of instinct combine to fulfil the various vital functions, under what conditions such coalitions tend to dissolve and finally break up, what disturbances correspond to these changes and what sensations they evoke in the perceptual gamut of the pleasure-principle—these are problems whose elucidation would be the most valuable achievement of psychological research. For the moment we must

bow to those superior powers which foil our attempts. Even to exert a psychic influence upon a simple case of masochism is a severe tax on our skill.

In studying the phenomena which testify to the activity of the instinct of destruction we are not confined to the observation of pathological material. There are countless facts in normal mental life which require this explanation, and the keener the power of our discernment the greater the abundance in which they present themselves to our notice. The subject is too novel and too important to be treated as a side-issue in this discussion; I will content myself with selecting a few specimens of these phenomena. Here is an example: It is well known that at all times there have been, as there still are, human beings who can take as their sexual objects persons of either sex and that the one orientation is no impediment to the other. We call these people bisexual and accept the fact of their existence without wondering much at it. But we have come to know that all human beings are bisexual in this sense and that their libido is distributed between objects of both sexes, either in a manifest or a latent form. But the following point strikes us. While in the individuals I first mentioned the libidinal impulses can take both directions without producing a clash, in other and more frequent cases the result is an irreconcilable conflict. A man's heterosexuality will not tolerate homosexuality, and vice versa. If the former tendency is the stronger, it succeeds in keeping the latter in a state of latency and preventing its attaining real gratification. On the other hand there is no greater danger for a man's heterosexual function than that of disturbance by latent homosexuality. We might explain these facts by saying that each individual has only a given quantity of libido at his disposal and that the two rival orientations have to contend for it. But it is not clear why these rivals

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should not regularly divide between them the available quantity of libido, according to their relative strength, as does happen in some cases. We are forced to conclude that there is something peculiar in the tendency to conflict, something which introduces a new element into the situation, independently of the quantity of libido. It is difficult to account for this spontaneous tendency to conflict except as the intervention of an element of free aggression.

If we recognize that the case which I have just described is a manifestation of the instinct of destruction or aggression we are at once confronted with the question whether this notion should not be extended to apply to other instances of conflict, or, indeed, whether we ought not to review all our knowledge of psychic conflict from this new angle. We assume that, in the course of the development of human beings from their primitive state to civilization a considerable part of their aggression is internalized, turned inwards and, if this is so, inner conflicts are certainly the correct equivalent of the external conflicts which have now ceased. I am well aware that the dualistic theory according to which an instinct of death, destruction or aggression claims equal partnership with Eros as manifested in libido, has met with little general acceptance and has not really established itself even among psycho-analysts. My delight was proportionately great when I recently discovered that our theory was held by one of the great thinkers of ancient Greece. So glad am I of this confirmation that I willingly sacrifice the prestige of originality, especially as I read so widely in earlier years that I can never be quite certain that what I

thought was a creation of my own mind may not really have been an outcome of cryptomnesia.

Empedocles of Akragas (Girgenti), 9 born about 495 B.C., is one of the grandest and most remarkable figures in the history of Greek civilization. The interests of this many-sided personality took the most varied directions. He was a scientist and thinker, a prophet and worker of miracles, a politician, a philanthropist and a physician versed in natural science. He was said to have freed the town of Selinus from malaria, and his contemporaries worshipped him as a god. In his mind the sharpest contrasts seem to have co-existed; exact and sober in his investigations in physics and physiology, he did not recoil from obscure mysticism and he indulged in cosmic speculations of astonishingly fantastic boldness. Capelle compares him with

9 I have based what follows on a work by Wilhelm Capelle, *Die Vorsokratiker*. Alfred Kröner, Leipzig, 1935.

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Dr. Faustus, 'to whom many a secret was revealed'. Born at a time when the realm of science was not yet divided into so many provinces, he held some theories which inevitably strike us as primitive. He explained the variety of things by the fusion of the four elements, earth, water, fire and air, and he held that all nature was animate and believed in the transmigration of souls. At the same time, however, he had such modern ideas as that of the gradual evolution of living beings, the survival of the fittest and the recognition of the rôle of chance (τυχη) in this development.

