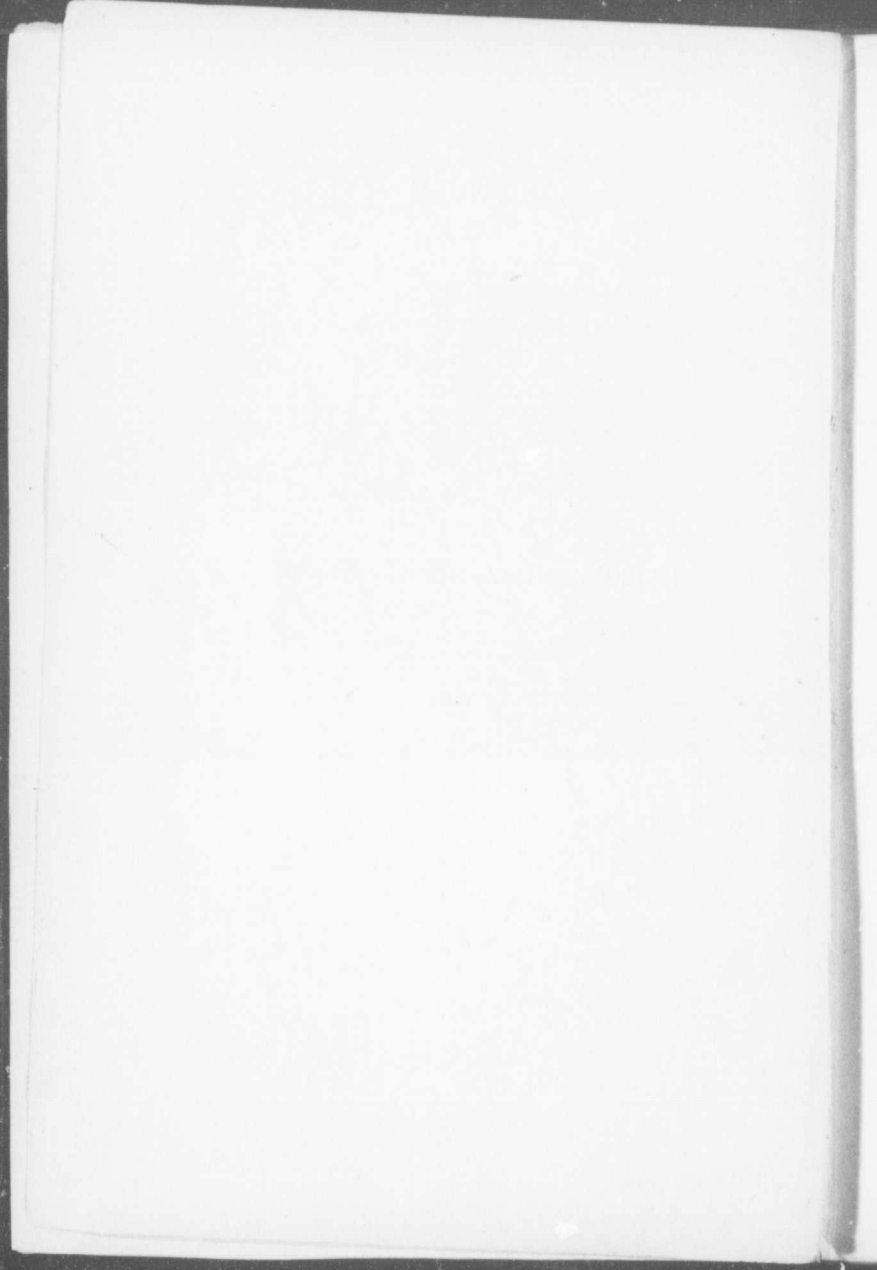


PAPERS ON PSYCHO-ANALYSIS



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ON  
PSYCHO-ANALYSIS

BY  
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'It is impossible to tell the truth so that it shall be understood and not believed.'

BLAKE

Ein Nichtverstehen ist oft ein Nichtverstehenwollen.'

FREUD

'If ye expect not the unexpected ye shall not find truth.'

HERACLITUS

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DEDICATED  
TO  
PROFESSOR FREUD  
AS A TOKEN OF THE AUTHOR'S GRATITUDE

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## PREFACE TO THE SECOND EDITION

THIS book has been out of print for some three years, but it will readily be understood that current events have interfered with the planning of a second edition. It has now been thoroughly revised and extended, one chapter of the original twenty has been omitted, and twenty-one new ones have been added; eleven of these have not previously appeared in English. In the preparation of this edition I have had, thanks to the courtesy of the Board of Trade, the advantage of access to nearly all the recent foreign publications on the subject, which are otherwise unobtainable in this country. I have also been fortunate in securing the help of a psycho-analytical colleague, Dr. Douglas Bryan, in the preparation of a full index, and I wish to acknowledge my indebtedness to him for the trouble he has devoted to this irksome task. I am equally indebted to my wife for her laborious care in seeing the book through the press.

Since the book was first published, in 1912, two events of importance to the psycho-analytical movement have taken place. The first was the abandonment, under the guise of pretended development, of the principles of psycho-analysis on the part of Jung and some of his Swiss pupils. It is, of course, a familiar historical fact that every revolution in thought is succeeded, temporarily at least, by a reaction which aims, openly or otherwise, at nullifying its effects and re-establishing the old order—and this was especially to have been expected in such a field as psycho-analysis, where not only initial boldness, but also persistent courage is needed in order fully to accept the disturbing implications of the new thought—but there can have been few cases in which the successes of the revolution have been so flagrantly appropriated and exploited as has happened with Jung and his followers. Fortunately, his increasingly evident preference for mysticism to science has, by elucidating the tendency of his work, minimised the confu-



sion which he might otherwise have created in the minds of beginners.

The other event is, of course, the War, which has interfered with the progress of psycho-analytical development as it has with that of most other scientific movements. Nor has the circumstance of the War been neglected by the opponents of the work inaugurated by Freud, for they have put forward the singular thesis that any scientific theory published in the German language—even though its author may have no German blood in his veins and have hardly spent a month of his life in Germany—must necessarily and indisputably be erroneous. Which is a further confirmation, if one were needed, of Freud's contention that the human mind is still far from being a flawless instrument of thought.

111, HARLEY STREET,  
LONDON,  
*September, 1918.*

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# PAPERS ON PSYCHO-ANALYSIS

## CHAPTER I INTRODUCTION

It is well known that Freud's work, of which this book is a partial exposition, has from the beginning met with constant hostility, and that his conclusions have been combated with an acrimony scarcely equalled elsewhere in science in modern times. It would hardly be correct to attribute this state of affairs altogether, as some writers have done, to the mental stereotypy that is so grievous a characteristic of mankind, and which inevitably interposes a resistance to any revolution in thought.<sup>1</sup> In the present case a greater measure of the resistance is inherent in the situation itself, in a way that it will be well to explain at the outset.

Freud's main work has been carried out in the field of psychological medicine, and he is before everything a clinical psychologist. In his efforts to ascertain the significance, and therefore the genesis, of neurotic symptoms, he made the remarkable and quite unexpected discovery that these have a definite psychological meaning and purpose, one, however, that is totally unknown to the patient. He found, further, that even when this meaning was laid bare by appropriate

<sup>1</sup> Davenport's remarks in this connection, made seventy years ago, could be paralleled by numerous similar quotations from other observers: 'It is the fate of all useful discoveries and improvements to meet with bigoted or interested opposition from those who would willingly remain in the beaten path of habit, rather than acknowledge any change to be profitable. That most important discovery of the circulation of the blood, by Harvey, was at first furiously opposed, and was *proved*, according to the laws of dynamics, to be both impossible and absurd; yet when it was vain to dispute the fact, it was undervalued, as one *almost* known long before.' One has only to think, amidst a cloud of others, of the names of Elliotson, Darwin, Lister, in our profession in England alone.

methods, which practically excluded the possibility of error, at least of gross error, the revelation of it was not simply surprising to the patient, but extremely distasteful; so much so that the patient always strove as long as possible against accepting it, even in the face of irrefragable evidence. In one way or another the conclusion was repugnant to the patient's conscious ideal of himself, and was thus wounding to his *amour propre*. Largely on the basis of this empiric finding that the patient opposed a dynamic resistance to the revealing of his previously unconscious thoughts, Freud concluded that the force thus manifesting itself outwardly was the same one that had hitherto prevented the patient from becoming aware of these thoughts; to the force when operative in the latter (inward) direction he gives the name of 'repression,' using the word in a special sense slightly different from the usual one. On tracing the unconscious thoughts as far as possible—using a technique, known as psycho-analysis, specially devised for the purpose—he found himself in a strange mental world quite foreign to that of consciousness, and to this he refers under the name of 'the unconscious.' On then studying the characteristics of this buried stratum of the mind,<sup>1</sup> he found that it was extremely primitive in nature, and closely akin to the mind both of the infant and of the savage. It was, however, not at all an isolated phenomenon in the neuroses. On turning his attention to other imaginative products of the mind, notably dream-life, many forms of wit, folk-lore, mythology, poetry, and so on, he was again able plainly to trace the action of the same characteristic type of thought as that with which he had become familiar in his study of the neuroses.

The subject of psycho-analysis, which may be defined as the study of unconscious mentation, was thus gradually extended as one field after another opened up, and with increasing knowledge it became more and more possible to trace the indirect operations of the unconscious even where at first sight their existence was hardly, or not at all, suspected. Or, to put the matter in another way, it has become more and more possible to detect the contribution made by the unconscious to various modes of mental activity that have hitherto been thought to be purely conscious in both appearance and origin. Having regard to the primitive nature of the unconscious, one cannot be surprised that the genetic aspects of the whole

<sup>1</sup> For a description of these see Chapter VI., and for their genetic aspects Chapter XXXVI.

subject have assumed a great importance, for evidence is constantly accumulating to shew that there is a detailed genetic continuity throughout the mind, so that the study of its ultimate sources, which in the nature of things can hardly be elsewhere than in the primitive unconscious tendencies, becomes of especial interest. In this way, bit by bit, a genetic theory of the mind as a whole has gradually been built up, some of the features of which will now be indicated.

Freud holds that a great part of mental life, perhaps the whole, can be summarised under two principles, which he terms the 'pleasure-principle' and the 'reality-principle' respectively. The former represents the primary, original form of mental activity and is characteristic of the earliest stages of human development, both in the individual and in the race; it is therefore typically found in the mental life of the infant and, to a less extent, in that of the savage. Its main attributes are a tendency, on the one hand, to avoid pain and disagreeableness of whatever kind, and, on the other, a never-ceasing demand for immediate gratification of various desires of a distinctly primitive and lowly order, and all this at literally any cost; it is, in other words, ruled entirely by the hedonic 'pleasure-pain' (*Lust-Unlust*) principle. It is hard to distinguish the two tendencies just mentioned, even if they are—which is by no means certain—different in their nature, for it is likely that the organism treats the desires in question in very much the same way as it does painful stimuli—namely, as molesters of its peace whose disturbing influence has to be neutralised (stilled) by means of reactions appropriate to that end. The principle is thus exquisitely egocentric, selfish, personal, and non-social (which in actual practice often means anti-social). The thought-processes corresponding to it proceed by the use of analogies and superficial associations, treat resemblances between different ideas as equivalent to identities, ignore all the laws of logic, and make no distinction between a phantasy and an actual situation of life. Soon, however, this tendency comes into conflict with the 'reality-principle,' which in all probability is genetically related to it. The function of the latter is to adapt the organism to the exigencies of reality, to subordinate the imperious demand for immediate gratification, and to replace this by a more distant but more permanently satisfactory one. It is thus influenced by social, ethical, and other external considerations that are ignored by

the earlier principle. It can, however, only guide and control the pleasure-principle, adapting this to the environment; it can never abrogate its activity.

The fate of the primary pleasure-principle, and the modifications it has to undergo before being allowed to manifest itself, is one of the central objects of psycho-analytic study, which is thus the study of the fundamental driving force behind the majority of human activities and interests. The fate of the pleasure-principle may briefly be indicated as follows: The primary tendencies comprising it are inhibited and even 'repressed' (*i.e.*, kept from consciousness), so that they can neither reach their immediate aim nor even continue as conscious processes; henceforth they lead an underground life, their very existence unsuspected by the individual, and ever striving towards an unattainable goal. Being in discord with environmental and educational influences, and often repugnant to the moral or æsthetic feelings of the individual, they are subjected to a strong 'repressing' force, and any attempt to uncover them, to make him realise their existence by bringing them to the surface of consciousness, instinctively leads to a lively opposition and resentment on his part. A solution of the conflict between the repressing and repressed forces may be reached, however, whereby the energy of the latter is diverted to other aims, in much the same way as a conservation and transformation of energy takes place in the physical world. Upon the manner in which this is accomplished greatly depend the future development and mental harmony of the individual. When the transformation is in accord with the demands of external reality and conscious ideals, it represents an important gain for the progress of civilisation and culture, an amount of energy being set free that is devoted to carrying out the work and fulfilling the needs of society. A limited part of the original tendencies undergoes a relatively slight modification, and appears in the adult in the form of sexual and other activities; the purely mental processes that most markedly shew the characteristics of the primary type are those of the phantasy, such as reveries and dreams. Between these two extremes lie all possible gradations in the extent to which the transformation is effected, neurotic symptoms being an example of imperfect and unsatisfactory transformation. There is also a considerable variation from one time to another. When, for instance, the demands of reality are severe, when life is hard

to bear, there is a tendency for the person's mental activities to revert to the primary type, with all the serious consequences of this. Indeed, the strain of approximating to the level of the reality-principle (actually this is seldom attained) is much greater than we have any idea of. The tendency to revert to a simpler level asserts itself not only in times of difficulty, of illness, of fatigue, but periodically almost every day, for this is probably the true meaning of sleep, that regular withdrawal from the world of external reality.

Now, not only does the individual immediately concerned display a resistance against the tracing out of the roots of various transformed activities, but any of the conclusions reached by so doing necessarily offend both the æsthetic and the rational senses in general, so that they are unacceptable to the world at large—the æsthetic (using the word in its widest sense) because the discovery of the hidden root can only refer to one that is hidden on account of its unpleasantness, the rational because the inhibiting forces have erected barriers against the illogical and symbolic mode of thought that characterises unconscious mental processes. When, therefore, critics decry Freud's conclusions as unæsthetic and illogical—one critic neatly embodied his opposition in the remark that the conclusions are 'contrary to both good taste and common sense'—they are displaying a perfectly intelligible reaction, although they defensively ascribe to his ratiocination the presence of attributes that properly belong to those phenomena the existence of which they are striving not to recognise. On both grounds an instinctive aversion is necessarily felt from the translation of any surface activity into more primary terms, and this expresses itself in a whole series of denials, incredulities, pretexts, rationalisations, and so on. Against this current of prejudice it is the duty of the sceptical investigator to maintain a purely critical attitude, and to endeavour to overcome the influence of both internal and external bias in his efforts to reach objective conclusions. On the medical profession the responsibility in this question is especially weighty, because of the immediate practical importance that the new knowledge has for the field of curative psychological medicine: to the race it may be a small matter whether a series of new discoveries is made in one century or the next; to the suffering individual it is often of vital importance. Very few have any conception, for instance, what an appalling



mass of misery could have been obviated in this country alone had the care of 'shell shock' and other cases of war neurosis been in the hands of physicians with some knowledge of psycho-analysis.

To those who have studied the various aspects of the psycho-analytical theory, only some of which are presented in this book, the relation it bears to the theory of organic evolution becomes very striking. Freud's recent demonstration of the truth—long suspected, but now proved in a far deeper sense than had been anticipated—that ontogeny epitomises phylogeny in the mental sphere just as definitely as in the physical, would alone be of remarkable interest in this connection. He has shewn that the conflict between the primary and secondary systems of mental activity—a conflict on which not merely the growth, but the very existence of civilisation depends—recapitulates on a modified scale in the individual the history of its course in the race, producing strikingly similar manifestations in the two cases. In general, Freud's thorough-going application of the principle of determinism in the mental sphere, his shifting of the emphasis in psychology away from the intellectual to the instinctive, and his derivation of the higher and more complex mental activities from lower forms more nearly akin to those present in other animals than man, represent a momentous progress in scientific thought; for the reduction of the mental to psycho-biological terms—instead of the ignoring of it, which the cruder forms of the materialist doctrine current in science are tantamount to—seems the only satisfactory way of bringing psychology into line with the organic sciences, and of establishing, for instance, a harmonious relationship between it and physiology. Hardly any serious endeavour has hitherto been made to fertilise psychology with the ideas of organic evolution, and half a century had to pass before the advent of a Darwin of the mind; now, thanks to Freud, we have for the first time a purely naturalistic theory of mental evolution, one free from any admixture of metaphysical, ethical, or supernatural mysticism.

The great criterion of the importance of a scientific generalisation is its fertility. The true significance of the theory of organic evolution was appreciated only when its fructifying power became apparent in the fields of embryology, palæontology, and comparative morphology, as well as in that of biology proper. In like manner the psycho-analytical theory

has at the same time received extensive confirmation from, and supplied fruitful stimuli to, the mental sciences cognate with psychology—anthropology, philology, folk-lore, mythology, criminology, jurisprudence, and sociology. With both, the sap of new thought penetrating along the parent stem—in the one case of biology, in the other of psychology—has flowed through to all the branches that arise from it.

## CHAPTER II

### RATIONALISATION IN EVERYDAY LIFE<sup>1</sup>

ONE of the most important results of Professor Freud's researches, and one of the cardinal points of his psychological theory, has been the demonstration that a number of conscious mental processes owe their origin to causes unknown to and unsuspected by the individual. This applies equally to the mentally normal and abnormal, between whom, here as elsewhere, it is so arbitrary to draw a distinction. In my opinion this apparently simple idea is one of the most far-reaching significance both to psychology and to the sciences, such as sociology, that must be founded on psychology. This conclusion is based on the view that inquiry, pursued with adequate scepticism, shews the number of such mental processes to be exceedingly great; in fact, I would maintain that the large majority of conscious mental processes in a normal person arise from sources unsuspected by him. We are as yet only on the threshold of important discoveries that will surely be made as soon as this principle finds a rigorous application; and the subject opened up is so vast that in these remarks I can do no more than sketch out a few of the directions along which it would seem that fruitful conclusions are readily to be attained.

Although the importance of feeling in the moulding of our judgements, beliefs, and conduct, has for centuries been recognised by poets and writers, academic psychology has usually allotted to it a very subordinate position in relation to what may be called the 'intellectual processes.' Of late years, however, more and more recognition has been given to the importance of feeling; until now one may fairly question whether there exist any mental processes in the formation and direction

<sup>1</sup> Read at the First International Psycho-Analytical Congress, at Salzburg, April 27, 1908. Published in the *Journal of Abnormal Psychology*, vol. iii., No. 2.

of which feeling does not play a part of the first rank, and the science of 'feeling psychology,' to which Professor Freud has devoted himself, shews every sign of becoming the only scientific psychology of the future. He has shewn with convincing precision that a number of previously incomprehensible mental processes, such as dream formation and certain apparently meaningless and accidental happenings of daily life, are throughout to be explained by regarding them as problems of feeling. He has further shewn that the causes of these mental processes are usually not only unsuspected by the individual concerned, but are repudiated and denied by him when the very existence of them is suggested. In other words, there exist elaborate psychological mechanisms the effect of which is to conceal from the individual certain feeling processes, which are often of the highest significance to his whole mind. The complexity and subtlety of these mechanisms vary with what may be called the extent of the necessity for concealment, so that the greater the resistance the individual shews to the acceptance of the given feeling, the more elaborate is the mechanism whereby it is concealed from his consciousness.

The concealment mechanisms may be studied in two ways. The known feeling processes may be traced from their origin to the changed form in which they appear in consciousness, and their effect on associated mental processes thus observed; or a given mental process may be analysed, and its causes traced back to their elementary sources. Study along these lines shews that, although the mechanisms in question are both numerous and complex, they may from one point of view be grouped into two classes, according to whether the individual will offer an explanation as to the origin of the terminal mental process or not. In both classes inquiry into the source of the mental process is stopped and the individual regards any such inquiry as superfluous—in the one case because he already has an explanation, in the other case because he thinks one does not exist. As will presently be seen, there is no sharp line between the two classes, and in both of them instances may be found of all kinds of mental processes, actions, judgements, memories, beliefs, etc.

The prominent characteristic of the *second class* is the fact that the individual considers the given mental process to be self-explanatory, and regards any further inquiry into its

origin as being absurd, irrelevant, meaningless, unnecessary, and, above all, fruitless. This, broadly speaking, is the mechanism that prevents the individual from becoming conscious of the source of the mental process. His precise attitude towards the inquiry varies somewhat according to the kind of mental process concerned, and this enables us further to subdivide the class into two.

When a person is asked what was the cause of a given mental process belonging to this class, he may in the first place categorically assert that it was causeless. Such is the usual attitude adopted towards any of the large group of unconscious and accidental occurrences described by Professor Freud in his 'Psychopathologie des Alltagslebens.'<sup>1</sup> If pressed, the individual may assert vaguely that they are due to 'chance' or 'inattention'; but it is plain that what he means is that they have no effective cause, and that there is no reason whatever why that particular mistake should have been made rather than any other. Yet, as is well known, psycho-analysis always reveals a precise cause for the occurrence, shewing that only it and no other could have arisen, as, indeed, might have been anticipated from the general principles of scientific determinism; and this cause is often associated with some of the most intimate of the individual's feeling processes.

The person may in the second place not so much solemnly deny that the occurrence had a cause as regard the question as being foolish or meaningless. The key to the interpretation of this attitude lies in recollecting the popular illusion that a volitional process is a self-caused one—*i.e.*, has no cause—for it may be doubted whether any one is entirely free from the taint of voluntarism in feeling, although the heretical nature of the fallacy itself is, from a scientific standpoint, plain enough. The mental processes now under discussion are thus always volitional ones, though the volitional element may not always be evident at the time, but may be imported as an afterthought. A neat example of this class, in which the volitional element was prominent at the moment of occurrence, is the one given by Adler, in which an individual deliberately selected a number under the full impression that there was no mental process at work other than his free unfettered choice; psycho-analysis, however, revealed a complex series of causes which had determined precisely the number

<sup>1</sup> See Chapter IV.

chosen, causes reaching into the most intimate part of his mind.<sup>1</sup> Careful consideration of this example shews further that there were two groups of mental processes concerned—first, a conscious determination to select a number, and, secondly, the actual selection itself. The former was a volitional process, caused by the reading of Professor Freud's book; the second an automatic process, caused by the unconscious feeling processes revealed in the psycho-analysis. Yet both groups appeared equally volitional to the individual, the feeling of volition having been extended from the conscious mental process to the automatic one that was associated with it. The same mechanism may be seen in the other cases in which the volitional element is imported as an afterthought. If, for example, a person decides to take a stroll, the actual direction of his stroll may well be determined by various minor influences that pass unnoticed. If later he is asked why he walked down such-and-such a street, the probability is that he will simply answer, 'Because I decided to.' Here also the slightest trace of conscious volitional feeling is utilised to cover other associated mental processes. In a large number of routine acts, performed automatically, the individual adopts the same attitude when questioned as to their cause. Many acts, the cause of which is a reflex obedience to the custom prevailing in his circle, he will regard when questioned as being volitional, the true cause being thus concealed from him. If, for instance, he is asked why he wears a stiff collar or a tie, he will certainly regard the question as being extremely foolish, though if he is in an indulgent mood he may humour one to the extent of giving some imaginary explanation, such as 'to keep warm,' 'to look respectable,' etc. It is quite plain that he does so only to please the inquirer, and to his mind the real and final explanation of the act lies in its obviousness. The fact that he regards the question as to the origin of the mental process as essentially absurd is evidently because he considers there is no need to search for a cause in an action that he likes to think is volitional—*i.e.*, self-caused.

We thus soon come to a full stop in the case of the ordinary man, but in the case of an observer who has trained himself to introspective analysis we can get this further clue. Such an observer may quite well recognise that there is something

<sup>1</sup> A similar instance is detailed in Chapter IV., p. 41.

behind the volitional process, though he cannot directly detect what it is. If, for instance, he essays spontaneously to choose a number, he discovers that he is not free to choose any number; one number alone comes, and not as one of many alternatives; it comes with a certain impulsive force, and he has no option but to 'choose' this one number. In other words, he can recognise that it comes to him apparently from without, and it is clear to him that it must have been determined by some hidden influence to which he has no direct access. A striking illustration of this mechanism, together with an analysis of the source of the mental process, is described by Professor Freud in relation to his own 'choice' of the name 'Dora' to designate the heroine of his 'Bruchstück-Analyse.'

Summing up this class of mental processes, therefore, we may say that whenever an individual considers a given process as being too obvious to permit of any investigation into its origin, and shews resistance to such an investigation, we are right in suspecting that the actual origin is concealed from him—almost certainly on account of its unacceptable associations. Reflection shews that this criterion applies to an enormous number of our fixed beliefs—religious, ethical, political, and hygienic—as well as to a great part of our daily conduct; in other words, the principle above quoted refers to a large sphere of mental processes where we least suspect it. Yet if such beliefs and conduct are to be brought into scientific harmony, it is of the highest importance that the mechanisms controlling them should be made the subject of precise study in a way that is as yet only just begun.

We return now to the *first class* of mental processes, in regard to which the individual proffers indeed an explanation, but a false one. It is not sharply divided from the other class we have considered, for there we saw examples in which the individual casually gave an obviously inadequate explanation for an act which to his mind really needed none. Indeed, all possible grades may be observed in what may be called the feeling of a necessity to provide an explanation. On inquiring into the source of this necessity, we see that it is only another aspect of the necessity every one feels to have what may be called a theory of life, and particularly a theory of himself. Every one feels that, as a rational creature, he must be able to give a connected, logical, and continuous account of himself, his conduct, and opinions, and all his

mental processes are unconsciously manipulated and revised to that end. No one will admit that he ever deliberately performed an irrational act, and any act that might appear so is immediately justified by distorting the mental processes concerned and providing a false explanation that has a plausible ring of rationality. This justification bears a special relation to the prevailing opinion of the circle of people who are most significant to the individual concerned, and two different groups of false explanations can be distinguished, according as they are formed essentially for the individual himself or for him in special reference to the opinions of his circle; or, roughly speaking, according as they are formed mainly for private or mainly for public consumption. The former of these I would term 'evasions,' the latter 'rationalisations'; there is, however, no sharp line dividing the two, and perhaps it would be better to employ the latter term for both processes.

We may now consider a couple of examples of these. One of the best instances of evasion is the form of religious belief chosen by an individual. Religious belief itself rests of course on psychological principles very different from those now under discussion, but the form of doctrine accepted is another matter. There are a number of arguments used by each sect to support its special view of religion, and as a rule these are as convincing to the members of the given sect as they are unconvincing to the members of other sects. Let us take the case of a man brought up in a close circle, family and otherwise, of Baptists. At the age of puberty he may become a Baptist without thinking twice about the matter, but it often occurs to such a man that it is an irrational and therefore a distasteful thing to hold a belief merely because all his friends do so. He therefore embarks with a great shew of reason upon what seems to him to be a critical and dispassionate examination of the evidence for and against Baptism. It need hardly be said that in most cases such an individual is strongly prejudiced in favour of Baptism, and is so deeply persuaded in his preconscious mind of its truth that he is only seeking for the slightest pretext to become an open convert. The matter once settled, he then maintains that he has become convinced of the truth of his doctrine by the overwhelming force of the evidence in its favour, is highly offended if one bluntly says that he believes in Baptism simply because his father did, and passionately denies this true but unacceptable explanation.



The origin of his belief is thus concealed from him by the mechanism of evasion. How different with an individual brought up in a Catholic environment! The same arguments that with the one man proved so efficacious may here be repeated with the most persuasive eloquence, and are rejected with scorn as being obviously fallacious. We see here that environmental influence may inculcate a given belief by the indirect way of raising the standard of acceptability of the arguments used in its favour; in other words, by making them appear more obviously sensible and reasonable to the individual. It will be an interesting question for the future to determine how many of our most firmly held opinions on the value of universal suffrage, of representative government, of marriage institutions, etc., are not similar examples of blind acceptance of the suggestive influence of our environment, fortified by the most elaborate evasions and rationalisations.

As an example of the allied mechanism of rationalisation,<sup>1</sup> I will take the current use of valerian as a specific antidote for hysteria. It will be remembered that for a great many centuries asafoetida and valerian were administered on the grounds that hysteria was due to the wandering of the uterus about the body, and that evil-smelling drugs tended to drive it down to its proper position and thus cure the complaint. Although these assumptions have not been upheld by experience, nevertheless at the present day most cases of hysteria are still treated by these drugs. Evidently the operating influence that leads to their administration is the blind response to a prevailing tradition, the origin of which is largely forgotten. But the necessity of teachers of neurology to provide reasons to students for their treatment has led to the explanation being invented that the drugs act as 'antispasmodics'—whatever that may mean—and they are often given in the following refined form: One of the constituents of valerian—valerianic acid—is given the name of 'active principle,'<sup>2</sup> and is administered, usually as the zinc salt, *sugar-coated* so as to disguise its unpleasant taste. Some modern authorities, aware of the origin of the treatment, have even remarked how curious it is that the ancients, in spite of their false views about hysteria, should have discovered a valuable line of treatment and yet given such an absurd explanation of its action. This continuous

<sup>1</sup> A good literary example is quoted in Chapter IV., p. 47.

<sup>2</sup> The latest refinement of this is valeryl-diethylamide (C<sub>8</sub>H<sub>19</sub>ON) |

rationalisation, in the face of the knowledge that the process in the past was irrational, is often seen, a well-known example being the Last Supper explanation of the Mass and Communion, in spite of the recognised theophagic origin of the rite—that is to say, present-day exponents often plume themselves on their superior rational behaviour while performing the identical acts that they deride as irrational in their forbears. It is difficult to see to what further lengths self-deception can go once the beaten path of experience and the scientific standard of verifiability are departed from; and yet I hold it probable that many of our beliefs now thought to be beyond suspicion will prove to be just as bizarre as soon as the searchlight of scepticism is turned on them.

My aim in these few remarks has been to illustrate from what diverse sides Professor Freud's principle may be supported, and to indicate what a vast field there yet remains for it to be applied over. We are beginning to see man not as the smooth, self-acting agent he pretends to be, but as he really is—a creature only dimly conscious of the various influences that mould his thought and action, and blindly resisting with all the means at his command the forces that are making for a higher and fuller consciousness. In conclusion I would point out that future studies in this direction must give us the secret to the formation of opinion and belief, and the methods whereby these can be controlled. The essential problem here is how to deal with the subjective influences that obscure vision, so that as a result objective truth may carry its due weight. This will yield practical help in the knowledge of how best to promulgate ideas that are in themselves unacceptable, for the day is past when psychologists are justified in still sharing the common illusion of mankind that the best way to spread an opinion is simply to state and restate the evidence in its favour, under the pious belief that sooner or later it will surely be accepted if only it is true. We now know that that method is not only tedious, but often permanently unsuccessful. There are unquestionably true ideas that mankind has had the opportunity of accepting for two or three thousand years, but which will never be accepted until they are promulgated with the aid of the knowledge now being gleaned by the new school of psychology.

### CHAPTER III

#### FREUD'S PSYCHOLOGY<sup>1</sup>

THE difficulties inherent in the subject of an essay are frequently mentioned in the introductory sentences by way of excuse for the deficiencies of the exposition. In the present case they are of so peculiar a nature that to mention them here will also serve another purpose—namely, to indicate some of the general aspects of the subject.

The first difficulty—one that necessarily occurs in presenting the views of any progressive thinker—resides in the fact that Freud's views have in the past twenty years undergone a continuous evolution. Most writers who have expounded them (Jung, Baroncini, Schultz, etc.) have therefore elected to describe them in terms of their historical development, a course which, while lending greater accuracy, has obvious disadvantages, particularly for readers not familiar with the subject. As, however, the later modifications in Freud's views have mainly concerned clinical subjects, such as the ætiology of hysteria and the technique of the psycho-analytic method, with which we are not now concerned, it will here be

<sup>1</sup> Published in the *Psychological Bulletin*, April, 1910, vol. vii. Most of Freud's psychological writings are included in the following list, the two marked with an asterisk being in the present connection the most important: 'Studien über Hysterie' (with Breuer), 1895. \* 'Die Traumdeutung,' 1900. 'Zur Psychopathologie des Alltagslebens,' 1901. 'Über den Traum,' 1901. \* 'Drei Abhandlungen zur Sexualtheorie,' 1905. 'Der Witz und seine Beziehungen zum Unbewussten,' 1905. 'Sammlung kleiner Schriften zur Neurosenlehre,' Erste Folge, 1906; Zweite Folge, 1909; Dritte Folge, 1913. 'Der Wahn und die Träume in W. Jensen's "Gradiva,"' 1907. 'Über Psychoanalyse,' 1909. 'Eine Kindheitserinnerung des Leonardo da Vinci,' 1910. 'Totem und Tabu,' 1913. 'Vorlesungen zur Einführung in die Psychoanalyse,' Erster Teil, 1916; Zweiter Teil, 1917; Dritter Teil, 1918. (Only the dates of the first editions are given.) Further, a number of articles in the special psycho-analytical journals: *Jahrbuch der Psychoanalyse*, *Imago*; *Zentralblatt für Psychoanalyse*; *Internationale Zeitschrift für ärztliche Psychoanalyse*; *Diskussionen des Wiener Psychoanalytischen Vereins*.

possible to choose the alternative course of attempting to give a more general review of his psychology as a whole.

The second and far weightier difficulty is that Freud's psychology signifies a great deal more than the formulation of a series of new conclusions or the announcement of new discoveries, important as these may be; it involves a radical change in our attitude towards the questions of the structure and functioning of the mind. If, therefore, Freud's views are substantiated by later investigations, they betoken an event of peculiar and far-reaching significance to psychology in general. It is notoriously harder to convey a new attitude or point of view than mere conclusions, or even facts; and yet in regard to our judgement it is a more important matter, for a given conclusion that may appear improbable enough from one point of view is seen in quite a different aspect from another. A corollary of this consideration is that Freud has not only dealt with previously discussed questions—*e.g.*, dream interpretation and the psychology of wit—but has explained what previously had hardly been thought to be problems at all—*e.g.*, the cause of infantile amnesia, the meaning of various absent-minded and other acts in everyday life, etc.

The third difficulty—one really implicit in the last—is that the applications of Freud's psychology are exceedingly diverse, so that the range of subjects included is very extensive. He has, for instance, offered explanations for problems so remote from one another as the origin of myths, the choice of a profession, the sources of artistic creativeness, and the tendency to superstitious beliefs. Of only a few of the subjects, however, has he given any complete or systematic exposition, and the extent to which his principles can be applied refers more to deductions, usually fairly obvious, that follow from these. His expositions are thronged with suggestive hints—of which some are more, some less developed—that are at present being acted on and expanded by both himself and the members of his school. Again, the way in which these different subjects are intimately bound up with one another makes it very difficult to present some without the others. Much of the cogency of Freud's arguments is derived from the astonishing confirmation and mutual support that the application of them receives from widely different fields of study, such as psychopathology, dreams, wit, mythology, and everyday life. Just as the true significance of Darwin's suggestions became evident

only when their fruitfulness was realised in such different fields as palæontology, comparative morphology, and embryology, so do Freud's hypotheses become irresistibly convincing when one appreciates their capacity to illuminate spheres of human activity that at first sight appear to be remote and unconnected. This third difficulty, the extensiveness of Freud's principles, is one reason why the present exposition can be nothing but the roughest and crudest sketch of the subject indicated in the title of this paper.

Freud is primarily a man of science, rather than a philosopher. In philosophy he might perhaps most nearly be classified as accepting scientific sensationalistic idealism, as represented by Karl Pearson. This is well illustrated by his attitude to such a question as the psychophysical relations of consciousness, or of mental processes in general. He uses the term 'conscious' to denote all the mental processes of which a person is aware, distinctly or indistinctly, at a given moment. Not sharply marked off from these are the preconscious (*vorbewusste*) memories, of which a person is not at a given moment necessarily aware, but which can be fairly readily and spontaneously recalled. Unconscious memories are those that cannot be spontaneously recalled by the subject, but which can be evoked by the use of special methods (hypnosis, psycho-analysis, etc.).<sup>1</sup> As we shall presently see, Freud holds that processes of the most complex kind may occur without ever becoming conscious. He is content with this practical finding, and leaves quite open the question as to whether they are ultimately of a mental or physical nature. Referring, for instance, to the unconscious occurrence of dissociation between an idea and its accompanying affect, he says: 'Vielleicht wäre es richtiger zu sagen: Dies sind überhaupt nicht Vorgänge psychischer Natur, sondern physische Vorgänge, deren psychische Folge sich so darstellt, als wäre das durch die Redensarten: Trennung der Vorstellung von ihrem Affekt . . . Ausgedrückte wirklich geschehen.' [It might perhaps be more correct to say: These processes are not of a psychical nature at all, but are physical processes, the

<sup>1</sup> It will be noticed that by definition these resemble Myers' subliminal process, Prince's co-conscious, and Janet's *subconscient*. There exist, however, fundamental differences between Freud's views on the subject and those of other writers; these have been discussed in a striking article by Hart in the *Journal of Abnormal Psychology*, February-March, 1910.

psychical consequences of which are so represented as if what is expressed in the phrase "separation of the idea from its affect" had really occurred.]" Leaving, however, the philosophical aspects of the subject, he empirically accepts the obvious fact that it is impossible to describe the processes in question except in mental terms, and so continues to treat of them as if they were mental. Another justification for this he sees in the continuity that experience establishes between conscious and unconscious processes, which may be related to each other in every respect except in the one matter of awareness; the resemblances between them thus far outweigh in importance the differences.

It will be convenient shortly to consider some of Freud's more general and fundamental principles before mentioning their applications. Of these the following seven will be selected, admittedly an arbitrary choice:

1. In the first place, Freud attributes to psychical events a rigorous *determinism*, the word being used in its scientific rather than in its philosophic sense. Psychical processes are never isolated or accidental phenomena, but are as precisely related to preceding ones as are successive physical events; there is no more room for 'chance' in the mental world than in the physical one. Freud is therefore never content with such explanations as would attribute various actions to 'habit,' 'absent-mindedness,' and the like, but always searches for the motive force itself. As will presently be indicated, there are certain inhibitions that tend to prevent one from asking too many questions about the concealed motives for conduct, and thus lead us to be satisfied with the more superficial factors or even with mere phrases, such as those just quoted; the result of this is that many of the answers and explanations given by Freud are apt at first sight to appear superfluous, if not even far-fetched.

Starting from this point of view he develops his psychoanalytic method, on which are based practically all his conclusions. He maintains that, when a subject is asked to make free associations from a given theme to which he is attending, and wholly to suspend the active selective criticism that under such circumstances is instinctively exercised towards the incoming thoughts, the associations must be directly or indirectly related, in a causative manner, to the initial theme. The connection between this and the associations that occur

are often not at all realised by the subject; for this, however, there are special and definite reasons that will presently be indicated. Discussion of the psychological principles involved in the use of psycho-analysis, as well as of other allied topics, must be reserved for a further paper.

2. Freud's views concerning *affective processes* shew certain important deviations from those currently accepted. He tentatively states as a working hypothesis that 'there is to be distinguished in psychical functions something (amount of affect, sum of excitations) which has all the attributes of a quantity—although we have as yet no means of measuring it—something capable of being increased, diminished, displaced, or carried off, and which spreads itself over the memory traces of ideas, rather like an electric charge over the surface of the body.' The two words in brackets (*Affektbetrag*, *Erregungssumme*) indicate that the property in question can be described in either psychological or physiological terms. Indeed, he regards it as something essentially centrifugal in nature, in that it constantly tends to discharge its psycho-motor energy—characteristically by means of bodily expression—in a manner analogous to motor and secretory processes. Most significant, however, is the assumption that it has a certain autonomy, so that it can become released from the idea to which it was primarily attached, thus entering into new psychical systems and producing wide-reaching effects. This movement of affect from one idea to another Freud denotes as 'displacement' (*Verschiebung*), and says that the second idea may in a sense be termed a representative of the first. A simple illustration of the process is when a girl transfers the affective process properly belonging to the idea of a baby to that of a doll, and washes, clothes, fondles, and cares for the doll, and even takes it to bed with her or makes attempts to feed it, thus treating it in all possible respects—as she would a baby. An equally familiar observation is the behaviour of a spinster towards a pet animal. In Browning's 'The Last Ride Together,' the same mechanism is beautifully seen: the hero, failing in his ambition to win his mistress, consoles himself with the enjoyment of their last ride, and gradually exalts the significance of this until in a final ecstasy he imagines not only that it is an adequate replacement of his former aim, but that it represents the highest bliss that can be attained on earth or in heaven.

3. Connected with his views on affective processes is the emphasis Freud lays on the *dynamic nature of mental processes* in general. This is best described in terms of the scheme by means of which he depicts the structure of the mind.<sup>1</sup> This scheme he proposes in the most tentative way as merely a working hypothesis, expressly disclaiming any likelihood of mistaking the scaffolding of a theory for the building that will later be erected. Taking the analogy of a microscope or telescope, the theory of which makes use of ideal localities in space, he develops the notion of psychical locality. The mind is a complex reflex apparatus or system, with a seat of entry at one extremity and of discharge at the other; the former is of course the sensorial extremity, the latter the motor. Every mental process tends to set up a movement from one end of the apparatus to the other. To begin with is the perception in its sensorial form; this is not fixed as such, but farther on in the system in the form of a 'memory trace.' The farther forward the process moves, the greater is the extent to which it becomes associated with others; at first the association is of a superficial kind (clang, etc.), later on it is of a higher order (similarity, co-ordination, etc.). A mental process is recalled not in its primary perceptive form, but as a 'memory trace.' Accompanying every mental process is a varying amount of psychical energy, which roughly corresponds with what we term the affect. Excessive accumulation of this energy results in a tension that is experienced as discomfort (*Unlust*), and there is a constant tendency towards the discharge of this energy (*Abfuhr*). The discharge is experienced as pleasure, as relief, or gratification (*Befriedigungserlebnis*).

The way in which the relief is brought about differs in complexity in the young child and older persons. The infant finds by experience that satisfaction of a given need—*e.g.*, hunger—is associated with a certain perception—*e.g.*, the sight of food. The recurrence of this need therefore brings with it the desire to reproduce the perception associated with satisfaction of it. It is probable that at first this may occur by 'regression' of mental processes so that a hallucinatory perception is produced. Experience, however, soon teaches that this method is inadequate permanently to still the need, and that in their capacity in this respect there is an important difference

<sup>1</sup> See Chapter XXXVI. for a fuller exposition of this.



between perceptions externally evoked and those internally evoked. Internal perceptions are adequate only when they are durable, as in the hallucinations of the psychoses. The psychological energy corresponding with the need therefore sets in action further groups of mental processes, the function of which is to modify the environment in such a way as to bring about an externally evoked perception of the kind desired; for instance, the child cries until it is fed. The regressive tendency to reproduce the primary perception by internal means Freud terms the *primary process* (*Primärvorgang*). The *secondary process*, which inhibits this tendency and directs the energy into more complex paths, is the work of a second and quite different psychological system. All the complicated thought processes that occur, from the memory picture to the psycho-motor mechanisms that result in changing the environment so as to bring about the repetition of the desired perception, constitute merely a *détour*, which experience has shewn is necessary in order to produce the wish-fulfilment. These two systems, which are already present at an early age, form the nucleus for what later becomes the unconscious and preconscious respectively.

4. The subject of 'psychical repression' (*Verdrängung*), which plays such an important part in all Freud's writings, may be considered as a direct continuation of the previously mentioned one concerning the relation between the primary and secondary systems, though it is less hypothetical in nature. The fundamental regulating mechanisms of mental processes are the tendencies to seek pleasure by bringing about relief from psychical tension, and to avoid pain by preventing accumulation of psychical energy. These strivings, which have a more or less definite aim, constitute a Wish in the broad sense of the term. When, now, this wish cannot for various reasons be gratified, the tendency of the psychical energy to discharge itself is inhibited, a local damming up takes place, and the mental process in question loses its former power of making free associations. It in this way forms a circumscribed 'complex,' to use Jung's term. Under these circumstances the secondary system cannot make use of the energy of that portion of the primary system, for to do so would only result in the evocation of discomfort (*Unlust*) and it is a chief function of the secondary system to avoid this whenever possible. We have here, then, all the conditions

for an intrapsychical conflict, and Freud maintains that, when a mental process is the seat of a competition of opposing affects, blocking (*Sperrung*) of the usual associative activities occurs and the mental process becomes shut off or dissociated. This ostrich-like function of the secondary system therefore results in exclusion of the pain-producing mental process from consciousness. In daily life this mechanism is extraordinarily frequent and shews itself in many ways, the simplest of which is the disinclination for being reminded of disagreeable occurrences we would rather forget. There are many motives for this disinclination, the painfulness of an external situation being the least important; more important are such mental attitudes as shame, disgust, horror, at the possibility of various internal thoughts and wishes. Emphasis should further be laid on the point, often not sufficiently appreciated, that the action of 'repression' in preventing mental processes from ever entering consciousness is much more important and extensive than that of merely driving out from consciousness those that have once been present there.

'Normal' and 'abnormal' conscious mental events differ only quantitatively, not qualitatively, both proceeding by the same mechanisms of the same psychological apparatus. In both cases the energy of the unconscious mental process (*i.e.*, the Wish) is directed into the complex conscious paths according to the principle of pleasure and pain, the chief difference between the two being that the discharge of energy in the 'abnormal' case takes place by a more circuitous and unusual route than in the 'normal' case. In both cases consciousness exerts a 'censor' influence over the dynamic process, allowing it to find expression only in certain definite ways. The characteristic function of consciousness is the exercise of this selective censor influence. Consciousness may be compared with a sense organ, in that it allows the perception and differentiation of psychological qualities. Its action differs from that of a sense organ in that it is concerned with the perception not only of externally produced stimuli, but also of internal psychological processes. It is probable that between preconscious and conscious processes a censor action is also interposed, of the same kind as that between unconscious and preconscious processes.

5. The manifestation of abnormally repressed mental processes is to be understood only by consideration of the action

of *intrapsychical conflict*. As has already been said, conflict between two tendencies or wishes results in a blocking and dissociation of the mental process concerned. The direct route into consciousness is impeded and the energy passes into a circuitous side-path. The direction thus taken is, however, rigorously determined by preceding psychological and physiological factors. The energy may become linked either with other mental processes or with physical ones. In the first case, the affect accompanying a given idea, which, being dissociated, is incapable of becoming conscious (*bewusstseinsunfähig*), becomes transferred to another one which is assimilable in consciousness (the process known as *Uebertragung*). This is the typical mechanism underlying the production of obsessions and most phobias. An insistent impulse to think of a non-permitted subject shews itself by an obsessive thought about another, associated, but more acceptable one. The passage from the one idea to the other occurs through one of the well-known forms of mental association, usually a lower form, such as extrinsic, and particularly clang associations. Brill<sup>1</sup> narrates an instance in which a patient, possessed with licentious impulse relating to a *dog*, suffered from an apparently innocent obsessive thought concerning *God*.

In the second case the energy finds an outlet in some somatic manifestation, a process Freud terms 'conversion.' This is the characteristic mechanism underlying hysterical troubles, where a given bodily symptom, such as a tremor or an aphonia, is the expression of a repressed mental complex. Here also, as in the purely mental field, the actual direction taken by the discharging energy is determined by the existence of performed associations, such as the usual physical accompaniments of emotion, and the occurrence is favoured by an unusual degree of readiness of the physical response (*somatisches Entgegenkommen*).

In both cases the formation of the unusual associations, which permit the circuitous discharge of psychical energy, takes place outside consciousness, and the subject quite fails to apprehend the significance of the end manifestation, or the connection between it and the primary mental process. Yet the mental events that precede the manifestation may be of the most complex order, fully as much so as conscious ones.

<sup>1</sup> A. A. Brill, 'Freud's Conception of the Psychoneuroses,' *Medical Record*, December 25, 1909.

6. Stress should be laid on the importance Freud attaches to *infantile mental processes*. He regards the mental processes, and particularly the wishes, of early childhood life as the permanent basis for all later development. Unconscious mental life is indestructible, and the intensity of its wishes does not fade. Wishes and interests of later acquirement are chiefly significant in so far as they ally themselves with those of childhood life, though the association is, of course, not a conscious one. A great number of the reactions of adult life owe their real force to the adjuvant impulse contributed by the unconscious. Freud, therefore, looks upon the whole of a subject's mental life as a continuity, as a series of associated trends. The appearance of complete discontinuity which it so often presents is an illusion, due to the ignorance of the preceding unconscious influences. For instance, a person may at the age of twenty have his attention for the first time directed in a given line of interest, and may in consequence of this choose a profession and determine his life's career; but the real reason why he reacts in this way to the external influence is that it corresponds with, and becomes associated to, deeper unconscious trends that arose in early childhood life. These views naturally have great importance in their bearing on education,<sup>1</sup> for it is substantially maintained that the main traits of character are permanently determined for good or ill before the end of the fifth year of life. Freud holds in general that owing to our ignorance of the most important mental processes of early childhood, and our own personal amnesia for this period, the significance for later life of these early trends is vastly underestimated.

The amnesia for early mental processes is even greater than is generally supposed, for not only is much actually forgotten, but a selection takes place of such a kind that only the least significant part is remembered. Thus the actual memory for this period is even less valuable than it appears. Further than this, our childhood memories are also less trustworthy than they appear, for later falsifications, distortions, and inventions, arising particularly in the conscious and unconscious phantasies of puberty, impair the reliability of them to a much greater extent than is generally known; it should, however, be added that the technique of psycho-analysis usually enables one to differentiate between an accurate recollection

<sup>1</sup> See Chapters XXXIV.-XXXVII.

and a falsified one. This infantile amnesia is, according to Freud, not a natural, physiological process, needing no explanation. He considers that, were it not for our extreme familiarity with its happening, we should regard it as by no means so obvious and comprehensible as we at present do. For him it is a curious problem which calls as urgently for solution as that of other less familiar mental events. The cause of the amnesia he sees in the psychical repression that plays so large a part in early education. Children come to the world with potential trends and desires which are innocent enough at an early age, but which are of such a kind that the gratification of them is highly unacceptable to adult standards. Early training largely consists in weaning the child from these desires and directing his mind towards other interests; the chief of these processes Freud terms 'sublimation.' The primitive trends themselves, such as egotistic enjoyment without regard for others, concern with certain bodily functions, and so on, have to be suppressed, and the mental processes representing them are repressed and become unconscious. This, however, is not effected without a certain cost to the individual, and amongst other penalties paid is the amnesia for infantile mental life. As in other cases, such as, for instance, with hysteric post-traumatic retrograde amnesia, the memories lost are not only those that directly concern the thoughts and wishes now invested with painful and guilty feeling, but also those that are in any way—*e.g.*, in time—associated with these. Further, as was above pointed out, although the desires in question have been repressed into the unconscious, they lose none of their dynamic functions, and, when the sublimation process is not sufficiently potent to provide an outlet for the accompanying psychical energy, other paths of discharge have to be forged, of a kind that for practical reasons are called 'pathogenic.' It is in this way that psychoneurotic symptoms arise, which thus represent in a disguised form the gratification of repressed wishes. One of the chief differences between the indirect expression of an unconscious wish by means of a neurotic symptom and that by means of a sublimated activity is that the latter is useful for social aims, whereas the former is harmful both socially and to the individual.

7. The part of Freud's psychology that has aroused most opposition is his attitude regarding the significance of *psycho-sexual trends*. We are not here concerned with the nature of

this opposition, which arises partly from a misconception of Freud's own views, and partly as a result of the peculiarly heavy social ban that is laid on certain aspects of the subject. It should in the first place be stated that he applies the term 'sexual' far more broadly than is customary, and thus includes under it functions that are not generally considered to be of a sexual nature. He does this, however, not in order to distort the usual connotation of the term, but because he finds by experience that many psychical manifestations not commonly thought to be derivatives of the sexual instinct are in fact so. He thus extends, not the connotation of the word 'sexual,' but the conceptions denoted by it. His conception of the *idea* 'sexuality' is certainly much wider than the general one, but it is not accurate to say that his use of the word is very different from the current usage. This important matter, the source of much misunderstanding of Freud's views, must be dealt with at some little length, and it may be made plainer by the following illustration. It is taken from a criticism in which the passage occurs 'Contrary to ordinary usage, Freud speaks of a sexual impulse in childhood,' implying that Freud's departure consists merely in a novel and unjustifiable use of the word. But the departure is, in fact, more than a matter of words, it is a matter of things, of processes, of ideas; the heresy is not one that can be remedied by a dictionary. Freud says in effect: 'Processes which I, in full agreement with the rest of the world, call sexual do actually occur in childhood life, though in the past the existence of them has, for certain definite reasons, been largely overlooked or misinterpreted.' The point can be made clearer still by the following analogy, which in several respects is a fairly close one. Some time after the discovery of nitrogen, in the atmosphere, it was found that it also existed, in combination with other elements, in solid substances. When this finding was announced, critics might very well have said to the investigator: 'You are distorting scientific language, and are using the word "nitrogen" in a novel and unjustifiably wide sense by applying it to solid substances which are evidently not nitrogen; allow us to inform you that the word denotes, by common acceptance, a gas, which is to be found in the atmosphere.' To which the investigator would have been right in replying: 'I was acquainted with the meaning of the word when I began my researches, but these have convinced me that the element which both you and I are agreed to call

nitrogen may exist not only in its easily observable gaseous form, but also, in certain circumstances, in other forms where its familiar attributes are not manifest, and where its very existence can be determined only by a careful chemical analysis.' When Freud uses the term 'sexuality,' he does so because it just expresses his meaning, and not from any desire to introduce any linguistic changes; whenever he uses a word in a special sense, such as in the case of *Verdrängung* ('repression'), he says so, and gives his reason for so doing. In saying that the analysis of a neurotic symptom reveals as an invariable constituent the presence of a psychosexual process, the customary attributes of which are veiled through the interaction of other mental processes, Freud adopts a position identical with that of a chemist who says that analysis of saltpetre reveals the invariable presence of nitrogen. When he calls certain infantile processes 'sexual,' he does so because he believes that they are intrinsically of the same nature as the processes that everyone calls sexual in the adult.

A little reflection makes it evident that, even if the term is by definition made to refer only to tendencies that have to do with the reproductive instinct, it is impossible to confine it to impulses that directly tend to bring about the reproductive act. For instance, no one with any experience of such a 'perversion' as fetishism would refuse to call this 'sexual' in the full meaning of the term, although from its very nature it expresses a negation of the reproductive act; the same is true of ordinary masturbation. Even more normal manifestations, which anthropologists have shewn to be derivatives of the sexual instinct—such as shame, disgust, etc.—are by no means obviously tendencies that favour the consummation of this act, although it may be true that they are indirectly connected with reproduction. On precisely similar grounds Freud holds it justifiable to apply the term 'sexual'<sup>1</sup> to mental processes which, like shame, derive their origin from the sexual instinct, and the only reason why his application

<sup>1</sup> Freud uses the term *Libido* to indicate sexual desires and longings in all their aspects; this corresponds in its connotation with that possessed by the word 'hunger' in relation to the nutritional instinct. Obviously the word, for linguistic and other reasons, is hardly suitable in English. Dr. Putnam, in his recent luminous essay on Freud's work (*Journal of Abnormal Psychology*, vol. iv., Nos. 5 and 6), considers that the nearest English equivalent to it is 'craving'; perhaps a more exact translation would be 'sexual hunger,' which is the one used throughout by the present writer.

of the term is more extensive than that of other writers is that, by his psycho-analytic investigation of the unconscious, he has been able to trace to this origin a number of processes that at first sight do not appear to be connected with it. He has striven to free himself from the prejudice that refuses to recognise the sexual nature of a mental process until this is made so obvious as to be quite indisputable, and he points out how deeply rooted in the human mind is this prejudice.

These preliminary considerations may be thus summarised: Freud lays stress on the dynamic aspects of mental processes, and sees in the tendency of the affects to seek discharge of their tension the motive force determining the flow of mental life; he expresses this in terms of Wishes. He holds that unconscious mental life is rich and complex, and by the interaction between it and consciousness explains the apparent discontinuity of conscious processes, thus adopting a rigorously deterministic attitude towards intuitive and apparently spontaneous mental events. Much of this interaction depends on the result of conflicts between various psychical trends, some of these undergoing repression, so that they can be manifested only along indirect channels. He attributes fundamental importance to the repressed wishes of early childhood life and to the psychosexual systems of activities.

We may now shortly consider some of the fields in which Freud has applied the foregoing principles, and it will be convenient to begin with the subject last mentioned—namely, *Sexuality*. In the first place, Freud holds that the adult mental processes commonly called 'sexual,' which bear a relatively precise relation to reproduction, are the outcome of a development from a broader group of processes in earlier life, of which certain ones have become selected and intensified, while others have become suppressed. In the child are a number of sexual dispositions, the functioning of which notably differs from that of adult sexual processes, and the later development of which is subject to the greatest variability. A clearer view of these early dispositions is obtained by considering the different kinds of adult sexual perversions. Freud draws a distinction between the sexual object, the source of attraction, and the sexual aim, the activity in which the impulse manifests itself; the difference between these is evident when one dissociates such an impulse as the masochistic one



—i.e., the desire to obtain enjoyment through experiencing submission or pain—from its objective, which may be either a male or a female person. Looked at from this point of view, perversions fall into two groups. On the one hand are those that shew a deviation from the normal objective, such as homosexuality. Freud thinks that this inversion of the normal objective can only be explained by assuming that man has a bisexual predisposition psychically as well as anatomically, and that the normal is reached by the heterosexual component being developed at the expense of the homosexual one. On the other hand are those that shew a deviation from the normal aim. These may be divided into two sub-groups. First, there are aims that pass beyond the normal anatomical regions, such as when kissing attains a higher sexual value than actual intercourse. The tendency to overestimate the attractive value of anything belonging to the loved person—her hair, hand, glove, etc.—may be localised to a given part, such as the foot, and thus constitute a fetishism. Secondly, there are the aims that differ from the normal in that they represent a fixation of the sexual impulse on what should be only a preliminary stage in the whole process. Perverts of this kind may, for instance, obtain full sexual gratification from a morbid fascination of merely looking at a member of the opposite sex under certain circumstances, and have no desire to do more than this.

Freud finds that the potentialities of all forms of perversion already exist in the child, which he therefore terms *polymorph pervers*. Under the pressure of educative influences, however, they normally become suppressed, and the psychical energy accompanying the impulses is 'sublimated' into other directions of greater social value. The influences that are specially operative in this respect are as follows: The tendency to display one's own person or to seek pleasure in regarding that of others is opposed by the development of personal modesty and shame. The tendency to obtain enjoyment from various manipulations of and interest in excremental functions<sup>1</sup> is opposed by the development of disgust; and the finding of pleasure in acts that are painful to oneself or to others—masochism and sadism—is suppressed by the cultivation of

<sup>1</sup> One such tendency, to which Freud has given the name 'anal erotism,' has been shewn to have an unexpected importance for general psychology, especially in regard to the development of character. Some illustrations of this are given in Chapters XXX., XXXI., and XL.

sympathy with others, with sensitiveness to and horror of suffering. Two other possibilities, however, are open, besides the normal one of sublimation. First, the tendency itself may acquire abnormal strength and may manifest itself in later life as an actual perversion, as indicated above. Secondly, when the conflict between the impulse and the repressing force is especially strong the impulse may find expression in the production of a psychoneurotic symptom, which, therefore, is a disguised form of gratification of the perverse impulse. Hysterical symptoms thus constitute the negative of perversions. These three outcomes are naturally not sharply marked off from one another. One and the same man may shew the results of sublimation of a given tendency, which may, for instance, be revealed in the form adopted by an artistic creation, at a time when he is suffering from both a perversion and a psychoneurosis. A correlative of the sublimation process is the development of abnormal traits of character, which have little or no social value; the morbid tendency of some 'Puritans' to be shocked at the slightest pretext belongs to this group, and is to be regarded as an excessive reaction formation.

The psychosexual life of children differs from that of adults in three main characteristics—in the different nature of the pleasure experienced, in their relative independence of outside persons for this (auto-erotism), and in the fact that they obtain pleasure from much more manifold sources and yet in much less differentiated ways than do adults. At puberty important changes take place in all these respects. The excitations, mechanical and other, that gave satisfaction to the child's desires, now come to contain a disagreeable component (*Unlust*) due to the feeling of tension experienced. They thus constitute merely a 'fore-pleasure' (*Vorlust*), which impels to further activities destined to produce the 'end-pleasure' (*Endlust*) that relief of tension brings about. The sexual objective, a member of the opposite sex, now wins greater definition and significance. Lastly, the sources of excitation become more localised, particularly anatomically; this is brought about by repression of the more accessory pleasures in the way indicated above. The greater proneness of women to suffer from psychoneuroses is explained by two characters that their sexual development shews in contrast with that of men. In the first place, the sexual activities of

children pertain rather to the masculine type, so that at the time of puberty the augmentation of repression that then takes place has in the woman more to accomplish in suppressing the homosexual component than it has with men. In the second place, a shifting of the primary erotogenic<sup>1</sup> zone takes place with them, from the clitoris to the vagina, whereas this does not occur with men. The changes at puberty being thus more complex in the case of women, the possibilities of erroneous development are much greater.

The sexual thoughts of children are much more extensive and important than is generally believed. Usually in the third and fourth years of life questions begin to occur to them, the parents' answers to which are less satisfying and less often believed by them than is commonly thought. At this time, and shortly after, they begin to withdraw from their parents, and in their own world weave explanations and theories that are more satisfactory to them. These theories frequently contain more of the truth than might be imagined, and are of great significance in later life. Coincidentally with the repression mentioned above there occurs repression of, and subsequent amnesia for, these early thoughts. A period of greater or less latency follows, usually from the fifth to the tenth years, when the process of sublimation is at its highest activity. Most adult memories for sexual thoughts seem to have begun in the latter part of this period, the earlier ones having been quite forgotten. In the earlier period sexual phantasies relating to the parents or other members of the family are very frequent, and often determine important reactions and choices in later life.<sup>2</sup>

The next great field that Freud has investigated is that of *Dreams*. I have elsewhere<sup>3</sup> given an account of Freud's work and conclusions on this subject, and so need here mention only the outstanding features of his theory. Dreams are generally thought to be a meaningless conglomeration of psychological processes evoked by chance somatic stimuli. Freud, on the contrary, finds that they are the disguised expression

<sup>1</sup> In previous writings I have thoughtlessly used the word 'erogenous,' which seems to be the generally accepted translation of the German 'erogene.' A moment's reflection, however, shews that the correct form is 'erotogenic.'

<sup>2</sup> An account of Freud's incest theory will be found in the *American Journal of Psychology*, January, 1910.

<sup>3</sup> See Chapter VIII.

of highly significant underlying psychical processes. He contrasts the 'manifest content,' which is the dream as directly related, with the 'latent content,' which is the group of thoughts reached by psycho-analysis of the dream. In the young child the manifest and latent contents are identical, and the dream plainly represents the imaginary fulfilment of an ungratified wish; the egocentric nature of the wish is equally evident. Freud maintains that every dream represents the fulfilment of an egocentric wish, and that the chief difference between the dreams of adults and those of young children is that in the former case the wish is a repressed one, the presentation of which is disguised so much as to make it unrecognisable until it has been submitted to psycho-analysis.

The mechanisms by means of which is brought about the distortion between the latent and the manifest content are quite precise. The thoughts of the latent content are unconscious, being repressed by the censor of consciousness. In the waking state they cannot penetrate to consciousness, but during sleep, when the activity of the censor is relaxed, they can do so, provided, however, they are distorted so that their true meaning is not recognised. The formation of the dream, or dream-making, is purely concerned with translating the latent thoughts into the distorted shape of the manifest content; it performs no intellectual work whatever. Apparently intellectual processes in dreams have been taken bodily from the latent content. The extent to which a given dream is incomprehensible, illogical, confused, and contradictory, exactly depends on the degree of distortion that has taken place, and is proportional to the amount of resistance offered by the subject to disclosing the underlying thoughts.

The four mechanisms of the dream-making are:

1. *Condensation*.—Every element in the manifest content represents the fusion of several in the latent thoughts, and *vice versa*. The latent content is condensed to a tenth or a twentieth of its original extent. The condensation is shewn in several ways. For instance, a figure in a dream may be constituted by the fusion of the memories of several different actual persons, either by fusing some traits of one with others of another, or by making prominent the traits common to different persons and neglecting the ones not common to them. The same process frequently affects names, so that neologisms may be formed exactly analogous to those found in the psychoses.

2. *Displacement*.—The psychical intensity of a given element in the manifest content shews no correspondence with that of the associated elements in the latent content; an element that stands in the foreground of interest in the former may represent the least significant of the latent thoughts, and an apparently unessential feature in the dream may represent the very core of the dream thoughts. Further, the most prominent affect in the dream frequently accompanies elements that represent the least important of the latent thoughts, and *vice versa*.

3. *Dramatisation*.—The manifest content depicts a situation or action, a fact which exercises a selecting influence on the mental processes to be presented. Logical relations between the latent thoughts are as such not represented, but they may be indicated by means of certain special devices. Thus, similarity may be represented by identification, causal relationship by making the one representing group of elements follow on the other, as in the gradual transformation of one scene into another, opposition and contradiction by inverting the two corresponding elements of the already formed dream, and so on. The characteristic that most dreams shew of presenting the manifest content predominantly in a visual form Freud terms 'regression,' and explains it by a very interesting theory in which he also discusses the production of psychotic hallucinations.

4. *Secondary Elaboration*.—This is the product of consciousness, and is brought about by the alteration undergone by the dream processes during their apprehension in consciousness. To it is due whatever degree of ordering and consistency there may be found in a dream. It particularly affects parts of the dream that have been insufficiently distorted during the dream-making; its action continues after waking, so that the memory of a dream becomes more altered the greater is the period that has elapsed since it was experienced.

The affect in the manifest content is invariably less intense than that in the latent content; this inhibition is due partly to the tendency to psychical regression during sleep, and partly to the suppressing effect of the censor. The affect is, as was mentioned above, displaced in the manifest content, but the apparent incongruity in its occurrence and association is solely due to this displacement; in the dream thoughts it is quite congruous and logically justified. The affect itself

undergoes no distortion in the dream-making, as does the conceptual content, so that it is of the same nature in the manifest as in the latent content. The forgetting of dreams is, like the distortion of the latent content, a manifestation of the activity of the censor. The most important part is first forgotten, and often is recalled only during the analysis.

The sources and material from which dreams are composed differ as regards the manifest and latent contents. In every dream appears some incident of the preceding day. Indifferent incidents—*i.e.*, those of little interest to the subject—frequently appear. These may be of the preceding day, or of older date; in every case they have obtained psychical significance by becoming, on the day of their occurrence, associated with significant experiences or memories. Somatic stimuli—*e.g.*, pain—may sometimes provide material. These, however, are treated like other psychical material, and are woven into the dream under the same conditions; under no circumstances can they alone account for a dream, except in the sense of occasionally being an instigation. Hypermnesia for previously forgotten infantile events is sometimes seen in the manifest content, and much more frequently in the latent content. The groundwork of every dream is of infantile origin. A recent or conscious wish is inadequate to cause a dream unless it is associated with a repressed, unconscious one; this latter is always the real cause, and the superficial one is merely the 'instigator.' The latent thoughts are always of high personal significance to the subject, and are in direct continuity with the rest of his mental life. Dream analysis is the most valuable means at our disposal for penetrating into the unconscious.

The function of a dream is to protect sleep by stilling the activity of unconscious mental processes that otherwise would disturb it. When, however, the activity of the endopsychic censor, which is diminished during sleep, is insufficient to keep from consciousness the latent thoughts, or to compel such distortion of them as to render them unrecognisable, recourse has to be had to the accession of energy that the censor can exert in the waking state, and the sleeper awakes, usually in terror.

In his book on *Wit* Freud has given a valuable contribution to the psychology of this subject and to that of humour; it is extraordinarily rich in new psychological points of view. The pleasure-bringing effect of wit depends partly on the

technique and partly on the tendencies of this. Freud has analysed in great detail the various classes of witty jokes, and finds that the technique of their production shews the closest resemblance to that employed in dreams: different forms of condensation, displacement, indirect presentation, reversal into the opposite, failures in thought, production of neologisms, fusion into a unity, etc. According to their aim he divides witty jokes into harmless ones, the aim of which is purely to bring pleasure, and those that have a pronounced tendency; the latter are subdivided into four classes—the obscene, the aggressive or hostile, the cynical, and the sceptical respectively.

The pleasure of wit arises in an economy of psychological expenditure (*Ersparung an psychischem Aufwande*). Four stages in the development of wit may be distinguished. The psychogenesis of wit leads back to the play with words so characteristic of early childhood life. The suppression of this activity, brought about by the development of logical thought and the knowledge of intrinsic relations between the different conceptions represented by words, is under certain circumstances relaxed in later life, and so arises the simple joke (*Scherz*) in which enjoyment of the old play is again made possible. In the harmless witty jest (*Witz*) the abrogation of the suppressing criticism allows the expression of a given thought of some value; the difference between joking and wit lies solely in the value of the thought communicated in the latter process. Finally, in wit that has a pronounced tendency, a form that has a more complex mechanism, there is allowed to come to expression a thought that, owing to the force of repression, could not reach expression in a direct way. In the last-named form of wit a certain fore-pleasure (*Vorlust*) is obtained through the technique of the jest itself, but instead of this being all, as in the harmless jest, it serves to release further inhibitions, so that a deeper source of pleasure (*Endlust*) is reached.

Wit has a great deal in common with dreams beyond the fact of their both employing the same technical devices. A witty joke suddenly *occurs* to one; it is the product, not of the conscious mental processes, but of the unconscious. The source of the pleasure is also an unconscious one; in wit, strictly speaking, we do not know what we laugh at, and constantly deceive ourselves over the excellence of a joke and the value

of the conveyed thought according to the varying part played in the production of our pleasure, on the one hand by the technique of the joke, and on the other hand by its tendency. The most important difference between wit and dreams is that the latter represent an asocial process, the former a social one. Further, dreams serve to guard from pain, wit represents a search for pleasure. Freud makes a number of penetrating remarks on the significance of wit as a social process, its function, and the precise relations between the speaker and hearer, that cannot here be discussed.

Freud further extensively deals with the relation of wit to the comic. The production of the latter and the source of pleasure are, in contradistinction from those of wit, quite conscious. Of the kinds of processes described as comical, ingenuousness stands nearest to wit. It differs from this in being produced free from inhibiting influences and without the application of technical devices; the pleasure it gives is due to the sight of another setting himself without effort beyond the action of influences that would inhibit the onlooker. Comic processes proper arise from a comparison between our own person and that of the person at whom we laugh, especially when the latter shews an over-expenditure of physical output or a lack of mental. Humour is a defence against the painful or disagreeable; the energy that would otherwise have produced pain is transformed into a source of pleasure. For humour only one person is necessary, for comicality two, for wit three (the producer of the joke, the imaginary person against whom it is directed, and the person who listens to it).

With wit there is effected an economy of expenditure in inhibition, with comic in thought, with humour in feeling. All three transport us into a state of our childhood, 'in which we did not know the comic, were not capable of wit, and did not need humour in order to make us feel happy in life.'

In another volume Freud has developed a number of interesting and suggestive investigations into the *Psychopathology of Everyday Life*.<sup>1</sup> The principle underlying this work was his discovery that certain inefficiencies in our mental activities and certain apparently purposeless performances, both of which groups seem to have no psychological meaning, shew themselves on analysis to have been determined by unconscious motives. These unconscious motives concern un-

<sup>1</sup> See Chapter IV. for a fuller exposition of this.



acceptable processes that have been inadequately suppressed, and which come to expression by interfering with the accomplishment of conscious mental activities.

Of the first group may be mentioned the following: Certain acts of forgetting are due to a half-conscious desire to forget, an extension of our general tendency not to recall the disagreeable. The memory that cannot be recalled may itself be of a painful nature, or may be associated with another of this nature. Difficulty in recalling well-known proper names is particularly often to be explained in this way. The actual source of unpleasantness is usually by no means obvious, and often can be discovered only by a little psycho-analysis. It frequently happens during the effort to recall a given name that another one presents itself, sometimes in such a compelling way that it is hard to put it aside. Analysis then shews that the second name is a disguised replacement of the first, being a compromise between the effort to recall the name searched for and the unconscious inhibiting impulse. This concealing-memory or 'cover-memory' (*Deckerinnerung*), in which one memory appears as a cover for another associated one, may refer to whole episodes, particularly those of childhood life; it is one of the ways in which falsification of memory is brought about. Allied to these defects in recollection are certain mistakes in action (*Vergreifen*) in which the error principally consists in omission. Thus many misplacements of objects, with subsequent inability to find them again, apparently accidental destroying of objects, and so on, are determined by unconscious motives.

To the second group belong many instances of mistakes in speech (*lapsus linguae*), in reading, in writing, and in apprehending what is said to one (*Versprechen, Verlesen, Verschreiben, Missverstehen*). As in the former cases the mistake made is, like an hysterical symptom, a compromise between the conscious intention and the unconscious one. Such mistakes, particularly often slips of the tongue or pen, betray hidden thoughts or wishes against the person's will. More complicated mistakes of the same nature are various symptomatic movements, general mistakes in knowledge, when the person knows well the actual fact that he has incorrectly described, and elaborately incorrect performances of simple tasks. With all these errors, as of the ones mentioned above, Freud has given the analysis of a great number of pretty and instructive examples, the study

of which is invaluable for practical psychology. He adds in this volume a chapter on the subject of superstition and its psychological significance, making many interesting contributions to the subject of false beliefs and the tendency to read significance into accidental coincidences. Many personal occurrences that seem to be chance are really determined by unconscious motives, and superstitions arise by the inner conviction of meaning in apparently chance events, which is projected by the individual on to external phenomena.

In conclusion, a few of the other fields to which Freud has applied his methods of investigation may be briefly mentioned. The problem of artistic creativeness, its nature and sources, has occupied him in an article and two books he has published on the subject.<sup>1</sup> Explanations are given on the basis of the principles mentioned above, particularly that of the conscious working out of unconscious wishes of childhood origin that are striving for expression and gratification. Abraham, Rank, Riklin, and others, have published volumes developing in detail suggestions of Freud's concerning the socio-psychological significance of myths, legends, and fairy-tales. These are the expression of perennial wishes, of the same kind as those operative in dreams and in the psychoneuroses; the mechanisms of repression and distortion, of the same nature as in those mental activities, are in them plainly to be traced, becoming more elaborate when the social censor gained in force and complexity as civilisation developed. In a more recent work he has dealt with the complex subject of religion from similar points of view, and has shewn how the fundamental longings of mankind that are fulfilled in the various religious beliefs and emotional states originate in intrapsychical conflicts that are among the oldest in us, both ontogenetically and phylogenetically. Last, but not least, should be mentioned the brilliant application of Freud's principles to the elucidation of the psychoses made by himself, Ferenczi, Abraham, Jung, and others. The perspectives opened by Freud's investigations are thus seen to be as vast in their extent as they are momentous in their nature.

<sup>1</sup> I have indicated some of Freud's views on this subject in an essay developing his explanation of the Hamlet mystery, published in the *American Journal of Psychology*, January, 1910.

## CHAPTER IV

### THE PSYCHOPATHOLOGY OF EVERYDAY LIFE<sup>1</sup>

Introduction—Forgetting—*Lapsus Linguae*—*Lapsus Calami*—Misprints—False Visual Recognition—Mislaying of Objects—Erroneously-carried-out Actions—Symptomatic Acts—General Observations—Summary.

#### I. INTRODUCTION.

UNDER this title Freud has written an interesting volume<sup>2</sup> dealing with a number of mental processes which previously had received little or no attention from psychologists. The material of this kind that lends itself to study, like that of dreams, is very extensive, and is accessible to everyone; it is therefore of value to those who wish to test Freud's general psychological conclusions, and who have not the opportunity of investigating the more obscure problems of the psychoneuroses. Freud's study of the mental processes in question is of especial interest as shewing that mechanisms similar to those observable in the abnormal also occur in the normal; indeed, from a psychological point of view these processes may be termed 'symptoms,' although they occur in perfect health. They may be further likened to neurotic symptoms in that they represent flaws in the normal functioning of the mind.

Freud's principal thesis in this connection may be thus stated: Certain inadequacies of our mental functioning, and certain apparently purposeless performances, can be shewn by means of psycho-analysis to have been determined by motives of which we were not at the time aware. The occurrences in question have the following characteristics in common: They belong to what may be called normal behaviour. They

<sup>1</sup> Elaborated from an address delivered before the Detroit Academy of Medicine, May 16, 1911. Published in the *American Journal of Psychology*, vol. xxii.

<sup>2</sup> Freud, 'Zur Psychopathologie des Alltagslebens,' 3<sup>e</sup> Auflage, 1910. Another of his books deals with the same topic, 'Vorlesungen zur Einführung in die Psychoanalyse,' 1916.

are only temporary disturbances of a function which at another moment would be correctly performed. Their incorrectness is at once recognised as soon as attention is drawn to them. We can trace no motive for them at first, but always tend to attribute them to 'inattention,' to 'chance,' and so on.

It will be seen from this that, according to Freud, our mental processes are more rigorously determined than is commonly believed, and that many of them generally thought to be causeless have in fact a very precise and definable cause. The same remark applies to those mental processes where we believe we have a perfectly free choice. A typical instance of this is afforded by the children's game 'think of a number.' Whereas at first sight it would appear that we are free to choose any possible number, careful analysis shews, as was first pointed out by Adler<sup>1</sup> a few years ago, that the number actually chosen is always connected with some mental process of considerable personal significance, though this may never have been realised by the subject, and that the choice has been determined by definite preceding mental constellations. I may relate an example of this, obtained from an unbelieving acquaintance. He produced the number 986, and defied me to connect it with anything of especial interest in his mind. Using the free-association method he first recalled a memory, which had not previously been present in his mind, to the following effect: Six years ago, on the hottest day he could remember, he had seen a joke in an evening newspaper, which stated that the thermometer had stood at 986° F., evidently an exaggeration of 98·6° F. We were at the time seated in front of a very hot fire, from which he had just drawn back, and he remarked, probably quite correctly, that the heat had aroused this dormant memory. However, I was curious to know why this memory had persisted with such vividness as to be so readily brought out, for with most people it surely would have been forgotten beyond recall, unless it had become associated with some other mental experience of more significance. He told me that on reading the joke he had laughed uproariously, and that on many subsequent occasions he had recalled it with great relish. As the joke was obviously of a very tenuous nature, this strengthened my expectation that more lay behind. His next thought was the general reflection

<sup>1</sup> Adler, 'Drei Psycho-Analysen von Zahleneinfällen und obsidierenden Zahlen,' *Psychiatr.-Neurol. Woch.*, 1905, Jahrg. VII., S. 263.

that the conception of heat had always greatly impressed him; that heat was the most important thing in the universe, the source of all life, and so on. This remarkable attitude of a quite prosaic young man certainly needed some explanation, so I asked him to continue his free associations. The next thought was of a factory-stack which he could see from his bedroom window. He often stood of an evening watching the flame and smoke issuing out of it, and reflecting on this deplorable waste of energy. Heat, flame, the source of life, the waste of vital energy issuing from an upright, hollow tube—it was not hard to divine from such associations that the ideas of heat and fire were unconsciously linked in his mind with the idea of love, as is so frequent in symbolic thinking, and that there was a strong masturbation complex present, a conclusion which he presently confirmed. We had just before been talking of sexual topics, a fact which no doubt had unconsciously influenced his choice. His choice of the number was therefore far from being a free one, being, in fact, dictated by a very significant personal constellation.

## II. FORGETTING.

One of Freud's most notable contributions to psychology, and a conception fundamental in his study of the present group of mental processes, was his discovery that, in addition to the other causes of forgetting, 'repression'<sup>1</sup> (*Verdrängung*) plays a most important part. Others before Freud had realised the existence of this, but it was reserved for him to demonstrate the extent to which it is operative in both normal and abnormal mental life.

Freud regards repression as a biological defence-mechanism, the function of which is to guard the mind from painful experiences. He holds that there is in the mind of everyone a tendency to forget the things that the person does not like to be reminded of—in other words, painful or disagreeable memories. It is true that we often remember against our will matters that we would rather forget, but there are two explanations for this. In the first place, such disagreeable haunting memories are frequently themselves only the replace-

<sup>1</sup> It will be noticed that the word 'repression' is here used in a rather special sense, to be carefully distinguished from that of 'suppression.' It means in psycho-analysis 'the keeping of certain mental processes from consciousness.'

ments of buried and still more disagreeable ones with which they are associated, an occurrence allied to that concerned in the genesis of true obsessions. In the second place, the capacity to forget painful experiences is only of a certain strength, which differs greatly in different people, and it is not always successful in achieving its aim. It is but rarely that one can forget the death of a dear relative, however desirable that might be, for the associative links to other conscious memories are too well formed. In such cases, what happens is that trivial memories, which by association might serve *unnecessarily* to remind us of the painful event, are apt to get forgotten—the name of the medical attendant, details as to the fatal malady, and so on; the tide of amnesia covers the base of the hill, but cannot reach the summit. By this means an economy is effected in the number of times that the painful memory is recalled to consciousness. Further, it must be remarked that, for reasons which cannot here be gone into, repression acts much more extensively in causing forgetfulness of internal, extremely intimate, and personal mental processes, than of what may be called 'external memories' known to the world, such as failure, grief, and so on. As is well known, Freud has applied his conception of repression to a number of other fields, notably to the explanation of infantile and hysterical amnesias, which do not here concern us.

A good instance of the recognition of the part played in everyday life by repression has been furnished by Darwin in a passage that does equal credit to his scientific honesty and his psychological acumen.<sup>1</sup> He writes in his autobiography: 'I had, during many years, followed a golden rule, namely, that whenever a published fact, a new observation or thought came across me, which was opposed to my general results, to make a memorandum of it without fail and at once; for I had found by experience that such facts and thoughts were far more apt to escape from the memory than favourable ones.' Pick<sup>2</sup> quotes a number of authors who more or less clearly recognise that a defensive striving against painful memories can lead to their becoming forgotten; but, as Freud remarks, no one has so exhaustively and at the same time so incisively described both the process itself and the psycho-

<sup>1</sup> 'Life of Charles Darwin,' edited by Francis Darwin, 1902, p. 42.

<sup>2</sup> Pick, 'Zur Psychologie des Vergessen bei Geistes- und Nervenkranken,' *Arch. f. Kriminal-Anthropologie u. Kriminalistik*, 1905, Bd. xviii., S. 251.

logical basis of it as has Nietzsche in his 'Jenseits von Gut und Böse': 'Das habe ich getan, sagt mein Gedächtnis. Das kann ich nicht getan haben, sagt mein Stolz und bleibt unerbittlich. Endlich—gibt das Gedächtnis nach.' [I have done that, says my memory. I cannot have done that, says my pride, and remains inexorable. Finally—memory yields.]

The class of forgotten thoughts in everyday life to which this mechanism mainly applies is, of course, that where the other causes of forgetting do not provide adequate explanations; in other words, it principally concerns matters that we should normally expect to remember. For instance, one would expect some hidden reason in the case of the name of a near relative or friend being forgotten much more readily than in the case of that of a casual acquaintance. The examples of the mechanism may conveniently be divided into two groups: (1) Forgetting to carry out some intended purpose (*Vergessen von Vorsätzen*), and (2) forgetting a given memory.

(1) *Forgetting to carry out an intention.*

A field in which some counter-will frequently leads to forgetting is that regarding the making or keeping of appointments. A man unwillingly feels that he should invite a given acquaintance to a social function he is giving in the near future. He says to him, 'You will be sure to come, won't you? I am not absolutely certain of the date at this moment, but I will send you a written invitation and let you know.' He forgets, until it is too late, and his excessive self-reproach betrays his unconscious culpability and shews that the forgetting was not altogether an accident. Maeder<sup>1</sup> relates the case of a lady who forgot to keep her appointment with the dressmaker to try on her bridal gown the day before the wedding, recollecting it only at eight in the evening. One must suppose that her whole heart was not in the marriage, and, in fact, she has since been divorced. In my own life I have noted numerous instances of a purposeful forgetting of appointments, particularly with patients. If a given patient is tedious and uninteresting, I am apt to forget that I have to see him at a certain hour, and if a doctor telephones to ask me whether I can see an interesting case at that hour, I am as likely as not to tell him that I shall be free then. Indeed, I can recall several annoying quandaries that this habit has led me into.

<sup>1</sup> Maeder, 'Contributions à la psychopathologie de la vie-quotidienne,' *Arch. de Psychol.*, 1907, t. vi., p. 150.

One is perhaps worth repeating, as shewing how complete can be the divorce between two memories when an 'unpleasantness' motive is in action. Some years ago, when in a junior position at a certain hospital, I was asked by my chief to visit his patients on Friday, as he wished to attend an important luncheon at the time. It was an exceptional request, for the rule was that approbation of the committee had to be obtained before a substitute was allowed to act, and I gladly consented, quite forgetting that I already had at the same time an appointment, which I was very desirous of keeping, and which would have been particularly inconvenient to postpone. On several occasions during the week, while going over my future engagements, I thought of both these, but never together; the thought would come, 'Let me see, at one on Friday I have to be at such-and-such a place,' and a few hours later a similar thought would come concerning the other place. The two intentions, both of which I was anxious not to forget, were kept distinct from each other, as if in water-tight compartments. When the time came I forgot the hospital appointment, and to my intense chagrin heard that my chief was very annoyed at being called away from his luncheon on account of my apparent unpardonable remissness. At the present time my memory chiefly fails in this respect in regard to visiting patients in nursing-homes, a duty I find irksome on account of the time consumed. Often when I am busy I conveniently forget, and once I left a patient without her daily visit for nearly a week. The self-reproach one feels on recollecting the forgotten duty on these and similar occasions is indicative of the true significance of the occurrence. This significance is intuitively realised in the case of lovers. A man who has failed to appear at a rendezvous will seek in vain to be forgiven on the plea that he had forgotten about it—will, indeed, with this plea only increase the lady's resentment. Even if he falls back on the customary psychological explanations, and describes how urgent business had filled his mind, he will only hear in reply: 'How curious that such things didn't happen last year! It only means that you think less of me.' Similarly, when a man begins to be forgetful about paying accustomed attentions to his wife, overlooks her birthday, and so on, she correctly interprets it as a sign of a change in their relations.

Another field where forgetting occurs to an untoward extent is in giving—a fact that indicates a more widespread



objection to giving than is agreeable to our altruistic conceptions. Most of those who have filled secretarial positions have been astonished to find the difficulty there is in collecting subscriptions as they fall due, and the ease with which people with otherwise good memories 'overlook' such matters. It is far from rare for them even to falsify their memory, and to assert firmly that they have already paid. A few, dimly conscious of their weakness, compensate for it by forming the habit of promptly paying every bill the moment it arrives. In general, however, there is a striking difference between the ease with which one remembers to send to the bank incoming cheques, and that with which one forgets to pay incoming bills. The same tendency is the explanation of the constant 'forgetting' to return borrowed books that seems to afflict so many people, a habit which must have distressed most of us who have a good library. This observation will be confirmed by any one who has tried to establish a permanent library in an institution where many coming and going students have ready access to it.

Almost as common is the habit of forgetting to post letters. Here, also, unconscious motives can sometimes be detected in individual instances. Sometimes one leaves a letter on one's desk for several days, forgetting each time to take it with one; in such cases it may be counted on that there is some secret opposition to sending the given letter. In one instance of the kind I ultimately posted the letter, but forgot to address the envelope. It was returned to me through the Dead Letter Office; I addressed it and again posted it, but this time without a stamp. I was then forced to recognise that there was in me an unconscious opposition to the sending of the letter, one of which I had previously been unaware, but which manifested itself in external inhibitions. One does not forget to post a letter that one's mind is in full harmony about sending—for instance, a love-letter. One is more apt to forget to send a letter containing a cheque than one containing an account. Often the resistance is of a general order. Thus a busy man forgets to post letters entrusted to him—to his slight annoyance—by his wife, just as he may 'forget' to carry out her shopping orders. Inhibitions of this kind sometimes betray a veiled antagonism towards the person whose behests we forget to fulfil. They constitute a way of depreciating the importance of the other person for ourselves, and when pronounced in

general they indicate a lack of consideration for others, based on an excessive self-absorption or abnormally high self-esteem.

George Meredith, in his 'Celt and Saxon,' gives a pretty instance of the forgetting of an intention being determined by a counter-will, one which also well illustrates the mechanism of rationalisation described in the second chapter. There are two brothers, one of whom, Phillip, is suffering under the mortification of having been jilted by his fiancée, Adiante. His brother Patrick, who is very fond of him, determines to visit the lady and try to influence her in his brother's favour. He stays as a guest in her father's house, where he finds that she has eloped with another man. In her home is a miniature of the lady; Patrick is greatly struck by its beauty, becomes fascinated by it, and persuades the father to give it him to take to his brother. On reaching home he shews it to his brother, and then says good-night. I now quote from Meredith: 'Phillip checked the departing Patrick. "You can leave that." He made a sign for the miniature to be left on the table. Patrick laid it there. His brother had not touched it, and he could have defended himself for having forgotten to leave it, on the plea that it might prevent his brother from having his proper share of sleep; and also, that Phillip had no great pleasure in the possession of it. The two pleas, however, did not make one harmonious apology, and he went straight to the door in an odd silence, with the step of a decorous office-clerk, keeping his shoulders turned on Phillip to conceal his look of destitution.'

In examples similar to those preceding, the counter-impulse that inhibits the memory is as a rule directed immediately against the conscious intention. In a more complicated series of cases, which the Germans term *Fehlleistungen*, it is directed against some other mental process, which, however, stands in associative relation to the conscious intention; this mental process is, so to speak, symbolised in the latter. The following are two examples of the kind:<sup>1</sup> Maeder<sup>2</sup> relates the case of a hospital interne who had an important business appointment in the town, but who was not allowed to leave the hospital until his chief, who was out for the evening, returned. He decided to leave his post, nevertheless, and on getting back late in the

<sup>1</sup> For other examples see Otto Rank, 'Fehlleistungen aus dem Alltagsleben,' *Zentralblatt für Psychoanalyse*, Jahrg. II., S. 265.

<sup>2</sup> Maeder, 'Une voie nouvelle en psychologie; Freud et son école,' *Cæno-bium*, Gennaio, 1909, Anno. III., p. 100.

evening, was astonished to find he had left the light burning in his room, a thing he had never done before during his two years of service. He at once perceived the reason for his omission; his chief always passed by the window on his way to his own house, would see the light burning, and conclude that the assistant was at home. The cause for the inhibition having passed, the subject readily apprehended it. A patient of mine on a number of occasions made the remarkable omission of forgetting to shave the right side of his face. It was always the same side, and it was the one that was turned towards me during the treatment. Analysis of the occurrence shewed that it was determined by a number of unconscious processes, of which the following was one: The idea of hair was connected with various sexual ideas, and the non-shaving of the side turned to me symbolised a disinclination to lay bare his sexual life, the occurrence always synchronising in fact with an outburst of resistance against the treatment.

(2) *Forgetting a given memory.*

We are concerned mainly with striking lapses in memory—namely, regarding matters that as a rule we can easily recall. An instance, which is hard to credit, though I can vouch for the accuracy of it, was related to me by a medical friend. His wife was seriously ill with some obscure abdominal malady, which might well have been tubercular, and, while anxiously pondering over the possible nature of it, he remarked to her, 'It is comforting to think that there has been no tuberculosis in your family.' She turned to him very astonished, and said, 'Have you forgotten that my mother died of tuberculosis, and that my sister recovered from it only after having been given up by the doctors?' His anxiety lest the obscure symptoms should prove to be tubercular had made him forget a piece of knowledge that was thoroughly familiar to him. Those accustomed to psycho-analysis will surmise that there is more to be said about the matter, but the example will serve to illustrate the influence affective processes have in connection with forgetting.

A lapse of memory that caused a good deal of stir at the time refers to the occasion on which Cardinal Newman (then Dr. Newman) called the Infallibilists 'an insolent and aggressive faction.' When the words were made public, Dr. Newman vehemently denied ever having used them, but some time after he remembered that he had, and admitted it.

It is with proper names that one observes the most striking instances of this process. In the majority of cases the counterwill that prevents a familiar name from being recalled is directed against some mental process that is associated with the one to be recalled, rather than against this itself. On account of some disagreeable experience, we would rather not recall a given name; we may actually succeed in forgetting it, but more often the tendency is shewn indirectly in our being unable to recall other names resembling it, and which might bring the undesired one to our mind. In other words, we have to think of the undesired name at times, but we guard ourselves against doing so more often than is necessary.

A hospital interne got to know a nurse, whom he of course addressed by her surname, and in his work saw her daily for about a year. They later got more intimate, and he now experienced great difficulty in recalling her surname so as to address envelopes to her. On one occasion he was unable to write to her for three weeks; recourse to her letters was of no use, for she always signed only her Christian name in them. Investigation of the matter brought to light the fact that her Christian name was the same as that of a girl he had previously jilted, and also of another girl he had been passionately in love with throughout his boyhood. This name he could not forget. What had happened was that he had successively transferred his affections from one girl to the other, the three being unconsciously identified in his mind. He was thus always true to his love, and did not wish to recall any fact, such as the different surname, that would tend to remind him of his faithlessness. The surnames in no way resembled one another.

Brill<sup>1</sup> relates the following example from his own experience: When working at Zurich, he wished to recall the name of an old patient of his, on whose case he had specially worked for some months, but was totally unable to do so. He had painstakingly prepared an account of the case for publication, but at the last moment his chief intervened, and decided to report it before a local society. He was unexpectedly prevented from doing so, and Brill was sent to read the paper at the meeting, this being credited to the chief. In trying to recall his patient's name, the name of another patient, Appenzeller, who was suffering from the same disease, persistently pre-

<sup>1</sup> A. A. Brill, 'A Contribution to the Psychopathology of Everyday Life,' *Psychotherapy*, 1909, p. 9.

sented itself. In the lengthy psycho-analysis undertaken, one apparently irrelevant memory kept recurring over and over again. This was an actual scene, in which the chief in question had aimed with a shot-gun at a rabbit, and had missed, to the amusement of Brill and the bystanders. The sought-for name ultimately flashed up—*Lapin* (rabbit), the patient being a French-Canadian. The example is instructive in illustrating the associative replacement-formations that come to the mind instead of the proper memory. The sound of the first part of Appenzeller's name resembles the French pronunciation of *Lapin*, and the scene that kept recurring, the failure of the chief to bag the rabbit, symbolised the whole incident that was the cause of the inhibition.

The following instance is rather more complex, but shews how fine are the threads connecting unconscious mental processes: A lady was unable to recall the Christian name of a near friend. The full name was Isabell Brown, but she could only recall the surname; instead of the other, the name Isidore presented itself, to be at once rejected as incorrect. Thus the failure in memory consisted only in the replacement of the syllable 'bell' by 'dore.' I asked her to associate to the word Brown, and the two names 'Owlie' and 'Leen' at once came to her mind. It will be noticed that the first two letters of the first word and the last one of the second word are contained in Brown; the only foreign ones in each case form the syllable 'ly' in pronunciation—a fact to be borne in mind. The two words were pet names of two common friends, who used to live together with the subject, and it was only in their company that she used to see Miss Brown. Concerning the first one, she said that she was at present pregnant for the first time, and that she was anxious as to the outcome, because certain characteristics in her figure had led her to suspect that pelvic narrowing might give rise to difficulties in the confinement. She also mentioned another friend, Dora D., who had similar characteristics, and Isidora D., a famous classical dancer, whom she knew personally, and whose perfect figure she much admired. The name Isidore, which it will be remembered was the replacement-memory, reminded her of the poem by Edgar Allan Poe, 'Beautiful Isidore *Lee*' (ly). I told her that the correct name of the poem was 'Beautiful Annabel *Lee*,' so that she had committed another falsification of memory; some inhibition was therefore acting against the syllables

'Anna' and 'Bell.' Thought of the name Annabel brought to her mind the name of Owlie's sister, Annie Sybil, which is a sound-contraction of Anna Isabell, and at once Miss Brown's proper name Isabell, which I personally did not know, came to her mind. The subject had recently had a painful quarrel with Annie Sybil, in which also the latter's sister had unfortunately become involved; she had always thought it a pity that the sister she disliked had a better figure, and was more suited for matrimony, than the one she was so fond of. There were thus two painful thoughts at the bottom of the amnesia—one the anxiety about Owlie's confinement, and the other that in this respect the disliked sister was more favourably situated.

So far the analysis. I will now venture on the following reconstruction of the mistake. The names first recalled by the subject—namely, Isidore Brown—one incorrect, the other correct, were both directly associated to the syllable 'ly,' the former *via* the poem, the latter *via* the pet names of the two friends. The suppressed syllable was 'bell.' In view of the fact that the word 'belly' summarised the whole situation, succinctly symbolising the discomforting idea about the friend's confinement, it is difficult to avoid the inference that the amnesia for the syllable 'bell' had thus proceeded: One must suppose that the thought of Miss Isabell Brown had unconsciously reminded the patient of their common friend and her sister; the diphthong in the surname, further, is identical with that in the former's name, Owlie, and the Christian name resembles the second part of the latter's name, Annie Sybil. The first part of the latter name, Annie, reminded her of 'Beautiful Annabel Lee' making the word 'belly,' which symbolised the painful thoughts in question. These thoughts, nevertheless, came to expression in the false replacement-memory. First the accent was shifted from the first syllable, 'bell,' of the objectionable word to the second, 'ly,' which was also the second syllable of Owlie's name. This, however, was unsuitable for forming a name by being added to the remembered part 'Isi,' so that a further shifting took place, in which it was replaced by 'dore.' Dora was the name of a friend with similar characteristics to Owlie's, but, in combination with 'Isi,' it was the name of another person, Isidora D., who was strikingly free from them. The subject, therefore, invests her friend with the beautiful and healthy attributes of the famous dancer. One might even go farther, and surmise that the reason why

Dore had appeared rather than Dora was because the word 'door,' which is constantly used symbolically for any exit (for instance, of the body, as in the Song of Songs), was better adapted to symbolise the suppressed complex than the word Dora is. An adjuvant reason for the choice of the masculine form Isidore rather than the feminine one Isidora was probably the fact that her attitude towards her friend was a distinctly masculine and protective one. It is fairly evident that the subject was transferring on to her friend emotions—*e.g.*, solicitude about the confinement—that really referred to herself. She had a dread of the same event, and to an expert there are clues in the falsified memory to the particular infantile origin of this. Her identifying herself with the friend was facilitated by two circumstances—first, that she greatly admired the latter's husband (and was thus unconsciously putting herself in her place); and, secondly, that she was devotedly fond of the friend herself.<sup>1</sup> Of especial interest is the fact that the repressed complex, which was responsible for the forgetting, betrayed itself in the replacement-memory, which was, as is always the case, a compromise-formation. To many readers this reconstruction will probably appear as too fine-spun. In my opinion, however, they underestimate the combination of delicacy and rigour with which unconscious and preconscious processes are determined, a conclusion which can readily be confirmed by a painstaking study of similar material.

A simple illustration of the way in which a strong affect will cleave to a name, and be transferred to any other person bearing the same or similar name, is afforded by Shakspeare in 'Julius Cæsar' (Act III., Scene iii.):

*Third Citizen.* Your name, sir, truly.

*Cinna.* Truly, my name is Cinna.

*Second Citizen.* Tear him to pieces; he's a conspirator.

*Cinna.* I am Cinna the poet; I am not Cinna the conspirator.

*Second Citizen.* It is no matter; his name's Cinna; pluck but his name out of his heart, and turn him going.

<sup>1</sup> An interesting confirmation of the correctness of the analysis occurred some months later when the baby in question was born. The lady, on mentioning the news to various friends, repeatedly made the slip of referring to her friend as Mrs. M., her own name. She thus expresses her wish that the happy event had happened to her instead of to her friend. M. had also been the friend's maiden name, so that by the mistake the lady further expresses the wish that the friend was still single—*i.e.*, her jealousy at her marriage.

The same thing happened during the French Revolution. Some confusion had arisen owing to two people bearing the name of Biron. One was known to be guilty, but there was little time for proper investigation. 'Bring them both,' said Fouquier; 'they will pass through it.' They both passed through it—to the scaffold—on the following day.<sup>1</sup>

A field in which significance is apt to be intuitively attributed to the forgetting of names is that where our own are forgotten. Few people can avoid feeling a twinge of resentment when they find that their name has been forgotten, particularly if it is by some one with whom they had hoped or expected it would be remembered. They instinctively realise that if they had made a greater impression on the person's mind he would certainly have remembered them again, for the name is an integral part of the personality. Similarly, few things are more flattering to most people than to find themselves addressed by name by a great personage where they could hardly have anticipated it. Napoleon, like most leaders of men, was a master of this art. In the midst of the disastrous campaign of France in 1814, he gave an amazing proof of his memory in this direction. When in a town near Craonne, he recollected that he had met the mayor, De Bussy, over twenty years ago in the La Fère Regiment. The delighted De Bussy at once threw himself into his service with extraordinary zeal. Conversely there is no surer way of affronting someone than by pretending to forget his name; the insinuation is thus conveyed that the person is so unimportant in our

<sup>1</sup> This reminds me of an incident in our own times, which, though not turning on the question of names, is worth recording in illustration of another psycho-analytical thesis—namely, that, as in the last two examples, a strong affect will get transferred on quite illogical grounds and by means of superficial associations; in general it may be said that a strong affect always tends to enforce identification at the expense of discrimination. During the stirring days of the militant suffragettes Lord Weardale was attacked and assaulted at Euston Station by ladies who were under the impression that he was the Prime Minister, Mr. Asquith. A few days later one of the most distinguished suffragettes, speaking at a meeting at South Kensington, said that 'it was very awkward for Lord Weardale that he should be so like Mr. Asquith. Anybody resembling a Cabinet Minister was not safe in these days. She advised those who resembled members of the Government to make some alteration in their appearance by growing a beard or moustache. Women could not waste their time worrying over whether it was the right man or not (!).' Coming to later times still, we see the same affect radiating over whole nations, so that *all* Germans are supposed to be brutal on the one hand and *all* Englishmen hypocritical on the other.



eyes that we cannot be bothered to remember his name. This device is often exploited in literature. In Turgenev's 'Smoke' (p. 255) the following passage occurs: "So you still find Baden entertaining, M'sieu—Litvinov." Ratmirov always uttered Litvinov's surname with hesitation, every time, as though he had forgotten it, and could not at once recall it. In this way, as well as by the lofty flourish of his hat in saluting him, he meant to insult his pride.' The same author, in his 'Fathers and Children' (p. 107), writes: 'The Governor invited Kirsanov and Bazarov to his ball, and within a few minutes invited them a second time, regarding them as brothers, and calling them Kisarov.' Here the forgetting that he had spoken to them, the mistake in the names, and the inability to distinguish between the two young men, constitute a culmination of disparagement.<sup>1</sup> Falsification of a name has the same significance as forgetting it; it is only a step towards complete amnesia. The word-contamination in this instance shews a striking psychological intuition of the process termed by Freud 'identification'; it indicated that in the Governor's eyes the distinguishing characteristics of the young men were so little marked, and the men so unimportant, that he did not think it worth while to make the effort of differentiating one from the other. Turgenev seems to be very familiar with the mechanism in question. In his 'Virgin Soil' there is an example where it is still more frankly expressed. A rather forlorn and unprepossessing man called Paklin has just brought some bad news to Sipyagin, a nobleman. The latter tells his wife, who asks him how he knows; to which he replies (in Paklin's presence) 'Mr. . . . Mr. . . . what's his name? Mr. Konopatin brought this news.' A little later he is giving various orders, and runs on thus: 'Eh? I fancy you spoke, Mr. Konopatin. I'll take you with me to-morrow, Mr. Konopatin. What do you say? I don't hear. You will take some vodka, I dare say? Some vodka for Mr. Konopatin! No! You don't drink it? In that case, Fyodor, show the gentleman to the green-room.' 'Good-night, Mr. Kono—' Paklin lost all patience at last. 'Paklin!' he roared; 'my name is Paklin!' 'Yes, yes; well, that's much the same. It's not unlike, you

<sup>1</sup> In literature disparagement is often indicated by the forgetting of other matters besides names. Thus, in Bernard Shaw's 'Caesar and Cleopatra,' Caesar's indifference to Cleopatra is depicted by his being vexed on leaving Egypt at having forgotten something he has to do. Finally he recollects what it is—to say good-bye to Cleopatra.

know.' When they meet the next morning Sipyagin greets him as follows: "Mr. Paklin! you will come with me, Mr. Paklin! Put Mr. Paklin's bag on the box! I am taking Mr. Paklin!" he said, with an emphasis on the word Paklin, and an accent on the letter *a*, as though he would say, "You've a name like that, and presume to feel insulted when people change it for you! There you are, then! Take plenty of it! I'll give you as much as you want! Mr. Paklin! Paklin!" The unlucky name kept resounding on the keen morning air.' One more example from literature, this time from Meredith's 'The Ordeal of Richard Feverel.' Mrs. Mount, in talking to Richard, refers to his friend Ripton thus: "How's that Mr. Ripson, Pipson, Nipson?—it's not complimentary, but I can't remember names of that sort. Why do you have friends of that sort? He's not a gentleman."'

Sensitiveness about the correct spelling of one's name is extremely frequent; we all know the profound difference that members of Scottish clans see between 'Mc' and 'Mac,' and a practical psychologist realises the importance of being sound on the matter every time he writes such a name. I had thought personally that I was free from sensitiveness of this kind, until a little occurrence some time ago taught me the contrary. An article of mine had been published in a German journal; only my surname was printed, with the letters 'M.D.' (which are not used professionally in Germany) attached, as if they were the initials. The same morning I had occasion to fill up a lunacy certificate, and was surprised at the secretary laughing when I handed it in; I had signed it with my Christian name only, thus compensating for the omission in the article. This sensitiveness has sometimes deeper roots than mere personal self-esteem; Stekel<sup>1</sup> has traced it to infantile complexes relating to the giver of the name—the father.

The following two instances within my own experience are similar to those quoted from Turgenev. The first relates to Mr. Mayo Robson, the eminent gastro-intestinal surgeon, after whom was named a bobbin he had invented for the operation of entero-anastomosis. Another surgeon, almost equally eminent in the same field of work, and living in the

<sup>1</sup> Stekel, 'Warum sie den eigenen Namen hassen,' *Zentralbl. für Psychoanalyse*, Jahrg. I., Heft 3, S. 109. See also his interesting article, 'Die Verpflichtung des Namens,' *Zeitschr. für Psychother. u. med. Psychol.*, February, 1911, Bd. iii., S. 110.

same town, remarked one day in a lofty and contemptuous manner: 'This patient had previously been unsuccessfully operated on by a man called Rayo Bobson, or Bayo Robbins, or some such name.' His motive was evident, and of course quite conscious. In the second instance the mistake in the name was quite unconsciously made as the result of a falsification of memory, but the significance was very similar. It was at a university graduation ceremony, where a number of visitors were present arrayed in multi-coloured and imposing robes. Those so attired formed a procession in double file. A friend of mine, a foreigner, remarked, as Professor Titchener passed, 'Let me see, who is that? Isn't it Kitchener?' Many would be inclined to see no significance in the mistake, although my friend knew the names of Lord Kitchener and Professor Titchener fairly well. I have, however, to add these two additional facts: A few minutes before, while talking about experimental psychologists in general, he had allowed himself to make the scurrilous remark that in his opinion they should be called the pantry-cooks of psychology, on account of their menial field of work; the passage from 'cook' to 'kitchen' is obvious. Secondly, he had also commented on the martial appearance of this dazzling procession, and I can readily imagine his being especially struck by Professor Titchener's soldierly bearing. It is difficult to avoid the inference that these two trends of thought, present in his mind so recently, played their part in the falsification of the name, which thus betrayed his private opinion of the field of work in which Professor Titchener<sup>1</sup> is so eminent.

Many people have a strikingly bad memory for names, even when their memory is otherwise good. This is generally explained by saying that proper names are among the latest acquired knowledge, so that our memory of them is especially fragile; in accordance with the law of dissolution, these memories are among the first to be lost, a process that constitutes one of the most characteristic signs of approaching senility. This explanation is difficult to harmonise with two facts—first, that in many cases the memory is weak in this

<sup>1</sup> I trust that Mr. Robson and Professor Titchener will pardon my sacrificing the personal privacy of their names in the cause of science. I have purposely selected, from a large number of similar instances, two in which the contrast between a rare individual disparagement and an otherwise universal respect is specially striking.

connection when it is notably good in regard to other more complex, and later acquired matters, such as scientific formulæ and so on; and, secondly, that the characteristic in question is much more pronounced with some people than with others, and even when they are young. When the opportunity of making a psycho-analysis with some one of this type presents itself, two other matters are brought to light with considerable constancy—namely, that for various reasons the person's own name has acquired an unusual psychical significance, so that it becomes invested with the feeling-tone of the whole personality, and that there is a strong ego-complex present. It would seem, therefore, that the general inability to bear other people's names in mind is an expression of an excessively high estimation of the importance of one's own name and of oneself in general, with a corresponding indifference to, or depreciation of, other people. In my experience I have most often found this characteristic with people having either an extremely common or an extremely rare name, both contingencies leading to undue sensitiveness in the matter, but I cannot put this forward as being a general rule. It further seems to me probable that the increasing difficulty of retaining names that is such a frequent accompaniment of advancing years may, in part at least, be attributed to the growing self-esteem brought by success and by cessation from the turmoils and conflicts of youth.

Falsification of memory, as was indicated above, is closely related to forgetting, and is influenced by the same motive. A common instance is the mistakes made with regard to the day of the week. Some one who is eagerly anticipating an event at the end of the week is very apt to think it is Wednesday when it is only Tuesday, and so on; their impatience at the slowness with which the week is passing manifests itself as an error—in the desired direction—as to the present date.

Not only unconscious falsification of memory, but also deliberate or half-deliberate falsification—*i.e.*, lying—may be dictated by similar influences. Many cases of purposeless and apparently unintelligible lying in particular are often of this nature; Riklin has recently published a full analysis of one of this kind.<sup>1</sup>

Other mental operations, besides recollecting, may be falsified in the same way, a process designated by Freud as an

<sup>1</sup> Riklin, 'Eine Lüge,' *Zentralbl. für Psychoanalyse*, Jahrg. I., S. 193.

*Irrtum.* Several examples related elsewhere in this paper might be classified in this group, so that one here will suffice. I was buying some flowers, and put two dollars, the exact price of them, on the counter. While they were being got ready, I changed my mind about one bunch, and told the woman serving me to leave it out; it should be said that she was the owner of the shop. On taking the money a few moments later, she said: 'That bunch cost forty cents, so that will make two dollars forty.' Her wish that I were making the order larger instead of smaller was probably concerned in the mistake.

A few concluding remarks may be added on this mechanism of forgetting. The main points may be summarised in the statements that forgetting is often determined by a painful mental process (*Unlust*) of which the subject is unaware, either at the time only or permanently; that this inhibiting mental process may be a counter-will to recollecting the matter in question, or may be associated with this in a more complex way; and that a false memory presenting itself in the place of the true is a symbolic substitute of this, standing in associative connection with it. Two general considerations indicate that acts of forgetting of the type illustrated above, are not, as is commonly supposed, accidental or due to chance. First is the fact that the same one tends to be repeated. If we forget to carry out a given intention, or are unable to recall a given name, the failure is apt to recur, thus suggesting that it has a specific cause. Secondly, is the fact that in at least two spheres of life it is universally recognised that remembering is under control of the will, so that a failure to remember is regarded as synonymous with a not wanting to remember. Freud<sup>1</sup> writes: 'Frauendienst wie Militärdienst erheben den Anspruch, dass alles zu ihnen Gehörige dem Vergessen entrückt sein müsse, und erwecken so die Meinung, Vergessen sei zulässig bei unwichtigen Dingen, während es bei wichtigen Dingen ein Anzeichen davon sei, dass man sie wie unwichtige behandeln wolle, ihnen also die Wichtigkeit abspreche.' [Both the service of ladies and military service exact that nothing relating to them must be subject to forgetting, suggesting thus that forgetting is permissible with unimportant matters, while its occurrence in regard to important ones is an indication that they are being treated like unimportant ones—*i.e.*, that their

<sup>1</sup> Freud, *op. cit.*, S. 83.

importance is being discounted.] A soldier who forgets to perform a given duty is punished regardless of the excuse. He is not allowed to forget, and whether his not wanting to perform the duty is openly expressed, or indirectly, as by his forgetting, is considered by his officer as comparatively irrelevant. The standard set by women is equally severe; a lover who forgets his lady's wishes is treated as though he openly declared them unimportant to him.

### III. 'LAPSUS LINGUÆ.'

The everyday occurrence of the defect in psychophysical functioning popularly known as a slip of the tongue has not received much attention from psychologists. The attempts made, by Meringer and Mayer and others, to explain on phonetic grounds the particular mistake made have signally failed, for on the one hand many cases are to be observed where no phonetic factors are in operation, and on the other hand careful study shews that such factors are at the most accessory or adjuvant in nature, and are never the essential cause.

According to Freud, the word said in mistake is a manifestation of a second suppressed thought, and thus arises outside the train of thought that the speaker is intending to express. It may be a word or phrase entirely foreign to this train of thought, being taken in its entirety from the outlying thought, or it may be a compromise formation, in which both come to expression. In the latter case the false word may be a neologism; a common example of this is where a speaker, intending to use the word 'aggravating,' says, 'How very aggravoking!' the word 'provoking' having intruded itself; many malapropisms are formed in this way, being the result of uncertainty as to which is the more appropriate word.

The secondary thought that thus obtrudes itself on the intended speech may, like the motives of repressive forgetting, be of two kinds: (1) A general counter-impulse (*Gegenwillen*) directed immediately against the speech, or (2) another thought accidentally aroused by it. In the latter case it can represent either a continuation of a theme previously in the speaker's mind, or a thought aroused, through a superficial association, by the theme that is intended to be spoken; even when it represents a continuation of a previous theme it will generally, if not always, be found that there is some association between

this and the theme of the speech. It will readily be understood that in many cases the disturbing thought is not evident, but can be revealed only by investigation, sometimes a searching psycho-analysis being necessary.

Cases where the disturbing thought is a direct counter-impulse are usually easy to interpret. One instance will suffice. A President of the Austrian Reichstag once finished his introductory remarks by declaring the session closed, instead of opened; as the particular session promised nothing but fruitless wrangles, one can sympathise with his wish that it were already at an end.

Some cases where the disturbing thought is nearly related to the intended theme are equally simple. A French governess engaged on afternoon work in Dr. Stekel's family<sup>1</sup> asked his wife that she might retain her testimonials, saying: 'Je cherche encore pour les après-midis, pardon, pour les avant-midis.' The slip betrayed her feeling of dissatisfaction with the afternoon engagement and her intention to look for another situation for the afternoons as well as the mornings, an intention she proceeded to carry out.

A friend of mine was driving his motor-car slowly and cautiously one day, when a cyclist, who was riding with his head down, furiously, and on the wrong side of the street, ran into him and damaged the bicycle. He sent in a bill for \$50.00, and, as my friend refused to pay, he sued him in Court. When I inquired as to the result of the action, my friend said, 'The judge reprimanded the prisoner for careless riding.' I corrected him, 'You mean the plaintiff, not the prisoner.' 'Well,' he replied, 'I think the fellow should have been arrested for furious riding.'

A lady, when speaking of Bernard Shaw's works, said to me, 'I think very highly of all my writings,' instead of 'all his writings.' She was an amateur writer of short stories.

An unmarried man, a patient, remarked, 'My father was devoted to my wife.' He meant to say either 'his wife' or 'my mother.' This is a typical instance of a *lapsus* that would pass as being entirely accidental and devoid of significance. I must add, however, that one of the main causes of the patient's neurosis was an unconscious incestuous attachment to his mother, so that his unsuppressed thoughts on the subject of the remark would run in full, 'My attitude towards my mother

<sup>1</sup> Related by Freud, *op. cit.*, S. 48.

is the same as that of my father.' No alteration is too slight to have a meaning. The instance narrated above, in which the first letter only of Titchener's name was replaced by a 'K,'<sup>1</sup> belongs to the subject of *lapsus linguæ* equally as much as to that of forgetting.

Such self-betrayals as those just related sometimes afford valuable insight into character and motive. I was present at the International Congress of Neurology in Amsterdam, when the following curious episode occurred: There was a heated discussion regarding Freud's theory of hysteria. One of the most violent opponents, who is noted as having worked long and fruitlessly on the subject of hysteria, was grudgingly admitting the value of the earlier work of Breuer and Freud—the conclusions of whom he had himself confirmed the truth of—as a prelude to a vehement denunciation of the 'dangerous' tendencies of Freud's later work. During his speech he twice said, 'Breuer und *ich* haben bekanntlich nachgewiesen,' ['As is well known, Breuer and *I* have demonstrated'], thus replacing Freud's name by his own, and revealing his envy of Freud's originality.

The following example is more complicated: In talking of the financial standards so prevalent in modern civilisation, I said: 'In yesterday's newspaper there were the headings, "Ten million dollar fire in Halifax; six lives lost."' It was at once pointed out to me that I had said Halifax instead of Bangor, Maine. Analysis of the mistake brought the following free associations: Until a few years ago I was disgracefully ignorant of the existence of Bangor, Maine, and I remember in college days being puzzled by the reference to Maine in the well-known student song, 'Riding down from Bangor,' as in my ignorance I supposed that this related to Bangor, the university town of Carnarvonshire, Wales. The name Bangor essentially stands in my mind for the original Bangor. It brought up a memory of the recent controversy as to whether the new National Welsh Library should be established at Bangor, at Swansea (my home), or at Cardiff (the university town where I studied). This reminded me of interests I have in the contents of this library, in Celtic mythology, which naturally carried me

<sup>1</sup> This replacing of the initial letter of a word by that of another word, typically from the same sentence, is known in Oxford as a Spoonerism, on account of a distinguished professor who had the habit of committing the particular slip. As he is still alive, I will refrain from commenting on the psychological significance of the habit.



to the valuable library of mythological books that I possess myself. Then I remembered that what had especially struck me in reading about the recent fire was the fact that a valuable collection of books had been destroyed in it, and that this had made me enter a note not to forget to renew my fire insurance, which had recently lapsed, before leaving in the coming week for a fortnight's visit to the United States.

The meaning of my *lapsus* is beginning to emerge. A library fire at Bangor was too near home for my peace of mind, and my unconscious had consolingly relegated it to some other spot. The next problem is to discover the motive for the replacement of Bangor by Halifax, a process that was greatly 'over-determined.' Maine is, from its geographical position, closely associated in my mind with the Maritime Provinces of Canada, and only on the preceding day a Canadian had been demonstrating to me on a map, for the *n*th time, how Maine should rightfully have formed part of these Provinces. Still, that does not explain why I selected Halifax rather than St. John, the other town I know the name of in the Maritime Provinces. One reason, doubtless, was the fact that at the time I was treating a patient from Halifax, Nova Scotia, who had recently been telling me that the houses there were mostly built of wood, and therefore were exposed to the danger of fire. The name Halifax, however, is more familiar to me as an English euphemism for Hell, as in the expression, 'Go to Hal-ifax.' This called up the memory of half-forgotten childhood fears, for, like most Welsh children, I was carefully nurtured with a proper dread of what was called 'the burning fire'; as I grew up I was cheered to learn the groundlessness of this particular dread. My slip of the tongue, therefore, registered my desire that any library fire should be in some other place than in my home, and if possible in a non-existent locality.

An example for which I am indebted to Dr. A. A. Brill is peculiar in that the slip of the tongue represented a resolution in opposition to the conscious intention. A man, who on account of homosexual practices was in constant fear of coming into conflict with the law, invited two lady friends to spend an evening at the theatre. They expressed a wish to see a play called 'Alias Jimmy Valentine,' which dealt largely with convicts and prisons. He was far from comfortable at the idea of spending an evening with such thoughts, but could not

well avoid it. On getting into the cab to drive to the theatre, however, he accidentally gave the driver the name of another theatre, and did not notice the mistake until they arrived there, when it was too late to rectify it. At this theatre the play was about the cleverness with which a daughter outwitted her selfish old father. It was not without significance that the subject's attitude towards his own father was one of pronounced hostility, so that his slip of the tongue had the effect of exchanging an evening with a painful topic for one with a topic that he greatly enjoyed.

Several non-scientific writers before Freud had noted the psychological significance of accidental slips of the tongue. Freud<sup>1</sup> quotes examples of this from, for instance, Brantôme and Wallenstein. Shakspeare himself furnishes a beautiful one in the 'Merchant of Venice' (Act III., Scene ii.). It occurs in the scene where Portia is expressing her anxiety lest the favoured suitor should fare as badly as the distasteful ones in the hazard set for them by her father. She wants to tell Bassanio that in the event of his failure she would nevertheless belong to him, but is prevented from doing so by her promise to her father. In this mental discord she speaks:

' There is something tells me (but it is not love),  
I would not lose you; and you know yourself  
Hate counsels not in such a quality.  
But lest you should not understand me well,  
(And yet a maiden hath no tongue but thought)  
I would detain you here some month or two,  
Before you venture for me. I could teach you  
How to choose right, but then I am forsworn;  
So will I never be; so may you miss me;  
But if you do, you'll make me wish a sin,  
That I had been forsworn. Beshrew your eyes,  
They have o'erlooked me, and divided me:  
One half of me is yours, the other half yours—  
Mine own, I would say; but if mine, then yours,—  
And so all yours.'

Rank<sup>2</sup> comments on this passage: 'Gerade das, was sie ihm also bloss leise andeuten möchte, weil sie es eigentlich ihm überhaupt verschweigen sollte, dass sie nämlich schon vor der Wahl *ganz* die seine sei und ihn liebe, das lässt der Dichter mit bewundernswertem psychologischen Feingefühl in dem Versprechen sich offen durchdrängen und weiss durch

<sup>1</sup> Freud, *op. cit.*, S. 50, 58.

<sup>2</sup> Otto Rank, *Zentralbl. für Psychoanalyse*, Jahrg. I., Heft 3, S. 110.

diesen Kunstgriff die unerträgliche Ungewissheit des Liebenden sowie die gleichgestimmte Spannung des Zuhörers über den Ausgang der Wahl zu beruhigen.' [Just that which she would like to hint to him gently, because really she should not speak of it—namely, that even before the choice she loves him and is wholly his—the poet with wonderful psychological delicacy allows to leak through in the *lapsus linguæ*, and manages by this device to allay the intolerable uncertainty of the lover as well as the like tension of the hearer.]

One of our greatest novelists, George Meredith, in his masterpiece, 'The Egoist,' shews an even finer understanding of the mechanism. The plot of the novel is, shortly, as follows: Sir Willoughby Patterne, an aristocrat greatly admired by his circle, becomes engaged to a Miss Constantia Durham. She discovers in him an intense egoism, which he skilfully conceals from the world, and to escape the marriage she elopes with a Captain Oxford. Some years later Patterne becomes engaged to a Miss Clara Middleton, and most of the book is taken up with a detailed description of the conflict that arises in her mind on also discovering his egoism. External circumstances, and her conception of honour, hold her to her pledge, while he becomes more and more distasteful in her eyes. She partly confides in his cousin and secretary, Vernon Whitford, the man whom she ultimately marries, but, from a mixture of motives, he stands aloof.

In a soliloquy Clara speaks as follows: "If some noble gentleman could see me as I am and not disdain to aid me! Oh! to be caught out of this prison of thorns and brambles. I cannot tear my own way out. I am a coward. A beckoning of a finger would change me, I believe. I could fly bleeding and through hootings to a comrade. . . . Constantia met a soldier. Perhaps she prayed and her prayer was answered. She did ill. But, oh, how I love her for it! His name was Harry Oxford. . . . She did not waver, she cut the links, she signed herself over. Oh, brave girl, what do you think of me? But I have no Harry Whitford; I am alone" . . . the sudden consciousness that she had put another name for Oxford, struck her a buffet, drowning her in crimson.'

The fact that both men's names end in 'ford' evidently renders the confounding of them more easy, and would by many be regarded as an adequate cause for this, but the real underlying motive for it is plainly indicated by the author.

In another passage the same *lapsus* occurs, and is followed by the hesitation and change of subject that one is familiar with in psycho-analysis when a half-conscious complex is touched. Sir Willoughby patronisingly says of Whitford: "False alarm. The resolution to do anything unaccustomed is quite beyond poor old Vernon." Clara replies: "But if Mr. Oxford—Whitford . . . your swans, coming sailing up the lake, how beautiful they look when they are indignant!<sup>1</sup> I was going to ask you, surely men witnessing a marked admiration for someone else will naturally be discouraged?" Sir Willoughby stiffened with sudden enlightenment.'

In still another passage, Clara by another *lapsus* betrays her secret wish that she was on a more intimate footing with Vernon Whitford. Speaking to a boy friend, she says: "Tell Mr. Vernon—tell Mr. Whitford."

In relation to these two literary passages I made a personal slip of the tongue that illustrates the probity of the unconscious mind as contrasted with the duplicity of the conscious one. Expounding the subject of *lapsus linguæ* to some one, I said that I had come across two interesting literary examples—in Meredith's 'Egoist,' and Shakspeare's 'Love's Labour's Lost'; when detailing the second I noticed that I had named the wrong play. Analysis of the mistake brought the following memories. On the preceding day, while talking of the sources of Shakspeare's plots, I had made the remark that the only one he had not taken from previous authors was that contained in 'Love's Labour's Lost.' Some six months before, Professor Freud had told me that he had heard from Dr. Otto Rank that there was in the 'Merchant of Venice' an example of *lapsus linguæ* he attributed to the disturbing influence of a suppressed thought, but he could not tell me where it occurred. On looking back I realise that I felt just a touch of pique, though I did not pay any attention to it at the time, at not having observed it myself, and I took the first opportunity to re-read the play, when, of course, I came across the example. The one in the 'Egoist' I had really observed myself. My statement that I had discovered the two examples in question was therefore only three-fourths true. The fact, which I had

<sup>1</sup> The nature of the change of the subject here accurately betrays the content of the underlying affect, *indignation* at Patterne's disparagement of Whitford, just as a mediate association reaction indicates the nature of the complex stimulated.

suppressed,<sup>1</sup> that Dr. Rank deserved some credit, leaked through to external expression in my error of naming the wrong play, substituting Shakspeare's only *original* one. An interesting feature of the example is the fact that a few minutes before I had been relating how a man not over-scrupulous in the matter of priority had betrayed his dishonesty in a treacherous slip of the tongue. No doubt deeper factors than interest in mere scientific priority were also operative in my own case, such as rivalry and an 'English' complex, both of which are matters that play a quite subordinate part in my conscious mental life.

#### IV. 'LAPSUS CALAMI.'

The introductory remarks made on the subject of slips of the tongue apply almost literally to slips of the pen. One principal difference is that the delay interposed by the mechanical acts of writing enables disturbances of co-ordination to occur with especial readiness, as can be illustrated by a glance over any author's manuscript. The necessity for numerous corrections indicates that, whether owing to the intricacy of the subject-matter or to a lack of clearness in the author's mind, a harmonious flow is far from being attained. General perplexities mirror themselves in half-conscious hesitations, to the choice of individual words. Thus, a correspondent, who couldn't decide as to the advisability of a given proposal, wrote to me that it might turn out to be 'umpracticable,' evidently a contamination of 'impracticable' and 'unpractical.'

A field of frequent errors is that of dates. Many people continue to write the date of the previous year throughout a great part of January. Some recent figures were given in the Press in which it was stated that in the first week of the New Year one in every forty cheques was dated the previous year; in a fortnight's time the average sank to one in sixty. Not all such mistakes are due to the fixation of habit, as is readily assumed; sometimes they signify a disinclination to accept the fact that yet another bygone year has brought them nearer to old age, a reflection that is apt to be prevalent at the turn of the year. Regrets that such and such a date is already past, or impatience that it has not yet arrived, are common

<sup>1</sup> Naturally I excused this to myself on the ground that pedantic accuracy is uncalled for in conversation, but the facts remain.

motives of such unconscious mistakes. A student dated a letter to me April 11, 1911, instead of April 22. An examination was due in the first week of May for which he was very unprepared, and I attributed his slip to the wish that there was twice as much time ahead of him in which to get ready. That the date he actually wrote was the 11th was no doubt influenced by the presence of these integers at the end of 1911, but it is to be noted even in this connection that his mistake consisted in writing them earlier than he should—*i e.*, in putting the date earlier. As with the phonetic factors entering into slips of the tongue, the fact that the part wrongly written occurs elsewhere in the same line only predisposes to the mistake. Such factors do not cause the mistake; they only make it easier to assume that particular form.

A lady once told me that an old friend in writing to her had closed the letter with the curious sentence, 'I hope you are well and *unhappy*.' He had formerly entertained hopes of marrying her himself, and the slip of the pen was evidently determined by his dislike at the thought of her being happy with some one else. She had recently married.

In a paper on the subject of suggestion I formulated as one of the conclusions the sentence: 'Suggestion plays the principal part in all psychotherapeutic methods except the psycho-analytic one.' In abstracting the article for a neurological journal, a reviewer, who strongly disagrees with the theses I maintained, allowed himself to quote this as follows, 'La suggestion joue le rôle principal dans toutes les méthodes psycho-analytiques,' thus completely reversing my meaning.

In the 1887 edition of Baedeker's 'London' I happened to notice the following curious slip. The full passage may be quoted: 'Die Sonntagsfeier ist in England bekanntlich streng; alle Geschäfte, Läden, Sehenswürdigkeiten und die City Restaurants sind den ganzen Tag, andere Speisehäuser nur von 1 bis 3 und von 6 bis 11 Uhr geöffnet. Viele Geschäfte schliessen schon Samstag Mittag. Man geht daher Sonntags am besten aufs Land.' ['As is well known, the Sabbath in England is kept very strictly; all the offices, shops, sights, and city restaurants are *open* the whole day, and other eating-houses only from 1 to 3 and 6 to 11. Many places of business close already at noon on Saturday. It is thus better to spend Sunday in the country.'] The last sentence shews that the writer, like most foreign visitors, had suffered much discomfort

from the London Sabbath, and in the mistake of writing 'open,' instead of 'closed,' it is plain that the wish was father to the thought.

For the following example I am indebted to Dr. A. A. Brill. A patient wrote to him on the subject of his sufferings, which he tried to attribute to worry about his financial affairs induced by a cotton crisis: 'My trouble is all due to that d—d frigid wave;<sup>1</sup> there isn't even any seed.' What he really wrote, however, was not 'wave,' but 'wife.' In the bottom of his heart he cherished half-avowed reproaches against his wife on account of her sexual anæsthesia and childlessness, and he dimly realised, with right, that his life of enforced abstinence played a considerable part in the genesis of his symptoms.

As with slips of the tongue, no mistake is too slight to be significant. The following four are instances, selected from a considerable number of similar ones, in which it consisted only in the replacement of one letter by another:

A correspondent of mine had published a scientific paper on a sexual subject, and was writing to me about a virulent criticism of it that had appeared; the critic had used such passionately denunciatory language as to make it evident that the topic of the paper had aroused some strong personal complex. My correspondent's first sentence was, 'Have you seen X's satirical criticism of my paper?' plainly indicating by his unconscious substitution of 'y' for 'i' his estimate of the nature of the criticism.

Some few years ago I was writing to an old friend, whom I had always called by his surname. On account of family ties it became more appropriate to address him by his Christian name, and, after a momentary embarrassment natural under the circumstances, I took up my pen and began, 'Dear Fred.' To my amazement, however, I saw that I had slipped in a 'u' before the final letter of the name. This may seem a very trivial mistake, due simply to the similarity of the two words, but a psycho-analytic conscience tends to be more unsparing in the criticism of its owner, as it is more sparing in that of others. Two memories at once rushed to my mind. One was of a dream I had had two years before, at a time when I was debating with myself whether it would be politic openly to defend the Freudian principles, the truth of which my experience had made me accept. In the dream I was in a swiftly

<sup>1</sup> Meaning in the money-market.

moving motor-omnibus, the driver of which was a 'composite figure',<sup>1</sup> bearing mostly the lineaments of my friend in question. An angry crowd surrounded us, and threatened the driver for 'going so fast.' It became necessary for me to decide whether to stand aloof or to side with the driver, and I did the latter. I need not give the other details of the dream, but the analysis shewed it to be a presentation of my waking dilemma, the driver being a replacement-figure for Professor Freud. I had recently been taken for a long motor ride by my friend, who, by the way, has a German surname, and, though at first I had qualms as to the recklessness of his driving, I soon perceived, to my relief, that this was only apparent, and that he was really an exceedingly skilful and reliable driver. Before the incident of the *lapsus calami*, therefore, he had long been unconsciously associated in my mind with Professor Freud. The second memory was of a letter I had recently written to a Canadian professor of a subject allied to my own. On coming to Canada, I had felt very awkward and constrained at the American custom of formally prefacing a man's title to his name when addressing him, and it was a long time before I got accustomed to being spoken to by both younger and older colleagues as Dr. Jones or as Doctor. It embarrassed me to have to speak to even fairly intimate friends in this way, and, in the case of the gentleman in question, I frankly told him, in the letter referred to above, that my English prejudices would not let me do it with any degree of comfort. As he was some fifteen years older than myself, I wondered afterwards whether he might resent a younger man taking the initiative of addressing him simply by his surname. The slip of the pen now began to take on a different aspect, and I was obliged to recognise in it the manifestation of a conceited wish that I was on terms of sufficient equality with Professor Freud to allow such a familiar mode of address. I feel certain that no thought of the kind had ever entered my consciousness, to which it is quite strange, though my reaction of shame convinced me of the reality of its existence. The circumstances of the slip of the pen were extraordinarily favourable to its occurrence—the similarity in the names, the previous identification of the men, the occasion of the letter following so soon after the other one, and so on. If it were not for this, I hardly think that such a deeply repressed wish could have come to expression—at least, not so flagrantly.

<sup>1</sup> See Chapter VIII., p. 191.



I am indebted to Dr. A. A. Brill for the following personal example: Although by custom a strict teetotaler, he yielded to a friend's importunity one evening, in order to avoid offending him, and took a little wine. During the next morning an exacerbation of an eye-strain headache gave him cause to regret this slight indulgence, and his reflections on the subject found expression in the following slip of the pen. Having occasion to write the name of a girl mentioned by a patient, he wrote not Ethel, but Ethyl.<sup>1</sup> It happened that the girl in question was rather too fond of drink, and in Dr. Brill's<sup>2</sup> mood at the time this characteristic of hers stood out with conspicuous significance.

Some three years ago I was writing to a friend in England, and gave the letter to a member of my family to post. Fortunately she noticed I had made a mistake in the address, having written as the street number 19 instead of 55. The two numbers do not even resemble each other, so that the customary explanations are here more than ever in default. I will relate a few of the associations as they occurred. The name of the street, Gordon Street, brought 'Gordon Highlanders—the Highlands—the thought that my friend is an ardent mountaineer—the thought that Professor Freud is very fond of the mountains—*Berg* (=Mountain)—Berggasse, the street in Vienna in which Professor Freud lives—the number of his house, 19.' The friend's name, Maurice, brought 'morris-dancers—maypole—phallus—sex—Professor Freud's works on sexual subjects.' In desperation I started again with Gordon, which now brought 'the regiment called the Gay Gordons—gay women (a London euphemism for prostitutes)—the German equivalent, *Freudenmädchen*—a cheap joke I had heard in Germany in this connection on Professor Freud's name'; as a matter of fact, I had on the previous evening read a passage in his 'Traumdeutung' where he refers to jokes on names. Turn which way I would, I arrived at the same end-point, and I began to suspect

<sup>1</sup> Ethyl alcohol is, of course, the chemical name for ordinary alcohol.

<sup>2</sup> In writing my manuscript, I made the slip of replacing the word 'Brill' by that of 'Bree,' the name of another medical friend. The mistake is evidently a contamination derived from the word-picture of 'Brill on the spree,' and is determined by the memory of tenuous jests relating to Berlin on the (River) Spree; both the vowel and the consonants of Brill are contained in the word 'Berlin.' It is only right to add, however, that the thoughts of both Dr. Brill and Dr. Bree are intimately connected in my mind with Berlin in ways that discretion prevents me from describing.

that this was not chance. It might be said that for some reason or other, whether from the number coinciding with that in the Berggasse or what not, thoughts relating to Professor Freud were at the time occupying my mind to the exclusion of all else, in reply to which I have to say that I do not find this so in other analyses, and that in my experience, whenever free, unforced associations constantly lead in the same direction there is some good reason for it; in such cases there is invariably some essential, significant connection between the starting-point and the end reached. Further, the more far-fetched and strained the associations appear, as in this example—in other words, the more superficial they are—the more important is the underlying essential connection found to be. This conclusion, clearly demonstrated in Jung's experimental work, was fully confirmed in the present instance. Although I could see no possible connection between my friend and Professor Freud, of whom he knew nothing, I was led to investigate the contents of the letter I had sent him. To my astonishment I found that the main feature of it could be applied to Professor Freud in the same sense, and that I must unknowingly have harboured a wish to send it to him; in the slip in writing I had expressed my unconscious wish to send the letter to another man by addressing the envelope partly to him and partly to the one I consciously intended it to go to. There can be no question as to the intense personal significance of the complex covered by the superficial associations of the analysis, for wild horses would not tear from me the contents of that letter.

Mistakes in addressing envelopes, as in the example just mentioned, are generally manifestations of some disturbing thought that the writer does not mean to express. A young lady was secretly engaged to a medical man, whom we will call Arthur X. She addressed a letter one day not to Dr. Arthur X, but to Dear Arthur X, thus expressing her desire to let all the world know of their relationship.

Not long ago I was treating a case of exceptional interest in a patient who lived some sixty miles from Toronto. On account of the distance, the patient, who could not leave his work, was able to visit me only twice a week. I found it impossible to treat him on these conditions, and wrote to tell him so. Instead of writing the name of his town on the envelope, however, I wrote Toronto, displaying my wish that he were more conveniently situated.

## V. MISPRINTS.

Misprints may, of course, arise from errors made by the writer, the editor, the proof-reader, or the printer. From time to time the Press records amusing instances of a disagreeable truth unintentionally leaking out in the form of a misprint; in Freud's book several examples of this are related.<sup>1</sup> Unlike the other kinds of failure under discussion, one here is rarely in a position to obtain an objective verification of a given interpretation, but sometimes this in itself reaches a high grade of probability. At all events, general principles indicate that the mistake made must be determined by personal constellations of whoever made it, and cannot be altogether accidental.

In a number of the *Zentralblatt für Psychoanalyse*,<sup>2</sup> the title of a book of Gross's was wrongly given as 'Das Freud'sche Ideogenitätsmonument,' instead of 'Ideogenitätsmoment.' As both the writer of the article and the editorial staff (Drs. Adler and Stekel) regarded the conception as a monumental one, it is possible that the overlooking of the mistake is to be correlated with this fact.

In a paper of my own on nightmare, I wrote the sentence, 'The association in general between the sex instinct and the emotions of fear and dread is a very intimate one.' This was correctly rendered in the proof, but on the second occasion of reading it the proof-reader was shocked to think that I could make such an obviously outrageous mistake, and altered the word 'intimate' to 'distant,' in which form it appeared in print.

In a brochure of mine that appeared as a German translation, a mistake was made of a less unfortunate kind. One of my main theses was that the conception of Hamlet represented a projection of the most intimate part of Shakspeare's personality, and so thoroughly did the translator absorb my view of the identity of the two that, when he came to a passage on the death of Shakspeare's father, he unconsciously substituted the name Hamlet for Shakspeare, and rendered the passage as referring to 'the death of Hamlet's father in 1601.' The substitution was overlooked in the proof by two other readers thoroughly familiar with the subject.

The following misprint occurred last year in the *Scotsman*

<sup>1</sup> S. 66, etc.

<sup>2</sup> Jahrg. I., S. 197.

in reporting a speech: 'He had not the wealth of the Plantagenets, nor did he derive any income from American trusts. (Loud daughter).' *Punch* unkindly comments on this replacement of one letter for another (*d* for *l*), 'We knew what was meant without the explanatory parenthesis.'

In the notorious 'Wicked Bible,' issued in 1631, the word 'not' was omitted from the Seventh Commandment, so that this read, 'Thou shalt commit adultery.' The possibility is not to be excluded that the editor had a personal interest in the subject of the commandment. At all events, he was heavily fined, it being empirically recognised that whether his purpose was conscious or unconscious he was equally responsible for it, and that he had no right, even 'accidentally,' to impute such commandments to Jahveh.

Perhaps a similar theme was running through the mind of whoever composed this passage, which referred to the proposal to tax bachelors: 'Unmarried people usually have just as good reason to be unmarried as those who are married.' The words 'have to be married' have evidently been omitted from the end of a rather clumsy sentence.

A highly interesting misprint of historic importance is detailed by Dattner.<sup>1</sup> At the time when Austria and Hungary were separated, in 1867, special arrangements were made for regulating their common National Debt and their future financial relations. In the Hungarian law on the subject a single word 'effectiv' was accidentally omitted, the consequence of which will be to cost Austria between eleven and fifty-two million crowns. The desire of the Hungarian law-makers to come as well as possible out of the transaction unconsciously overcame their probity.

Typewriting, being a form of writing, is subject to the same influences as this. Mistakes made may be due to either a *lapsus calami* or a misreading, in any case being determined by the previous mental constellations of the typist. Thus my typist, having worked long in a lawyer's office, is fond of replacing 'illogical' by 'illegal,' and, being of a very proper turn of mind, makes such mistakes as changing 'a vulgar word' to 'a regular word.' I have found that distinctness of handwriting is powerless to prevent such mistakes. Prudishness was presumably also the reason why the typist of a Medical

<sup>1</sup> Dattner, 'Eine historische Fehlleistung,' *Zentralbl. für Psychoanalyse*, Jahrg. I., S. 550.

Officer of Health substituted 'anti-naval' for 'ante-natal' in a letter he had dictated to her (evidently a case of mishearing, for the former word could have no meaning in England in 1917).

One practical aspect of this matter is generally appreciated—namely, that accuracy in correcting proofs can be attained only by getting some one else to do it for one. A mistake once made in the manuscript, and then copied, is very apt to get overlooked by the person who made it. The affective blindness that enabled him to make the mistake, or, more strictly, that enabled an unconscious impulse to come to expression, will very likely continue its action by preventing him from recognising it.

#### VI. FALSE VISUAL RECOGNITION.

In visual perception the same mistakes of affective origin that were discussed in connection with memory are frequently to be observed, and here also they are of two kinds—a failure to see something that for various reasons we do not want to see, and a falsification of perception in the sense of personal wish-complexes. Examples of the former kind are very common in connection with reading the newspaper. Thus, just when a relative was crossing the Atlantic last year, I saw in the news-headings that a serious accident had happened to a liner, but I had the greatest difficulty in finding the account of it in the paper, overlooking it again and again.

Perhaps the commonest example of false perception is the catching sight of one's name where it really doesn't occur. As a rule, the word that has attracted one's attention is very similar to one's name, containing perhaps the same letters differently arranged. Professor Bleuler<sup>1</sup> relates an example where this was not so, and where, therefore, the essential cause of the mistake must have been of a greater affective intensity; the word was really 'Blutkörperchen,' only the first two letters being common to the two words. He explained it thus: 'In diesem Falle liess sich aber der Beziehungswahn und die Illusion sehr leicht begründen: Was ich gerade las, war das Ende einer Bemerkung über eine Art schlechten Stiles von wissenschaftlichen Arbeiten, von der ich mich nicht frei fühlte.' [In this case, however, the delusion of relation and the illusion were easily to be traced to their origin: What I was just reading

<sup>1</sup> Bleuler, 'Affektivität, Suggestibilität, Paranoia,' 1906, S. 121.

was the end of a remark on a certain kind of bad style in the writing of scientific works from which I felt myself to be by no means free.]

Freud<sup>1</sup> quotes an example from Lichtenberg: 'He always mistook "angenommen" for "Agamemnon," so thoroughly had he read his Homer.' In searching an American newspaper for English political news at the time of the Navy scare in 1910, my attention was caught by the heading 'German Danger'; on looking nearer I saw that it was 'General Danger.' On another occasion I read the heading, 'Future of the Insurance Scheme,' as 'Failure of the Insurance Scheme'; it is easy to discern my sympathy with my medical colleagues in the attack they were at the time conducting on the scheme. Another personal example, with an even grosser mistake, was the following: I was searching the literature to find the earliest instance of a certain superstitious act, and, although I had only been able to trace it to the ninth century, I suspected that it might have occurred still earlier. One day I found in an old French book an account of it quoted from an earlier writer, the reference to whose work contained the words '6<sup>e</sup> livre.' I read this as '6<sup>e</sup> siècle,' and entered it in my notes as such; it was only some time after, on checking the reference, that I discovered the error.

Similar observations can be made in regard to the perception of other objects than written matter, and especially with the recognising of other people. False recognition is quite commonly due to a pervading desire to meet the person in question; a lover who has a rendezvous with his mistress fancies he sees her coming many times over, when really the women he mistakes for her may bear only the faintest resemblance to her.

The failure to greet friends or acquaintances in the street is not always due to not seeing them, and one knows how gradual are the shades between a direct 'cut,' where one person consciously pretends he does not see the other, and a not seeing that is due to a not wanting to see.<sup>2</sup> Women intuitively feel that the difference between the two is unimportant, and are as much offended by the one as by the other; some one who thinks highly of them has no right not to see them when they pass.

A striking instance of this affective blindness occurred to

<sup>1</sup> Freud, *op. cit.*, S. 64.

<sup>2</sup> One might invert the familiar proverb and say, 'What the heart doesn't grieve over, the eye doesn't see.'

me not long ago: It was part of my routine duty to check the invoices for laboratory apparatus as they came in, and hand them over to the assistant superintendent to see that they got paid. On one occasion I had neglected to do this until a small number collected. I then went through them, and took them with me into the assistant superintendent's office. I was very pressed for time, and hoped he would not be there, so that I could simply deposit them on his desk; especially so, as there was a small error in one of them that I had to point out to him, and I realised that his over-conscientiousness would mean a tedious investigation of the error. I felt, however, that I ought to try to find him, and explain the point to him. On going into his office, I saw several men there, went up to one of them who had his back to me, and said, 'Do you know where Dr. X is?' To my astonishment he replied, 'Why, I am Dr. X.' My not recognising him was facilitated by the fact of his having an unfamiliar hat on, but the actual cause of it I knew well enough.

The phenomenon of *fausse reconnaissance*, or *déjà vu*, which has perplexed so many psychologists, is closely allied to the same category. Freud has finally solved this riddle,<sup>1</sup> but, as the explanation of it is of a more complex order than with the other occurrences under consideration, I shall not go into it here.

It will be noticed that in this group, as in the other allied ones, the operative feeling-complex manifests itself in two ways—in causing the suppression of one mental process and the prominence of another; it determines what one does see (falsely) as well as what one doesn't see. In some cases the negative of these two effects is more striking, in others the positive. A further group of occurrences may now be mentioned, in which, although strictly speaking there is no false perception, the positive phenomenon in question is seen at its acme; it is where one's attention is attracted in an unusual way to a given object that would have passed unnoticed were it not for the presence of a certain feeling-complex with which the idea is associated. A simple instance will best explain what is meant: An English lady who had recently come to Canada, and who had not yet got acclimatised to the strange life, was paying a society call. She had to wait a few moments for her hostess, and on the latter's entry was discovered deeply en-

<sup>1</sup> Freud, *op. cit.*, S. 139.

grossed in Pierre Loti's 'L'Exilée,' which she had unearthed from an unobtrusive corner of a pile of other books. She had never read anything of Loti's before, and it was purely the title that had attracted her interest. Brill<sup>1</sup> mentions the case of a New York embezzler who was discovered by detectives in a Philadelphia library looking at a book entitled 'Will I ever go back?' Pursuance of this theme, which is obviously impossible here, would lead us into the psychology of attention and interest, and the importance played in these processes by feeling; it will be seen, however, that psycho-analysis has a very considerable bearing on these problems.

#### VII. MISLAYING OF OBJECTS.

It is probable that objects are never accidentally mislaid. ✓ The underlying motive manifests itself in two ways—in the act of mislaying the object, and in the subsequent amnesia; in other words, a *Verlegen* is a composite of a *Vergreifen* and a *Vergessen*, the latter being the main feature. As before, the motive may be a counter-impulse directed against the use of the object, or against an idea associated with the use of it. Instances of both will be given, first of the former.

We are all more apt to mislay bills rather than cheques, and in general objects that we don't want to see rather than those we do. Apparent exceptions to this rule, such as the mislaying of valuable objects, come under the second category, where our objection is not to the thing itself, but to what it can remind us of.

A common experience, which has often occurred to me personally, is the following: Whenever I suffer from the effects of over-smoking, I notice that it is much harder to find my pipe; it has got put behind ornaments or books, and in all sorts of unusual places that it normally does not occupy.

A patient of mine was recently very put out at having lost an important bunch of keys. He told me that he urgently wanted them that afternoon to open the lock of a minute-book at a meeting with his auditor and solicitor. I inquired as to the purpose of the meeting. It appeared that an important resolution had been passed at an annual directors' meeting, and that he had omitted to enter it in the minute-book. He was the managing director, and it became a question legally whether

<sup>1</sup> Brill, *Psychoanalysis*, 1914, p. 230.



a certain action could be taken without the formal consent of the other directors, or whether possibly the minute could be subsequently added by private arrangement with them. At all events, it was an annoying situation, and I felt sure that his dislike of having to face it was connected with the loss of the key. Further inquiry shewed that he had used the keys only once that morning to open his office desk; after doing this it was his custom immediately to replace them in his pocket, the desk being provided with an automatic closing lock. He had missed the keys as soon as he got into the street-car to come to see me, and had telephoned a message for a clerk to search the short distance between his private office and the car-line. The surmise was near that he must have flung the bunch into his desk behind some papers, later closing it in the usual way; on telephoning to have the desk forcibly opened, this was found to be correct.

The following example is a little more complicated: A lady had lost the key of a box containing phonograph records, and had thoroughly ransacked her rooms for it many times during six weeks, but all in vain. The records belonged to a correspondence college, and were a means of learning French pronunciation. They had been put away early in the summer, and now, in the autumn, she wanted them for the purpose of renewing her French studies. Her whole heart was not in these, however, for it happened that she was fond of singing, and hoped to get accepted in an orchestral choir, the rehearsals of which would leave her no time for other studies. As time went on she despaired more and more of being accepted, and fell back on the French as the next best way of occupying her winter evenings. Soon after her definite rejection by the choir she discovered the lost key, which had been carefully stowed away in the corner of an attic. She recollected locking the box in the early summer and thinking that she would not need it again for a long time, but had no memory of putting the key away. She was extremely proud of her voice, and had built on her application being successful. Taking up the French studies denoted failure of her hopes. Her inability to find the key thus symbolised her loathness to believe that her vocal reputation would be slighted.

To lose or misplace a present, especially if it happens more than once, is not generally considered a compliment to the giver, and with right, for it often is an unconscious expression

of disdain, disregard, or indifference.<sup>1</sup> When a wife repeatedly mislays her wedding-ring during the honeymoon, it does not augur well for the future happiness of the marriage. Freud<sup>2</sup> relates an example of misplacing where the motive was of this kind, and which, like the last-mentioned example, is interesting in regard to the circumstances under which the object was again found. It concerned a married couple who lived rather aloof lives from each other, any marks of tenderness being of a distinctly lukewarm nature; the fault, according to the husband, lay in the emotional apathy of his wife. One day she made him a present of a book that would interest him. He thanked her for the attention, promised to read it, put it aside, and couldn't find it again. In the next six months he made several vain attempts to find it. At the end of this time his mother, to whom he was devoted, got seriously ill, and was very tenderly nursed by his wife. His affection for his wife rapidly increased, and one evening, coming home from the sick bed with his heart filled with gratitude towards her, he went to his desk, and, without any conscious purpose, unhesitatingly opened a drawer and took out the lost book.

Leaving things behind one is a common type of mislaying. To do so in the street or in a public conveyance has a very different significance from doing so in the house of a friend. In the latter case it often expresses the person's attachment, the difficulty he has in tearing himself away, and the desire or willingness he has to come back. One can almost measure the success with which a physician is practising psychotherapy, for instance, by the size of the collection of umbrellas, handkerchiefs, purses, and so on, that he could make in a month.

#### VIII. ERRONEOUSLY-CARRIED-OUT ACTIONS.

A secondary suppressed tendency may manifest itself in the disturbance not only of writing, but also of any other conscious motor act, an occurrence Freud terms a *Vergreifen*. The intended action is not carried out, or only incorrectly, being entirely or partly replaced by an action corresponding with the suppressed impulse that breaks through. As in the former

<sup>1</sup> For an example of how complex may be the mental processes behind such a simple occurrence, the reader is referred to a striking analysis by Otto Rank, 'Das Verlieren als Symptomhandlung,' *Zentralbl. für Psychoanalyse*, Jahrg. I., S. 450.

<sup>2</sup> Freud, *op. cit.*, S. 73.

cases, this secondary tendency is associated either directly or indirectly with the conscious intention, and the faulty action is customarily explained as being due to 'chance,' 'accident,' or 'carelessness.'

A trite example will perhaps best illustrate the type of occurrence. On starting to open a fresh tin of tobacco, I economically reflected that I should first finish the rather dry remains of the previous one. A few minutes later, however, while engrossed in reading, I wanted to refill my pipe, and to my surprise detected myself in the act of opening the new tin, although I had pushed it farther away from me than the other. My checked wish to enjoy the fresh tobacco had taken advantage of my distraction, and so interfered with my conscious intention of filling the pipe from the old tin.

An equally simple example is the following: It is my custom to put scientific journals, as they arrive, on a stool in the corner of my study. On reading them I write on the back the page number of any articles I wish to enter in my reference books; the journals not so marked are put on top of the files to be bound at the end of the year, while the others are placed on a pile at one side of my desk. Once a week or so I go through this pile and enter the references, but, whenever I have neglected this for so long that the pile begins to assume formidable dimensions, I find I have a pronounced tendency to put no more there, and to put on the files any fresh journal I read, whether it has articles that should be entered or not. The motive is obvious—to save myself the trouble of having to enter more than I already have to.

A lady went to post some letters which had come for her brother, and which had to be re-addressed and forwarded on account of his absence. When she got home she found the letters still in her handbag, and realised that she must have posted two letters, addressed to herself, which she had opened that morning; they duly arrived on the next day. At the time another younger brother was at home seriously ill with typhoid fever, and she had just written to the elder brother begging him to come home as soon as possible. She knew, however, that on account of urgent business he would not be able to leave immediately, but her posting letters addressed to the home, under the impression that she was sending them to her brother, indicated her keen anxiety that he was already there.

A patient came up from the country to get advice about

various obsessing ideas that greatly distressed him. He had been recommended to consult two physicians, another one and myself. The other physician told him 'not to think about the ideas,' and advised him to take a course of physical exercise at a special gymnasium that he kept for the purpose. I, of course, advised psycho-analytic treatment, which has since cured him. He promised us both that he would think the matter over, and let us know what he decided. That night, on getting home, he wrote to each of us—to the other physician that he couldn't yet make up his mind, and to me that he would like to make an appointment to begin the treatment as soon as possible. He put the letters into the wrong envelopes. During the subsequent psycho-analysis it became evident that this 'accidental' mistake was unconsciously determined by the spiteful desire to let the other physician know what he thought of his advice.

The use of keys is a fertile source of occurrences of this kind, of which two examples may be given. If I am disturbed in the midst of some engrossing work at home by having to go to the hospital to carry out some routine work, I am very apt to find myself trying to open the door of my laboratory there with the key of my desk at home, although the two keys are quite unlike each other. The mistake unconsciously demonstrates where I would rather be at the moment.

Some years ago I was acting in a subordinate position at a certain institution, the front-door of which was kept locked, so that it was necessary to ring for admission. On several occasions I found myself making serious attempts to open the door with my house-key. Each one of the permanent visiting staff, of which I aspired to be a member, was provided with a key to avoid the trouble of having to wait at the door. My mistakes thus expressed my desire to be on a similar footing, and to be quite 'at home' there.

Two other everyday sets of occurrences may briefly be mentioned where unconscious disturbances of otherwise intended actions are very frequent. The one is the matter of paying out money, and particularly of giving change. It would be an interesting experiment to establish statistically the percentage of such mistakes that are in favour of the person making them, in comparison with that of the opposite sort.

The second is the sphere of domestic breakages. It can

be observed that after a servant has been reprimanded, especially when the reprimand is more than usually unjust in her eyes, is a favourite time for crockery to 'come to pieces in her hand.' Careless breakage of valuable china, an event that often perplexes the owner as much as it incenses her, may be the product of a number of factors in the mind of the transgressor, class-envy of valuable property, ignorant lack of appreciation for objects of art, resentment at having to devote so much labour to the care of what appear to be senseless objects of enthusiasm, personal hostility towards the owner, and so on.

#### IX. SYMPTOMATIC ACTS.

Under the name of *Symptomhandlungen* Freud discusses a series of unconsciously performed actions that differ from the last-mentioned ones in being independent activities, and not grafted on to another conscious one. They are done 'without thinking' or 'by chance,' and no significance is seen in them. Analysis of them, however, shews that they are the symbolic expression of some suppressed tendency, usually a wish. In many instances the action is a complicated one, and performed on only one occasion; in others it is a constant habit that often is characteristic of the person. The mannerisms of dress, of fingering the moustache or clothes-buttons, the playing with coins in the pocket, and so on, are examples of this kind; they all have their logical meaning, though this needs to be read before becoming evident.

Different ways of occupying the hands often betray thoughts that the person does not wish to express or even does not know of. It is related of Eleanora Duse that in a divorce play, while in a soliloquy following a wrangle with the husband, she kept playing with her wedding-ring, taking it off, replacing it, and finally taking it off again; she is now ready for the seducer. The action illustrates the profundity of the great actress's character studies.

Maeder<sup>1</sup> tells the following story of a Zurich colleague who had a free day, and was hesitating between making an agreeable holiday of it and paying a distasteful duty-call on some people in Lucerne. He ultimately decided on the latter, and dolefully set out. Half-way to Lucerne he had to change

<sup>1</sup> Maeder, 'Nouvelles Contributions à la psychopathologie de la vie quotidienne,' *Arch. de Psychol.*, 1908, vol. vii., p. 296.

trains; he did this mechanically, and settled down in the other train to continue his reading of the morning papers. When the ticket-collector came round, he discovered that he had taken a train back to Zurich. His wish to spend the day there and not in Lucerne had proved too strong for his good intentions.

In most of the examples previously mentioned in this paper, and of those encountered in real life, it is possible to discover a motive for the given occurrence that logically accounts for this, but which does not lie particularly deep in the person's mind. In other words, it is, in Freud's language, preconscious,<sup>1</sup> and the subject has no particular difficulty in recognising it as an integral part of his personality. The problem, however, is far from exhausted at this point. It is next necessary to discover the origin of the motive or tendency in question, or to explain why it needs to be expressed at all. In this investigation one reaches the realm of the unconscious proper, and here it often turns out that the error which is being analysed has a deeper meaning—that it symbolises more than the preconscious motive, and expresses tendencies of much greater personal significance; this may be the case, however trivial the error in itself. In some of the preceding examples the preconscious motive disclosed appears trite, and it seems unlikely that such a trifling matter should need a complicated psychological mechanism to manifest itself. In the cases of this kind that I have had the opportunity of submitting to a detailed psycho-analysis, I have found that the unconscious associations often shed an unexpectedly instructive light on the full meaning of the occurrence. Unfortunately, however, the motives thus reached are usually of so intimate a nature that discretion forbids the publishing of them.

In still other cases no preconscious motive can be discerned, and the error appears to be quite meaningless until the truly unconscious sources are reached. In the following example<sup>2</sup> the preconscious motive was not discovered until the resistance to the unconscious sources of it were broken down. It is further peculiarly instructive in illustrating what important and fundamental traits of character may be revealed by the analysis of an absolutely trivial occurrence.

<sup>1</sup> For the explanation of this and allied terms, see Chapter III., p. 18.

<sup>2</sup> In the *Zentralbl. für Psychoanalyse*, Jahrg. I., S. 96, I have published a fuller account of this example.

A doctor on rearranging his furniture in a new house came across an old-fashioned, straight, wooden stethoscope, and, after pausing to decide where he should put it, was impelled to place it on the side of his writing-desk in such a position that it stood exactly between his chair and the one reserved for his patients. The act in itself was certainly odd, for in the first place the straight stethoscope served no purpose, as he invariably used a binaural one; and in the second place all his medical apparatus and instruments were always kept in drawers, with the sole exception of this one. However, he gave no thought at all to the matter until one day it was brought to his notice by a patient, who had never seen a wooden stethoscope, asking him what it was. On being told, she asked why he kept it just there; he answered in an off-hand way that that place was as good as any other. This started him thinking, however, and he wondered whether there had been any unconscious motive in his action. Being interested in the psycho-analytic method he asked me to investigate the matter.

The first memory that occurred to him was the fact that when a medical student he had been struck by the habit his hospital interne had of always carrying in his hand a wooden stethoscope on his ward visits, although he never used it. He greatly admired this interne, and was much attached to him. Later on, when he himself became an interne, he contracted the same habit, and would feel very uncomfortable if by mistake he left his room without having the instrument to swing in his hand. The aimlessness of the habit was shewn, not only by the fact that the only stethoscope he ever used was a binaural one, which he carried in his pocket, but also in that it was continued when he was a surgical interne and never needed any stethoscope at all.

From this it was evident that the idea of the instrument in question had in some way or other become invested with a greater psychical significance than normally belongs to it—in other words, that to the subject it stood for more than it does with other people. The idea must have got unconsciously associated with some other one, which it symbolised, and from which it derived its additional fulness of meaning. I will forestall the rest of the analysis by saying what this secondary idea was—namely, a phallic one; the way in which this curious association had been formed will presently be related. The discomfort he experienced in hospital on missing the instru-

ment, and the relief and reassurance the presence of it gave him, was related to what is known as a 'castration-complex'—namely, a childhood fear, often continued in a disguised form into adult life, lest a private part of his body should be taken away from him, just as playthings so often were; the fear was due to paternal threats that it would be cut off if he were not a good boy, particularly in a certain direction. This is a very common complex, and accounts for a great deal of general nervousness and lack of confidence in later years.

Then came a number of childhood memories relating to his family doctor. He had been strongly attached to this doctor as a child, and during the analysis long-buried memories were recovered of a double phantasy he had in his fourth year concerning the birth of a younger sister—namely, that she was the child (1) of himself and his mother, the father being relegated to the background, and (2) of the doctor and himself; in this he thus played both a masculine and feminine part.<sup>1</sup> At the time, when his curiosity was being aroused by the event, he could not help noticing the prominent share taken by the doctor in the proceedings, and the subordinate position occupied by the father; the significance of this for his later life will presently be pointed out.

The stethoscope association was formed through many connections. In the first place, the physical appearance of the instrument—a straight, rigid, hollow tube, having a small bulbous summit at one extremity, and a broad base at the other—and the fact of its being the essential part of the medical paraphernalia, the instrument with which the doctor performed his magical and interesting feats, were matters that attracted his boyish attention. He had had his chest repeatedly examined by the doctor at the age of six, and distinctly recollected the voluptuous sensation of feeling the latter's head near him pressing the wooden stethoscope into his chest, and of the rhythmic to-and-fro respiratory movement. He had been struck by the doctor's habit of carrying his stethoscope inside his hat; he found it interesting that the doctor should carry his chief instrument concealed about his person, always handy when he went to see patients, and that he only had to take off his hat (*i.e.*, a part of his clothing) and 'pull it out.' At the

<sup>1</sup> Psycho-analytic research, with the penetration of infantile amnesia, has shewn that this apparent precocity is a less abnormal occurrence than was previously supposed.



age of eight he was impressed by being told by an older boy that it was the doctor's custom to get into bed with his women patients. It is certain that the doctor, who was young and handsome, was extremely popular among the women of the neighbourhood, including the subject's own mother. The doctor and his 'instrument' were therefore the objects of great interest throughout his boyhood.

It is probable that, as in many other cases, unconscious identification with the family doctor had been a main motive in determining the subject's choice of profession. It was here doubly conditioned, (1) by the superiority of the doctor on certain interesting occasions to the father, of whom the subject was very jealous, and (2) by the doctor's knowledge of forbidden topics<sup>1</sup> and his opportunities for illicit indulgence. The subject admitted that he had on several occasions experienced erotic temptations in regard to his women patients; he had twice fallen in love with one, and finally had married one.

The next memory was of a dream, plainly of a homosexual-masochistic nature; in it a man, who proved to be a replacement-figure of the family doctor, attacked the subject with a 'sword.' The idea of a sword, as is so frequently the case in dreams, represented the same idea that was mentioned above to be associated with that of a wooden stethoscope. The thought of a sword reminded the subject of the passage in the 'Nibelung Saga,' where Sigurd sleeps with his naked sword (*Gram*) between him and Brunhilda, an incident that had always greatly struck his imagination.

The meaning of the symptomatic act now at last became clear. The subject had placed his wooden stethoscope between him and his patients, just as Sigurd had placed his sword (an equivalent symbol) between him and the maiden he was not to touch. The act was a compromise-formation; it served both to gratify in his imagination the repressed wish to enter into nearer relations with an attractive patient (interposition of phallus), and at the same time to remind him that this wish was not to become a reality (interposition of sword). It was, so to speak, a charm against yielding to temptation.

<sup>1</sup> The term 'medical questions' is a common periphrasis for 'sexual questions.'

## X. GENERAL OBSERVATIONS.

1. *Warrant for Interpretations.*

The first criticism of the theses here maintained that naturally presents itself is the question as to the reliability of the individual interpretations. It is not likely that anyone will reject them all as improbable, but, particularly with the more complex analyses, doubt must arise concerning the trustworthiness of the results. This is especially so in regard to the personal, subjective factor in the interpretations, although as a matter of fact the very constancy of the way in which similar conclusions are reached by different observers indicates that this factor is less potent than might be imagined. Experience shews that, when attention is carefully directed to the objective aspects of the analysis, the importance of the personal factor, which from the unavoidable nature of the circumstances can never be entirely eliminated, can be reduced to a degree where it is practically negligible. In most scientific work the personal factor has to be reckoned with, but appreciation of the way in which it acts, especially when this is based on psychological knowledge, as a rule enables it to be excluded to such an extent as not to interfere with conclusions being formulated that are valid enough to stand the objective test of verifiability. It is contended that this statement applies unrestrictedly to psycho-analytic interpretations. It is, of course, to be conceded that the probable accuracy of these interpretations varies considerably in different instances, as conclusions do elsewhere in science. Thus, in a chemical analysis, the conclusion as to whether a given substance is present or not varies in probability according to the quality and amount of evidence obtainable; in some cases the confirmatory tests are so unequivocal that the final decision is a practically certain one, in others it is very probable, in still others it is only a plausible possibility, and so on.

The view that the psycho-analytic interpretations of the class of occurrences under discussion are reliable is based on, among others, the following considerations:

1. The psychological correctness of the principles of the free association method. This is too complex a matter to be gone into here, and I will only refer the reader to Jung's well-known works<sup>1</sup> on the subject.

<sup>1</sup> Jung, 'Diagnostische Assoziationsstudien,' Bd. i., 1906; Bd. ii., 1910.

2. The constancy of the findings by different observers, and the harmony of the conclusions with those reached in the study of other fields—*e.g.*, dreams, psychoneuroses, mythology, etc. It is extremely unlikely that this is due to coincidence, and still more so that it is due to identical prejudices on the part of the different workers, for in the first place this would be postulating a very remarkable uniformity in their individual mental constellations, and in the second place psycho-analytic research brings with it an eradication of personal prejudice, and an appreciation of personal complexes, that is rarely attained elsewhere in the same degree.

3. The increased intelligibility of the processes in question. An occurrence that previously was obscure and meaningless now becomes throughout comprehensible, and an integral part of the rest of the person's mental operations. It is seen to be merely an irregular manifestation of a logical tendency that is an essential constituent of the personality, the unusual features having certain definite reasons for their occurrence. Moreover, the discovery of the underlying motive, and its connection with the manifestation being analysed, is a matter that commonly lends itself to external verification. When, in an analysis, one traces a given error in mental functioning, such as a *lapsus linguæ*, to a thought that the person was desirous of keeping back, it is usually easy to confirm the truth of the conclusion. Very significant in this connection is the unmistakable evidence of the resulting affect in the person, which accurately corresponds with that characteristic of the revealed mental process. Often this is so pronounced that it is quite impossible to doubt the truth of the interpretation made; this especially is a matter where personal experience is more convincing than any possible amount of discussion.

4. The fact that in many fields the principles in question are generally recognised to be valid. Freud's study is only a detailed working-out of laws that were already known to hold true over a limited area. When a man is hurt at finding his name unfortunately forgotten, or at unexpectedly being passed by unrecognised in the street; when a lady is offended by some one who professes regard for her forgetting to carry out her behests or to keep a rendezvous—they are displaying an affect that accords perfectly with the inferences of the psycho-analyst, and with no others. In this correct intuition of mankind lies

already the essential nucleus of the conclusions maintained by Freud.

Indeed, it is quite impossible to go through life without constantly making interpretations of just this kind, though usually they are simpler and more evident than those needing a special psycho-analysis. Observation of a very few jokes is sufficient to illustrate this, and we 'read between the lines' of the people we have to do with, doubting the scientific justification of our right to do so as little as we do in the interpretations of jokes.<sup>1</sup> This holds in the most manifold fields of mental activity. A few examples may be quoted of a kind that could be multiplied indefinitely: With Mr. C. R. Kennedy's play, 'The Servant in the House,' no one can witness it intelligently and doubt that the Hindoo servant, who is the principal character, is a presentation of Jesus Christ, or that his name 'Manson' is a disguised form of the title 'Son of Man.' Yet we should find it difficult to 'prove' this to a carping critic who is bent on avoiding the obvious inference, and still more to 'prove' our assumption that the disguise was the product of definite motives in the author's mind. In Mr. Bernard Shaw's play 'Press Cuttings,' one of the characters, the Prime Minister of England, is called 'Balsquith.' When one infers that he compounded the word from the names of two Prime Ministers, Balfour and Asquith, the critic may accuse us of reading into Mr. Shaw's mind views of our own that never existed there.<sup>2</sup> In Shelley's 'Edipus Tyrannus' what right have we to assume that, in his ridicule of the Ionian Minotaur,<sup>3</sup> the author was satirising the Englishman of his time? When Edward Lear<sup>4</sup> speaks of Excelsue, how is it everyone recognises that he is referring to Fortescue (Excel = XL = Forty = Forte)? Our answer in all these cases is the same—namely, that we feel justified in making the inferences in question because they make something intelligible that otherwise would have no

<sup>1</sup> In 'Der Witz und seine Beziehungen zum Unbewussten' Freud has made a detailed study of this subject. As with the occurrences studied in the present paper, he has shewn that the insight consciously obtained is often only a partial one, and that the true significance is often related to unconscious sources.

<sup>2</sup> The Royal Censor refused to let the play be acted until the name was replaced by one less open to this personal interpretation—namely, Johnson; the name of the Commander-in-Chief, Mitchener (from Milner and Kitchener) had to be altered to Bones.

<sup>3</sup> = John Bull.

<sup>4</sup> See Lady Strachey's 'Later Letters of Edward Lear.'

meaning. This answer is perfectly correct, for in the last analysis the justification of every scientific generalisation is that it enables us to comprehend something that is otherwise obscure—namely, the relations between apparently dissimilar phenomena.