The theory of Empedocles which specially claims our attention is that which approximates so closely to the psycho-analytical theory of instinct that we should be tempted to maintain that the two are identical, were it not for this difference: the Greek's theory is a cosmic phantasy, while our own confines itself to its biological application. At the same time, the fact that Empedocles ascribed to the universe the same principle of animation as is manifested in each individual living creature makes this difference considerably less important.

The Greek philosopher taught that there were two principles of natural process in the life of the universe as in that of the mind and that these principles were eternally in conflict with one another. He called them φιλία—love—and vikos—strife. The one of these powers, which he really conceived of as natural forces working as instincts, and certainly not as intelligences with a conscious aim, 10 strives to unite the atoms of these four elements in one great sphere, while the other seeks to dissolve these fusions and to separate the atoms of the elements. Empedocles conceives of the world-process as a continuous, never-ceasing alternation of periods in which the one or the other of the two fundamental forces triumphs, so that at one time love and, at another time, strife fulfils its purpose and governs the universe, after which the other vanquished power asserts itself and in its turn prevails.

The two fundamental principles of Empedocles—φιλία and vikos—are, both in name and in function, the same as our two primal instincts, Eros and Destruction, the former of which strives to comprehend existing phenomena in ever greater unities, while the latter

seeks to dissolve these combinations and destroy the forms to which they have given rise. But we shall not be surprised to find that this theory has

10 I have based what follows on a work by Wilhelm Capelle, *Die Vorsokratiker*. Alfred Kröner, Leipzig, 1935, S. 186.

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changed in certain respects on its re-emergence after two and a half thousand years. Apart from the limitations imposed upon us by the biopsychical standpoint, we no longer take as our fundamental elements the four elements of Empedocles; animate matter is now sharply differentiated from inanimate and we no longer think of the mingling and separation of particles of matter but of the fusion and defusion of instinct-components. Moreover, we now have a certain biological basis for the principle of 'strife', since we trace the instinct of destruction to the death-instinct, the urge of animate matter to return to its inanimate state. We are of course not asserting that this instinct first arose with the dawning of life or denying that it existed before. And nobody can foresee in what guise the nucleus of truth contained in the theory of Empedocles will present itself to the vision of a later day.

VII

In 1927, S. Ferenczi read a paper, entitled *Das Problem der Beendigung der Analysen*¹¹, which contained an abundance of valuable material. He concluded it with the comforting assurance that 'analysis is by no means an interminable process. On the contrary, if the analyst has a thorough knowledge of his business and a sufficient fund of patience the treatment can be carried to a natural conclusion'. This paper as a whole does, however, seem to me to convey a warning not to aim at the shortening but rather at the deepening of the analytic process. Ferenczi makes the further important point that success very largely depends upon the analyst's having profited by the lesson of his own 'errors and mistakes, and got the better of 'the weak points in his own personality'. This is an important contribution to our problem. Amongst the factors which influence the prospects of an analysis and add to its difficulties in the same manner as the resistances, we must reckon not only the structure of the patient's own ego but the personal characteristics of the analyst.

It cannot be disputed that analysts do not in their own personalities wholly come up to the standard of psychic normality which they set for their patients. Opponents of analysis are wont to point this out derisively and use it as an argument to prove the uselessness of the analytic method. We might seek to refute the criticism by asserting that it makes an unjustifiable demand upon analysts, who are individuals trained in the practice of a certain art and are presumably ordinary

11 *Internationale Zeitschrift für Psychoanalyse*, Bd. XIV, 1928.

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human beings. Nobody surely maintains that a physician is incapable of treating internal diseases because his own internal organs happen to be unsound. On the contrary, it may

be argued that there is a certain advantage when a man who is himself threatened with tuberculosis specializes in the treatment of that disease. But the cases are not on all fours. So long as he is capable of practising at all, a physician suffering from lung or heart trouble is not handicapped in diagnosing or treating internal disease. The analyst, on the other hand, because of the peculiar conditions of his work is really prevented by his own defects from discerning his patient's situation correctly and reacting to it in a manner conducive to cure. So there is some reason in the demand for a high degree of psychic normality and correct adjustment in the analyst as evidence of his qualifications for his work. And there is another point: he must be in a superior position to that of his patient if he is to serve as a model for the latter in certain analytic situations and, in others, to act as his teacher. Finally, we must not forget that the relationship between analyst and patient rests on the love of truth as its foundation, that is, on the acknowledgment of reality, and it precludes every sort of sham and deception.