To this it may be said that, in such cases as those just mentioned, a logical meaning is given to something that from previous experience we have every reason to expect has one, but that the point in dispute about the 'psychopathological' occurrences of everyday life is whether they have such a meaning or not. Here *a priori* argument can take us no further, and the question can only be referred for solution to actual investigation—a matter usually considered unnecessary, on the pure assumption that the occurrences have no logical meaning. Freud's scepticism made him challenge the necessity of this assumption, and prefer to leave the question open until it was investigated. On doing so, he found as a matter of experience two things—namely, that the realm of psychical determinism is more extensive than is generally supposed, and that awareness of a motive at a given moment is not a necessary accompaniment of the external manifestation of this.

Freud further came to the conclusion that there was a definite cause for the popular belief that so many blunders in our mental functioning are meaningless. He holds that this belief is due to the same cause as the blunders themselves—namely, to repression. Various repressed thoughts are in every one of us constantly coming to expression in the shape of 'meaningless' blunders, the significance of which necessarily escapes us. Being thus accustomed to the occurrences of such matters in ourselves we naturally attach no significance to them in others; we 'explain' these as we do our own, or accept the 'explanations' proffered just as we expect others to accept the 'explanations' of our own blunders.<sup>1</sup>

As to these explanations, little more need be added. Where the factors they have recourse to are operative at all, they act only as predisposing conditions, not as the true cause. Freud<sup>2</sup> gives the following apposite illustration of the actual state of

<sup>1</sup> If one wished to be epigrammatic, one might say: 'In the future, reason will be used to explain things; at present, it has to be used to explain them away.' This would be true of a good many matters besides the slips of everyday life.

<sup>2</sup> Freud, 'Zur Psychopathologie,' S. 22.

affairs: 'Suppose I have been so incautious as to go for a stroll in a lonely part of the town, where I am attacked and robbed of my watch and money. At the next police-station I give information, with the words: I have been in this and that street, where *loneliness* and *darkness* stole my watch and money. Although in these words I should have said nothing that was not correct, still, from the wording of my information, I run the danger of being thought not quite right in the head. The state of affairs can correctly be described only thus: That *favoured* by the loneliness of the spot, and *unrecognisable* through the protection of the darkness, a thief has robbed me of my valuables. Now, the state of affairs in the forgetting of a name need not be otherwise; favoured by fatigue, circulatory disturbances, and poisoning, some unknown psychical agent robs me of the proper names that belong to my memory—the same agent that on other occasions can bring about the same failure of memory during perfect health and capacity.' Similarly, such a mistake as a slip of the tongue is often attributed by psychologists (*e.g.*, Wundt) to a momentary inattentiveness. It is certainly a question of conscious attention, but Freud<sup>1</sup> has pointed out that the defect is more accurately described as a disturbance of attention than as a diminution, the true cause being the disturbing influence of a second train of thought. The same remarks apply to all the other explanations urged. Several examples were given above in which names and other words differing by only one letter were confounded or interchanged, and evidence was brought forward to shew that this external resemblance was merely a predisposing circumstance, and not the actual cause of the mistake. Many such circumstances certainly favour the occurrence of a blunder—that is, they permit a repressed thought to slip partly through. Alcoholic intoxication is notoriously one. Emotional excitement is another. Many blunders, forgettings, and other oversights, are attributed to the confusion of hurry. Thus, for instance, I have noticed that the using of the wrong key, in the examples quoted above, most often occurred when I was in a great hurry (the same was true of the not recognising the assistant superintendent in his office); but if haste were the true cause, it would be curious that it should bring about a blunder of a kind that defeats its own object; strictly speaking, it is the emotional confusion or excitement engendered by

<sup>1</sup> Freud, *op. cit.*, S. 68.

hurry that permits a second repressed impulse to manifest itself in what externally appears as a blunder.

As has been remarked above, there are certain occasions in everyday life when the normal person divines the motivation of unintentional errors, though these are rare in comparison with the occasions on which it escapes him. Freud<sup>1</sup> has pointed out that there are two other groups of processes in which an *unconscious*, and therefore distorted, knowledge of this motivation is manifested—namely, in paranoia and in superstitions. In both these the subject reads a meaning into external happenings that have no such psychological meaning, and, in a very interesting discussion of the subject, Freud produces reasons to believe that this erroneous functioning is due to a projection on to the outside of motives that exist in the subject's mind and are full of meaning there, but which he does not directly perceive.

A little may be said on a feature of some of the analyses quoted that may strike the reader as odd—namely, the remarkable play on words that is so often found. Whoever is surprised at this needs to be reminded of the almost boundless extent to which the same feature occurs in other fields of mental activity—in wit, dreams, insanity, and so on. Even in the serious affairs of everyday life it is far from unusual. Thus, to cite a few business announcements, we see the National Drug Company using as its trade motto 'Nadru,' the National Liquorice Company (N. L. Co.) that of 'Enelco'; we find the Levy Jewellery Company reversing its first name into the more pretentious one of 'Yvel,' and advertisements of 'Uneeda' cigars and 'Phiteezi' boots are familiar to every one. This tendency to play on words, and to produce a more useful or pleasant result (mirror-writing, ciphers, and rhyming slang,<sup>2</sup> also belong here), is evidently dictated in part by the same 'unpleasantness' motives—to avoid banal or otherwise unattractive words—that so much stress has been laid on above. It is one that has far-reaching roots in early childhood life. In preconscious and unconscious mental activities this play on words—clang associations—is much more extensive than in consciousness, and serves for the transference of a given affect from one mode of expression to a more suitable and convenient one.

<sup>1</sup> Freud, *op. cit.*, S. 131 *et seq.*

<sup>2</sup> The following are instances from the Cockney type of this: 'Aristotle' = bottle; 'Cain and Abel' = table; 'Harry Nichols' = pickles. Mediate forms are: 'Christmas' (card) = guard; 'Bull' (and cow) = row; 'Malcolm' (Scott) = hot; 'Stockton' (on Tees) = cheese; 'Rosie' (Loader) = soda, and so on.

*2. Bearing on Psycho-Analytic Method of Treatment.*

Three brief remarks may be made on this matter: In the first place, investigation of the errors and slips of everyday life is perhaps the best mode of approach to the study of psycho-analysis, and affords a convenient preliminary to the more difficult, though more important, subject of dreams. The greatest value is to be attached to self-analysis, a fact to which attention cannot too often be called. In the second place, analysis of the occurrences in question is of considerable service in the treatment of neurotic patients. Their behaviour in this respect needs to be closely observed, and frequently a quite trivial occurrence will, when investigated, provide clues to the elucidation of the main problem. Thirdly, consideration of the mechanism of these erroneous functionings makes it easy to understand the way in which psycho-analysis brings about its therapeutic effects. Both the 'errors' and the neurotic symptoms are the manifestations of dissociated conative trends which are less compatible with consciousness than the rest of the personality opposed to them, are consequently repressed, and can come to expression only in indirect ways and only under certain circumstances. An essential condition for this is non-awareness of the process. Psycho-analysis, by directing the dissociated trend into consciousness, abolishes this condition, and therefore brings the trend under the control of the conscious inhibiting forces. Conscious control is substituted for automatic expression, the significance of which was not realised. These considerations may be illustrated by the tritest of the examples given above—namely, my opening of a fresh tobacco-tin although I wished first to finish the old one. Here it is quite obvious that the rule just stated holds that an essential condition of the erroneous functioning is non-awareness of the significance of the process; I knew that I was reaching for tobacco, but didn't notice which tin it was. The moment I realised the situation, I of course checked the error, and controlled the wish that was taking advantage of my absent-mindedness to come to expression. On a larger scale the same is true of neurotic symptoms; realisation of their significance checks the morbid expression of the underlying impulse. *The cardinal proposition is that consciousness of an aberrant impulse means increased control of it.*



### 3. *Relation to Health and Disease.*

This matter should be fairly evident from the preceding consideration, so that the two corollaries that follow in this respect need only to be stated. The first is that from a psychological point of view perfect mental normality does not exist. In other words, every one shows numerous defects in mental functioning that are manifestations of dissociated, repressed, psychical material, and which are brought about by the same psychological mechanisms as those operative in the case of the psychoneuroses. A further matter not brought out in the preceding study is that this material is ultimately of the same nature as that from which neuroses are produced. The second corollary is that the border-line between mental health and disease is much less sharp even than is generally supposed. The distinction between the two is really a social one rather than a psychopathological one, just as the distinction between sanity and insanity is primarily a legal one. When the erroneous mental functioning happens to carry with it a social incapacity or disability, the condition is called a neurosis, and when it does not it is called absent-mindedness, eccentricity, personal mannerism, and so on. Further reflections on the significance of these conclusions will here be omitted, as they are not relevant to the main purpose of the paper.

### 4. *Determinism and Free-Will.*

One of the psychological arguments against the belief in a complete mental determinism is the intense feeling of conviction that we have a perfectly free choice in the performance of many acts. This feeling of conviction must be justified by something, but at the same time it is entirely compatible with a complete determinism. It is curious that it is not often prominent with important and weighty decisions. On these occasions one has much more the feeling of being irresistibly impelled in a given direction (compare Luther's 'Hier stehe ich, ich kann nicht anders'). On the contrary, it is with trivial and indifferent resolutions that one is most sure that one could just as well have acted otherwise, that one has acted from non-motived free-will. From the psycho-analytical point of view, the right of this feeling of conviction is not contested. It only means that the person is not aware of any conscious motive. When, however, conscious motivation is distinguished

from unconscious motivation, this feeling of conviction teaches us that the former does not extend over all our motor resolutions. What is left free from the one side receives its motive from the other—from the unconscious—and so the psychical determinism is flawlessly carried through. A knowledge of unconscious motivation is indispensable, even for philosophical discussion of determinism.

That the relation between unconscious and conscious mental processes furnishes the key to the problem of psychological determinism has also been clearly pointed out by Kohnstamm,<sup>1</sup> approaching the subject in quite a different way from Freud. He writes: 'Die biologische Betrachtungsweise sieht in den Bewusstseinsdingen nur Bergspitze, die über einem Nebelmeer sichtbar werden, während das Bergganze—die Gesamtheit der Lebensphänomene—dem unmittelbaren Bewusstsein verborgen bleibt. Wenn man sich auf die Betrachtung von oben her beschränkt, ergibt sich kein natürlicher Zusammenhang, keine Gesetzmässigkeit. Sieht man aber von dem Nebel ab, der die Gründe verhüllt, so erkennt man, wie die Berge aus der Ebene aufsteigen, sich von einem gemeinsamen Grunde abhebend. Man gelangt zu der naturwissenschaftlichen Einsicht von der Einheit dessen, was unter zufälligen Bedingungen teils sichtbar, teils unsichtbar war. Ähnlich sucht die biologische Betrachtungsweise die Bewusstseinsphänomene umzusetzen in raumzeitliche Geschehnisse und Gesetzmässigkeiten, wie sie auch sonst den Gegenstand naturwissenschaftlicher Biologie bilden. So zeigte die gegenwärtige Untersuchung die Zielstrebigkeit unter dem Bilde eines Berges, welcher uns den allgemeinen Reizverwertungstypus des Lebens darstellt und in eine Spitze ausläuft, welche die Willenshandlung bedeutet.' [The biological way of thinking sees in the facts of consciousness only mountain-peaks, which soar into sight over a sea of mist, while the mountain as a whole—the totality of vital phenomena—remains hidden from the immediate consciousness. If one confines oneself to the view from above, there appears to be no natural connection, no regularity. If, however, one disregards the mist that conceals the base, one recognises how the mountains rise from the plain, and have a common basis. One attains scientific insight of the unity of what, under chance conditions, was partly visible, partly invisible. Similarly, the biological way

<sup>1</sup> Kohnstamm, *Journ. f. Psychol. u. Neurol.*, Bd. xviii., S. 101.

of thinking seeks to transpose the phenomena of consciousness into regular occurrences of time and space, just as these elsewhere constitute the subject of scientific biology. The present investigation of purposefulness discloses it thus under the metaphor of a mountain, which represents the general reaction of life to different stimuli, and which terminates as a peak that signifies the action of the will.']

##### 5. *Social Significance.*

It would be interesting to speculate as to the result of a general knowledge of the unconscious motives that underlie the failures of mental functioning in everyday life; but it is perhaps more profitable to review some of the present results of ignorance of them.

One of these is that both intellectual and moral dishonesty is facilitated to an extraordinary extent. There is no doubt that dishonesty of which the subject is not conscious is much commoner than deliberate dishonesty, a fact of considerable importance in, for instance, juristic matters. The hysteric who cannot move her leg because unconsciously she wishes it to be paralysed, the tourist who overrules a prohibiting notice because he finds such things annoying, and the impetuous man who forgets to pay a bill because he doesn't really want to, are all instances of this. At the same time, the line between the two types of dishonesty is nowhere a sharp one, and in many cases one can only conclude that the subject could with a very little effort recognise the suppressed motive, which is more than half-conscious. In psycho-analytic treatment this is constantly to be observed. The following slight example of it may be quoted: A young American told me of a certain experience she had had in her childhood in company with a boy. I had every reason to believe that this was far from being an isolated one, and asked her whether it had occurred with any one else. She said, 'Not any time that I can remember.' Noticing the wording of her answer and a certain expression on her face, I asked, 'What about the times that you can't remember?' She exclaimed, 'Oh, shucks!' and in such a disconcerted tone that I was sure my surmise had been well founded. She then made the remark, 'Well, I really had forgotten the other times till this minute,' the truth of which was probably only partial. The incident made me think of Nietzsche's epigram: 'Man lügt wohl mit dem Munde, aber

mit dem Maule, das man dabei macht, sagt man die Wahrheit.' [One may indeed lie with the mouth, but with the accompanying grimace one nevertheless tells the truth.] Half-amnesias of this kind are extremely common in daily life.

In spite of the constant endeavour to keep back disagreeable or unacceptable thoughts, these very thoughts betray themselves in blunders of the type under discussion. By the world this self-betrayal is often passed by unnoticed, but it does not escape any one who has made a study of unconscious functioning. Freud<sup>1</sup> in no way exaggerates when he says: 'Wer Augen hat, zu sehen, und Ohren, zu hören, überzeugt sich, dass die Sterblichen kein Geheimnis verbergen können. Wessen Lippen schweigen, der schwätzt mit den Fingerspitzen; aus allen Poren dringt ihm der Verrat.' [He who has eyes to see, and ears to hear, becomes convinced that mortals can hide no secret. When lips are silent, the fingertips tattle; betrayal oozes out of every pore.] Moreover, even with a direct lie, careful observation of the undue emphasis here and the distortion there will usually disclose what the person is trying to conceal, for the lie is a creation of the same mind that at the moment is cognisant of the truth. It is very rare, especially on emotional occasions, for self-control to be so complete as to inhibit all unconscious manifestations, which to an attentive observer will indicate the truth. Strictly speaking, one cannot lie to another, only to oneself, and skilled introspection makes even this increasingly difficult.

An important consequence of this is that every one is apt to know more about the inner motives of those near to him than they themselves know, inasmuch as every one is continually performing, at all events, some simple kind of psychical analysis on those around him. This is a fertile source of misunderstandings and friction,<sup>2</sup> especially in family and married life, where contact is much nearer. One person intuitively recognises an intention or tendency in the other that the latter refuses to admit even to himself. When the unavoidable inferences are presented to him, he is indignant, rebuts them as being groundless, and complains that he is misunderstood. Strictly speaking, such misunderstanding is really a too fine understanding. The more nervous two people are, the more

<sup>1</sup> Freud, 'Sammlung kleiner Schriften,' Zweite Folge, S. 69.

<sup>2</sup> Freud, 'Zur Psychopathologie,' S. 114.

often does it give rise to schisms, the reasons for which are as categorically denied by the one as they are obvious to the other. This is the punishment for the inner improbity: that, under the pretext of forgetting, absent-mindedness, and so on, people allow tendencies to come to expression which they would do better to admit to themselves and others, unless they can control them.

Most important, however, is the extension of these principles to the sphere of human judgement, for it is probable that repressed complexes play as prominent a part in distortion here as they do in the minor errors of memory mentioned above. On a large scale this is shewn in two ways—in the minimum of evidence often necessary to secure the acceptance of an idea that is in harmony with existing mental constellations, or to reject one that is incompatible with these. In both cases it is often affective influences rather than intellectual operations that decide the question. The same evidence is construed quite differently when viewed in the light of one affective constellation from the way it is when viewed in the light of another. Further, when the general attitude towards a question changes in the course of time, this is often due at least as much to modification of the prevailing affective influences as to the accumulation of external evidence; for instance, the average man of to-day does not hesitate to reject the same evidence of witchcraft that was so convincing to the man of three centuries ago, though he usually knows no more about the true explanation of it than the latter did.

Ignorance of the importance of affective factors in this respect, combined with the ineradicable popular belief in the rationality of the individual mind, has the interesting result that strong differences of opinion are attributed by each side to a defect in reasoning capacity on the part of the other. In an exposition of this matter, Trotter<sup>1</sup> writes: 'The religious man accuses the atheist of being shallow and irrational, and is met with a similar reply; to the Conservative, the amazing thing about the Liberal is his incapacity to see reason and accept the only possible solution of public problems. Examination reveals the fact that the differences are not due to the commission of the mere mechanical fallacies of logic, since these are easily avoided, even by the politician, and since

<sup>1</sup> Wilfred Trotter, 'Herd Instinct and its Bearing on the Psychology of Civilised Man,' *Sociological Review*, July, 1908, p. 19 of reprint.

there is no reason to suppose that one party in such controversies is less logical than the other. The difference is due rather to the fundamental assumptions of the antagonists being hostile, and these assumptions are derived from herd suggestion.'

There is a certain amount of truth in this imputation of stupidity to a person on the opposite side, for in his blind refusal to appreciate or even to perceive the evidence adduced by his opponent he may give an unavoidable appearance of marked stupidity. A further reason for this is that some one under the sway of strongly affective influences thinks not only that any one differing from him must be deficient in reasoning power, but also that the views of the latter are themselves stupid. In attempting to controvert these, therefore, he unconsciously distorts them until they really are foolish, and he then finds it easy to demolish them. Any man of the period who read only the account of Darwin's views that was promulgated by his theological and scientific opponents must have wondered why it was worth while to attack such obvious nonsense, while our wonder, on the other hand, is that reputable and otherwise intelligent men could have managed so to pervert and misunderstand statements that to us are lucidity itself. Similarly at the present time, if some of the remarkable accounts of Freud's views that are given by his opponents represented anything like what he really holds, the fact would need much explanation that so many scientific men can accept them and yet remain sane.

Yet this astonishing stupidity in apprehending the arguments of opponents, and in defending preconceived views, is only apparent. The men who so grossly misinterpreted Darwin were often men of high intellectual power, and the same is true of many of Freud's opponents; similarly no one can read closely the 'Malleus Maleficarum' without admiration for the amazing intellectual ingenuity with which the most fantastic propositions are there defended. The process is akin to one that psychiatrists call 'emotional stupidity,' a symptom seen in patients who have no real defect of reasoning power, but who through various affective influences are in a condition that at first sight gives rise to a strong suspicion of some organic defect of the brain.

A further psychological problem of interest in this connection is how to account for the intensity of annoyance,

anger, and even hate, that may be engendered by controversial opposition of the particular type discussed above. How irritating it can be to try vainly to get some one to see a point that is perfectly simple and obvious to oneself most people know from ample experience. There would even seem to be a correlation between the amount of heat in this way engendered and the slightness of the difference dividing two people, just as the most bitter wars are between races of similar stock (truer still of civil wars) or between religious sections whose doctrinal differences are apparently of only academic importance. The history of the Balkans shews, for instance, that the races professing the Orthodox creed preferred to be ruled by the infidel Turk rather than by Roman Catholics (*e.g.*, Venetians), and heretics have always been persecuted with a venom that finds no counterpart in the attitude towards heathen countries. It is as though we are willing to understand that people widely different from ourselves cannot grasp arguments that seem convincing enough to us, but what we find hard to tolerate is that those akin to us, and who 'ought to know better,' should behave in this way. The *feeling* it gives us, in the case of either individuals or nations, is that since the matter in dispute is so very obvious there must be an element of sheer obstinacy on the other side that makes them refuse to see the point. The reaction this calls forth is, on the one hand, the belief that they are intellectually inferior and stupid, as explained above, and, on the other hand, the emotions of irritation and anger. I should interpret the latter reaction as an unconscious intuition that the opposition on the other side is really of emotional origin, denoting hostility to our own emotional attitude, as, indeed, it so usually is. In other words, our unconscious correctly interprets the meaning of the situation and appropriately responds with anger, while our conscious mind erroneously rationalises it as one due to the other person's stupidity. The next thing that happens is that we feel increasingly impotent, for, as is well known, the weapon of argument is powerless in the face of 'emotional stupidity'; as Goethe said, 'Against stupidity the Gods themselves fight in vain.' The impotence is due to the fact that the weapon is not being directed against the true source of opposition—namely, the unconscious emotional complexes of the other person. (The failure is exactly the same as the physician experiences who tries to dispel neurotic

symptoms by means of rational argument; he is not really attacking the cause, which lies in the unconscious.) The feeling of impotence in the face of irrational opposition, of being thwarted for no good reason, still further increases our anger, sometimes to an extreme degree; this reaction is probably of infantile origin, the resentment and 'tantrums' at first discovering that the world dares to thwart some of our wishes, a world which originally had gratified them all to the full.

On observing the general attitude towards people whose 'emotional stupidity' has in the course of time become apparent, two things are noticeable: In the first place, as was remarked above, the fault is attributed much more to intellectual inferiority than to the more important affective causes. Hence the present-day supercilious pity for the scholastics of the 'dark ages,' an attitude considerably modified by an objective comparison of the reasoning powers characteristic of the two civilisations. In the second place, far greater leniency is shewn towards a stupidity that expresses itself in the form of blind adherence to accepted errors than that which expresses itself in the form of blind rejection of a novel truth; in other words, incredulousness is always more harshly judged than credulousness, though they are both merely different aspects of the same fundamental failing—namely, lack of true scepticism. Yet the one is hardly more characteristic of human weakness than the other—as Nietzsche put it: 'Mankind has a bad ear for new music'—and it would be hard to convince a student of human progress that the first manifestation has a greater retarding influence on this than the second. In any case, these considerations go to shew the fallacy of the popular belief that the will is the servant of reason, the truth being that reason has always been, and probably always must be, to a very large extent the handmaid of the will.

#### XI. SUMMARY.

Only a part of the subject-matter dealt with by Freud has been covered in the present paper. Those interested in it are referred to his book for richer and more numerous examples, and for the lucid discussion there given of the theoretical aspects of the subject. It is perhaps desirable, however, to summarise here the main conclusions on the topics discussed above.



The occurrences that form the subject-matter of this study, the general characteristics of which were defined in the introductory section,<sup>1</sup> may be divided into motor and sensory.<sup>2</sup> The defects of the former class that enter into consideration are two: (1) The erroneous carrying out of an intended purpose (slips of the tongue and pen, erroneously-carried-out actions); and (2) the carrying out of an unintended purpose (symptomatic acts). The defects of the latter class are also two: (1) Simple failure of perception (forgetting, not seeing); and (2) erroneous perception (false recollection, false visual perception). In each class the distinction between the two kinds of defects is not sharp; thus, in the latter one, for instance, a failure to remember is always accompanied by an over-prominent remembrance of some associated memory, a false recollection. Further, the distinction between the two classes themselves is not a sharp one, both motor and sensory processes playing a part in many instances; thus, in the mislaying of objects, the object is first misplaced, and then the memory of the act is forgotten.

Common to all forms is the fact that the subject, and most observers, either give an obviously inadequate explanation of the particular occurrence—such as that it was due to 'inattention,' 'absent-mindedness,' 'chance,' and so on—or frankly maintain that it has no explanation at all. On the contrary, psycho-analysis shews that there is not only a definite psychical cause for the occurrence, but that this has always a logical meaning, and may strictly be called a motive. This motive is some secondary tendency or train of thought, of which the subject is not aware at the time. Usually it is preconscious, or, in popular language, unconscious; in many cases it is unconscious in the strict sense, and is then correspondingly more difficult to reveal. In most cases there are both a preconscious and unconscious motive, which are associated with each other. The motive is repressed by the subject, the repression being a defence-mechanism that subserves the function of keeping from consciousness undesirable or painful thoughts. The motive may be one of two kinds—either it is a counter-impulse (*Gegen-*

<sup>1</sup> In German the erroneousness of the process is conveniently indicated by the preface 'ver'—thus, Verdrucken, vergessen, vergreifen, verhören, verlegen, verlesen, verschreiben, versehen, versprechen, etc.

<sup>2</sup> This term is here used in its neuro-biological sense, and hence includes both perceptive and apperceptive processes.

*wille*) directed immediately against the mental operation that is intended, or it is an impulse directed against some mental tendency that stands in associative connection with this operation; that is to say, the association between the two mental processes may be either intrinsic or extrinsic. As a result of the repression, any direct manifestation of the tendency is inhibited, and it can come to expression only as a parasitic process engrafted on another conscious one. The disturbance thus caused constitutes a temporary failure or error of normal mental functioning.

This error can psychologically be compared with a psychoneurotic symptom; the mechanisms by which the two are brought about are almost the same, and the psychical material that is the source of them is closely similar in the two cases. It is maintained that appreciation of the significance of these everyday errors is important for both the practice and theory of psychology; this is especially so in the contribution it furnishes to the problem of psychical determinism, and in the understanding it gives to the deeper, non-conscious motives of conduct. It further throws a valuable light on certain social problems, notably the question of mutual misunderstandings in everyday life, and on the importance of affective influences in forming decisions and judgements.

CHAPTER V  
THE REPRESSION THEORY IN ITS RELATION TO  
MEMORY<sup>1</sup>

THE following remarks represent in a sense a continuation of the discussion that took place at the Durham meeting of the Aristotelian and the British Psychological Societies last July, when papers were read on this subject by Pear, Wolf, Mitchell, and Loveday,<sup>2</sup> my object here being to elucidate further certain points that were incompletely dealt with on that occasion, and to raise certain other questions that are indirectly cognate to the same theme.

The theory itself may be formulated in several different ways, the most comprehensive of which would run somewhat as follows: There exist in the mind certain inhibiting forces, which tend to exclude from consciousness all mental processes the presence of which would evoke there, either directly or through association, a feeling of 'unpleasantness' (*Unlust*). It is, of course, evident that the efficacy of such forces is at best a relative one, for otherwise consciousness would never experience 'unpleasantness'; but the thesis is maintained that, whenever this experience occurs, it is only because the action of the forces in question has first been neutralised by other tendencies and motives in the mind, whether volitional or not. It will be noticed that in the definition given the word 'exclude' has been used as a common term for what some writers consider to be two independent processes—namely, on the one hand the expulsion from consciousness of an 'unpleasant' mental process, and on the other the tendency to prevent the return of this to consciousness on any subsequent occasion. As it seems possible to adopt one of these conceptions and not the other,

<sup>1</sup> Read before the British Psychological Society, January 30, 1915. Published in the *British Journal of Psychology*, vol. viii.

<sup>2</sup> Published in the *British Journal of Psychology*, vol. vii., No. 2.

they will be separately discussed, but I may remark that those who accept the repression theory as here formulated are not much concerned to make a sharp distinction between the two, considering it to be relatively unimportant. For them the inhibiting force of repression is a tendency in constant operation, independently of whether the 'unpleasant' mental process is of recent date or not, of whether it is at the time conscious or not, and even of whether it has ever been conscious or not, all matters which do not concern the main point at issue. The question of the relation of the inhibiting forces to consciousness and the unconscious is more obscure. Freud himself seems to place what he terms the 'censorship'—an expression covering the sum total of the repressing forces in question—at the place of transition between the unconscious and the preconscious, with a less important one at the place of transition between the preconscious and consciousness. While it may be agreed that the action of repression is mainly exhibited at these points of junction, the evidence, in my opinion, induces one rather to picture the inhibiting tendencies as being distributed, in a streaming fashion, throughout the whole mind, conscious as well as unconscious, increasing in strength, however, as one proceeds from the level of consciousness to the lowest layers of the unconscious.

The bearing that the repression theory has on the problems of memory is a manifold one, and we may divide up the subject under the headings of registration, conservation, recollection, and recognition respectively.

#### I.—REGISTRATION.

Practically all observers seem to agree that in attention there is a selective operation according to the pleasure-pain principle, whereby we attend to that which is pleasurable rather than to that which is not. (It is hardly necessary to say that no universality is claimed for this principle to the exclusion of others.) In so far, therefore, as variations in attention affect the registration of impressions, the process of exclusion, which is the essence of repression, must play a part. Its action, however, is by no means always in the direction that it might at first sight be imagined to be. It might be thought that, if repression determines the ignoring of some unpleasant sight or sound, these, being less attended to, would undergo a

fainter registration and would fade more readily than other impressions. One should exercise caution, however, before coming to this conclusion, apparent as it may seem. To say that a given idea is unpleasant is not at all the same as saying it is without interest or significance to the subject—in fact, the reverse is more often the case. Any psycho-analytical experience will provide numerous instances where an idea that has been presented to consciousness has been immediately ignored and its meaning not apprehended, but has nevertheless made a deep impression on the subject's mind, and has been registered with unusual distinctness. It is quite common, for example, for girls in the period of adolescence genuinely to ignore in an astounding manner all allusions to sex matters, which they meet with at every turn, in newspapers, in novels, and in daily life, and it is remarkable to observe later in a psycho-analysis the precision with which these impressions have been registered and their significance appreciated without the subject being at all consciously aware of it. It is also a commonplace observation in insanity that in a state of excitement or delirium certain expressions may be reproduced by a lady who certainly must have completely ignored them at the time of hearing them.<sup>1</sup>

The only means of estimating the intensity of registration is by studying the conditions of subsequent recall, conditions which are themselves influenced by various other factors that are not easy to eliminate or allow for; but so far as the evidence goes it does not, in my opinion, conclusively favour the view that incoming impressions which are ignored through the action of repression are more faintly registered than others which have not been submitted to this action.

The explanation of this is that the hedonic tone of a given idea is by no means necessarily the same in the conscious and unconscious layers of the mind; indeed, it is often precisely the opposite in the two cases, and it is probable that all the instances where apparently unpleasant ideas have been registered with unexpected distinctness are of this nature. That being so, it may well be that a positive correlation exists between the intensity of registration and the degree of pleasantness attaching to the idea concerned, provided only that the whole mind be taken into consideration, and not merely consciousness alone.

<sup>1</sup> A classical example is the case of Ophelia.

Much might be said concerning the selective action of repression in regard to attention (and also to perception) that is of importance to the general theory of attention; but as the subject is not strictly germane to the problems of memory it must be passed over here with merely this short allusion.

## II.—CONSERVATION.

The repression theory, and the observations on which it is founded, has one very important contribution to make regarding the conservation or retention of memory-impressions. It is to the effect that the capacity of the mind for such retention is vastly greater than is generally supposed. It is difficult to lay too much emphasis on this point, one to which attention has repeatedly been called by clinical psychologists; for even after a considerable experience of such data, one is constantly being surprised at the truly extraordinary manner in which minute details may be revived after having apparently been completely forgotten for many years, for half a century or longer. This applies both to significant repressed memories and to those of a more trivial nature. With regard to the latter class I must say that I become increasingly sceptical about its supposed involvement in what Mr. Pear<sup>1</sup> calls a process of physiological decay, for delicate methods of investigation constantly succeed in demonstrating the continued presence in the mind of trivial elements that one might have imagined had disappeared long ago. At the same time, the distinction Mr. Pear draws between the two classes of forgotten material, the significant and the insignificant, appears to me to be of great importance, and the explanation of the process of forgetting in the two cases raises some interesting questions, to which I shall return later in this paper.

## III.—RECOLLECTION.

Professor Brough has somewhere remarked that psychologists may be divided into two schools as regards the subject of memory, comprising respectively those who hold that the facts in most need of explanation are those of remembering, and those who hold that they are the facts of forgetting. Psychoanalysts certainly belong to the latter school, which I imagine

<sup>1</sup> *Loc. cit.*, p. 139.

to be the less numerous one. To us, and contrary to the usual opinion, it would seem more natural if everything were remembered, and it is the circumstance of a given mental impression not being capable of recall, while still in the mind, that demands an explanation. A consideration to which I would attach some importance is that the phenomenon of recall seems to be too often regarded as being induced by conscious volition, the fact being overlooked that in the majority of instances it proceeds quite spontaneously and independently of volition. If, now, the matter be thought of in other than volitional terms, the question is, not what is the mechanism whereby we recall a given idea when we want to, but rather how is it that such a relatively small number of ideas actually flow into consciousness, or have the capacity of ever entering consciousness? To this question Freud's repression theory attempts to provide an answer.

The main fact that this theory sets out to explain is that it is more difficult to recall an unpleasant memory than a pleasant one, other things being equal. The fact itself is, I think, beyond dispute, and has not been questioned by any one who has seriously investigated the phenomena, either experimentally or clinically. According to the repression theory, the reason why it is more difficult to recall an unpleasant memory is because it is kept back from entering consciousness by the action of certain inhibiting, 'repressing' forces, the function of which is to guard consciousness, so far as possible, from the pain of disagreeable affects. Starting from this simple conception, the validity of which will presently be discussed, the theory has undergone two extensions, which will presently be discussed under the headings of B and C respectively. The first of these was made by Freud in his earliest monograph on normal psychology (1898),<sup>1</sup> and was to the effect that repression accounted for the difficulty in recall, not only of obviously unpleasant memories, but also of a large number that, so far as could be seen by direct introspection, were not of this nature. The class referred to comprises the unexpected failures in memory, the failures that cannot be accounted for by the usual factors; examples are the temporary forgetting of familiar names, of well-known pieces of knowledge, and the like.<sup>2</sup> The

<sup>1</sup> Reprinted in his *Zur Psychopathologie des Alltagslebens*, 4te Aufl., 1913.

<sup>2</sup> Numerous examples are given in Chapter IV. For pathological counterparts see Chapter XXIII.

second extension of the theory, for which I am willing to bear the responsibility—although I imagine there may be other psycho-analysts who would also be prepared to go as far—concerns the application of it to all forgetting, maintains, in short, that all forgetting is due, in part at least, to repression. I shall presently adduce some considerations which may possibly make this last generalisation seem less preposterous than it must at first sight appear to be.

The questions raised by the theory correspond with the three stages of it just mentioned, and may be formulated as follows: Is there such a process of repression which accounts for the difficulty in recall of unpleasant memories? If so, can it also apply in the case of memories that are not in themselves of an unpleasant nature, and, further, can all forgetting be attributed to it? These questions will now be discussed in this order.

#### *A.—Evidence of Repression.*

The principal fact to be explained is the greater difficulty of reproducing a memory when this is invested with unpleasant feeling. That this is a true statement of the case may, I think, be assumed here; if necessary, an overwhelming amount of evidence, both experimental and clinical, could be adduced in confirmation of it. Some five different explanations have been proffered, and, although there is little to be said about some of them, they will all be mentioned for the sake of completeness.

1. We have first the usual explanation given both by psychologists and by the laity—namely, that the diminished capacity for reproduction of certain mental processes is due to some defect inherent in these processes. This explanation is put in various ways, the factor being described sometimes as a 'lack of interest,' sometimes as a 'reduction in the investment of psychical energy.' Jung seems to approximate to this position when he speaks of buried infantile complexes having lost their significance owing to the development of the individual on to a higher plane, so that he is no longer interested in such childish matters. The view that the difficulty in reproduction is to be accounted for by a lack of interest in the mental processes concerned can only be held by those unfamiliar with the findings of clinical psychology (hypnosis, psycho-analysis, etc.), for in these it is a matter of daily experience to meet with great difficulty in resuscitating memories,



invested with vivid feeling, that are of immense interest and significance to the personality. Jung himself gets round this argument, at least so far as infantile complexes are concerned, by asserting that, although these have become deprived of their importance in the course of development, they are later re-invested by feeling and significance from a different source. In my opinion this is an hypothesis in favour of which there is no good evidence, but in any case it concerns only the origin of certain affects, and does not touch the general principle that memories may be very difficult to resuscitate even when they are charged with intense significance to the personality. Lack of interest, therefore, cannot always be the cause of the difficulty in reproduction.

2. An ingenious explanation has been put forward by Dr. Wolf,<sup>1</sup> which runs as follows: Accepting the conception of repression only in the limited sense of a volitional expulsion of unpleasant thoughts from consciousness, he suggests that the difficulty experienced in reviving repressed, unpleasant memories may be due to subsequent repression of any incoming ideas that by association would tend to recall them. This description, however, is not at all in accord with what actually happens when a forgotten unpleasant memory cannot be brought into consciousness. An associated idea that one would expect to evoke a given memory may fail to do so even while it is being held in the very focus of consciousness, there being no question of its being expelled from consciousness altogether. Then, again, the situation is very much the same when there is no conscious associated idea present to be repressed, such as in the search for unknown buried memories in the procedure known as 'free association.' Further, it is hardly possible on this hypothesis to account for the difficulty in the evoking of buried memories that never have been conscious. Every one will agree with Dr. Wolf in the stress he lays on the important part played by the associated, derivative ideas in the matter of evoking unpleasant forgotten thoughts, but it is not giving a true picture of this part to describe it as the entering of such ideas into consciousness and their subsequent expulsion from it *seriatim*, for the hindrance is further back—in the difficulty they experience in approaching consciousness.

3. Dr. Mitchell<sup>2</sup> suggests that repression may be a 'passive resistance, a mere hindrance or obstruction, felt as resistance

<sup>1</sup> *British Journal of Psychology*, loc. cit., p. 150.

<sup>2</sup> *Loc. cit.*, p. 157.

but necessitating no activity on the part of whatever causes the obstruction.' This suggestion was thrown out as a possible alternative to the psycho-analytical view, and certainly describes what often happens in the physical world. I do not know of any analogy to it in the mental world, however, and as no data or arguments are given in support of it—the whole suggestion being meant to be most tentative—I am not in a position to criticise it, though I might add that I cannot think of any consideration or evidence pointing to it.

4. Another alternative put forward by Dr. Mitchell<sup>1</sup> is that unpleasant memories are not pushed or repressed out of consciousness, but, on the contrary, are drawn out. He writes: 'It is just to some psychical force analogous to the pull of gravity in the physical world that the main work of repression is ascribed by psycho-analysts at the present time. . . . It is the attraction of the unconscious rather than the repulsion of the conscious that leads to the forgetting and causes resistance.' Dr. Mitchell is in error in his first sentence here, for there is certainly no psycho-analyst who ascribes *any* forgetting directly to the attraction of the unconscious, and clearly to ascribe 'the main work of repression' to such a process would be a contradiction in terms. In a rather obscure passage, Jung also has allowed himself to be guilty of this contradiction, saying, 'In these cases it seems as if the mechanism of repression were much more in the nature of a passive disappearance, or even as if the impressions were dragged beneath the surface by some force operating from below.' If we ask what this force operating from below is, we are told it is the attraction of association, but those who have freed themselves from the associationist doctrine are unable to perceive here any dynamic force capable of being opposed to the efforts to recall a buried memory. Even the difficulty in bringing to consciousness the primary, 'attracting' group of ideas Jung conceives, not as denoting a conflict of forces, but as being due to a lack of sufficient development on the part of these ideas, or else to a loss of interest in them, an explanation discussed above. Passing by these objections, however, it is plain that this 'tug downward' explanation could at best be only a partial one, since it only relates to ideas that might be drawn downward by the attraction of previous ones, and not to the latter themselves. The

<sup>1</sup> *Loc. cit.*

existence of the 'tug' has first to be demonstrated before we can discuss its possible field of operation, and this preliminary task has not yet been attempted.

The fact on which this Jung-Mitchell view is based can be explained in quite another way. The fact in question is that many ideas cannot be brought into consciousness, although they have no unpleasant affective tone, and both Jung and the psycho-analytical school agree that this is in some way due to such ideas having become associated to other pre-existing ones; that is what he means by impressions being dragged beneath the surface by some force operating from below. The psycho-analytical school, on the contrary, maintain that what happens here is that when the new idea A gets associated to the older idea B it becomes charged with the affective tone of the latter, is drawn into the sphere of action of the same play of forces as B itself, so that if B is in a state of repression—*i.e.*, is being kept from consciousness by some inhibiting force—then the same will become true of A also. But it seems to me to be a loose use of language to say then that the idea A has been tugged downwards by forces connected with the idea B, although it may be true that the idea B is, in the way just described, responsible for the non-emergence of A.

5. The psycho-analytical explanation is precisely the opposite of the last one, being to the effect that the force maintaining forgetting acts not from the unconscious, but from the direction of consciousness. The evidence in favour of it is derived from manifold sources, of both an introspectual and observational nature.

In the first place, both historically and in point of importance, the behaviour of a subject undergoing psycho-analysis admits of no other explanation than the present one. In this procedure he is asked to adopt the method of 'free association,' the aim being to create a pathway into consciousness for the emotion attached to buried complexes, which in the case of a neurotic patient lie at the basis of his symptoms. He has to relate all the thoughts that come into his mind, irrespective of what his opinion may be of them. If this is done, the directing of the inflowing thoughts, freed from the guidance of either conscious reflection or external stimulation, is taken over by the emotional complexes of personal significance. These are approached only gradually, first by way of more or less distant

allusions to the underlying theme. Now, when this happens—*i.e.*, when the painful mental processes are being approached—the subject's behaviour undergoes an interesting change. He breaks his simple instructions and omits to mention all the incoming thoughts—making a selection of them on various grounds—he consciously guides his thoughts into some other more agreeable direction, *i.e.*, changes the subject, he resents having his attention called to what he is doing or being reminded of the rule he has to follow, and he may even attempt to enter into an argument or dispute with the analyst. Simultaneously his external conduct undergoes a corresponding change. He invents all manner of plausible excuses for being late at the next appointment, or misses it altogether. When he comes he is either prepared with a flood of material that precludes any return to the subject previously touched on, or he is barren in the production of thoughts, which remain quite superficial. In short, there can be no doubt whatever that a spirit of opposition has been aroused, which actively strives against the evocation of the unpleasant buried emotion.<sup>1</sup> This opposition is undeniably a dynamic force, and to it is given the name of 'resistance,' which is merely the obverse of repression. It means that something in the subject is fighting against the reproduction of whatever unpleasant emotional complexes may lie in his unconscious, and the simple conclusion drawn from these phenomena is that inhibiting, repressing forces are striving to prevent the complexes from entering consciousness, a conclusion which is the substance of the repression theory. The same sense of resistance just referred to can be detected, though not quite so readily, by any one who is carrying out a psycho-analytic procedure on himself.

This conclusion is confirmed by our definite knowledge that inhibiting forces of the kind in question do exist in the mind, though their existence is mainly admitted in another connection. Namely, we are all aware in ourselves of an instinctive tendency to 'turn our mind away' from certain thoughts of a personal nature, to avoid and ignore certain classes of impressions from without and certain thoughts that rise into consciousness from within.<sup>2</sup> It is also easy to perceive evidence of the same

<sup>1</sup> And the manifestations of which cease after this evocation.

<sup>2</sup> The universality of this tendency is apparently contradicted by the not infrequent occasions on which a person may be attracted, or even fascinated, by disagreeable thoughts. Apart, however, from the consideration

tendency in those about us, particularly when the thoughts against which they strive are of a kind to which we ourselves are indifferent. For my own part, further, I think that introspective examination of one's attitude on these occasions shows the existence not only of a tendency voluntarily to expel certain thoughts out of consciousness, but also of a tendency to prevent them from entering consciousness. And it is to the constant pressure exerted by the latter tendency that psycho-analysts for the most part refer when they use the word 'repression.'

*B.—Indirect Action of Repression.*

Some writers are disposed to admit the existence of repression in the full sense indicated above, but would limit its scope to occasional instances of obviously unpleasant thoughts which have been buried by repression. As was mentioned above, however, Freud has extended the conception of repression to cover instances of the burying and forgetting of thoughts that do not appear to have any unpleasant content, and where the desire to recall them may be very pronounced, such as in the 'slips of memory' where there is a fruitless endeavour to recall some familiar piece of knowledge. A common objection made to this extension of the theory (for instance, by Professor Stout) is the question, 'How is it possible that a failure to remember is due to a wish to forget, when one may very much want to recall the memory concerned?' It seems to be overlooked here that the same mind may simultaneously contain two exactly opposite impulses: for instance, the desire to recall something for one reason and an aversion from recalling it for another, and that the subject may be entirely unaware of one of them—*e.g.*, the latter. This matter must next be considered more in detail.

According to Freud, the action of repression extends over from the original object of the repression, the given unpleasant complex, to the other mental processes that may stand in an associative relation to this. The reason for this is as follows: The affect investing the painful complexes is in a state of high potential, and so tends to radiate on to whatever ideas that become associated with them—the process known as 'dis-

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that the very fascination proves the existence of coincident pleasurable emotions that may have been strong enough to counteract the tendency to repress 'unpleasant' ones, we have to remember that these thoughts are commonly substitutes for still more unpleasant ones that repression has kept buried.

placement of affect.' In other words, the secondary ideas become implicated in the affective constellation of the original one, and therefore become subject to the same affective influences as these are. Now, among these influences is the inhibiting effect of repression; hence the action of repression affects the secondary groups as well as the primary ones, though, of course, in a less degree. The practical result of this is that thoughts may be kept from consciousness, not on account of their own significance, but because of their relation to other thoughts that are in a state of repression on account of their 'unpleasant' content. The occurrence is really of everyday familiarity; we instinctively avoid various thoughts because they *might remind* us of other thoughts that we do not wish to recall. Put in another way, the counter-force that prevents recall may be directed, not immediately against the thought one is trying to recall, but against another thought, and the former may be involved only through the affective bond attaching it to the latter. To use a topical analogy, the associated ideas are non-combatants that get in the line of fire.

In his paper Mr. Pear relates an instance where he could not recall a certain name until he noticed that it was nearly associated with the name of a dead friend in connection with whom there existed some painful emotion. I do not doubt the accuracy of his analysis, for I have had numerous experiences of a similar kind. Against his interpretation Dr. Wolf<sup>1</sup> brings the objection that, if the forgetting of the first name were due to repression of the more significant second one, then the latter should have been inaccessible to consciousness—*i.e.*, also forgotten. This raises a very interesting point, and also gives the opportunity for calling attention to a matter of fundamental importance that is commonly overlooked in discussing the theory of repression. There seems, namely, to be a prevailing notion that repression is mainly a question of forgotten ideas, whereas the truth is that the whole problem is essentially one of the affective life. Both the repressing force itself and the mental material that is repressed can most accurately be described in affective terms, and the ideational content of the latter is only implicated in the memory process in so far as it is invested with the repressed affect. The so-called 'painful idea' is really only a sign that represents the whole complex, and when the latter is in a state of repression the idea itself may

<sup>1</sup> *Loc. cit.*, p. 152.

or may not be inaccessible to consciousness—*i.e.*, forgotten, according to circumstances. There is, indeed, a type of mental behaviour in which these ideas become divested of the affects belonging to them—the two being 'dislocated' from each other—a process for which some writers would not scruple to coin such a word as 'de-emotionalising.' When this is very pronounced, the personality becomes of the coldly intellectual type, all mental processes being 'rationalised' to an extreme degree and the conscious affective life reduced to a minimum. In the obsessional neurosis this occurrence is characteristic even of the pathogenic complexes themselves, so that, in contradistinction to hysteria, the patient may have introspectual access to the ideational content of these complexes, although the affective investment of these is completely repressed. In therapeutics this is a matter of great practical import, and that is why I described above the aim of a psycho-analytic investigation, not as an endeavour to make buried ideas conscious—this being merely an indicating sign, so to speak, of the main procedure—but as the creation of a pathway into consciousness for the emotion attached to buried complexes.

Returning now to Mr. Pear's case, one can see that it is probably an example of this process. What one supposes to have happened is that the affect connected with the dead friend was still partly repressed, and so associated ideas that might arouse it tended to be repressed also—*i.e.*, prevented from entering consciousness. In such a case it might well happen that this keeping of ideas out of consciousness would apply more forcibly to secondary, associated, and less important ones than to the primary ideas themselves, which is the paradox that puzzled Dr. Wolf. Yet it is a fact constantly to be observed clinically, and is also capable of experimental confirmation; it lies at the basis, for instance, of Jung's diagnostic association test. It seems that an indirect association is more efficacious in arousing a repressed emotion than a direct one.<sup>1</sup> The explanation of it is that the defensive mechanism which we called 'dislocation' above is brought into action more extensively in the case of the primary ideas of the complex than it possibly can be with all the ramifications of associated ideas. This is because it is more important that it should be done in the former case; and, again, the association with a secondary idea may be instantaneously forged before there is time for this

<sup>1</sup> See Chapter XXIII., pp. 437, 438.

mechanism to come into operation. The mechanism, which is functionally (and also in its conscious origin) akin to the 'secondary elaboration' affecting dreams, deals first and foremost with the most dangerous points—*i.e.*, the primary ideas of the complex. We are all aware in daily life of how a direct reference to a painful event may leave us untouched, for we are more or less prepared for it and therefore fortified against it, while an unexpected allusion in an indirect way may arouse almost the full strength of the original emotion.

*C.—All Forgetting due to Repression.*

Coming now to the thesis that all forgetting is due in part to repression, in order to make it at all comprehensible how any one can possibly hold such an extreme view I have to introduce two further considerations, of which one concerns an observation easily capable of confirmation, the other an hypothesis of a more speculative and theoretical nature.

The observation is this. In working with psycho-analysis one finds that the unconscious material in the mind is very much more extensive than might have been surmised, that the assimilative capacity of the complexes, due to the radiation of affect, is very much greater, and that, therefore, the number of associations that are established in the unconscious is simply enormous. That being so, it is extremely difficult, and at present impossible, to set any limits to the extent to which operations characteristically applying to unconscious material, such as repression does, are in action. One is practically never in a position, for instance, to assert that such and such an idea cannot have been associated with any 'unpleasant' buried complex, for to be so would necessitate a most searching investigation of all its associations, both conscious and unconscious. It is rather like the question of the alleged destruction or fading of forgotten memories, a negative proposition that it is impossible to prove. One can only say, with considerable emphasis, that the more extensive the investigation the greater is the number of forgotten ideas that prove to be affectively connected with repressed complexes, so that the possibility is at least open that they all are.

The hypothesis alluded to concerns a widening of the connotation of the concept 'repression,' and necessitates one or two preliminary remarks. According to Freud,<sup>1</sup> all mental

<sup>1</sup> Freud, 'Formulierungen über die zwei Prinzipien des psychischen Geschehens,' *Jahrbuch der Psychoanalyse*, Bd. III., S. 1.



activities can be summarised under two fundamental principles, which he terms the 'pleasure-principle' and the 'reality-principle' respectively. The first is the well-known principle of the search for pleasure and the avoidance of 'pain' (*Unlust*), and is the more primitive of the two. The second may also be described in terms of 'adaptation to life,' 'adjustment to reality,'<sup>1</sup> and so on. In his essay on the subject Freud indicates the probability that the second principle is genetically derived from the first, a matter concerning which there is bound to be much difference of opinion. To those who accept this view, however, the following consideration presents itself. The conception of repression, as developed by Freud, is purely a hedonic one, the function of repression being exclusively to avoid pain. Now, it is a very common occurrence in the mind that a tendency which has been developed to serve one function gets appropriated, so to speak, to serve the purpose of another one as well; many examples could be given of this. And it seems to me thoroughly plausible that this is what has happened in the case of repression. Leaving aside the whole question of 'sublimation,' with its relation to repression on the one hand and to the reality-principle on the other, about which much might be said in this connection, and confining ourselves to the present theme of forgetting, we cannot but be struck by the purposiveness of most of the ordinary acts of forgetting. To have one's consciousness burdened with all manner of irrelevant memories and other mental processes when one is concentrating one's attention on a limited problem of the moment would evidently be highly deleterious to one's efficiency in dealing with reality, and I think it is the generally received opinion among psychologists that this is the direction in which we have to seek for the further understanding of the ordinary problems of remembering and forgetting. With a mechanism of repression already established for the purpose of excluding from consciousness various disturbing mental processes—for it should not be forgotten that repression is in action from the earliest periods of life—it would seem only natural that it would be seized upon and employed for the more utilitarian function of excluding also irrelevant ones when the time comes for the application of the mind to the problems of reality. Indeed, the disturbance to consciousness caused by the intrusion of these irrelevant

<sup>1</sup> It is hardly necessary to say that the term 'reality' does not here apply to the physical world alone.

and useless thoughts might without much exaggeration be conceived of in terms of the pleasure-principle itself, as a mild variety of *Unlust*. Be that as it may, I suggest it is more than possible that ordinary forgetting is, at least in part, brought about by a tendency which is a development of repression in its original sense. For the sake of convenience one might perhaps speak of 'hedonic repression' and 'utilitarian repression'<sup>1</sup> respectively.

A piece of confirmatory evidence of this view is to be obtained from the study of some neurotic symptoms. When under certain circumstances repression fails in its function of satisfactorily excluding various complexes from consciousness, certain results follow, notably two: on the one hand, disturbing manifestations of these complexes, clinically termed 'symptoms,' obtrude themselves on consciousness against the person's (conscious) will, while on the other the affective energy belonging to them can no longer be transformed ('sublimated') and devoted to the purposes of the reality-principle—*i.e.*, to adjustment and achievement in life. Now, it is interesting to observe that precisely parallel results also follow in the sphere of what we have called utilitarian repression. On the one hand the person is disturbed by the obtrusion into consciousness of all sorts of irrelevant and distracting thoughts and memories, while on the other he is unable (more or less) to call up those that are necessary for the ordinary purposes of life. He presents, in other words, the common picture of a patient who cannot concentrate his mind on any subject, partly because he cannot think of the things he should, and partly because he has to think of things he shouldn't (for the purpose in hand). I will not develop this clinical aspect of the subject further here, although there are a number of other observations that, to my mind, speak in the same sense of an inherent inter-relationship between the two forms of forgetting (the ordinary and that due to hedonic repression), one that corresponds with the relationship between the reality-principle and the pleasure-principle.

<sup>1</sup> The use here of the expression 'utilitarian,' which in philosophy is tantamount to 'hedonic,' serves well to indicate the view here represented, that the reality-principle is a derivative of the pleasure-principle. On the basis of this last consideration, by the way, and on appreciation of the fact that many mental processes indifferent or unpleasant in consciousness have a pleasurable feeling tone in the unconscious, a new lease of life may be given to the hitherto discredited hedonic theory.

## IV.—RECOGNITION.

The full purpose of recollecting is not fully achieved until the object of memory is not merely recalled to consciousness, but also collated with its intrinsic associations, and its proper meaning and significance appreciated. In this latter process there are many stages, and it may be possible to accomplish some of these but not others. In hysteria one can sometimes observe the most beautiful dissections of even the elementary attributes of recognition, such as sensation of a physical object, localisation, form, use, and name.<sup>1</sup> Dissections of the more complex attributes are, of course, of everyday occurrence, such as when one recalls certain connections of a given idea, but not others.

This matter of partial recognition is one that has regularly to be investigated during the course of a psycho-analysis, and the question has to be answered why certain connections only of the given idea have been remembered and appreciated, while others, often more important ones, have not. In such an investigation one constantly meets with examples in which the action of repression, through the associations with various buried complexes, can be clearly demonstrated as the causative factor in bringing about this isolation of certain elements of a mental constellation and not others. I would therefore maintain that in the study of recognition, as of memory altogether, the appreciation of the selective influence of repression is of cardinal importance.

<sup>1</sup> I have published a study of a case of this very sort: 'La vraie aphasie tactile,' *Revue neurologique*, January, 1907, p. 1.

## CHAPTER VI

### THE UNCONSCIOUS AND ITS SIGNIFICANCE FOR PSYCHOPATHOLOGY<sup>1</sup>

BEFORE discussing the question of the importance of the unconscious it is necessary to be clear in what sense one proposes to use this term, for it is one to which very different connotations have been attached. There are three principal current uses of the word 'unconscious,' and mention will be made of each of them in order.

The first of these, and probably the commonest, is where 'unconscious' is regarded as a synonym for 'non-mental.' This is the general sense in which it is employed in medicine; for instance, in reference to the 'unconsciousness' following a brain injury or the administration of an anæsthetic. Many psychologists also, notably Münsterberg, would adhere to this use of the word. It is plain that this attitude begs the whole question, by assuming that no mental processes can exist that are not accompanied by consciousness or awareness.<sup>2</sup> The view held by most psychopathologists, on the contrary, is that processes certainly occur, as is shewn by the findings of hypnosis and psycho-analysis, which present all the attributes of mental ones except that the subject is not aware of them, and they therefore call them mental for the simple reason that it is impossible to describe them except in mental terms; according to this view, which is here adhered to, consciousness becomes merely one attribute of mentality, and not an indispensable one. The equating of 'unconscious' with 'non-mental' would remove the

<sup>1</sup> Read as part of the Symposium at the Section of Neurology and Psychological Medicine, British Medical Association, July 26, 1914. Published in the *Review of Neurology and Psychiatry*, vol. xii.

<sup>2</sup> Morton Prince also prefers to use the word 'unconscious' in this sense, not, however, because he holds that there are no mental processes except those in consciousness, but because he uses other terms for these—namely, subconscious and co-conscious.

whole subject from the field of psychopathology, or of any branch of psychology, for the other question then involved, that of the influencing of the mind by non-mental, physical processes, belongs rather to the field of psychophysics.

The second conception of the unconscious is difficult to describe in positive terms on account of its essential vagueness. It might well be called the 'limbo' conception, for in it the unconscious is regarded as an obscure region of the mind, the content of which is largely characterised by neglect and oblivion. It is on the whole a philosophical conception, and has been developed chiefly by such writers as Hartmann, F. W. H. Myers, and most recently by Jung; with some of these writers a mystical element has been decidedly prominent. According to this view, the unconscious part of the mind is a sort of lumber-room to which various mental processes get relegated when they are in a state of inactivity. These processes are then usually considered to be of only quite secondary importance in comparison with conscious ones, and they are accorded no initiative of their own, or any primary dynamic functions, being purely of a passive nature. Curiously enough, the writers who hold this limbo conception of the unconscious think that it also contains another quite different group of mental processes—namely, the nascent form of various ideas for which the personality is not yet ripe. These ideas are supposed to be mostly either lofty ethical concepts or clever solutions of difficult problems, and do not seem to have any genetic relation to the other group that has been relegated to the unconscious in a state of decay.

The third conception of the unconscious is the psycho-analytical one, developed by Freud. He divides those mental processes that are not accompanied by awareness into two groups, the preconscious<sup>1</sup> and what he calls the unconscious proper, the latter being the sense in which the term is used in this paper. Freud's conception of the unconscious<sup>2</sup> differs sharply from the preceding ones in that it is a purely inductive

<sup>1</sup> The difficulty that will be experienced in trying to reconcile the description of the unconscious presently to be given with that given by many other writers will greatly diminish if the reader will bear in mind 'hat they are usually referring to what the psycho-analyst terms the preconscious, the unconscious proper being a much deeper region of the mind.

<sup>2</sup> The best account of this is given in his papers entitled 'Das Unbewusste,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. iii., S. 189, 257.

one, being built up step by step on the basis of actual experience without the introduction of any *a priori* speculative hypothesis; it may therefore be called the scientific conception, in contradistinction to the philosophical one. Instead of starting with any notions, whether precise or nebulous, of what the unconscious ought to be, he investigated the actual mental processes that were inaccessible to his patients' direct introspection, and which were only to be reached by means of some technical procedure, such as the psycho-analytic one. As a result of these investigations, he acquired a gradually increasing knowledge of the nature of unconscious processes, of their content, meaning, origin, and significance, and was therefore placed in a position of being able to formulate some general statements on these matters.

The statement of most fundamental importance, and the one on which I wish to lay the greatest stress here, concerns both the origin and the content of the unconscious. It is to the effect that the existence of the unconscious is the result of *repression*. By this is meant that unconscious processes are of such a kind as to be incompatible with the conscious ones of the given personality, and are therefore prevented from entering consciousness by the operation of certain actively inhibiting, 'repressing' forces.<sup>1</sup> The incompatibility in question is most often of a moral order, the word 'moral' being taken in its widest possible sense. The processes concerned then conflict with the moral, social, ethical, modest, or æsthetic standards that obtain in the person's consciousness; their very existence would be intolerable to him, and he automatically refuses to acknowledge to himself their presence in his mind. In this action of repression only a very small part is played by the occurrence that may be described as a deliberate conscious pushing of certain thoughts out of the mind, though this is the one with which we are most familiar; much more extensive is the unconscious and automatic keeping apart of the two sets of incompatible mental processes.

The unconscious, then, consists of repressed mental material. A second characteristic of it is its *dynamic* nature. The unconscious is not a depository for passive material, but a region where the most active functioning goes on. Unconscious processes are typically conative in kind, and may thus be

<sup>1</sup> For the relation of repression to the pleasure-pain principle see Chapter V., p. 118.

conveniently, and not inaccurately, described as *wishes*. These wishes are constantly striving for gratification, imaginary or real, and it is to this active striving that the external manifestations of the unconscious are to be ascribed.

Closely allied to the preceding features of the unconscious is the third one of its relation to *primary instincts*. The unconscious is the part of the mind that stands nearest to the crude instincts as they are inborn in us, and before they have been subjected to the refining influences of education. It is commonly not realised how extensive is the work performed by these influences, nor how violent is the internal conflict they provoke before they finally achieve their aim. Without them the individual would probably remain a selfish, jealous, impulsive, aggressive, dirty, immodest, cruel, egocentric, and conceited animal, inconsiderate of the needs of others, and unmindful of the complicated social and ethical standards that go to make a civilised society. Yet, according to the findings of psycho-analysis, the results of this refining process are rarely so perfect as is generally supposed; behind the veneer of civilisation there remains throughout life a buried mass of crude primitive tendencies, always struggling for expression, and towards which the person tends to relapse whenever suitable opportunity is offered.

In accord, again, with the features just described is the *infantile* nature and origin of the unconscious. The splitting of the mind into conscious and unconscious regions takes place in the earliest part of childhood life, probably in the first year, and, as was mentioned above, this splitting is the result of the conflict between the uncivilised and non-moral endowments with which we are born and the inhibiting forces<sup>1</sup> that make for adjustment to the standards of society. The primordial tendencies are repressed, and much of their energy is diverted to other, social aims; from them is derived the greater part of the energy that animates conscious activities. The fact that they are not allowed to find direct external expression, however, does not mean that they are abolished, but that they are compelled to lead an underground existence, manifesting themselves only by indirect and tortuous courses. The infantile character of the unconscious thus persists through-

<sup>1</sup> These also are probably in part inborn, though most of them are acquired.

out the whole of life, giving an added signification to the old saying that the child is father to the man.

To be correlated with the infantile nature of the unconscious is the circumstance that it ignores not only moral standards, but also logical ones. It has, it is true, a logic of its own, but this is one of the emotions and not of the reason; from the usual point of view, therefore, it would be called *illogical*. Just as the fantasy can overstep the bounds of time<sup>1</sup> and space, so does the unconscious ignore all reasonable and logical considerations.

The sixth attribute of the unconscious is its predominantly, though by no means exclusively, *sexual* character. This is only what might have been expected from the fact that the unconscious is in a state of moral conflict with the standards of consciousness, for none of the other primary instincts is subjected to anything like the intensity of repression that the sexual one invariably is. This attribute stands in apparent contradiction with the one previously mentioned concerning the infantile nature of the unconscious, but this contradiction is easily resolved when we remember the fallaciousness of the popular belief that would date the sexual instinct from the time of puberty. Freud and his co-workers have produced abundant evidence to shew that this instinct is actively operative long before this time, and probably from early childhood, though what is called infantile sexuality widely differs from the adult form, being, like other childhood manifestations, much more diffuse, tentative, and preliminary in nature. Amongst other striking differences, two special ones may be briefly mentioned here: the close association between infantile sexuality and excretory functions, and the sexual colouring in the child's relation to its near relatives (the so-called 'incest-complex'). None of Freud's conclusions has met with more bitter opposition than the last named, regarding the normal occurrence of incestuous fantasies. It was at first met by a blank denial of the facts themselves. Of late, however, when the facts could no longer be ignored, more ingenious forms of opposition have been devised. Jung, for instance, who is familiar with the facts, has formulated the view that, though these incestuous fantasies unquestionably occur, they do not mean what they purport to, but constitute merely a symbol

<sup>1</sup> Timelessness, *i.e.*, complete absence of any relation to the idea of time, is a highly characteristic attribute of the unconscious.



for various ethical ideals, and have no 'real,' primary existence in themselves; according to him, therefore, these unconscious fantasies possess no dynamic initiative of their own, but are to be regarded as purely secondary products. The psycho-analytical view, as against this, is that Jung's different formulation of the facts constitutes a distortion and manipulation of them that is dictated by moral repugnance to a distasteful conclusion.

The preceding description may be summarised in a single statement: according to psycho-analysis, the unconscious is a region of the mind, the content of which is characterised by the attributes of being repressed, conative, instinctive, infantile, unreasoning, and predominantly sexual. A typical example of an unconscious mental process, illustrating all of these, would be the wish of a little girl that her mother might die so that she could marry her father. The six attributes in question, together with others not here mentioned, make up a consistent and clearly defined conception of the unconscious which is formulated on the basis of experience that may at any time be tested.

The significance of the unconscious, as defined above, for the science of psychopathology may be discussed under four headings. In the first place, a knowledge of the content and mode of operation of the unconscious furnishes us with a key for the understanding of numerous morbid manifestations that were previously incomprehensible; it has given us a consistent interpretation of them, and has revealed their coherent and intelligible structure. Without this knowledge no solution can be found to such problems as why a given patient has developed this or that particular delusion, phobia, or other symptom; with this knowledge the bizarreness and meaninglessness with which we are so familiar in psychopathology disappear or are replaced by quite other problems. The reason for this is that all psychopathological symptoms arise in the unconscious, which is the true seat of the disorder, so that the investigation of it is of cardinal importance for both pathology and therapeutics.

In the second place, a knowledge of the unconscious makes clear not only the meaning of these symptoms, but also the causation of them. They are, namely, compromise-formations produced through the conflict between unconscious and conscious tendencies, and are brought about in the following way. It was pointed out above that normally a great part

of the energy pertaining to the repressed trends of the unconscious is diverted to permissible, social aims, a process known as 'sublimation.' This denotes a partial renunciation of the crude pleasures obtained by indulging in the primitive tendencies that are kept from consciousness, and a replacement of them by other, more or less satisfactory, refined ones. Now, a great number of people find it by no means an easy matter to achieve this renunciation, and are in constant danger of relapsing into the old indulgences and gratifications under various circumstances, particularly when the attractions of the more refined aims flag, as they must do whenever the mental environment becomes more painful, difficult, or disagreeable. Then the mental interests and energies are apt to regress towards older and more primitive modes of functioning. This regression, however, is checked by the repressing forces on which the original sublimation depended. In the resulting conflict neither set of forces is entirely successful: on the one hand the repressing ones manage to prevent a complete return to the primitive modes of gratification, while on the other they fail in transforming the energies in question into sublimated activities. A compromise is reached whereby both sets of forces come to expression, though only in a partial and disguised way; these compromise-formations are clinically called symptoms, and constitute the various psychopathological maladies.

As was hinted above, the actual symptoms do not carry their meaning on the surface, but have to be interpreted and translated into the language of the unconscious before that can be reached. To do this, a knowledge is necessary of the different mechanisms by means of which the distortion is brought about that changes the underlying repressed trend into the manifest symptom; it is impossible, however, here to discuss the nature of these mechanisms, such as displacement of the affect, inversion, projection, introjection, transposition, and so on. It can only be said that the distortion is brought about in perfectly definite ways, and through the operation of specific factors, which vary in their exact nature according to the past experiences and mental development of the individual concerned.

In the third place, the knowledge gained by investigation of the unconscious bridges over the gap between the normal and the abnormal by demonstrating that the same processes

go on in both, though the control of the unconscious ones by consciousness is greater in the case of the former. Roughly speaking, insanity presents a picture of the normal unconscious. This matter, important as it is for normal psychology, does not, however, pertain to the theme of the present symposium.

Last, but not least, is the remarkable aid that this knowledge has yielded for the treatment of psychopathological maladies. Up to the present this has, it is true, been far greater in the case of the psychoneuroses than in that of the psychoses, such as dementia præcox, but there it has already proved so valuable that one is justified in entertaining the hope that further researches may be profitable from this point of view in the case of the latter group also. The mode of action of the treatment, in a word, is that the overcoming, by means of psycho-analysis, of the resistances that are interposed against the making conscious of the repressed unconscious material gives the patient a much greater control over this pathogenic material by establishing a free flow of feeling from the deeper to the more superficial layers of the mind, so that the energy investing the repressed tendencies can be diverted from the production of symptoms into useful, social channels.

I would conclude these highly incomplete remarks with the statement that a knowledge of the unconscious furnishes an indispensable key to the understanding and treatment of psychopathological manifestations

## CHAPTER VII

### THE THEORY OF SYMBOLISM<sup>1</sup>

Introduction—True Symbolism—Genesis of Symbolism—Functional Symbolism—Conclusions

#### I. INTRODUCTION.

My attention was primarily directed to this subject, to the desirability of attaining a fuller understanding of the theoretical nature of symbolism, through observing that it is the interpreting of symbols which calls forth the greatest 'resistance' in psycho-analytic work, and, further, that this is also the centre of the strongest opposition to psycho-analysis in general. This fact—it may be called such, for the observation itself can very easily be checked—is really more curious than it might appear, since the meaning of the symbols in question is the part of psycho-analysis that is most independent of individual psycho-analysts; it is a matter that, so to speak, stands outside psycho-analysis, being a body of knowledge that is familiar ground in many other branches of science—*e.g.*, anthropology, folk-lore, philology, and so on. An explanation of the fact itself will be attempted below.

As soon as one begins to go into the subject deeply, however, its interest and importance rapidly widen, more and more problems open out, and at last, especially if the word 'symbolism' is taken in its widest sense, the subject is seen to comprise almost the whole development of civilisation. For what is this other than a never-ending series of evolutionary substitutions, a ceaseless replacement of one idea, interest, capacity, or tendency by another? The progress of the human mind, when considered genetically, is seen to consist, not—as is commonly thought—merely of a number of

<sup>1</sup> Amplified from a paper read before the British Psychological Society, January 29, 1916. Published in the *British Journal of Psychology*, vol. ix.

accretions added from without, but of the following two processes: on the one hand the extension or transference of interest and understanding from earlier, simpler, and more primitive ideas, etc., to more difficult and complex ones, which in a certain sense are a continuation of and symbolise the former; and on the other hand the constant unmasking of previous symbolisms, the recognition that these, though previously thought to be literally true, were really only aspects or representations of the truth, the only ones of which our minds were, for either affective or intellectual reasons, at the time capable. One has only to reflect on the development of religion or science, for example, to perceive the accuracy of this description.

It is evidently necessary, therefore, that we try to understand more of the nature of symbolism, and of the way in which it operates. Our effort is met at the outset by this difficulty. The term 'symbolism' has been used to denote very many different things, some of them quite unconnected with one another, and all of them in need of differentiation. Those interested in the various uses of the word may be referred to the historical work of Schlesinger,<sup>1</sup> who has collected some hundreds of different meanings and definitions. Etymology is no guide here, for the earliest meaning of the Greek *σύμβολον* does not seem to be the present-day one of a sign, but a bringing or weaving together, an implication which can perhaps be traced in the fact that most symbols have many significations; the root of the word, Sanscrit *gal*, Indogermanic *bal*, referred especially to the flowing together of water.

The word 'symbolism' is currently used both in a wide sense, roughly equivalent to sign, and in a strict sense, as in psycho-analysis, which will be defined later. To give an idea of what different phenomena are included in the former category, we may enumerate the following examples. It is applied in the first place to the idea of various objects, such as emblems, amulets, devices, tokens, marks, badges, talismans, trophies, charms, phylacteries. Then it is used to indicate various figures of speech and modes of thought, such as the simile, metaphor, apologue, metonymy, synecdoche, allegory, parable, all of which are, of course, differentiated by philologists. Mythological, artistic, magical, religious, and mystical fields of thought, as well as that of primitive metaphysics and science, are often called symbolic. There is a

<sup>1</sup> Schlesinger, 'Geschichte des Symbols,' 1912.

symbolism of cubism, of the Catholic Church, of freemasonry, a colour symbolism, and even a symbolic logic. The word is further used to denote various signs, passwords, and customs. Bowing, for instance, is said to symbolise the ancient custom of prostration, and hence respect with an absence of hostile intent. Fifty years ago to wear a red shirt or blouse would have been said to symbolise the fact that the wearer sympathised with Garibaldi. The Venetian ceremony in which the Doge wedded the Adriatic with a ring symbolised the naval power of Venice. In Frankish law the seller of a plot of ground handed the buyer a single stone from it as a symbol of the transaction, and in ancient Bavarian law a twig was similarly used in the sale of a forest. When Louis XI. dispossessed his brother of Normandy, he solemnly broke the ducal ring at an assembly held expressly for the purpose in Rouen in 1469; the act symbolised the complete destruction of his brother's authority. Similar examples of the use of the word could be multiplied endlessly.

Now, amid this maze of meanings what attributes in common can be found between the various ideas and acts denoted by the word 'symbol' or 'symbolic'? I think I shall find general agreement that the following ones are, if not absolutely essential, at least very characteristic, and from them we may advance to a more precise definition of the problem.

1. A symbol is a representative or substitute of some other idea, from which in the context it derives a secondary significance not inherent in itself. It is important to note that the flow of significance is from the primary idea to the secondary, to the symbol, so that typically a more essential idea is symbolised by a less essential. Thus all sorts of important things may be represented by a shred of material called a flag.

2. It represents the primary element through having something in common with it. Thus it would be a stretch of language to call a mnemonic knot in a handkerchief a symbol of the idea that has to be remembered, although some writers do so.<sup>1</sup> The association may be an internal or an external one. An association, however, which is superficial to the reason may often be of significance in feeling, especially in the unconscious.

3. A symbol is characteristically sensorial and concrete, whereas the idea represented may be a relatively<sup>2</sup> abstract and complex one. The symbol thus tends to be shorter and more

<sup>1</sup> E.g., Ferrero, 'Les lois psychologiques de symbolisme,' 1895, pp. 25 *et seq.*

<sup>2</sup> In true symbolism the idea is general rather than abstract.

condensed than the idea represented. The explanation of bowing, given above, well illustrates this.

4. Symbolic modes of thought are the more primitive, both ontogenetically and phylogenetically, and represent a reversion to some simpler and earlier stage of mental development. They are therefore more often met with in conditions that favour such a reversion; for example, fatigue, drowsiness, bodily illness, neurosis and insanity, and, above all, in dreams, where conscious mental life is reduced almost to a minimum. A simple observation in this connection is that a tired man usually prefers looking at an illustrated paper, where ideas are presented on a sensorial plane, to reading.

5. In most uses of the word a symbol is a manifest expression for an idea that is more or less hidden, secret, or kept in reserve. Most typically of all the person employing the symbol is not even conscious of what it actually represents.

6. Symbols resemble wit in being made spontaneously, automatically, and, in the broad sense of the word, unconsciously.<sup>1</sup> The stricter the sense in which the term 'symbolism' is used, the truer is this statement.

In accord with the two attributes last mentioned is the attitude of the conscious mind towards the interpretation of the symbol, in regard to both comprehension and feeling. Namely, the wider and more diluted the sense in which the word 'symbol' is used, the more easily is its meaning perceived and the more readily is the interpretation accepted. With a symbol in the strict sense, on the contrary, the individual has no notion of its meaning, and rejects, often with repugnance, the interpretation.

By the enumeration of these six attributes we have narrowed and defined the field somewhat, but they still apply to a considerable number of different mental processes—in fact, to most forms of indirect figurative representation. *The thesis will here be maintained that true symbolism, in the strict sense, is to be distinguished from other forms of indirect representation, and that not merely as a matter of convenience, because it is different from the rest, but because the clear conception thus gained of the nature of the differences must prove of value in understanding the most primitive levels in mental development and their relation to conscious thought. Before doing so, and before seeking to define the distinguishing characteristics*

<sup>1</sup> See Ferrero, *op. cit.*, p. 24.

of true symbolism, it will be profitable briefly to examine a purely linguistic question—namely, the metaphorical use of words;<sup>1</sup> for it is certain that the metaphor is one of the processes—and the most familiar one—that have to be distinguished from symbolism.

The simile is the simplest figure of speech; it logically antedates even the metaphor, and certainly the adjective. In some primitive languages—*e.g.*, Tasmanian—there are no adjectives, similes being used in their stead, the reason, no doubt, being that it is easier to observe a concrete object which can be used in comparison than to abstract the notion of an attribute. The metaphor differs from a simile in the suppression of one of the terms of comparison; we say, for example, 'he buffeted the blows of Fortune,' instead of 'he strove against his ill fortune as he would have buffeted away blows.' A metaphor, therefore, presupposes a simile, which is the more primitive figure; in it the words 'as' or 'like' are suppressed, though always implied. In a simile a resemblance is pointed out between things that in other respects are different—*e.g.*, 'lies, like crows, come home to roost'; a mere parallel does not constitute a simile. Our motive in employing a simile is to add ornament, force, or vividness to the phrase, but it is to be supposed that the original motive, as in Tasmania, was to indicate the presence of an attribute by the simple process of comparison. The dream makes frequent use of this latter device, which is, in fact, its usual way of indicating an attribute; often quite a complicated description of a person can be conveyed by identifying—*i.e.*, comparing—him with some one else. This dream mechanism of identification has points of contact with the metaphor also. Thus, if a person's conduct or appearance resembles in some way that of a lion or bull, he may masquerade in a dream in the form of the animal, just as in speech we use such expressions as 'he was a lion in the fight.'

In the evolution, or what philologists call the decay, of the metaphor there are three stages, which are, of course, not sharply marked off from one another. In the first of these a word that is most often used in its literal sense is occasionally used in a figurative one, where its metaphorical nature is at once obvious; an example would be 'the wrath of the gale.'

<sup>1</sup> Cf. E. B. Maye, art. on 'Enlargement of Vocabulary' in O'Neill's 'Guide to the English Language,' 1915.



In the second stage both the literal and figurative senses are familiar, so that when the word is used in the latter sense we are conscious of its metaphorical nature only slightly or on reflection—preconsciously, as psycho-analysts would say; thus we speak of 'the depth of the sea' literally, and 'the depth of despair' figuratively. In the third stage the figurative sense has become the usual, literal one, and through either ignorance or forgetfulness we are no longer aware of its original literal meaning; thus the word 'melancholy' does not make us think of black bile, nor does the expression 'acuity of mind' make us think of a cutting edge. Here the decay of the metaphor is complete, and the figurative 'symbol' has acquired an objective reality of its own in place of the subjective one of the earlier stages.

The nature of metaphor will be discussed below in connection with the distinction between it and true symbolism. But consideration of the evolution of the metaphor, as just indicated, already teaches us, amongst other things, that the simile is the primary process, there being sufficient likeness between two ideas for them to be treated as at least in some respect equivalent. We note, further, the gradual transference of significance from one use of a word to another, ending in the independence of the original metaphor, which has acquired a reality of its own. This process is no doubt parallel to the gradual extension and evolution of the ideas themselves that are denoted by the words. To show how extraordinarily the uses of a word can ramify from its original simple one, just as other mental processes (interests, ideas, etc.) ramify and extend from a primary one, the example may be taken of the current uses only of the word 'head.' The following are only a few of its numerous applications: the head of the army; the head of a class; the head of a pin; the head of a coin; the head of the table (*i.e.*, the person sitting at its chief end); the heads or headings of an article; the many idiomatic phrases such as 'to give a horse its head,' etc. It would take a volume to expound the ramifications of any of the primary roots of a language.

About the motives for metaphor-making more will be said presently, but a few remarks may be made at this point. A prominent motive seems to be to heighten appreciation on the hearer's part by calling to his mind another image more easily apprehended or comprehended, usually one more

familiar in respect of the attribute implied (though by no means necessarily in other respects); or, to present the obverse of the same idea, a metaphor serves to eke out the relative paucity of attributive description. In this sentence the stress falls on the word 'easily'; a metaphor makes the idea, and especially the accompanying affect, more credible, plastic, and *easy*. It overcomes a (relative) difficulty in apprehension or, as the case may be, in presentation; this difficulty may be of either intellectual or affective origin.

## II. TRUE SYMBOLISM.

The subject of metaphors will be left for the moment in this stage, and that of true symbolism entered on. What I shall here propose to call true symbolism is one variety of the group of indirect representation to which six attributes were attached above. It therefore possesses these attributes together with a number of others that distinguish it from the rest of the group. Before defining these and discussing them in detail, I wish to prepare the reader's mind by remarking that an important characteristic of true symbolism is that the interpretation of the symbol usually evokes a reaction of surprise, incredulity, and repugnance on the part of those unfamiliar with it. An example that well illustrates these features is the interpretation of the familiar Punchinello of the marionette stage as a phallic symbol, on which something may be added by way of exposition.

The conception of the male organ as a 'little man' is extremely widespread, and, by the process known to mythologists as 'decomposition',<sup>1</sup> it often becomes personified and incorporated in an independent figure. A large number of the dwarfs, gnomes, and goblins so common in folk-lore and legend are of this nature,<sup>2</sup> their characteristic attributes being that they are deformed, ugly caricatures of men, wicked and even malign—yet sometimes willing to be friendly and to yield services on certain conditions, able to perform wonderful and magical feats, and winning their own way in spite of their obvious disadvantages. Sand's description of Punchinello is in these respects typical:<sup>3</sup> 'Il a le cœur aussi sec que son bâton,

<sup>1</sup> See Ernest Jones, *American Journal of Psychology*, vol. xxi, pp. 105, 106.

<sup>2</sup> See, e.g., Freud's analysis of Rumpelstilzchen, *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 148.

<sup>3</sup> Maurice Sand, 'Masques et Bouffons,' 1860, vol. i., p. 124.

c'est un égoïste dans toute l'acception du mot. Sous une apparente belle humeur, c'est un être féroce; il fait le mal pour le plaisir de le faire. Se souciant de la vie d'un homme comme de celle d'une puce, il aime et cherche des querelles. . . . Il ne craint ni Dieu ni diable, lui qui a vu passer, sous son nez crochu et verruqueux, tant de sociétés et de religions . . . (speaking of his passion for women) malgré ses bosses et sa figure peu faite pour séduire, il est si caustique, si persuasif, si entreprenant et si insolent, qu'il a des succès.' Nodier<sup>1</sup> fittingly apostrophises him, 'O Polichinelle, simulacre animé de l'homme naturel abandonné à ses instincts.' His physical characteristics well accord with this interpretation: the long hooked nose, long chin, projecting hump on his back, prominent stomach, and pointed cap.

Punchinello seems first to have made his appearance in England with the Restoration,<sup>2</sup> but his history and that of similar figures is a world-wide one.<sup>3</sup> In England he quickly became assimilated with, and took some of his features from, the English clown and Jack Pudding, just as in Germany he fused with the Hanswurst. In Eastern countries he is met with as Karagheus. The prototype of all modern polichinellos is the Neapolitan *polecenella*, who cannot be traced farther back than the Renaissance. It is highly probable, however, that he is a lineal descendant of the Maccus of the Roman atellanes (introduced in the sixth century), for the statue of Maccus in the Capponi Museum at Rome (found in 1727, but dating from Roman times) shews the closest resemblance to the modern figure.

The attribute of comicality attaching to such figures is of considerable interest in more than one direction. The idea of the male organ as a comic mannikin, a 'funny little man,' is a very common one, and is much more natural to women than to men. The source and meaning of this alone constitutes a problem which cannot be dealt with here, since it would lead us too far away into the nature of the comic in general.<sup>4</sup> The idea itself is a subsection of phallic symbolism, concerning which the reader may be reminded of the following points:

<sup>1</sup> Nodier, quoted by Sand, *op. cit.*, p. 147.

<sup>2</sup> It is interesting that in the first recorded mention of him in England (Accounts of the Overseers of St. Martin's, 1666) the showman's name is given as Punchinello, an example of the identification of man with puppet.

<sup>3</sup> Many points have been elucidated since Payne Collier's (anonymous) 'History of Punch and Judy,' 1828, the fullest work on the subject.

<sup>4</sup> See Freud, 'Der Witz und seine Beziehung zum Unbewussten,' 1905, Kap. vii.

There are two broad classes of such symbols, the patriarchal symbols of the eagle, bull, etc., representing the father's power and rights, and the matriarchal symbols representing the revolutionary son. The latter are again divided into two sub-groups, those, such as the devil, the cock, the serpent, etc., which are tabooed and interdicted, and those, such as the goat, the ape, and the ass<sup>1</sup> (the animal sacred to the worship of Priapus, with which the figure of Punchinello is constantly brought into association), which are contemned as ridiculous and comic.

I might add that there is a slight trace of the original revolutionary meaning of the matriarchal phallic symbol left in the pose of such comic figures—the most striking example of which was the mediæval court jester—as critics who lash the conventions of society. There is a hint of this point in one of Bernard Shaw's prefaces;<sup>2</sup> it runs: 'Every despot must have one disloyal subject to keep him sane. . . . Democracy has now handed the sceptre of the despot to the sovereign people; but they, too, must have their confessor, whom they call Critic. Criticism is not only medicinally salutary: it has positive popular attractions in its cruelty, its gladiatorship, and the gratification given to envy by its attacks on the great, and to enthusiasm by its praises. It may say things which many would like to say, but dare not. . . . Its iconoclasm, seditions, and blasphemies, if well turned, tickle those whom they shock; so that the Critic adds the privileges of the court jester to those of the confessor. Garrick, had he called Dr. Johnson Punch, would have spoken profoundly and wittily; whereas Dr. Johnson, in hurling that epithet at him, was but picking up the cheapest sneer an actor is subject to.'

We have next to consider the respects in which this example differs from those given earlier in the paper, and it will be well first to examine the definitions offered by other writers. The most exact of these is that given by Rank and Sachs,<sup>3</sup> which I will quote in full: 'Ein letztes, wegen seiner besonderen Eignung zur Verhüllung des Unbewussten und zu seiner Anpassung (Kompromissbildung) an neue Bewusstseinsinhalte überall mit Vorliebe verwendetes Ausdrucksmittel des Verdrängten ist das *Symbol*. Wir verstehen darunter eine besondere Art der indirekten Darstellung, die durch gewisse Eigen-

<sup>1</sup> See Storfer, 'Marias Jungfräuliche Mutterschaft,' 1914.

<sup>2</sup> G. B. Shaw, 'Plays Unpleasant,' 1898, p. viii.

<sup>3</sup> Rank and Sachs, 'Die Bedeutung der Psychoanalyse für die Geisteswissenschaften,' 1913, S. 11.

tümlichkeiten von den ihm nahestehenden des Gleichnisses, der Metapher, der Allegorie, der Anspielung und anderen Formen der bildlichen Darstellung von Gedankenmaterial (nach Art des Rebus) ausgezeichnet ist. Das Symbol stellt gewissermaßen eine ideale Vereinigung all dieser Ausdrucksmittel dar: es ist ein stellvertretender anschaulicher Ersatzausdruck für etwas Verborgenes, mit dem es sinnfällige Merkmale gemeinsam hat oder durch innere Zusammenhänge assoziativ verbunden ist. Sein Wesen liegt in der Zwei- oder Mehrdeutigkeit, wie es ja selbst auch durch eine Art Verdichtung, ein Zusammenwerfen (*συνβάλλειν*) einzelner charakteristischer Elemente entstanden ist. Seine Tendenz vom Begrifflichen nach dem Anschaulichen stellt es in die Nähe des primitiven Denkens, und als solches gehört die Symbolisierung wesentlich dem Unbewussten an, entbehrt aber als Kompromissleistung keineswegs der bewussten Determinanten, die in verschieden starkem Anteil die Symbolbildung und das Symbolverständnis bedingen.' ['A final means of expression of repressed material, one which lends itself to very general use on account of its especial suitability for disguising the unconscious and adapting it (by compromise formations) to new contents of consciousness, is the Symbol. By this term we understand a special kind of indirect representation which is distinguished by certain peculiarities from the simile, metaphor, allegory, allusion, and other forms of pictorial presentation of thought material (after the manner of a rebus), to all of which it is related. The symbol represents an almost ideal union of all these means of expression: it is a substitutive, perceptual replacement-expression for something hidden, with which it has evident characteristics in common or is coupled by internal associative connections. Its essence lies in its having two or more meanings, as, indeed, it itself originated in a kind of condensation, an amalgamation of individual characteristic elements. Its tendency from the conceptual to the perceptual indicates its nearness to primitive thought; by this relationship symbolisation essentially belongs to the unconscious, but, in its function as a compromise, it in no way lacks conscious determining factors, which in varying degrees condition both the formation of symbols and the understanding for them.']

They then specify the characteristics of true symbols as follows:<sup>1</sup> 'Die Stellvertretung für Unbewusstes, die konstante

<sup>1</sup> *Op. cit.*, S. 18.

Bedeutung, die Unabhängigkeit von individuellen Bedingungen, die Entwicklungsgeschichtliche Grundlage, die sprachlichen Beziehungen, die phylogenetischen Parallelen (in Mythus, Kult, Religion, etc.) ['Representation of unconscious material, constant meaning, independence of individual conditioning factors, evolutionary basis, linguistic connections, phylogenetic parallels in myths, cults, religion, etc.']. These attributes will next be examined and commented on in order.

1. *Representation of Unconscious Material.*—This is perhaps the characteristic that most sharply distinguishes true symbolism from the other processes to which the name is often applied. By it is meant, not so much that the concepts symbolised are not known to the individual, for most often they are, as that the affect investing the concept is in a state of repression, and so is unconscious. Further, the process of symbolisation is carried out unconsciously, and the individual is quite unaware of the meaning of the symbol he has employed; indeed, is often unaware of the fact that he has employed one at all, since he takes the symbol for reality.<sup>4</sup> The actual comparison between the idea symbolised and the symbol has never been present to consciousness at all, or else has only been present for a time and then forgotten. In many cases this point of comparison is evident as soon as one's attention is directed to the fact of comparison. In other cases considerable reflection is needed to discover it, and in some cases it is not yet patent—that is to say, any possible points of comparison between the two ideas seem too tenuous to justify the symbolism, even when the fact of the latter is undoubted.

2. *Constant Meaning.*—The statement here implied needs some modification. A given symbol may have two or occasionally even more meanings; for instance, in dreams a room may symbolise either a woman or a womb. In that case the interpretation will depend on the context, the associations, and other material available. A preference for one of these meanings can sometimes be correlated with the social class, the mental circle, or the race to which the individual using the symbol belongs, or it may depend on purely individual constellations. But the possible variation in meaning is exceedingly restricted, and the striking feature is its constancy in different fields of symbolism, dreams, myths, etc., and in different kinds of people. It has further to be remembered that in interpretation it is usually a question, not of either this

meaning or that, but of both. In unconscious condensation, as shewn, for instance, in dreams, there are several layers, in each of which one of the meanings is the true one. When these points are appreciated it will be seen that there is little scope for arbitrariness in the interpretation of symbols.

3. *Independence of Individual Conditioning Factors.*—I find that this attribute is not unambiguously expressed in the words chosen, or else it is a question of the shades of meaning not being identical in the corresponding English and German words. 'Independence of' should be rather 'Non-dependence on,' the point being that the symbolism is not conditioned by individual factors only. The individual has not an unlimited range of choice in the creation of a given symbol, but on the contrary a very restricted one, more important determining factors being those that are common to large classes of men or, more often, to mankind as a whole. The part played by individual factors is a much more modest one. While the individual cannot choose what idea shall be represented by a given symbol (for the reason just mentioned), he can choose what symbol out of the many possible ones shall be used to represent a given idea; more than this, he can sometimes, for individual reasons, represent a given idea by a symbol that no one else has used as a symbol.<sup>1</sup> What he cannot do is to give a regular symbol a different meaning from any one else; he can merely choose his symbols or make new ones, and even in the latter case they have the same meaning as they would with other people who might use them.

This curious independence of symbolic meanings raises in another form the old question of the inheritance of ideas. Some writers—*e.g.*, Jung—hold that anthropological symbolism is inherited as such, and explain in this way its stereotyped nature. For reasons I have developed elsewhere,<sup>2</sup> I adhere to the contrary view that symbolism has to be re-created afresh out of individual material, and that the stereotypy is due to the uniformity of the human mind in regard to the particular tendencies that furnish the source of symbolism—*i.e.*, to the uniformity of the fundamental and perennial interests of mankind. If this view is true, then further study of the subject must yield important conclusions as to the nature of the latter.

<sup>1</sup> See Freud, 'Die Traumdeutung,' 4<sup>e</sup> Aufl., 1914, S. 261.

<sup>2</sup> *Imago*, Jahrg. i., 1912, S. 486, 487.

4. *Evolutionary Basis*.—This genetic aspect of symbolism will be dealt with at length later on in the paper.

5. *Linguistic Connections*.—We have seen that in symbolism the unconscious notices and makes use of comparisons between two ideas which it would not occur to our conscious mind to bring together. Now, the study of etymology, and especially of semantics, reveals the interesting fact that, although the word denoting the symbol may have no connotation of the idea symbolised, yet its history always shews some connection with the latter. This connection may be one of different kinds. Thus it may appear in one sphere of thought—*e.g.*, wit—when it is not present in the ordinary use of the word; for example, the well-known ‘officers’ remounts’ joke current during the South African War illustrates the unconscious association between the ideas of riding and of coitus, although this association is very far from being present in most spheres of thought. It may appear in an older and now obsolete use of the same word, in the root from which the word was derived, or from other words cognate with it.

This may be illustrated from the example of symbolism depicted above. The name Punchinello is an English contamination (see below) derived from the Neapolitan *pol(l)ecenella* (modern Italian *pulcinella*), which is the diminutive of *pollecena*, the young of the turkey-cock (the modern Italian *pulcino* means pullet, *pulcinello* being its diminutive); the turkey-cock itself is a recognised phallic symbol, as, indeed, is the domestic cock, both ideationally and linguistically. The Latin root is *pullus*, which means the young of any animal; the phallus is often, for obvious reasons, identified with the idea of a male child, a little boy or little man. The reason why the name came to be used in this connection is thought to be the resemblance between the nose of the actor and the hooked bill of the bird, and again it may be pointed out that both nose and beak are common phallic symbols.

The name *polecenella*, or its English variant ‘polichinello’ (derived *via* the French *polichinelle*), was contaminated with the English word ‘punch,’ the main meaning of which is a tool for perforating material, with or without the impressing of a design—*e.g.*, to pierce metal or to stamp a die; it used to mean a dagger (another common symbol). The word is short for ‘punchon,’ which used to mean a bodkin or dagger, and is now used in carpentry to denote ‘a short upright piece of



timber which serves to stiffen one or more long timbers or to support a load'; it comes from the late Latin *punctiare*, to prick or punch. Pepys, in his 'Diary,' April 30, 1669, calls punch 'a word of common use for all that is thick and short,' and refers to a gun (by the way, yet another phallic symbol), 'which, from its shortness and bigness, they do call Punchinello.' Suffolk punches are thick-set draught horses with short legs. To sum up, the four ideas that keep recurring in connection with the name 'punchinello' are (1) a caressing name for male offspring, equivalent to 'little man,' (2) a projecting part of the body, (3) the notion of piercing or penetrating, and (4) that of shortness and stoutness—four ideas that admirably serve to describe the male organ and nothing else; indeed, there is no other object to which the curious combination applies of stoutness and pricking. Finally, I may add that two common expressions become more intelligible in the light of the interpretation just given. 'To be as proud (or pleased) as Punch': overweening pride is intimately associated in the unconscious with exhibitionistic self-adoration. 'He has plenty of punch in him': in this modern Americanism the word 'punch' is used as a synonym for the colloquial 'backbone,' 'spunk,' 'sand,' etc.—*i.e.*, symbols of the male organ and its product.

In connection with the phallic signification of the staff wielded by Punchinello, one may remark that the word itself is cognate with the M.H.G. *staben*, to become stiff, both probably coming from a pre-Teutonic root *sta*, which means to stand up: A more familiar piece of knowledge is that the word 'yard,' used as a measure of length, had three centuries ago two other current meanings—(1) a staff, and (2) the phallus; it is still used in the latter sense by sailors. It is an equivalent of the jester's bauble. In addition to the long nose and staff already mentioned, Punchinello displays several other phallic attributes, the dog Toby being one of them. The fact that such a symbol can in its turn have similar symbols attached to it, a fact strikingly illustrated in the phallic ornaments worn as amulets by Roman ladies,<sup>1</sup> confirms the view taken above of the identification of man with phallus, of the whole with the part.

Even with symbol words where it is hard to trace any association between them and the words denoting the ideas symbolised, such an association is often apparent in the case of synonyms or foreign equivalents. A good example is our

<sup>1</sup> See Vorberg, 'Museum eroticum Neapolitanum,' Sect. 'Bronzen.'

word 'room'—a room is a regular unconscious symbol for woman—where one has to go to very remote Aryan sources—*e.g.*, Old Irish—to find any trace of a feminine connotation; one has only to turn, however, to the German equivalent, *Zimmer*, to find that the compound *Frauzimmer* is a common colloquialism for woman.

6. *Phylogenetic Parallels*.—One of the most amazing features of true symbolism is the remarkable ubiquity of the same symbols, which are to be found, not only in different fields of thought, dreams, wit, insanity, poetry, etc., among a given class and at a given level of civilisation, but among different races and at different epochs of the world's history. A symbol which to-day we find, for instance, in an obscene joke is also to be found in a mythical cult of Ancient Greece, and another that we come across only in dream analysis was used thousands of years ago in the sacred books of the East. The following examples may be quoted in illustration of this correspondence. The idea of teeth, in dreams, is often symbolically related to that of child-birth, a connection that is never to be found in consciousness; in the Song of Songs we read: 'Thy teeth are as a flock of sheep, which go up from the washing, whereof everyone beareth twins, and there is not one barren among them.' The idea of a snake, which is never consciously associated with that of the phallus, is regularly so in dreams, being one of the most constant and invariable symbols: in primitive religions the two ideas are quite obviously interchangeable, so that it is often hard to distinguish phallic from ophitic worship; many traces of this are to be found even in the Old Testament. The idea of father or mother is constantly symbolised in dreams by that of king or queen respectively. The word 'king' is ultimately derived from the Sanscrit root *gan*, meaning to beget; *ganaka* was the Sanscrit for father, and occurs also in the Vedas as the name of a well-known king. The word 'queen' comes from the Sanscrit *gani*, which means simply mother. The Czar of Russia is, or rather was until recently, called the 'Little Father,' the same title as the Hunnish Attila (diminutive of *Atta*=father). The title 'Landesvater' is commonly used in Germany, just as the Americans still call Washington the 'Father of his Country.' The ruler of the Catholic Church is called the 'Holy Father,' or by his Latin name of 'Papa.'

By adding the six attributes just discussed to the more general six mentioned earlier, we have formulated a conception

of symbolism as distinct from the other kinds of indirect representation. The precise differences and relations between them will be discussed more fully below, and we may conclude this section by a brief consideration of the actual content of symbolism.

The number of symbols met with in practice is extraordinarily high, and can certainly be counted by thousands.<sup>1</sup> In astonishing contrast with this stands the curious fact that the number of ideas thus symbolised is very limited indeed, so that in the interpretation of them the complaint of monotony is naturally often heard. The fact of this remarkable disproportion between the number of symbols and that of symbolised ideas in itself raises many interesting problems, on which,

<sup>1</sup> There is no satisfactory comprehensive work on the content of symbolism. The most reliable collection, unfortunately much too unfinished for what is needed, is that given in Freud's 'Traumdeutung' (4<sup>e</sup> Aufl., S. 262-274), amplified in his 'Vorlesungen zur Einführung in die Psychoanalyse' (Zweiter Teil, 1916, S. 164-180). The numerous examples scattered through Otto Rank's works can also be depended on. In Stekel's 'Sprache des Traumes' and his 'Angustzustände' there is an extensive material, useful to those capable of criticising it. On the anthropological side one may mention the well-known works by Bachofen, 'Versuch über die Gräbersymbolik der Alten,' 1859; Burton, 'Terminal Essay of the Arabian Nights,' 1890; Cox, 'Mythology of the Aryan Nations,' 1870; Dieterich, 'Mutter Erde,' 2<sup>e</sup> Aufl., 1913; Dulaure, 'Des divinités génératrices,' 1805 (much enlarged in a German edition by Krauss and Reiskel, 'Die Zeugung in Glauben, Sitten und Bräuchen der Völker,' 1909); Faber, 'Origin of Pagan Idolatry,' 1816; Fanin, 'Secret Museum of Naples,' English Translation, 1872; Fergusson, 'Tree and Serpent Worship,' 1873; Forlong, 'The Rivers of Life,' 1883; Higgins, 'Anacalypsis,' 1833-1836; Inman, 'Ancient Faiths embodied in Ancient Names,' 1868, and 'Ancient Pagan and Modern Christian Symbolism' (the most useful book on the subject), 1869, Second Edition 1874; Hargrave Jennings, 'The Rosicrucians,' 1887; King, 'The Gnostics and their Remains,' 1864; Payne Knight, 'A Discourse on the Worship of Priapus,' 1786, New Edition 1871, and 'The Symbolical Language of Ancient Art and Mythology,' 1818, New Edition 1876; Moor, 'Hindu Pantheon,' 1810; Staniland Wake, 'The Influence of the Phallic Idea in the Religions of Antiquity,' *Journ. of Anthropology*, 1870, Nos. 1 and 2, and 'Serpent Worship,' 1888; Wake and Westropp, 'Ancient Symbol Worship,' Second Edition 1875; Westropp, 'Primitive Symbolism,' 1885; together with the less known works by Campbell, 'Phallic Worship,' 1887; Freimark, 'Okkultismus und Sexualität'; Hermann, 'Xenologie des Saeming,' 1905; Kittel, 'Über den Ursprung des Lingakultus in Indien,' 1876; Laurent and Nagour, 'L'occultisme et l'amour'; Maehly, 'Die Schlange im Mythos und Cultus der classischen Völker,' 1867; de Mortillet, 'Le Signe de la Croix avant le Christianisme,' 1866; Sellon, 'Phallic Worship in India,' *Memoirs of the Anthropological Society*, vol. I., and 'Annotations on the Sacred Writings of the Hindus,' New Edition 1902; Storfer, *op. cit.* A number of recent books—e.g., those by Bayley, Blount, Churchward, Hannay—are of much less value than their pretensions would suggest.

perhaps, some light may be thrown by the considerations that will be discussed below in connection with the genesis of symbolism.

All symbols represent ideas of the self and the immediate blood relatives, or of the phenomena of birth, love, and death. In other words, they represent the most primitive ideas and interests imaginable. The actual number of ideas is rather greater, however, than might be supposed from the briefness of this summary—they amount, perhaps, to about a hundred—and a few supplementary remarks are necessary. The self comprises the whole body or any separate part of it, not the mind; perhaps twenty different ideas can here be symbolised. The relatives include only father, mother, brother, sister, son, daughter; various parts of their bodies also can be symbolised. Birth can refer to the ideas of giving birth, of begetting, or of being born oneself. The idea of death is in the unconscious a relatively simple one, that of lasting absence; it always refers to the death of others, for the idea of one's own death is probably inconceivable as such in the unconscious, being always converted into some other one.<sup>1</sup> Love, or more strictly sexuality, comprises a very considerable number of distinct processes, including some, such as excretory acts, that are not commonly recognised to have a sexual bearing; it would lead us too far to enumerate and describe them all here, but it may be said that the total conception thus reached closely corresponds with Freud's theory of sex.<sup>2</sup> The field of sexual symbolism is an astoundingly rich and varied one, and the vast majority of all symbols belong to this category.<sup>3</sup> There are probably more symbols of the male organ itself than all other symbols put together. This is a totally unexpected finding, even more so than the paucity of symbolised ideas in general, and is so difficult to reconcile with our sense of proportion that it needs an effort to refuse the easy escape of simply denying the facts, a feat which is greatly facilitated by the circumstance that, thanks to our education, the facts are not very accessible. Rank and Sachs' comments in this connection are of interest:<sup>4</sup> 'Das Prävalieren der sexuellen Symbolbedeutungen erklärt sich nicht nur aus der individuellen Tatsache, dass kein Trieb

<sup>1</sup> See Chapter XXXIII., p. 580.

<sup>2</sup> See Freud, 'Drei Abhandlungen zur Sexualtheorie,' 1905, or Chapter III. of the present volume.

<sup>3</sup> See Schlesinger, *op. cit.*, S. 437 *et seq.*

<sup>4</sup> Rank and Sachs, *op. cit.*, S. 12.

in dem Masse der kulturellen Unterdrückung unterworfen und der direkten Befriedigung entzogen ist, wie der aus den verschiedensten "perversen" Komponenten zusammengesetzte Sexualtrieb, dessen psychischer Vorstellungskreis, das Erotische, daher in weitem Umfang der indirekten Darstellung fähig und bedürftig ist. Eine weit grössere Bedeutung für die Genese der Symbolik hat die phylogenetische Tatsache, dass den Geschlechtsorganen und -Funktionen in primitiven Kulturen eine für unsere Begriffe ganz ungeheure Wichtigkeit beigelegt war, von der wir uns durch die Tatsachen der ethnographischen Forschung und die in Kult und Mythos erhaltenen Reste eine annähernde Vorstellung machen können.' ('The prevalence of sexual meanings in symbolism is not to be explained merely by the individual experience that no other instinct is to the same extent subjected to social suppression and withdrawn from direct gratification as the sexual one, that instinct built up from multiform "perverse" components, and the mental domain of which, the erotic, is therefore extensively susceptible of, and in need of, indirect representation. Much more significant for the genesis of symbolism is the phylogenetic fact that in primitive civilisations an importance was attached to sexual organs and functions that to us appears absolutely monstrous, and of which we can form some approximate idea from the results of anthropological investigations and the traces remaining in cults and myths.')

### III. GENESIS OF SYMBOLISM.

Having formulated a conception of the nature, characteristics, and content of symbolism, we may proceed to the more difficult questions of its genesis. Our point of departure is that in symbolism a comparison between two ideas, of a kind that is alien to the conscious mind, is established unconsciously, and that then one of these—which for the sake of convenience may be called the secondary idea—may unknowingly be substituted for, and so represent, the first or primary idea. Two questions immediately arise from this statement: Why are two ideas identified which the conscious mind does not find to be similar? And why does the one idea symbolise the other and never the reverse?

Taking the former question first, we begin by noting that it is the primitive mind which institutes the comparison between

the two ideas, not the adult, conscious mind. This conclusion is confirmed by everything we know about symbolism, the type of mental process, the high antiquity—in both the individual and the race—of the actual symbols themselves, and so forth; even the few new symbols that are made by the adult—*e.g.*, the Zeppelin one—are created by the primitive, infantile mind that persists throughout life in the unconscious.

Just as the simile is the base of every metaphor, so is an original identification the base of every symbolism, though it is important not to confound these two processes. As Freud puts it:<sup>1</sup> 'Was heute symbolisch verbunden ist, war wahrscheinlich in Urzeiten durch begriffliche und sprachliche Identität vereint. Die Symbolbeziehung scheint ein Rest und Merkzeichen einstiger Identität.' ('What to-day is symbolically connected was probably in primæval times united in conceptual and linguistic identity. The symbolic relationship seems to be the remains and sign of an identity that once existed.')

The tendency of the primitive mind—as observed in children, in savages, in wit, dreams, insanity, and other products of unconscious functioning—to identify different objects and to fuse together different ideas, to note the resemblances and not the differences, is a universal and most characteristic feature, though only those familiar with the material in question will appreciate the colossal scale on which it is manifested. It impresses one as being one of the most fundamental and primordial attributes of the mind. In explanation of it there are two hypotheses, which, as they are implicit throughout this section, and, indeed, in the whole essay, may be briefly indicated at this point. The one most usually accepted would refer the phenomenon under discussion, as well as most others of symbolism, to the structure of the undeveloped mind, for which reason it might be termed the static hypothesis; the main feature to which they call attention is the intellectual incapacity for discrimination. The second, psycho-analytical hypothesis, while admitting the importance of this factor, holds that it is in itself insufficient to explain all the phenomena, and postulates other, dynamic factors as well.

In my opinion, not one, but three factors, are operative in this general primitive tendency to identification. The first, which is the only one usually recognised, but which I think is much the least important, is that of mental incapacity.

<sup>1</sup> Freud, 'Die Traumdeutung,' *loc. cit.*

The second, which I shall point out presently, has to do with the 'pleasure-pain principle,' and the third, to which Rank and Sachs call attention, with the 'reality principle.'<sup>1</sup>

The first factor, which I think I shall be able to prove cannot be exclusive, is well indicated in the following passages. Pelletier says:<sup>2</sup> 'Il est à remarquer que le symbole joue un très grand rôle dans les divagations des aliénés; cela est dû à ce que le symbole est une forme très inférieure de la pensée. On pourrait définir le symbole comme la perception fautive d'un rapport d'identité ou d'analogie très grande entre deux objets qui ne présentent en réalité qu'une analogie vague.' We shall see that the disproportion in the importance of the analogy depends on the different points of view of the patient and the doctor rather than on any intellectual inferiority of the former. Jung, from a similar standpoint, writes:<sup>3</sup> 'Die apperzeptive Schwäche drückt sich in einer verminderten Deutlichkeit der Vorstellungen aus. Sind die Vorstellungen undeutlich, so sind auch ihre Unterschiede undeutlich.' ('The apperceptive defect is manifested in a lessened clearness of ideas. If the ideas are not clear, neither are the differences between them.') He says further: 'Ich will nur hervorheben, dass die *Vieldeutigkeit der einzelnen Traumbilder* ("Überdeterminierung" Freuds)<sup>4</sup> mit ein Zeichen ist für die Undeutlichkeit und Unbestimmtheit des Traumdenkens. . . . Wegen der im Traum herrschenden *mangelhaften Unterschiedsempfindlichkeit* können die beiden Komplexinhalte wenigstens in symbolischer Form ineinanderfließen.' ('I will only point out that the many significations of the individual dream images (Freud's "over-determination")<sup>5</sup> is a sign of the lack of clarity and definition in dream thought. Because of the defective sensibility for differences that prevails in dreams, the contents of both complexes can become confounded at least in symbolic form.') Both these authors were probably influenced by the common, but fallacious, view of dreams and insanity as *defective* mental products. Silberer, however, approaching the matter from quite another point of view, also writes:<sup>6</sup> 'Ich entferne mich durchaus nicht von der Mehrzahl der Autoren, wenn ich die hauptsächlichste und

<sup>1</sup> For the exact sense in which these terms are used see Chapter I.

<sup>2</sup> Pelletier, 'L'association des idées dans la manie aiguë,' 1903, p. 129.

<sup>3</sup> Jung, 'Über die Psychologie der Dementia præcox,' 1907, S. 72.

<sup>4</sup> This is the same as the condensation, or over-identification, under discussion.

<sup>5</sup> *Ibid.*

<sup>6</sup> Silberer, *Jahrbuch der Psychoanalyse*, Bd. iii., S. 680.

allgemeinste Bedingung der Symbolbildung, die sowohl den normalen als den krankhaften Phänomenen in der Individual— wie in der Völkerpsychologie gerecht wird, in einer *Unzulänglichkeit* des Auffassungsvermögens seinem Gegenstande gegenüber oder, wie man auch sagen könnte, in einer *apperzeptiven Insuffizienz* erblicke.' ('In agreement with the majority of writers, I see the chief and most general condition of symbol-formation—valid with the phenomena of health and disease, in the individual and in the race—in an *inadequacy* of the apprehensive faculty in regard to its object, or, as one might also say, in an *apperceptive insufficiency*.) We may admit the presence of this factor so far as it goes, but I think it can be shewn that what passes for an apperceptive incapacity is very often a non-functioning that is due to other causes than incapacity. It is true that the primitive mind very often does not discriminate, but that is not because it cannot, for when it is necessary it does so to a remarkable extent.

The second factor leading to lack of discrimination is that when the primitive mind is presented with a new experience it seizes on the resemblances, however slight, between it and previous experiences; and this for two reasons, both of which have to do with the pleasure-pain principle. The first of these is that the mind—above all the primitive mind, which is ruled by this principle—notices most what most *interests* it personally, what, therefore, is most pleasurable or most painful. It ignores distinctions between two ideas when they are indifferent to it, and notices only those that are interesting. Where one is so apt to go wrong in this matter is in the assumption, difficult to avoid in practice, that the interests of the primitive mind are necessarily the same as our own conscious ones, the truth being that the relative proportion of interest is often astoundingly different in the two cases. The unexpected associations made by a child when confronted by a novelty are often very amusing to us—for example, the remark that soda-water tastes like a foot that has gone to sleep. Darwin's oft-quoted example of the child who, on first seeing a duck, onomatopoeically named it 'quack,' and then later applied this word also to flies, wine, and even a sou (which had eagle's wings), is rightly explained by Meumann,<sup>1</sup> who points out that the child noticed only what interested him—namely, the flying and the relation to fluid, and so used this word to denote these

<sup>1</sup> Meumann, 'Die Sprache des Kindes,' 1903.



two phenomena in whatever form they occurred; it was not the duck as a whole that was named 'quack,' but only certain abstracted attributes, which then continued to be called by the same word. The second of the two reasons referred to above is of a more general and far-reaching order. When a new experience is presented to the mind it is certainly *easier* to perceive the points of resemblance between it and previous familiar experiences. One often hears, for instance, such a remark as 'The ideas in that book were too strange for me to take in on first reading it; I must go through it again before passing an opinion on it.' In such a case if one notices only the points of resemblance there is effected an obvious economy of effort, which is a fundamental human trait: Ferrero<sup>1</sup> aptly refers to it under the terms 'la loi de l'inertie mental' and 'la loi du moindre effort.' This is, of course, governed by the hedonic pleasure-pain principle, though the fact is often obscured by writers on ethics. The association between ease and pleasure, and between difficulty or labour and pain, is a primordial one, and is well illustrated by the words used to denote them. The word 'painful' was used in Middle English in the sense of industrious. The French *travail*, work, is cognate with the Italian *travaglio*, which means suffering; the Italian word for work, *lavoro*, comes from the Latin *labor*, pain. The Greek *πένομαι* means both to work and to suffer, as does the Hebrew *assab*. We appropriately refer to child-birth as labour.

The third factor in preventing discrimination is not sharply to be distinguished from the last one, though it refers rather to the 'reality principle.' It is clear that the appreciation of resemblances facilitates the assimilation of new experiences. Our instinctive tendency in such a situation is to link on the new to the old, to search for common ground. If we can relate the new experience in some way to what is already familiar, then we can 'place' it and understand it; it becomes intelligible. The whole meaning of comprehension and explanation is the referring of the unknown to the known. In this way the process of fusion or identification aids our grasp of reality and makes it possible for us to deal with it more adequately. It is true that it is a process with grave possibilities of defects, it being an everyday occurrence that we assimilate the new too closely in terms of the old, but to assimilate it at least in some degree is the only way in which we can deal with it at all.

<sup>1</sup> Ferrero, *op. cit.*, pp. 6, 18, 23.

Rank and Sachs<sup>1</sup> have an illuminating passage on the relation of symbolism to this primary identification in the service of adaptation: 'Psychologisch betrachtet bleibt die Symbolbildung ein Regressivphänomen, ein Herabsinken auf eine bestimmte Stufe bildlichen Denkens, die sich beim vollwertigen Kulturmenschen in deutlichster Ausprägung in jenen Ausnahmeständen findet, in denen die bewusste Realanpassung entweder teilweise eingeschränkt ist, wie in der religiösen und künstlerischen Ekstase, oder gänzlich aufgehoben erscheint, wie im Traum und den Geistesstörungen. Dieser psychologischen Auffassung entspricht die kulturhistorisch nachweisbare ursprüngliche Funktion der *der Symbolisierung zugrunde liegenden Identifizierung*<sup>2</sup> als eines Mittels zur Realanpassung, das überflüssig wird und zur blossen Bedeutung eines Symbols herabsinkt, sobald diese Anpassungsleistung geglückt ist. So erscheint die Symbolik als der unbewusste Niederschlag überflüssig und unbrauchbar gewordener primitiver Anpassungsmittel an die Realität, gleichsam als eine Rumpelkammer der Kultur, in die der erwachsene Mensch in Zuständen herabgesetzt oder mangelnder Anpassungsfähigkeit gerne flüchtet, um seine alten, längst vergessenen Kinderspielzeuge wieder hervorzuholen. Was spätere Generationen nur noch als Symbol kennen und auffassen, das hatte auf früheren Stufen geistigen Lebens vollen realen Sinn und Wert. Im Laufe der Entwicklung verblasst die ursprüngliche Bedeutung immer mehr oder wandelt sich sogar, wobei allerdings Sprache, Folklore, Witz, u.a., oft Reste des ursprünglichen Zusammenhangs in mehr oder weniger deutlicher Bewusstheit bewahrt haben.' ('Psychologically considered, symbol-formation remains a regressive phenomenon, a reversion to a certain stage of pictorial thinking, which in fully civilised man is most plainly seen in those exceptional conditions in which conscious adaptation to reality is either restricted, as in religious and artistic ecstasy, or seems to be completely abrogated, as in dreams and mental disorders. In correspondence with this psychological conception is the original function, demonstrable in the history of civilisation, of the identification underlying symbolism<sup>3</sup> as a means to adaptation to reality, which becomes superfluous and sinks to the mere significance of a symbol as soon as this task of adapta-

<sup>1</sup> Rank and Sachs, *op. cit.*, S. 17.

<sup>2</sup> Note how carefully the authors distinguish between identification and symbolism in this connection.

<sup>3</sup> *Ibid.*

tion has been accomplished. Symbolism thus appears as the unconscious precipitate of primitive means of adaptation to reality that have become superfluous and useless, a sort of lumber-room of civilisation to which the adult readily flees in states of reduced or deficient capacity for adaptation to reality, in order to regain his old, long-forgotten playthings of childhood. What later generations know and regard only as a symbol had in earlier stages of mental life full and real meaning and value. In the course of development the original significance fades more and more or even changes, though speech, folk-lore, wit, etc., have often preserved more or less plain traces of the original association.)

The two last factors mentioned, the importance of the pleasure-pain principle and of adaptation to reality in respect to primitive lack of discrimination, throw some light on one of the most puzzling phenomena of symbolism—namely, the extraordinary predominance of sexual symbols. A Swedish philologist, Sperber,<sup>1</sup> has in a remarkable essay elaborated the theory, which has been several times suggested on other grounds by biologists, that sexual impulses have played the most important part in both the origin and later development of speech. According to this theory, which is supported by very weighty considerations, the earliest speech sounds were those that served the purpose of calling the mate (hence the sexual importance of the voice to this day), while the further development of speech roots accompanied the performance of work. Such work was done in common, and, as is still customary enough, to the accompaniment of rhythmically repeated speech utterances. During this, sexual interest was attached to the work, as though, so to speak, primitive man reconciled himself to the disagreeable but necessary task by treating it as an equivalent of, and substitute for, sexual functioning. Words used during these common tasks thus had two meanings, denoting the sexual act and the equivalent work done respectively. In time the former meaning became detached and the word, now applying only to the work, thus 'desexualised.' The same would happen with other tasks, and so a store of speech roots gradually accumulated, the original sexual significance of which had been lost. Sperber then illustrates, with an extensive material, the fact that words having a sexual connotation

<sup>1</sup> Sperber, 'Über den Einfluss sexueller Momente auf Entstehung und Entwicklung der Sprache,' *Imago*, 1912, Jahrg. i., S. 405.

possess a perfectly astounding capacity for development and extension into non-sexual fields. Partly owing to the careful expurgation of our etymological dictionaries, it is not generally known that an enormous number of common words in present-day use have been derived in historical times from this source, attaining their present meaning through a primary sexual association that has now been forgotten. In the light of work like Sperber's we begin to understand why there is such an amazing number of symbols for sexual objects and functions, and, for instance, why weapons and tools are always male symbols, while the material that is worked on is always female. The symbolic association is the relic of the old verbal identity; things that once had the same name as a genital organ can now appear in dreams, etc., as a symbol for it. Freud<sup>1</sup> aptly likens symbolism to an ancient speech that has almost vanished, but of which relics still remain here and there.

According, then, to the view here developed, the identification that underlies symbolism is mainly determined by the two factors discussed above, which may be summarised as the tendencies to seek pleasure and avoid pain, and to learn to deal with reality in the easiest and most sparing way. It was just the way in which primitive man must have met the world, the desire for ease and pleasure struggling with the demands of necessity. He succeeded by making a compromise in which he sexualised his tasks. A few examples may be given from the vast subject of the associations between ploughing in particular, or agriculture in general, and sexual activities. Most of the tools used are phallic symbols (the word itself is the commonest vulgar designation), a statement that can easily be proved from folk-lore and mythology, while the conception of the earth as woman, and especially as mother, is universal and fundamental.<sup>2</sup> Sophocles' *Œdipus* repeatedly speaks of 'the mother-field from which I sprouted.' Shakespeare makes *Boult*, on the point of deflorating the recalcitrant *Marina*, say: 'An if she were a thornier piece of ground than she is, she shall be ploughed.'<sup>3</sup> The words for 'plough' in Latin, Greek, and Oriental languages were customarily used also to denote the sexual act,<sup>4</sup> and we still use such words as

<sup>1</sup> Freud, 'Vorlesungen zur Einführung in die Psychoanalyse,' Zweiter Teil; 'Der Traum,' 1916, S. 181.

<sup>2</sup> See Dieterich, 'Mutter Erde,' 2<sup>e</sup> Aufl., 1913.

<sup>3</sup> 'Pericles,' Act IV., Sc. vi.

<sup>4</sup> Kleinpaul, 'Das Leben der Sprache,' Bd. iii., 1893, S. 136.

'seed,' 'fertility,' 'barrenness,' for vegetation as well as for human beings. The association becomes quite manifest in the well-known fertilising magic, a custom that lasted late into civilised times; it consisted in a naked pair performing the sexual act in the field, so as to encourage the latter to imitate their example. The Greek words for garden, meadow, field, common female symbols, were used also to denote the female genital organ.

If, as is here maintained, the individual child re-creates such symbolism anew—*i.e.*, if he (largely unconsciously) perceives these comparisons which are alien to the adult conscious mind—then it is plain that we shall have radically to revise our conception of the infantile mind, and especially in regard to sexuality. This has already been done by Freud on other grounds, after he had empirically discovered from psycho-analyses that the unconscious mind of the child, and even the conscious one, is much more sexual in character than had ever been supposed.<sup>1</sup> In fact, the whole process to which he has given the name 'sublimation'<sup>2</sup> is probably an ontogenetic repetition of the one just described, whereby sexual energy is gradually drained into other non-sexual channels. The activity—tasks in the life of primitive man, games in that of the child—becomes by degrees independent of this source of interest that is not inherent in itself, but the ancient association remains in the unconscious, where in suitable circumstances it may again manifest itself in the form of symbolism.

It will not have escaped the attentive reader that in this discussion all the stress has been laid on the defective discrimination shewn by the primitive mind, while nothing has been said about the respects in which it shews an unwonted power of discrimination.<sup>3</sup> Yet this also is a striking characteristic of both children and savages, though not of the unconscious mind. In the latter case, that of savages, it has curiously been used as an argument in support of the current theory of the defective intellectual powers on the part of the primitive, but, in my judgement, closer consideration proves just the contrary. Herbert Spencer, in his 'Principles of Sociology,' has collected a series of examples where there are many separate words for

<sup>1</sup> Freud, 'Drei Abhandlungen,' *op. cit.*

<sup>2</sup> See Chapter XXXV.

<sup>3</sup> A consideration which in itself finally proves that the prevalent hypothesis of the primitive lack of discrimination—that this is due to intellectual incapacity—is inadequate to cover the whole ground.

individual acts, but no generic one for the act itself—thus, thirty words for washing different parts of the body and none for the act of washing. The Arabians are said to have over 500 words to designate lions in various aspects, but no word for lion; 5,744 for camels, but none for a camel. This is certainly a powerful argument against any inherent incapacity for discrimination, as the holders of that hypothesis maintain exists. Whereupon they simply change their ground, and, being bent on convicting the primitive of intellectual inferiority, they now quote such facts to shew that he is incapable of abstracting; this is, at all events, a different thing from being incapable of discriminating. Thus, Stout<sup>1</sup> writes: 'It certainly appears odd that a lower grade of intellectual development should be marked by superior nicety and precision of discriminative thought. The truth is that these distinctions, so plentiful in savage languages, are due rather to an incapacity for clearly apprehending identity in difference than to a superior power of apprehending difference in identity.' This argument, however, has been very neatly disposed of by Hocart,<sup>2</sup> who has pointed out that the key to the whole question is the matter of interest. Comparing the Fijian language with English, as an example, he shews that the Fijian handles in gross where we do in retail, but that the converse is equally true. Where our interest is very great we have no generic terms, because the differences are so important as to overshadow the resemblances; in such cases the Fijian, with less interest, will use a general and often vague term to cover the whole. The distinction, for instance, is so important among a bull, a cow, an ox, a steer, a calf, a bullock, a heifer, and so on, that we have no single word to denote the species as a whole except cattle, which is collective. Indeed, the same law may be observed to hold good even between different classes in the same country. The laity uses the generic term 'horse,' but a horse-dealer—*i.e.*, some one with a great interest in the matter—has no such generic term; to him a horse is a certain variety of the animal and is different from a stallion or a mare. Similarly, we speak of ships as a class of objects of which there are many varieties, but to a sailor a ship is definitely a vessel with a bowsprit and at least two square-rigged masts; the distinctions between different vessels are to him more important than the resemblances.

<sup>1</sup> Stout, 'Analytic Psychology,' 1902, vol. ii., p. 231.

<sup>2</sup> Hocart, *British Journal of Psychology*, vol. v., p. 267.

It is well known that abstract terms arise originally from concrete ones; we see here that they characteristically arise as a generalisation from a single example: thus, the order of development seems to be concrete, general, abstract. This conclusion can also be supported from consideration of the order of development of the parts of speech. Thus, as Wundt shews,<sup>1</sup> adjectives, which are of relatively late development, had originally the same form as substantives, and were, to begin with, merely special nouns. For example, a brown leaf and a green leaf were two distinct words, having nothing in common with words for other objects that are red or green. Then one of these 'green' words, one where the element of greenness was very prominent (perhaps with leaves), was extended to other objects when it was wished to call special attention to the green aspect of this object—*e.g.*, a green-leaf cloth—losing in time its substantival connotation of leaf. It is known, for instance, that the Greenlanders have separate names for each finger, and that when they want to use a name for fingers in general they employ the name of the principal one (the thumb) for this purpose. They are here reaching from the particular to the general, the first stage of conceiving the abstract.

It will be seen that our custom of using the word 'ship' to denote all sea-going vessels constitutes in type a reversion to the primitive, infantile custom of not discriminating from relative lack of interest, and so, in a sense, is all generalisation. The essential difference between what is called a valuable generalisation—*e.g.*, a scientific one—and the simple grouping together characteristic of the primitive mind resides in the practical worth of the generalisation. To the child, no doubt, its identifications are as useful personally as a great generalisation is to a man of science, but, while they may be equal subjectively, they are not objectively. The second kind takes into better account the facts of external reality, is altogether on a more real and less subjective plane; in short, there is all the difference that exists between the simple pleasure-pain principle and the reality principle. From this point of view there opens the possibility, which cannot be followed up here, of a theory of scientific discovery, invention, etc., for psychologically this consists in an overcoming of the resistances that normally prevent regression towards the infantile, unconscious tendency to note 'identity in differences,' the whole being, of course,

<sup>1</sup> Wundt, 'Völkerpsychologie,' Bd. i., Teil ii., 1904, S. 289.

worked out on the plane of reality, though the impetus comes from the association between the unconscious ideas that the 'real' external ones can symbolise.

We have next to turn to the second of the two questions raised at the beginning of this section—namely, why it is that of two ideas unconsciously associated one always symbolises the other and never the reverse. To illustrate by an example what is meant: a church tower in a dream, as in anthropology, often—though, of course, by no means always—symbolises the phallus, but a phallus in a dream is never a symbol of a church tower. This fact alone demolishes the hypothesis that symbolism is due solely to any apperceptive insufficiency, from an inability to perceive differences, because in that case there would be no reason why the symbolism should not be reciprocal. The point is clearly put by Ferenczi, who writes:<sup>1</sup> 'One was formerly inclined to believe that things are confounded because they are similar; nowadays we know that a thing is confounded with another only because certain motives for this are present; similarity merely provides the opportunity for these motives to function.' Assuming, then, that two ideas have become closely associated, in the way described above, what are the motives that lead to one of the ideas replacing the other, whereas the reverse never occurs? The answer will, of course, be found only by consideration of the material content of the ideas themselves. The two most prominent features that strike one in regard to these are: First, that the ideas symbolised are the most primordial that it is possible to conceive, and that they are the ideas invested with the strongest primary interest. Secondly, that attaching to them all are powerful affective and conative processes which are in a state of psychical repression, being thus inhibited from entry into consciousness and free external expression. They are, in fact, the most completely repressed mental processes known.

It is impossible not to connect these two considerations. It is a well-established observation of clinical psychology that when a strong affective tendency is repressed it often leads to a compromise-formation—neurotic symptoms being perhaps the best-known example—in which both the repressed and the repressing tendencies are fused, the result being a substitution-product. From this it is a very slight step to infer that sym-

<sup>1</sup> Ferenczi, 'Contributions to Psycho-Analysis,' English Translation by Ernest Jones, 1916, p. 237.



bols are also of this nature, for it is known that they, like other compromise-formations, are composed of both conscious and unconscious elements. Symbolism certainly plays an important part in many neurotic symptoms; a castration complex, for instance, often results in a phobia of blindness, the eye being one of the commonest somatic phallic symbols.<sup>1</sup> That symbolism arises as the result of intrapsychical conflict between the repressing tendencies and the repressed is the view accepted by all psycho-analysts. It is implicit, for instance, in Ferenczi's<sup>2</sup> actual definition of symbols as 'such ideas as are invested in consciousness with a logically inexplicable and unfounded affect, and of which it may be analytically established that they owe this affective over-emphasis to *unconscious* identification with another idea, to which the surplus of affect really belongs. Not all similes, therefore, are symbols, but only those in which the one member of the equation is repressed into the unconscious.' According to him, the most primary kind of symbolism is probably the equating of one part of the body with another, one subsequently replacing the other;<sup>3</sup> there thus comes about an over-emphasis of the upper part of the body in general, interest in the lower half being repressed (Freud's 'displacement from below upwards').

All psycho-analytical experience goes to shew that the primary ideas of life, the only ones that can be symbolised—those, namely, concerning the bodily self, the relation to the family, birth, love, and death—retain in the unconscious throughout life their original importance, and that from them is derived a very large part of the more secondary interests of the conscious mind. As energy flows from them, and never to them, and as they constitute the most repressed part of the mind, it is comprehensible that symbolism should take place in one direction only. Only what is repressed is symbolised; only what is repressed needs to be symbolised. This conclusion is the touchstone of the psycho-analytical theory of symbolism.

#### IV. FUNCTIONAL SYMBOLISM.

The theory of symbolism just described is manifestly not complete; it does not, for instance, explain why only certain possible comparisons are used as symbols, nor why some symbols

<sup>1</sup> See Ferenczi, 'On Eye Symbolism,' *op. cit.*, pp. 228-232.

<sup>2</sup> *Ibid.*, *op. cit.*, p. 234.

<sup>3</sup> *Ibid.*, *op. cit.*, p. 232.

are found predominantly in certain fields—*e.g.*, dreams—and others mainly in different fields—*e.g.*, wit. While, however, the theory needs amplifying and supplementing, I would maintain that it does at least begin to introduce order into a confused subject, notably in the distinction it establishes between symbolism and other forms of figurative representation.

Further progress in clarification may be gained by examination of the work of what may be called the post-psycho-analytical school of writers, Adler, Jung, Maeder, Silberer, Stekel, with their English followers, Eder, Long, and Nicoll. The feature common to the members of this school is that, after gaining some knowledge of psycho-analysis, they have proceeded, by rejecting the hardly-won knowledge of the unconscious, to re-interpret the psycho-analytical findings back again into the surface meanings characteristic of pre-Freudian experience, retaining, however, the psycho-analytical technical terms, though using them with quite different implications. The conception of symbolism has especially suffered from the confusion thus re-introduced, for it has been diluted to such an extent as to lose all exact descriptive value. Thus, Jung makes constant use of the term 'Libido-symbol,' but, as *Libido* means to him psychical energy in whatever form and symbol means simply any form of indirect representation, the term comes to mean merely 'any mental process that is substituted for any other.' He does not hesitate to use the term 'symbol' in precisely the reverse sense from that in which it is used in psycho-analysis. Take the case of a patient where an associative connection has been established between a given symptom (*e.g.*, inhibition in performing a particular act) and an unconscious incest complex.<sup>1</sup> By the psycho-analyst the symptom would be regarded as the result of the complex and, in certain circumstances, as a symbol for it; Jung, on the other hand, calls the complex the symbol of the symptom—*i.e.*, according to him, an unconscious idea may be a symbol of a conscious one.

Silberer's work is in some respects in a different category from that of the other writers mentioned, for he is the only member of this school who has made a positive contribution to the theory of symbolism; unfortunately, incautious presentation of even this has made it possible for other writers, particularly Stekel, to exploit it in a reactionary sense. His work,

<sup>1</sup> The example is taken from Jung's 'Collected Papers on Analytical Psychology,' Second Edition, 1917, pp. 219, 220.

which is incorporated in half a dozen essays,<sup>1</sup> deserves, however, to be carefully read by any one seriously interested in the problems of symbolism, and a short abstract of it will be attempted here.

In his first contribution already Silberer set forth the two most original points in his work, both of which he later expanded in great detail; one relates to the conditions favourable to the production of symbolism, the other to the distinction between different types of symbolism. As will be seen, he uses the term in a much wider sense than that given it in the two preceding sections of this paper. His starting-point was the personal observation that, when he was endeavouring to think out a difficult problem in a state of fatigue or drowsiness, a visual picture appeared which, on analysis, was soon seen to be a pictorial representation of the ideas in question. To this he gave the perhaps not very appropriate term of 'auto-symbolic phenomenon.' This itself he divides into three classes, according to the content of what is symbolised: (1) 'Functional phenomena,' in which is represented *the way in which* the mind is functioning (quickly, slowly, lightly, heavily, cheerfully, carelessly, successfully, fruitlessly, strainedly, etc.). (2) 'Material phenomena,' in which *what* the mind is thinking is symbolised—*i.e.*, ideas. (3) 'Somatic phenomena,' in which bodily sensations are symbolised. Silberer<sup>2</sup> emphatically denies that in this division there is implied any manner of genetic difference between the three classes; in my opinion, this is an important error which becomes later the source of many misunderstandings. He holds, further,<sup>3</sup> that the functional symbolism never occurs alone, but only as an accompaniment of the others.

We will next follow Silberer's development of the first question, concerning the conditions under which symbolism arises. The first situation he studied was where there was an equal-sided conflict between the desire to go to sleep and some factor disturbing this, either mental (effort to work, etc.) or

<sup>1</sup> Silberer, 'Bericht über eine Methode, gewisse symbolische Halluzinations-Erscheinungen hervorzurufen und zu beobachten,' *Jahrbuch der Psychoanalyse*, 1909, Bd. i., S. 513; 'Von den Kategorien der Symbolik,' *Zentralblatt für Psychoanalyse*, Jahrg. ii., S. 177; 'Phantasie und Mythos,' *Jahrbuch*, Bd. ii., S. 541; 'Symbolik des Erwachens und Schwellensymbolik überhaupt,' *Jahrbuch*, Bd. iii., S. 621; 'Über die Symbolbildung,' *ibid.*, S. 661; 'Zur Symbolbildung,' *Jahrbuch*, Bd. iv., S. 607.

<sup>2</sup> Silberer, *op. cit.*, *Jahrb.* i., S. 515.

<sup>3</sup> *Ibid.*, *op. cit.*, *Jahrb.* ii., S. 558; *Jahrb.* iii., S. 688; *Jahrb.* iv., S. 610.

physical. It will be noticed that this differs from the psychical situation which, according to Freud, is responsible for dreams merely in that in the latter case the desire is to continue sleeping; in both cases it is desire for sleep *versus* some disturbance. He soon described the conditions in wider terms,<sup>1</sup> the conflict being between the effort towards apperception of any idea on the one side and any factor that made this difficult on the other; the latter factor may be either temporary, such as sleepiness, fatigue, illness, and so on, or more permanent, such as relative intellectual incapacity in comparison with the complexity of the idea. In his most elaborate analysis of the psychical situation he formulated the following factors.<sup>2</sup> Symbolism tends to arise either when one's mental capacity is *no longer* equal to grasping a set of ideas that one formerly could, the result of fatigue, illness, etc., or else when the mental capacity of the individual or of the race is *not yet* able to grasp an idea which some day in the future it will. In both cases it will be possible on some other occasion to recognise that the symbolism is either a regression to or a non-emergence from an inferior and more primitive mode of thought, more primitive both in being sensorial instead of conceptual and in being associative instead of apperceptive (in Wundt's terminology). Now, the factors concerned in symbolism can be divided into two groups: (1) What Silberer calls the *positive factors*, those tending to bring a given idea into consciousness or to keep it there; and (2) the *negative factors* that prevent it from entering consciousness in an apperceptive form, and only allow it to enter in a sensorial form—*i.e.*, as symbolism.

Silberer derives the energy of the positive factors from two sources: in the first place from the affect investing the idea in question—*i.e.*, from the dynamic forward-moving tendency of the mental process itself; and, in the second place, from the conscious wish to think in this particular direction. He writes (of the positive factor):<sup>3</sup> 'Er hat den erforderlichen Anspruch auf meine Aufmerksamkeit schon von selbst, durch den Affekt, den er mit sich führt, oder ich erteile ihm diesen Anspruch, indem ich den für mein Gefühlsleben an sich uninteressanten Gedanken kraft meines Willens aufgreife und festhalte, ihn also absichtlich meiner Aufmerksamkeit als interessant emp-

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* ii., S. 612; *Jahrb.* iii., S. 676.

<sup>2</sup> *Ibid.*, *op. cit.*, *Jahrb.* iii., S. 683, 684, 717; *Jahrb.* iv., S. 608, 611.

<sup>3</sup> *Ibid.*, *op. cit.*, *Jahrb.* iv., S. 611.

fehle.' ('It either makes the necessary claim on my attention on its own account, through the affect it brings with it, or I grant it this claim by using my will-power to select and hold to a thought which in itself is of no interest to my feelings, and so deliberately recommend it to my attention as an interesting matter.') This division is simply the psychologist's distinction between passive and active attention. To the psychoanalyst the difference is that in the former case the interest (to the ego) is inherent and direct, whereas in the latter case it is due to an indirect association.

The negative factors he also divides into two classes, both of which result in a state of relative apperceptive insufficiency (see quotation in Section III.). They are (1) intellectual in kind, either imperfect development (individual or racial) of mental capacity or a transitory weakening of the apperceptive function through a general diminution of mental energy (sleep, fatigue); (2) affective, which either hinder the entrance of the idea by means of the pleasure-pain mechanism (repression) or allow autonomous complexes to rob the function of attention of a part of its energy and so lead to a general diminution of the apperceptive capacity. The affects thus have both a specific and a general effect as negative factors. In addition, they often also act positively, for they themselves may force their way into consciousness, in symbolic guise, instead of the other ideas they have just inhibited. It is clear that in this last point Silberer is referring to repressing forces, to the inhibiting affects that go to make up Freud's 'censor,' and we shall see that it is to this aspect of the conflict that he devotes most attention. His attitude to Freud's conception of repression and censorship is indicated by his remark that the resistance shewn in dream analysis is the reverse side (*Kehrseite*) of the apperceptive insufficiency.<sup>1</sup>

Silberer recognises that the apperceptive weakness can never be the determining cause of any specific symbol,<sup>2</sup> and was thus led to formulate the statements above quoted regarding the 'positive factor'—*i.e.*, the determining cause. Nevertheless, his predominant interest is with the other side of the subject—namely, with the general conditions that predispose to symbolism. He is chiefly concerned with the factors that *allow* symbolism to occur more readily, rather than with the operative factors that actually bring it about; just as most psychologists

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* iii., S. 682.

<sup>2</sup> *Ibid.*, *loc. cit.*, S. 678.

deal with the factors that favour the process of forgetting, not with those that actually make us forget. So when he comes to define the different kinds of processes grouped under the name symbolism—the task attempted in this paper—it is from this side alone (of general predisposition) that he attacks the problem. Speaking of the manifold causes of apperceptive insufficiency, he says:<sup>1</sup> 'Und damit ist eigentlich der Schlüssel gegeben zur einheitlichen Auffassung aller der Arten von Symbolbildung,<sup>2</sup> die uns begegnen mögen. Denn nicht in dem Vorgange selbst scheinen mir die wesentlichen Unterschiede bei den verschiedenen Symbolphänomenen zu liegen; d.h. wenn sich auch die Symbolphänomene in Arten unterscheiden, so sind die Unterschiede in ihnen sekundäre Erscheinungen, die nicht die Symbolbildung als solche betreffen. Sondern die Unterschiede liegen primär in denjenigen Verhältnissen, welche die apperceptive Insuffizienz hervorrufen.' ('It is here we really have the key for a unitary conception of all the kinds of symbol-formation<sup>2</sup> that are to be found. For the essential differences in the different phenomena of symbolism do not seem to me to reside in the process itself—*i.e.*, although these phenomena fall into groups, the differences are secondary manifestations in them which do not concern the symbol-building as such. On the contrary, the differences reside primarily in the factors that bring about the apperceptive insufficiency.') The classification effected on this basis will be considered presently.

We have next to pursue the development of Silberer's ideas on the nature of the different forms of symbolism, as distinguished according to its content (see above). To the conception of 'somatic phenomena' he adds nothing further, and I will only remark that it is much more closely allied to that of 'functional' than to that of 'material phenomena.' These latter two groups of phenomena correspond so closely with the groupings of symbols based on another mode of classification that they may be considered together with them. In this second classification Silberer<sup>3</sup> divides symbols, not according to their content, as formerly, but according to the factors that have led to the apperceptive insufficiency which he regards as the fundamental basis of all symbolism. The two classes thus

<sup>1</sup> Silberer, *loc. cit.*, S. 683.

<sup>2</sup> The significance of this passage is heightened by the fact that the author is here using the word 'symbolism' in almost the same comprehensive sense in which the term 'indirect representation' is used in this paper.

<sup>3</sup> Silberer, *op. cit.*, *Jahrb.* iii., S. 688; iv., S. 609.

distinguished he calls merely the first and second type respectively, but he makes it fairly plain elsewhere<sup>1</sup> that the material phenomenon is characteristic of the former and the functional of the latter. The first type is that which arises on the basis of an apperceptive insufficiency of purely intellectual origin, where the symbolised idea is not hindered by the influence of any affective complex; the second type arises, on the other hand, on the basis of an apperceptive insufficiency of affective origin. So the classification founded on the content (though not the nature) of the positive factors<sup>2</sup> comes to very much the same result as that founded on the variety of the negative or predisposing factors,<sup>3</sup> and we may use the terms 'material' and 'functional' to denote the two types respectively.

We saw above that Silberer's first conception of *functional symbolism* was that it represented the way in which the mind was working (slowly, quickly, etc.). In my experience, and, I may say, also in that of Professor Freud (oral communication), this is a very exceptional occurrence, and one that probably indicates a specially philosophic and introspective type of mind, such as Silberer's own (from which most of his examples are taken). Further, I am more than doubtful whether the functioning of the mind is ever pictorially represented apart from the occasions on which the mind actually feels, or thinks of, this functioning. In fact, I think this can be shewn to be so in the case of an interesting sub-variety of functional symbolism to which Silberer has given the name of 'threshold-symbolism' (*Schwellessymbolik*),<sup>3</sup> where the passage from one state of consciousness to another—*e.g.*, into or out of sleep—is indicated by appropriate imagery.

However this may be, Silberer soon enlarged the conception of functional symbolism in a quite surprising manner. He began by regarding the process of 'repression' as a mode of mental functioning, and coined for the pictorial representation of it the term 'cryptogenic symbolism.'<sup>4</sup> He then extended the conception to include practically all functions of the mind except the ideational, and to refer especially to all affective processes.<sup>5</sup> Here it is no longer a question of the *way in which* the mind is working, but of *what* is working in the mind.

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* iii., S. 717.

<sup>2</sup> For the meaning of these terms see above, p. 161.

<sup>3</sup> Silberer, *op. cit.*, *Jahrb.* iii., S. 621-660.

<sup>4</sup> *Ibid.*, *op. cit.*, *Jahrb.* ii., S. 580, 581.

<sup>5</sup> *Ibid.*, *op. cit.*, *Jahrb.* iii., S. 698, 717, 719.

According to him, therefore, the greater the extent to which affective moments are in play in the production of a given symbol, the more definitely does this belong to the second type of symbolism, characterised by the 'functional phenomenon.' This view is also in harmony with the very interesting remarks he makes on the relation of functional symbolism to gesture, language, mimicry,<sup>1</sup> etc., for, of course, the latter is simply an expression of the emotions.

If, now, we recall the strict sense of the word 'symbol,' as used in the previous section of this paper, it is evident that a symbol of that kind represents not only the idea symbolised, but also the affects relating to it, or, at all events, some of these. It does this in the same way as the simile indicates an adjectival attribute—namely, by likening the object in question to another one that obviously possesses this attribute, except that in the case of symbolism, the one idea is altogether replaced by the other. The affective attitude in this way indicated may be either a positive or a negative one—*i.e.*, it may be either unconscious or conscious, the primary attitude or that resulting from repression. An example of the latter would be the well-known serpent symbol. This symbolises at the same time the phallus itself by means of the objective attributes common to both (shape, erectibility, habits—of emitting poison and of creeping into holes, etc.), and also a subjective attitude towards it, compounded of fear, horror, and disgust, that may in certain circumstances be present—*e.g.*, when the subject is a prudish virgin and the object belongs to a distasteful person.<sup>2</sup> Now, Silberer would call the two things here symbolised material and functional phenomena respectively, and he considers that psycho-analysts pay too much attention to the former to the relative exclusion of the latter; the explanation of this, however, is that in the interpretation of such symbols psycho-analysts are at the moment chiefly concerned with the positive meaning, the negative aspects being dealt with in another connection (resistance, repression, etc.). The noteworthy point here is that Silberer takes into consideration almost exclusively the negative or secondary affects, so that as a matter of practice the term 'functional symbolism' comes to be almost synonymous with the psycho-analytical 'censor'—*i.e.*, the inhibiting affects, or, at most, the positive affects that have been *modified*

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* ii., S. 547, 549; iii., S. 690.

<sup>2</sup> The positive affects of the complex are obviously also represented, else there would be no such thing as serpent-worship.



by the censor.<sup>1</sup> For Silberer, therefore, a psycho-analytical symbol is composed of a material phenomenon (idea symbolised) and a functional one (reactionary affects), both of which are usually conscious processes or nearly so, and he tends to leave out of account the real reason for the whole symbolism—namely, the unconscious, positive affects that are not allowed to appear in consciousness. His overlooking of this essential aspect of the problem accounts also for his curious statement<sup>2</sup> that the universality, or general validity and intelligibility, of a symbol varies inversely with the part played in its causation by affective factors, for it is just these symbols that are most characteristically universal. Relative unfamiliarity with the unconscious itself has here led him grossly to under-estimate the extent to which primitive affective trends are generic, though, it is true, he does verbally admit this in a limited degree.<sup>3</sup>

It is probably also this unfamiliarity, or lack of conviction, which leads Silberer to say that 'material' symbols can change into 'functional' ones, a matter which is worthy of special attention, since examination of it will, I think, reveal the essential differences between true symbolism and metaphor. He writes: 'Es hat sich in neuerer Zeit bei psychanalytischen Untersuchungen gezeigt, dass Symbole, die ursprünglich material waren, in funktionale Verwendung übergehen. Analysiert man längere Zeit hindurch die Träume einer Person, so wird man finden, dass gewisse Symbole, die zuerst vielleicht nur gelegentlich auftraten zur Bezeichnung irgend eines Vorstellungsinhaltes, Wunschinhaltes, usw., wiederkehren und so zur stehenden Figur oder 'typischen Figur' werden. Und jemehr sich eine solche typische Figur befestigt und ausprägt, um so mehr entfernt sie sich von der zuerst gehalten ephemeren Bedeutung; umso mehr wird sie zum symbolischen Stellvertreter einer ganzen Gruppe gleichartigen Erlebens, eines seelischen Kapitels sozusagen; bis man sie schliesslich als den Repräsentanten einer seelischen Strömung (Liebe, Hass, Tendenz zum Leichtsinne, zur Grausamkeit, zur Ängstlichkeit, usw.) schlechthin ansehen kann. Was sich da vollzogen hat, ist ein Übergang vom Materialen zum Funktionalen auf dem Weg einer *Verinnerlichung*, wie ich es nenne.' ('Recent psycho-analytic investigations have shewn that symbols which origin-

<sup>1</sup> In short, the affects of the preconscious, not of the unconscious.

<sup>2</sup> Silberer, *op. cit.*, *Jahrb.* iii., S. 689, 690; iv., S. 614.

<sup>3</sup> *Ibid.*, *op. cit.*, *Jahrb.* iii., S. 690.

<sup>4</sup> *Ibid.*, 'Probleme der Mystik und ihrer Symbolik,' 1914, S. 153.

ally were material come to be used in a functional sense. If one analyses some one's dreams for a long time one finds that certain symbols, which perhaps at first made only an occasional appearance to denote the content of some idea or wish, keep recurring, and so become a standing or typical figure. And the more established and pronounced a typical figure of this sort becomes, the more do they recede from the original ephemeral signification, the more do they become the symbolic representative of a whole group of similar experiences, of, so to speak, a mental chapter, until finally one may regard them as simply the representatives of a mental tendency [love, hate, tendency to frivolity, to cruelty, to apprehensiveness, etc.]. What has happened there is a transition from the material to the functional by means of what I call an internal intensification.<sup>1</sup>) This conclusion is, in my opinion, a fallacious interpretation of a correct observation. The observation is that after a patient has discovered the meaning of a (true) symbol he often strives to weaken and explain away the significance of this by trying to give it some other 'functional,' more general (and therefore more harmless) interpretation. These abstract and metaphorical interpretations do, it is true, bear a certain relationship to the fundamental meaning of the symbol, one which we shall have to examine presently, but the patient's strong preference for them is merely a manifestation of his resistance against accepting the deeper meaning, against assimilating the unconscious. (This very resistance to the unconscious is shewn in Silberer's use of the word 'ephemeral' in the passage just quoted, for if there is any truth at all in psychoanalysis, or, indeed, in any genetic psychology, then the primordial complexes displayed in symbolism must be the permanent sources of mental life and the very reverse of mere figures of speech.) Some patients become exceedingly adept at this method of protecting themselves from realisation of their unconscious; when they interpret their dreams, every boat-race becomes the ambition to succeed on the river of life, the money they spill on the floor is a 'symbol' of wealth, the revolvers that are fired in front of women and behind men are 'symbols' of power, and, finally, even openly erotic dreams are desexualised into poetic allegories.<sup>1</sup> If, now, the psychoanalyst allows himself to be deceived by these defensive interpretations, and refrains from overcoming the patient's resistances

<sup>1</sup> See in this connection Jung, *op. cit.*, p. 221.

he will assuredly never reach a knowledge of his unconscious, still less will he be in a position to appraise the relative importance of unconscious trends and those of the surface. By this I do not in any sense mean that the latter are to be neglected, or in their turn under-estimated, but simply that one should not put the cart before the horse and talk of something secondary and less important being *symbolised* by something primary and more important.

Throughout his later work Silberer implies that the process just discussed, of material symbolism changing into functional, occurs not merely during the course of a psycho-analysis, but spontaneously as part of the development both of the individual and of the race. What I should call a *levelling* of this sort does, it is true, go on, but the all-important point is that it does so only in the more conscious layers of the mind, so that to describe the process of symbolism in terms of it represents only a very partial truth. The order of events is rather as follows: The ideas or mental attitudes unconsciously represented in true symbols yield, of course, as the result of repression, a great many other manifestations besides symbolism. These may be either positive in kind, as the result of sublimation and other modifications, or negative, such as reaction-formations. They, like symbols, are conscious substitutes for, and products of, unconscious mental processes. From this consideration it is intelligible that many of these other conscious products stand in an associative connection with various symbols, both being derived from the same sources. But the connection is collateral, not lineal; to speak of one conscious idea symbolising another one, as the post-psycho-analytical school does, is very much like talking of a person inheriting ancestral traits from his cousin. It is true that a given symbol can be used to represent or indicate (for reasons of convenience, vividness, etc.) a collateral mental attitude derived from the same source; this is, in fact, the chief way in which secondary, metaphorical meanings get attached to symbols. But just in so far as this takes place, the further removed is the process from symbolism. It is very common indeed to find a combination in this respect, so that the figure in question is partly symbolical—*i.e.*, it represents unconscious mental attitudes and ideas—and partly metaphorical—*i.e.*, it indicates other collateral ideas. In some cases the symbolical meaning may be entirely absent, which is what I imply by the word 'levelling'; what Silberer, however,

calls the passing of material symbolism over into functional I should prefer to describe as the replacement of symbolism by metaphor—*i.e.*, by an associative connective between collaterals—and the difference is a great deal more than one of words. Further, far more often than might be imagined the symbolical meaning is present at the same time as the metaphorical, though from the nature of things it is much more likely to be overlooked or discounted than the latter. This is very striking in the case of everyday superstitions, where, in addition to the current secondary interpretations, or even when no conscious interpretation is offered, the unconscious symbolism that constitutes the basis of so many superstitions can be shewn to be actively operative in an astonishing number of those addicted to the superstition in question.

These last considerations may now be summarised in more general terms. To begin with, a concrete idea is symbolised by being represented by another concrete idea that usually has a double relationship to it—(1) an objective one, in that the object or process possesses material attributes similar to those possessed by the idea symbolised; and (2) a subjective one, in that the mental attitude towards it is, in some respects, similar to that towards the primary idea. The symbol later becomes secondarily connected, in an associative manner, with other mental attitudes derived from the same source, and is often used to indicate them. With increasing mental development these tend to become more and more general and abstract, for, as the very word implies, all abstract ideas are abstractions of concrete ones, and therefore always ultimately derived from these; so that finally we see a concrete idea, originally used to symbolise a repressed concrete idea, now used to express an abstract thought (either solely for this or, more often, for this in addition to its other function). Hence the common but mistaken view<sup>1</sup> that it is characteristic of symbolism in general to represent the abstract in terms of the concrete. Silberer, by first extending the term 'functional symbolism' from its original sense to cover the concrete representation of affective processes in general, and by then confining it to the cases where these are secondary in nature, recedes from the conception of true symbolism and reaches once more the popular conception of symbolism as the presentation of the abstract in terms of the concrete.

<sup>1</sup> *E.g.*, Silberer, *op. cit.*, *Jahrb.* iii., S. 66z.

It is now time to illustrate these points by actual examples, and we may begin by the one last mentioned, that of the serpent. This is one of the most constant symbols of the phallus,<sup>1</sup> and from experiences and thoughts in connection with this object the general conception of 'sexuality' is largely derived. According to the Jung-Silberer school, the image of a serpent in a dream<sup>2</sup> will symbolise the abstract idea of sexuality more often than the concrete idea of the phallus, whereas to the psycho-analytical school it only *symbolises* the latter, though of course it is commonly *associated with* the former; the practical difference this makes is that, according to the latter school, any meaning of the dream context which is expressed in terms of the general idea is secondary to, derived from, and dependent on a deeper meaning in the unconscious which can only be expressed in terms of the concrete. Again, the unconscious assimilates the general idea of knowledge in terms of the more specific idea of sexual knowledge, which in its turn is assimilated as sexual power; the association is indicated in the Biblical phrase 'to know a woman.' For this reason the idea of the serpent has become associated, especially in the East, with that of knowledge, so that it commonly serves as an emblem of wisdom (as do so many other sexual symbols—*e.g.*, salt). But to say that a serpent may 'symbolise' *either* a phallus *or* wisdom is to confound two entirely different psychological processes. The relation between them might be further illustrated by comparing these two situations—(1) the case of a man who casually makes use of the colloquial expression 'he is a wily old snake'; here it may well be that the metaphor is purely external, being based on his having heard or read that there is some supposed association between snake and cunning; (2) that of a man who personally and instinctively *feels* that the snake is a fit, natural, and intelligible emblem for the ideas of wisdom and cunning; here one would certainly expect to find that the idea is acting as a true, unconscious, phallic symbol.

A wedding-ring is an emblem of marriage, but it is not a symbol of it. When a man woos a woman he instinctively makes her a present of objects, such as bracelets, brooches, and

<sup>1</sup> Very occasionally it can also symbolise the intestines or their contents, but, so far as I know, nothing else.

<sup>2</sup> I am speaking of cases where the dream image is a symbolic one, which, of course, it need not be.

later an engagement-ring, that have the attribute of holding what is passed through them, and unconsciously are symbols of the female organ. At marriage he gives her one of the most perfect symbols of this kind, a plain gold ring, in return for the complete surrender to him of the object it symbolises. The ceremony connotes a group of abstract ideas, fidelity, continuity, etc., with which the ring is now brought into association, and for which it can then serve as an emblem, though never as a symbol.

Most charms, talismans, and amulets, are genital symbols, predominantly male. Just as they now bring good luck, or ward off bad luck, so in earlier ages they guarded against the evil powers of magical influences. That these apotropæic qualities were almost exclusively ascribed to genital symbols is due to two circumstances; first, the exaggerated association in the primitive mind between the genital organs and the idea of power or potency; and secondly, the fact that originally nearly all evil magical influences were imagined to be directed against the sexual organs and their functions. As I have shewn elsewhere,<sup>1</sup> for example, practically all the dreaded evil actions of witches in the Middle Ages were symbolic representations of the 'ligature'—*i.e.*, of the attempt to injure sexual potency; they were, in short, castration symbols. The surest safeguard against this calamity was the demonstration, by display, that the threatened part was safe; the mechanism is similar to that of the talion.<sup>2</sup> This train of thought naturally led to charms being associated with the idea of safety in general, particularly as a protection against death or mutilation, as is pathetically shewn on a large scale in the present war. Anxious relatives who press a horseshoe or a 'fums up' on their man when he leaves for the front have not the faintest idea of the meaning of their superstitious act, but that this meaning is not simply an historical one can often be shewn by analysis of their dreams, where the true symbolism becomes apparent; the unconscious often knows what the person is doing so much better than the conscious mind.

To take another current, and more important, analogy. Modern economists know that the idea of wealth means simply 'a lien on future labour,' and that any counters on earth could be used as a convenient emblem for it just as well as a 'gold

<sup>1</sup> Ernest Jones, 'Der Alptraum in seiner Beziehung zu gewissen Formen des mittelalterlichen Aberglaubens,' 1912, S. 106-110.

<sup>2</sup> It is, in part, identical with that of the perversion called exhibitionism.

standard.' Metal coins, however, and most of all gold, are unconscious symbols for excrement, the material from which most of our sense of possession, in infantile times, was derived. The ideas of possession and wealth, therefore, obstinately adhere to the idea of 'money' and gold for definite psychological reasons, and people simply will not give up the 'economist's fallacy' of confounding money with wealth. This superstitious attitude will cost England in particular many sacrifices after the war, when efforts will probably be made at all costs to reintroduce a gold currency.

We incidentally referred above to the association between the phallus and the idea of power. This is especially close in the case of that of the father, for whom, as was explained above, the idea of the king is an unconscious symbol. His special symbol, the sceptre, thus comes to be the emblem of regal authority—*i.e.*, for the pious respect due to the father. This mental attitude originates, at least in its extreme forms, largely as a reaction against the more primitive and instinctive jealousy and hatred of the father, part of the famous *Œdipus-complex*.<sup>2</sup> This primitive attitude is expressed in the unconscious of practically all men as the desire to kill, or at least to castrate, the father, a desire that doubtless was literally gratified in primæval times.<sup>3</sup> The mind now recoils from such a horrific conception, and in connection with it we have two beautiful examples of how it deals with this type of truth by diluting its meaning, by changing material symbolism into the harmless functional kind. According to the Jung-Silberer school, the unconscious wish to kill the father merely 'symbolises' such tendencies as the desire to overcome the old Adam in us, to conquer the part of us that we have inherited from the father, or, even more generally, to overcome a previous point of view. As might have been expected, the same ideas of father-murder or father-castration frequently occur in mythology and the older religions—if not in all religions—and mythologists have similarly deprived them of any literal meaning by interpreting them as harmless and interesting representations of such natural phenomena as the phases of the sun and moon, vegetative or seasonal changes, and so on.

<sup>1</sup> See Chapter XL.

<sup>2</sup> For an exposition of this see Freud, 'Traumdeutung,' 1914, S. 192-201; Rank, 'Das Inzest-Motiv in Dichtung und Saga,' 1912; Ernest Jones, 'The *Œdipus-Complex* as an Explanation of Hamlet's Mystery,' *Amer. Journ. of Psychology*, vol. xxi.

<sup>3</sup> See Darwin, 'The Descent of Man,' 1871, ch. xx.

Freud<sup>1</sup> has shewn what an essential part this murder impulse has played in the development of religion, not only in primitive systems such as the totemistic, but also in the higher forms, and it is probable that the phallic worship which takes such a central place in earlier religions—and is far from absent in those of our own time—is derived, not only from the extraordinary over-estimation (from our point of view) of the importance of sexual functions characteristic of the primitive mind, but also as a reaction against the hostility toward the patriarchal phallus, and therefore also the divine one; in consciousness adoration for the patriarchal phallus becomes over-emphasised just because in the repressed unconscious there is the contrary attitude of hostility. Phallic worship, therefore, was determined by more than one cause, but it was fundamentally concerned with a real phallus. When the facts of Eastern phallic religions began to reach Europe in the nineteenth century, they seemed so incredible that they had at all costs to be re-interpreted into harmless terms, and the view, still prevalent, was adopted that the worship had nothing to do with the phallus as such, but was really directed towards the abstract idea of the divine creative power, which we personify as the Creator, and for which the phallus was a 'symbol' appropriate to simple minds. Reflection shews that the abstract idea in question must itself have been derived from the concrete idea symbolised by the phallic image, so that we have here one more instance of confusion between descendance and collateralism; according to the view just mentioned, the order of development was first concrete phallus, then abstract idea of generation (in so far as it would be admitted that this idea came from the former), then symbol of the abstract idea, whereas to the psychoanalyst the abstract idea and the symbol are related to each other, not as cause and effect, but only as proceeding from a common cause. Indeed, from the standpoint of scientific thought, the abstract idea that is here supposed to be symbolised is altogether illusory; we have no experience, in either the physical or spiritual world, of creation, for what masquerades as such always proves on closer inspection to be only transformation.<sup>2</sup> Yet, so hard is it for the human mind to rid itself of such fundamental illusions that the necessity of postulating a

<sup>1</sup> Freud, 'Totem und Tabu,' 1913.

<sup>2</sup> The whole question is pithily condensed in the expression, 'The wish is *Father* to the thought.'



creative force is one of the chief arguments adduced in favour of a belief in theism, and even relatively sceptical thinkers like Herbert Spencer feel obliged to fall back on the conception of a 'First Cause.'

We have so far considered the symbol in its relation to the idea unconsciously symbolised, and have reached the conclusion that in the psycho-analytical sense the symbol is a substitute for the primary idea, compulsorily formed as a compromise between the tendency of the unconscious complex and the inhibiting factors, whereas the functional interpretation is mainly concerned with the more conscious reactions to and sublimations of the unconscious complex. We have next to deal with another aspect of the problem—namely, the relation of the symbol to the idea it immediately expresses; *e.g.*, no longer with the relation of the serpent symbol to the phallus, but with that of the serpent symbol to the serpent itself. We have, in other words, to consider symbolism in terms of the reality-principle, instead of, as before, in terms of the pleasure-principle.

In dreams, myths, and similar material, we find the image of the sun used to symbolise the eye, the father, or the phallus. What bearing has this symbolism on man's conscious thoughts concerning the sun in other respects? The problem divides itself into two—namely, the question of more or less scientific knowledge concerning the sun, dictated to some extent by man's primary instinct for knowledge, and, secondly, the more practical aspects of how to deal in daily life with the external phenomena in question (heat, shade, darkness, etc.). It is only in civilised man that this distinction holds, and even there only in part, for it is everywhere hard to separate the mere curiosity for knowledge from the practical aspects of the necessity for, or desirability of, knowing. I feel sure that a great deal of what is attributed to man's pure desire for knowledge—the discoveries he makes, and so on—is really dictated much more by the impulses set up by necessity, which may be either external or internal; how well the old adage 'necessity is the mother of invention' is being illustrated at the present day!

Our problem is especially manifest in regard to what Wundt terms the 'mythological stage of knowledge.' This does not here involve the problem of mythology as a whole, which has more to do in general with the material *versus* functional controversy dealt with above, as Silberer<sup>1</sup> has well illustrated

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* ii., S. 573-586.

in a number of familiar examples. As he has also well expounded,<sup>1</sup> a most important point to bear in mind in regard to the mythological stage of knowledge is that it is a relative concept. No knowledge is recognised to be mythological by the person who believes in it—at least, not at the moment he does so believe. This, however, is also true of symbolism. It is only when we disbelieve in their objective and literal reality that we recognise them to be symbols, though even then we usually have no idea of what they had been symbolising. So a mythological piece of knowledge is at the time it is accepted, and for those who accept it, the only form of truth then possible; it is an adequate form of reality for a certain level of development. A 'higher' or more objective form of truth would be rejected, for either intellectual or affective reasons, and 'not understood.' Silberer<sup>2</sup> thinks that, on the whole, the first type of symbolism, the material phenomenon, predominates in this process. Taking the idea of symbolism in its strict sense, there is no doubt that, as both Silberer<sup>3</sup> and Rank and Sachs<sup>4</sup> point out, its occurrence in this connection serves the function of rendering it easier to assimilate the perceived material that is being dealt with; the mind assimilates it in terms of the previously familiar. What really happens is that the unconscious assimilates the new material in terms of its own thoughts, the process discussed in Section III. of this paper, the result of which will be the appearance in consciousness of a symbol of the unconscious thought.

So far all is clear, but the point that is disputed in this connection is whether the symbol can bear any relation, and if so what, to the idea (the 'higher form of truth') that will later, in either the same individual or another, replace the symbol and this mythological stage of knowledge. Can the later, more objective form of knowledge be already implicit in the earlier symbolical presentation of the attempt to deal with the problem? Silberer does not definitely answer this question, but Jung<sup>5</sup> would unhesitatingly answer it in the affirmative, and, I gather, in all cases.

To my way of thinking, the matter is more complex than would appear from this statement of it. There is certainly some connection in most cases between the symbol and the

<sup>1</sup> Silberer, *op. cit.*, *Jahrb.* ii., S. 606, 607; iii., S. 662-666.

<sup>2</sup> *Ibid.*, *op. cit.*, *Jahrb.* iii., S. 689.

<sup>3</sup> *Ibid.*, *op. cit.*, *Jahrb.* iii., S. 692.

<sup>4</sup> Rank and Sachs, *op. cit.*, S. 17.

<sup>5</sup> See especially Jung, *op. cit.*, ch. xv.

'future idea,' but in my opinion it is very much the same as, though not quite identical with, the connection discussed above between the symbol and the functional interpretation. I do not think that the future idea is implicit in the symbol; on the contrary, the existence of the symbol—to be more accurate, the symbolic use of the symbol—is often the very thing that is preventing the idea from being formulated. As has been explained above, the mind always tends to assimilate a new percept in terms of some unconscious complex, and every step in progress in the line of the reality-principle connotes, not only a use of this primordial association, but also a partial renunciation of it; a surrendering of the personal, subjective factor and an attending, which might almost be called sensorial, to the objective attributes of the new percept. Let us follow the example chosen above of the sun. One of the earliest conceptions of this was that it was a mighty eye, the resemblances—in connection with light, etc.—being fairly evident. Later it was regarded as a movable lamp, and later still as a hot gaseous body around which the earth revolves. If in one of these later stages of knowledge the image of the sun appeared in a dream as a substitute for that of an eye, we should, of course, call it a symbol, but in the first stage the ophthalmic idea of the sun would most accurately be described as a symbolic equivalent. Now, how did the progress in knowledge take place, and what is the relation of the symbol to the future idea of the sun? The first stage is simple enough. It is nothing but an identification of the new percept with an old one, a temporarily successful assimilation of it in terms of the older and more familiar one. I imagine that every fresh attribute observed about the sun and its behaviour, every fresh thought about it, was in turn dictated by a similar association, usually unconscious, with some previously familiar idea; or, put in another way, that attention was seriously directed to each fresh attribute through the interest already residing in the previously familiar idea with which the new attribute got associated on the ground of however faint a resemblance, for it is truly astounding how the human mind can escape paying attention to evident, and even important, observations in which it is *not* interested. But, and this is the all-important point, in this second stage the assimilation does not lead to pure symbolism; it is enough to direct attention, and give interest, to the fresh observation, but this is interpreted by a process of ratiocination in conjunction with

the facts of external reality, no longer solely in terms of the pre-existing idea, as in the first, more symbolical stage of knowledge. In so far as it is no longer thus interpreted in the older fashion, there is involved a corresponding renunciation, in favour of the reality-principle and its advantages, of the pleasure yielded by the easier and more primitive process of complete assimilation. According to the findings of psycho-analysis, *all* mental progress is accompanied with partial renunciation of some primitive form of pleasure—which is probably the reason why it is so slow—and the process just indicated is no exception to the rule.

The following example also illustrates the same point. Lightning, like mistletoe, was at first, and for thousands of years, imagined to be divine soma<sup>1</sup>—*i.e.*, semen—a notion the last form of which was the conception of a special magnetic or electric fluid; it is interesting, by the way, that the same conception—here termed magnetic fluid, vital fluid, mesmeric fluid, etc.—was long held as the theory of what used to be called 'animal magnetism'—*i.e.*, hypnotism. Increased knowledge as to the nature of lightning essentially connoted, among other things, the partial surrendering of this unconscious assimilation, the giving up of the symbol magnetic fluid, though in the unconscious symbolism that is the basis of neurotic symptoms—*e.g.*, brontophobia—the ancient association between lightning and semen recurs, and it is to be noted that we still popularly conceive of electricity as the flow of a current. Our general question, therefore, of whether the future conception is already implicit in a latent state in the symbol can be answered affirmatively only in a very restricted sense—namely, that part, and often only a small part, of the mental material that will later be converted into the more developed conception is already present, but that the idea as such is certainly not present, even in the unconscious, so that obviously it cannot be 'symbolised.'

Similar remarks hold good in the case of more complex stages in the advance of knowledge, such as scientific generalisations, as also with other conscious tendencies and interests. From one point of view these may be regarded as sublimations from unconscious complexes, developments which are, of course, greatly modified by contact with external reality and by conscious elaboration. They, like symbols, come about as the

<sup>1</sup> See Kuhn, 'Die Herabkunft des Feuers,' 1859; and the comments on it in Abraham's 'Traum und Mythos,' 1909.

result of the conflict between unconscious impulses and the inhibiting forces of repression, but they differ from symbols in that, whereas with the latter the full significance of the original complex is retained unaltered and merely transferred on to a secondary idea (that of the symbol), with the former the psychical energy alone, not the significance, is derived from the unconscious complexes and is transferred on to another set of ideas that have their own independent significance. It is true that here also regression may lead to true symbolism, where the ideas resulting from sublimation may temporarily lose their own intrinsic meaning and sink back to become mere symbols of the complexes from which their energy was largely derived. But in this case they are symbols in the strict sense and do not symbolise the sublimations, in spite of their indirect association with these. A typical example of the whole process would be the one discussed above in connection with Sperber's views, the case of agricultural work. At first these were identified with sexual acts and later achieved an independence of their own, but in neither of these stages could they be called sexual symbols, for they were not being used as pure substitutes; they become symbols only when, as in dreams, myths, etc., they for a time lose their actual meaning (wholly or in part), and are then used as substitutes for the ideas with which they were originally identified.