Here let us pause for a moment to assure the analyst that he has our sincere sympathy in the very exacting requirements of his practice. It almost looks as if analysis were the third of those 'impossible' professions in which one can be sure only of unsatisfying results.

The other two, as has long been agreed, are the bringing-up of children and the government of nations. Obviously we cannot demand that the prospective analyst should be a perfect human being before he takes up analysis, so that only persons of this rare and exalted perfection should enter the profession. But where and how is even the most inadequate of individuals to acquire the ideal qualifications for his work? The answer is: in his own analysis, with which he begins his training. For practical reasons this analysis can be only short and incomplete: the main object of it is to enable the training-analyst to form an opinion whether the candidate should be accepted for further training. The training-analysis has accomplished its purpose if it imparts to the novice a sincere conviction of the existence of the unconscious, enables him through the emergence of repressed material in his own mind to perceive in himself processes which otherwise he would have regarded as incredible and gives him a first sample of the technique which has proved to be the only correct method in

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conducting analyses. This in itself would not constitute an adequate training, but we hope and believe that the stimuli received in the candidate's own analysis will not cease to act upon him when that analysis ends, that the processes of ego-transformation will go on of their own accord and that he will bring his new insight to bear upon all his subsequent experience. This does indeed happen and, just in so far as it happens, it qualifies the candidate who has been analysed to become an analyst.

Unfortunately something else happens as well. One can only give one's impressions in describing this second result. Hostility on the one hand and partisanship on the other create an atmosphere unfavourable to objective investigation. It does look as if a number of analysts learn to apply defence-mechanisms which enable them to divert the conclusions and requirements of analysis from themselves, probably by applying them to others. They themselves remain as they are and evade the critical and corrective influence of analysis. Perhaps this confirms the dictum of a writer who warns us that it is hard for a mortal who acquires power not to misuse it.¹² Sometimes, when we try to understand this attitude in analysts, we are irresistibly and disagreeably reminded of the effect of the

X-rays on those who use them without due precaution. We can hardly be surprised if constant pre-occupation with all the repressed impulses which struggle for freedom in the human psyche sometimes causes all the instinctual demands which have hitherto been restrained to be violently awakened in the analyst himself. These are 'dangers of analysis', threatening not the passive but the active partner in the analytic situation, and it is our duty to face them. There can be no doubt how they must be encountered. Every analyst ought periodically himself to submit to analysis, at intervals of, say, five years, without any feeling of shame in so doing. This is as much as to say that not only the patient's analysis but that of the analyst himself is a task which is never finished.

At this point we must guard against a misconception. It is not my intention to assert that analysis in general is an interminable business. Whatever our theoretical view may be, I believe that in practice analyses do come to an end. Every analyst of experience will be able to think of a number of cases in which he has taken permanent leave of the patient *rebus bene gestis*. There is a far greater discrepancy between theory and practice in cases of so-called character-analysis. Here

12 Anatole France, *La révolte des anges*.

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it is not easy to predict a natural end to the process, even if we do not look for impossibilities or ask too much of analysis. Our object will be not to rub off all the corners of the human psyche so as to produce 'normality' according to schedule nor yet to demand that the person who has been 'thoroughly analysed' shall never again feel the stirrings of passions in himself or become involved in any mental conflict. The business of analysis is to secure the best possible psychological conditions for the functioning of the ego; when this has been done, analysis has accomplished its task.

VIII

Both in therapeutic and character-analyses we are struck by the prominence of two themes which give the analyst an extraordinary amount of trouble. We soon come to the conclusion that some general principle is at work here. These two themes are connected with the difference between the sexes: one is characteristic of men and the other equally characteristic of women. In spite of the difference in content there is an obvious correspondence between the two. Some factor common to both sexes is forced, by the difference between them, to express itself differently in the one and in the other.

The two corresponding themes are, in women, envy of the penis—the striving after the possession of a male genital—and, in men, the struggle against their passive or feminine attitude towards other men. In its early days psycho-analysis defined this common factor as the individual's attitude to the castration-complex. Subsequently Alfred Adler coined the term 'masculine protest', which, in the case of men, is exactly right. I think that, from the beginning, 'repudiation of femininity' would have been the correct description of this remarkable feature in the psychic life of mankind.