We have now considered three aspects of symbolism: its relation to the unconscious complex (Sections II. and III.), to the other derivatives of this (functional symbolism), and to external reality. We have last of all to consider briefly a fourth aspect, that to which Silberer has given the name 'anagogic',<sup>1</sup> and which is very similar indeed to Adler's 'programmatic' and Jung's 'prospective' meaning of symbolism.<sup>2</sup> The last two terms are wider ones, and include the 'development of the future idea' conception just discussed, as well as the anagogic one; we are here concerned, therefore, only with the latter one.

By the anagogic signification of symbolism is meant the mystical, hermetic, or religious doctrine that is supposed to be contained in the symbol. The symbol is taken to be the expression of a striving for a high ethical ideal, one which fails to reach this ideal and halts at the symbol instead; the

<sup>1</sup> Silberer, *op. cit.*, 'Probleme,' etc., S. 138.

<sup>2</sup> *Ibid.*, *loc. cit.*, S. 193, 207.

ultimate ideal, however, is supposed to be implicit in the symbol and to be symbolised by it. Along this path the post-psycho-analytical school<sup>1</sup> loses itself in a perfect maze of mysticism, occultism, and theosophy, into which I do not propose to penetrate; Silberer implicitly, and Jung explicitly, abandon the methods and canons of science, particularly the conceptions of causality and determinism, so that I may consider myself absolved from the task of attempting to unravel the assumption that have culminated in their latest views. As the philosophers would say, it is impossible for us to adhere to one universe of discourse.

It is clear that the anagogic aspect of symbolism is only a special case of the general 'future idea' conception discussed above, and that the relation between the symbol and the ethical ideals in question is much the same as that already explained as subsisting between it and the various functional aspects, particularly those referring to sublimated interests and activities. In fact, the only difference that Silberer<sup>2</sup> discerns between the anagogic and functional aspects is that the former refer to future mental attitudes and the latter to present ones; when the anagogic ideal has been attained it passes into functional symbolism,<sup>3</sup> a conclusion that confirms my previously expressed suspicion as to the reactionary tendency of his general conception of functional symbolism.

#### V. REVIEW OF CONCLUSIONS.

The main thesis of this paper is that it is possible usefully to distinguish, under the name of symbolism, one fundamental type of indirect representation from other more or less closely allied ones, and that consideration of the points of distinction throws a light upon the nature of indirect figurative representation in general and of symbolism in particular.

Using first the term 'symbolism' in its older broad sense (to include metaphors, etc.), we can make the following generalisations: All symbolism betokens a relative incapacity for either apprehension or presentation,<sup>4</sup> primarily the former; this may

<sup>1</sup> See especially Jung, *op. cit.*, and 'The Principles of the Unconscious,' 1916; Silberer, *op. cit.*, 'Probleme,' etc.

<sup>2</sup> Silberer, *op. cit.*, 'Probleme,' etc., S. 155.      <sup>3</sup> *Ibid.*, *loc. cit.*, S. 194.

<sup>4</sup> This generalisation is about equivalent to that implied in Silberer's term 'apperceptive insufficiency,' but he tends to regard this incapacity as the essential cause of symbolism, while I regard it merely as an indispensable condition; I also lay much more stress on the affective causes of it than he does.

be either affective or intellectual in origin, the first of these two factors being by far the more important. As a result of this relative incapacity, the mind reverts to a simpler type of mental process, and the greater the incapacity the more primitive is the type of mental process reverted to. Hence, in the most typical forms the symbol is of the kind of mental process that costs least effort—*i.e.*, is sensorial, usually visual; visual because in retrospect most perceptual memories become converted into visual forms (most memories of childhood, etc.), this in turn being partly due to the special ease of visual representation. For the same reason symbolism is always concrete, because, as will be explained in a moment, concrete mental processes are both easier and more primitive than any other. Most forms of symbolism, therefore, may be described as the automatic substituting of a concrete idea, characteristically in the form of its sensorial image, for another idea which is more or less difficult of access, which may be hidden or even quite unconscious, and which has one or more attributes in common with the symbolising idea.

The essential difficulty that goes with all forms of symbolism is in the adequate apprehending (and therefore also in the conveying) of feeling. This is doubtless to be ascribed to the innumerable inhibitions of feeling which psycho-analysis has shewn to be operative throughout the mind, and which naturally exhibit a more concentrated force in some regions than in others; it is therefore to be expected that the most typical and highly developed forms of symbolism will be found in connection with those regions. Even the weakest form of symbolism, however—for instance, the metaphor—comes into this category. For example, Keats wishes to convey his exaltation at the sense of discovery experienced on first looking into Chapman's 'Homer.' He finds it impossible to do this directly, for any mere direct statement of the fact would leave us cold. He succeeds in transmitting to us some of his own thrill only by likening his sensations to those of some one who has just discovered a new planet or a new ocean.<sup>1</sup> The simile used by Keats strictly stands for an adjective—wonderful, inspiring, or what not—preceding the word 'exaltation'; and the like is true of all similes and metaphors. The problem thus arises: In what way is the replacement of an adjective by a concrete likeness related to the question of inhibited feeling?

<sup>1</sup> Here, as is often the case, the inhibition of imaginative feeling that has to be overcome is in the hearer.

The basal feature in all forms of symbolism is identification. This is one of the most fundamental tendencies of the mind, and is much more pronounced in its more primitive regions. The lack of discrimination connoted by it is only in a very slight degree conditioned by imperfect intellectual development, for the tendency to identify is mainly due to the following two factors, which relate to the pleasure-principle and the reality-principle respectively. In the first place, it is easier, and therefore pleasanter, to note the features of a new idea that resemble those of an older and more familiar one. Further, the mind tends to notice especially those features that interest it because of their resemblance to previous experiences of interest. In the second place, the appreciation of resemblances facilitates the assimilation of new experiences by referring the unknown to the already known. Even this factor, and obviously the first one, is much more an affective than an intellectual one. These identifications profoundly influence the course of further mental development along both affective lines (sublimations) and intellectual ones (increased knowledge, science).

In so far as a secondary idea B receives its meaning from a primary idea A, with which it has been identified, it functions as what may be called a symbolic equivalent of A. At this stage, however, it does not yet constitute a symbol of A, not until it replaces A as a substitute in a context where A would logically appear. There is an overflow of feeling and interest from A to B, one which gives B much of its meaning, so that under appropriate conditions it is possible for B to represent A. According to the view here maintained, the essential element of these conditions is an affective inhibition relating to A. This holds good for all varieties of symbolism, in its broadest sense.

Affective inhibition can, of course, be of the most varying degree, and on this variation greatly depends the multiplicity of the processes that are grouped under the name of 'symbolism.' When the inhibition is at its maximum there arises symbolism in its most typical form. The distinctions between this and other forms of indirect pictorial representation are qualitative as well as quantitative, and they are so important that it is here proposed that the term 'symbolism' be reserved for them solely.<sup>1</sup> It is already explicitly used in this sense by psycho-

<sup>1</sup> Mr. J. C. Flugel has suggested to me that, as an alternative to my proposal, the term 'cryptophor' be used as a counterpart of 'metaphor,' so that one might



analysts, and implicitly by many anthropologists and mythologists, and it seems worth an effort to try to get it generally accepted thus. The two cardinal characteristics of symbolism in this strict sense are (1) that the process is completely unconscious, the word being used in Freud's sense of 'incapable of consciousness,' not as a synonym for subconscious; and (2) that the affect investing the symbolised idea has not, in so far as the symbolism is concerned, proved capable of that modification in quality denoted by the term 'sublimation.' In both these respects symbolism differs from all other forms of indirect representation.

The typical attributes of *true symbolism*, as modified from the description given by Rank and Sachs, are—(1) Representation of unconscious material; (2) constant meaning, or very limited scope for variation in meaning; (3) non-dependence on individual factors only; (4) evolutionary basis, as regards both the individual and the race; (5) linguistic connections between the symbol and the idea symbolised; (6) phylogenetic parallels with the symbolism as found in the individual exist in myths, cults, religions, etc. The number of ideas that can be symbolised is remarkably small in comparison with the endless number of symbols. They are fewer than a hundred, and they all relate to the physical self, members of the immediate family, or the phenomena of birth, love, and death. They typically, and perhaps always, arise as the result of regression from a higher level of meaning to a more primitive one; the actual and 'real' meaning of an idea is temporarily lost, and it is used to represent and carry the meaning of a more primitive idea with which it was once symbolically equivalent. When the meaning of the symbol is disclosed the conscious attitude is characteristically one of surprise, incredulity, and often repugnancy.

Progress beyond the early stage of symbolic equivalency takes place (*a*) intellectually, by the transference of the symbolic meaning to the idea B becoming subordinated to the acquirement of a 'real,' objective meaning intrinsic in B; (*b*) affectively, by a refinement and modification of the affects investing A

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speak of cryptophoric as contrasted with metaphoric symbolism, instead of, as I propose, speaking of symbolism as contrasted with metaphoric representation. The objection I see to his suggestion is that, if the same word symbolism be still used generically for the two classes (for the qualifying adjective would often be omitted in practice), the current confusion between them would only be perpetuated.

(sublimation), which permits of their becoming attached to non-inhibited, conscious, and socially useful or acceptable ideas and interests. Both of these processes connote a partial renunciation as regards the original complex A, with, however, a compensatory replacement of it by other ideas and interests. Whenever there is a failure in this process of sublimation there is a tendency to regress towards the primary complex A, or, rather, this complex, being no longer indirectly relieved, once more tends to reassert itself. Inhibiting forces prevent its doing so in its original form, and as a result of this intrapsychical conflict it may express itself by means of one of its original symbolical equivalents—*e.g.*, B—which then carries, in a substitutive manner, the significance of A and is its symbol. Once this has occurred, further progress can only take place by the same process as that just described, a loosening of the ideational links between A and B, and a renunciation of the need of the complex A for direct gratification. Progress, therefore, in contradistinction to the views held by the post-psycho-analytical school, does not take place *via* symbolism, but *via* the symbolic equivalents that are the basis of this; symbolism itself, in fact, constitutes a barrier to progress. This is best seen in the blind alley of neurotic symptomatology.

The most important member of this school, from the point of view of symbolism, is Silberer, whose views have therefore been dealt with at some length in this paper. The differences between his conclusions and my own may shortly be expressed as follows: We are concerned with three groups of psychical material: (1) the unconscious complexes, (2) the inhibiting influences (Freud's ethical censor) that keep these in a state of repression, and (3) the sublimated tendencies derived from the unconscious complexes. In my judgement, the relation of symbolism to these three groups is this: Like the third group, symbols are the product of intrapsychical conflict between the first two groups. The material of the symbol is taken from the third group. The second group, which prevents the first one from coming to direct expression, is to some extent represented in the formation of the symbol; but the dynamic force that creates the symbol, the meaning carried by the symbol, and the reason for the very existence of the symbol, are all derived from the first group, from the unconscious complexes.

The fundamental fallacy of Silberer's work, as it seems to me, is that he tends to confound the process of symbolic equiva-

lency with that of symbolism itself,<sup>1</sup> as was indicated above in regard to the relation between symbolism and mental progress. As a result of this he brings symbolism into a forced relationship with the other product of the unconscious, the third group just mentioned, and tends to regard the symbol as the representative of this further product instead of its being the representative of the first, primary group. Further, on the basis of the (subordinate) part played by the second group in the formation of symbols, and the fact that it is to some extent represented in the symbol, he attaches an altogether exaggerated importance to this second group as constituting the meaning of the symbol, and especially to those aspects of the second group (the ethical ones) that are akin to the third group. To put the matter still more concisely: according to the conclusions here reached, the material of a symbol is derived from the third group while its meaning is derived essentially from the first group, to only a very limited extent from the second, and not at all from the third; according to Silberer, the meaning of a symbol is derived mainly from the second and third groups, and only to a very limited extent from the first.

I agree, however, that a symbolic image may be used to represent the second or third group of psychical material in question as well as the first, but in this function it is acting as a metaphor, not as a symbol, and it might then be usefully termed an emblem, token, or sign. When this is the case—*i.e.*, when a true symbol is being used metaphorically—all that the second or third group of psychical processes can do is to select for its purposes an already created symbol; it never contributes, in any important degree, to the actual creation of the symbol. Silberer, in my opinion, confounds the use of the metaphor with that of the symbol, and so mistakes the nature of the true symbol, ascribing to it attributes that properly belong to the metaphor. There are many features in common between the two processes—it would be impossible to confound them otherwise, and the object of this paper would be superfluous—and I do not for a moment wish to maintain that they are totally different in nature. But the differences between them, notably in their relation to the unconscious (together with the other features of symbolism discussed above), are also important.

<sup>1</sup> The same fallacy as that involved in Maeder's confusion of the latent and manifest contents of dreams, and with the same practical result—the attributing of ethical tendencies to a process that has only an indirect relationship with them.

There are, broadly speaking, two kinds of metaphor, with all gradations between them. With the first kind an analogy is perceived and made use of between two ideas that is true, objective, and of some value; thus, in the phrase 'to find the key to this problem' the analogy between such a situation and that of discovering how to enter a room difficult of access is of this nature. With the second kind the analogy is only supposed to subsist; it is subjective and often untrue in fact; thus, the phrase 'as wise as a serpent' is of this nature. Serpents are, in fact, not wiser than most other animals, and the false attribution of wisdom to them is secondary and due to a process of true symbolism, as has been expounded earlier in this paper. With the first kind the association is intrinsic, with the second it is extrinsic, depending, however, on an underlying identity in the source of both ideas (in so far, of course, as they are symbolic).

In a metaphor an abstract adjectival description is replaced by a more concrete simile. Experience shews this to be a more vivid and successful way of conveying the desired meaning and of evoking the appropriate feeling tone. The explanation is that the more primitive method—*i.e.*, recourse to the concrete and sensorial—stands nearer to the sources of feeling. In the evolution, in both the individual and the race, from the original concrete to the general, and from this to the abstract, there is an increasing inhibition of feeling accompanying the greater objectivity. Concrete images are, as a rule, more personal, familiar, subjectively toned, and invested with more feeling than abstract terms. The difference is most plainly seen in the fields where there is most inhibition. There is a considerable difference between damning a man's eyes and merely consigning him to perdition. By the use of suitable abstract circumlocutions, aided by foreign and less familiar technical terms, it is possible to discuss various sexual topics in any society without any difficulty, but—to take the other extreme—the use of some gross obscene word, familiar in childhood, but since discarded, will often bring about a marked uprush of unpleasant emotion.

Therefore, when it is wished to apprehend or convey a vivid impression, a strong feeling, recourse is had to the primitive method of likening the idea to an associated concrete image, because in this way some inhibition is overcome and feeling released; what is popularly called stimulating the imagination

is always really releasing the imagination from its bonds. The over-profuse use of metaphors, as that of slang—which fulfils the same psychological function—is well known to be the mark of expressional incapacity; the person belongs to what, in association work, is called the predicate type.

Theoretically and logically the simile is the first stage of the metaphor. But, for the motives expounded above in connection with the process of identification, the two sides of the equation become fused into one at the very onset, with a resulting economy in psychical effort. The savage does not say 'John is like a lion'; still less does he say 'John is as brave as a lion'; he boldly asserts that 'John is a lion.' And when we cannot find language sufficiently vivid to convey our admiration of John's courage, we revert to the primitive method of the savage and say likewise that 'John is a lion.'

One further point. The process known as the decay of a metaphor, whereby the original literal meaning of the word is lost and its figurative meaning receives an accepted and independent significance, is akin to what was described above as the renunciation of a symbolic meaning, whereby the symbolising idea becomes emancipated from its adventitious meaning and achieves a separate existence.

I will now attempt a final *summary* of these conclusions. The essential function of all forms of symbolism, using the word in the broadest and most popular sense, is to overcome the inhibition that is hindering the free expression of a given feeling-idea, the force derived from this, in its forward urge, being the effective cause of symbolism. It always constitutes a regression to a simpler mode of apprehension. If the regression proceeds only a certain distance, remaining conscious or at most preconscious, the result is metaphorical, or what Silberer calls 'functional,' symbolism. If, owing to the strength of the unconscious complex, it proceeds further—to the level of the unconscious—the result is symbolism in the strict sense. The circumstance that the same image can be employed for both of these functions should not blind us to the important differences between them. Of these the principal one is that with the metaphor the feeling to be expressed is over-sublimated, whereas with symbolism it is under-sublimated; the one relates to an effort that has attempted something beyond its strength, the other to an effort that is prevented from accomplishing what it would.

## CHAPTER VIII

### FREUD'S THEORY OF DREAMS<sup>1</sup>

FREUD'S theory of dreams occupies a nodal position in his psychology, constituting as it does a point of conjunction for his various conclusions on normal and abnormal mental life respectively. From it as a starting-point he has developed outlooks that call for the earnest consideration of psychologists, for it is extensively conceded that if his conclusions are true they carry with them a revolutionary change in our knowledge of the structure and functions of the mind. These broader aspects of his theory will not here be considered, the present paper being intended merely to delineate the main outlines of the dream theory proper. Owing to the richness of the subject-matter even this purpose can here of necessity be but very imperfectly attained, so that the following description can at best only serve as an introduction to the study of his 'Traumdeutung.'<sup>2</sup> No just criticism of the theory can be made without a careful perusal of this volume, in which Freud has in detail entered into all the manifold problems relating to dreams, has presented the evidence on which his conclusions are based, and has fully discussed rival views and anticipated the possible objections that may be raised to his own. A few illustrative examples, drawn from the writer's experience, will accompany the present paper, but in order to economise space no actual dream-analyses will be detailed, it being proposed to do this in a subsequent paper.

The method Freud uses in the investigation of dreams is that termed by him Psycho-Analysis, and on the question of

<sup>1</sup> Amplified from a paper read before the American Psychological Association, December 29, 1909. Published in the *American Journal of Psychology*, vol. xxi.

<sup>2</sup> First edition, 1900; fourth edition, 1914. It is advantageous to read before this more difficult volume Freud's 'Vorlesungen zur Einführung in die Psychoanalyse'; Zweiter Teil: 'Der Traum,' 1916.

the reliability of this method rests that of the validity of his conclusions. No account of psycho-analysis itself can be given here, for that alone would exact a long exposition, but it should explicitly be stated that the technique of this method is a complex and intricate matter the acquirement of which is not, as many writers seem over-readily to assume, an easy task, but one requiring much practice, patience, and experience. In no branch of science can the testing of the results obtained by the use of an entirely new and difficult technique be satisfactorily submitted to an off-hand trial on the part of some one quite untrained in this, and it is strange that it does not occur to those who do not directly confirm Freud's conclusions as soon as they 'try psycho-analysis' that the fact may be due, not, as they hastily infer, to the erroneousness of those conclusions, but to a more humble explanation—namely, that they have not mastered the technique. Articles purporting to disprove Freud's conclusions have been published on the basis of a casual scrutiny of three or four dreams; Freud, on the other hand, published nothing on the subject until he had made a careful study of over a thousand dreams. In my opinion the 'Traumdeutung' is one of the most finished pieces of work ever given to the world; it is in any event noteworthy that in the twenty years that have elapsed since it was written only one other investigator, Silberer, has been able to make any addition—and that only a very minor one—to the theory, while not one constituent element of the theory has been disproved.

It is commonly believed in scientific circles that the mental processes of which dreams are composed arise, without any direct psychical antecedent, as the result of irregular excitation of various elements in the cerebral cortex by physiological processes occurring during sleep. This, it is maintained, accounts for the confused and bizarre nature of the mental product, and any apparently logical connection and order that frequently appear to some extent in dreams are explained by the supposition that the mental processes in question are represented in cortical elements that stand in close, anatomical or physiological, relation to one another, and so are simultaneously stimulated by the peripheral stimuli. Hence any problem as to the psychical origin of the mental processes, still more as to the *meaning* of the dream as a whole, is by the nature of things excluded as being non-existent, and any investigation along such lines is condemned as savouring of antiquated

superstitions about the 'reading of dreams' unworthy of educated people. To this attitude Freud, as must every consistent psychologist, stands in sharp opposition. He contends that dream processes, like all other mental processes, have their psychical history, that in spite of their peculiar attributes they have a legitimate and comprehensible place in the sequence of mental life, and that their origins are to be traced psychologically with as much certainty and precision as those of any other mental processes. The very possibility of this is sometimes doubted on the ground that the material to be investigated is so very uncertain and indefinite in its nature. Not only has one no guarantee that the dream has been accurately observed, remembered, and reported, but in most cases one can be pretty sure that what has actually happened is just the opposite of this—that, namely, parts of the dream are forgotten altogether, other parts are falsified in the memory, and so on, the result being that the material offered for investigation is only a partial and distorted copy of the original. However, apart from the fact that at least some dreams are clear throughout and precisely remembered, one has to accept empirically this feature of indefiniteness and study it like any other; the explanation Freud offers of it will be mentioned presently.

From one point of view dreams may be grouped into the following three categories. First may be distinguished those that are throughout both sensible and intelligible; such especially are the dreams of children. The very occurrence of such dreams, in which the mental processes fully resemble those of waking life, although they are never confounded with them, is in itself a strong argument against the view that dreams result from the isolated activity of single groups of brain cells. Secondly, there are dreams which are connected and have an evident meaning, but one the content of which is curious and surprising, so that we cannot fit them into the rest of our waking life. A person dreams, for instance, that his brother has been gored to death by a bull; he cannot account for his having come by such a curious notion, nor can he at first sight relate it to any waking thought. Thirdly, there is the most frequent type of dream, where the mental processes seem disconnected, confused, and senseless. These two latter types of dreams have a peculiar quality of strangeness and unreality; they are foreign to the other mental experiences of the subject, and cannot be inserted into any place in his waking thoughts.



It is as though the subject has lived through a different range of experience, in another place or in another world, which apparently has no connection with the one to which he is accustomed. Now, Freud holds that this sense of foreignness is an illusion due to very definite causes, and that the mental processes which go to form dreams are really in direct continuity with those of waking life.

In tracing the antecedents of dream processes Freud makes use, as has been said, of the psycho-analytic method, which essentially consists in the collecting and ordering of the *free* associations that occur to the subject when he attends to any given theme and abrogates the selecting control over the incoming thoughts that is instinctively exercised by the conscious mind. If this method is applied to any component part of a dream, however senseless it may appear on the surface, mental processes are reached which are of high personal significance to the subject. The mental processes thus reached Freud terms the 'dream thoughts'; they constitute the 'latent content' of the dream in contradistinction to the 'manifest content,' which is the dream as related by the subject. It is essential to keep distinct these two groups of mental processes, for on the appreciation of the difference between them rests the whole explanation of the puzzling riddles of dreams. The latent content, or dream thought, is a logical and integral part of the subject's mental life, and contains none of the incongruous absurdities and other peculiar features that characterise the manifest content of most dreams. This manifest content is to be regarded as an allegorical expression of the underlying dream thoughts, or latent content. The distortion of the dream thoughts into the dream proper takes place according to certain well-determined psychological laws, and for very precise reasons. The core of Freud's theory, and the most original part of his contribution to the subject, resides in his tracing the cause of this distortion mainly to a 'censor' which interposes an obstruction to the becoming conscious of unconscious psychical processes. This conception he arrived at from the analysis of various abnormal psychical manifestations, psychoneurotic symptoms, which he found to be constructed on a plan fully analogous to that of dreams. It may be remarked at this point that, quite apart from any views as to the cause of the distortion, the nature and functions of the dream thoughts and other problems, the fact itself of the distortion is certain,

and cannot be doubted by anyone who carefully observes a few dreams. That, for instance, the vision of a strange room in a dream is a distorted presentation of several rooms that have been actually seen, from each of which various individual features have been abstracted and fused together so as to present a new and therefore strange room, is the kind of observation that can easily be verified. Before considering, therefore, the nature of the latent content it will be well shortly to describe the distorting mechanisms by means of which it becomes transformed into the manifest content.

A dream is not, as it appears to be, a confused and haphazard congeries of mental phenomena, but a distorted and disguised expression of highly significant psychical processes that have a very definite meaning, although in order to appreciate this meaning it is first necessary to translate the manifest content of the dream into its latent content, just as a hieroglyphic script yields its meaning only after it has been interpreted. The mechanisms by means of which the manifest content has been formed from the underlying dream thoughts may be grouped under four headings.

The first of these is called *Condensation (Verdichtung)*. Every element of the manifest content represents several dream thoughts; it is, as Freud puts it, 'over-determined' (*überdeterminiert*). Thus the material obtained by analysis of a dream is far richer and more extensive than the manifest content, and may exceed this in amount by ten or twenty times. Of all the mechanisms it is the easiest to observe, and to it is mainly due the sense of foreignness that dreams give us, for it is a process with which our waking thought is not familiar.<sup>1</sup> The representation in the manifest content of the extensive material comprising the latent content is brought about by a true condensation, rarely by the mere omission of part of the latent content. The condensation is effected in several ways. A figure in a dream may be constituted by the fusion of traits belonging to more than one actual person, and is then called a 'composite person' (*Sammelperson*). This may occur either by the fusion of some traits belonging to one person with some belonging to another, or by making prominent the traits common to the two and neglecting those not common to them; the latter process produces a result analogous to a Galton's composite photograph. The same process frequently

<sup>1</sup> For a discussion of condensation see pp. 148-151.

occurs with names: thus Freud mentions a dream in which the person seemed to be called Norekdal, which had been formed from the names of two of Ibsen's characters, Nora and Ekdal; I have seen the name Magna formed by fusing Maggie and Edna, and similar instances are common enough. The neologism thus produced closely resembles those met with in the psychoses, particularly in dementia præcox, and like these may refer to things as well as to persons. Lastly in this connection it should be remarked that certain of the elements in the manifest content are especially rich in associations, as if they formed particular points of junction (*Knötenpunkte*); they are in other words the 'best-determined' elements. These are intimately related to the most significant elements in the underlying dream thoughts, and also frequently shew the greatest sensorial vividness in the manifest content.

Condensation subserves more than one function. *In the first place* it is the mechanism by means of which similarity, agreement, or identity between two elements in the latent content is expressed in the manifest content; the two elements simply become fused into one, thus forming a new unity. If this fusion has already taken place in the latent content the process is termed *Identification*, if it takes place during the construction of the dream itself the process is termed *Composition* (*Mischbildung*); the former process rarely concerns things, chiefly persons and places. In the process of identification a person in the dream enters into situations that really are proper to some other person, or behaves in a way characteristic of this second person. In the process of composition the fusion is revealed in the manifest content in other ways; thus a given person may appear in the dream, but bearing the name of some second one, or the figure in the dream may be composed of traits taken some from the first, others from the second person. The existence of a resemblance between two persons or places may thus be expressed in the dream by the appearance of a composite person or place built up in the way just mentioned; the important feature that the two have in common, which in this case is the essential constituent in the latent content, need not be present in the manifest content, and indeed usually is not. It is clear that by this means a considerable economy in presentation is effected, for a highly complex and abstract resemblance may be expressed by simply fusing the figures of the persons concerned. Thus, if two persons both shew the

sentiments of envy, fear, and malice towards the subject of the dream, these sentiments may be expressed by the appearance in the manifest content of a composite figure of the two persons. In this composite figure there may be traits common to both persons, such as colour of hair or other personal characteristics, but the essential resemblance in the underlying dream thoughts is as a rule not evident in the dream. The superficial resemblance presented in the dream is frequently thus the cover for a deeper and more significant one, and gives the clue to important constituents of the dream thoughts. The process in question may also represent merely the wish that there were such a resemblance between the two persons, and therefore, the wish that they might be exchanged in their relation to the subject. When, for instance, a married lady dreams that she is breakfasting alone with some man friend, the interpretation is often a simple matter. *In the second place* condensation, like the other distorting mechanisms, subserves the function of evading the endopsychic censor. This is a matter that will presently be further discussed, but it is plain that a repressed and unacceptable wish that two persons or places may resemble each other in an important respect, or may be interchanged, can be expressed in the manifest content of a dream by presenting an insignificant resemblance between the two.

It might be assumed from the description given above that the process of condensation takes place in one direction only, that each element in the manifest content represents a number of elements in the latent content in the same way that a delegate represents the members of his constituency. This, however, is not so, for not only is every element in the manifest content connected with several in the latent content, but every element in the latter is connected with several in the former. In addition to this, frequently associations exist between the different elements of the entire structure of the dream, so that this often has the appearance of a tangled network until the full analysis brings law and order out of the whole.

The second distorting mechanism is that termed *Displacement* (*Verschiebung*). In most dreams it is found after analysis that there is no correspondence between the psychological intensity of a given element in the manifest content and the associated elements in the latent content. An element that stands in the foreground of interest in the former, and seems to be the central feature of the dream, may represent the least significant

of the underlying dream thoughts; conversely an apparently unessential and transitory feature in the dream may represent the very core of the dream thoughts. Further, the most prominent affect in the dream, hate, anxiety, and so on, as the case may be, often accompanies elements that represent the least important part of the dream thoughts, whereas the dream thoughts that are powerfully invested with this affect may be represented in the manifest content of the dream by elements of feeble affective tone. This disturbing displacement Freud describes, using Nietzsche's phrase, as a 'transvaluation of all values.' It is a phenomenon peculiarly frequent in the psychoneuroses, in which a lively interest or an intense affect may be found associated with an unimportant idea. In both cases a transposition of affect has taken place whereby a highly significant idea is replaced by a previously indifferent and unimportant one. Often the association between the primary and secondary ideas is a very superficial one, and especially common forms of this are witty plays on the speech expression for the two ideas, and other kinds of clang association. As is well known, Jung has demonstrated<sup>1</sup> that this superficial association is usually the cover for a deeper hidden bond of high affective value. This mechanism of displacement is the cause of the puzzling fact that most dreams contain so many indifferent and hardly noticed impressions of the previous day; these, having on account of their unimportance formed but few associations with previous mental processes, are made use of in the dream-making to represent more significant ideas, the affect of which is transferred to them. Displacement also explains much of the bizarreness of dreams, notably the remarkable incongruity between the intensity of the affect and the intellectual content; a person may in a dream be terrified at an apparently indifferent object, and quite at ease in the presence of what should be alarming danger.

Two special forms of displacement should be separately mentioned because of their frequency. One is the representation of an object or person thought of in the latent content by the device of allowing a part only to appear in the manifest content, the process known as *pars pro toto*, which is one of the forms of synecdoche. The other is representation by means of allusion, a process known linguistically as metonymy; it has just been referred to in connection with superficial association.

<sup>1</sup> 'Diagnostische Assocationsstudien,' 1906, Bd. i.

There are still two other ways in which a latent dream element can be converted into, or replaced by, a manifest element—namely, visual dramatisation through regression, which will presently be considered, and symbolism. Symbolism, which Freud calls the most curious chapter of the dream theory, forms such a special and important topic that I have considered it at length elsewhere;<sup>1</sup> at this point I will only remark that, for some as yet unknown reason, dream symbolism differs from other symbolism in being almost exclusively sexual.

Condensation and Displacement are the two main mechanisms by means of which is produced the distortion during the passage from the latent to the manifest content. The extent to which a given dream appears confused, bizarre, and meaningless as a rule varies with the extent to which these two mechanisms have been operative in its formation. The following fragmentary extracts from some dream analyses will illustrate the processes in question:

(1) *I dreamed that I was travelling in Italy on my way to the next Freudian Congress.<sup>2</sup> On looking at my railway ticket I found it was for Lugaro.* In reality I know of no place of that name, but I have pleasant memories of the charming Italian resort Lugano. In the dream I had replaced the *n* of this by the letter *r*. Now Nuremberg is the actual meeting-place for the Congress. Lugaro is the name of a well-known Italian psychiatrist. I am to my regret prevented from going to the Congress by having to give a psychiatry course at the time this is to be held. I have often described the neighbourhood of Lugano as *toy* scenery; on my way to Nuremberg (the *toy* centre of the world) I am arrested (*Luga-no*) by the obstacle of my psychiatry course, and replace my destination by a name indicative of that fact. Further than this, I had recently seen the translation of Lugaro's 'Modern Problems in Psychiatry,' made by Orr and Rows; emphasis is thus cast on the last syllable of Lugaro's name by the play on the sound of 'or' and 'ro.' The volume is chiefly concerned with problems of chemistry and morbid anatomy, and advocates a tendency in psychiatry the relative fruitlessness of which I have disparagingly contrasted with that pursued by Freud, both in the medical press<sup>3</sup> and, amongst others, in a conversation I had a couple of years

<sup>1</sup> Chapter VII.

<sup>2</sup> The date of this dream, and the events referred to, was 1910, when I was in Canada.

<sup>3</sup> *Lancet*, July 24, 1909.

ago (about Lugaro) with Dr. Rows. I deplore the translation of the book into English, for it will only serve to strengthen the materialistic trends, useful enough in their proper place, that already too exclusively occupy the thoughts of English psychiatrists. For reasons not under my control, my psychiatry course is likewise chiefly concerned with matters of chemistry and morbid anatomy, so that the enforced displacement of my Freudian interests by the tendency represented by Lugaro also finds expression in the negation of Nuremberg (*Luga-no*), and the replacement of it by a word indicating in detail the nature of the interruption. I might further add that Lugaro is professor at *Modena*, and that a friend of mine, Dr. *Modena* of Ancona, is the first Italian psychiatrist to accept Freud's views, as I was the first English one. I had just heard that Dr. *Modena* is engaged in translating Freud's works into Italian, in a sense a counterbalance to the translation of Lugaro's '*Modern Problems*' into English; even the other consonant of *Modena*'s name, *n*, is indicated in the dream-making by its being displaced by the prominent consonant, *r*, of those of the two English translators, Orr and Rows (Lugaro instead of Lugano).

Associated, therefore, with only one word in the manifest content of the dream, which at first sight appeared to be meaningless enough, are a number of mental processes that occupy a significant place in my waking life. These, and many others which for personal reasons I cannot mention, are connected with the element in the manifest content of the dream by means of exceedingly superficial associations, chiefly ridiculous plays on words of a kind I hope I should never be guilty of when awake. Any one, however, who is interested in the psychology of wit, or familiar with the unconscious phantasies of hysterics or the flight of ideas met with in mania and other psychoses, will not find it strange that the superficial associations and preposterous plays on words so characteristic of those fields of mental activity are common enough in yet another field—namely, that of dream formation. The question as to whether the associations that occur during dream analysis are made only then, and take no share in the actual formation of the dream, will not here be discussed; it is one of the objections with which Freud fully deals in the '*Traumdeutung*.'

Like the other ones to be quoted, this fragment is only a small part of the full dream, and I might add that the associ-

ations here related are only intermediate connections to more remote thoughts, which as the analysis deepened soon left the subject of psychiatry for a more personal one.

(2) *I was in the country in Massachusetts, and yet seemed to be in the east not of America but of England. Above a group of people was vaguely outlined the word Ölve or Ölde (which may be expressed as Ölfē). This dream affords a particularly striking illustration of displacement, for every element in it directly led in the analysis to thoughts about the Netherlands, although no indication whatever of this country appeared in the manifest content. Massachusetts brought to my mind its capital Boston, and the original Boston in Lincolnshire.<sup>1</sup> That reminded me of Essex,<sup>2</sup> these two counties being the most low-lying (Netherlandish) ones in England. In Essex lives a friend through whom I had got to know well a number of Flemish people. On the day preceding the dream I had written a letter to someone in Maldon, a town in Essex, a name the sound of which brought to my mind Moll Flanders. The costume of the people in the dream was taken from a certain picture of Rembrandt's, which brought up a number of recent and old memories. Ölfē was a condensation of Alva, the tyrant of the Netherlands, and Van der Velde, the name of a Flemish painter of whose works I am fond, and also of a particular Flemish friend: two days previously I had seen in the hospital a Dutchman with a very similar name. In short, turn which way I would, all parts of the dream stubbornly refused to associate themselves with anything but Netherland topics, the further analysis of which resolutely led in only one direction.*

(3) The play on words in these dreams, which will surprise those not familiar with dream analysis, is further illustrated in the following example. *A patient dreamed that he was in a village in the neighbourhood of Paris that seemed to be called Marinier. He entered a café, but could only remember of its*

<sup>1</sup> That in the dream-making I was presumptuous enough to confound an American State with an English county is an illustration of the irresponsible liberties taken by the mental processes concerned in this production, and shews how completely they differ from our waking thoughts.

<sup>2</sup> I might add that the latter part of the word 'Massachusetts' has a sound not very dissimilar to that of 'Essex'; further, that the meaning of the first part of it, 'chu' ('chew,' which in Boston is pronounced as if it were spelt 'chu'), resembles that of the other word ('ess' is the stem of the German verb 'to eat').



*name that it contained an n and an l.* As a matter of fact he had just been planning to visit Paris, where he would meet a particular friend who lived there. The patient was fond of making anagrams, and was very given to playing with words, both consciously and still more unconsciously, so that it was not hard to divine that the invented word *Marinier* together with the letters *n* and *l* were derived from a transposition of the letters in *Armenonville*. This was confirmed by his next remark, to the effect that on his last visit to Paris he had dined enjoyably with this very friend at the *Pavillon d'Armenonville*.

(4) A patient, a woman of thirty-seven, dreamed that *she was sitting in a grand stand as though to watch some spectacle. A military band approached, playing a gay martial air. It was at the head of a funeral, which seemed to be of a Mr. X; the casket rested on a draped gun-carriage. She had a lively feeling of astonishment at the absurdity of making such an ado about the death of so insignificant a person. Behind followed the dead man's brother and one of his sisters, and behind them his two other sisters; they were all incongruously dressed in a bright grey check. The brother advanced 'like a savage,' dancing and waving his arms; on his back was a yucca-tree with a number of young blossoms.* This dream is a good example of the second of the three types mentioned above, being perfectly clear and yet apparently impossible to fit into the patient's waking mental life. The true meaning of it, however, became only too clear on analysis. The figure of Mr. X veiled that of her husband. Both men had promised much when they were young, but the hopes their friends had built on them had not been fulfilled; the one had ruined his health and career by his addiction to morphia, the other by his addiction to alcohol. Under the greatest stress of emotion the patient related that her husband's alcoholic habits had completely alienated her wifely feeling for him, and that in his drunken moments he even inspired her with an intense physical loathing. In the dream her repressed wish that he would die was realised by picturing the funeral of a third person whose career resembled that of her husband's, and who, like her husband, had one brother and three sisters. Further than this, her almost savage contempt for her husband, which arose from his lack of ambition and other more intimate circumstances, came to expression in the dream by her reflection of how absurd it was that anyone should make an ado over the death of such a nonentity,

and by the gaiety shewn at his funeral not only by all the world (the gay air of the band; her husband is, by the way, an officer in the volunteers, while Mr. X has no connection with the army), but even by his nearest relatives (the brother's dancing, the bright clothes). It is noteworthy that no wife appeared in the dream, although Mr. X is married.

In real life Mr. X, who is still alive, is an indifferent acquaintance, but his brother had been engaged to be married to the patient, and they were deeply attached to each other. Her parents, however, manœuvred to bring about a misunderstanding between the two, and at their instigation, in a fit of pique, she married her present husband, to her enduring regret. Mr. X's brother was furiously jealous at this, and the pæan of joy he raised in the dream does not appear so incongruous when we relate it to the idea of the death of the patient's husband as it does in reference to his own brother's death. His exuberant movements and 'dancing like a savage' reminded the patient of native ceremonies she had seen, particularly marriage ceremonies. The yucca-tree (a sturdy shrub common in the Western States) proved on analysis to be a phallic symbol, and the young blossoms represented offspring. The patient bitterly regrets never having had any children, a circumstance she ascribes to her husband's vices. In the dream, therefore, her husband dies unregretted by anyone, she marries her lover and has many children.

(5) The following two dreams illustrate the formation of neologisms: The patient, a woman of thirty-nine, dreamed that *she was sitting on a stage with four others, rehearsing a play they were to take part in; it seemed to be called 'The Wreck of the Kipperling.'* Her title-rôle was called *Kipper*. She felt foolish and embarrassed. This feeling she had several times recently experienced, circumstances having placed her in an awkward and compromising situation in regard to a man and woman, for both of whom she cared. Years ago, when in school in France, she had greatly suffered from feeling awkward and silly at having to read aloud in class from French plays, a language she imperfectly pronounced. Three days before the dream she had been reading a volume of satirical poems by Owen Seaman, and being a foreigner had had considerable difficulty in understanding and appreciating them. This had distressed her, for her friends thought very highly of them. Her embarrassment culminated at the reading of one of the

poems, in which Rudyard Kipling is depreciated and entitled 'Kipperling'; she much admired Kipling's writings and had felt foolish when her two friends assured her he was crude and vulgar. She resented his being nicknamed Kipperling, and said 'Fancy giving a poet the name of a silly little fish.' From the fusion of Kipling and Kipperling, and perhaps influenced by the fact that the latter name had been employed by *Seaman*, she had coined for herself in the dream the title of Kipper. Kipper (dried herring) is frequently used in London slang to denote foolish people ('silly kipper').

(6) In another dream the same patient imagined she was called '*Hokerring*,' a neologism produced by fusing the two words 'smoked herring'; this process may be represented thus:

(SM) OKE (D)  
H ERRING

(The parentheses indicate letters omitted in the neologism). The term smoked herring reminded her of bloater, and of a rather vulgar word in her native language meaning nude, pronounced bloat. This brought up infantile memories of shyness and a sense of foolishness that were connected with nakedness.

The construction of the manifest content out of the latent content Freud terms the *Dream-making* (*Traumarbeit*). In this, two other principal mechanisms are concerned in addition to those just mentioned of condensation and displacement. The first of these may be called *Dramatisation* (*Darstellung*). It is a familiar observation that the manifest content of most dreams depicts a situation, or rather an action, so that in this respect a dream may be said to resemble a theatrical representation. This fact exercises a selecting influence on the mental processes that have to be presented (*Rücksicht auf Darstellbarkeit*), for dramatisation, like the arts of painting and sculpture, is necessarily subject to definite limitations, and therefore special expedients have to be employed to indicate mental processes that cannot be directly portrayed. Just as a painter has indirectly to convey abstract mental processes by adopting certain technical devices, so a dramatist has to select and modify his material in order to make it conform to the restrictions of his art, as for instance when an action extending over years has to be presented in a couple of hours. In a dream the mental processes are dramatised so that the

past and future are unrolled before our eyes in a present action; an old wish, for instance, that relates to the future is seen realised in a present situation.

It is further well known that the manifest content of most dreams is predominantly, though not exclusively, of a visual nature, and the particular process of expressing in a dream various thoughts in the form of visual pictures Freud terms *Regression*, wishing to indicate by this the retrograde movement of abstract mental processes towards their primary perceptions. The network of dream thoughts is in this way resolved into its raw material. This process of regression is characteristic of dreams as contrasted with other mental constructions formed by means of similar mechanisms, such as day-dreams, psychoneurotic symptoms, and so on, though it sometimes occurs in the last named in the form of hallucinatory visions. In his discussion of the nature and function of regression Freud develops a number of important theoretical considerations regarding the structure of the mind, which, however, cannot here be gone into. He traces regression, both in dreams and in visions, partly to the resistance of the censor of consciousness, and partly to the attraction exerted for the mental processes thus represented by infantile memories, which, as is known, characteristically preserve their original visual type. In the case of dreams, though not of course in the case of waking visions, it is probable that the regression is further facilitated by the cessation during sleep of the forward movement from the sensorial to the motor side.

Under the heading of dramatisation may also be included the representation of various intellectual processes. We shall presently see that the intellectual operations (judgement, etc.) that are frequently met with in the manifest content of dreams originate not in the dream-making but in the underlying dream thoughts; no intellectual work is performed in the dream-making proper. In the dream thoughts there are of course all kinds of intellectual processes, judgements, arguments, conditions, proofs, objections, and so on. None of these, however, finds any special representation in the manifest content of the dream. As a rule they are entirely omitted, only the material content of the dream thoughts being represented in the dream, and not the logical relations of these. The dream-making, however, sometimes makes use of certain special devices to indicate these logical relations indirectly; the extent

to which this is done greatly varies in different dreams and in different individuals. The logical relations between the constituents of the dream thoughts, just as between those of waking thoughts, are displayed by the use of such parts of speech as 'if,' 'although,' 'either,' 'because,' etc., which, as has just been said, find no direct expression in the manifest content. Instances of the devices in question are the following: Logical concatenation between two thoughts is indicated by the synchronous appearance of the elements representing these in the manifest content; thus, in the third dream related above, the husband's death, the second marriage, and the subsequent children, three logically related thoughts, are represented by three groups of elements that synchronously appear in the manifest content. Causal connection between two dream thoughts is usually not indicated at all. When indicated it is done by making the one representing element follow on the other. The commonest way of doing this is by one clause being represented in an introductory dream (*Vortraum*), the other in the main dream (*Haupttraum*); it should, however, be remarked that this splitting of the manifest content does not always indicate causal connection between the corresponding dream thoughts. A less frequent device is the bringing about of a transformation of the one element into the other; the transformation must be a direct one, not a mere replacement, as when one scene passes gradually into another, not as when one scene is simply replaced by another. Evident absurdity in the manifest content signifies the existence of mockery or scorn in the dream thoughts, as was illustrated in the third dream related above. An alternative in the dream thoughts is not expressed in the manifest content; the representing elements are merely brought together in the same connection. When an alternative (either—or) appears in the manifest content it is always the translation of 'and' in the dream thoughts; thus in the second dream related above I felt that the third letter in the word outlined was either *v* or *d*, and both of these were present in the latent content.

Opposition and contradiction between dream thoughts may be indicated in two ways in the manifest content. When the contrasting thoughts can be linked with the idea of exchange, then the representing elements may be fused into a unity, a process described above under the name of identification. Other cases of opposition, which fall into the category of the

converse or reverse, may be indicated in the following curious way: two parts of the already formed dream that are connected with the dream thoughts in question are inverted. Inversion of mental processes in dream-making subserves other functions than the one just mentioned: it is, for instance, a favourite method of increasing the distortion; the simplest way of disguising a mental process is to replace it by its obverse. Some subjects seem to employ this distorting mechanism to an inordinate extent, and many dreams can be interpreted merely by inverting them. The inversion may concern either space or time. An instance of the former occurred in the third dream related above, where the yucca-tree (phallus) was attached dorsally instead of ventrally. Instances of both may be seen in the following dream by the same patient:

(7) *She stood at the seashore watching a small boy, who seemed to be hers, wading into the water. This he did till the water covered him and she could only see his head bobbing up and down near the surface. The scene then changed into the crowded hall of an hotel. Her husband left her, and she 'entered into conversation with' a stranger.* The second half of the dream revealed itself in the analysis as representing a flight from her husband and the entering into intimate relations with a third person, behind whom was plainly indicated Mr. X's brother mentioned in the former dream. The first part of the dream was a fairly evident birth phantasy. In dreams, as in mythology, the delivery of a child *from* the uterine waters is commonly presented by distortion as the entry of the child *into* water; among many others, the births of Adonis, Osiris, Moses, and Bacchus are well-known illustrations of this. The bobbing up and down of the head into the water at once recalled to the patient the sensation of quickening she had experienced in her only pregnancy. Thinking of the boy going into the water induced a reverie in which she saw herself taking him out of the water, carrying him to a nursery, washing him and dressing him, and installing him in her household.

The second half of the manifest dream therefore represented thoughts, concerning the elopement, that belonged to the first half of the underlying latent content; the first half of the dream corresponded with the second half of the latent content, the birth phantasy. Besides this inversion in order, further inversions took place in each half of the dream. In the first half the child *entered* the water, and then his head bobbed; in

the underlying dream thoughts first the quickening occurred, and then the child *left* the water (a double inversion). In the second half her husband left her; in the dream thoughts she left her husband.

Last among the dream-making mechanisms is that termed *Secondary Elaboration* (*sekundäre Bearbeitung*). It fundamentally differs from the other three in that it arises from the activity, not of the underlying dream thoughts, but of the more conscious mental processes. This remark will be more comprehensible when we presently consider the forces that go to make a dream. When the dream is apprehended in consciousness it is treated in the same way as any other perceptive content—*i.e.*, it is not accepted in its unaltered state, but is assimilated to pre-existing conceptions. It is thus to a certain extent remodelled so as to bring it, so far as is possible, into harmony with other conscious mental processes. In other words an attempt, however unsuccessful, is made to modify it so as to render it comprehensible (*Rücksicht auf Verständlichkeit*). This secondary elaboration is closely allied to the process I have described as rationalisation.<sup>1</sup> As is well known, there is a pronounced tendency on the part of the mind to distort foreign experiences in such a way as to assimilate them to what is already intelligible; in hearing or seeing a sentence in a strange tongue the subject imagines analogies to familiar words in his own, a falsifying process that frequently is carried to excess, leading to curious misunderstandings. To this secondary elaboration is due whatever degree of ordering, sequence, and consistency there may be found in a dream.

In connection with the secondary elaboration may be mentioned the allied process discovered by Silberer and named by him 'threshold symbolism.' He has shewn that the last portion of the manifest content of a dream, just before waking, can represent the idea of waking; instances are: crossing a threshold, leaving a room, starting on a journey or arriving at a destination, etc. It is further possible, though not yet demonstrated, that the same process may occur in the midst of the dream itself, portraying variations in the depth of sleep, tendency to break off the dream, etc.

Reviewing now as a whole the process of dream-making, we have above all to lay stress on the fact that in the formation of a dream no intellectual operation of any sort is carried out;

<sup>1</sup> Chapter II.

the dream-making is concerned solely with translating into another form various underlying dream thoughts that were previously in existence. No creative work whatever is carried out by the process of dream-making; it performs no act of decision, calculation, judgement, comparison, conclusion, or any kind of thought. Not even the elaboration of any phantasy occurs in the dream-making, though a previously existing phantasy may be bodily taken over and woven into the dream, a fact that gives the key to the explanation of highly wrought and yet momentary dreams, such as the well-known guillotine one related by Maury. Any part of a dream that appears to indicate an intellectual operation has been taken bodily from the underlying latent content, either directly or in a distorted form; the same applies to speech phrases that may occur in a dream. Even some of the waking judgements passed on a dream belong to the latent content. To repeat, there is in the dream-making nothing but transformation of previously formed mental processes.

The dream-making proper is thus a process more distant from waking mental life than even the most determined detractor of dream activities would maintain. It is not merely more careless, incorrect, incomplete, forgetful, and illogical than waking thought, but it is something that qualitatively is absolutely different from this, so that the two cannot be compared. Dream-making proceeds by methods quite foreign to our waking mental life; it ignores obvious contradictions, makes use of highly strained analogies, and brings together widely different ideas by means of the most superficial associations, for instance by such a feeble play on words as shocks the waking mind with a keen sense of ridiculousness. The mental processes characteristic of dreams would if they occurred in a conscious waking state at once arouse grave suspicion of impaired intelligence; as Jung has clearly pointed out<sup>1</sup> they are in fact processes that are frequently indistinguishable from those met with in advanced stages of dementia præcox and other psychoses.

Besides the detractors of dreams there are others who adopt the opposite attitude and ascribe to dreams various useful and valuable functions. As we shall see later, Freud holds that there is but one function of dreams—namely, to protect sleep. Several members of the post-psycho-analytical school, however, notably Maeder—and in this country Nicoll—maintain that

<sup>1</sup> 'Psychologie der Dementia præcox,' 1907.



dreams serve such functions as the formation of tentative efforts at the solution of various disturbing problems or dilemmas. In my opinion, the fallacy in this conclusion lies in a confusion between the latent content of the dream and the dream-making itself. Certainly in the latent dream thoughts there are to be found the processes described by Maeder, just as numerous other kinds of intellectual operations, but this in no sense proves that the dream itself is constructed for the purpose of developing them. Dream-making is nothing but a translation.

The affect in dreams has many interesting features. The incongruous manner in which it may be present when it is not to be explained by the ideas of the dream, or be absent when from these ideas it might have been expected, has already been noted above, and is quite elucidated by psycho-analysis, which reveals that in the underlying dream thoughts the affect is logically justified and is congruous enough. The apparent incongruity is solely due to the distortion of the conceptual content, whereby a given affect becomes secondarily attached to an inappropriate idea. The third dream mentioned above well illustrates this fact; the incongruity with which Mr. X's death was joyfully celebrated by his brother explains itself as soon as one realises that the figure of Mr. X in the dream represented that of another man in the latent content. The affect investing the latent content is always more intense than that present in the manifest content, so that, although strongly affective dream thoughts may produce an indifferently toned dream, the reverse never occurs—that is to say, an affective manifest content never arises from an indifferently toned latent content. Freud attributes this inhibition of the affect in dream formation partly to the cessation in sleep of the forward movement from the sensory to the motor side—he regards affective processes as essentially centrifugal—and partly to the suppressing effect of the censor, which will presently be further considered. Another important matter is that the nature of the affect as it appears in the manifest content is the same as that of the latent content, although, as has just been said, the intensity of it is always less there than here. The influence of the dream-making on the original affect is thus different from that on the rest of the dream thoughts, in that no distortion of it takes place. As Stekel puts it in a recent article,<sup>1</sup> *'Im Traume ist der Affekt das einzig Wahre.'* ('In dreams the only

<sup>1</sup> *Jahrbuch der Psychoanalyse*, Bd. i., S. 485.

true thing is the affect.') The affect appears in the same form in the latent as in the manifest content, although through the mechanisms of transference and displacement it is in the latter otherwise associated than in the former. It should, however, be remarked that a given affect in the manifest content may represent its exact opposite in the latent content, but on closer analysis it will be found that the two opposites were already present in the latent content, and were both of them appropriate to the context; as is so often the case in waking mental life, exactly contrasting mental processes in dream thoughts are intimately associated with each other. In such cases of inversion of affect, although both occur in the latent content, the one present in the manifest content always belongs to a more superficial layer of the unconscious, so that it is the inverted affect that yields the underlying meaning of the dream. Thus a repressed death wish may be masked by grief in the manifest dream, and fear in the latter is one of the commonest coverings for repressed libidinous desire.

Having mentioned some of the mechanisms that bring about the distortion of the latent into the manifest content we may next shortly consider the material and sources from which a dream is composed. Again we have sharply to distinguish between the sources of the manifest content and those of the underlying dream thoughts; the latter will presently be dealt with apart. Three peculiar features shewn by the *memory* in dreams have especially struck most observers: first the preference shewn for recent impressions; secondly, that the experiences are otherwise selected than in our waking memory, in that subordinate and hardly noticed incidents seem to be better remembered than essential and important ones; and thirdly the hypermnesia for previously forgotten incidents, especially for those of early childhood life.

The first two of these features may be considered together, for they are intimately connected. In every dream without exception occur mental processes experienced by the subject in the last waking interval (*Traumtag*); other recent experiences that have not occurred on the day actually preceding the dream are treated in just the same way as more ancient memories. There must therefore be some special quality that is of significance in dream formation attaching to the mental experiences of the preceding day. Closer attention shews that the experience in question may be either psychically significant

or quite indifferent; in the latter case, however, it is always associated with some underlying significant experience. The dream-instigator (*Traumerreger*) may be (1) a recent significant experience that is directly represented in the manifest content, (2) a recent significant experience that is indirectly represented in the manifest content by the appearance there of an associated indifferent experience, (3) an internal significant process (memory) that regularly is represented in the manifest content by the appearance of an associated, recent, indifferent experience. In each case, therefore, a recent experience (*i.e.*, from the preceding day) appears directly in the dream; it is one either significant in itself or else associated with another (recent or old) significant one. The selection of incidents of subordinate interest applies only to incidents of the day before the dream. Older incidents, that at first sight appear to be unimportant, can always be shewn to have *already* become on the day of their occurrence psychically significant through the secondary transference on to them of the affect of significant mental processes with which they have got associated. The material from which a dream is formed may therefore be either psychically significant or the opposite, and in the latter case it always arises in some experience of the preceding day.

(8) An example of an incitement from the dream-day that is also of interest in connection with the subject of memory is the following: I dreamed that *I was travelling in Bavaria and came to a place called Peterwardein*. I felt quite sure I had never seen such a name and regarded it as being probably a neologism. Two days later I was reading a book on Turkish history, when I came across the name of the place, which is an ancient fortress in South Hungary. As I knew I had been reading the same book on the evening before my dream, my interest was aroused and I turned back to see if the name had occurred earlier in the book. I then found that on the evening in question I had skimmed over a page containing a number of Hungarian place-names, of which Peterwardein was one, so that without doubt my eye must have caught the name and noted it, although I had absolutely no memory of it. I then thought of the Hungarian town Grosswardein, and eliminating the syllables common to the two names I saw that the dream must have contained an allusion to Peter Gross, whom I had met in Bavaria, and whose father had been born in Hungary, a fact I had a special reason to be interested in.

The explanation Freud gives of these facts is shortly as follows: The meaning of the appearance in the manifest content of indifferent mental processes is that they are employed in the dream-making to *represent* underlying processes of great psychological significance, just as in battle the colours of a regiment, themselves of no intrinsic value, stand for the honour of the army. A more accurate analogy is the frequent occurrence in the psychoneuroses of the transposition of a given significant affect on to an indifferent idea; for instance, intense dread of a harmless object may arise as a transposition, on to the secondarily associated idea of this object, of a dread that was fully justified in relation to the primary idea. In short, the process is another form of the displacement mechanism described above. Just as in the psychoneuroses, so also in the dream the primary underlying idea is of such a nature as to be incapable of becoming conscious (*bewusstseinsunfähig*), a matter that will presently be further discussed. Freud explains the regular occurrence in the dream of a recent experience by pointing out that this has not yet had time to form many associations, and therefore is more free to become associated with unconscious psychological processes. The circumstance is of interest as indicating that during the first sleep after a mental event, and unnoticed by our consciousness, important changes go on in our memory and conceptual material; the familiar advice to sleep over an important matter before coming to a decision has an important basis in fact.

The third feature, namely the hypermnnesia particularly for experiences of early childhood, is of cardinal importance. Early memories, which the subject had completely forgotten, but the truth of which can often be objectively confirmed, not infrequently occur with startling fidelity even in the manifest content. This fact in itself should suggest the ontogenetic antiquity of dream processes. In the latent content the appearance of such forgotten memories is far more frequent, and Freud holds it probable that the latent content of every dream is connected with ancient mental processes that extend back to early childhood. The following instance may be given of this:

(9) A patient, a man aged thirty-seven, dreamed that *he was being attacked by a man who was armed with a number of sharp weapons; the assailant was swarthy, and wore a dark moustache. He struggled and succeeded somehow in inflicting a skin wound on his opponent's left hand. The name Charles seemed to be*

*related to the man, though not so definitely as if it were his name. The man changed into a fierce dog, which the subject of the dream succeeded in vanquishing by forcibly tearing his jaws apart so as to split his head in two.* No one could have been more astonished at the dream than the patient himself, who was a singularly inoffensive person. The name Charles led to the following free associations: A number of indifferent acquaintances having this as their Christian name—a man, named Dr. Charles Stuart, whom he had seen at a Scottish reunion, at which he had been present on the day before (this man, however, wears a beard)—another man present at the reunion whose personal appearance had many traits in common with his assailant in the dream—the Scottish Stuart Kings Charles I. and Charles II.—again the acquaintance Charles Stuart—Cromwell's designation of King Charles I., 'that man Charles Stuart'—the medical practitioner of his family, whose name was Stuart Rankings, and who had died when the patient was nine years old. Then came the memory of a painful scene, previously quite forgotten, in which the doctor had roughly extracted two teeth from the terror-stricken patient after forcibly gagging his mouth open; before he could accomplish this the doctor had had his left hand badly bitten. The date of this occurrence could from extrinsic evidence be referred to the patient's fifth year. From a number of reasons that cannot be given here it became clear that the dream thoughts altogether clustered around this childhood experience. The assailant in the dream was no other than the doctor whose treatment of the patient was nearly thirty years after his death thus fearfully avenged in the latter's dream.<sup>1</sup> The play on his name Stuart Rankings (Rank-kings), which enabled him to become identified first with the Stuart King Charles, and then with Charles Stuart, and finally to be called in the dream plain Charles, is interesting. It should be added that the Dr. Charles Stuart mentioned above is a dental surgeon, who a week previously had in the patient's presence performed a painful tooth extraction on the latter's wife; on the day before the dream he had inquired of the patient concerning his wife's health. The identification of the man with the dog in the latter part of the dream was greatly over-determined. The doctor in question

<sup>1</sup> The deeper interpretation of the dream will be easy to those familiar with psycho-analysis, especially when I add that the dream was accompanied by appalling dread, and that the first association to 'hand' was 'neck.'

was a noted dog fancier, and had given the patient a fine collie to whom he became greatly attached; he led a very irregular life, and the patient often heard his father refer to him as a gay dog; finally he died 'like a dog,' from an accidental overdose of poison, in the presence of a number of people who were from ignorance powerless to render the slight assistance that would have saved his life.

The source of some dream material is to be found in somatic stimuli during sleep, though by no means so frequently as many writers maintain. They are, however, in no case the whole cause of the dream, but are merely woven into its fabric in exactly the same way as any other psychical material, and only when they fulfil certain conditions. The exaggerated claims sometimes made out for the importance of these stimuli are easily disproved by, for instance, the following considerations. A sleeper may react to a given somatic stimulation when this is of a lively nature, such as bad pain, in one of several different ways. In the first place he may altogether ignore it, as often occurs in bodily disease, secondly he may feel it during, or even throughout, sleep without dreaming at all,<sup>1</sup> thirdly he may be awakened by it, and fourthly he may weave it into a dream. Even in the last instance it enters into the dream only in a disguised form, and it can be shewn that this disguise depends on the nature not only of the stimulus but of the rest of the dream. The same stimulus may appear in different dreams, even of the same person, under quite different forms, and analysis of the

<sup>1</sup> In some, though by no means all, of the so-called 'battle dreams' that have recently been the subject of much controversy this may perhaps be the case—that is to say, that an actual memory of a terrible situation is faithfully reproduced during sleep. This occurs only in severe cases of 'shell shock' when the patient is constantly striving in waking life to obliterate the painful memory so far as he can, but is no longer able to do so when tired and in a state of lowered consciousness—*e.g.*, light sleep. In most cases, however, two further features are to be discovered on closer examination. In the first place, it will be found that, although the dream is mainly a replica of actual experiences, there are usually some superadded elements present that do not belong to these experiences. This means that an attempt, however unsuccessful, is being made to transform the painful and sleep-disturbing memory into something more harmless—*i.e.*, a true dream is being constructed. The prognosis of the 'shell shock' is better when this is the case. In the second place, if the anxiety battle dreams persist for a long period one may suspect that the traumatic effect of the experience is being increased by the action of unconscious complexes with which the painful memory has become associated. In both these cases the dream comes under the formula of Freud's theory as here described.

dream regularly shews that the form adopted is altogether determined by the character and motive of the dream. In short, the dream makes use of the somatic stimulus or not according to its needs, and only when this fulfils certain requirements.

A somatic stimulus can not only furnish psychical material to be used in the dream-making, but may occasionally serve as the effective instigator of the dream. These are usually what Freud terms 'comfort-dreams' (*Bequemlichkeitsträume*), where the stimulus (mostly a painful one) is transformed into a symbol of something pleasurable, and is so prevented from disturbing the dreamer. Even here, however, the occurrence of a somatic stimulus can rarely explain the whole dream, for as a rule it at most merely arouses a complex train of thought that is already present, and out of which the dream is constructed; when it cannot do this it wakes the sleeper. The following example will perhaps make the process clearer:

(10) A man saw in front of him in a dream a Greek altar composed of a solid mass of writhing snakes. There were nine of them, and they finally assumed the shape of a pyramid or triangle. He woke at this point suffering from severe colicky pains in the abdomen, and, being a medical man, the resemblance at once flashed across his mind between the idea of contracting coils of intestine and that of writhing snakes. One can hardly doubt that there was here a genetic relation between the somatic stimulus and the dream, especially as the visual projection of internal sensations into a region in front of the person is known to occur frequently both in dreams and in insanity. According to the physiological view we have here an adequate explanation of the dream. The psychologist, on the other hand, notes that there are features in the dream (the altar, the number nine, the triangular form) quite unexplained by this ætiology, and which he is, or should be, disinclined to attribute to 'chance.' Freud would say that the wish to sleep, which is the real cause of every dream (see later), had attempted to transform the disturbing sensations into a more satisfactory imagery, and so to incorporate them with an agreeable train of thought in the unconscious as to deceive the sleeper and spare him the necessity of waking; in the present case the pain proved too insistent for this to be possible, except for a short time. That at all events some psychological mechanism was at work is shewn by even a slight examination of the unexplained features in the

dream. The thought of them at once reminded the subject that on the preceding day a young lady had asked him why the number nine was so prominent in Greek mythology; he replied that it was because nine, being composed of three times three, possessed in a high degree the properties of the sacred number three. At this point he felt embarrassed lest she should go on to inquire why three was a sacred number, for, of course, he could not tell her of the phallic significance of this, with its relation to religious worship in general and to snake-worship in particular, and he had no simple explanation ready to his mind. Fortunately, either her curiosity was satisfied by the first answer or her attention was diverted by the general flow of conversation (it was at a dinner-party), so the dilemma did not arise. The train of thought thus aroused and brought to an abrupt stop evidently had very intimate associations, for the dream is plainly a narcissistic and exhibitionistic one; in it the subject identifies himself with the god Priapus who was adored for his masculine attributes (here represented by the typical phallic symbol of the snake). The avoidance of haste in being content with the first superficial explanation that offers itself will always shew that, as here, dreams are concerned with much more significant matters than intestinal colic.

I have observed many beautiful examples of the same mechanism as the result of the air raids over London, especially those taking place during deep sleep either late at night or early in the morning. Some of my patients have proved extremely ingenious in converting the noisy stimulus of warning signals and barrage gunfire into reassuring dreams, so avoiding the disagreeable necessity of waking, with its unpleasant consequences of having to get up on a cold night and take shelter, of fear, anxiety, and so on. One typical feature of such dreams is that in the earlier stages of the raid, when the firing is more distant, the disturbing stimuli can be quite successfully transformed into other imagery, while as it gets louder and louder the resemblance between it and the imagery becomes more and more evident—*i.e.*, the disguise is less and less perfect, until the noise is so great that the person wakes. They in this respect resemble those sexual dreams in which the early part of the dream consists of quite disguised symbolism, the meaning of which becomes more and more evident as the stimulus becomes more insistent, until the person wakes with a seminal emission.



(11) A patient, a woman aged forty, dreamed that *she was buying Christmas presents in a fair. Before her was a box containing, in two rows one above the other, six bulls'-eye lanterns or electric torches, of which only the front glass could be seen. At this point a report of artillery was heard and she exclaimed 'Goodness! That must be a raid.' Someone close by, however, said 'Oh no, don't you know they are beating the drums in honour of the end of the war' (or else 'of the victory,' the patient having the impression of both phrases). She was again alarmed by a second report, but was once more reassured. She then recollected that she had heard about the arrangements for the celebration, and was thinking about the details when she was awakened by some one knocking at the door. By this time the dream had so successfully dissuaded her of any possibility of a raid that she never thought of it on waking—she didn't even hear at first the loud firing that was going on—but supposed that the lady whose rooms were below had forgotten her flat-key and wanted to be let in (there being a common door-key to both sets of rooms). She was firmly persuaded of this until she opened the door below and found that there was a raid alarm. The reports in the dream were doubtless those of the near guns, whereas she had been able to transform the more distant earlier sounds into harmless imagery.*

The imagery itself was a compromise between military thoughts and pleasanter personal ones. The news had come the day before of the victorious end to the campaign in German East Africa, though, of course, there had been no celebration of it. The box was one she was just sending to the front, and was to contain, amongst other things, an electric torch. The appearance of the packed objects was greatly over-determined: ammunition shells in their cases, the muzzles of guns (as a child she used constantly to see these in the sides of old wooden battleships near her home), the box of eggs out of reach that Alice tries to buy in Looking-Glass World, bulls'-eye lanterns and magic lanterns that fascinated her as a child, six-chambered revolvers, all played a part; in childhood she was excited by stories in which a revolver was suddenly whipped out (she had later learnt to use one herself in connection with private theatricals that took place at a happy period of a love affair which, however, ended unfortunately). The patient was at the time suffering from ungratified sexual desire, and there was reason to think that the object she was reaching towards in the dream was a symbol of a (soldier's) phallus.

(12) A patient, a man of thirty-four, dreamed that *a boat-load of women and children were escaping under rifle-fire, the scene taking place in India during the Mutiny. They managed to escape, after which he was concerned with the problem of how to publish the news of their terrible sufferings in the English newspapers without too greatly harrowing the feelings of the civilian population. The scene then changed and he was charged with the task of deciding how best to punish the mutineers. Some were blown from the mouth of cannons (as happened historically), and others were to be mown down by guns drawn up in a city square. The latter performance was in progress and he was debating whether there was any danger to the civilian population through shell splinters* when he woke to the booming of the barrage. The references are evident to the German outrages on civilians and women by sea and through the air, but a temporarily successful effort is made by the dream to convert such thoughts into a less disturbing historical story of events that took place sixty years ago and thousands of miles away.

Having partly answered the question of *how* a dream is built we may take up the more difficult one of *why* it is built, or, more accurately put, the problems concerning the forces that go to make a dream. It is impossible to do this without first referring to Freud's views on psychical repression (*Verdrängung*) and unconscious mental processes; these views in themselves call for a detailed exposition which cannot here be given, so that this part of the present paper will be even more incomplete than the rest. Freud uses the term 'conscious' to denote mental processes of which we are at a given moment conscious, 'preconscious' (*vorbewusste*) to denote mental processes of which we can spontaneously and voluntarily become conscious (*e.g.*, a memory out of one's mind for the moment, but which can readily be recalled), and 'unconscious' to denote mental processes which the subject cannot spontaneously recall to consciousness, but which can be reproduced by employing special devices (*e.g.*, hypnosis, psychoanalysis, etc.). He infers that the force which has to be overcome in the act of making the last named processes conscious is the same as that which had previously opposed an obstacle to their becoming conscious—*i.e.*, had kept them repressed in the unconscious. This force or resistance is a defensive mechanism which has kept from consciousness mental pro-

cesses that were either primarily or secondarily (through association and transposition) of an unacceptable nature; in other words these processes are unassimilable in consciousness. Returning now to the subject of dreams, we have first to remark that Freud empirically found an intimate and legitimate relation between the degree of confusion and incomprehensibility present in a given dream and the difficulty the patient experienced in communicating the free associations leading to the dream thoughts. He therefore concluded that the distortion which had obviously occurred in the dream-making was related to the resistance that prevented the unconscious dream thoughts from becoming conscious; that it was in fact a result of this resistance. He speaks of the resistance that keeps certain mental processes unconscious as the 'endopsychic censor.'<sup>1</sup> In the waking state the unconscious processes cannot come to external expression, except under certain abnormal conditions. In sleep, however, the activity of the censor, like that of all other more conscious processes, is diminished, though it is never entirely abrogated. This fact permits the unconscious processes (the latent content) to reach expression in the form of a dream, but as they still have to contend with some degree of activity on the part of the censor they can only reach expression in an indirect way. The distortion in the dream-making is thus a means of evading the censor, in the same way that a veiled phraseology is a means of evading a social censor which would not permit a disagreeable truth to be openly expressed. The dream is a compromise between the dream thoughts on the one hand and the endopsychic censor on the other, and could not arise at all were it not for the diminished activity of the latter during sleep.

Distortion of the dream thoughts by means of the mechanisms of condensation and displacement is by no means the only way in which the censor manifests itself, nor is this distortion the only way in which the censor can be evaded by the dream processes. In the first place we have already noticed above one of its manifestations under the name of secondary elaboration. This process continues even in the waking state,

<sup>1</sup> Considerable objection has been raised—*e.g.*, by Bleuler—to Freud's use of the word censor, but so far as I can see it is rather to the word than to the conception. It is not to be imagined that Freud understands by this term anything in the nature of a specific entity; to him it is nothing more nor less than a convenient expression to denote the sum total of repressing inhibitions.

so that the account of a dream as related directly after waking differs from that related some time after. The fact of this change in the subsequent memory of a dream is sometimes urged as an objection to the interpretation by psycho-analysis, but the change is just as rigorously determined, and the mechanism is as precisely to be defined, as that of any other process in the dream-making. For instance, if the two accounts are compared, it will be found that the altered passage concerns what might be called a weak place in the disguise of the dream thoughts; the disguise is strengthened by the subsequent elaboration by the censor, but the fact of the change points to the need for distortion at that given spot, a point of some value in the analysis.<sup>1</sup> Instead of subsequently altering this weak place the censor may act by interposing doubt in the subject's mind as to the reliability of his memory about it; he may say 'The person in the dream seemed to carry such and such an object, but I am not sure that I haven't imagined that in thinking over the dream.' In such cases one is always safe in accepting the dubiously given point as unhesitatingly as the most vivid memory; the doubt is only one of the stages in the disguise of the underlying dream thoughts.

An interesting way in which the censor may act is by the subject receiving the assurance during the dream that 'it is only a dream.' The explanation of this is that the action of the censor has set in too late, after the dream has already been formed; the mental processes which have, as it were unwittingly, reached consciousness are partly divested of their significance by the subject treating them lightly as being 'only a dream.' Freud wittily describes this afterthought on the part of the censor as an *esprit d'escalier*.

The last manifestation of the censor is more important—namely, the tendency to forget dreams or part of them; it is an extension of the doubting process mentioned above. Freud traces this tendency to forget, as also that shewn in many

<sup>1</sup> I have elsewhere ('Ein klares Beispiel von sekundärer Bearbeitung,' *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 135) narrated an instance of this in which a patient was unconsciously impelled, in the act of relating a dream that had occurred nearly twenty years before, to alter a certain feature in it. She knew that she was changing this, but had no idea why she did it; the analysis shewed that it concerned a weak place which, if left in its original form, would, in the current circumstances, have at once betrayed the meaning of the dream thoughts. Though consciously she was quite unaware of the nature of these, her intuition had felt the danger.

forgetting acts of waking life,<sup>1</sup> to the repressing action of the censor. As was mentioned above, the fragmentariness of the remembered dream, together with the uncertainty and actual falsification in the memory of it, are frequently urged as casting doubt on the reliability of any psychological analysis of dreams, but if a truly empiric attitude is adopted towards the material obtainable, as elsewhere in science, it will be found that these features are in a sense part of the nature of the dream itself and have to be explained just as other features have. One should always remember that it is the same mind that produces both the dream and the subsequent changes in it, whether these are additions or falsifications.

Freud's explanation can readily be experimentally confirmed. When a patient informs the physician that he had a dream the night before but that he cannot recall anything of it, it frequently happens that the overcoming of a given resistance during the psycho-analytic treatment removes the barrier to the recollection of the dream, provided, of course, that the resistance concerns the same topic in the two cases; the patient then says, 'Ah, now I can recall the dream I had.' Similarly he may suddenly during the analysis of the dream, or at any time subsequent to the relation of the dream, supply a previously forgotten fragment (*Nachtrag*); this latter fragment invariably corresponds with those dream thoughts that have undergone the most intense repression, and therefore those of greatest significance. This occurrence is extremely frequent, and may be illustrated by the following examples:<sup>2</sup>

(13) A patient, a man aged twenty-six, dreamed that *he saw a man standing in front of a hoarding with a gate-entrance on his left. He approached the man, who received him cordially and 'entered into conversation' with him.* During the analysis he suddenly recalled that the hoarding seemed to be the wall of an 'exhibition,' into which the man was entering to join a number of others. The significance of this added fragment will be evident when I mention that the patient, who had frequently indulged in *pædicatio*, was a pronounced *voyeur*.

(14) A patient, a woman aged thirty-six, dreamed that *she was standing in a crowd of schoolgirls. One of them said 'Why do you wear such untidy skirts?' and turned up the patient's skirt to*

<sup>1</sup> See Chapter IV.

<sup>2</sup> A more striking instance is related in Chapter X.

*shew how worn the under-skirt was.* During the analysis, three days after relating the dream, the patient for the first time recalled that the under-skirt in the dream seemed to be a night-dress, and analysis of this led to the evocation of several painful memories in which lifting a nightdress played an important part; the two most significant of these had for many years been forgotten.

As was mentioned above, the censor can be evaded by the dream thoughts in other ways than the usual one of distortion. They may appear in the manifest content in their unaltered form, but their significance be misunderstood by the subject when he recalls the dream. For instance, a person may dream that he sees his brother dead, the actual dream thoughts being the wish that the brother may die. The subject fails to realise that the picture corresponds with a wish, even a suppressed one, partly because the nature of this is so horribly unlikely that it does not occur to his consciousness, and partly because the dream is accompanied by an emotion, anxious grief, which is apparently incongruous with a wish. Such dreams are always intensely distressing (*Angsiträume*), and in a sense it may be said that the dread here replaces the distorting mechanisms of condensation and displacement.

Although Freud attaches great importance to the action of the endopsychic dream censor in causing the transformation of the latent into the manifest content of the dream, he does not attach an exclusive importance to it in this respect. He recognises that other factors are also at work in making the dream thoughts unintelligible to the waking consciousness. One of these factors was mentioned above in connection with regression, and it is clear that ideational material that is presented to consciousness in the regressive form of the raw material of its sensorial imagery could not be understood. Another important factor leading to distortion is the process of symbolism, one that seems to be bound up with the very nature of the unconscious mind itself and undoubtedly related to its ontogenetic and phylogenetic history.<sup>1</sup>

We have finally to consider the most important problems of all, those relating to the latent content or dream thoughts. The first thing that strikes one about these is their intense psychical significance. A dream never proceeds from trifles, but only from the mental processes that are of the greatest

<sup>1</sup> For a discussion of this see Chapter VII.

moment and interest to the subject. Dreams never deal with trivialities, however much they may appear at first sight to do so. The explanation of why incidents of subordinate interest occur in the manifest content has been given above. More than this, the dream thoughts are processes of the greatest *personal* interest, and are thus invariably egocentric. We never dream about matters that concern only others, however deeply, but only about matters that concern ourselves. It has already been mentioned that the underlying dream thoughts are perfectly logical and consistent, and that the affect accompanying them is entirely congruous to their nature. Freud, therefore, not only agrees with those writers who disparage the mental quality of dreams, holding as he does that the dream-making proper contains no intellectual operation and proceeds only by means of the lower forms of mental activity, but he also agrees with those other writers who maintain that dreams are a logical continuance of the most important part of our waking mental life. We dream at night only about those matters that have most concerned us by day, though on account of the distortion that takes place in the dream-making this fact is not evident. Lastly it may be added that all the dreams occurring in a given night arise from the same group of latent dream thoughts, though they usually present different aspects of them.<sup>1</sup>

There are certain differences between the dreams of a young child and those of an adult. In the child, at all events before the age of four, no distortion, or very little, takes place, so that the manifest content is identical with the latent content. In correspondence with this fact we find that children's dreams are logical and co-ordinate, an observation that is hard to reconcile with the commonly received opinion that dream processes arise from a dissociated activity of the brain cells, for one can see no reason why dreams should be a meaningless conglomeration of disordered and lowered mental functioning in adults when they are obviously not so in the child. Further, with young children it is easy to recognise that the dream represents the imaginary fulfilment of an ungratified wish; the child is visiting a circus that the day before he had been forbidden to go to, and so on. Now, Freud maintains that the latent content of every dream represents nothing else than the imaginary fulfilment of

<sup>1</sup> See Chapter X. for an example of this.

an ungratified wish.<sup>1</sup> In the child the wish is an ungratified one, but it may not have undergone repression, that is to say it is not of such a nature as to be unacceptable in consciousness; in the adult the wish is not merely one that could not be gratified, but is of such a nature as to be unassimilable in consciousness, and so has become repressed. It frequently happens that even in the adult a wish-fulfilment appears in the manifest content, and still more frequently that a wish-fulfilment not present in the manifest content, but revealed by psycho-analysis, concerns a wish of which the subject is quite conscious; in both these cases, however, full analysis always discloses that these wishes are merely reinforcements of deeper, unconscious ones of an associated nature. No wish, therefore, is able to produce a dream unless it is either unconscious (*bewusstseinsunfähig*) or else associated with an allied unconscious one.

It has sometimes been alleged by Freud's opponents that his generalisation of all dreams representing a wish-fulfilment is the outcome of observing a few dreams of children, and that his analyses merely consist in arbitrarily twisting the dream, to gratify some *a priori* notion, until a wish can be read into it. This suggestion is historically untrue, for Freud came to the analysis of adult dreams from the analysis, not of children's dreams, but of adult psychoneuroses.<sup>2</sup> He found that his patients' symptoms arose as a compromise between two opposing wishes, one of which was conscious, the other unconscious, and that they allegorically represented the imaginary fulfilment of these two wishes. He further found that an essential factor in their production was a conflict between the two wish-systems, of such a kind that the unconscious one was forcibly prevented

<sup>1</sup> It seems necessary to keep calling attention to the fact that Freud's generalisation about dreams representing wish-fulfilments refers to the latent content of the dream, to the dream thoughts from which the dream proceeds, and not to the manifest content, for one constantly hears the irrelevant objection that dreams do not seem always to deal with wishes, one often expressed in the question 'How can a fear dream indicate a wish, when something is happening in it that the dreamer very much doesn't want to happen?' It is only after analysis that the latent content of the dream is known, and it is only to the latent content that the wish-fulfilment theory applies.

<sup>2</sup> As may well be imagined, a number of Freud's individual conclusions had been anticipated by previous writers, particularly by artists. In the 'Traumdeutung' he deals fully with the scientific literature on the subject. Prescott ('Poetry and Dreams,' *Journ. of Abnormal Psychology*, vol. vii., Nos. 1 and 2) has recently published an interesting paper on the relation of poetry to dream-production, using English poetry as an example.



from becoming conscious; it was unconscious because it was repressed. It frequently happened that the psycho-analysis of the patients' symptoms directly led to their dreams, and on submitting these to the analysis in exactly the same way as any other mental material he discovered that the construction of them shewed close resemblances to that of the neurotic symptoms.<sup>1</sup> In both cases the material examined proved to be an expression of deeper mental processes, and in both cases these deeper processes were unconscious, and had in reaching expression undergone distortion by the endopsychic censor. The mechanism by means of which this distortion is brought about is very similar in the two cases, the chief difference being that representation by visual pictures is much more characteristic of dreams. In both cases the unconscious mental processes arise in early childhood and constitute a repressed wish, as do all unconscious processes, and the symptom or dream represents the imaginary fulfilment of that wish in a form in which is also fused the fulfilment of the opposing wish.

Dreams differ from psychoneurotic symptoms in that the opposing wish is always of the same kind, namely, the wish to sleep. A dream is thus the guardian of sleep, and its function is to satisfy the activity of unconscious mental processes that otherwise would disturb sleep. The fact that sometimes a horrid dream may not only disturb sleep, but may actually wake the sleeper, in no way vitiates this conclusion. In such cases the activity of the endopsychic censor, which is diminished during sleep, is insufficient to keep from consciousness the dream thoughts, or to compel such distortion of them as to render them unrecognisable, and recourse has to be had to the accession of energy that the censor is capable of exerting in the waking state; metaphorically expressed, the watchman guarding the sleeping household is overpowered, and has to wake it in calling for help.

Freud couples with his discussion of dream problems a penetrating inquiry into many allied topics, such as the nature of the unconscious and the function of consciousness, that cannot here be even touched upon. I would conclude this imperfect sketch of his theory of dreams by quoting a sentence of his to the effect that '*Die Traumdeutung ist die Via Regia zur Kenntniss des Unbewussten im Seelenleben.*' ['The interpretation of dreams is the Via Regia to the knowledge of the unconscious in mental life.']

<sup>1</sup> These resemblances are expounded and illustrated in Chapter XII.

## CHAPTER IX

### SOME INSTANCES OF THE INFLUENCE OF DREAMS ON WAKING LIFE<sup>1</sup>

THE days are long past, at least in civilised countries, when the presages furnished by dreams served as incitements to a given course of action, when the gravest projects, the embarking on momentous campaigns, the making or unmaking of rulers, could be decided upon in consequence of a significant dream. Since the decrease—or, more cautiously put, the transformation—of superstition that the last two or three centuries have brought about, conscious reliance on such presages has become a mark of ignorance, and at the present day is not often met with except in the lower classes. It is probable, however, that in more subtle ways many of our waking processes are affected by preceding dreams to a greater extent than is generally recognised. This particularly applies to the occurrence of certain moods, of foreboding, anxiety, gaiety, and so on, which begin at the moment of waking and frequently last throughout the day; it is often possible to trace these to corresponding affects that dominated the dreams of the preceding night.

In the field of psychopathology similar occurrences may be observed. Féré was, I think, the first to call attention to the fact that the inception of hysterical symptoms can sometimes be traced to a given dream,<sup>2</sup> and I have noted many instances of this. The subject has been touched on, though not properly elucidated, by several writers,<sup>3</sup> the latest being Waterman.<sup>4</sup>

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, April, 1911.

<sup>2</sup> Féré, 'Note sur un cas de paraplégie hystérique consécutive à un rêve,' *C. R. Soc. de Biol.*, November, 1886, No. 41. 'A Contribution to the Pathology of Dreams,' etc., *Brain*, 1887, vol. ix., p. 488.

<sup>3</sup> See, for instance, de Messières, 'Les rêves chez les hystériques,' *Thèse de Bordeaux*, 1895.

<sup>4</sup> Waterman, 'Dreams as a Cause of Symptoms,' *Journal of Abnormal Psychology*, October-November, 1910, vol. v., p. 196.

It is quite certain that in these cases the dream has played only a secondary part, by constructing a given mental composition from elements that had at one time been fully conscious;<sup>1</sup> the most that the dream can do, therefore, is to determine the precise form taken by the symptom in question. I have shewn that this also holds true for a certain class of myths and beliefs.<sup>2</sup>

The following three instances are examples of a course of behaviour being grossly determined by a preceding dream. In the first the incentive was throughout consciously recognised, in the second it was half-consciously recognised, and in the third not at all. Yet in all there was reason to believe that behind the surface motives lay deeper ones that were now unconscious in the fullest sense of the word.

The *first* was related to me by a Canadian engineer. At the age of twenty he had interrupted his studies by accepting a Government appointment which involved the surveying of a distant and previously unexplored tract of country. He was away for two or three years, and became so enamoured of the free life in the woods, with only the Red Indians for company, that he was exceedingly loath to go back to town life. One night he had a most unpleasant anxiety dream to the effect that all his family were dead, and throughout the next day he was very disturbed at the thought. The same dream recurred in three successive nights, and, although he was in general the very reverse of superstitious, the impression thus made on his mind was so vivid that, in order to reassure himself of his family's safety, he at once went to the nearest post, handed in his resignation, and started for home. Here he found them all well, and they prevailed on him to stay at home and take up his studies again.

The form of the dream, grief at the death of beloved parents, was so very characteristic that one could not avoid grouping it in the class of Freud's typical dreams—*i.e.*, those the interpretation of which is constant in different persons.<sup>3</sup> The natural inference was that the infantile roots of the dream related to repressed and long-forgotten child fancies of antipathy towards the parents, and that these had been brought to life by some

<sup>1</sup> See Chapter XII. Also A. A. Brill, 'Dreams and their Relation to the Neurosis,' *New York Med. Journ.*, April 23, 1910.

<sup>2</sup> Ernest Jones, 'Der Alptraum in seiner Beziehung zu gewissen Formen des mittelalterlichen Aberglaubens,' 1912.

<sup>3</sup> Freud, 'Die Traumdeutung,' 4<sup>e</sup> Aufl., 1914, S. 186.

recent mental experience. I had no opportunity of confirming the first of these conjectures, though the general probability of it is to me from other experience practically conclusive, but as regards the second one the following contributions have some bearing. For some time before the dreams the subject had been troubled by conscience pricks that by his indulging his personal wishes he was disappointing the hopes of a successful career his family had built on him, and the thought several times occurred to him that were it not for them he could follow his own fancy. For two weeks before the dreams his accustomed letters from home had not arrived, and the horrid idea kept crossing his mind that his previous thought, or half wish, might have come true. The distressing dreams, therefore, in which it appeared actually to be true, profoundly disturbed him, and nothing could relieve his anxiety except seeing his family safe at home. One knows how often an unreasonable or exaggerated anxiety and solicitude cover repressed wishes of a hostile nature, as in the case of the unhappy wife who is constantly trembling lest something terrible should befall her unsympathetic husband.

The *second* instance concerned a patient, an unmarried American lady of twenty-six. She was the eldest daughter, and had always been passionately devoted to her mother, regularly taking her side in parental quarrels. Since the age of fourteen she had been obsessed by the fear that her mother, who for many years had suffered from chronic heart disease, might die. She had never left home until, at the age of twenty, she went to an educational centre some two hundred miles away. Here she reproached herself for having left her mother, whom she had always tended. One evening, shortly after receiving a rather bad report of her mother's health, there was a college debate, and the side she defended had to wear as a sign of their partisanship a small red cloth shield. That night she dreamed that she saw her mother's bedroom very distinctly. It resembled the actual room in every detail, except that on the wall opposite to the bed was pinned a red shield, and that her mother was lying dead. She woke in horror, and on the next day she travelled home by the first train. Here she found her mother ill in bed, but apparently in no greater danger than usual. Her first act, and surely an extraordinary one, was to pin on to the wall opposite the bed the little red shield. She rationalised this action as being intended to give her mother the opportunity

of looking at an interesting memento. She slept with her mother, and on the second morning after woke to find her dead beside her. The shock of this she had never got over; she tortured herself with remorse that in some mysterious way she was responsible for her mother's death, she felt herself always haunted by her spirit, and was totally unable to undertake any occupation whatever, even five years after. She suffered from a phobia of red,<sup>1</sup> and had never been able to revisit her home.

Those unaccustomed to exploring the deeper recesses of the mind will have no difficulty in framing a satisfying explanation of these facts—perhaps somewhat as follows: The dream was merely an expression of a natural fear, which again would beset anyone whose dearest relative suffered from a mortal malady. The later symptoms and reactions are quite comprehensible in a person who had sustained such a peculiarly severe shock. Unfortunately for the truth of this simple explanation, the psycho-analysis I was able to carry out revealed a more complex state of affairs, only a fragment of which can here be described. At a very early age the patient had been greatly in love with her father, and had indulged in phantasies in which she saw herself supplanting her mother in various circumstances. About this time a disliked aunt, who lived with them, died, and the idea occurred to the patient that if a similar calamity were to happen to her invalid mother the loss would have its compensations in other directions. The wish here implied was strongly repressed, but lived on in the unconscious, where its activity was manifest only in the reaction formation of the patient's excessive devotion to her mother and steadily increasing indifference, or rather antipathy, towards her father; a pronounced homosexual tendency aided this process. The college debate, which, significantly enough, was on the topic of divorce and re-marriage, together with the bad report from home, had aroused the unconscious death complex, which came to fairly open expression in her dream. The dream differed from reality in two respects, in the presence of the red shield in the room and in the death of her mother. The patient's action in bringing about a more complete correspondence between the dream and reality by pinning up the shield in her mother's room was a symbolic expression of her repressed wish

<sup>1</sup> Erythrophobia, as distinguished from eretophobia, the fear of blushing, to which this term is sometimes incorrectly applied.

that the correspondence might be completed in the other respect also.<sup>1</sup>

The *third* instance was one that I observed some years ago. An old man had been arrested on account of an indecent offence, and had been sent to the asylum. There was no clear evidence of any definite psychosis, the only abnormality found being some slight senile deterioration. He was allowed to go about the grounds on parole, and one day he escaped, went home, and killed his wife and himself. There was a serious outcry in the local newspapers about the supposed remissness of the asylum authorities, and the assistant medical officer in charge of the patient was very perturbed, particularly, perhaps, as he was at the time anticipating an important promotion. One newspaper stated that only recently the relatives had visited the asylum and had warned the doctor that they were afraid of the patient, as he had threatened to kill his wife. The superintendent questioned the different medical officers, who were all sure they had seen no relative and had known nothing of any such threat; the story was subsequently shewn to be a fabrication invented by some one who had a grudge against the asylum authorities. However, two days before the coroner's inquest, the doctor in question, whom we may call X, came to the superintendent saying that he had a dim recollection of such a visit as that described. As Dr. X had previously been quite sure of the contrary, and was in general of an over-scrupulous and conscientious disposition, the superintendent dismissed it as a fancy born of his perturbation. Still, not only did the memory persist, but its outlines gradually got more clear and defined, so that by the day of the inquest Dr. X was convinced of its reality. It ran in detail as follows: Two ladies visited him in his office at a busy time. A medical colleague was seated at a desk near by. Dr. X was struck by an undue familiarity on the part of the more prominent one, who leaned with her arms across his desk; still it was the other one, who stood at the side, that did most of the talking. They seemed to be relatives, probably daughters, of the patient. His attention was caught by the foreign way in which they pronounced the patient's name, *Merk*, and he tried in vain to repeat it after them correctly; in fact, he broke off the conversa-

<sup>1</sup> The meaning of both this dream and the previous one may be expressed by a sentence from Boccaccio's 'Decameron': 'Who willeth thee ill, dreameth thee ill.'

tion for this purpose, and it was much the most vivid point in the whole memory. On hearing the ladies' complaint, he said that he would carefully look into the matter and have the patient taken off parole. When they left, however, he was so busy that he quite forgot the whole matter until two days ago, two days *after* reading the passage in the newspaper.' In view of these facts, about which he no longer doubted, Dr. X considered himself responsible for the two deaths, reproached himself bitterly, and was very anxious as to the result of the inquest. He made up his mind to admit his grave remissness, and to offer as the only excuse the fact that he had been at the time much overworked. The superintendent asked him if he could recognise the ladies who had called on him; one he could not, but from the four daughters that were present at the inquest he picked out one as the lady who leaned across his desk. Fortunately, no questions were put to him on the matter, and shortly after it was proved that the story of the visit was a newspaper fabrication.

Dr. X's recollection must therefore have been a pseudo-remembrance, and indeed the medical colleague in whose presence the visit was supposed to have taken place was positive that nothing of the kind had occurred. The whole story bears the closest resemblance to an account of a dream, notably the remarkable emphasis (psychical intensity) laid on one unimportant passage (the pronunciation of the patient's name), and the incongruous behaviour of both the visitor and the doctor; in actual life the last thing he would do would be to break off a conversation of vital import in order to discuss a trivial matter. This view was confirmed by the fact that the memory first dawned on him in the early morning immediately after waking; no doubt his half-asleep state contributed to give it a greater air of reality.

One cannot regard this conclusion, however, as being in any way a full explanation of the episode; on the contrary, it is at this point that the real problems begin. Experience shews that when an autochthonous idea acquires an unusual intensity in a person's mind it must be connected with mental processes of unusual significance to him; these may be either conscious or unconscious, and in the former case they are always connected with still more significant unconscious processes. I had no opportunity of tracing out the underlying processes

of the experience just related, but I preserved the following notes. After telling me, several times over, of the curious passage in which he had tried to learn from the visitor how to pronounce the German name, Dr. X went on to say that it reminded him of several fruitless attempts he had made to learn German. Like many alienists, he had realised the difficulty of proceeding with his studies in psychiatry so long as he could not read the German writings on the subject, but, owing to pressure of routine work, lack of opportunity, and possibly of determination, he had not succeeded in achieving this ambition. He had felt much chagrin and self-reproach in consequence, more so of late since the appointment he was then hoping to get was one that offered unusual opportunities for original investigation. It was thus evident that the self-reproach he had suffered during the episode related above was no new experience to him. From analogy with other cases of exaggerated self-reproach, felt even on imaginary occasions—as here—one is safe in inferring that this trait was an important one in his character, and this was borne out by his general conscientious scrupulousness. Without doubt this must have arisen in deep and highly significant experiences in the past, almost certainly in early childhood, forming what are called guilt-complexes, but I regret that I am not in a position to add anything more in this regard.

Returning briefly to the general question, I would call attention to the following two considerations: Probably more of our daily conduct, moods, and beliefs than we think can be traced to preceding dreams. This is true of the normal, and perhaps to an even greater extent of the abnormal; one thinks at once of such matters as medium experiences, spiritism, telepathy, and the like. A much more important consideration, however, is the fact that the dream is never the ultimate origin of such beliefs, symptoms, etc. In the three instances just narrated, and in all others I have observed, it was evident that the dream itself was merely a continuation of previous waking mental experiences, a conclusion which is, I think, accepted by those who have studied the subject as being generally true of all dreams. The most that the dream can do is sometimes to give the mental process in question its particular form. To trace a given process to a preceding dream is thus only a step, and by no means an important one, towards the elucidation of it. It



constitutes merely an intermediate stage in the proper analysis,<sup>1</sup> the next, and far more important one, being the elucidation of the dream itself. It was this empiric experience, that psycho-analysis of various mental processes frequently leads of itself to the memory of certain dreams, that led Freud of necessity to undertake the investigation of the structure, origin, and meaning of these, with what brilliant results psychologists are gradually beginning to realise.

<sup>1</sup> A recent communication by Kreist to the Société de Psychologie (*Journ. de psychol. norm. et path.*, 1910, p. 252) contains a singular illustration of the prevailing tendency to be satisfied with the first steps of a psychological analysis. A certain married couple were continually in dispute, and a divorce was talked of. The husband, as is usual under such circumstances, recognised in himself an alternation of antipathy and tenderness. There was no apparent cause for the disharmony. Kreist hypnotised the husband, and found that his antipathy to his wife dated from a given dream, which had been previously forgotten. According to Kreist the whole trouble was due to this dream (!), and peace was restored as soon as the husband learned the trivial cause of it. It would be interesting to know the later history of this touching episode.

CHAPTER X  
A FORGOTTEN DREAM<sup>1</sup>

NOTE ON THE OEDIPUS SAVING PHANTASY

A MATTER established by experience in dream analysis is that all dreams of the same night are concerned with different aspects of the same theme. During the investigation of one dream it often happens that the memory of a second one, which has been forgotten through repression, is recovered as soon as the repressing resistance that caused it to be forgotten has been overcome through psycho-analysis of the first. The following dream analysis<sup>2</sup> is a striking example of this, and as it presents other features of general interest it would seem to be worth relating. It should be mentioned that the subject of the analysis, a University teacher of biology, is quite normal, and presents no neuropathic traits.

I.

The subject dreamed that *he was at the mouth of a dark cave full of water; it had two openings, side by side. Opposite to him was a puppy, whining to come out. Coming behind the puppy were two cats. He set out to rescue the puppy, which during the procedure seemed to fuse into his personality. He was in great danger of drowning, but clung to some bushes which were at the side of the cave, and at last safely emerged. Standing outside was his father, who seemed quite unconcerned. He wondered that his father had not helped him, and supposed it was because he had not realised the extent of the danger. He*

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, April, 1912.

<sup>2</sup> It will be understood that in the following account most of the steps of the actual analysis are not mentioned, it not being the purpose of the present article to expound the technique of this.

*impressed on his father the danger he had come through, and boastfully told him that he had saved himself without any help.*

The dream belongs to a class that can almost be called typical; any one practised in dream analysis can at once interpret it without any trouble. Emergence, after great difficulty, from a dark chamber containing water, is a very usual way for the unconscious thoughts about the birth act to be expressed;<sup>1</sup> the dark cave in the dream, with its two openings and its bushy (=hairy) entrance, represents the mother's body, or womb, enclosing the uterine waters. In mythology the situation is often reversed by the hero being placed in an enclosing chamber and put *into*, or *on to*, water,<sup>2</sup> such as with Moses in the bulrushes, Noah in the ark, and so on; as a rule the more important the hero, especially when he is made the ancestor of all mankind, the more extensive is the flood of water. The subject of the present dream and his wife ardently desire a child, but their parental longings have to be contented with a puppy dog, to which they are very much attached. On the 'dream day'—*i.e.*, the day immediately preceding the dream—this dog got accidentally shut up in a distant room, from which the subject, notified by the whining, released him, an incident which doubtless served as one of the instigators of the dream.

Behind this simple wish, however, which was, of course, in no way repressed—though it was invested with a painful feeling-tone because it could not be fulfilled—lay deeper and older thoughts. In the dream the subject identified himself with the dog, the two fusing into one; it was thus a question of his own birth. This explains the subsequent appearance of the two cats, an uncomplimentary reference to his younger sisters, who have a marked propensity to quarrelling.<sup>3</sup> Dreams and phantasies concerning one's own birth are very common, especially in childhood, and are generally connected with the desire to have children of one's own. The phantasies in question are of considerable importance in psychopathology, since they constitute the basis of such phobias as those of being buried alive, of being shut in an enclosed space (claustrophobia), and many others. The whole range of morbid anxiety phenomena,

<sup>1</sup> See Chapter VIII., p. 203.

<sup>2</sup> See Otto Rank, 'Der Mythos von der Geburt des Helden,' 1909, S. 69-72.

<sup>3</sup> This symbolism had an older source, less ungallant, in the fact that, like so many other children, the subject used to regard all dogs as male and all cats as female.

indeed, stand in an intimate relation to the actual birth event, which is the first anxiety experience of the individual, and which serves as an archetype for all later manifestations (compression, suffocation, etc.).<sup>1</sup>

Appropriately enough for this interpretation is the fact that the enclosed cavity in the dream was in the earth. Mother Earth as a symbol for the mother is familiar to us in poetry, mythology, and folk-lore;<sup>2</sup> in Watts's celebrated picture, 'The All Pervading,' for instance, it is used actually to symbolise the female generative organs. On the dream-day the subject had been reading some literature of the Middle Ages in which it described how the devil frequented remote and inaccessible caverns in the earth, and, as he was familiar with my theory that the idea of the devil is a projection of the child's thoughts concerning the father,<sup>3</sup> he had readily perceived the symbolic significance of the description.

The portrayal of the act of birth by a deed of saving life is a theme to which much attention has been paid of late by Freud<sup>4</sup> and others.<sup>5</sup> It originates in the gratitude felt by the child to his mother on hearing that his life was a gift made by her at the risk of her own. The phantasy of saving her life, or some one's in her presence, represents the grateful desire to repay her by doing for her what she did for him—*i.e.*, by making her a gift of a life. To give a woman a child signifies to make her a mother, and the phantasy just mentioned naturally becomes associated in the unconscious with incestuous thoughts; the full rendering of it, of course quite repressed, would therefore run 'to shew his affection and gratitude to the mother for begetting him, by begetting a child by her in return.' The idea of gift is never very far in this connection; with a woman the thought of having a child by a certain man is often expressed in the words 'to give me a child of his.' The later elaborations

<sup>1</sup> Freud, 'Die Traumdeutung,' 1909, S. 199.

<sup>2</sup> This subject is fully dealt with in Dieterich's 'Mutter Erde,' 1913.

<sup>3</sup> 'Der Alptraum in seiner Beziehung zu gewissen Formen des mittelalterlichen Aberglaubens,' 1912, chap. vi.

<sup>4</sup> Freud, 'Beiträge zur Psychologie des Liebeslebens,' *Jahrbuch der Psychoanalyse*, 1910, Bd. ii., S. 389.

<sup>5</sup> Otto Rank, 'Belege zur Rettungsphantasie,' *Zentralbl. f. Psychoanalyse*, Jahrg. i., S. 331; 'Die "Geburts-Rettungsphantasie" in Traum und Dichtung,' *Zeitschr. f. Psychoanalyse*, Jahrg. ii., S. 43; and 'Die Lohengrinsage,' 1911, chap. vii., S. 87-131. Reik, 'Zur Rettungssymbolik,' *Zentralbl. f. Psychoanalyse*, Jahrg. i., S. 99. Stekel, 'Einige Bemerkungen zur Rettungsphantasie und die Analyse eines Rettungstraumes,' *Zentralbl. f. Psychoanalyse*, Jahrg. i., S. 591.

of this phantasy of saving are very important for the psychology of many impulses and reactions in adult life, but for an account of them the reader must be referred to the writings of Freud and Rank.

The deeper layer of the dream thus represents an old childhood wish of the subject's to have a child by his mother, but there is more than this. One cannot fail to be struck by the plain hint of his relation to his father in the matter, which in the light of our interpretation becomes quite comprehensible. He had nurtured feelings of hostility to his father, unconscious since early childhood, which had originated partly in his jealousy at being disturbed by him in the exclusive possession of his mother's affection,<sup>1</sup> and partly in the rebuff with which his father had treated his desire for enlightenment on forbidden topics. In the dream these feelings obtain full revenge. Not only does he proudly demonstrate to the father his independence in these matters, and that he is master of the situation without any external help or advice, but he further dispenses with the father altogether in regard to the question of his own birth. He has begotten himself, is his own father, like the divinities and heroes of old.<sup>2</sup> He has satisfactorily solved the problem of birth in general, and of his own in particular, and the dream is a panegyric of his superiority to his father.

After we had completed the main part of the analysis<sup>3</sup> the subject asked me to pursue further one part of it in particular—namely, the dog symbolism—and this because of the frequency with which the same symbolism occurred in his dreams. In the present dream he identifies himself with the dog while in the act of putting himself in his father's place;<sup>4</sup> the dog thus symbolises in turn the subject's child, himself, and his father. From earlier analyses we knew that in his unconscious the idea of dogs was closely associated with that of sexuality,<sup>5</sup> and

<sup>1</sup> See Freud, 'Die Traumdeutung,' S. 180-187, and Ernest Jones, *American Journal of Psychology*, January, 1910, pp. 93-97.

<sup>2</sup> See Rank, 'Der Mythos,' *op. cit.*

<sup>3</sup> At this point attention may be called to the striking resemblance between the dream-phantasy just detailed and the story of Œdipus, who saved his mother (—town) by solving the riddle of the Sphinx (psychologically the same riddle as that solved by our subject in his dream), married his mother, displaced his father, and reigned in his stead.

<sup>4</sup> Cf. the expression, 'To become top dog,' which, as it happens, was a favourite one of his father's.

<sup>5</sup> This is, of course, quite common, as is indicated by the mere expression 'animal passion' = sexual desire.

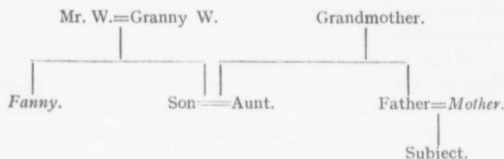
that in his dreams a dog frequently symbolised either his father or mother. On the dream-day he had been reading a book on totemism and animal-ancestry, and it was evident that the same association between animals and ancestors existed in his unconscious as exists in the savage mind. The question arose as to how this association had originally got formed in his mind. There is no need to go into the details of the matter here, which was largely concerned with infantile sadistic conceptions, but the first point to come out has a direct bearing on the present theme. The only dog the subject had had much to do with in early years was one he had been given at the age of eight by a man he was very fond of, and to which he became extraordinarily attached. When he was unhappy he would take it for a long walk and spend the whole day as far as possible from home. The dog was a female one, but was invariably referred to at home as 'he,' and could thus be used to symbolise a person of either sex; her name was 'Fanny.' The only woman he had known of this name in his youth was a Miss Fanny W., a lady some ten years younger than his mother. He had been very fond of her and her mother, who were especially kind to him. Whenever he visited them Miss W. used to inquire with peculiar friendliness after his mother, whom she had been intimate with in earlier years, but with whom, for irrelevant reasons, she was no longer on visiting terms; the idea of Miss W. was thus closely connected with that of his mother.<sup>1</sup> At this point the subject suddenly recalled an earlier dream of the same night, which he had thought of on waking, but which he had then quite forgotten until this moment; we have next to turn our attention to this dream.

## II.

*He was in his father's office with Mr. W., who was expounding to him his genealogy and early life.* Mr. W., the father of Miss Fanny W., was an old man, who had been a colleague of his father's and had worked in the same office. The subject had never seen much of him—he had died when the former was ten years old—and he had not to his knowledge thought of him for many years. The coincidence of his appearing in this particular dream is therefore certainly very striking.

<sup>1</sup> This was the first step of an analysis which shewed that in the subject's unconscious his mother and the dog Fanny had long been identified. In the dream, therefore, the subject saves his mother as well as himself, a more typical form of the saving phantasy.

On the dream-day the subject had been thinking about a projected visit to his family home, where he had not been for several years, and had expressed the hope that his aged grandmother would be still alive—for the egocentric reason that he could then ask her about a number of matters concerning his infancy in which since psycho-analysis he had become interested; his mother had lately died, and he did not care to talk to his father about them. Now his grandmother's daughter (his aunt on the father's side) had married Mr. W.'s son, now dead, a relationship more clearly shewn in the accompanying table;



it happens that he had, as a boy, taken a special interest in their courtship and marriage. Mr. W. and the grandmother could thus be brought into near connection, they being the parents of the same couple, a connection furthered by the circumstance that Mr. W.'s wife was always addressed by the subject as 'Granny' W. In the dream Mr. W. replaces the grandmother in giving the subject the desired information about his origin and upbringing. Two wishes lie behind this apparently senseless replacement: first the old desire that the father would respond to his request for enlightenment about the problem of his birth, and secondly, the old revengeful desire that the father might resemble Mr. W. and his son (of the same generation as the father) in the respect of having departed from this life.

More than this: On the dream-day the subject had wished to question his grandmother because his mother was no longer accessible. She therefore replaced the latter in his mind, and as she was replaced in the dream by Mr. W. we reach the conclusion that the figure of the latter stood not only for the father, but also for the mother; this reminds us of the original connection between the two *via* Fanny. The dream is thus seen to be built on the basis of childhood sexual curiosity, and the desire that the parents would gratify this.

Though the basis of the dream is, as has just been explained, a childhood one, more current wishes also come to expression in

it. On paying closer attention to the details it was noticed that the main figure really constituted what is known as a 'composite person' (*Sammelperson*,<sup>1</sup> being composed of three persons condensed into one. Although it seemed in the dream definitely to be Mr. W., and the place was the only one where the subject had ever seen him, the face resembled a Mr. A. rather than Mr. W.; the two men were in fact very much alike in appearance. Mr. A. was an elderly man in whose office the subject had worked some years ago, and who ever since had owed him a considerable sum of money. Owing to financial difficulties he had not been able to pay this off, but had promised to pay a quarter of it on a date some eight months before that of the dream. He had not fulfilled the promise, and this had rather embarrassed the subject, particularly as he had just then to meet heavy expense in connection with a projected removal from one town to another. Two days before the dream, a week before the subject was to leave, the long-awaited cheque arrived, but he found to his chagrin that it was post-dated and payable only a month later. On the dream-day he wrote a somewhat stiff letter in acknowledgement, explaining his situation, and remarking that as he had closed his own bank account he would have to send the cheque to his father (in the same town that he was going to), and 'trust to his honesty to get the money back.' While in the middle of writing the letter he noticed that the cheque was made out for twice the amount he expected, a discovery that led him to mollify his remarks and gratefully to thank Mr. A. for having done all that he could under the circumstances; we see here again the same alternation of friendliness and hostility that characterised the whole of his attitude towards the father and his substitutes.

The curious remark in regard to his father's honesty was greatly 'over-determined.' It pointed in the first place to an unconscious identification of the father with the elderly Mr. A., the annoyance with the latter having evoked a manifestation of the old hostility towards the former. The remark was not only unwarranted in fact, but was quite pointless, for the father was a scrupulously honest man. According to the subject, the only unfair thing he had ever done in regard to money was to make a will recently in which he disinherited his son and left all his property to his two daughters. There were, it is true, special reasons for his doing so, and the subject

<sup>1</sup> Chapter VIII, p. 191.



had not only acquiesced in it, but had even advised it; nevertheless it was plain that he had not entirely forgiven his father for being so ready to overlook him. This reproach he had unconsciously linked to the old one about being kept in the dark as a child and *dishonestly* lied to on the topic of child-birth. The way in which this apparently strained association between the ideas of money and babies was forged cannot here be related, as it would necessitate too long a discussion; the cloacal connection will be evident to those familiar with psycho-analysis.<sup>1</sup>

Unlike both Mr. W. and Mr. A., however, the figure in the dream was quite bald and there was a wart by the side of the nose. These characteristics, and the upper half of the head in general, at once reminded the subject of Charles Darwin. The singular appropriateness will be admitted of the problem of personal origin being expounded by the author of 'The Descent of Man' and 'The Origin of Species.' As a student of biology the subject had greatly revered Darwin, who had, so to speak, answered the question he had propounded in vain to his own father; it was evident that unconsciously he had identified the two men, Darwin being to him what he had wished his father to be—an expounder of the problem of origin. Strangely enough, Darwin had on the dream-day been the topic of conversation between the subject and his wife. Being concerned at his overworking she had urged him to give up some of his routine teaching work so that he might devote himself more peacefully to his favourite pursuit of scientific research, and had considerably volunteered to do with less money. The talk drifted on to the endowment of research, and the subject remarked what a fortunate thing it was for mankind that Darwin had inherited enough money from his father to enable him to pursue his investigations undeterred by material considerations. He here was evidently identifying himself in his unconscious—that realm of unlimited egoism<sup>2</sup> with Darwin, *i.e.*, once more with his father—and was at the same time mutely reproaching his father for not having bestowed him with more worldly goods. His father had spent many years in the service of other people, and had quixotically refused to seize opportunities for his own advancement. In the sentence written to Mr. A., referring to his father, the subject had unwittingly expressed

<sup>1</sup> See Chapter XC., p. 679.

<sup>2</sup> In the unconscious mind everyone believes in the omnipotence of his thoughts, in the irresistibility of his charms, and in the immortality of his soul.

the wish that his father had in fact been a little less pedantically honest, so that he might have been able to bestow him with more money.

The three persons figuring in the dream are thus all substitutes for the father. Each one is connected both with the subject's 'money-complex'—*i.e.*, his complaint that he was worried about money matters—and also with the deeper reproach against his father regarding the question of sexual curiosity. Both these complexes are evident in the case of the Darwin component of the figure, as is the former with Mr. A. and the latter with Mr. W. The series may be completed by mentioning the following two facts. A prominent memory the subject had of Mr. A. was a morbid interest taken by the latter in the sexual thoughts and curiosity of children. As to the relation of the money complex to Mr. W., it is enough to say that he was closely connected with the subject's father in the financial aspects of the business they were both concerned with. Both complexes were thus associated with each of the three constituent persons of the dream figure. \*

### III.

The analysis just given of the two dreams, or two halves of a dream, confirm to the full Freud's theory of dreams, which has been most precisely formulated by Rank<sup>1</sup> in the following terms: *Der Traum stellt regelmässig auf der Grundlage und mit Hilfe verdrängten, infantil-sexuellen Materials aktuelle in der Regel auch erotische Wünsche in verhüllter und symbolisch eingekleideter Form als erfüllt dar.* ('Dreams constantly present the fulfilment, in a concealed and symbolically veiled form, of various current wishes, usually of an erotic nature; they do so on the basis and with the help of repressed, infantile, psycho-sexual material.')

We see that the dream as told, the 'manifest content,' is quite senseless and even absurd, but that the hidden meaning, or 'latent content,' revealed by analysis, is thoroughly intelligent and full of meaning. Further, that although the manifest content may seem to deal with situations that, so far as the psyche is concerned, are harmless or unimportant, the underlying thoughts are highly significant and are related to the most

<sup>1</sup> Otto Rank, 'Ein Traum, der sich selbst deutet,' *Jahrbuch der Psychoanalyse*, 1910, Bd. ii., S. 519. Those who wish to read a really full dream analysis are referred to this excellent paper.

intimate part of the subject's personality. Behind the manifold processes in the dream structure—which by a superficial study might be mistaken for the true latent content—stands the primordial basis of all our mental activities, the Wish. The current wishes of the actual moment, the ones that aroused the memories which threatened to disturb the subject's sleep, were two, one erotic, the other non-erotic—namely, the desire to have a child and the desire to be free from monetary cares; these two desires, however, were not really so independent as they appear. The current wishes aroused deeper and older repressed thoughts with which they were connected, and on the basis of which the dream was constructed. These deeper thoughts were, as always, of *infantile* and *sexual* origin. In the present case they concerned the most intimate relations of the subject to his parents: hostility, and to a less extent friendliness, towards his father, love and tenderness towards his mother. The natural desire to have a child awoke the old desire to repay his mother's sacrifice for him by presenting her with another child—of their very own; in this he plays the double part of both the child loved by the mother, and the father who presents him to her.

We see further the exemplification of the initial thesis from which we started—namely, that different dreams of the same night are concerned with different aspects of the same theme. They often, as here, present different solutions of the same problem. In the earlier dream, the second here related, the father meets his childhood curiosity in a sympathetic and helpful manner; in the later dream he solves the problem without his father's help, and defyingly replaces his father in respect to the loved mother. In the former his homosexual component is gratified, in the latter his heterosexual. In the latter he finds a man's solution, adopting a masculine attitude, in the former he finds a woman's, adopting a feminine attitude. We have here, therefore, an illustration of the bisexual nature of the normal man. With the present subject, as with most men, the homosexual components of his instinct were more deeply repressed than the heterosexual, and it is thus entirely comprehensible that the dream expressing the former components was the one that proved the more susceptible of being forgotten; the question as to which of two dreams will be first forgotten may seem to be merely a matter of chance, but we see that the laws of psychical determinism hold here just as rigorously as

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elsewhere. Anyone trained in psycho-analysis will further perceive a good reason why, of two dreams relating to the begetting of children, it was in the feminine one that a money-complex came to expression. Still another refinement may be added of the analysis of the feminine dream. The subject had often as a child had the desire that the family doctor would present him with a baby of his own, and had elaborated phantasies in which he imagined himself the wife of this doctor, whom he greatly admired. The doctor had not only brought him and his sisters into the world, but had *saved his life* on two subsequent occasions when he was desperately ill; it was he who had presented him with the beloved dog Fanny, the dog so closely associated in his mind with the family of Mr. W. Mr. A. also was nearly associated with doctors, being the head of an agency for the sale of medical practices. As to Darwin, he was both a doctor himself and the son of a doctor. The three components of the figure that plays the masculine part in the dream, therefore, all portray features not only of the father, as described above, but also of the family doctor who in the child's eyes seemed the 'bringer of children' *par excellence*.

Many of the individual features of Freud's dream theory are also illustrated in the analysis, the almost grotesque egocentricity of the dream thoughts, the mechanisms of condensation, displacement, and regressive dramatisation, and the importance as dream-instigators of incidents of the previous day. In the present case these were unusually numerous; we have noted the puppy dog shut up in the room, the reading about the devil inhabiting caverns, the book on ancestor-worship, the thought of the projected visit home, the letter to Mr. A., the talk with the wife on money matters, and the reference to Darwin. Several of these cannot be described as being in any way psychically significant, but they had become associated to underlying complexes and thus proved suitable material to be used in the manifesting of these complexes.

## CHAPTER XI

### DREAM MANIPULATION OF NUMBERS<sup>1</sup>

THERE is perhaps no other experience in psycho-analysis that so taxes one's credulity as the occasions where numbers are found to be manipulated for intelligent reasons by the unconscious. Of the existence of the process itself, which has been illustrated by Freud, Adler, Stekel, Jung, and Tausk, no one can be in any doubt who has personally investigated the matter, but some of the more complicated examples related in the literature, particularly some of those quoted by Stekel, seem almost physically impossible to believe. Jung has very pointedly said in this connection:<sup>2</sup> 'Die Grenzen, wo das rein Spielerische anfängt, sind schwer zu ziehen—notwendigerweise, denn das unbewusste Produkt ist Schöpfung spielender Phantasie, jener psychischen Instanz, aus der auch das Spiel entsteht. Es widerstrebt dem exakten Geiste dieser nach allen Seiten ins Haltlose sich verlierenden Spielerei nachzuhängen.' ('It is hard to define the limits where pure play begins—necessarily so, for the unconscious product is the creation of the playing phantasy, of that psychical factor from which play itself is born. The exact mind finds it repugnant to follow this playfulness, which on all sides gets lost in indefiniteness.')

To the unflinching determinist, however, nothing can be ultimately indefinite, and law and order will some day be found to prevail even in the phenomena of mental play. As a matter of fact, accumulation of experience makes one more and more convinced of the remarkable extent to which this curious manipulation of numbers goes on in the unconscious, so that one is led to conceive of our instinctive repugnance to the idea,

<sup>1</sup> Published, under the title 'Unbewusste Zahlenbehandlungen,' in the *Zentralblatt für Psychoanalyse*, February, 1912, Jahrg. ii., S. 241.

<sup>2</sup> Jung, 'Ein Beitrag zur Kenntnis des Zahlentraumes,' *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 570.

our strong disinclination to accept the interpretations that analysis forces on us, as being merely one more form of our general resistance against the unconscious and all its ways. The intensity and universality of this particular repugnance are striking, being much greater than in the case of most interpretations, and one cannot avoid the inference that numbers must be treated by the unconscious mind in a different way from other concepts and perhaps even words. In a very thoughtful paper Ferenczi<sup>1</sup> has pointed out the ways in which obscene words are differently treated from other words, and he adduces plausible reasons to shew that the peculiar significance attaching to them is due to their having retained certain infantile characteristics, notably a capacity for visual and motor imagery that other words have to a great extent lost. It is very possible that a similar infantile fixation has taken place in the case of numbers, and one readily perceives at least three sources for the special significance with which they are invested in the unconscious: (1) The great importance attaching to them in the first stages of the child's education. The child is taught to count much earlier and more invariably than it is taught to read. (2) The readiness with which the almost magical properties of numbers lend themselves to child-play. Freud's remark that 'children treat words as though they were objects' is even more evidently true of numbers than of words. (3) The close association between numbers and one of the greatest sources of pleasure to children—namely, the fingers. It is significant that nearly every country of both ancient and modern times has based its counting on the decimal system—*i.e.*, on the number of fingers. It is thus plain that the whole subject is worth investigating psychologically, for both practical and theoretical reasons, so that the publication of any casuistic material bearing on it is particularly desirable.

In going over the notes of a case, an account of which I have already published elsewhere,<sup>2</sup> I came across the following example, which seems definite enough to warrant its being related. The notes were made some years ago, at a time when I was much more incredulous on the matter than subsequent experience has made me; they were therefore collected with

<sup>1</sup> Ferenczi, 'Contributions to Psycho-Analysis.' English translation by Ernest Jones, 1916, chap. iv.

<sup>2</sup> Ernest Jones, 'Einige Fälle von Zwangsneurose,' *Jahrbuch der Psychoanalyse*, Bd. iii., Zweiter Fall.

a bias against them, quite empirically, and I can guarantee that the interpretations given were all immediate associations offered by the patient.

The patient, a man of twenty-four, was suffering from a severe obsessional neurosis and was very superstitious; it should further be said that he had an unusually pronounced mother-complex. He regarded some numbers—*e.g.*, 3, 9, etc.—as being particularly lucky, and others—*e.g.*, 4, 36, etc.—as being equally unlucky; the former usually referred to himself and the latter to his mother. Thus 3 had the usual sexual-symbolic meaning for him, and 9, 3 times 3, had this in a higher degree; 9 represented the maximum of sexual potency, and he told me that this was the highest number of times he had ever accomplished the sexual act in a single night. 4, on the other hand, was his mother's 'sacred number,' which he attributed to the circumstance that she was the fourth member of her family. 36 was especially connected with his mother, because she was that age when she died (7 years previously).

One night he dreamed that he was vainly trying to find his old home in a certain street where he had lived until about the age of seven. After considerable difficulty he managed, however, to recognise the door number and joyfully exclaimed 'Yes, that's it, number 72.' He then woke up. Now, in reality the number of the house in question was 243, as he at once recollected when awake, and as I took the trouble to verify by asking a relative of his. Two alterations, therefore, had been made by the dream: (*a*) The last two numerals, 4 and 3, had been added together, the whole then making 27, and (*b*) the two components of this had been reversed into 72.<sup>1</sup> These alterations clearly could have been made in one of two ways, according to which was made first: in one way the adding would occur first and the reversing second, the order of the stages being 243, 27, 72; in the other way the reversing would occur first and the adding second, the order then being 243, 432, 72. It might be expected that one could find out the order by

At a recent concert I noticed that Mozart's 39th Symphony was stated on the programme to be his 453rd! This error was presumably made by a process similar to that under consideration, the only difference being that here it is not a question of putting together two numerals to make a larger one, but of decomposing a larger one into its components (9 into 4 and 5). In psychological language the example in the text is one of 'condensation'; this is one of 'decomposition.' In both cases there is a 'reversal.'

observing whether the first or the second middle number (27 or 432) was the more closely associated with the train of thought connecting the whole. As we shall see, however, these two numbers seemed equally prominent, if we are to judge from the 'free associations,' and I imagine that both of these alternative procedures had been carried out in the patient's unconscious, of course at different moments; this again is in accord with what we know of the play-attitude towards numbers, every possible game being experimented with.

The patient's free associations will not be given in the precise order in which they occurred, but will be arranged in groups so as to make them easier to follow.

We begin with 72, the erroneous number in the dream. To this he remarked that 72 equals  $36 \times 2$ . 72 was the age at which his grandmother, of whom he had been specially fond, had died. 36 was the age at which his mother had died. 2 was the only numeral common to the correct and the false numbers of the house, 243 and 72. There were 2 people for whom his imagination longed, both represented by the age at which they had died. The whole psycho-analysis shewed that the function of the distortion of the number, as also that of the dream throughout, was the artificial bringing of himself and his mother together in his imagination. This was accomplished in the case of the number by means of various manipulations of the numerals 3 and 9, which stood for himself, and 4, which stood for his mother. We may consider separately the two acts of bringing together 3 and 4, and 9 and 4, respectively.

The simplest way of bringing together 3 and 4, the terminal numerals of 243, was by merely adding them up, giving 27 or the reverse of 72. The same result was reached by adding together the first numerals of the house number 243, which gave him 63, the reverse of the fatal 36—*i.e.*, one half of 72. Both 72 and 63 are related to 7, which appears directly in the former and of which the latter is a multiple (with the magic nine,  $7 \times 9$ ). The patient was 7 years old when he left the house in question, and 7 years had elapsed since his mother's death.

The unaltered numbers themselves, 243 and 36, which had to be brought together, standing as they did for home and mother, are both closely connected with 3 and 4. 243 not only contains both these numerals in what might be called its manifest content, but it is made up of  $3 \times 3 \times 3 \times 3$ —*i.e.*, it represented an enormously high degree of potency. On the



second alternative mentioned previously—*i.e.*, if the reversal took place before the adding—we get 432 as a middle number, which is also made up of  $(3 \times 3 \times 3) \times (4 \times 4)$ , or a strong bringing together of 3 and 4. On the other hand, 36 is made up of  $3 \times 3 \times 4$ , and if the second numeral alone is decomposed the number can be written 3 (3+3). The reverse of the final 72—*i.e.*, 27—can itself be decomposed into  $3 \times 3 \times 3$ , while the 72 is divisible by both 3 and 4. We thus see that the figures 3 and 4 are remarkably closely connected with all the numbers concerned in the manipulative procedure.

The same is evidently true of the other personal number, 9, which need not be pointed out in detail. It is enough to remark that not only are all the numbers concerned, 243, 432, 63, 36, 27, 72, without exception divisible by 9, but also in every one of these six numbers the individual numerals composing them when added together give 9 as the result. It must be admitted that the natural properties of the numbers in question were singularly well adapted for the patient's purpose, and thus enabled him to reinforce and reiterate the idea of the coming together of himself and his mother, but it must also be admitted that he realised the unusual opportunity and fully availed himself of it. He gave full vent to his passionate desire to bring together the numbers 3 and 4, and 9 and 4, and found out every way in which this was possible.

As if all this were not refinement enough, the patient pointed out still other possibilities in the numbers. In America the number 23 is colloquially associated with the ideas both of death and of sudden departure, a superstition the origin of which is irrelevant to our present theme, but one which was shared by the patient as well as most other superstitions. Now, if 4, his mother's sacred number, is removed from any one of the numbers in question (thus representing the mother's death), then in every case the fatal number 23 is left. With 243 the 4 has simply to be struck out, with 63 and 27 it has only to be subtracted from the highest numeral; after striking it out from 432, or subtracting it from the highest numeral of 36 and 72, the result has only to be reversed to give 23.

In conclusion, one may comment on the resemblance, or rather the identity, of the mechanisms here in play and those which Freud has taught us are characteristic of dream formation in general. In the change from the 243 in the latent content of the dream to the 72 of the manifest content we see the *condensa-*

tion of the two terminal numerals into one, the *displacement* of the psychical accent from the significant 3 and 4, which become replaced, on to the relatively indifferent 2, which remains unaltered, and the highly characteristic *reversal* of the different parts of the whole. In the 'dream work,' as Freud<sup>1</sup> has pointed out, there is no reckoning of any sort, either correct or false; the manipulation goes on entirely in the latent unconscious thoughts, and is merely taken over by the dream-making factors in the same way as sentences and other psychical material. Numbers are thus handled by means of the same mechanisms as words, ideas, and scenes, and one might well put the play on numbers by the side of that play on words that is so important in the formation of superficial associations in general; both serve for the disguising and covering of significant but forbidden thoughts, and there is a good reason why the critics of psycho-analysis reject both as far-fetched, arbitrary, or of no consequence.

<sup>1</sup> Freud, 'Die Traumdeutung,' 4<sup>e</sup> Aufl., S. 299.

## CHAPTER XII

### THE RELATIONSHIP BETWEEN DREAMS AND PSYCHONEUROTIC SYMPTOMS<sup>1</sup>

At first sight the resemblances between dreams and psychoneurotic symptoms appear to be of a very superficial kind, and it is the obvious differences between them that most naturally take our attention. Nevertheless, a psychological study of the two manifestations discloses a far-reaching similarity between them in almost all respects; in fact the more closely one investigates the psychogenesis of them the more one is impressed by the extraordinary resemblances, and the more difficult does it become to define the essential differences between them. That the study of normal dreams is highly important, both for the understanding of all kinds of mental disturbances and for the treatment of the psychoneuroses, is growing more and more evident, and I shall presently touch on some of these practical aspects.

Our knowledge of the psychogenesis of both dreams and neurotic symptoms we principally owe to the laborious work of Freud, and I shall here largely confine myself to the exposition of some of his conclusions. He has dealt fully with the manifold problems of dream life in a book devoted to the subject,<sup>2</sup> and some five years later, in the 'Bruchstück einer Hystericanalyse,'<sup>3</sup> he illustrated in detail his views on the relationship between dreams and hysteria, and shewed the value of dream analysis for the elucidation of this neurosis. I will try to deal with the present theme in the form of a series of statements. These may be grouped under four headings, and I need hardly add that they will have to be far from exhaustive either in number or extent.

<sup>1</sup> An address delivered before the Wayne County Society, at Detroit, May 15, 1911. Published in the *American Journal of Insanity*, July, 1911.

<sup>2</sup> Freud, 'Die Traumdeutung,' 1900, 4<sup>e</sup> Aufl., 1914.

<sup>3</sup> Reprinted in the 'Sammlung kleiner Schriften zur Neurosenlehre,' 2<sup>e</sup> Folge, 1909.

## I. GENERAL CHARACTERISTICS.

In the first place one might remark on the fact that both dreams and neurotic symptoms frequently appear to the lay mind to be remarkably meaningless, illogical, or even absurd. For instance, in a dream one may see a historic personage, say George Washington, talking familiarly to one's brother, and in a place that neither had ever visited. Similarly a neurotic patient, who in the ordinary way is courageous enough, may be seized with an irrational terror at the sight of some object for which he has a specific phobia—for instance, a cat. On a healthy person the incomprehensibility of such bizarre occurrences produces an unavoidable impression of unreasonableness, and he has an instinctive difficulty in taking either of them seriously, certainly in devoting to them that earnest attention which they really deserve. We describe this illogical or incongruous feature by saying that the occurrence in question cannot be related to the rest of the person's conscious thoughts; it is something apart, strange, and apparently quite disconnected. This statement is perfectly true, and the alternative hypotheses are either that such manifestations are in their very nature throughout bizarre and illogical, or that they are the product of normal logical thoughts which for some reason have become distorted. Freud has produced evidence to shew that the latter hypothesis is probably the true one, and that the obvious gaps between the occurrences and the rest of the person's mind can be filled in by bringing to light various thoughts that previously were unconscious.

A further resemblance between dreams and neurotic symptoms lies in the conception of them that was until recently generally prevalent among scientific men, and which still widely obtains. This is based on the former of the two hypotheses just mentioned, the one that accepts the manifestations in question at their face value. It may be stated as follows: They are both disordered products of an imagination that is functioning improperly because of certain non-mental circumstances. In sleep, when the mind is at rest, various physical excitations disturb in an irregular manner different groups of brain cells, the result of which is the anomalous, fitful, and disconnected series of mental processes that we call a dream. In the psychoneuroses the same thing takes place, except that

the physical excitations are of a morbid kind (due to malnutrition, toxins, etc.), so that we call the result a disease. In both cases it is denied that the manifestations are susceptible of a psychological interpretation, that they have a precise psychical history, or that there is any logical meaning behind the odd and inconsequent series of mental processes.

This familiar conception received a rude shock at the hands of Freud when he published his observations shewing that, though dreams and neurotic symptoms have all the appearance of disorder and disconnectedness, this appearance is not primary, but is itself the result of the action of certain definite agents. The two manifestations are rather the *altered* products of mental processes that are entirely consequent and highly significant parts of the personality. By means of psycho-analysis they can be traced to their origin, when it becomes plain that they have a perfectly definite psychical history, and an entirely logical meaning. There are thus two main problems, first the nature and significance of the sources of the manifestations in question, and secondly the nature and significance of the alteration or distortion that these original mental processes have undergone before attaining their final appearance.

Both manifestations have a remarkable tendency to be forgotten. With dreams this is such a characteristic feature as to need no dwelling on; every one who has tried systematically to recall his dreams will have noticed how treacherous is his memory of them, and what a usual occurrence it is for the remembrance of even a vivid dream completely to disappear within a few minutes after waking. In the case of neurotic symptoms this feature is not so generally recognised, but careful observation shews that it is almost as constant, though not so pronounced, as it is with dreams. However detailed the anamnesis taken in the first few interviews with the patient one regularly finds later that it is incomplete and that all sorts of earlier symptoms have been ignored or forgotten. The same holds in respect to the duration of symptoms; patients almost always under-estimate this. A typical instance is that of a patient of mine who stated he had had trembling of the hand for the past three months, and never before; it turned out later that he had had it for the past six months, and on two former occasions for two or three months each time. Further, the memory of dreams and of neurotic symptoms not only fades in

intensity, but becomes distorted as time goes on. This occurrence is also better known in the case of dreams, where Freud has given it the name of 'secondary elaboration.' The memory of neurotic symptoms is similarly fallacious; different ones are misplaced in time, confounded with one another, and so on. The history of a neurotic illness laid bare after a prolonged investigation has often quite a different appearance from the incomplete and incorrect one given by the patient during the first interviews.

This curious tendency to forget and alter mental processes that at the time of their occurrence were so vivid as to absorb the whole attention of the person is certainly noteworthy, and in itself would suggest an inner connection between the two processes. We shall see that the significance of the tendency is the same in the two cases, it being a manifestation of the repression of underlying mental processes which are symbolised by both dreams and neurotic symptoms. The vulgar tendency to belittle dreams and symptoms, which was mentioned above, is also an expression of the same psychical force. Further, the two tendencies, to falsify the memory of the two manifestations, and to forget them altogether, have exactly the same psychological significance, both being results of the repressing force.

Dreams and neurotic symptoms shew intimate psychological connections with superstition, both on the surface and in their essence. That dreams have always been a fruitful source of superstition is well known. Even at the present day belief in the telepathic nature of some dreams, and in their service for foretelling events, is far from extinct. In more subtle ways dreams may influence the waking thoughts in a manner that can only be described as superstitious; I have recently published some striking instances of this.<sup>1</sup> It has been said that all neurotic patients are at heart superstitious, and although this is probably an overstatement, still with some forms of neurosis—*e.g.*, obsessions—the superstitiousness of the patients is quite extraordinary. One of my patients could not stand with his face to the north because it might bring some harm to his father, he could not cross the street without first counting eight, for otherwise ill-luck would happen to him, and so on. Cases of the kind are familiar enough.

The intrinsic relations between superstition and the two

<sup>1</sup> Chapter IX.

manifestations in question, though highly interesting, are too involved to discuss here, and I must refer you to the suggestive chapter on superstition in one of Freud's works.<sup>1</sup>

## II. CLINICAL RELATIONS.

It is not very rare for a neurotic symptom actually to date from a given dream, an occurrence first fully described by Féré in 1886. As an instance I may mention the case of a patient of mine who whenever he had a certain dream, to the effect that he was being hanged, always suffered for some time after from a hysterical paralysis of the right arm. In discussing this occurrence in a recent paper<sup>2</sup> I pointed out that it is incorrect to regard the dream as the *cause* of the symptom that subsequently arises. They both have a common cause in some buried thoughts. The process, however, is of considerable interest as shewing that the same thoughts can come to expression in both a dream and a neurotic symptom, thus illustrating the near relationship of the two.

Certain neurotic symptoms even in their external appearance strikingly resemble dreams. In hysteria, for example, curious conditions occur which so resemble dreams as to be thus named. Loewenfeld<sup>3</sup> gives the following description of them: 'Die Aussenwelt macht nicht den gewöhnlichen Eindruck, das wohl Bekannte und täglich Geschehene erscheint verändert, wie unbekannt, neu, fremdartig, oder die ganze Umgebung macht den Eindruck, als sei sie ein Phantasieprodukt, ein Schein, eine Vision. In letzterem Falle besonders ist es dem Patienten, als ob sie sich in einem Traume oder Halbschlaf befänden, hypnotisiert oder somnambul seien, und sie sprechen dann auch zumeist von ihren Traumzuständen.' ('The outer world fails to make its accustomed impression, things that are well known and seen every day seem altered, as if unknown, new, strange; or the whole environment gives the impression of being a product of the imagination, a sham, a vision. In the latter case especially the patients feel as if they are in a dream or half-sleep, as if

<sup>1</sup> Freud, 'Zur Psychopathologie des Alltagslebens,' 4<sup>e</sup> Aufl., 1912. See also Ernest Jones, 'Der Alptraum in seiner Beziehung zu gewissen Formen des mittelalterlichen Aberglaubens,' 1912, and 'Die Bedeutung des Salzes in Sitte und Brauch der Völker,' *Imago*, Jahrg. I., Heft 4 and 5.

<sup>2</sup> Chapter IX.

<sup>3</sup> Loewenfeld, 'Ueber traumartige und verwandte Zustände,' *Centralbl. f. Nervenheilk. u. Psychiatr.*, 1909.

they have been hypnotised or are somnambolic, and they mostly also speak then of their dream-states.') Abraham,<sup>1</sup> who has submitted these conditions to a searching investigation, points out further resemblances they have to reveries or day-dreams, to twilight states, and to noctambulism. He finds that the condition passes through three fairly well defined stages: first, one of exaltation of the imagination; then one of dream-like withdrawal from the outer world, during which the environment seems unreal, strange, and altered; and finally a third, one of vacuity, in which the thoughts stand still and the mind seems a blank. The first two stages are pleasurable, the third disagreeable. His analysis of the content of consciousness during these stages shews that, like neurotic symptoms in general and also dreams, it represents the symbolic gratification of various repressed ambitions and desires.

The reverse occurrence to this is still more frequent, in which, namely, a neurotic symptom appears directly in a dream. This is most often found with various fears; for instance, a person who is afraid of heights dreams that he is on the edge of a precipice and about to fall. In such cases the analysis of the dream furnishes a specially direct clue to the nature and origin of the corresponding symptom.

Not only may the superficial content (called by Freud the manifest content) of a dream be identical with that of a given symptom, as in the example just mentioned, but a dream that appears in no way to resemble any symptom may arise from the identical underlying mental processes that are the cause of a symptom from which the patient is at the same time suffering. The significance of this fact for the treatment of neurotic symptoms will be dwelt on later.

### III. STRUCTURE.

Recent impressions, often in themselves quite trivial, are adjuvant factors in the production of both dreams and neurotic symptoms. Most observers have noticed how frequently casual recent thoughts and impressions, which passed unnoticed at the time, are met with in dreams, and Freud has found that in every dream there is represented some mental process, either trivial or significant, of the day before. Similarly neurotic

<sup>1</sup> Abraham, 'Ueber hysterische Traumzustände,' *Jahrbuch der Psychoanalyse*, 1910, Bd. ii., S. 1.



symptoms often owe their occurrence to some recent and often trivial impression, such as the reading or hearing about a given illness, a slight shock, grief, or fright (often called imitation or suggestion). In both cases there is a considerable tendency, on the part of both the observer and the person concerned, to regard this recent impression as the cause of the dream or symptom. Strictly speaking, it is never more than the exciting cause, which acts by evoking a manifestation of deeper and much more significant mental processes.

Both dreams and neurotic symptoms are a compromise-formation, being produced by the inter-action of two opposing sets of forces. One of these, the real source of the dream or symptom, is composed of certain buried mental processes, called by Freud the 'latent content,' which have a strongly marked dynamic or conative trend. The actual characteristics of this latent content will be pointed out in the next section. The other set of forces, called by Freud the endopsychic censor, consists of various social and ethical inhibitions, the effect of which is to prevent the passage into consciousness of the mental processes comprising the latent content. In other words, the latter consists of thoughts, desires, and wishes of a kind that are highly unacceptable to the conscious personality, and which, therefore, are 'repressed' in the unconscious; the patient has great difficulty in admitting their existence, sometimes even in conceding the possibility of their existence. The dream or symptom is thus an allegorical presentation of the latent thoughts. These cannot come to direct expression, so they are hinted at by means of circumlocutions, euphemisms, and metaphors quite analogous to those in which we hint at forbidden themes in polite society. That is the meaning of the distortion referred to above. When the distorted product is resolved into its elements, when the underlying mental processes are unravelled, and the latent content laid bare, it is always found that they have a perfectly definite and logical meaning, and furthermore that they are always of an intimate nature and of high significance to the personality. Whatever the superficial appearance of a dream or symptom may be, the underlying causes of it are never trivial. The following simple dreams illustrate this conclusion.<sup>1</sup>

<sup>1</sup> As with all the other examples given here, no attempt is made to render the full analysis. The patient's contributions and my own interpretations, however, are kept distinct from each other.

(1) A woman, aged thirty-one, dreamed that *she met a Mrs. R., who invited her to come and take a bath together*. This is not so senseless as it appears. The associations supplied by the patient were as follows: 'Mrs. R. is about to be confined. I helped her sister once at her confinement. That is supposed to bring luck. It is one of the things done to cure sterility. After her confinement I bathed together with her for the same reason (a Jewish superstition). To have a child is my dearest wish, especially as my husband and my woman friends despise me for my childlessness, and taunt me with it. I have been to many doctors and had two operations, but so far nothing has helped.'

(2) A girl of twenty dreamed that *she and her sister were to get \$150 for diving from the roof of an aquarium in public*. A friend who was present remarked that the sister was being badly paid for her work, which was precarious, and the patient replied: 'Well, you know, we can always dive.' The patient was very fond of diving at the baths, an act which gave her a markedly voluptuous sensation. All that the sum of \$150 reminded her of was that when she was fifteen a man friend took her out for the evening, repeatedly kissed her, and on saying good-bye put \$1.50 into her purse to buy some chocolates with, adding: 'I wish I could afford to give you a hundred times as much.' The sister was at the time the paid mistress of a certain man. The dream is thus a fairly open expression of the girl's realisation that the same avenue for earning money was open to her.

(3) The same patient dreamed that *an Angora cat was restlessly moving to and fro in a room. Presently he struggled to reach a window and then jumped out into the street*. She described it as an awful nightmare, from which she awoke with a feeling of paralysis in the legs. She owned an Angora cat, which was 'very beautiful and graceful, with blue eyes.' She herself was pretty and graceful, and had blue eyes. She identifies herself with her cat, and projects on to him thoughts that really concern herself. The cat was fond of standing at an open window, enjoying the air. Late one night he alarmed her by jumping through it and escaping. Her sister laughed and said, 'He has gone to lead a gay life on Broadway.' She replied, 'Yes, cats can go out at night whenever they like, but we can't, we should only be called fallen women.'

This dream illustrates one of the causes of the frequent fear of falling, which may occur as either a symptom or a dream,

physical and moral falling being unconsciously associated, so that the idea of the former can be used to represent that of the latter.<sup>1</sup> Another dream of the same patient shews this even more plainly. (4) *She stepped out of an upper window, picked up an umbrella that was lying there, opened it, and dropped to the ground. She fell on to the cellar steps in the front of the house. A man picked her up, and they went down the street together.* On the previous day she had annoyed her father by inconveniently borrowing his umbrella. The thought of a raised umbrella first reminded her of parachutes, and that a friend of hers had recently made a balloon ascent with her husband (a noted aviator) on their honeymoon; then of a Zeppelin-shaped balloon filled with candy, that a man friend had just given her. She had wondered whether a Zeppelin balloon was sharp enough to penetrate one of the ordinary shape if there was a collision. Finally it became evident that an opened-up and raised umbrella was associated in her mind with the erect male organ; in fact she had heard jokes in which the two were compared. As to the cellar entrance, she was struck by the curious fact of this being in the front of the house in question, instead of at the side, as it is in real life. The house was identified with herself and her own body, as is so naturally the case with women, to whom the home is an integral part of themselves. That the lower entrance to it symbolised the site of her (moral and physical) fall on the street (in which she was aided by a raised umbrella and a man), is quite intelligible. Going together with a member of the opposite sex (especially on the street) has long been a symbol for the sexual act; indeed, the word coitus itself is derived from *coire*—to go together. The three dreams thus represent the wild *demi-mondaine* instinct that with many ardent women slumbers at the back of the mind.

The individual details of the mechanisms<sup>2</sup> by means of which the latent content becomes transformed into the disguised manifest content are strikingly similar with dreams and neurotic symptoms. One of the more obvious of these is that known as 'condensation.' Every single feature of a dream and of a neurotic symptom representing more than one group of mental processes is, as Freud expresses it, 'over-determined.' One can never talk of *the* cause, for there are always numerous

<sup>1</sup> This is illustrated in the old saying: 'When a maiden falls, she falls on her back.'

<sup>2</sup> See Chapter VIII. for an account of these complex processes.

co-acting agents. Each feature is a highly condensed symbol of an extensive series of other thoughts, a fact which renders the full exposition of the structure of any dream or symptom a matter of great practical difficulty. Thus in a dream a given strange figure may be formed by the fusion of attributes taken from several different people, the result being a composite person; the same applies to all other elements of the dream. Sometimes the extent to which the condensation is carried is quite extraordinary. The analogy between the neologisms that occur in dreams, and those so frequent in insanity, has often been commented on; the genesis and structure of them is similar in the two cases. In the neuroses neologisms are relatively rare; they are chiefly met with in the obsessional neurosis. The following is a simple instance of condensation, in the dream of a homosexual patient:

(5) He dreamed that *a man, whose name seemed to be Lysanias, was advancing towards him*. Of the name he said that nothing was known of it beyond the fact that it is mentioned in Luke iii. 1. as that of a tetrarch of Abilene; it should be said that the patient was a professional Bible-reader. Remembering, however, that nothing occurring in a dream is without significance, I asked him to supply free associations to the names. The first one brought the words lyceum and licentious; his school (not in this country) was called a lyceum. When a schoolboy, he had been in the habit of resorting to an abbey ruin in the neighbourhood, for the purpose of indulging in sexual practices with an older boy called Leney. The name Lysanias (tetrarch of Abilene), therefore, expressed the fact of his having been *licentious* when at the *lyceum* by going to the *abbey* with *Leney*. An isolated instance of this sort may be due purely to coincidence, in spite of the immediate associations furnished by the patient, but when we find similar occurrences in every dream without exception that is submitted to analysis it becomes extremely difficult to regard this explanation as adequate.

Another equally prominent mechanism in both dreams and neurotic symptoms is that known as 'displacement.' By this is meant the replacement of one idea by another, more satisfactory or acceptable; the affect belonging to the original idea is displaced on to the second one. The directing of interest away from forbidden thoughts into the sphere of sport is an instance of this mechanism, which plays a large part in everyday life. It is one of the ways in which the symbolism is brought

about that is so constant a feature in dreams and neuroses. Displacement is illustrated in all the dream examples here related; further instances are the following:

(6) The last-mentioned patient dreamed that *he was at the side of a dirty looking, sluggish river. He seemed to know that the Sanitary Inspector had said it was full of disease germs. The banks were covered with silvery, iridescent, fishes' eggs. A gigantic dog-fish raised itself out of the stream and attacked him.* The river reminded him of the River Wey, which gave the associations: milky-way—curds and whey—semen (germ). Fishes' eggs always made him think of drops of semen (masturbation). He had a morbid repugnance for all fish, finding them loathsome. A boy, with whom he had had sexual relations in school (the patient playing a passive part), was nicknamed Fishy, on account of his large mouth and fish-like eyes. As to dogs, he had had a terror of them ever since one had bitten him badly when, in boyhood, he was gratifying his sexual curiosity with it. The whole dream thus symbolised a sexual attack of a kind he had since come to regard as repulsive.

(7) A woman, aged thirty-five, dreamed that *she was driving in a trap with a tall, dark man. The horse was a bay. They came to a level crossing and saw a warning notice with only the word 'near' on it. A train came dashing along. The man tried to cross, but the horse refused and turned round just in time, thus saving them.* The man recalled to her a cousin who had once proposed to her when they were out driving. The word 'near' made her think of 'a near relative.' She thought it wrong to marry a near relative, on account of the risk to the children, and for this reason had refused her cousin's offer, although she was very fond of him. The bay horse reminded her of one she was greatly attached to as a girl, and which was named after her; also her own name before marriage was Bay. In the dream she thus identifies herself with the horse, who saves them from disaster.

It is impossible for me to go here into further detail in regard to these various mechanisms, and I will only add two further remarks on the subject. The mechanism of inversion is an extremely common one in both dreams and neurotic symptoms. The inversion may concern either space or time. For instance, the second part of a dream or of an hysterical attack<sup>1</sup> may represent the first part of the logical underlying

<sup>1</sup> See Freud, 'Hysterische Phantasien und ihre Beziehung zur Bisexualität,' *Zeitschr. f. Sexualwissenschaft*, 1908, Heft 1.

thoughts. The other matter is that the affect in both dreams and symptoms is always true. If a patient has a morbid fear of a trivial object, either in a dream or when awake, this fear is always justified in fact; that is to say, there is some associated object or idea in real life that he has every right to be afraid of. The unreasonableness arises only through the fear having got displaced on to a trivial associated idea; the person dares not admit to himself what he is really afraid of. For instance, a woman patient of mine, having every reason to be afraid of a certain treacherous object that has the capacity of penetrating the body, with dangerous results, contracted a phobia of—knives. To laugh at neurotic patients for their 'ungrounded' fears is to display a complete ignorance of the significance and genesis of the symptom.

#### IV. LATENT CONTENT.

The associated ideas obtained by any careful study of dreams lead one at first to a number of mental processes that have taken a share in building the dream. Up to the present, however, it has not been found possible to reach the true latent content or underlying meaning of dreams by the use of any other method than the psycho-analytic, a method which like other complex procedures has its own technique that required to be carefully learned. The material obtained by more superficial studies is found to be quite heterogeneous, and the conclusion may hastily be reached that the latent content has no characteristic features, that any kind of mental process, a fear, anxiety, wish, and so on, can give rise to a dream. On the contrary, the true latent content that lies behind this material, and which is laid bare by psycho-analysis, is found to be specific and homogeneous, and always has certain definite and characteristic features. The preceding remarks apply equally as well to neurotic symptoms as to dreams. The features common to the latent content of both are as follows:

1. The latent content is always unconscious, that is to say, it consists of mental processes unknown to the person, and of which he cannot become aware by direct introspection but only by means of certain indirect modes of approach.
2. These mental processes are never indifferent to the person, but are highly significant, and are 'repressed' in the unconscious on account of their being unacceptable to the conscious mind.

3. The latent content is of infantile origin, later additions being merely reinforcements of earlier infantile trends. The following is an instance of how infantile material can lie behind an apparently meaningless dream:

(8) The last-mentioned patient dreamed that *she was pregnant, and that she was suffering from nausea. She thought to herself, 'surely the baby is not coming out this way.'* Analysis of the dream led to long-forgotten infantile thoughts, in which she had imagined conception and child-birth to be processes analogous to the ingress and egress of food, and taking place at the same alimentary orifices. The hysterical vomiting (aesthetic disgust), from which she suffered in waking life, originated in the same buried complex.

4. The latent content of neurotic symptoms is invariably, and of dreams usually, of a sexual nature, although in both cases, of course, other material is also included. It should be remembered that this statement refers principally to the infantile form of sexuality, which differs widely from the adult type.<sup>1</sup> I am aware that this generalisation, like all other new ones, is bound to give the appearance, to those who are shocked by its strangeness, of being an obvious exaggeration, but it is a matter that can only be settled by facts, not by preconceived opinions; so far as my experience goes the facts conclusively point to the truth of it. To the other examples of it I have already related the following may be added:

(9) A patient, aged thirty-three, dreamed that *she was in a bath-room, and that an enormous spider, with huge legs, kept falling on to her and entwining itself around her. She called to her son for help, and endeavoured to get the spider into the bath, which was made of tin.* The spontaneous and quite unprompted associations to the elements of this 'harmless' dream were as follows: Her mother-in-law had a tin bath the surface of which she was fastidious about keeping immaculate. The patient's son, a boy of eight, had recently soiled and scratched it by standing in it with his boots on. She used to find very repugnant the maternal duty of taking her boy, when a baby, to the bath-room for other purposes. The word 'tin' brought to her mind the word 'nit.' (The frequency with which reversal occurs in unconscious mentation was mentioned above; it is an interesting subject, which deserves a special discussion.) She had

<sup>1</sup> See Chapter III., and Freud, 'Drei Abhandlungen zur Sexualtheorie,' 2<sup>e</sup> Aufl., 1910.

suffered badly from nits when at school, and had often to be taken to the bath-room to have her hair treated; the experience had caused her great disgust. The enormous spider called to her mind her husband, from whom she is separated. He is an unusually big man; she loathed his embraces, which gave her the feeling of being grasped by a spider. After them she used to take not only a douche, but a full bath, to wash away any traces of his contact. She had been in the habit of calling her son to her room to protect her by his presence whenever she found her husband's embraces quite unendurable. The dream thus discloses itself as a disguised reminiscence of very intimate experiences.

The following is an example of a bisexual dream, in which, namely, the actor plays both a masculine and feminine part.

(10) The patient, a farmer of twenty-four, dreamed that *he saw an immense lion. His feeling was that it had been a family pet, but that as there was a latent danger about it he ought to shoot it. The rest of the family did not seem to appreciate the danger or to agree with him that it was necessary to destroy the animal. His mother appeared on the scene, weak and ill, as she had been the year previous to her death. She was quite indifferent to the danger, and he could not understand this, especially in view of her weakness. With difficulty he persuaded her to let him lead her out of the danger zone. Then his father appeared, who though dubious about the necessity of taking any action, began to load a rifle. The patient now became more apprehensive, doubted his capacity to tackle the animal himself, and decided to leave the job to a more reliable marksman—namely, his father. After a consultation they called to their assistance their dog. He and his mother had to prepare the dog for the fight, and this now turned inexplicably into a small lion, the other animal disappearing from the scene. The preparation consisted in fitting top-boots on to the new lion's feet, and at his mother's suggestion he tried to do this. He succeeded with one boot, though not so as to satisfy the lion. The next one was still more difficult to get on, but he managed to get it on by means of swinging the foot to and fro inside it. This movement irritated the lion, which seized his head and crushed it. The patient's feeling was one of mixed apprehension and submission. A later addition: in the first part of the dream the animal was half a lion and half a snake; it had definite features of both these, the tail and hind parts, for example, having altogether the appearance of a snake, the head being half leonine and half*



*snake-like, the teeth and claws being leonine, and so on.* It thus resembled the fabulous monsters of mythology, creatures probably also born of dreams. To connect this bizarre dream with the waking thoughts of a prosaic young Canadian farmer, and to regard it as an expression of his psychosexual life, might perhaps seem a gratuitous and not very likely undertaking, but even the few facts I can here relate may shew that it was far from impossible, as indeed the full analysis proved. The lion, with its half-menacing, half-undecided expression, at once recalled to the patient his father, whose head and cast of features have a strikingly leonine appearance. (This resemblance in the father both I and a common acquaintance had previously noticed quite independently of the patient, to whom I had never mentioned it.) The thought of a snake also brought to his mind his father's cold, beady eyes, and his insinuating 'sneaky' manner of getting his way when he was not in a position to bully; in outbursts of anger the patient had frequently called him a snake. He was constantly on bad terms with his father, and the troubles that resulted constituted the main symptom for which he was being treated. He had always slept with his father, and when the latter went into the mother's bedroom, which was divided off by a board partition, the overheard sounds caused in him both physical excitement and jealousy.

The dream expresses four phantasies, an auto-erotic, a feminine, a masculine, and a bisexual. The top-boots that he was fitting on to the foot (an ancient phallic symbol) of the small lion represented a condom, which he had worn when masturbating, so as to heighten the illusion of the imagined vagina (sheath); it also reminded him of a snake-skin. In being attacked by the lion-snake he played a feminine part. The contact of his father's penis in bed had always excited him; he had frequently compared the appearance of it to a snake and had woven all sorts of grandiloquent phantasies about it. As a boy of nine he had pictured to himself, half-fearfully, half voluptuously, that there was a large snake in his bed, and later on had suffered from the fear that a snake might creep into his mouth or anus when he was asleep out of doors. In the dream his protection of his mother from the large animal (the father, the dangerous family pet) and his co-operation with her in handling the small one (himself) shews him in a masculine part. In real life he had in fact remonstrated with his father for going to the mother's room against her will when she was weak and

ill. The conclusion of the dream represents a mixed, bisexual phantasy. The crushing of the head between the lion's jaws brought the following associations: a frog in the jaws of a snake—a boa-constrictor he had seen swallowing a mass of raw beef—gripping his penis in the act of masturbation—a game he used to play with an older boy, which consisted in getting the latter to grip his head between his thighs; 'it felt like having one's penis held tight' (the head is a well-known phallic symbol). This theme was connected with both masochistic and sadistic phantasies, though principally the former.

It is probable that a great number of dreams, just as most neurotic symptoms, are connected with infantile incestuous wishes. These came to fairly evident expression in the dream just related, as also in the next one.

(11) The patient, a woman of twenty-three, dreamed that *she was walking alone in a dark thicket. She thought how terrible it would be to meet a negro there, as she was unprotected. One appeared, armed with a pickaxe, and grabbed her by the arm. She struggled to escape, but thought to herself that 'it would not be so terrible if she were to collapse.'* *She reached a high board fence and pushed open a door, which had rusty nails.* The patient was a Southern girl, who from a child had never been allowed to go out without carrying a revolver. The association between negroes and rape was naturally a very close one in her mind. She had 'a horror of any one being killed on her account' (the fear covering a repressed wish), and recollected several instances of lynching near her home. There was in general in her mind a very intimate association between the ideas of sexual relations and violence. As a child she had frequently overheard conjugal acts on the part of her parents, and had interpreted them as a violent sexual assault; the fact that her parents often used to quarrel fiercely, her father striking and wounding her mother, no doubt contributed to this conception. The grabbing of her arm in the dream brought to her mind an occasion on which she had tried to defend her mother, and her father had roughly seized her by the (same) arm, violently twisting it. The negro in the dream at once reminded her of her father, the short white beard, the working-clothes, and pickaxe, as well as his build and movements, being exactly the same. The fence recalled one of the same appearance as in the dream, in front of which she had, when a girl of fifteen, seen a man exposing himself; she had 'absent-mindedly' stopped and asked him if he wanted to

speak to her. The rusty nails brought back the fence at her home, which 'it wouldn't take anything to break down.' Further dreams, in which her father stabbed her or her mother with a knife, etc., shewed that in her repressed imagination she had identified herself with her mother, and wished that her father would commit the same kind of assault on her as on her mother; in fact she was constantly, and in the most wanton way, provoking disagreements and quarrels with her father. In the course of the treatment the patient fully realised, and confirmed by recalling a number of forgotten memories, the incestuous origin of her family troubles; since the analysis she has been on excellent terms with both her father and mother.

5. The latent content of both dreams and neurotic symptoms consists of an imaginary gratification of one or more repressed wishes. As was previously mentioned, all kinds of other material may enter into their composition, and wishes that are not repressed frequently find an imaginary gratification in them, but the latent content itself is always a repressed wish-fulfilment.

Of all the relationships between dreams and neurotic symptoms the most important practically is that in many cases the latent content of both is identical; that is to say, the mental causes (repressed complexes) of a neurosis will sooner or later come to expression in the patient's dreams. Before discussing the corollaries that follow from this fact I will illustrate it by some more instances.

(12) This example is taken from the same case as (7) and (8). One of the patient's chief symptoms was a feeling of powerlessness, at times amounting to a complete paralysis, in both arms. This was at first manifested only while playing the piano, a recreation of which she had been particularly fond. She dreamed that *she was in a large hall. At one end, opposite to her, was a maroon-coloured church organ. There were several upright pianos, and one baby grand piano, at which she was playing. Her boy was kicking at it from the side, and she reproved him saying, 'You ought not to abuse such a beautiful instrument.'* The free associations to the elements of this dream were: Organ. 'I don't know why it was maroon-coloured, for our organ is painted grey. I have always been passionately fond of organ music. To hear it gives me a delicious soft feeling. I used to get into the church alone, and try to play on the organ. (Pause.) The word is also used for a certain part of the body.' Reproving the boy (who was nine years old). 'I have been

greatly exercised of late lest he might acquire any bad habits in school as I did at his age (masturbation), and last week spoke to him on the subject; I used words almost the same as those in the dream.' From these and other associations it was not hard to infer that the acts of masturbation and of piano-playing had become unconsciously associated in her mind. I told her so, and she answered, 'Well, I didn't tell you that when I woke from the dream I found I had been doing it in my sleep.' This proved to be an important step in the discovery of a number of thoughts, phantasies, and incorrect ideas relating to masturbation, all of which were concerned in the genesis of the hysterical paralysis; roughly put, her loss of power in piano-playing, which gradually extended to other functions, was in a way a punishment for playing with her fingers in another, forbidden direction.

(13) The following example is taken from the same case as the last. *She was seated at a table which was covered with food; the table was made of rough boards as at a picnic. She played in this food as though on a piano. Her fingers got unpleasantly sticky, and covered with some stuff that seemed like either fine hay or shredded wheat.* The rough board table reminded her of picnics she used to go to when a young girl; she used to play see-saw with a boy-cousin on a board taken from the temporary table, and this used to cause genital excitement. The latter idea brought to her mind other similar onanistic acts (on chairs, steps, etc.). Stickiness was associated with both this and the idea of semen. Fine hay called to her mind the hen-nests in which she used to search for eggs, and shredded wheat the threads of babies' clothes. There are thus two themes, masturbation and conception. These were connected in her mind by the curious belief she had held as a girl that illegitimate pregnancy might result from masturbation. Fears in this direction had made her life a misery for several years till at the age of seventeen she learned the truth; in the preceding dream the belief was indicated by her playing on a 'baby' piano (a baby and the part of the body where it is born are often unconsciously associated). The connection with food dated from a much older complex. When a child of five she had developed the idea that babies grew from food taken into the body. Her vomiting symptom arose from this complex, as was remarked in example (8). The dream is thus a condensed biographical account of her views and experiences on the subject of sexuality and child-birth.

(14) The patient, whose history I have elsewhere related,<sup>1</sup> suffered from an anxiety state with pronounced gastric symptoms. She dreamed that *she was going to the beach to bathe. On her way she stopped to buy some milk. They gave it her in several bottles; all these were white, except one, which was violet-coloured. When she reached the sea a small boy ran out of the water to meet her.* The dream represented a birth phantasy, as many dreams do in which a child emerges from the water.<sup>2</sup> In the preparation for the event it was only natural that she should need a quantity of milk, but the curious circumstance of one of the bottles being violet-coloured needs an explanation. Nothing in a dream is without import, and this instance is a good example of how an apparently insignificant feature may be connected with the most important underlying thoughts. The immediate associations were: 'violets are my favourite flowers; my husband's poison bottles (he was a doctor) were blue; in milk shops I have never seen blue or violet bottles, but they sell buttermilk in brown bottles; buttermilk was prescribed for my stomach trouble and I loathe it, it nauseates me.' It is possible that the violet colour was composed from a mixture of the blue and brown; at all events we shall see that the corresponding ideas are intimately associated with one another. Like the last-mentioned one, this patient also had constructed an infantile hypothesis of pregnancy on the view that the baby grew in the abdomen out of food, but, keener than her, she had surmised that some special substance had to be added to the food to fructify it. On the analogy of the mixing of urine and fæces, and of the watering and manuring of vegetation, she inferred that the new substance was a fluid, and as the doctor was evidently concerned in the matter she concluded it must be some kind of medicine. Throughout her childhood she had a remarkable fascination for medicines, and drank all she could get at. As a reaction to this in later life she acquired a loathing for any medicinal substance that in any way resembled the appearance of semen, the infantile complex being now buried; instances of this were buttermilk, flax-seed emulsion, and koumiss, all of which were forced on her with the object of bettering her stomach trouble. As to the blue poison bottles of her husband (who, it should be remembered, was a doctor), it turned out that poison (a medicinal fluid which when swallowed produces serious effects) also belonged to the same group of

<sup>1</sup> Chapter XXVII., p. 494.

<sup>2</sup> See Chapter VIII., p. 203.

ideas; it is this association that is at the basis of the common delusion of insane patients that they are being poisoned—*i.e.*, that a certain fluid is being forced on them against their will. The same association is the explanation of the old beliefs in ambrosia, nectar, love-potions, and other magical drinks. A flower or bud was in her dreams a common symbol for a baby, as it is in poetry. The violet colour in the dream was thus greatly over-determined. The insight gained into the nature of the psychogastric symptoms from the analysis of this dream alone was of considerable value for the question of treatment.

The importance of the fact that the latent content of many dreams is identical with that of the neurotic symptoms from which the patient is at the same time suffering is a twofold one, it being equally significant for pathology and for therapeutics. A knowledge of the nature, mechanisms, and meaning of normal dreams is indispensable for the understanding of the manifold problems of the neuroses, and also, it may be added, of the psychoses.<sup>1</sup> An adequate study of these problems is only possible when the unity of the laws applying to both normal and morbid processes is appreciated, and nothing demonstrates this unity more clearly than the study of dreams. Through it one realises that the same forces are at work in the normal, in the neuroses, and in insanity, and that there is no sharp line dividing any of these. Not only is the principle of cause and effect just as rigorous with bizarre morbid manifestations as it is in normal mental life, but the various psychological laws according to which it operates are precisely the same in both cases. Further, the study of the patient's dreams is the readiest and most direct route to the unconscious, where the conflicts are taking place that form the basis of the surface symptoms; it is therefore of prime importance for the investigation of the individual pathogenesis.

For therapeutics the study of dreams is of the greatest value in two ways. First, the deeper knowledge and comprehension of the sources of the disorder must of itself put one in a better position to deal with them. In few maladies are the pathogenic factors so darkly hidden as the neuroses, and many modes of treatment (*e.g.*, persuasion) can only be de-

<sup>1</sup> Hughlings Jackson once made the significant remark, which unfortunately was never acted on by his colleagues: 'Find out all about dreams, and you will then understand insanity.' Freud, in his 'Traumdeutung,' maintains that it is hopeless to approach the psychology of insanity unless one has a knowledge of the genesis and structure of normal dreams.

scribed as a blind fight with unseen foes. When the morbid factors are appreciated and precisely defined our power of managing them is considerably increased. Secondly, the mere carrying out of the dream analyses is a therapeutic measure of very great value. To understand this curious circumstance one has to remember that the cause of a neurosis does not reside in the material that is repressed so much as in the fact that it is repressed. The conflict between the repressed wish and the opposing resistance of the censor is the essential matter, and the symptoms constitute a compromise between these two forces; from another point of view it may be said that they are symbolic expressions of the repressed wishes. If, now, the resistance of the censor can be sufficiently overcome (as has to be done in a dream analysis) to permit the fusion of the two groups of conscious and unconscious processes that previously were kept apart, so that the patient realises the thoughts and feelings that he had previously kept from himself, then a symbolic compromise-formation (symptoms) becomes superfluous and indeed impossible. This principle is the essence of the psycho-analytic method of treatment. All those who carry out this treatment are in fact agreed that the most valuable part of it lies in dream analysis. One can often treat a case of neurosis mainly by dream analysis, attaining a complete cure thereby.

After having dwelt on the resemblances between dreams and neurotic symptoms it becomes desirable to point out some of the differences between them. The most obvious of these is of course the fact that dreams belong to normal phenomena, neuroses to abnormal. On this matter, however, there is a great deal to say. In the first place, certain dreams are decidedly pathological in nature. For instance, nightmares<sup>1</sup> and other severe anxiety-dreams occur only in subjects who shew other evidences of an anxiety-neurosis (commonly included under the heading of *neurasthenia*), and there is reason to believe that increased knowledge of dreams will shew that certain types are indicative of definite forms of neurosis or insanity. Then, again, some neurotic symptoms—*e.g.*, the hysterical dream-states previously referred to—are hardly to be distinguished from dreams in either their nature or their appearance, and others, as was mentioned above, actually date from

<sup>1</sup> See Ernest Jones, 'On the Nightmare,' *Amer. Journ. of Insanity*, January, 1910.

dreams. Most significant, however, is the circumstance that both dreams and neurotic symptoms arise from the identical mental material, and by means of identical psychological processes. The repressed wishes that the neurotic finds necessary to express in external symptoms is expressed by the healthy person in dreams. The two are merely different ways of obtaining an imaginary gratification of the same buried wishes. One may in fact describe dreams as the neuroses of the healthy, just as a neurosis is a dream of the invalid. Further, the healthy person is, strictly speaking, never normal. Freud<sup>1</sup> has shewn that the buried desires in question come to expression in health in a variety of manifestations, absent-minded acts, forgettings, slips of the tongue or pen, and so on, the psychological mechanisms and significance of which are exactly similar to those of neurotic symptoms. We thus see that in many respects consideration of dreams furnishes a very uncertain criterion to separate health from disease.

An almost equally obvious distinction is that dreams belong to sleep, and neurotic symptoms to waking. Here also we are on unsure ground. Many neurotic symptoms—*e.g.*, night terrors, noctambulic wanderings, nocturnal paralyses, certain kinds of nocturnal, epileptiform fits—definitely belong to the region of sleep, and others, such as various automatic and twilight conditions, occur in mental states that are hard psychologically to distinguish from sleep. On the other hand, there is a most intimate connection, both in essence and appearance, between night-dreams and day-dreams or reveries. Some of the most typical dreams, particularly night-mare, occur by day (day-mare) as well as by night, and in all stages between deep sleep and full waking; often the subject is quite unable to tell whether he was awake or asleep at the time or in an intermediate state half-way between the two.

An interesting feature of dreams is their pronouncedly visual character. Most dreams, though by no means all, shew this to a high degree; in a dream we see things before us as on a stage. This feature is exceptional in the neuroses, though it finds its counterpart in hysterical hallucinations; in insanity hallucinations are of course common enough, and indeed, even in health they are not exceedingly rare. In analysing the psychogenesis of hallucinations Freud found that it proceeds

<sup>1</sup> Freud, 'Zur Psychopathologie des Alltagslebens,' 4<sup>e</sup> Aufl., 1912. See also Chapter IV.



by the same symbolising mechanisms, and that the content of them is just the same, as in dreams; indeed the relationship between insane symptoms in general and dreams are so close that one can with quite fair accuracy define an insanity as a dream from which the patient has not awakened. Freud's explanation of the sensorial nature of hallucinations is the same as his explanation of the 'regression' that is the cause of the visual feature of dreams.

Conscious mental processes play a greater part in the subsequent remodelling of dreams than in that of neurotic symptoms. This is a statement, however, that requires much modification. In some dreams the 'secondary elaboration' plays no part at all, whereas in some forms of neurosis, particularly the obsessional neurosis, it plays an extraordinarily important part.