Supposing that we now try to introduce this notion into the structure of psycho-analytical theory we shall find that, by its very nature, this factor cannot occupy the same place in the case of both sexes. In males the masculine striving is from the beginning and throughout entirely ego-syntonic; the passive attitude, since it necessitates the assumption

of castration, is energetically repressed and often the only indications of its existence are exaggerated over-compensations. In females also the striving after masculinity is consonant with the ego at a certain period, namely, in the phallic phase, before development in the direction of femininity has set in. But later it succumbs to that momentous process of repression, the outcome of which (as

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has often been pointed out) determines the fate of the woman's femininity. A great deal depends upon whether a sufficient amount of her masculinity-complex escapes repression and exercises a lasting influence on her character. Normally large portions of that complex undergo transformation and contribute to the development of femininity. The unsatisfied wish for a penis is destined to be converted into a wish for a child and for a man, who possesses a penis. Very often indeed, however, we find that the wish for masculinity persists in the unconscious and, in its repressed state, exercises a disturbing influence.

As is plain from what has just been said, in both cases it is the attitude of the opposite sex which succumbs to repression. I have stated elsewhere¹³ that it was Wilhelm Fliess who called my attention to this point. Fliess was inclined to regard the difference between the sexes as the true cause and original motive of repression. I can only repeat that I do not accept this view: I do not think we are justified in sexualizing repression in this way—that is to say, in explaining it on a biological instead of a purely psychological basis.

The paramount importance of these two themes—the wish for a penis in women and, in men, the struggle with passivity—did not escape the notice of Ferenczi. In the paper that he read in 1927 he laid it down as a principle that in every successful analysis these two complexes must have been resolved.¹⁴ From my own experience I would observe that in this I think Ferenczi was asking a very great deal. In no phase of one's analytic work does one suffer more from the oppressive feeling that all one's efforts have been in vain and from the suspicion that one is 'talking to the winds' than when one tries to persuade a female patient to abandon her wish for a penis as impossible and to convince a male patient that a passive attitude towards another man does not always signify castration and that in many relations in life it is inevitable. The rebellious over-compensation of the male produces one of the strongest transference-resistances. A man will not be subject to a father-substitute or owe him anything and he therefore refuses even to accept his cure from the physician. There

13 'A Child is being Beaten', Collected Papers, Vol. II.

14 '... in every male patient the sign that his castration-anxiety has been mastered must be forthcoming, and this sign is a sense of equality of rights with the analyst; and every female patient, if her cure is to rank as complete and permanent, must have finally conquered her masculinity-complex and become able to submit without bitterness to thinking in terms of her feminine rôle'. (Collected Papers, S. 8).

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is no analogous form of transference which can ensue from the feminine wish for a penis, but it is the source of attacks of acute depression, because our woman patients feel an

inner conviction that the analysis will avail them nothing and they will be none the better for it. We can only agree with them when we discover that their strongest motive in coming for treatment was the hope that they might somehow still obtain a male organ, the lack of which is so painful to them.

All this shows that the form of the resistance is immaterial: it does not matter whether it belongs to the transference or not. The vital point is that it prevents any change from taking place in the patient's psyche—everything remains as it was. We often feel that, when we have reached the penis-wish and the masculine protest, we have penetrated all the psychological strata and reached 'bedrock' and that our task is accomplished. And this is probably correct, for in the psychic field the biological factor is really the rock-bottom. The repudiation of femininity must surely be a biological fact, part of the great riddle of sex.¹⁵ Whether and when we have succeeded in mastering this factor in an analysis is hard to determine. We console ourselves with the certainty that everything possible has been done to rouse the analysand to examine and to change his attitude in this respect.

¹⁵ We must not be misled by the term 'masculine protest' into supposing that what the man repudiates is passivity, or, as we may say, the social aspect of femininity. Such a notion is speedily contradicted by the observation that the attitude such men display towards women is often masochistic or actually slavish. What they reject is not passivity in general but passivity in relation to other men. That is to say, the 'masculine protest' is really simply castration-anxiety.

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