Consideration of the apparent differences between dreams and neurotic symptoms, therefore, leads us to the same conclusion as consideration of their resemblances to each other did—namely, that the relationships between the two are far-reaching in extent and in significance. The truth of Freud's conclusions as to the nature and mechanisms of unconscious processes is strongly confirmed by their validity being demonstrated in two regions of mental functioning apparently so disparate as dreams and neuroses. He has produced evidence to shew that the same principles hold good in even more distant fields—namely, in the origin of many forms of criminality, in the formation of myths, fairy-tales, folk-beliefs, and superstitions, and in the creation of literary and artistic productions. In all these the driving force comes from the unconscious, all are essentially methods of an active phantasy for stilling ungratified desires, the psychological mechanisms changing, disguising, and distorting the primitive childhood tendencies are the same, and with each it is probable that the sex instinct is of fundamental importance. With right could one of our greatest psychologists say:<sup>1</sup>

'Lovers and madmen have such seething brains,  
Such shaping fantasies, that apprehend  
More than cool reason ever comprehends.  
The lunatic, the lover, and the poet,  
Are of imagination all compact.'

<sup>1</sup> 'A Midsummer-Night's Dream,' Act V., Scene 1.

### CHAPTER XIII

#### PSYCHO-ANALYSIS IN PSYCHOTHERAPY<sup>1</sup>

THE evolution of psychotherapy, like that of all other modes of treatment, is marked by an ever-increasing precision in method and an ever-deepening comprehension of the conditions to which it is applicable. Progress in these two respects must always go hand in hand, for the moment therapeutics becomes divorced from pathology and diagnosis it leaves its scientific basis and stands in danger of approximating to that medical charlatany which it is the highest interest of our profession to resist. The two studies are peculiarly interwoven in the case of the psycho-analytic form of psychotherapy, for, as I shall presently indicate, treatment is here carried out by simultaneously laying bare and remedying the pathological mechanisms at the basis of the malady. From this point of view we can discern two stages in the development of any new method of treatment, and these I can best illustrate by a reference to more familiar methods, for instance, the operations of trephining or of laparotomy. When the possibility of these operations was first realised, we saw the first stage in development, in which, namely, they were regarded merely as an adjunct to the therapeutic armamentarium, and were applied for the relief of conditions that were already well known and studied on established pathological lines. The second stage arose when, through the repeated performance of such operations, conditions that could be relieved by them came to be studied anew, fresh aspects of pathology opened up, and questions of precise diagnosis that had previously been academic problems of trivial interest now became urgent matters of life and death. A moment's reflection on the history of appendi-

<sup>1</sup> An address read as part of the Symposium on 'Psychotherapy,' before the Annual Meeting of the American Therapeutic Society, at New Haven, May 7, 1909. Published in the *Journal of Abnormal Psychology*, vol. iv.

citis will remind you of how little we knew of the pathology, the diagnosis, or even the existence of the affection until the surgeon's knife shewed that it could be cured. We might, in fact, paraphrase the motto underlying the old British Imperialistic policy, to wit, that Trade follows the Flag, and say that in medicine Diagnosis follows Treatment.

Now in psychotherapy most of the medical world is at present only entering on the first stage. That the medical world of America will definitely enter on this stage as a prelude to further advance will, I trust, be one of the results of this afternoon's conference.<sup>1</sup> In this stage we recognise that we have secured a new therapeutic weapon of very great value, which we may describe as the capacity to alleviate certain complaints by purely mental measures. Our attitude towards the nature of these complaints, however, may remain in this stage substantially the same as it was when they were treated only by physical remedies. Hence, we may see the strange picture of a physician removing by verbal suggestion a symptom which he considers is produced by a toxin circulating in the blood. However, a thoughtful person who employs any form of psychotherapy soon realises that a symptom which can be removed by mental measures is in all probability of a mental nature. It may parenthetically be remarked that he further realises how the suffering endured by the patient, so far from being unreal, is all the more dreadful and formidable for having a mental and not a physical origin. A non-appreciation of this important fact is still all too common. Only recently an article appeared in one of the leading medical journals in which the writer remarked: 'In this manner I hope that we will always be able to trick a malingerer or hysterical subject into betraying the falsity of his claim.' This attitude, though rarely in such an outspoken form, is frequently implicit in medical writings, and cannot be too strongly condemned. Apart from yielding an inkling of the mental nature of various disorders, the first stage in the evolution of psychotherapy is thus characterised by an indeterminate attitude towards the origin and pathogenesis of them. The older conceptions have begun to dissolve, but the knowledge won by the new method of treatment has not yet been formulated. Psychotherapy is in this stage employed in a quite empiric way, and the physician either does not concern

<sup>1</sup> This prediction, thanks to the energy of American colleagues, is being rapidly borne out.

himself with the intrinsic *modus operandi* of his treatment, or else offers explanations of it which are so superficial as to be of little scientific value.

Psycho-analysis represents the second stage in the evolution of psychotherapy. Here a deeper insight is sought into the essential nature and origin of the morbid phenomena with a view to obtaining a fuller understanding of the aims of treatment and so to achieving a greater precision in the application of it. The psycho-analytic method we owe to the genius of Professor Freud of Vienna, who in the past sixteen years<sup>1</sup> has wrought it into an elaborate science of which I can here give only the most summary outline. The method is based on the knowledge that the symptoms present in the psychoneuroses owe their origin to a conflict between different groups of mental processes which cannot be brought into harmony with one another. One complex of mental processes is for some reason or other of such a kind as to be unacceptable to the main body of the personality. The personality fails to assimilate it, will have nothing to do with it, tries to forget it, to submerge it, to 'repress' it. The 'repressed' complex then takes on an automatic existence, and acts as an irritating foreign body in the same way as any physical foreign body that has not been absorbed. From this point of view we might define the pathology of the psychoneuroses as a *defect in assimilation*.

Let me illustrate my meaning with a concrete instance. A man conceives an attraction towards the wife of a near friend or relative, and in his imagination perhaps plays with the thought of what might happen were the friend to meet with a fatal accident. If he honestly faces his wish and realises its nature he will instantly see that, though possibly a perfectly natural one, it is of such a kind that for social and ethical reasons it must obviously be suppressed. If he adopts this healthy attitude he will probably think no more about the matter except in the most harmless way. The wish-complex is here assimilated by the main body of the personality. If on the other hand he regards the mere possibility of entertaining such a wish as a sin and a sign of the most desperate iniquity he may refuse to own up to himself that he has ever felt it, even momentarily; whenever the thought occurs to him he endeavours to put it from him, to get away from it, in other words to *repress* it. The complex here is not assimilated; it

<sup>1</sup> Now twenty-five.

therefore continues to act, and the more the man strives to escape from it, the more hauntingly does it torment him. He has now become the prey to a fixed idea which is out of his control, and which evinces its independence by appearing irregularly whether he wills it or not. In actual practice we never meet with cases so simple as this, but the instance will serve to illustrate the notion I am trying to convey—namely, that certain mental processes, particularly strivings, desires and impulses, if they are not absorbed in the main stream of the personality, are apt to manifest an independent activity out of control of the will. This activity is usually of a low order, of an automatic and almost reflex kind, and it is generally an *unconscious* activity, that is to say it operates without the subject being aware of it.

As I have just said, matters are not so simple in practice, and what actually happens is that the activity of the repressed complex is manifested not directly, but indirectly in some distorted form that is often hard to recognise. In the above example, for instance, the subject might have counterbalanced his real attitude towards his friend by developing an exaggerated solicitude for his welfare, and have shewn great concern and dread whenever the friend ran the slightest risk of accident or danger. Again, an abnormally strong emotion might be evoked by anything accidentally associated with the persons in question, a condition that Morton Prince described some ten years ago under the name of 'association neurosis.' This distortion in the manifestation of the activity of the mental complex is often exceedingly involved, and one of the main difficulties in the psycho-analytic method is the unravelling of the confused end-product, which clinically we call a symptom. The psychological mechanisms by means of which the distortion is brought about are very intricate, so that in the time allotted it would be impossible for me to describe them. Freud has worked them out with great accuracy and detail, and an exact study of them is essential to the use of the psycho-analytic method.

Investigation on the lines presently to be indicated discloses the fact that every psychoneurotic symptom is to be regarded as the symbolic expression of a submerged mental complex the nature of which is a wish. The wish itself on account of its unacceptable nature is concealed, and the symptom arises as a compromise between it and the repressing force exerted by

the main personality. The stream of feeling that characterises the wish is dammed up, it can find no direct outlet and so flows into some unusual channel. The metaphor of 'side-tracking' is, I believe, used in American psychiatric circles to indicate this process. In more technical phraseology we may say that the affect of the original complex is inhibited, and so becomes transposed on to a previously indifferent mental process. This indifferent mental process has now become invested with the strength of feeling that properly belongs to the original complex, and so may be said to replace the complex. Thus arises what has been termed a substitution neurosis, in which an abnormal outlet has been found for a pent-up affective process. The outlet may be in a purely mental direction, in which case we have such a symptom as a phobia, or towards various bodily processes, a condition that Freud calls conversion-hysteria, in which case we have such symptoms as a tremor or a paralysis. In the symptom the patient obtains a certain unconscious gratification of the repressed wish, and this means of obtaining the gratification, however perverse and abnormal it may be, is still the only means possible to the patient in the circumstances. This fact explains the obstinacy with which such a patient will instinctively cling to his symptoms, and is one of the causes of the resistance that the physician encounters when trying to remove these. I need hardly remind you that this obstinacy is often erroneously interpreted even by physicians as indicating mere wilful perversity, a mistake that does not conduce to success in treatment. Not only does the observer commonly fail to understand the significance of the symptom, but the patient himself has no knowledge of its meaning or origin. In fact, *enabling the patient to discover and appreciate the significance of the mental process that manifests itself as a symptom is one of the central aims of the psycho-analytic method.*

In carrying out the necessary investigation several procedures may be adopted according to circumstances. The hypnotic state, for instance, has been utilised in the search for forgotten memories. Only a very few of those acquainted with the psycho-analytic method employ this procedure, for it has grave disadvantages which I need not here discuss. The method introduced and developed by Freud gives by far more satisfactory results. It is one of the ways of obtaining what is known in psychology as 'free association,' and is carried out by getting the patient to relate in the order of their appear-

ance the various thoughts that come to his mind. It is essential for him to do this quite honestly, and fortunately we have several objective tests of his behaviour in this respect. He must suspend his natural tendency to criticise and direct the thoughts flowing in, and must therefore play a purely passive part during this stage. At first he will omit to mention a number of thoughts on the ground that they are apparently irrelevant, unimportant, or nonsensical, and others because they are of a painful or unpleasant nature. After a time, however, the length of which largely depends on his intelligence and sincerity, he acquires the capacity of adopting the non-critical and passive attitude essential to success.

Other means of reaching buried mental complexes may briefly be mentioned. A study of various mannerisms, symptomatic movements and tricks of behaviour, and slips of the tongue or pen often reveals the automatic functioning of some repressed train of thought.<sup>1</sup> The word-reaction association method<sup>2</sup> as developed by Jung may be of some assistance, particularly in furnishing us with a series of clues to serve as starting-points for future analyses. In this method a series of test-words is called out to the patient, who has to respond with the first word or thought thus called to his mind. From a general review of the kind of responses given much can be learnt about the mentality of the patient and the type of psychosis present. Further, by noting certain peculiarities in the individual reactions we may discover various complexes or trains of thought that possess for the patient a high emotional value, and these can then be followed and studied more fully. The peculiarities I refer to are ten or twelve in number. The chief are: undue delay in the time of reaction, failure to respond at all, response by repetition of the test-word, perseveration affecting the succeeding reactions, anomalous clang associations, assimilation of the test-word in an unusual sense, and erroneous reproduction of the reaction when the memory for it is subsequently tested. Last, but not least, is the analysis of the patient's dreams<sup>3</sup> by means of the special technique introduced by Freud. The study of dreams is in this connection of supreme importance, for of all the means at our disposal it is the one that best enables us to penetrate into and understand the most hidden parts of the mind. No one can have more than an outsider's notion of the psycho-analytic method who has not thoroughly

<sup>1</sup> See Chapter IV.

<sup>2</sup> See Chapter XXII.

<sup>3</sup> See Chapter VIII.

studied Freud's *Traumdeutung*, for in this work he has laid down the technique of his methods, and discussed the principles on which they are based, with a fulness to be found nowhere else in his writings.

By means of the methods just outlined we are enabled to determine the origin of the symptom by retracing the steps along which its pathogenesis proceeded. It is impossible to deal with the underlying complexes, to discharge their pent-up affect, to render them more assimilable by the patient, unless one succeeds in this task and brings them to the full light of day. The symptoms constitute a veiled language in which hidden thoughts and desires find the only means allowed them of coming to expression. We have to get the patient to translate his symptoms into more direct language, and thus to understand and appreciate the origin of them. In so doing we give the patient a deeper insight into the workings of his mind, so that he is enabled to correct abnormal deviations, to overcome internal inhibitions and impediments, and to acquire a more objective standpoint towards the repressed mental complexes, the automatic functioning of which has produced the morbid manifestations. He is in this way able to free his personality from the constraining force of these complexes, and, by taking up an independent attitude towards them, to gain a degree of self-control over his aberrant thoughts and wishes that was previously impossible. The method is thus in almost every respect the reverse of treatment by suggestion, although several would-be critics have naively exposed their ignorance of the subject in maintaining that the successful results are produced by suggestion. In suggestion treatment the physician adds something to the patient's mind, confidence, belief, etc., and thus makes the patient more dependent on him. The psycho-analytic method does not add; it takes away something—namely, inhibition. It enables the patient to disentangle confused mental processes, and, by giving him control over the disharmonies of his mind, leads him to develop a greater measure of self-reliance and independence. The training received by the patient is thus an educative one in the highest sense of the word, for he not only achieves a richer development of will-power and self-mastery, but acquires an understanding of his own mind which is of incalculable value for future prophylaxis. He grows both in capacity to know and in ability to do.



The conditions that lend themselves to psycho-analytic treatment comprise practically all forms of psychoneurosis, the different types of hysteria, the phobias, obsessions, anxiety neuroses, and even certain kinds of sexual perversions. I shall refrain from relating any individual cases, for to do so would be only to weary you with the recital of a list of typical and atypical instances of these various conditions. It is, further, impossible for me to narrate any single instance of an analysis, for in every case the richness of material is so great that it would take several hours to give even an outline of the main points in the case.

The results obtained by the treatment, though often by no means ideal, are yet very gratifying in the cases where complete success is achieved. They surpass those obtained by simpler methods in two chief respects—namely, in permanence and in the prophylactic value they have for the future.<sup>1</sup> Although most symptoms can be removed by other methods, such as hypnotism, yet anyone who has devoted much time to the study of these cases knows how great is the tendency to relapse, to recurrence, and to the appearance of fresh groups of symptoms. Mild cases can indeed be not only alleviated but even cured by the simpler psychotherapeutic measures, so that these all have their sphere of usefulness; severe cases, on the other hand, need a more radical treatment, an uprooting of the actual morbid agents. It is easy to understand how this must be so. Hypnotic and other suggestion acts merely by blocking the outward manifestation of the underlying pathogenetic tendencies. The tendencies themselves persist, because they have not been reached and dealt with, and sooner or later they will again manifest themselves either in the same direction or in some fresh one. The analogy of a tubercular or, better still, of an actinomycotic abscess occurs to me in this connection. If the suppurating sinus is forcibly plugged then the symptom of discharging pus is removed, but sooner or later the pent-up pus will find a vent in either the same or a fresh direction. Before satisfactory healing can take place the tension must be relieved by instituting free drainage for each pus pocket, and the more thoroughly the focus of the disease is dealt with the better will be the result.

<sup>1</sup> For a full discussion of the comparison between the different psychotherapeutic methods see my monograph, 'The Treatment of the Neuroses,' in Jelliffe and White's 'Treatment of Nervous and Mental Diseases,' 1913, vol. i., of which an enlarged edition is about to appear in separate form.

A few words are now necessary on the clinical applicabilities and limitations of the method. It is a method that makes considerable demands on both physician and patient. Apart from technical knowledge the physician must evidently possess a considerable measure of tact, patience and sympathetic understanding; without these qualifications he is unlikely to gain the patient's confidence to the requisite degree. The treatment further makes a great call on his time. Freud has even found it necessary in rare instances to devote to a patient an hour a day for three years, but he acknowledges that the cases sent to him are generally of a very severe nature. In most cases one can achieve very satisfactory results in much less time than this, a fact to which I can fully attest from my own experience. The amount of time may appear excessive unless one remembers the hugeness of the task imposed, for in all cases the roots of the trouble go back to early childhood, and important modes of reactions have to be altered which have been fixed and stereotyped for many years. When we consider how much trouble and time frequently has to be expended in the orthopedic straightening of a deformed limb, we should not grudge the same to the far more intricate task of the orthopsychic training of a deformed mind, especially when this results in converting an intolerable existence into a happy life, and a person paralysed by doubts, fears and suffering into an active and useful citizen.

The demands made on the patient are no less great. The results of the treatment will vary with the intelligence, courage, honesty and perseverance he shews. With stupid and quite uneducated patients relatively little can be done, so that happily we can most help those whose value to the world is greatest. Again, age sets a formidable barrier to our efforts. In old age, when the plasticity of the mind is diminished, far less can be done than at an earlier period, and furthermore the time necessary to trace back the erroneous mental reactions through so many years is naturally longer. Still, I have had a few fairly satisfactory results even above the age of fifty.

It will be realised that the method is at present not one generally applicable by the practising physician. Not only is the time necessary for the treatment a great hindrance, but also a laborious special training is necessary before the technique of psycho-analysis can be acquired to an adequate extent. It is generally admitted that this demands three years'

incessant practice, some previous knowledge of neurology and clinical psychology being assumed. Here, as elsewhere, therefore, good work exacts arduous labour, and there is no royal road to the art of handling the most intricate and delicate machine we know of, the human mind.

You may now legitimately ask why I have taken up so much of your time by describing a mode of treatment which I acknowledge not many will have the opportunity to learn or to apply. My answer is a two-fold one. In the first place I am not one of those who hold that the general physician should be cut off from all advancing knowledge except that which he can immediately apply in his daily work. No physician can apply all methods of diagnosis and treatment, but it is surely well that he should at least be aware of the existence of them. I cannot believe that because a country practitioner is not expected to apply the Wassermann test in the diagnosis of syphilis, or to perform excision of the Gasserian ganglion for the relief of trigeminal neuralgia, it is therefore better for him not to know about such methods. In the second place I wish to contribute to the general effect that this symposium must have in bringing home to you in some degree the present unsatisfactory state of medical education so far as psychology is concerned,<sup>1</sup> for this is the main cause of the helplessness of the medical profession against the very maladies that are the triumph of the quack, religious or otherwise. The sooner we honestly face the shameful but undeniable fact that unqualified empirics can relieve distressing affections in cases that have defied medical skill, can produce results where we fail, the sooner will this flagrant lack in our system of education be remedied, and the better will it be for the dignity and honour of the medical profession. So long as the present state of affairs lasts, in which most physicians are given not five minutes' training in psychology in the five years of their student life, and in which there is no teacher of clinical psychology in any University or Medical School in the country, our profession must submit to being the prey of the charlatan and the mock of the scoffer.

<sup>1</sup> Very considerable progress in remedying this state of affairs has since been made in America, but as yet none at all in England.

#### CHAPTER XIV

### THE PSYCHO-ANALYTIC METHOD OF TREATMENT<sup>1</sup>

THE subject of the present paper is practically a new one to the medical profession of Anglo-Saxon countries. This fact in itself is worthy of comment, in view of the undoubted value possessed by the method of treatment in question. It cannot be ascribed merely to the restriction of interest in the psychoneuroses to small circles in these countries, nor yet to conservatism, for it is true not only of England but also of America, which usually shews no backwardness in adopting Continental methods. Perhaps one approaches a partial solution when one remembers that Americans, and indeed all people, are readier to adopt a new method of treatment when it is in harmony with previous knowledge on the subject, so that the *rationale* of it is easily understood. It is naturally more difficult to assimilate a new method of treatment when that is based on a totally different conception of the disease from the one to which we have previously been accustomed. That is precisely the case with the psycho-analytic method, for it was evolved by its founder, Professor Freud of Vienna, as the result of a profound study which also threw light on radically new aspects of the nature and pathogenesis of the various psychoneuroses. This fact makes it unavoidable, in discussing the psycho-analytic treatment, to say something about the pathology of the conditions to which it is applied.

To give even an outline of this side of the subject would necessitate far more time than I have at my disposal, and for this reason I feel justified in asking your tolerance if the little I shall say about it appears to you to be over-arbitrary or

<sup>1</sup> An address delivered before the Niagara District Association, at St. Catherine's, Ontario, November 24, 1909. Published in the *Journal of Nervous and Mental Diseases*, May, 1910. It should be said that extensive alterations and additions have been made in this chapter.

even dogmatic. It is now known that the symptoms present in the psychoneuroses are the direct or indirect result of the non-absorption of various mental processes in the main stream of consciousness. Certain desires, wishes, thoughts, occur to the patient, which not only cannot for various reasons be gratified, but which the patient refuses to acknowledge as a true part of his personality. Instead of healthily acknowledging their presence and then dealing with them, by either gratification or control according to the circumstances of the case, he fails to assimilate them, pretends to himself that they are not there, tries to forget them, to submerge or, as it is technically called, to 'repress' them. This important process of 'repression' may be illustrated by a simple example. Suppose that a young man, dependent on a rich father, falls in love, and that the object of his choice meets with the father's strong disapproval. In his despair the thought may occur to him that were his father to die all would go well, and to his horror he finds himself playing with this thought in his imagination and even for the moment half wishing its consummation, or at all events not being prepared to regret it as conscientiously as he considers he should. A normal man under these circumstances would honestly recognise the existence of the wish in him, though he would doubtless realise that for pious and ethical reasons it would obviously have to be suppressed; this would in most cases be an easy matter, for the ethical part of his personality to which the wish is unacceptable would evidently be stronger than the part corresponding to the wish. A neurotic, on the other hand, is more likely to react towards such an occurrence by not owning to himself that he ever had such a wish, even momentarily, and by striving to get away from such an unpleasant thought, to forget or repress it. Not acknowledging the presence of the group of mental processes in question, the subject pays the penalty of being no longer able to direct it. Such a group of mental processes, invested with a strong feeling tone, is technically called a 'complex.' The complex thus split off from the main body of the personality is now apt to evince an independent activity out of control of the will. This activity is of an automatic kind, and is usually unconscious, and so operates without the patient's being aware of it.

Under certain circumstances, when the repressed desire is so strong that the resulting conflict is intense, the activity of

the split-off complex may manifest itself in the form of what we clinically term a symptom. This is especially likely to happen when the desire is in some way or other associated with various complexes that have been split off in early childhood. It is brought about in the following way: The desire, in its efforts to obtrude itself upon the conscious thoughts, meets with an antagonistic force—namely, the endeavour of the personality to repress it. It cannot manifest itself in a direct form, but frequently does so in an indirect one the origin of which is not recognised by either the subject or the observer. An exact analogy to this process is in everyday life familiar to us all, when an unpleasant truth that cannot be openly expressed is allowed to reach expression if put in a veiled or disguised form. Thus Swift, in 'Gulliver's Travels,' and Samuel Butler, in 'Erewhon,' managed to say some very bitter things about their generation by the ruse of satirising some imaginary distant country they pretended to have discovered. Interestingly enough, the mechanisms adopted to evade the social censor are often of precisely the same nature as those made use of in the psychoneuroses to evade the personal censor. For instance, a sting of self-remorse, which arose in connection with a very real sin that the subject has succeeded in forgetting, may be experienced in connection with some quite venial or even imaginary offence; in other words, his conscience is pretending to make him suffer on account of some unimportant matter, whereas the real source lies hidden and is not mentioned.

Investigation by Freud's methods discloses the fact that every psychoneurotic symptom is a distorted expression of a repressed wish-complex. The wish itself on account of its unacceptable nature is buried in the unconscious, and the symptom arises as a compromise between it and various inhibitions of a more conscious order. The distortion in the manifestation of the activity of the repressed complex is often exceedingly involved, and the psychological mechanisms by means of which this is brought about are very intricate; these are different, moreover, in the different psychoneuroses. They have been worked out with great accuracy by Freud, and an exact knowledge of them is essential to the use of the psycho-analytic method. In the time at my disposal it would be quite impossible to describe them, though I shall presently try to illustrate one or two of them by the use of examples.

The principle on which the psycho-analytic method of

treatment is based has been indicated in the considerations just mentioned—namely, that the pathological condition to be dealt with is essentially due to the fact that certain mental complexes have been kept or made unconscious by the mechanism of repression. Now, experience has amply demonstrated that when this process is reversed, in other words when these complexes have again been made conscious and thus fused in the main body of personality, the abnormal manifestation, or symptom, ceases. A central aim of the psycho-analytic method, therefore, consists in enabling the patient to discover and appreciate the significance of the mental process that manifests itself as a symptom. The symptoms constitute a veiled language in which buried thoughts and desires find the only means allowed them of coming to expression. In retracing the steps along which the pathogenesis of the symptoms has proceeded we get the patient to translate his symptoms into more direct language, and thus to appreciate and understand the nature of them. By so doing we give the patient a deeper insight into the workings of his mind, so that he is enabled to free himself from internal inhibitions and impediments, and to attain a more objective standpoint towards the repressed complexes, the automatic functioning of which has produced the morbid manifestations. He can in this way release his personality from the constraining force of these complexes, and, in taking up an independent attitude towards them, gains a degree of self-control over his aberrant thoughts and wishes that was previously impossible.

We now come to the application of the method in actual practice. This has to be modified from case to case, according to the type of patient and other circumstances, but the following general description is one that has a wide validity. It is to be assumed, of course, that appropriate clinical examination has been made of the case, and its suitability to this mode of treatment decided on. One first gives the patient a short explanation of the method and purpose of the analysis, and in my experience the shorter this is the better, for patients rarely profit from what is said in this explanation until they come to understand it through actual experience. Emphasis, however, must be laid on what may be called the golden rule of psycho-analysis—namely, that in no circumstances is the patient ever to withhold from the physician any thought occurring to him. He will not keep this rule at first, whatever may be said

and however good his intentions, but it is well that he should at least be in no doubt as to its importance. He is then told to begin just wherever he will, and the physician does not guide his thoughts nor ask any questions except to elucidate a point referred to which he has not understood. There is the greatest variation amongst patients in their way of beginning the analysis, and much can be learnt from this alone. Some start with a general story of their life in general, others give a detailed account of their symptoms, some begin on impersonal topics, and many begin with the curious remark that they have nothing to tell the physician and nothing to talk about. What is said in the first hour is usually of quite special significance.

The main material for the actual analysis consists of what is known in psychology as 'free associations,' and is obtained by asking the patient to relate in the order of their appearance the various thoughts that spontaneously come to his mind. As he has to play a purely passive part during this stage, all mental and physical tension should so far as possible be relaxed. For this reason it is very desirable that the patient be in a recumbent posture, looking away from the physician, who sits behind out of sight. He must suspend his natural tendency to criticise and direct the inflowing thoughts, and here lies one of the greatest difficulties, which must be further considered. The repressing force which has caused the morbid condition present, by driving various memories into the unconscious, constantly exerts itself to keep these memories unconscious, and is now encountered by the physician in the form of what is called personal resistance. The obstinacy with which many patients seem instinctively to cling to their symptoms is generally recognised, though it is often wrongly interpreted as indicating mere wilful perverseness. The patient's resistance may manifest itself in a number of different ways, of which I can here mention only a few of those met with in the course of psycho-analysis. Thus instead of relating his thoughts as they occur to him, in the way he has been told, he will omit many on the ground that they are apparently irrelevant, unimportant, or nonsensical. If a patient relates a thought only after a long struggle with himself, and then excuses himself on the ground that it had nothing to do with the subject or was too unimportant to mention, one can be sure that in reality it is an important link in the chain that we are endeavouring to trace. The patient may omit other thoughts because they are



of a painful or unpleasant nature, but here again these are frequently of great import.

During the analysis much valuable information can be obtained by a trained observer from the study of various unconscious actions, slips of the tongue, symptomatic movements, etc., on the part of the patient. These frequently reveal the automatic functioning of some repressed train of thought.<sup>1</sup> A most important part of the analysis is the investigation of the patient's dreams by means of the special technique introduced by Freud.<sup>2</sup> The study of dreams is in this connection of supreme importance, for of all the means at our disposal it is the one that best enables us to penetrate into and understand the most hidden parts of the mind. No one can be competent adequately to use the psycho-analytic method who has not made a thorough study of Freud's *Traumdeutung*, and learned how to apply in practice the principles there laid down. Freud has shewn that dreams represent an imaginary realisation of various wishes that in daily life have undergone repression. In dreams all our hopes and wishes come true, and it sometimes happens, as Brill has pointed out, that the wish is so strong that later on the dream itself is made to come true, an event which is an interesting source of superstition. In most cases the gratification of the wish is so distorted in the dream that the subject is quite unaware of the significance of it. One can in many respects draw a close analogy between dreams and psychoneurotic symptoms.<sup>3</sup> They both represent the unconscious gratification of wishes that from their unacceptable nature have been repressed by the patient, both are distorted and unrecognisable manifestations of wishes that are struggling to find expression in an indirect form, with both the psychological mechanisms by which is brought about the distortion that allows them to evade the internal censor are often identical, and in both cases the actual wishes are frequently of precisely the same nature. The interpretation of a dream by psycho-analysis thus often gives the clue to the solution of a given set of symptoms, as Freud has cleverly shewn in his *Bruchstück einer Hysterie-Analyse*.<sup>4</sup>

While absorbing this material the analyst adopts a passive attitude similar to that of the patient. If his own mind is working freely—*i.e.*, if his own analysis has been satisfactorily

<sup>1</sup> See Chapter IV.

<sup>2</sup> See Chapter VIII.

<sup>3</sup> See Chapter XII.

<sup>4</sup> Reprinted in his 'Sammlung kleiner Schriften,' 2<sup>e</sup> Folge, 1909.

carried through—then automatically he will notice connections between different remarks which the patient has been blind to on account of his internal inhibitions. When these occur to the analyst's mind he has to decide whether it is a suitable moment to interrupt the patient and call his attention to the bearing of what he has said and to the relationship between various portions of the material. If the patient is able to assimilate what has been pointed out to him, the insight thus gained usually opens the way for fresh and still more important confirmatory material. Often, however, the patient refuses to accept the interpretation put on his remarks, even when this is quite evident to an unbiassed observer, and shews various signs of what was called above resistance. This resistance will be the obverse side of part of the inhibitions that have been keeping the pathogenic material unconscious, and a cardinal part of the analysis is the finding out and overcoming of the different resistances. It is more important for the physician to direct his attention to them than, as might naturally be imagined, to the symptoms or even to the repressed complexes themselves. If only the resistances can be overcome, one may be sure that the complexes will yield their content of themselves.

The most difficult and yet most important part of the analysis lies in dealing with the subject of transference, and there is nothing on which the success of an analysis more depends (from at least the analyst's side). By the term 'transference'<sup>1</sup> is meant the displacement on to the physician of various affects (feelings) that really belong to some other person. Throughout the analysis different traits in the analyst, or remarks made by him, keep unconsciously reminding the patient of other people, so that he becomes identified now with one person, now with another. Some of the feelings thus transferred are of a friendly nature, some are hostile. The patient will maintain that such feelings relate purely to the physician, and that they are legitimate reactions to his behaviour; but it is the physician's task to shew the patient that they have been only evoked by him, and that much of their strength depends on reinforcements from older sources. In other words, the patient is reacting not only to the physician, but also to some previous person, just as his neurosis throughout constitutes an excessive reaction to a current situation, the surplus being derived from an identification of the current situation with an older one.

<sup>1</sup> The theory of this subject is fully discussed in Chapter XVIII.

The analysis traces back the transference to its sources in earlier life, and thus revives long-forgotten or never appreciated reactions. The reason why this part of the analysis is the most important is because it is only through actually living the repressed emotions over again, and feeling them in the present in connection with an actual person, that the patient can attain full insight and conviction regarding the buried conflicts at the basis of the neurosis.

We may now shortly consider a few illustrative examples.<sup>1</sup> . . . A common form of obsessional neurosis is that in which the patient has an almost continuous impulsion to wash his hands. With this may be the obsession that the hands are soiled, contaminated or even infected, or the phobia that the hands may get contaminated or infected (one form of nosophobia). The morbid desire for cleanliness, called by the Germans the *Reinigungsneurose*, may extend so as to involve the whole body, or, in the case of women, the house as well, a not infrequent source of domestic discomfort. This symptom produces a lively impression of meaninglessness or even of foolishness, and is certainly hard to understand until one begins to analyse the nature and origin of it. A direct clue to the significance of it, as to that of many other neurotic symptoms, was given three hundred years ago by Shakspeare. He describes how Lady Macbeth has the 'accustomed action' of rubbing her hands together, as if washing them, for a quarter of an hour at a time, and, appropriately enough, the patient furnishes the key to the riddle by disclosing her secret thoughts in her sleep. 'What, will these hands ne'er be clean? . . . Here's the smell of the blood still: all the perfumes of Arabia will not sweeten this little hand.' This is a beautiful instance of how a symptom may come about through the person gratifying a wish connected with one subject, which is unpleasant, by transferring it to an indifferent one. Lady Macbeth imagines that she is washing away a stain from her conscience, whereas really she is only washing away a fictitious one from her hands. Shakspeare completes the picture by making the physician say, 'This disease is beyond my practice,' and until the epoch-making work of Freud, twenty years ago, no physician could but agree to the remark. The example in question also well illustrates a common objection raised to the explanations that psycho-analysis gives to many symptoms—namely, that they

<sup>1</sup> The actual cases described are not reproduced here.

seem so illogical. This is true, but it must be remembered that the mental processes that go to form such symptoms are themselves illogical. The mental processes of early childhood, of savages, and of the unconscious activities of civilised adults are of a low order, and do not follow the same rules of logic as do the waking conscious processes that we are accustomed to. It might be said of the present example: how could any one confound a concrete object such as a hand with an immaterial object such as a conscience? The two objects, however, have in common this important attribute, that both can receive stains which can be washed away, and to a person in whom the desire to wash away stains has attained a raging intensity all objects to which the desire can be applied seem of a kind. They are classed together, and unconsciously are often confounded with each other, or even fused in one. One might say that to such a person it becomes irrelevant *what* is washed clean of its stain so long as *something* is. It is the same in any acute emergency of life, when the desire to act in a given direction is so strong that the wildest, most illogical deeds are performed in order to satisfy that desire.

The mechanism above referred to is technically known as the transposition to one idea of the affect originally belonging to another. Perhaps as common is another mechanism in which transformation of the affect takes place into its opposite. Desire is particularly often in this way transformed into fear. The maiden who just before retiring looks under the bed to see if there is a man there very often most dreads what she most dreams of, and many phobias are similarly constituted, though rarely in so simple a manner.

It sometimes happens that a symptom, which has been removed by psycho-analysis, later returns. The explanation of this is as follows. When once a symptom has been created as the mode of outlet for a repressed wish, there is a great tendency for other, but allied, wishes to realise themselves in the same symptom. It is just like the rain streams on a hillside, which tend to make use of old channels, if only these are near enough, rather than to cut independent ones. In general it may be said that the greater is the duration of a given symptom the more likely is it that it subserves the function of gratifying more than one repressed mental train. Freud calls this occurrence the 'over-determining' of a symptom. Then the symptom may recur until we have dealt with all the under-

lying complexes. When this has been done the symptom will not recur. Further, a given repressed complex may be a factor in the causation of more than one symptom. This greatly complicates the analysis, but it is so usual that one may fairly describe the underlying pathogenic factors in an average case as constituting a continuously intertwined, and often very entangled, network. One compensation for the labour that the unravelling of this state of affairs involves is the fact that solution of one group of complexes sometimes agreeably rids the patient of more than the one symptom, and in any case it frequently gives a useful clue to the mechanism of other symptoms than the one with which it is most nearly connected.

As to the nature of the pathogenic factors two general remarks may be made—namely, that the complexes usually arise in infantile life, and that they are most often of a sexual character. These two remarks may seem rather to contradict each other, but that the sexual life of early childhood is far richer and more complex than is generally supposed is one of the matters that Freud has most illuminatingly demonstrated.<sup>1</sup> It would be difficult to overestimate the importance that the mental life of early childhood possesses for the determination of the future trends of the individual. Impressions and modes of reaction that seem to the adult trivial enough are often of great significance in forming the basis for much of later development. As regards the psychosexual processes it must be remembered that these constitute the most intimate, private, and hidden part of the personality—in a sense, we may say the very core—and further that they are the ones most injured, repressed, and distorted under the pressure of educative influences. It is little wonder then that they so frequently lie at the root of psychoneurotic disturbances.

Something should now be said about the clinical applicabilities and limitations of the method. The conditions that lend themselves to psycho-analytic treatment comprise practically all forms of what are commonly grouped under the name functional neuroses, hysteria, neurasthenia, obsessions, etc. Some of these conditions yield more readily to treatment than others, but it would be impossible to consider this point in detail without taking up the vexed question of classification

<sup>1</sup> See 'Drei Abhandlungen zur Sexualtheorie,' 2<sup>e</sup> Aufl., 1910. I have tried to expound a part of this subject in an article published in the *Amer. Journ. of Psychol.*, January, 1910. See also Chapter III.

and nomenclature.<sup>1</sup> The demands made on the patient are considerable, for the result of the treatment greatly depends on his sincerity and perseverance. Further, little can be done with unintelligent patients, with those who are brought against their will to be treated, or with those of a weak moral character. Again, age is a serious obstacle; after the age of fifty the plasticity of the mind is so frequently diminished, and the amount of material to be worked through is so great, that in most cases (though not in all) to undertake a psycho-analysis is impracticable. The most weighty drawback to the treatment, however, is the amount of time it consumes. Severe cases may exact daily treatment for as much as a couple of years, though useful results are frequently to be obtained in less time than this. In passing judgement on this question of the duration of the treatment one should bear in mind several considerations. In the first place that it should be impossible to carry out in a short time such a huge task as psycho-analysis often proves to be is surely comprehensible when one remembers that in all cases the roots of the trouble go back to early childhood, so that the material obtained representing the interwoven distortions of the succeeding years is often immense. The pace at which the analysis proceeds cannot be forced, any more than the inoculation treatment of tuberculosis can be hastened by increasing the dose of the tuberculin injected. The treatment is rarely a quite continuous one, for it often has to be interrupted by acute exacerbations of urgent symptoms, or by purely external circumstances over which the physician has no control. Again, although a long time may elapse before cure is effected, still relief of various symptoms can frequently be brought about at an early stage in the treatment, and during most of the procedure the patient is usually in a much better condition than he has previously been. The final answer, however, to any objection raised on the ground of the time taken, is that equal results cannot be achieved by any shorter method, so that here, as in many other spheres, the Irishism holds that 'the longest way round is the shortest cut home.' In the medical press several other objections have been raised to the treatment, but in such an irresponsible way that I shall not waste your time by discussing them. I can only say that I have yet to hear of a serious objection that would not immediately answer itself by being put to the test of a little first-hand experience.

<sup>1</sup> See Chapter XXI.

The amount of time demanded by the treatment, as well as other considerations, prevent it from being of very wide applicability in general practice. The using of it, like that of all special methods of treatment, involves the acquirement of a special technique, and perhaps of some capacities that every physician does not possess. Exactly the same remarks may be made about the surgical treatment of brain tumours or of gallstones, as well as of many other therapeutic measures, but this fact would surely lead no one to deny that such special methods of treatment have their legitimate place. The conclusion that, wherever possible, operation is the best treatment for a tumour of the brain is in no way invalidated by the fact that not every practitioner can carry out this treatment. I would maintain that every advance in treatment, of however special a kind, has its interest for the practising physician. Especially is this so in the case of psycho-analysis, for in the first place the conclusions reached by this mode of study and the knowledge gained as to the nature and causation of the psychoneuroses should be of the greatest practical value in enabling the profession to attain a more accurate point of view concerning them and of dealing prophylactically with the causative factors, and in the second place our capacity to relieve these conditions is at present notoriously unsatisfactory.

The results to be obtained by the treatment are unquestionably very gratifying. They surpass those obtained by simpler methods in two chief respects—namely, in permanence and in the prophylactic value they have for the future. Every one who has carefully observed such cases knows that, though the symptoms may in various ways be temporarily removed, the tendency to recurrence of the same symptoms and to the appearance of fresh ones is very great. It is only when the actual morbid agents are dealt with that the cure becomes permanent. No better criticism could be offered of past methods of treating the psychoneuroses than by merely recalling the undeniable fact that they may all fail in cases which yield to the successful efforts of any of the numerous varieties of charlatanry that prey on society in general and the medical profession in particular. Psycho-analysis, by giving the patient control over the disharmonies of his mind, leads him to develop a greater measure of self-reliance and independence. The training he receives is thus an educative one in the highest sense of the word, for he not only achieves a richer develop-

ment of will-power and self-mastery, but acquires an understanding of his own mind which is of incalculable value for future prophylaxis. It is a matter of congratulation for our patients, for society, and for ourselves that we at last have in our hands a precise and formidable weapon to deal with the very maladies that up till now have been the despair of the profession and the triumph of the quack.



CHAPTER XV  
SOME PRACTICAL ASPECTS OF THE PSYCHO-  
ANALYTIC TREATMENT<sup>1</sup>

I TAKE this opportunity of discussing shortly a few of the practical points that arise in connection with psycho-analysis, and shall divide my remarks under the headings of the Treatment, the Case, the Patient, and the Physician respectively; some general knowledge of the subject will be assumed.

*The Treatment.*—The length of time necessary for the treatment is often urged as an objection to its applicability, and may certainly be a matter of practical difficulty. One of the patient's first questions when a course of treatment is proposed to him very naturally is, How long will it take? It is often an embarrassing one to answer, and for the following reason: The duration depends not only on the nature and severity of the neurotic condition, which can usually be estimated in one or two interviews, but also, and to a still greater extent, on the type of personality we have before us. It is not so much a question here of the variation in intelligence, self-insight, determination, and other character traits, that occurs among different patients, important as these are, as it is of the mental attitude towards recovery. This attitude is one that sharply distinguishes psychoneurotic disorders from all others. In the latter, one assumes, usually with right, that the patient wholeheartedly desires to get better, and this is often a factor of no mean importance in the fight; but with any neurosis one may predicate with certainty that only a part of the patient's mind is set on recovery, the conscious part that leads him to seek help, whereas another equally significant part is just as set on remaining in the neurotic condition, and that in spite of all

<sup>1</sup> Paper read in Proxy before the Tenth Australasian Medical Congress, at Auckland, February 13, 1914.

the obvious disadvantages of this.<sup>1</sup> It matters not at all how much the patient may protest his eagerness to get well at all costs; one knows definitely from the very fact of his suffering from a neurosis that he is in a state of internal conflict, that one part of his mind is warring against another, and that his condition is the result of this. A neurosis essentially means that the patient is unconsciously clinging to various infantile pleasurable longings and phantasies, long since buried through the 'repression' of inhibiting forces and hence quite unknown to the patient, and that his symptoms, an expression of this conflict, constitute a compromise-formation by means of which he vicariously obtains an indirect, symbolical gratification of these; this is the ultimate basis of any psychoneurosis, though of course other, later factors are also concerned, the more current conflicts between the patient and his actual situation in life that are more generally observed by himself and the physician. It follows from this consideration that recovery from a neurosis always involves an element of renunciation on the part of the patient; he has to learn to turn his interest away from the world of phantasy, however pleasurable this may be in his unconscious, and devote it rather to the external world of affairs. Renunciation is never one of mankind's easiest feats, and we note a considerable variation among patients in this respect. It is less difficult of accomplishment when the phantasies in question lie mainly in the past; when the shirking of a current difficulty has been an important contributory factor in the patient's withdrawal into himself, then the task is harder.

The estimation of this important personal factor needs time, so that one can never say beforehand exactly how long a given treatment may last. In these circumstances the only thing to do is to fall back on one's general experience and state the matter in average terms. I find that my average length of treatment is about a year, the shortest being six months, while a few cases even require two or three years. Those who are familiar with the immense amount of work involved in such a treatment, and the revolution that is effected in the patient's mind, will appreciate why such a long period is necessary, especially when the long duration of the symptoms in most cases is also taken into account. Efforts have been made to

<sup>1</sup> See a discussion of this in pp. 338-361, in the section on 'The Treatment of the Neuroses,' in Jelliffe and White's 'Treatment of Nervous and Mental Diseases,' 1913, vol. 1.

shorten the time, but with a more than negative result, for refinements in technique have only brought about a higher standard as regards what we may properly term a cure, and it has also been perceived that the mere passage of time is in itself a mechanical element that is indispensable to the workings of the treatment. The only practical aid that I know of is the plan of getting the patient to attend for two hours a day, either consecutive or not, instead of the usual one. This I have adopted in a number of cases with advantage; it is, however, inapplicable with very emotional patients.

*The Case.*—It may be said that, with relatively few exceptions, all cases of psychoneurosis are suitable for the treatment; the contra-indications are sufficiently well known,<sup>1</sup> so that I need not enumerate them here. The treatment has been extended on to the field of the psychoses, but naturally with less favourable results; although *symptomatic* improvement may in this way be obtained in certain selected cases of dementia præcox, particularly the catatonic variety, the psychosis that is most promising in this respect is manic-depressive insanity, especially the cyclothymic type, and here some highly gratifying results have been achieved. Apart from the psychoneuroses proper, one finds in practice that patients come for such apparently non-medical conditions as failure to devote interest to their work, marital or family friction, and various other forms of dissatisfaction with the immediate environment or with life in general, and one is often able to help such patients to a quite surprising extent. Sexual inversion and the perversions are also in general amenable to the treatment, as are alcoholism and other drug habits; but here more even than with the psychoneuroses the prognosis depends mainly on the patient's real desire to be cured; if, for instance, a homosexual regards his condition as perfectly intelligible and natural, as is often the case, but expresses a mild wish to have it changed on account of its practical inconveniences, legal and otherwise, the chances of success are much fewer than with a patient who has a strong abhorrence of what he considers as an unnatural but incontrollable impulse.

The superiority of the psycho-analytic treatment does not manifest itself in the same manner with these different conditions. With hysteria, for instance, where showy results are often to be obtained by other methods, it is not always at first

<sup>1</sup> See p. 291.

sight very striking. As I have pointed out elsewhere,<sup>1</sup> the essential factor in all other methods is suggestion, so that the contrast between suggestion and psycho-analysis, which strongly repudiates this, sums up the whole of psychotherapy. The advantage of the latter method resides in the greater thoroughness and permanence of the results, and in its prophylactic value for the future, the reason being that it deals not only with the symptoms present at a given date, but with the whole of the repressed mental material that is the basis of all neurotic manifestations, present or future; one does not, therefore, see what is so common with the suggestion treatment, the subsidence of one group of symptoms, followed at some future date by either a recurrence of these or by an outcrop of a fresh series. With the obsessional neurosis, the doubts, impulses, obsessions, and 'manias' that are sometimes included under the name psychasthenia, the psycho-analytic treatment evinces its superiority over the others in a still more marked manner, for these conditions are only slightly susceptible to suggestion. Indeed, the obsessional neurosis, being obviously a purely mental condition, is eminently suitable for the psycho-analytic procedure, and the results obtained would be even more brilliant were it not for the fact that so many patients, not realising the medico-pathological nature of their condition, do not consult a physician at all until an advanced stage. The various anxiety states also constitute a promising field, especially where the morbid anxiety has become elaborated into a complex phobia of a definite object or idea. Of the other conditions I have already spoken, and we may sum up by saying that, although the outlook is not equally good in all cases, it is always better if psycho-analysis is resorted to than if any other method is.

*The Patient.*—It is evident that in proposing a course of psycho-analysis to any patient one is demanding from him a serious sacrifice. Not only is the question of time, which we have discussed above, an important consideration, but an attitude of patience and determination is required, and all other business of life has to be made subservient for the time to the treatment itself—for example, in the matter of keeping appointments; further, the cost, though very much lower relatively than in any other field of remedial therapeutics—for instance, surgery—may amount in the course of time to an

<sup>1</sup> See Chapter XVIII.

appreciable outlay. It is well at the very start not to underestimate these considerations, but to make the patient see that the treatment is a serious undertaking, not one to be lightly entered upon; this is not only the obviously honest course to take, but one that has the further advantage of avoiding later disappointment to both the patient and the physician through the former coming to realise that the treatment was a bigger undertaking than he had counted on.

On the other side have to be reckoned the penalties of a chronic neurosis—for one can never foretell when an apparently mild one, if untreated, may not be the forerunner of a more severe form—where the patient's capacity for performing his duties in life and of earning a living is seriously diminished, and where he is doomed to numberless rest-cures, holidays, and health-voyages, not to mention the suffering entailed both on himself and on those around him. On the whole, therefore, the treatment will be found to be a sound investment from the patient's point of view, and the gain in many cases one that no sacrifice is too great for.

*The Physician.*—The qualifications needed for psycho-analytic practice are a sound knowledge of neurology and psychiatry, especially on the diagnostic side, and a sympathetic interest in practical psychology, with the patience, objectivity, and tact that go with this; indeed, no other motive than the latter is likely to lead any one to take up the work, where the main rewards are the intrinsic interest of it and the satisfaction of being able to alleviate such distressing suffering as is involved in mental disturbance. The methods of acquiring a suitable knowledge of the work are, of course, the same as those applying elsewhere in science, with, however, one exception that will presently be noted. The three routes thus are: a familiarity, through reading, with the work of others; endeavours, at first necessarily tentative and experimental, to apply the method in practice; and, most important of all, personal study with some one who has an adequate experience and knowledge of the subject. The last-mentioned point is worth insisting on, for, on the one hand, the correct technique consists of such a mass of detail that it is almost impossible to include it all in any description, and, on the other, the range of the subject is so extensive that the learner finds he is constantly wanting to put questions and receive enlightenment on points that may not have been adequately dealt with in the literature accessible

to him. These considerations render personal contact with a teacher a wellnigh indispensable preliminary to acquiring a suitable knowledge of the subject, and it will then be found that conclusions which may seem improbable and difficult to comprehend in the condensed form in which they are often presented in writing are usually susceptible of being cleared up by a personal explanation.

It was hinted above that acquiring the psycho-analytic method differs in one respect from the acquiring of any other scientific method. This difference is due to the fact that in the present case the acquiring instrument—namely, the mind—is itself the object of study. The subject of psycho-analysis deals mainly with the internal friction and conflicts of the mind, and it is held that no mind, however 'normal,' has escaped these. The result is that unless one is able to face freely the buried conflicts in one's own mind—in other words, to have a considerable understanding of oneself—one will continually be the victim of a distorted judgement in the case of others, not seeing tendencies in them that one does not wish to see in oneself, laying too much stress on others for subjective reasons, and so on. On this account it is strongly urged that any one taking up the practice of psycho-analysis should himself be submitted to an analysis under the same conditions as a patient, and I can cordially endorse this advice from personal experience. The gain achieved is not only that one attains a freer working of one's own mind, with consequently a much greater objectivity towards the mental workings of other people, but also that in this way one learns to appreciate more fully than in any other the difficulties and various reactions experienced by patients.

In conclusion, it will be seen that the sacrifices demanded by psycho-analysis are very considerable, in the case both of the patient and of the physician, but in the opinion of those competent to judge there can be no question but that the results obtained, which are as brilliant as anything modern medicine can shew, more than compensate for them.

## CHAPTER XVI

### THE THERAPEUTIC EFFECT OF PSYCHO-ANALYSIS<sup>1</sup>

OF all the problems relating to psycho-analysis the one that perhaps most forcibly arrests the student's attention is the question as to how it produces its remarkable therapeutic results. As is well known, the treatment essentially consists in resuscitating the patient's past memories, and thus making him aware of his buried and unconscious processes; when these are laid bare the roots of the symptoms become manifest, and the nature, structure, and meaning of them are plain to both the physician and patient. Any one hearing of the treatment for the first time almost invariably asks at this point what is done next after the patient is made aware of his buried mental processes, and, on being told that nothing more is done, is naturally puzzled to understand wherein lies the value of the procedure. Some writers, for instance Sidis,<sup>2</sup> burke the difficulty by simply denying that it has any therapeutic effect whatever, a position which displays a strikingly ostrich-like attitude towards the blunt fact that the recorded results achieved by psycho-analysis far surpass those to be obtained in any other way. It must, it is true, be conceded that the psycho-analytic method so much resembles a measure carried out for purposes of diagnosis rather than one carried out for that of treatment that it is quite comprehensible how a medically trained mind should at first experience difficulty in discerning its therapeutic bearings. Indeed, it is impossible properly to appreciate these without having at least some knowledge of the essential differences between conscious and unconscious mental functioning. Consideration of this will be postponed until some other preliminary matters have been dealt with.

<sup>1</sup> Read before the Detroit Society of Neurology and Psychiatry, December 7, 1911. Published in the *Review of Neurology and Psychiatry*, February, 1912.

<sup>2</sup> Sidis, *Journ. Abnorm. Psychol.*, June, 1909, vol. iv., pp. 154, 161.

Several different explanations have been put forward of the therapeutic results obtained by psycho-analysis, but they all fall fairly well into the three following groups:

(1) The usual view held by opponents of psycho-analysis is that the results are due to the *suggestive influence of the physician*. There are several insuperable objections to this solution of the problem, of which I will here indicate only one. Psycho-analysis is the only method of treatment of the neuroses in which the suggestive influence of the physician is expressly resolved into its constituent elements, and its effects destroyed. It would now be too curious if the only method in which suggestion is systematically neutralised should be just the one to give far more brilliant results than the methods in which suggestion is deliberately cultivated and employed to the fullest extent of its power; I fear that psycho-analysts must decline the very flattering assumption that their persuasive influence is, in spite of their best endeavours to minimise it, so much greater than that of the professional exponents of suggestion, hypnotism, and 'pithiatism.'

In accord with the shallowness of this explanation stands the fact that it is proffered by writers who are not only entirely unaware of the nature of psycho-analysis, but who are also, interestingly enough, equally unaware of the nature of suggestion. A crass illustration of the truth of the former statement is afforded by an article of Scott's,<sup>1</sup> Professor of Psychology in Chicago, in which he seeks to demonstrate, on the basis of a personal experience, that psycho-analysis operates only through suggestion. He details the experience in question as follows: 'The patient was told that she had been guilty of sexual irregularities, that she had had sexual experiences which had undermined her health, and that her perfect cure was delayed by the fact that they had never been confessed.' The patient, in a very natural state of distress, narrated some memories (not detailed by the author), which were, of course, quite conscious and therefore in any case of relatively little pathogenic import. 'At the conclusion of her confession she fell back into a condition of relief, which was the condition needed for the most perfect possible working of suggestion. . . . As an antidote to the re-hashing of all this sexual filth the patient was hypnotised and total amnesia was suggested for all the ideas which had had a casual (? causal) part in the history of the disease.' It is not

<sup>1</sup> Scott, *Journ. Abnorm. Psychol.*, vol. iii., pp. 375, 376.



in my power to imagine a more grotesque caricature of psycho-analysis, nor a course of conduct more at variance with the procedure, ethical attitude, and therapeutic aims of psychoanalysts; it would be hard to believe that the account was published by any one occupying a responsible scientific position were it not easily to be duplicated by similar publications of some other German and American writers.

As to the true nature of suggestion, I have gone into this matter so fully on a previous occasion<sup>1</sup> that I may confine myself here to the briefest possible summary of the conclusions there reached. In agreement with Freud<sup>2</sup> and Ferenczi<sup>3</sup> I have pointed out that the action of suggestion in therapeutics is based upon the transference on to the idea of the physician of a number of positive affects that have arisen in earlier emotional experiences in the patient's life. The process is in no sense the mysterious and isolated phenomenon it is commonly supposed to be, but is merely a special instance of the general tendency of neurotics, and to a less extent of normal people, to transfer on to their environment various morbid affects (excessive hate, love, fear, and so on) that are disproportionate in intensity to the present exciting cause, and which owe their continued life and activity to the fact that they have not been released from their fixation to the original causative factors. Therapeutic suggestion owes its potency to the capacity it has in favourable cases of withdrawing the pent-up affects that are finding an indirect outlet in neurotic symptoms, and allowing them to become affiliated to the idea of the physician. This signifies merely a replacement of the symptoms by an unfortunate kind of dependence on the physician. In some cases the patient may subsequently disengage himself from the latter, and successfully apply his affective tendencies to social uses; this process is known as 'sublimation,' more suitable channels being found for the disturbing tendencies, and is the one by which also the spontaneous cures occasionally seen are brought about. In only too many instances, however, especially of the more severe forms of neurosis, withdrawal of the physician's influence—*i.e.*, of the opportunity for satis-

<sup>1</sup> Chapter XVIII.

<sup>2</sup> Freud, 'Drei Abhandlungen zur Sexualtheorie,' 2<sup>e</sup> Aufl., 1910, S. 15.

<sup>3</sup> Ferenczi, 'Introjektion und Uebertragung,' *Jahrbuch der Psychoanalyse*, Bd. 1, S. 422. Reprinted as chapter ii. of his *Contributions to Psycho-Analysis*, Engl. Transl. by Ernest Jones.

factory application of the morbid affects—is sooner or later followed either by a relapse to the original condition or by the creation of a fresh series of symptoms. In the sense that Nature abhors a vacuum, the neurotic affects are obliged to have some ideational point of attachment, whether this be a psychogenetic symptom, the thought of a given physician, or some useful social activity. When successful, suggestion, by offering a convenient alternative, temporarily displaces the abnormal affects from the point of support they had formed for themselves, but to which they tend to return as soon as the alternative one is taken away; while, on the other hand, so long as the infantile fixations that are responsible for the very existence of the abnormal affects remain effective, any attempt to discharge these in a social direction usually meets with only a limited amount of success. Psycho-analysis, on the contrary, in releasing the affects from their infantile fixations, not only places them at the disposal of social activities but at the same time robs them of their excessive intensity and other pathological features. Freud<sup>1</sup> emphasises the direct contrast that exists between the aims of suggestion and of psycho-analysis by alluding to the contrast drawn by Leonardo da Vinci between the art of painting, where the work is accomplished 'per via di porre,' and that of sculpture, where it is accomplished 'per via di levare.' The former method of treatment acts by putting on something, by adding the force of suggestion in opposition to that of the neurosis, while the other method acts by taking something away—namely, the power that the pathogenic mental processes have over the patient's consciousness.

(2) A second explanation of the therapeutic action of psycho-analysis is based on what may be called the principle of *re-association*. This has been most clearly expounded by Morton Prince,<sup>2</sup> so that we may take his account of it as a text for our discussion. At the outset it may be said that a psycho-analyst would, with slight modifications, accept Prince's explanation as being in the main a correct description of the way in which the treatment produces its effects; the chief criticism that would have to be passed on it is that it is incomplete. It diverges from the psycho-analytical explanation less than Prince himself appears to think. He writes as

<sup>1</sup> Freud, 'Sammlung kleiner Schriften zur Neurosenlehre,' 1906, S. 208.

<sup>2</sup> Morton Prince, *Journ. of Abnorm. Psychol.*, vol. iv., p. 96.

follows: 'That this method is often useful and efficacious will be admitted, but its mode of working, as I interpret it, is not that which those who employ it suppose. . . . It is worth while insisting that if psycho-analysis merely synthesises the repressed ideas theoretically it is not the logical method to be employed. The assumed mechanism would require something more. The repressed ideas are pushed into the subconscious because they are in conflict with other wishes and feelings of the individual; the latter rebels against and will not tolerate them. Now if nothing more were done than to bring them back into the consciousness of the individual he still would not tolerate them, and would push them out again. Theoretically, therefore, the method would be useless. But in fact the patient does, we will say, tolerate the ideas that before were unbearable; the conflict ceases. Empirically the method works. Why? The reason is simple: the complex of ideas has been changed by the technique of psycho-analysis and by the very act of bringing to the light of consciousness the repressed ideas—an elaborate process. We do more than this: we give the patient an insight into the meaning of his trouble; we let him see new points of view; we introduce new ideas and feelings into his complexes; in short, re-educate him. It is impossible to practise psycho-analysis without doing this; hence it is nothing more than a special form of the educational treatment and has the same educational value.'

Prince is not, as he appears to think, in disaccord with the psycho-analytical school when he insists that the re-introduction into consciousness of a previously forgotten group of ideas is followed by profound changes in the associations and significance of these ideas, changes that are of the utmost importance from the point of view of therapeutics; on the contrary, it is with the aim of making such changes possible that the psycho-analyst seeks to revive the forgotten memories. As, however, they are for the most part automatically carried out by the patient's consciousness, while the part played by the physician is largely confined to the task of rendering the patient aware of his buried tendencies, one is justified in describing the latter procedure as the essential part of the treatment; it is at all events the only indispensable measure.

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This specious argument, however plausible it may sound, is merely an ingenious piece of special pleading, and arises from a misunderstanding of some very essential considerations. Prince misinterprets Freud's theory of dissociation as being one of 'voluntary repression; the individual pushes out of his consciousness ideas which are painful and unacceptable.'<sup>1</sup> While it is possible, and indeed probable, that this process may sometimes take place, the theory of repression is concerned rather with the inhibiting forces (endopsychic censor) that *prevent* certain thoughts from ever becoming conscious; they are in their nature, as Freud terms it, *bewusstseinsunfähig*. The most important of the pathogenic thoughts with which we have to deal, certainly most of those that have arisen after the age of early childhood, have never been conscious in the usual sense of the word, and even those of which the patient has once been aware have only been temporarily present in the margin of consciousness, a very different state from that which is meant when we speak of his having been fully conscious of them. Further, Prince completely overlooks here the ontogenetic aspects of the thoughts in question. It is surely obvious that a given group of ideas may have been unacceptable at one period of a person's life, to such an extent as to make it unendurable for him to think of them, and yet need not be so at another period; every physician knows, for example, how much easier it is to obtain from a patient a history of an old delinquency than of a recent one. This is just the state of affairs with the psychoneuroses, for the repressed wishes at the basis of the symptoms usually lie in the far past, and yet the patient may be quite unable to become aware of them without the aid of an external analytic procedure. Of such significance is this historical element that one of the chief matters on which the prognosis of a given case depends is whether the causative unconscious conflicts mainly relate to the infantile period or whether there also are important current conflicts superimposed on these older ones; in the former case the prognosis is very much better, for the reason just indicated. The other modifications and expansions necessary to make Prince's explanation complete will be best considered in connection with that given by psycho-analysts themselves.

(3) The third explanation, which differs from the preceding ones in that it is proffered by those who have had personal

<sup>1</sup> Prince, *loc. cit.*

experience of the subject, is that the therapeutic effect of psycho-analysis is in the main to be attributed to the *overcoming of resistances* that constitute the most important factor in the pathogeny of the neurosis. So much weight is attached by Freud to this that in a recent paper<sup>1</sup> he describes as the chief aim of his therapeutic endeavour not, as formerly, the bringing to light of pathogenic complexes, but the direct investigation and surmounting of the inner resistances. The significance of this measure will be more clearly seen after we have discussed what is connoted by a translation of the complexes from a state of unconsciousness to one of consciousness.

An unconscious complex has certain characteristics that distinguish it from any group of ideas in consciousness. Perhaps the most obvious of these is that it is not subject to the direct influence of various conscious mental processes, ratiocination, deliberation, logical argument, ethical and social considerations, and so on. Unconscious wishes are absolutely egocentric and shew a cynical disregard for the welfare of even those who stand nearest to one. This is part of the infantile inheritance of the unconscious, self-centrement and lack of social qualities being well-recognised attributes of early childhood life. An unconscious phantasy will destroy a town with fire merely to gratify the individual's desire to pose as a hero, just as a child will in his mind condemn a playfellow to death merely so as to get possession of his toys. An allied aspect of unconscious complexes is their autonomous functioning. It is true that they form widespread associations, but they do this only along the directions of their own interest; ideas that contradict or oppose their own conative tendencies are simply ignored as though they did not exist. One cannot exaggerate the extent to which the 'water-tight compartment' principle obtains in unconscious mental life. Just as a child may at one and the same time hold two absolutely and mutually exclusive explanations of a given problem, so in the adult unconscious a wish that a certain person might die may remain operative—*i.e.*, producing external manifestations—long after the actual death of the person in question; this latter example also illustrates the extraordinary fact that so far as the unconscious is concerned time positively does not exist.

Another way of describing the last-mentioned characteristic is by saying that in unconscious complexes there is an inherent

<sup>1</sup> Freud, *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 3.

tendency to dissociation. With this goes a feature of the highest significance for neurosis-formation—namely, a heaping up of the accompanying affects. It may be stated as a general rule that the more conscious is the source of a given affect the sooner and more certainly will this become diffused throughout the person's mind, a process known as discharge of the affect. Two of the consequences that follow this diffusion are that the affect becomes more subordinated to the control of the conscious ego, and that it loses any morbid attributes it may have had, particularly the tendency to be displayed to an excessive degree or on inadequate grounds. Let us take the example of grief at the death of a loved being. Normally this should in time fade, sooner or later according to its original intensity, and may then exert relatively little influence on the subject's daily life. If, on the contrary, the years go by and the grief retains its original acuteness, and if it is displayed on quite minor occasions which in some way remind the subject of his loss, then one can be sure that there are other forces at work than those recognised by the subject, and that the idea of the death of the loved being has become intimately associated with some unconscious and repressed complex. I have recently recorded an example of this very sort.<sup>1</sup> It concerned a young lady who, years after the death of her mother, was obsessed by the thought of it to such an extent that she was totally prevented from applying herself to any of the ordinary daily duties of life. Analysis shewed that the event had corresponded with a secret wish long cherished in her unconscious, and that it had occurred under such circumstances as to evoke her latent feeling of guilt by giving her the obsessive (and unconsciously justified) idea that she was responsible for her mother's death.

Translation of an unconscious complex into consciousness is followed by the consequences just indicated. The complex becomes accessible to the influence of numerous conscious considerations bearing on it, but with which it has previously been out of contact. This is what Prince well describes as giving the patient an insight into the meaning of his trouble, letting him see new points of view, and introducing new ideas and feelings into his complexes. The simple fact to grasp here is that consciousness can deal with and control a mental process that is conscious far better than one that is not. The fear is sometimes expressed that the making of a patient aware

<sup>1</sup> Chapter IX., p. 225.

of an undesirable—*e.g.*, criminal—tendency in himself that he previously did not know the existence of may be followed by unfortunate consequences, such as his giving way to the tendency. This fear, the unjustifiability of which is amply rebutted by experience, denotes a very incomplete understanding of the relations of conscious to unconscious mental processes; if the ethical and other inhibitions have proved so powerful that they have prevented the patient from even being aware of the idea of his tendency they will certainly later on be strong enough to check any impulse to follow the tendency if it is one that is contrary to the present ethical views of the patient. A second consequence of the translation is that illogical displacements of the affects are resolved through the latter being traced to their original source. This is most clearly seen in the case of the various phobias. A woman whose original fear was that of not feeling safe (from temptation) when out alone, suffers from the inability to leave the house except in the company of her husband or some other safe person; going out alone would bring on an uncontrollable fear that some unknown terrible thing might happen to her. A third consequence is that the affect becomes diffused over the whole mind in the normal way described above. It becomes worked off in various adequate and suitable ways, a process which in connection with very massive affects is known as 'abreaction.'

All this may be summarised in the sentence that, while an unconscious complex is necessarily in a state of dissociation, translation of it into consciousness signifies its *assimilation*. Under this term is included the conscious dealing with and absorption of the previously repressed thoughts, or rather wishes, together with the abreaction, analysis, and consequent diffusion of the accompanying affects. To secure this assimilation in consciousness is, from one point of view, the central aim of the treatment, and the reason why so much attention has to be paid to the resistances is that these constitute the main hindrance to the assimilation.

It will at once be seen that what has to be striven for is a very different thing from merely getting the patient to know what is the cause of his troubles. To know about them means very little in itself; to realise this knowledge through personal experience is a quite different matter. To tell a patient bluntly who is suffering from agoraphobia that the symptom is usually due to infantile urethral-erotism, however true this may be,

does him about as much good as advising him not to be afraid of open spaces; in both cases the only effect would be to make him feel worse, though for different reasons. In a short, but very instructive article,<sup>1</sup> Freud makes some highly apposite remarks on this point: 'Nicht das Nichtwissen an sich ist das pathogene Moment, sondern die Begründung des Nichtwissens in *inneren Widerständen*, welche das Nichtwissen zuerst hervorgerufen haben und es jetzt noch unterhalten. In der Bekämpfung dieser Widerstände liegt die Aufgabe der Therapie. . . . Wäre das Wissen des Unbewussten für den Kranken so wichtig wie der in der Psychoanalyse Unerfahrene glaubt, so müsste es zur Heilung hinreichen, wenn der Kranke Vorlesungen anhört oder Bücher liest. Diese Massnahmen haben aber ebensoviel Einfluss auf die nervöse Leidenssymptome wie die Verteilung von Menukarten zur Zeit einer Hungerfrist auf den Hunger.' ('It is not the not-knowing in itself that is the pathogenic factor, but the foundation of the not-knowing in *internal resistances*, which first brought about the not-knowing and which still maintains it at present. In the subduing of these resistances lies the therapeutic task. . . . If the knowing about his unconscious thoughts were as important for the patient as those who are inexperienced in psycho-analysis believe, then for a cure it should be sufficient for the patient to listen to lectures or read books. These measures, however, have just as much influence on the nervous sufferings as the distribution of menu-cards in a time of famine has upon hunger.')

These remarks of Freud's illustrate a common mistake made by beginners in psycho-analysis—namely, the opinion that their task is completed when they have discovered the meaning of the symptoms and communicated it to the patient; in reality this is a relatively early stage in the treatment, for with increasing experience one is often able to divine the chief meaning of the symptom in a short space of time. The following example will perhaps make this point clearer: A young man suffered from a number of obsessions, of which one was to the effect that if he were to touch a light his father would die; in consequence he scrupulously avoided the proximity of any flame, and this naturally led to the formation of extensive phobias and inhibitions. He had as a child been severely punished for playing with matches and fire. The idea of

<sup>1</sup> Freud, 'Ueber "wilde" Psychoanalyse,' *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 94.



touching a light—*i.e.*, of doing something forbidden by his father—reminded him of a moth playing around a flame, and his next remark was that this expression (of the moth and the flame) was commonly used in his circle to denote a man's paying improper attention to women. Owing to his father's strictness he had never had the opportunity of taking any steps in this direction. The sense of the obsession is plain, as indeed it would be to any one with experience even apart from the foregoing associations provided by the patient. It had been produced through the mechanism of reversal so common in this disease, and the unconscious thought it expressed would run, not 'If I were to play with a flame my father would die,' a thought that has no sense, but, 'If my father were to die I could play with a flame,' where the repressed wish is evident. Now consider the effect of communicating this inference to the patient as an isolated piece of information. In the very unlikely event of his accepting the physician's explanation, he would be totally at a loss to comprehend how he could come to entertain such an unnatural and abhorrent wish concerning his own father, whom he revered and was very fond of. In the circumstances it would be well-nigh physically impossible for him to believe what might be a perfectly correct inference, and which in the case in question proved to be. It was only the detailed reviving of infantile jealousies, of the different conception of death he had held in early childhood, and many other matters that cannot here be gone into, that enabled him ultimately not only to know that he actually had entertained the wish in question, but fully to realise the precise steps by which this had come about.

Internal resistances have the double effect of, on the one hand, preventing the patient from becoming aware of certain unacceptable thoughts, and on the other of preventing him from seeing the undesired significance of various ideas he cannot avoid the knowledge of. He thus becomes in a double sense psychically blind, and the treatment can from one point of view be described as enabling him to see matters that are plain enough to an objective observer, but which his own inhibitions prevent him from recognising. The following is a simple instance of this:<sup>1</sup> A patient narrated to me on different occasions a series of facts that made it absolutely obvious

<sup>1</sup> The full analysis of the case is detailed in the *Jahrbuch der Psychoanalyse*, Bd. iv.

that his mother had not only repeatedly committed adultery, but had for years led an openly irregular life. The patient had lived with her until the time of her death, which took place when he was about seventeen, but, in spite of the staring significance of the facts he detailed, he was quite unaware of the inference that inevitably followed from them. Now, the symptom he suffered from was the curious obsession that there were all sorts of things in daily life that other people could see, but which he could not. The individual ideas, which of course were specially determined by his unconscious complexes, were such things as these: certain people had horns on their head, which were plain enough to other people, and which only he couldn't see; people had three legs, and only he couldn't see them, and so on. The symptom was simply an expression of his unconscious recognition of the fact that there was something of the highest significance in his life that all the world could see except himself; if he could overlook this, surely he must be overlooking all sorts of less important things that every one else could see. It should be added that his intense striving against wanting to recognise the truth about his mother had far deeper grounds than the natural one of filial piety, though this of course was an important contributory factor.

To repeat the main thesis of this paper: Psycho-analysis effects its cures by making the patient aware of the unconscious complexes that lie at the basis of his symptoms, thus enabling the pathogenic agents to become assimilated in consciousness. It achieves this by discovering and surmounting the internal resistances that are the cause of the repression, and which constitute the obstruction preventing the patient from becoming aware of and assimilating the pathogenic mental processes. As, further, it does not confine itself to the unconscious complexes immediately connected with the symptoms, but deals equally with the whole of the repressed material in the patient's mind, its action extends beyond the field of purely medical indications and gives the patient an inner control and self-insight that is not only the best guarantee against any tendency there may be to relapse into a neurotic state, but also the soundest basis for the general guidance of his life in the future.

## CHAPTER XVII

### THE ATTITUDE OF THE PSYCHO-ANALYTIC PHYSICIAN TOWARDS CURRENT CONFLICTS<sup>1</sup>

THE attitude of the psycho-analytic physician towards the question of the current conflicts and difficulties in the patient's life is not only one of the most important matters in the treatment, but is also one of the points in which the psycho-analytic method most sharply diverges from other psychotherapeutic methods. It is therefore essential for us to come to as clear an understanding as possible on the subject. In a recent monograph on the treatment of the neuroses I have graded the various methods according to the measure in which the cure is allowed to depend on the patient's own activity. As will be recognised, the psycho-analytic method stands at the extreme end of this series, since the essential process of recovery is accomplished in the patient's internal psychic life, while the physician contents himself with watching over the evolution of the analysis, instead of, as in other methods, endeavouring to play the part of guide and teacher. In place of leading the patient in a previously determined direction, the analyst accompanies him in his progress, the direction of which is entirely determined by the patient's own mental activity, and principally by the workings of his unconscious self.

In every analysis one comes across various difficulties that confront the patient in actual life, such as disappointments, sorrows, unhappinesses, anxieties, problems, dilemmas, and the like. All these may be included under the general title 'current conflicts,' which in my opinion is preferable to the expression used by Jung—viz., 'tasks,' with the tendency this has to bring with it a moral judgement, from which we have of course to

<sup>1</sup> Read before the Fourth International Psycho-Analytical Congress, at Munich, September 8, 1913. Published in the *Internat. Zeitschr. f. ärztliche Psychoanalyse*, Jahrg. i.

dissociate ourselves. These conflicts are usually, though by no means always, met with early in the analysis, since they are immediately related to the sufferings from which the patient seeks relief. Their correct solution is, it is true, quite another matter, which frequently becomes clear only comparatively late in the analysis.

There are two opposite attitudes that can be taken up in regard to such a conflict, with all possible gradations between. The one is that the physician deals with it himself directly, by means of advice, suggestion, and so on; the other (which I need scarcely remark is the psycho-analytical) consists in his confining his efforts to searching for the causes of the conflict, with the conviction that if only this is successful the most satisfactory solution will present itself spontaneously. The latter may be designated as the psycho-analytic, the other as the non-analytic treatment of the question.

The advantages of the attitude adopted in psycho-analysis need only be briefly discussed here.

1. Without an analysis one can never know with any certainty what the proper solution of the conflict should be. Either the patient already knows what he has to do, but not why he is not able to do it; or he has no idea of how to attack the question—*i.e.*, of what is the best solution of the problem. Nor can the physician determine the answer without analysis; he can at best only conjecture it.

2. Even if the physician divines the right solution and proposes it to the patient, its efficacy is different from what it would be if the patient were to arrive at it of himself. A proposal suggested to one from outside is fundamentally different from one arising quite spontaneously in one's own mind, and for this reason: even though the proposal embodies with psychological exactness the deepest wishes of the person, yet it is only really effective when the affects of these wishes can be transferred to the suggestion; therefore only when the flow of feeling between the unconscious and consciousness is fairly free. Now, this is impossible when the suggestion is merely proffered from outside, as happens in the non-analytic psychotherapy. The truth of this assertion can be demonstrated quite apart from psychotherapy at all. For example, one of his friends may say to a poet, 'This or that would be an excellent theme for you; it would suit your bent of mind admirably;' he may take up the idea and work it out, but if he

does the result produced will be totally different from that arising from a true inspiration. The principle is most evident in those serious emergencies of life where a delicate line of action, on which much depends, has to be carried out with success. It is generally recognised that in such situations it is better for the chief actor to carry out his own plan, even though it be an inferior one, than to fumble with any plan, however good, that may be suggested from outside. A brilliant illustration of this is furnished in Browning's drama 'In a Balcony,' where disaster results from the hero's adopting a diplomatic manœuvre suggested by his mistress instead of following the one dictated by his own intuition.

3. If the physician proffers a certain solution of a given conflict, or gives advice on it, he thereby intensifies the patient's dependence on him. From one point of view, indeed, the whole question may be regarded as part of the general problem of 'transference,'<sup>1</sup> to which we shall presently recur.

Although these considerations are evident enough, it should not be forgotten that there exist both on the patient's side and on the physician's strong factors tending in the opposite direction, and careful attention must be paid to these if they are to be counteracted.

The temptations on the patient's side to ask advice about a current conflict instead of thoroughly investigating its causes are mainly of two kinds: either they are an expression of the well-known resistance against such an investigation, or they are directed towards bringing about a closer bond between the patient and physician, thus strengthening the transference situation; there are connections between these two, which we need not inquire into here. The patient therefore finds it very convenient if the physician is always ready to help him in the matter of current conflicts, for he can shift all responsibility on to him and turn to him in every emergency. Even when the physician gives no direct advice, but only makes a suggestion, the patient may utilise this on a later occasion through reacting to it by a kind of 'postponed obedience'<sup>2</sup>—to use Freud's excellent phrase. The physician who wants to avoid this prolonged transference situation has to be careful in regard not only to advice, but also to suggestions.

The tendencies on the side of the physician are in part of a similar order. The simple giving of advice absolves him from

<sup>1</sup> See Chapters XIV. and XVIII.

<sup>2</sup> See p. 323.

the necessity of undertaking a toilsome investigation, and the resulting attitude of authority brings with it the danger of slipping more unawares into a 'counter-transference' than is otherwise the case. It flatters his self-esteem and gratifies his 'omnipotence' phantasies to reach in this way a pedestal of paternal power and omniscience, to fill the position of a Father-Imago. This can sometimes be easily observed with certain hypnotists, who really have almost deliberately to cultivate this pose. Schnitzler has strikingly delineated this attitude of the hypnotist in the figure of Paracelsus, into whose mouth he puts the following words:

' Mit wilden Söldnerscharen spielt der eine,  
Ein andrer spielt mit tollen Abergläubischen,  
Vielleicht mit Sonnen, Sternen, irgend wer—  
Mit Menschenseelen spiele ich.'

(' All play with toys: with hordes of soldiery one,  
Another plays with fancies wild and dark:  
Some one, perhaps, may play with suns and stars—  
I, with men's souls.')

But that is precisely what the physician may not do. As Browning so justly puts it:

' 'Tis an awkward thing to play with souls,  
And matter enough to save one's own.'

Irresponsible behaviour of this sort takes no proper count of the complicated processes that go on in the human mind. The influence necessarily exercised by the physician in regard to his patients should only be employed to overcome the inner resistances against the laying bare of the unconscious, with the single aim of enabling the patient to arrive, on the one hand, at a more complete knowledge of himself, bringing with it more self-control and a greater capacity for adaptation; and, on the other, at the fullest possible measure of independence. If the physician goes beyond this aim and, assuming the position of a moralist, teacher, or guide, proffers a solution of the difficulty based on his own judgement and necessarily influenced by subjective factors, he thereby oversteps the limits of psycho-analysis, mistakes its mode of operation, and stultifies its purpose.

Such a procedure on the part of the physician will be particularly likely to occur if he is not convinced, or only partially so, of the truth of the fundamental premises of psycho-analysis.

In this connection I cannot help seeing a danger of Jung's recent misrepresentation of psycho-analysis being so interpreted that its general acceptance would result in the whole enrichment of our psychotherapeutic remedial powers so hardly won by Freud being once more lost. In my opinion it is certain that the path entered on by Jung must lead to important differences in practice—which is, indeed, partly admitted already by Jung—and, further, that if logically pursued it would entail a complete abandonment of the principles of psycho-analysis. Let us consider, for example, the psycho-analytic treatment from the standpoint of a method of helping the patient to deal with his current conflicts more satisfactorily—this naturally represents only one point of view—and let us compare these conflicts with the unconscious phantasies characterising the 'flight into disease' and revealed by the analysis. As is well known, Freud ascribes an important aetiological significance to these wish-phantasies, and according to him the analysis serves here to enlighten the patient about the reasons for his inadequacy in regard to his current conflicts, to the end that he may learn to find for himself their appropriate solution. Jung attaches little or no aetiological significance to these phantasies, but nevertheless analyses them, and thereby shews the patient what he is doing—*i.e.*, the phantasies he is indulging in—when he shrinks from the solution (his 'task,' as Jung calls it); such an elucidation will probably be of little interest to the patient when he also learns that, according to Jung, his shrinking, of which he is often only too aware already, is the main point, but has only congenital causes—regression, sensitiveness, laziness, etc. I really cannot comprehend what purpose the analysis still serves if the wish-phantasies have no causative importance, and are taken to be only empty phenomena of a purely secondary nature. Jung, it is true, maintains that psychical energy gets locked up in these phantasies, and that it can be released through the analysis, but I cannot believe that this could be the case if the phantasies themselves had no meaning of their own. Such an investigation should necessarily have only a subordinate place in the treatment, since it takes no account of the supposed aetiological factors, which are congenital, and its tendency would be fundamentally different from that of psycho-analysis proper, which derives its results from the unveiling of the unconscious determining factors. Whoever pursues such a method of treatment should coin

a new term for it, since it would no longer be psycho-analysis.

To summarise my conclusions, I maintain that in psycho-analysis current conflicts equally with those belonging to the past should be resolved only through analysis of their unconscious causes, and not got rid of by any form of advice or any explanations about 'life-tasks.' No doubt this is an ideal hard to attain, for it happens often enough that the physician is almost compelled to express an opinion as to a particular difficulty or dilemma, and in circumstances which do not give him time to undertake a thorough analysis of the patient's reaction. In cases where the difficulty is not specially important it is of not much consequence what the physician may say; if, however, an important question is involved, he should not offer any far-reaching solution, but should leave the matter to the patient, while confining himself to directing the latter's attention to considerations which for psychopathological reasons he is liable to overlook. I conclude with the observation that on this question, as on others, psycho-analysis is incompatible with other psychotherapeutic methods.

<sup>1</sup> Even Jung has come to see this at last, in spite of his endeavour to conceal his departure from the psycho-analytic point of view, and has suggested various terms, such as 'prospective psychology,' 'anagogic psychology,' 'hermeneutics,' etc., to denote his present standpoint. My tentative comments on the tendencies of his work in 1913 have been amply borne out by its subsequent development.



## CHAPTER XVIII

### THE ACTION OF SUGGESTION IN PSYCHOTHERAPY<sup>1</sup>

*'Le traitement moral n'existera qu'au moment où sera fondée une science morale qui donnera la raison de l'emploi de tel ou tel procédé, qui expliquera ses succès et ses insuccès.'*—JANET.

THE ultimate aim of all scientific therapeutics should be to establish the exact way in which any given form of treatment brings about its effect, and, with this knowledge as a basis, to define its scope and provide precise indications for its use. Close investigation of a therapeutic measure that has empirically been found to be effective often yields important information about the nature of the malady itself,<sup>2</sup> and it will presently be shewn that suggestion constitutes no exception to this rule.

The study of the action of suggestion in psychotherapy possesses considerable accessory interest, in that of late years suggestion has been invoked to explain a great many phenomena in sociology and pathology as well as in therapeutics; these, however, will not be considered in the present paper, which is concerned solely with the part suggestion plays in treatment. At the same time it is worth observing that the knowledge of the nature of suggestion gained through experience of psychopathological therapeutics should prove of essential value in connection with such problems as those of crowd psychology. It is beginning to be recognised that the single phenomenon of suggestion has often been made to bear too much of the superstructure of sociology, and, further, that the nature even of this slender pivot has been insufficiently examined.

<sup>1</sup> Read in abstract before the First Annual Meeting of the American Psychopathological Association, in Washington, May 2, 1910. Published in the *Journal of Abnormal Psychology*, vol. v.

<sup>2</sup> See some remarks on this subject in Chapter XIII., p. 271.

Of all therapeutic agents suggestion, applied consciously or unconsciously, is perhaps the most widely used, and in the case of the psychoneuroses many writers sum up the discussion of treatment in the one word, 'suggestion.' There is no doubt that Freud is right in his remark that the eager readiness of the medical profession to employ the term 'suggestion' is due, not so much to the propagandism of the Nancy school, as to the alleviating discovery that a great economy of thought can thereby be effected.<sup>1</sup> To be able to attribute a given occurrence to 'suggestion' is with many a complete solution of the problem, and they do not find it necessary to pursue the matter further, or even to acquire any clear idea of what they actually mean by suggestion. Indeed, when one notes the remarkable extent to which the term is evoked to explain all sorts of different events, it is striking to find what little work has been done on the question of the nature of suggestion.<sup>2</sup>

The term suggestion has two principal connotations, which, though not fundamentally different from each other, are yet separate enough to make it important to distinguish between them. One of these is on the conceptual plane, the other on the affective. In the first place the term is used to denote the effective conveyance to a person's mind, usually to his consciousness, of any notion or idea; this is the sense intended by Bernheim when he defines suggestion as 'l'acte par lequel une idée est introduite dans le cerveau et acceptée par lui.'<sup>3</sup> This connotation may conveniently be described as 'verbal suggestion,' though it need hardly be said that the process may be brought about quite apart from the use of actual words. In the second place the term also denotes the acquirement by a person of a given affective state, such as when one person responds to the 'personal influence' of another. In both cases the alteration in the mental condition may be effected by various means, in only some of which is the action of a second person necessary. The difference between the two connotations may be well illustrated by referring to a criticism that several writers, with no knowledge of the subject, have made concerning the successful results of psycho-analytic

<sup>1</sup> Freud, *Jahrb. der Psychoanalyse*, 1909, Bd. i., S. 77.

<sup>2</sup> The interesting work of Lipmann, Sidis, Stern, and others, on certain aspects of the conditions under which suggestion operates is, of course, another matter.

<sup>3</sup> Bernheim, 'Hypnotisme, Suggestion, Psychothérapie,' 2<sup>e</sup> éd., 1903, p. 24.

treatment—namely, that 'the cures are due to suggestion.' In this phrase at least two different criticisms are evidently confounded: it is at one time meant that the memories evoked during psycho-analysis are false, having been merely 'suggested' to the patient, and at another time that, whether the recovered memories are true or false, the improvement of the patient's condition is brought about through the personal influence of the physician; sometimes the two are fused, as when it is alleged that the physician's influence compels the patient to accept the suggestion that evocation of memories will be followed by improvement. It is, I hope, unnecessary to take up the time of the members of this society with discussion of the first of these criticisms, which is even more preposterous than the second, but it will presently be found pertinent to the main theme of this paper briefly to consider the latter one. At this point I merely wish to call attention to the distinction between 'verbal suggestion' on the one hand and the affective process in question on the other; it is here maintained that the latter of these, which may be termed 'affective suggestion,' is the more fundamental, and is the necessary basis for the former. This view accords with that held by most modern writers, and is contained in Bleuler's statement, 'Die Suggestion ist ein affektiver Vorgang.'<sup>1</sup> ('Suggestion is an affective process.') The condition of suggestibility, or increased readiness to accept verbal suggestion, is thus the secondary consequence of an induced affective state, and it is with the latter that we shall here be chiefly concerned. Even in the case of verbal suggestion it is not the mere acceptance of the idea that is significant, but, as Lipps has clearly pointed out,<sup>2</sup> the psychical effect of this.

One of the most definite advances during the past twenty years in our knowledge of suggestion has been the gradual recognition of the fact that the chief work is performed, not, as used to be thought, by the operator, but by the subject. This is best illustrated by consideration of the most perfect form of suggestion—namely, hypnotism. Whereas, previously, hypnotism was thought to depend on a certain more or less mysterious power possessed by given persons, which enabled them to impregnate the subject with a magnetic fluid or a

<sup>1</sup> Bleuler, 'Affektivität, Suggestibilität, Paranoia,' 1906, S. 53.

<sup>2</sup> Theodore Lipps, 'Zur Psychologie der Suggestion,' *Zeitschr. f. Hypnotismus*, 1897, Bd. vi., S. 95, 96.

psychic influence—a conception that still largely holds its ground, particularly with the lay public—it is now known that the part played by the operator is a much more modest one, and that the process in its essence depends rather on the subject. The striking incongruity between the cause and the result should in itself make us strongly suspect this conclusion; the remarkable manifestations of hypnotism surely must depend on more powerful forces than the 'suggestion' given by a 'shining light' or by the bare word of a hypnotist. The occurrence of auto-hypnosis, and of spontaneous ecstasy (*e.g.*, religious), and the extraordinary variation of hypnotic manifestations in different persons, greatly strengthen this suspicion that the phenomenon has to do rather with some inherent faculty that varies with different subjects than with any positive action on the part of the hypnotist. We can no longer regard the subject as a helpless automaton in the hands of a strong-willed operator; it is nearer the truth to regard the operator as allowing himself to play a part, and by no means an indispensable one, in a drama constructed and acted in the depths of the subject's mind. It is the forces at work in this drama that it now becomes necessary to investigate; they are the real agents in suggestion and hypnotism, and the external factors have only a subordinate claim on our interest.

Certain clinical considerations make this deduction practically inevitable. The psychologically essential characteristic of hypnosis and suggestion has been described by Bernheim,<sup>1</sup> Sidis,<sup>2</sup> and others, as a dissociation of consciousness, and when one recalls the psychic anaesthesias, hypermnesias, and other manifestations of hypnosis, this designation is evidently just. It has, however, too hastily been assumed that this dissociation is an artificial state brought about by the hypnotic procedure. Thanks mainly to Freud's investigations we know not only that psychical dissociation is a characteristic of every mind, but also that, even in the so-called normal, the dissociated mental trends constantly produce manifestations by means of the same psychological mechanisms as those underlying hysterical symptoms.<sup>3</sup> The dissociation, therefore, is already present for the operator to make use of, and it is this dissociation that we must further investigate in order

<sup>1</sup> Bernheim, *op. cit.*

<sup>2</sup> Sidis, 'The Psychology of Suggestion,' 1897.

<sup>3</sup> See Chapters IV. and VIII.

to elucidate the true nature of suggestion. More than this, there is—with certain exceptions, the explanation of which cannot here be discussed—a close correspondence between the nature and extent of psychical dissociation and the readiness with which the manifestations of suggestion can be evoked. It is, of course, generally recognised that the most advanced form of these manifestations—somnambulatory states, with the production of secondary personalities—is most frequently seen in cases of pronounced hysteria, and the resemblance of these to the spontaneous symptoms of hysteria is in general so striking that in the eighties Charcot and the Salpêtrière school did not hesitate to pronounce hypnosis to be only one of the typical hysterical syndromes. I have long thought that there is in this view more truth than is now commonly believed, and that the triumph of the opposing conception held by the Nancy school is destined to pass away. I was therefore very interested to find that Ferenczi, in a recent illuminating essay<sup>1</sup> to which we shall several times have to refer, expresses a similar opinion. Let me briefly recall some of the considerations that seem to me of most weight in this connection.

Most striking is the fact that the operator can elicit by hypnotism not a single manifestation that may not be spontaneously produced by the neurosis, giving thus the impression that what happens in hypnosis is merely the evocation of hysterical symptoms. The tremors, paralyses, anaesthesias, amnesias, spasms, hallucinations, paraesthesias, somnambulatory trances, attitudes, and ecstasies are typical examples of this. It cannot be maintained that all these symptoms are peculiar to the Salpêtrière clinic, for although in Paris some of them, particularly the convulsive attacks, owed several of their traits to artificial training (*dressage*) of the patients, still the manifestations just mentioned have been observed all over the world before and after Charcot's time, both as spontaneous occurrences in hysteria, and as the result of suggestion in hypnosis. Typical hysterical convulsions were the most prominent features in Mesmer's clinic a hundred and thirty years ago, and many patients permanently continued to suffer from them after they had once been evoked in hypnosis,<sup>2</sup> a danger to which

<sup>1</sup> Ferenczi, 'Introjektion und Übertragung,' *Jahrb. der Psychoanalyse*, Bd. i., S. 451. (A translation of this essay appears as chapter ii. of his 'Contributions to Psycho-Analysis,' 1916.)

<sup>2</sup> Marquis de Puységur, 'Mémoires pour servir à l'histoire et à l'établissement du magnétisme animal,' 1784, p. 104.

Charcot called special attention in the case of other symptoms.<sup>1</sup> The peculiar *rapport* between the operator and the subject, so characteristic of the hypnotic state, is identical with that obtaining between the physician and the patient in the spontaneous somnambulism of hysteria, as has been beautifully shewn by Richer,<sup>2</sup> Janet,<sup>3</sup> and others. Even the curious occurrence known as post-hypnotic suggestion has its precise counterpart in what Freud calls the '*nachträglicher Gehorsam*' ('postponed obedience') of neurotics,<sup>4</sup> by which is meant the automatic obedience of a patient to a command uttered years before by some person psychically significant to him. Ferenczi, in remarking the resemblance between the two processes,<sup>5</sup> relates a case where a noctambulic stereotypy could be traced to a certain command which had been given to the patient in his childhood by a harsh father, and which later had been completely forgotten. Janet has interestingly shewn<sup>6</sup> that the interval over which post-hypnotic suggestion remains potent exactly corresponds with the duration of what he terms the '*influence somnambulique*,' a state that will presently be discussed. In a recent case I was able to observe that the neurotic 'postponed obedience' similarly lasted until the affective bond between the patient and the person from whom the command emanated was deprived of its abnormal coercive power. The patient, who was suffering from a severe form of obsessional neurosis, had on several occasions in his childhood been sternly forbidden by his mother to do a certain act which is more permissible in the adult than in the child. In later years he was unable to carry out the act in question, and was quite aware that the cause of this was connected with his mother's words. After, however, he had been freed by psycho-analysis from the unconscious source of his mother's excessive influence over him her command lost its unnatural constraining force.

The main reason why in late years the problems of hypnotism and hysteria have been kept apart is that the great frequency with which hypnosis can be induced in the normal has seemed

<sup>1</sup> Charcot, 'Accidents hystériques graves survenus chez une femme à la suite d'hypnotisations,' *Rev. de l'hypnotisme*, juillet, 1889, Année IV., p. 3.

<sup>2</sup> Richer, 'La grande hystérie,' 1885, p. 318.

<sup>3</sup> Janet, 'Névroses et idées fixes,' 1898, t. i., pp. 160, 304, 424, 467.

<sup>4</sup> Freud, *op. cit.*, S. 23.

<sup>5</sup> Ferenczi, *op. cit.*, S. 447.

<sup>6</sup> Janet, *op. cit.*, p. 443.

to prove the mutual independence of the two conditions. In the light of more recent knowledge, however, this very observation is a strong argument in favour of Charcot's view, that the two are closely connected, for it is now recognised that Moebius' dictum 'Jederman ist ein bisschen hysterisch' ('Every one is a little hysterical') is not an empty satire, but a literal fact. As Jung puts it, we have all had to fight with the same complexes that cause the sufferings of hysterics, and scarcely any one gets off scot-free from the 'abnormal' effects of them. Freud has produced abundant evidence<sup>1</sup> to shew that the same unconscious, dissociated trends operative in hysteria come to expression in the normal by means of mechanisms psychologically closely akin to those that generate hysterical symptoms.

It is therefore expedient to consider the most pronounced manifestations of suggestion, particularly hypnosis, in cases of obvious hysteria, and to see whether the recent knowledge that has been acquired on the subject of the psychoneuroses can throw any light on the problem; it is notoriously easier to study the nature of psychical processes when they are examined under the microscope of 'disease.' From this point of view, as Ferenczi has clearly shewn,<sup>2</sup> the phenomena of suggestion in the neuroses are seen to constitute only one variety of a group of processes to which Freud has given the name of Transference (*Übertragung*),<sup>3</sup> and these in their turn are only examples of the still more general mechanism known as Displacement (*Verschiebung*).

'Displacement' in psychology denotes the transposition of an affect from one conception to another less unacceptable one.<sup>4</sup> Its function is to evade a painful complex; this is excluded from consciousness, and represented in it only by the appearance there, in the shape of a compromise, of a secondary conception invested with the original affect. The association between the primary and secondary conceptions is often of an exceedingly superficial order. The mechanism is common enough in everyday life—a banal instance being the spinster's parrot who claims the preoccupation and care appropriate to a child—but in the psychoneuroses its field of action is extra-

<sup>1</sup> Freud, 'Die Traumdeutung,' 4<sup>e</sup> Aufl., 1914; 'Zur Psychopathologie des Alltagslebens,' 4<sup>e</sup> Aufl., 1912. See Chapters IV., VIII., and XII.

<sup>2</sup> Ferenczi, *op. cit.*, S. 424 *et seq.*

<sup>3</sup> Freud, 'Bruchstück einer Hysterie-Analyse,' 'Sammlung kleiner Schriften zur Neurosenlehre,' 2<sup>e</sup> Folge, 1909, S. 104.

<sup>4</sup> See Chapters III. and IV.

ordinarily wide. Here the affect of the repressed complexes has no satisfactory outlet, and is at any time ready to find one when an experience presents itself that can be associated to the complex. What is called the 'inadequate<sup>1</sup> emotional reaction' of such patients, the excessive sympathy, love, or hate that they display on apparently trivial occasions, finds its explanation in this process, a single illustration of which will suffice. I was recently called to see an hysterical patient who was suffering from extreme prostration—for twenty-four hours she was too weak to speak—which had been induced by her hearing of the death of a young child she had never seen; the child belonged to a relative of one of her friends. The nurse rightly remarked, 'She couldn't have been more affected had it been her own child.' From my knowledge of the case I was able to surmise something of what had happened in the patient's mind; she had 'identified' herself with the sorrowing mother, and was suffering as if she actually were the mother; naturally there were still deeper roots to the identification which I cannot here describe.

This process of unconscious identification with others is an extremely frequent and important one in the psychoneuroses,<sup>2</sup> and accounts for many of the abnormal and excessive reactions of the patients; they imagine themselves in the position of other people, and feel not only what the other person does, but also what they themselves had felt in the past on some forgotten similar occasion. In other words, part of their emotional reaction arises from some personal repressed complex, of which they are not conscious. Strictly speaking, their emotion is egoistic and not altruistic—as it often appears to be—for at bottom they are feeling, not for others, but for themselves. The 'exaggerated emotions' of hysterics are thus only apparently exaggerated—they are so only in relation to the exciting cause; when correlated with the unconscious source they are found to be fully justified and intelligible. Ferenczi's remark is very much to the point when he says:<sup>3</sup> 'Die "Übertriebenheit" in den Gefühlsäusserungen Hysteriker ist ja längst bekannt und auch viel bespottet worden; erst seit Freud wissen wir aber, dass den Spott eher wir Ärzte verdient hätten, die wir die

<sup>1</sup> Better 'disproportionate.'

<sup>2</sup> I have elsewhere described a case in which it played a predominating part; see Chapter XXIII.

<sup>3</sup> Ferenczi, *op. cit.*, S. 423.



symbolischen Darstellungsmittel, gleichsam die Sprache der Hysterie nicht kennend, sie bald als eine Art Simulation ansprachen, bald wieder mit abstrusen physiologischen Schlagworten abgetan zu haben währten.' ('The tendency of hysterical patients to use exaggeration in the expression of their emotions has long been known, and often ridiculed. Freud has shewn us that it is rather we doctors who deserve the ridicule, because failing to understand the symbolism of hysterical symptoms—the language of hysteria, so to speak—we have either looked upon these symptoms as implying simulation, or fancied we had settled them by means of abstruse physiological terms.') In the production of neurotic symptoms the displacement process plays a fundamental part, and it must be regarded as one of the most characteristic peculiarities of the malady. The symptoms are replacement-creations (*Ersatzbildungen*), which take the place in consciousness of the painful and repressed complexes; the pent-up affect tends to flow in any direction open to it, whether this is a physical (conversion-hysteria) or mental one (substitution neurosis, obsessions). Yet, as was mentioned above, the pathological outlets hardly ever prove satisfactory, and it would seem as if there was always present a certain quantity of free or loosely associated affect ready to fasten on to any fresh mental experience.

To this excessive tendency on the part of the patient to incorporate his environment into his own personality Ferenczi has given the name 'introjection.'<sup>1</sup> It is merely an exaggeration of tendencies present in us all, common instances being the way in which a careful housewife is *personally* offended at any reflection on the cleanliness of her house, this being in a sense a part of herself, or the glow of *personal* pride we feel whenever anything enhances the renown of our particular town or country. When introjection of the environment is carried to excess, obviously it greatly increases the sensitiveness of the person in question; every new section of environment that is incorporated into his ego adds a fresh group of possibilities for pleasant or unpleasant emotions; it becomes, as it were, a sentient antenna. As is well known, the sensitiveness of some patients with advanced nervous invalidism is quite appalling; every trivial occurrence affects them in a personal way, and they are deeply moved by the most transient impressions. Such exacerbations of suffering may be brought about by slight happenings that

<sup>1</sup> Ferenczi, *op. cit.*, S. 429.

life seems impossible for them unless they are shielded to an artificially elaborate extent, and they suck the very life-blood of all about them in their insistence that these should constantly make the finest adjustments in their environment. The process of introjection is the exact opposite to that of 'projection' characteristic of paranoiac patients, who on the contrary withdraw themselves from the outer world. As Ferenczi tersely puts it,<sup>1</sup> 'Der Psychoneurotiker leidet an Erweiterung, der Paranoische an Schrumpfung des Ichs.' ('The psychoneurotic suffers from a widening, the paranoiac from a shrinking of his ego.')

The most interesting manifestations of introjection are those relating to the persons in the patient's environment. He transfers on to them various affects—love, hate, and so on—that arose, perhaps years previously, in connection with quite other people, just as a child who has once been hurt by a doctor is for some time afterward fearful of every doctor he encounters. For this to happen there has only to be instituted the slightest resemblance between the original person and the present one; such a patient, having once intensely hated some one with a given characteristic, say red hair, will be ready to hate any one he may later meet who has the same characteristic. This tendency to live over again the same emotion in the presence of a person resembling one formerly associated with the emotion is called 'transference' (*Übertragung*), but Freud, for reasons of expediency, prefers to restrict the use of the term to the occasions on which the process happens in relation to the physician who is treating the case. Every physician who has had much experience with psychoneurotic patients knows how variable, unreliable, and changeable is their attitude to him; in fact, their 'capriciousness' is generally notorious. On a slight change in his manner or in his treatment of them, and often apparently quite spontaneously, their attitude alters, trust is replaced by suspicion, resentment by gratitude, and so on, the extent of the alteration being out of all proportion to the exciting cause; to many physicians they are the most ungrateful, unsatisfactory, and disliked of all patients. This puzzling behaviour, however, becomes at once comprehensible as soon as one realises that it is determined, not by the external occasion, to which it is so disproportionate and abnormal a response, but by previously existing and usually unconscious emotions which the external

<sup>1</sup> Ferenczi, *loc. cit.*

occasion merely evokes. Association is at the bottom of the whole process. A word or tone used by the physician unconsciously reminds them of some forgotten experience, imaginary or real, pleasant or unpleasant, and really it is to this past experience that they are reacting; the reaction is determined not by the conscious personality, but by some unconscious complex that has been stimulated. The association between the external occasion and the forgotten experience is often, as was mentioned above, an exceedingly superficial one, especially when the affect concerned is very intense, and so more sensitive to stimulation. The whole process can be experimentally estimated, for, as Jung has shewn,<sup>1</sup> certain characteristics in the word-reaction association test—namely, the desire to add to the response something explanatory or supplementary (*sentiment d'incomplétude*)—signify that the subject has a tendency constantly to give to others more feeling than is required or expected in the circumstances. Jung interprets this as a compensation for an inner unsatisfiedness and voidness of feeling.

A matter of peculiar significance is the observation that most often the affect transferred to the physician arose originally in connection with one of the parents, more usually the father, or with some person standing in a similar relation to the patient. The respect due to the physician, and his position of prestige and authority as regards the patient, in themselves make it readily possible to form an association between him and the parent, and often the mere enforcing of a piece of medical advice, a slight sternness, or even increase of firmness in tone, the reproving of an omission or fault, are quite sufficient to consummate this. The 'firmness' with which it is fashionable to treat such patients, a term that frequently covers a considerable measure of hostility and lack of understanding on the part of the physician, obviously conduces in a high degree to the transference of the affect of parental complexes; the result of such an attitude is sometimes beneficial, often disastrous, and always unpredictable. As in most cases the relation of the patient to his parents lies at the very centre of his malady, it will be seen that the type of transference here indicated is of especial importance.

We have next shortly to consider what is the actual nature of the affective processes in the psychoneuroses that are in

<sup>1</sup> Jung, 'The Association Method,' *Amer. Journ. of Psychol.*, April, 1910, p. 228.

this excessive manner transferred from the patient to surrounding persons, including the physician. At first sight these seem to be of all possible kinds—gratitude, hate, affection, fear, jealousy, and so on—but psycho-analytic research has, in the eyes of those qualified to judge the matter, shewn that these diverse processes are not, as they appear to be, primary and incapable of further analysis; on the contrary, they prove on examination to be only secondary reactions to deeper trends. It was one of Freud's most important discoveries<sup>1</sup> that these deeper and more ultimate trends are invariably components or derivatives of the primary psychosexual system of activities.<sup>2</sup> That resentment, anger, jealousy, and other sentiments and emotions may be secondary reactions to unsatisfactory sexual experiences, to despised or ungratified love, is of course a truism, one that is well expressed in Congreve's familiar lines:

' Heaven hath no rage like love to hatred turned,  
Nor hell a fury like a woman scorned.'

It would not be pertinent to the aim of this paper to discuss and explain the statement just made, to the effect that the pathogenic complexes in the psychoneuroses are always of a sexual nature; one can only asseverate that whenever the morbid affective process concerned is traced to its origin this is invariably found to be a sexual one. In hysteria, which is the psychoneurosis that most concerns us here, the complexes arise from disturbances in the development of the psychosexual functions, and the symptoms are disguised and distorted expressions of the fulfilment of various sexual wishes, most frequently of various perversions. The satisfaction of these wishes in this form is, however, almost always incomplete, and for this reason there are generally two sources of affective processes ready to be transferred to any convenient object. On the one hand there is the free affect mentioned above, which has found no outlet, either in a symptom or in any other way; on the other hand there is a quantity of affect which is finding only partial and unsatisfactory outlet in the form of certain of the symptoms. These symptoms are the recent, temporary, or changing ones, the ones most easily 'cured'; the more durable and constant symptoms are notoriously harder to remove, the

<sup>1</sup> Freud, 'Sammlung kleiner Schriften zur Neurosenlehre,' 2<sup>e</sup> Folge, 1909.

<sup>2</sup> For a short description of Freud's conception of sexuality, see Chapter III.

reason being that they are proving more adequate outlets for the pathogenic affects concerned.

There is in most cases of hysteria, therefore, a considerable measure of hungry needs and desires ready to attach themselves to any suitable object that may present itself, and it is the attachment of these to the idea of the physician that constitutes the process called 'transference.' Freud's definition of it runs thus:<sup>1</sup> 'Während einer psychoanalytischen Kur ist die Neubildung von Symptomen, man darf wohl sagen: regelmässig, sistiert. Die Produktivität der Neurose ist aber durchaus nicht erloschen, sondern betätigt sich in der Schöpfung einer besonderen Art von meist unbewussten Gedankenbildungen, welchen man den Namen *Übertragungen* verleihen kann. Was sind die Übertragungen? Es sind Neuaufgaben, Nachbildungen von den Regungen und Phantasien, die während des Vordringens der Analyse erweckt und bewusst gemacht werden sollen, mit einer für die Gattung charakteristischen Ersetzung einer früheren Person durch die Person des Arztes. Um es anders zu sagen: eine ganze Reihe früherer psychischer Ergebnisse wird nicht als vergangen, sondern als aktuelle Beziehung zur Person des Arztes wieder lebendig.' ('During the course of a psycho-analysis the development of new symptoms as a rule ceases. The productivity of the neurosis, however, is far from being extinguished, but exercises itself in the creation of a peculiar sort of thought-formations, mostly unconscious, to which the name "transferences" may be given. These transferences are re-impressions and reproductions of the emotions and phantasies that have to be awakened and brought into consciousness during the progress of the analysis, and are characterised by the replacement of a former person by the physician. To put it in another way: a whole series of earlier experiences are revived, not as past ones, but in the form of a current relation to the person of the physician.') In a more recent lecture<sup>2</sup> he re-states this in the following words: 'He (the patient) applies to the person of the physician a great amount of tender emotion, often mixed with enmity, which has no foundation in any real relation, and must be derived in every respect from the old wish-fancies of the patient which have become unconscious. Every fragment of his emotive life,

<sup>1</sup> Freud, 'Bruchstück,' etc., S. 103, 104.

<sup>2</sup> *Ibid.*, 'The Origin and Development of Psycho-analysis,' *Amer. Journ. of Psychol.*, April, 1910, p. 215.

which can no longer be called back into memory, is accordingly lived over by the patient in his relations to the physician.' This subject of transference will presently occupy us further in relation to its therapeutic effect.

To return to the questions of suggestion and hypnosis, which have apparently been deserted in the preceding considerations, is to continue the present theme, for these processes are merely examples of transference. Some years ago Freud ventured the following remark concerning hypnotism:<sup>1</sup> 'Ich kann mir nicht versagen, hierbei an die gläubige Gefügigkeit der Hypnotisierten gegen ihren Hypnotiseur zu erinnern, welche mich vermuten lässt, dass das Wesen der Hypnose in die unbewusste Fixierung der Libido auf die Person des Hypnotiseurs (vermittels der masochistischen Komponente des Sexualtriebes) zu verlegen ist.' ('I cannot help thinking in this connection of the credulous pliability of a hypnotised person in regard to the hypnotiser, which leads me to conjecture that the essence of hypnosis resides in the unconscious fixation of "sexual hunger" [Libido] on the person of the latter [by means of the masochistic component of the sexual instinct].')

Ferenczi, in developing this observation,<sup>2</sup> adds two very important corollaries, which, however, directly follow from the considerations adduced above. *In the first place*, agreeing with Bernheim and Forel that suggestion is the essence of hypnotism, he generalises Freud's observation so as to include under it suggestion as well as hypnotism. He points out that sympathy, respect, antipathy, and other affective processes, which have long been known to play a decisive part in favouring or hindering suggestion, are elaborate constructions which are accessible to a dissection that separates them into their elements. 'Bei der Zerlegung findet man in ihnen die primären unbewussten libidinösen Wunschregungen als Unterlage und darüber einen unbewussten und vorbewussten psychischen Überbau.' ('In the dissection one finds in them the primary unconscious libidinous wish-emotions as the basis, and in a higher layer an unconscious and preconscious psychical superstructure.') These primary elements are, as was pointed out in connection with the complexes of hysteria, always ultimately of a sexual nature. *In the second place*, recognising with Freud that these repressed affects take their earliest origin in the child's reactions towards

<sup>1</sup> Freud, 'Drei Abhandlungen zur Sexualtheorie,' 1905, S. 15.

<sup>2</sup> Ferenczi, *op. cit.*, S. 439.

his parents, Ferenczi attributes to the 'parental complexes' the predominating part in the process of suggestion. He summarises his thesis in the statement<sup>1</sup> that 'Die Hypnotisierbarkeit und suggestiv Beeinflussbarkeit eines Menschen hängt also von der Möglichkeit der "Übertragung" oder, offener gesagt, der positiven wenn auch unbewussten sexuellen Stellungnahme des zu Hypnotisierenden dem Hypnotiseur gegenüber ab;<sup>2</sup> die Übertragung aber, wie jede "Objektliebe," hat ihre letzte Wurzel in dem verdrängten Elternkomplex.' ('The capacity to be hypnotised and influenced by suggestion depends on the possibility of transference taking place, or—more openly expressed—on the positive, although unconscious, sexual attitude that the person being hypnotised takes up in regard to the hypnotiser;<sup>3</sup> the transference, however, like every "object-love," has its deepest root in the repressed parent-complex.')

In regard to the matter of parental complexes he makes a number of noteworthy observations, illustrated by the description of cases, such as those of patients whom he had treated first by hypnotism and later by psycho-analysis. Thus, the procedures for inducing hypnosis, and the conditions that favour this, appear in a new light in view of the foregoing considerations. It may be said in general that there are two types of procedures at our disposal for this purpose, though they cannot of course be sharply separated from each other; the two means are appeals to fear and to love respectively. In the first of these, the matters of decisive importance are: Social and professional prestige of the hypnotist, high reputation for previous successes, absolute self-confidence, firmness, imposing behaviour, and an assured tone in issuing commands. This is the popular conception of a hypnotist, a Svengali *par excellence*, with his lofty stature, black beard, heavy eyebrows, and penetrating glance; we are reminded of the Abbé Faria, with his famous 'Dormez!' In the second type the necessary requisites are: a darkened room with complete stillness, a mild and friendly attitude on the part of the hypnotist, a low,

<sup>1</sup> Ferenczi, *op. cit.*, S. 441.

<sup>2</sup> In two recent papers ('Zur Wertung der Hypnose,' *Therapeutische Rundschau*, 1909, Jahrg. iii., Nr. 45, and 'Zum Verständnis der Hypnose und des hysterischen Delirs,' *Zentralbl. für Psychoanalyse*, Jahrg. i., Heft 3) Sadger reaches the same conclusion as the result of his comparative experience with psycho-analysis and hypnotism, and my own experience also quite accords with this.

monotonous, musical voice, with light stroking of the hair, the brow, or the hands. The response of the subject roughly corresponds respectively with the two forms of suggestibility Hartenberg has recently described<sup>1</sup> under the names of *Ausführungssuggestibilität* and *Empfangssuggestibilität*. Ferenczi calls these two types the 'paternal' and the 'maternal' methods,<sup>2</sup> and points out the resemblance between the first and the child's conception of the firm, infallible, and all-powerful father, whom it is his highest ambition to imitate and obey, and between the second and the oft-repeated scenes of childhood in which a mother woos her child to sleep by telling him pleasing fairytales or singing tender lullabies. Even the various apparatus formerly employed for inducing hypnosis, the Luys revolving mirror, the bright light on which the gaze has to be fixed, the monotonous metronome, are repetitions of the means used to attract the attention of a child, the bright objects, ticking watch, and so on. In short, the attitude of the subject to the hypnotist is not merely analogous with that of a child to its parent, it is identical with it. Unconscious fixation of infantile incestuous thoughts goes hand in hand with the capacity to be hypnotised. Freud's statement that the transference at the basis of hypnosis depends on the feminine component of the sexual instinct Ferenczi explains<sup>3</sup> by pointing out that the pleasurable obedience characteristic of this component is first exercised in regard to the parents; it is, indeed, the source of the child's docility and compliancy towards his parents. He further points out<sup>4</sup> that the obedience to a parent's command frequently becomes pleasurable by means of an unconscious identification taking place in the child's mind between him and the parent, the parent's will becoming his own, and the child becoming in his phantasy endowed with the might and other graces of the parent. Similarly, Lipps<sup>5</sup> remarks that in verbal suggestion the subject accepts the implanted idea only if the personality of the operator agrees with his own, a certain emotional fusion (identification) taking place between the two. It is also interesting in this connection to recall that Baragnon

<sup>1</sup> Hartenberg, 'Die zwei Hauptformen der Suggestibilität,' *Zeitschr. f. Psychotherapie u. Medizinische Psychologie*, Bd. ii., S. 46.

<sup>2</sup> Ferenczi, *op. cit.*, S. 443.

<sup>3</sup> *Ibid.*, *op. cit.*, S. 450.

<sup>4</sup> *Ibid.*, *op. cit.*, S. 447.

<sup>5</sup> Th. Lipps, 'Suggestion und Hypnotismus,' *Sitzungsber. der bayerischen Akademie der Wissenschaft*, 1897 (1898), S. 490.



used to think that the most successful way to induce hypnotic ecstasy was to make pressure on the head over the 'site of veneration.'<sup>1</sup>

It would be impossible in the space of this paper to reproduce the extensive evidence for the truth of the propositions just specified, nor is it probable that any one would be convinced of them without personal experience of the matters in question—namely, psycho-analysis of the nature and origin of the affective processes underlying transference and suggestion; to those with this experience the conclusions stated inevitably force themselves on the investigator. I shall therefore content myself with considering some of the observations made by workers who were quite ignorant of psycho-analysis, and with pointing out how admirably capable of assimilation these are to the views here enunciated. I cannot refrain, however, from quoting one single personal example that illustrates the connection between sexuality and the acceptance of suggestions.<sup>2</sup> One of my patients, a married lady, used to bring forward all her explanations and interpretations of the analytical material with the remark, 'You would probably say that so-and-so,' and this from the very beginning of the treatment, at a time when my part was a purely passive one. She would say, further, although I might not have spoken a word, 'I can feel that you are making an effort to suggest these things to me, and I have to defend myself against them.' This continued during the first few weeks of the analysis. The subject of transference then had to be discussed, as the indications of it in her dreams were becoming evident. She now confessed that her last doctor excited her sexually, and that she had feared the same might happen in regard to myself. She had made up her mind at the beginning, therefore, to guard herself against any temptation of this sort, and to avoid every possibility of personal interest in myself. Her self-defence against the thoughts I was supposed to be suggesting to her, and her fear lest I should influence her thoughts, were nothing but an expression of her fear of becoming sexually interested in me, and they disappeared, together with this fear, once the nature of transference was made clear to her.

The first manifestation of hypnosis that may be mentioned is its most striking—namely, the *rappport* that exists between the

<sup>1</sup> Baragnon, 'Étude du magnétisme animal,' 1853, p. 318.

<sup>2</sup> Published in the *Internat. Zeitschr. f. Psychoanalyse*, Jahrg. ii., S. 275.

subject and operator, the phenomenon which, according to Lipps,<sup>1</sup> actually conditions hypnosis. The state of *rapport* was well known to the early magnetisers and hypnotists, and has been fully described by many of them.<sup>2</sup> It is essentially characterised by an intimate psychical relation between the subject and the operator, or, to speak more accurately, a one-sided relation of such a kind that the former is, as Lipps puts it,<sup>3</sup> psychically dependent on the latter. Bertrand was the first to point out that the cardinal event in the process, and therefore in hypnotism in general, is the thorough occupation of the subject's mind with the thought of the operator; he wrote, in 1823:<sup>4</sup> 'Le malade, soumis à l'opération magnétique, s'endort en pensant à son magnétiseur, et c'est parcequ'il ne pense qu'à lui en s'endormant, qu'il n'entend que lui dans son somnambulisme.' This view has since been amply confirmed by Noizet,<sup>5</sup> Moll,<sup>6</sup> Janet,<sup>7</sup> and others. Further, this concentration of the subject on the one thought of the operator—or 'monoideism,' to recall Braid's term—has the consequence of making him more or less completely oblivious of other persons. This is the well-known 'electivity' of hypnotised subjects who respond to the slightest indication on the part of the operator, but who remain quite indifferent even to gross excitations (painful stimuli, etc.) emanating from any one else; the details of this electivity have been well described by Janet,<sup>8</sup> who says that he has observed it in all the cases he has studied.

Intense concentration on a single train of thought is only another expression for engrossing interest in the thought, and,

<sup>1</sup> Lipps, *op. cit.*, S. 503.

<sup>2</sup> Baréty, 'Magnétisme,' pp. 284, 398. Bertrand, 'Traité du somnambulisme et des différentes modes qu'il présente,' 1823, p. 245. Charpignon, 'Physiologie, médecine et métaphysique du magnétisme,' 1848, pp. 79, 144. De Lausanne, 'Principes et procédés du magnétisme,' 1819, t. ii., p. 160. Deleuze, 'Histoire critique du magnétisme animal,' 1818, t. i., p. 185. Demarquay et Giraud-Teulon, 'Hypnotisme,' p. 32. A. Despine, d'Aix, 'Observations de médecine pratique,' 1838; 'Traitement des maladies nerveuses par le magnétisme animal,' 1840. Du Potet, 'Traité complet du magnétisme,' 1821, p. 158. Myers, *Proceedings of the Society for Psychological Research*, 1882, p. 255; 1887, p. 538. Noizet, 'Mémoire sur le somnambulisme,' 1854, p. 97. Ochorowicz, 'Suggestion mentale,' p. 404.

<sup>3</sup> Lipps, *op. cit.*, S. 497.

<sup>4</sup> Bertrand, *op. cit.*, p. 241.

<sup>5</sup> Noizet, *op. cit.*, p. 101.

<sup>6</sup> Moll, 'Untersuchungen über den thierischen Magnetismus,' 1892.

<sup>7</sup> Janet, *op. cit.*, p. 424.

<sup>8</sup> *Ibid.*, 'L'Automatisme Psychologique,' 1889, p. 283, etc.

as is now generally recognised, this process is at bottom an affective one, though it may or may not relate to an intellectual sphere. Instances of both are common enough: the sleeping mother is *en rapport* with the babe in the cradle at her side, will wake at its faintest cry and sleep through much louder noises; Archimedes at work on his geometrical problem was so engrossed that he maddened the intruding soldier by ignoring him, and was thereupon slain. We may, however, go further, and say that a *rapport* between two people, so extraordinarily close as the hypnotic one, always indicates sexual affection, either truly erotic or else in a sublimated form.<sup>1</sup> The subject who is so wrapped up in the operator that he can see the world only through the latter's eyes, and is blind to all else, irresistibly reminds any unprejudiced observer of the intense devotion of a lover, particularly that of a woman. The peculiar significance that the operator has for the subject above all other persons is illustrated by Janet's remark:<sup>2</sup> 'Il semble donc que pendant le somnambulisme le sujet soit particulièrement préoccupé de son hypnotiseur et qu'il ait à son égard une préférence, une docilité, une attention, en un mot des sentiments particuliers qu'il n'a pas pour les autres personnes.' This electivity is truly remarkable; it recalls Bernard Shaw's epigram, that 'Love is a gross exaggeration of the difference between one person and all the rest.' Effertz, in describing the electivity of hypnotic *rapport*, says:<sup>3</sup> 'Der A. z. B. kann den X. hypnotisieren, aber der B. kann es nicht. Oder der A. kann den X. hypnotisieren, nicht aber den Y.; oder A. kann den X. heute hypnotisieren, aber er kann es nicht mehr morgen, usw. Solche Rapporte bestehen. Das wissen wir schon lange vor der Hypnologie. Das lehrt unter anderem die Beobachtung des Entstehens und Vergehens an Liebesverhältnissen.' ('A, for instance, can hypnotise X, but B cannot. Or A can hypnotise X, but not

<sup>1</sup> I would attribute to the same source the well-known suggestive influence that one married partner exerts over the beliefs and feeling-attitudes of the other, particularly over those of the woman. In this connection it may be recalled that Mdle. Henriette Fürst ('Statistische Untersuchungen über Wortassoziationen und über familiäre Uebereinstimmungen im Reaktionstypus bei Gebildeten,' *Journ. für Psychol. und Neurol.*, 1907, Bd. ix. S. 243) has shewn that even the association-reactions of one partner tend in time to resemble those of the other, the change being greater in the case of the woman. The whole process is evidently an identification of people having a close affective bond.

<sup>2</sup> Janet, 'Névroses,' etc., p. 424.

<sup>3</sup> Effertz, 'Studien über Hysterie, Hypnotismus, Suggestion,' 1894, S. 55.

Y; or A can hypnotise X to-day, but not to-morrow. Relationships of this sort certainly exist. This was known long before hypnology was studied. We are taught it, among other ways, by observations on the origin and course of love relationships.')

The resemblance goes still further. Janet distinguishes two stages in the development of the *rapport*.<sup>1</sup> In the first stage, the presence (sound, touch, etc.) of a third person is indeed perceived, but is found by the subject to be irritating and disturbing, exactly as it would be in the case of two lovers enjoying the happiness of each other's company. In a sonnet of Mrs. Browning's the need of lovers to be isolated from all the rest of the universe is wonderfully depicted, and the passage here italicised shews how in such circumstances even the most delicately fine intrusion would be resented, exactly as it would in a hypnotic *rapport*.

'When our two souls stand up erect and strong,  
Face to face, silent, drawing nigh and nigher,  
Until the lengthening wings break into fire  
At either curved point,—what bitter wrong  
Can the earth do to us, that we should not long  
Be here contented? Think. In mounting higher,  
*The angels would press on us and aspire  
To drop some golden orb of perfect song  
Into our deep, dear silence.* Let us stay  
Rather on earth, Beloved,—where the unfit  
Contrarious moods of men recoil away  
And isolate pure spirits, and permit  
A place to stand and love in for a day,  
With darkness and the death-hour rounding it.'

In Janet's second stage the subject's absorption has become so complete that he is entirely isolated from the outer world, and it is quite impossible for a third person to get into any communication with him, let alone to disturb him. As was previously remarked, the *rapport* that may exist between the physician and patient in cases of hysterical somnambulism is identical with that in hypnosis, a further piece of evidence that the forces underlying hysteria and suggestion are of the same nature.

The soothing effect of the hypnotiser's presence, or of the amulets he 'charges' so as to help the patient against various fears and difficulties, is also analogous to the influence of a

<sup>1</sup> Janet, *loc. cit.*

lover, as was clearly pointed out some ten years ago by Freimark.<sup>1</sup> He writes: 'Die beruhigende Wirkung, die die Gegenwart des Geliebten auf die Liebende ausübt, die umgekehrt auch der Mann bei Anwesenheit der Geliebten verspürt und die vielfach auch von Briefen, Haarlocken und Bändern ausgehend empfunden wird, fühlt auch die Somnambule von Gegenständen, die der Magnetiseur berührt, auf sich einströmen.' ('The soothing effect that the presence of the lover exercises over the loved person, which also the man detects in the presence of his mistress and which is often experienced from the contact of letters, ribbons, and locks of hair, the somnambulist also feels stream in on to her from objects that have been touched by the hypnotiser.')

In another passage<sup>2</sup> he makes the following generalisation, which is in full accord with the view here maintained: 'Überhaupt steht die Somnambule zu ihrem Magnetiseur in einem Rapport, der ganz dem zwischen Liebenden gleicht.' ('The somnambulist stands altogether to her hypnotiser in a *rapport* which is exactly similar to that between lovers.')

When the emotional state in hypnosis is allowed free expression, then there frequently occurs the condition technically known as 'ecstasy,' of which Baragnon,<sup>3</sup> Despine,<sup>4</sup> Philips,<sup>5</sup> and many others of the older writers have given graphic descriptions; the last-mentioned author says that in it 'les mouvements des bras et les soupirs qui s'échappaient de leur poitrine étaient ceux qui caractérisent le ravissement porté au plus haut degré.' The resemblance of the condition to the *attitudes passionnelles* of the Salpêtrière hysterical attack is evident.

Everything goes to shew that the sexual attraction experienced by the subject in hypnosis is in the majority of cases an *unconscious* one, and that he is not commonly aware of actual erotic sensations; nevertheless, the possibility—or, as it is usually expressed, the danger—of erotic manifestations and complications has rarely been lost sight of by the various opponents of hypnotism. The first outburst of opposition

<sup>1</sup> Freimark, 'Okkultismus und Sexualität,' S. 50.

<sup>2</sup> *Ibid.*, *op. cit.*, S. 48. See also Wirth, 'Théorie des Somnambulismus,' S. 185, where the sexual nature of hypnosis is clearly indicated.

<sup>3</sup> Baragnon, *loc. cit.*

<sup>4</sup> P. Despine, de Marseille, 'Étude scientifique sur le somnambulisme,' 1850, p. 186.

<sup>5</sup> Philips (Durand de Gros). 'Cours théorique et pratique de braidisme,' 1860, p. 149.

against hypnotism, the notorious Commission appointed by Louis XVI., in 1784, to inquire into Mesmer's practices, laid especial stress on this. In Bailly's secret report the following passage occurs:<sup>1</sup> 'Les médecins-commissaires, présents et attentifs au traitement, ont observé avec soin ce qui s'y passe. Quand cette espèce de crise se prépare, le visage s'enflamme par degrés, l'œil devient ardent, et c'est le signe par lequel la nature annonce le désir. On voit la femme baisser la tête, porter la main au front et aux yeux pour les couvrir; sa pudeur habituelle veille *à son insu* et lui inspire le soin de se cacher. Cependant, la crise continue et l'œil se trouble; c'est un signe non équivoque du désordre total des sens. *Ce désordre peut n'être point aperçu par celle qui l'éprouve*; mais il n'a point échappé au regard observateur des médecins. Dès que ce signe a été manifesté, les paupières deviennent humides, la respiration est courte, entrecoupée; la poitrine s'élève et s'abaisse rapidement; les convulsions s'établissent, ainsi que les mouvements précipités et brusques, ou des membres ou du corps entier. Chez les femmes vives et sensibles, le dernier degré, le terme de la plus douce des émotions est souvent une convulsion; à cet état succèdent la langueur, l'abattement, une sorte de sommeil des sens qui est un repos nécessaire après une forte agitation.' The words italicised (by the present writer) shew that during hypnosis the most obvious erotic manifestations may run their full course without the subject at all recognising the nature of them; it need hardly be added, however, that Mesmer's manipulations, designed to provoke 'curative convulsions,' were especially adapted to elicit such manifestations, which rarely occur in hypnosis as carried out at the present day. Still it is not without significance that the best hypnotic and spiritistic mediums are usually women, and we can only give the same explanation for this that Baragnon<sup>2</sup> did to his question, 'Pourquoi préfère-t-on employer la plupart du temps des femmes pour les soumettre aux expériences?'—namely, that 'il est un principe que nous croyons tout indépendant de fluide vital; c'est la domination d'un sexe sur l'autre, ainsi que Dieu l'a voulu.'<sup>3</sup>

<sup>1</sup> 'Rapport des commissaires chargés par le roi de l'examen du magnétisme animal,' 1784.

<sup>2</sup> Baragnon, *op. cit.*, pp. 89, 90.

<sup>3</sup> It is not very rare for mediumistic *séances* to degenerate into orgies, the sexual undercurrent, which is always present, here rising to the surface.

Ever since Mesmer's time the chief objection made to the use of hypnotism has been the possibility of erotic excitement, or, as Loos more guardedly expressed it,<sup>1</sup> that 'überhaupt das Entstehen einer gewissen Neigung des Hypnotisierten zu dem Operateur zu verfolgen ist' ('that in general a certain inclination of the hypnotised person to the hypnotiser is to be feared'). This fear has a certain justification in fact, inasmuch as rape is practically the only crime that can be facilitated by hypnotism;<sup>2</sup> in almost the only instance of any other crime, the celebrated Jane Weiss case,<sup>3</sup> significantly enough, it could not be decided whether the influence of the inciter was to be attributed to hypnotism or to normal love. As the result of experience gained from psycho-analysis of patients in whom thoughts about hypnotism played a part, I am convinced that the deepest cause of both the popular and the medical prejudice against the use of hypnotism in therapeutics is the dimly recognised perception of its sexual nature. This prejudice is rationalised in all sorts of ways by the opponents of hypnotism; it finds its simplest expression in the view that 'it cannot be right for any one to be placed *in the power of a second person.*'

The development of the opinions held as to the nature of hypnotism, the beliefs in magnetic fluid,<sup>4</sup> vital fluid, nervous fluid, all-pervading ether, and, finally, in a special psychical influence of the hypnotist, form an interesting chapter which would bear much exposition in the present connection, did space permit.<sup>5</sup> The concrete vital fluid in question, which the

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This happened in Munich, where the notorious so-called Gesellschaft für experimentelle Psychologie was cleared by the police. One reads of mediums becoming pregnant as the result of influences reaching them from the fourth dimension, and so on.

<sup>1</sup> Loos, 'Der Hypnotismus und die Suggestion im gerichtlich-medizinischer Beleuchtung,' Inaug. Diss., Berlin, 1894, S. 19.

<sup>2</sup> Gilles de la Tourette, 'L'hypnotisme et les états analogues au point de vue médico-légal,' 1889.

<sup>3</sup> Tarde, *Archives d'anthropologie criminelle*, 1891, t. vi., p. 458.

<sup>4</sup> This view, commonly ascribed to Mesmer, who most precisely formulated it, originated, of course, with Paracelsus, and was developed by Fludd, Maxwell, Van Helmont, and other occultists before Mesmer.

<sup>5</sup> A typical passage is that of Du Prel's ('Die ödiche Individualität des Menschen,' *Uebersinnliche Welt*, 1899, Jahrg. iii., Heft 3): 'Bei jeder magnetischen Heilung überträgt der Magnetiseur seine Lebenskraft, also seine eigentliche Essenz auf den Magnetisierten.' ['In every magnetic (hypnotic) cure the hypnotist transfers his vital force, his very essence, on to the person hypnotised.']

operator projects into the subject, is one that has played an extensive part in the phantasy of mankind, and, in an increasingly disguised form, still does so in folk-lore, superstitions, and psychoneurotic symptoms. I will briefly refer to one point—namely, the significance attached to the power of the eye in hypnotism. The magnetic fluid was principally emitted from the operator's eye, and in many modern procedures fixation of the subject by a steady gaze, producing the so-called *fascination du regard*, still plays an important part. Now, belief in the influence of the human eye, for good or ill, has at all ages been very general, and still lingers in our customs, superstitions, and religious observations;<sup>1</sup> it can be shewn beyond doubt that this takes its origin in the eye and its glance being symbolically regarded as the expression of the male organ and its function. In a patient of mine, whose chief complaint was the obsessive thought that if he looked at any one he might harmfully influence him, this fact was clearly to be demonstrated; as he had never heard of the existence of this symbolism, it was with him a spontaneous, and of course unconscious, creation of his phantasy. The term 'animal magnetism' itself, for so long applied to hypnotism, is ultimately derived from a more primitive source than the metal magnet, though it was actually taken from the latter.<sup>2</sup> The Greeks designated a magnet as *μάγνης λίθος*, 'the influencing stone.' The word magnet comes to us, *via* the Greek, from two Phœnician words, *mag* and *naz*; the former means 'a big powerful man,' the latter 'that which flows out and influences something else.' It does not need much divining capacity to comprehend what the early conception of human magnetism originally signified; the word has by a devious route come back to its own in our phrase 'a lover's magnetic charm.' Thus magnetism was first applied to a human attribute, then to inanimate substances, and finally, *via* the second connotation, was used to designate, as 'animal magnetism,' the hypnotic process.

The problem can be studied from another side by considering the relation of the subject to the operator, not during the hypnosis itself, but in between the *séances*, a matter that

<sup>1</sup> See the remarkable work of Seligmann, 'Der böse Blick und Verwandtes,' Zwei Bände, 1910.

<sup>2</sup> It is interesting to note that the word 'coition' was formerly used in English to denote the coming together of magnetised substances—*e.g.*, by Sir Thomas Browne, 'Vulgar Errors,' book ii., ch. ii., par. 8.



Janet has made an especially careful study of. He established the fact that this relation continues its influence in certain precise ways for some time after a given *séance*. After hypnosis has been induced several times two changes in particular become apparent:<sup>1</sup> (1) Any preceding fear of, or repugnance for, hypnosis is now replaced by a passionate desire for its repetition; (2) the patient talks much about the physician, and is preoccupied with him in an evidently excessive fashion. Three stages may be distinguished, which Janet names as follows:<sup>2</sup> (1) A period of *fatigue*, which is usually very short, though it may occasionally last for as long as a day or two; (2) a period of *somnambulant influence*, which usually lasts for some days or weeks, and (3) a period of *somnambulant passion*, which lasts till the next *séance*. The second period, that of *somnambulant influence*, is marked by a considerable gain in the sense of well-being, and in a more or less complete remission of the symptoms and stigmata; the patient's capacity for mental synthesis is obviously greatly increased. While it lasts he thinks much about the physician, but feels no need or desire for another *séance*. Janet expressly states<sup>3</sup> that this period is quite independent of any verbal suggestions made during hypnosis; it is therefore to be attributed to the more general influence that we have called 'affective suggestion.' The third period, that of *somnambulant passion*, consists in a recurrence of the previous symptoms and difficulties, with a restless craving to be hypnotised anew. These manifestations are not only independent of all verbal suggestions, but frequently are exactly opposed to such suggestions, given as strongly as possible;<sup>4</sup> they are, therefore, inherent in the circumstances. Janet compares the craving with that of the morphino-maniac,<sup>5</sup> and justly remarks that, like this, it is due not directly to the active agent, but to the absence of this; the significance of this will be evident to those familiar with Abraham's able paper on alcoholism.<sup>6</sup> The craving may at times be so severe as to produce a state of complete mental confusion.<sup>7</sup>

The attitude of the patient to the physician during these intervals is not the same in all cases. Sometimes, for instance,

<sup>1</sup> Janet, *op. cit.*, p. 425.

<sup>3</sup> *Ibid.*, *op. cit.*, p. 444.

<sup>5</sup> *Ibid.*, *op. cit.*, pp. 429, 455.

<sup>6</sup> Abraham, 'Die psychologischen Beziehungen zwischen Sexualität und Alkoholismus,' *Zeitschr. f. Sexualwissenschaft*, 1908, Nr. 8.

<sup>7</sup> Janet, *op. cit.*, p. 437.

<sup>2</sup> *Ibid.*, *op. cit.*, pp. 426-428.

<sup>4</sup> *Ibid.*, *loc. cit.*

fear and dread may be the most prominent traits in it; one of Janet's patients trembled and blanched whenever he caught sight of his physician.<sup>1</sup> This, however, is rare, and Janet states that he has seen it in only two or three cases. More often fear may be mixed with some other emotion. Thus:<sup>2</sup> 'Un sujet, tout en aimant son hypnotiseur, se rend compte de sa soumission qu'il accepte plus ou moins facilement. Il éprouve une affection mêlée de crainte pour un être beaucoup plus puissant que lui.' Since Freud's important work on the morbid anxiety states (*Angstzustände*),<sup>3</sup> we know that morbid dread is always the expression of repressed sexual desire—*i.e.*, of sexual desire that has been stimulated under circumstances when it cannot reach consciousness. The case just described evidently belongs to Ferenczi's class of 'paternal hypnosis.'

The most typical sentiment, however, is that of affection. Janet writes:<sup>4</sup> 'Ce que l'on observe le plus souvent c'est un sentiment d'affection qui peut très rapidement devenir extrêmement vif. Le sujet se sent heureux quand il voit son hypnotiseur et quand il lui parle; il éprouve du plaisir à penser à lui et par conséquent ne tarde pas à l'aimer beaucoup.' Referring to hysterics he says:<sup>5</sup> 'Celui qui s'occupe d'elles n'est plus à leurs yeux un homme ordinaire; il prend une situation prépondérante auprès de laquelle rien ne peut entrer en balance. . . . Mais, en revanche, elles se montrent extrêmement exigeantes; elles veulent que leur médecin soit tout à elles, ne s'occupe d'aucune autre personne, vienne les voir à chaque instant, demeure longtemps avec elles et prenne à cœur leurs moindres préoccupations.' This exacting jealousy is a very frequent and well-known occurrence; it was commented on by many of the old magnetisers.<sup>6</sup>

Janet finds that his patients' attitude towards him is frequently that of a child towards its elders:<sup>7</sup> 'Le plus souvent les sujets se sentent humbles et petits et se comparent à des enfants devant des parents plus âgés.' Again, a sense of guilt or shame

<sup>1</sup> Janet, *op. cit.*, p. 446.

<sup>2</sup> *Ibid.*, *op. cit.*, p. 447.

<sup>3</sup> Freud, 'Sammlung kleiner Schriften zur Neurosenlehre,' 1906. See Ernest Jones, 'On the Nightmare,' *American Journal of Insanity*, January, 1910, p. 383, and also Chapter XXVII. of this book.

<sup>4</sup> Janet, *op. cit.*, p. 446.

<sup>5</sup> *Ibid.*, 'Stigmates mentaux des hystériques,' 1893, p. 158.

<sup>6</sup> *E.g.*, De Lausanne, *op. cit.*, p. 297. A. Despine, 'Traitement,' etc., *op. cit.*, p. 105.

<sup>7</sup> Janet, 'Névroses,' etc., p. 447.

was commonly met with: 'Je suis,' dit Berthe, 'comme un enfant qui a fait quelque sottise et qui a peur que sa mère le sache.'<sup>1</sup> 'Gu, qui après un somnambulisme, n'a plus de contracture de bras pendant deux jours, se sent gênée pendant ces deux jours comme si quelqu'un était auprès d'elle et la surveillait, comme si elle ne pouvait jamais être seule; elle a même à ce propos des sentiments de pudeur difficiles à décrire.'<sup>2</sup>

The sentiment towards the physician changes as the period of somnambulatory influence is replaced by that of somnambulatory passion. He still occupies their thoughts, but the patients now become complaining, ill-tempered, and querulous. The sense of being constantly accompanied by the physician, even in his absence, is exchanged for one of intense loneliness. Janet writes:<sup>3</sup> 'J'insiste sur cette expression "seul" que répètent tous les malades et sur les graves confusions mentales, que cet abandon singulier peut déterminer.'

It need hardly be said that all these observations are in full accord with the thesis sustained in this paper. Warm affection, dread, jealousy, veneration, exactingness, are all derivatives of the psychosexual group of activities. Morbid loneliness is directly comparable with the feeling of voidness, the sense of something essential lacking, experienced by devoted lovers who are parted. Janet himself does not fully agree with the sexual interpretation, evidently because he adopts an extremely limited conception of the sphere of sexuality, as in all his works. His definition of love, as 'l'amour proprement dit qui est en rapport avec les fonctions génitales et les désirs érotiques,'<sup>4</sup> would be repudiated on the one hand by a great number of lovers, and on the other by all psychologists who know, as the Mesmer Commission pointed out over a century ago, that complete sexual gratification may be attained without the subject being for a moment aware of the libidinous nature of the process. Janet brings three objections to the sexual interpretation:<sup>5</sup> (1) In rare cases no affectionate sentiment is evident, and the attachment may shew itself purely as a filial devotion, as a feeling of respect, of superstitious terror, or even as a maternal sentiment.<sup>6</sup> (2) The patient may

<sup>1</sup> Janet, *loc. cit.*      <sup>2</sup> *Ibid.*, *op. cit.*, p. 448.      <sup>3</sup> *Ibid.*, *op. cit.*, p. 454.

<sup>4</sup> *Ibid.*, *op. cit.*, p. 466.

<sup>5</sup> *Ibid.*, *op. cit.*, p. 457.

<sup>6</sup> Not italicised in the original. This exclusion of the maternal impulse from the psychosexual aspect of the reproductive instinct is characteristic of the narrower conception of the latter.

at the same time be conducting an amorous passion with a lover. (When so, it is surely to be expected that the two processes are to be distinguished, for hypnotic *séances* do not provide the same conditions for openly amorous manifestations as do other circumstances.) (3) The atypical nature of the affection, particularly its periodicity, and its occurrence in such different patients. It is to be observed, however, that the patients had this in common, that they all suffered from psychoneuroses. As to the periodicity, this is so characteristic of amorous gratification, that the nature of the condition could have been suspected from it alone. A restless sense of something essential lacking, with a passionate craving to go through a given experience with a certain person; this lasting until some minutes or hours of soul-mingling intimacy occur, which is followed after a temporary stage of slight fatigue by a sense of blissful well-being, and freedom from unhappiness: could anything point more directly to the source of the whole process? The remark of Janet's with which we can most cordially agree is: 'Il s'agit dans tous ces cas d'une espèce d'amour; mais il est essentiel de remarquer qu'il s'agit d'une espèce très particulière.' The particularity lies in the fact that the love emotion is repressed from consciousness, and therefore does not manifest itself openly. When the conscious emotions are traced to their sources in the unconscious, there is no doubt left as to their nature.

Janet has clearly shewn that conditions identical with those of somnambulant influence and passion are met with quite independently of hypnotism, and occur as spontaneous manifestations in psychasthenia,<sup>2</sup> particularly those he has described under the names of 'besoin de direction,'<sup>3</sup> 'besoin d'aimer,'<sup>4</sup> 'besoin d'être aimé.'<sup>5</sup> He considers that in both cases it is a question of a primary lowering of mental tension, but, as we have seen above, there are other explanations possible.

After these circuitous but instructive by-paths we have to return to the main subject of this paper—namely, the therapeutic effect of suggestion. As this is here dealt with from the standpoint of psycho-analytic experience, the relation of suggestion to psycho-analysis will first be defined. As was

<sup>1</sup> Janet, *op. cit.*, p. 466.

<sup>2</sup> *Ibid.*, *op. cit.*, p. 467.

<sup>3</sup> *Ibid.*, *op. cit.*, p. 210. 'Les obsessions et la psychasthénie,' 1903, t. i. p. 382.

<sup>4</sup> *Ibid.*, 'Obsessions,' etc., p. 388.

<sup>5</sup> *Ibid.*, *op. cit.*, p. 389.

explained above, treatment of any case of psychoneurosis necessarily brings with it the transference on to the physician of various repressed affects, which have arisen in past experiences of the patient with other people. These affective processes are in psycho-analysis traced to their source, when the patient realises their evidently sexual nature. The wishes, desires, and so on, which previously had found unsatisfactory expression in the creation of various symptoms, are now free to be applied, through the process of sublimation, to non-sexual, social aims. As Freud puts it,<sup>1</sup> 'The symptoms, which, to use a simile from chemistry, are the precipitates of earlier love experiences (in the widest sense), can only be dissolved in the higher temperature of the experience of transference and transformed into other psychic products. The physician plays in this reaction, to use an excellent expression of S. Ferenczi, the rôle of a *catalytic ferment*, which temporarily attracts to itself the affect which has become free in the course of the process.'

The criticism sometimes made of psycho-analytic treatment, that its brilliant results are brought about merely by suggestion, betrays a complete ignorance of what actually happens, and is easily answered by the following objective consideration. What can be accomplished by the use of suggestion depends to some extent on the physician, and few can emulate the success obtained by masters of suggestion like Babinski and Dubois. Every one, however, may determine how much he personally can accomplish in this way, and thus has a clear standard with which to compare the results he can obtain by other methods. Like the great majority of the Freud school, I had practised for some years with various forms of suggestion and hypnotism before I learned the psycho-analytic method, and I know indubitably that I am quite unable by the use of any other form of treatment to obtain the results that this method gives me. It would be absurd to infer that suggestion is the influence at work in both cases, and that it is more successful when it is deliberately observed and neutralised, than when it is the sole mode of treatment.

Freud<sup>2</sup> and Ferenczi<sup>3</sup> hold that transference of unconscious sexual affects plays the most important part in all forms of

<sup>1</sup> Freud, *American Journal of Psychology*, 1910, p. 215.

<sup>2</sup> *Ibid.*, 'Sammlung,' etc., 2<sup>e</sup> Folge, S. 105.

<sup>3</sup> Ferenczi, *op. cit.*, S. 433. 434.

treatment of the psychoneuroses, with the exception of the psycho-analytic. In the latter it is merely a stage passed through in the cure—though an important and essential one—but in the others—electro-therapy, baths, massage,<sup>1</sup> sanatorium treatment, persuasion, etc.—it is not only the main agent in bringing about improvement, but it often remains as a more or less lasting effect of the treatment. The patient, therefore, exchanges one symptom for another (psychosexual dependence on the physician), the ill consequences of which we shall presently note. The occurrence of this transference has been brought forward as a reproach to the psycho-analytic method, though such writers significantly omit to mention the negative forms of sexual affect thus transferred to the physician—hate, jealousy, envy, and so on. The transference is, however, not peculiar to psycho-analysis, but occurs in all forms of treatment of the psychoneuroses; as Freud says,<sup>2</sup> 'Die psychoanalytische Kur schafft die Übertragung nicht, sie deckt sie bloss, wie anderes im Seelenleben Verborgene, auf.' ('The psycho-analytic treatment does not create the transference, but simply uncovers it, as it does other hidden mental states.') The only difference in this respect between other forms of treatment and the psycho-analytic one is that the latter does not encourage blind transference and then allow it to last, but on the contrary makes the physician and patient aware of what is happening, so that the process can be understood, controlled, and resolved. Ferenczi pertinently remarks:<sup>3</sup> 'Wem die Übertragungen gefährlich vorkommen, der muss die nichtanalytischen Behandlungsmethoden, die die Übertragungen verstärken, viel strenger verdammen, als die Psychoanalyse, die dieselben ehemöglichst aufzudecken und zu lösen sucht.' ('The critics who look on these transferences as dangerous should condemn the non-analytic modes of treatment more severely than the psycho-analytic method, since the former really intensify the transference, while the latter strives to uncover them and to resolve them as soon as possible.')

As I have elsewhere remarked,<sup>4</sup> 'the most difficult and yet most important part of the analysis lies in dealing with the

<sup>1</sup> Sadger (*Jahrb. der Psychoanalyse*, Bd. iii., S. 526-528) has described the various ways in which physical therapeutic agents, heat and cold, massage, and so on, stimulate and gratify individual components of the sexual instinct (skin and muscle erotism, etc.).

<sup>2</sup> Freud, *loc. cit.*

<sup>3</sup> Ferenczi, *op. cit.*, S. 435.

<sup>4</sup> Chapter XIV., p. 287.

subject of transference, and there is nothing on which the success of an analysis more depends.' What one essentially aims at in a psycho-analysis is the overcoming of the patient's 'resistances' against the making conscious of his previously unconscious mental processes, with the object of establishing a free flow of feeling between the two regions of the mind. Now, as the analysis proceeds, these resistances assume more and more the guise of transferences; a block in the flow of associations is always the sign of a preconscious thought concerning the physician. That is to say, the repressed material which is being explored always finds at the last moment some point of connection with a thought concerning the physician, and this thought is kept back from consciousness. The deeper analysis has, therefore, invariably to proceed *via* transferences. This is a paradoxical finding—that transference, which in other forms of psychotherapy is the main agent in helping recovery—from the symptoms, if not from the disorder—should in psycho-analysis act as the chief obstruction to the aim of the treatment. The explanation of this curious state of affairs is given by Freud<sup>1</sup> in a very instructive article, where he points out that it is true of only some forms of transference—namely, the transference of negative affects or of unconscious erotic affects; the other, conscious affects transferred are the carriers of success, as in other modes of treatment. In psycho-analysis, however, the patient's final independence of the transference situation is brought about by using the conscious transferences to make the patient perform an internal psychical work that necessarily leads to a permanent improvement in his psychical state. Freud<sup>2</sup> summarises the situation in the following remark: 'Es ist unleugbar, dass die Bezwungung der Übertragungsphänomene dem Psychoanalytiker die grössten Schwierigkeiten bereitet, aber man darf nicht vergessen, dass gerade sie uns den unschätzbaren Dienst erweisen, die verborgenen und vergessenen Liebesregungen der Kranken aktuell und manifest zu machen, denn schliesslich kann niemand *in absentia* oder *in effigie* erschlagen werden.' ('It is undeniable that in his endeavour to emerge victorious over the transference phenomenon the psycho-analyst is faced with the greatest difficulties, but it should not be forgotten that it is just these

<sup>1</sup> Freud, 'Zur Dynamik der Übertragung,' *Zentralblatt für Psychoanalyse*, Jahrg. ii., S. 171.

<sup>2</sup> *Ibid.*, *op. cit.*, S. 173.

difficulties that render us the invaluable service of making the patient's buried and forgotten love-excitations current and manifest, for in the last resort no one can be vanquished *in absentia* or *in effigie*.<sup>1</sup>)

It is well known that Breuer and Freud's first explorations, which subsequently led to the development of the psycho-analytic method, were carried out when the patient was in a state of hypnosis, and some workers have attempted to combine psycho-analytic explorations with hypnotism. Indeed, it is often asked why this should not be regularly done, a natural question in view of the heightened possibilities offered by hypnosis for the widening of the field of memory; since Breuer's time, Janet, Morton Prince, and many others have used hypnosis for the recovery of forgotten memories in hysteria with a therapeutic as well as a diagnostic purpose. The reason why the aims of psycho-analysis have proved to be incompatible with the use of hypnotism should be plain from the preceding considerations on the nature of the latter. Hypnotism, namely, facilitates the recovery of preconscious memories only up to a certain point; it imposes an absolute barrier to the exploration of the unconscious proper, where the true roots of the neurosis lie. It does this through the use that the unconscious makes, to defend itself by means of resistances, of the transference underlying the possibility of hypnosis. Speaking of his early investigations with the aid of hypnotism, Freud<sup>1</sup> says: 'Ich gestehe, die Arbeit ging damals leichter und angenehmer, auch in viel kürzerer Zeit, vor sich. Die Erfolge aber waren launenhaft und nicht andauernd; darum liess ich endlich die Hypnose fallen. Und dann verstand ich, dass eine Einsicht in die Dynamik dieser Affektionen nicht möglich gewesen war, solange man sich der Hypnose bedient hatte. Dieser Zustand wusste gerade die Existenz des Widerstandes<sup>2</sup> der Wahrnehmung des Arztes zu entziehen. Er schob ihn zurück, machte ein gewisses Gebiet für die analytische Arbeit frei und staute ihn an den Grenzen dieses Gebietes so auf, dass er undurchdringlich wurde, ähnlich wie es der Zweifel bei der Zwangsneurose tut. Darum durfte ich auch sagen, die eigentliche

<sup>1</sup> Freud, 'Vorlesungen zur Einführung in die Psychoanalyse,' Dritter Teil: 'Allgemeine Neurosenlehre,' 1917, S. 332.

<sup>2</sup> It should be remembered that the fact of this resistance (against recovery, and therefore against radical treatment) is the foundation of Freud's theory of the neuroses.



Psychoanalyse hat mit dem Verzicht auf die Hilfe der Hypnose eingesetzt.' ('I admit that the work went then more easily and agreeably, also that the time taken was much shorter. The results, however, were capricious and not lasting, so that finally I abandoned the use of pyhnosis. And then I understood that it had been impossible to obtain any insight into the dynamics of these affections so long as I used hypnosis. This state successfully concealed from the physician's perception the very existence of the patient's resistance. It pushed it into the background, made a certain region free for the analytic work, and so dammed it on the borders of this region as to make it impenetrable, just as doubt does in the case of the obsessional neurosis. For this reason I might also say that psycho-analysis proper originated only when the help of hypnosis was relinquished.')

Some generally familiar facts of observation appear more comprehensible in the light of the foregoing considerations. First, the fact that patients find benefit in some physician's treatment, and not in that of others. This merely means that the first physician's personality is such that transference of repressed affects on to him is possible to the patient, while with another it is impossible; the patient then finds the latter 'unsympathetic,' and soon leaves him. When the transference succeeds the patient is benefited, in the way Janet excellently describes when discussing somnambule influence; the repressed affects find a more suitable object to fasten on than the symptoms. The underlying abnormal mechanisms, however, remain the same, the complexes merely undergo a little further displacement, and are not resolved. That it is the transference, or 'affective suggestion,' which is responsible for the beneficial result is evident from Janet's observations on hypnotised patients. He found a close correspondence between the subsequent somnambule influence and the extent of therapeutic improvement, and draws the obvious inference that the beneficial effects are due, not to the physical results of hypnosis, but to the patient's absorption in the thought of a particular person.<sup>1</sup> In certain rare cases, particularly with patients who have been hypnotised by several different people, this preoccupation may not develop, and then no therapeutic benefit occurs. 'L'apparition de l'influence et de la passion somnambulique, quels que soient les inconvénients qu'elles puissent présenter,

<sup>1</sup> Janet, 'Névroses,' etc., pp. 444. 445.

m'a semblé fort importante pour le traitement des malades; c'est à ce moment que le médecin s'est emparé de leur esprit et commence à le modifier. Quand ces faits n'apparaissent en aucune manière, c'est que la modification mentale déterminée par l'hypnotisme est tout à fait momentanée et que le sujet reste au fond ce qu'il était.<sup>1</sup> Referring to cases that do not shew these manifestations, he writes:<sup>2</sup> 'Il faut ajouter que le somnambulisme n'a plus guère chez eux aucune influence thérapeutique. Sans doute, on peut quelquefois par une seule suggestion faite pendant un état hypnotique momentané faire disparaître, au moins pour quelque temps, un petit accident hystérique dont la durée n'a pas encore été longue, une chorée ou une contracture récente. Mais pour ma part je n'ai pas vu guérir des accidents hystériques graves et de longue durée sans une éducation du sujet dans laquelle ces phénomènes d'influence occupent une place prépondérante et les sujets qui ne présentaient pas ces phénomènes d'influence ne parvenaient pas à se transformer profondément.' This last emphatic sentence shews the decisive importance that somnambulant influence—*i.e.*, preoccupation with the thought of the physician, transference, *Übertragung*—has for the beneficial results of hypnotic treatment, and Janet's extensive experience agrees with that of the Freudian school in accepting the indispensability of the process. Confirmatory of this conclusion is the generally recognised fact that when a patient really recovers from his neurosis his abnormal suggestibility—*i.e.*, his capacity for transference—greatly diminishes or ceases.

When a patient passes into the hands of a strange physician, a conflict of influences takes place, which lasts until the thought of the first one fades, a fact noted nearly a hundred years ago by Deleuze.<sup>3</sup> In connection with this Janet writes:<sup>4</sup> 'Il est curieux de voir chez ces sujets comme chez les précédents, chez ceux en un mot qui pour une raison ou pour une autre ne conservent pas la préoccupation de l'hypnotiseur, les somnambulismes provoqués rester inutiles, n'être suivis d'aucun développement de la sensibilité ni de la mémoire, n'amener aucune satisfaction et ne déterminer aucun besoin. Cette remarque nous montre bien que ce n'est pas uniquement le phénomène physique du sommeil, la perturbation nerveuse de l'hypnotisme,

<sup>1</sup> Janet, *op. cit.*, p. 430.

<sup>2</sup> *Ibid.*, *op. cit.*, p. 452.

<sup>3</sup> Deleuze, 'Instruction pratique sur le magnétisme animal,' 1825, p. 109.

<sup>4</sup> Janet, *op. cit.*, p. 453.

qui détermine ces changements et ces phases. C'est une certaine pensée à propos d'une personne particulière qui envahit l'esprit du sujet et qui dirige cet esprit.'

In spite of the exaggerated claims put forward by professional hypnotists and others, it is widely recognised that the *permanent* results obtained by the use of hypnotism and suggestion leave a great deal to be desired. Mild cases of psychoneurosis may without doubt be lastingly benefited in this way, though even here success is very inconstant and uncertain, but as regards the more severe cases critical experience has an all too dissolving effect on the thoughtless optimism that is often preached. Again and again relapses occur, one symptom is removed only for another to take its place, and chronic nervous invalidism in spite of all efforts is a spectacle familiar enough to every medical practitioner. In many places<sup>1</sup> Janet, whose work has largely lain amongst these chronic cases, despairingly laments the temporary effect of the most arduous endeavours, and describes how a therapeutic edifice, patiently built up by the labour of many weeks, may in a few moments crumble into nothingness. These facts are now comprehensible in the light of the explanations developed above. The suggestion, or transference, acts by allowing affective processes, which had previously found an inadequate outlet in the neurotic symptoms, to become attached to a more suitable object—namely, the person of the physician. In severe cases their tendency to flow in the old channels is so fixed that the new outlet can be kept efficient only by renewal of the opportunity for transference, in the form of close intercourse with the physician and maintained interest on his part. As was mentioned above, the whole process psychologically consists merely in the replacement of one set of symptoms by another, dependence on the physician, and the underlying pathogenic agents remain unaltered; with psycho-analysis, on the other hand, these agents are permanently deprived of their power for harm, and their activity is set free to be devoted to more useful social functions. Janet repeatedly deplores the unsatisfactory nature of the psychical dependence that is so frequently set up; he says, for instance:<sup>2</sup> 'Certain auteurs pensent que l'on peut suggérer la volonté et la liberté; il y a, à notre avis, une erreur de raisonnement et d'observation que

<sup>1</sup> Janet, *op. cit.*, pp. 59, 429, 444, 472, 473.

<sup>2</sup> *Ibid.*, *op. cit.*, p. 194.

nous avons souvent signalée. Le malade suggéré fera semblant de vous résister par obéissance, mais il ne sera pas véritablement libre; au contraire, la suggestion développe l'activité automatique et subconsciente et diminue les derniers efforts volontaires. . . . Cette indifférence, cette renonciation à tout contrôle personnel est des plus dangereuses, et elle ne contribue pas peu à augmenter l'aboulie fondamentale de ces malades. En un mot, la suggestion, comme tout médicament dangereux, est utile dans certain cas . . . ; mais en dehors de son rôle, elle est extrêmement nuisible, car elle ne peut qu'augmenter la désagrégation mentale, principe de tous les accidents.'

Another matter capable of explanation on the same lines is the resistance shewn by patients to psychotherapeutic treatment. This may arise either from a general objection of the patient to surrender his symptoms, which is usually an unconscious one, or from an 'antipathy' towards a given physician; the latter event denotes that the patient's complexes are of such a kind as to make the physician in question an unsuitable object on whom to transfer their affects. This resistance is often especially marked in the case of hypnotic treatment, towards which many shew an invincible repugnance. It frequently happens that the patient says he will consent to have hypnosis induced, but that this is found extremely difficult or impossible. The cause of this is then an unconscious resistance to being hypnotised; as Freud puts it, 'Das Nichthypnotisierbarein bedeutet ein unbewusstes Nichthypnotisiertwerdenwollen.' ('The inability to be hypnotised signifies an unconscious disinclination to be hypnotised.') It is based on a fear of self-surrender, the meaning of which was pointed out above in connection with the popular prejudice against hypnotism. In other cases the resistance is less and the patient is hypnotised, though unwillingly. The resistance then shews itself, as Janet has described,<sup>1</sup> in an absence of the subsequent somnambule influence, and therefore in a failure to obtain beneficial results from the procedure.

I would attribute to a similar process the well-known refractoriness to hypnotism that most insane patients shew, particularly those suffering from paraphrenia (*dementia præcox*). In paraphrenia there takes place a projection of the patient's internal conflicts on to the outside world, the very opposite of the introjection characteristic of the psychoneuroses. The

<sup>1</sup> Janet, *op. cit.*, pp. 452, 453.

paraphrenic, so far from having the exalted capacity of the neurotic to absorb the environment as part of his ego, and to transfer to it his repressed affective processes, has less capacity in this direction than the normal. In the scale of psychosis, normal, and neurosis we thus see that there is on the whole a gradation in the readiness with which affective processes can be transferred to the environment, and, correspondingly, a gradation in the capacity to be affected by suggestion or to be hypnotised.

In the course of psycho-analytic treatment the resistances met with are in some cases practically impossible to overcome. They are then as a rule due, not solely to internal conflict, but to gravely defective harmony in the environment. What Freud calls the 'secondary function of neuroses' is the capacity they have to be made use of by the patient to obtain something he otherwise could not. Every practitioner knows the service a nervous illness often is to a patient in dealing with relatives, over whose heads the patient holds it almost as a threat; this process may be consciously or unconsciously carried out. Under such circumstances the patient's deep-rooted objection to getting better may defy all therapeutic measures. Some time ago I had the opportunity of demonstrating to myself that this form of resistance to recovery goes hand in hand with refractoriness to hypnotism. With two patients the domestic circumstances were such that insuperable resistances were met with in attempting to bring about recovery. In one case recovery meant again taking up life with an alcoholic husband who was extremely repugnant to the patient; in the other case the circumstances were more complicated. The patients, feeling from a sense of duty that they ought to make every effort to get better, asked me to treat them by hypnotism. If I had reflected on the psychological conditions present, or had read Ferenczi's illuminating paper, I would have known at the outset that such an attempt must fail. We often learn most from our errors, however, and fortunately for the experiment I unthinkingly consented to the patients' proposal. Both patients proved absolutely refractory to hypnotism, although on general grounds success might have been expected. I interpret these observations as forming some empirical confirmation of the considerations adduced above—namely, that willingness to be hypnotised corresponds with willingness to give up the unconscious gratification afforded by the symptoms, either per-

manently or only so long as the physician consents to the transference.

The relation of suggestion to hysteria is also a question that discloses new aspects in the light of the considerations here advanced. It has long been known that between hysteria and suggestion there exists a close association. When the teaching of Charcot, that hypnotism is only a characteristic manifestation of hysteria, was followed by that of the Nancy school, shewing that hypnotism is only one form of suggestion, it was an easy step to the inference that hysteria itself, or rather its symptoms, is nothing more than a product of suggestion.<sup>1</sup> This conclusion, enunciated by Babinski,<sup>2</sup> and accepted by most of the Paris school, though by hardly any neurologists outside France, contains in one sense a germ of truth, but in the sense intended by Babinski it is demonstrably incorrect. The limitations and errors of Babinski's views are too manifold to be dealt with in a paper devoted to another subject, but it may fairly be said that they largely arise from attention being directed to the end-product in the pathogenic chain of cause and effect instead of to the earlier and more fundamental links. Babinski attributes a rôle of predominant importance to the process we have called 'verbal suggestion.' This, however, is only a consequence of a more primary process—namely, affective suggestion or *rapport*. This, in its turn, is one variety of the transference phenomenon characteristic of the psychoneuroses—namely, that concerned with the transference of *positive* affective processes. The more general transference phenomenon is again a particular type of a still wider one—namely, displacement—and it is in the excessive tendency to displace affects by means of superficial associations that the final key to the explanation of abnormal suggestion must be sought. Even if it were true, which it certainly is not, that most hysterical symptoms are the product of verbal suggestion, the observation would be of hardly any practical or theoretical interest; it would only bring us, even more inevitably than before, to the important questions concerning the source of the affective *rapport* that heightens the susceptibility to verbal suggestion.

<sup>1</sup> As a matter of fact, it would be just as logical to draw the reverse inference; to say that suggestibility is the result of hysteria is nearer the truth than that hysteria is the result of suggestion.

<sup>2</sup> For it cannot be maintained that there is any essential difference between persuasion and verbal suggestion, as defined above.

To explain hysterical symptoms as being 'due to suggestion,' or even to regard this conclusion as in any way furthering our knowledge of hysteria, betokens an unfortunate shirking of the real problems, which it obscures by ignoring the need for their solution. On the contrary, reducing the question of verbal suggestion to the broader one of affective *rapport*, studying this in its relation to the other manifestations of transference, and tracing the latter to its source in abnormal displacement of affects, constitute a route that leads us to the central problems of the psychoneuroses—namely, the nature and origin of intrapsychical conflict and repression, and the deviations in the development of the primary psychical forces.

Finally, a word must be added on the application of the foregoing views to the normal, although this subject is so extensive that I have refrained from discussing it here. Psychoanalytic investigations, on both the normal and abnormal, fully confirm Sidis's conclusion that 'every one of us is more or less suggestible.'<sup>1</sup> The reason is that every one has a certain capacity to transfer affective processes, provided that the object fulfils certain requirements; these processes take their origin in the psychosexual group, though in the large majority of instances the erotic nature of the process is transformed ('sublimated') into one of a more social kind. Ferenczi states the position clearly when he says:<sup>2</sup> '*Alles drängt nun zur Annahme, dass jedem "Sympathiegefühl" eine unbewusste "sexuelle Stellungnahme" zugrunde liegt, und dass, wenn zwei Menschen sich begegnen (ob des gleichen oder verschiedenen Geschlechtes) das Unbewusste stets den Versuch der Übertragung macht. Gelingt es dem Unbewussten, diese Übertragung, sei es in rein sexueller (erotischer), sei es in sublimierter, versteckter Form (Achtung, Dankbarkeit, Freundschaft, ästhetisches Wohlgefallen, usw.) dem Bewusstsein annehmbar zu machen, so kommt es zur "Sympathie" zwischen den beiden. Antwortet das Vorbewusste mit Verneinung der stets positiven unbewussten Lust, so entsteht, je nach dem Kräfteverhältnis beider Instanzen, zu den verschiedensten Graden der Antipathie bis zum Ekel.*' (*Everything points to the conclusion that an unconscious sexual element is at the basis of every sympathetic emotion, and that when two people meet, whether of the same or opposite sex, the unconscious always makes an effort toward transference.*

<sup>1</sup> Sidis, *op. cit.*, p. 17.

<sup>2</sup> Ferenczi, *op. cit.*, S. 440.

When the unconscious succeeds in making this transference acceptable to the conscious mind, whether it be in a pure sexual [erotic] or in a sublimated form [respect, gratitude, friendship, æsthetic admiration, etc.], a bond of "sympathy" is formed between the two. When the preconscious refuses to accept the positive unconscious desire, then we get, according to the degree of intensity in each case, antipathy of various degrees up to loathing.) Freud<sup>1</sup> also writes: ' . . . so dass wir zur Einsicht gelangen müssen, alle unsere im Leben verwertbaren Gefühlsbeziehungen von Sympathie, Freundschaft, Zutrauen u. dgl. seien genetisch mit der Sexualität verknüpft und haben sich durch Abschwächung des Sexualzieles aus rein sexuellen Begehungen entwickelt, so rein und unsinnlich sie sich auch unserer bewussten Selbstwahrnehmung darstellen mögen. Ursprünglich haben wir nur Sexualobjekte gekannt; die Psychoanalyse zeigt uns, dass die bloss geschätzten oder verehrten Personen unserer Realität für das Unbewusste in uns immer noch Sexualobjekte sein können.' (' . . . we have to conclude that all the feeling-relationships of sympathy, friendship, trust, and so on, that we can make use of in life are genetically connected with sexuality and have developed from purely sexual desires through weakening of the sexual aim, however pure and spiritual the form in which they may present themselves to our conscious self-perception. We knew only sexual objects to begin with; psycho-analysis shews us that the merely treasured or respected persons of our actual environment can still remain sexual objects for the unconscious in us.') The principal differences in this respect between the healthy and the neurotic are that the former transfers his affects on more logical grounds than the latter, and that he is in general more conscious of the whole process.

To trace all agreeable human relations, between members of both the same and the opposite sex, to a sexual origin will probably seem to many readers to be an unjustifiable extension of the word. It should, however, be carefully borne in mind that the conclusion has reference only to the unconscious, a region where sexuality plays a far greater part than in consciousness, and that it is only by investigation of the deepest and most hidden part of the mind that one becomes competent to express an opinion on the matter. Nevertheless, there are not wanting indications that at times writers even without this experience

<sup>1</sup> Freud, 'Zur Dynamik,' *op. cit.*, S. 171.



have intuitively guessed the true state of affairs. Freimark,<sup>1</sup> for instance, definitely asserts that all friendship has an erotic basis, and from von Gleichen-Russwurm,<sup>2</sup> the author of the most comprehensive book that exists on the subject of friendship, I quote the following passages, which shew a recognition of the intimate connections between the two: 'Man müsste vielmehr ins Auge fassen, dass jede Liebe einen gewissen Gehalt an Freundschaft besitzt, jede Freundschaft aber, wie sie auch immer geartet und entstanden sein mag, einen Teil von Liebe, von rätselhafter sinnlicher Sympathie enthält.' ('One must rather recognise that every love possesses a certain content of friendship, and on the other hand that every friendship, of whatever kind it may be and however it may have arisen, contains a part of love, of mysterious sensual sympathy.') 'Denn auch da, wo beide Gefühle scharf voneinander trennen, sieht der Philosoph die feinen Fasern der Zusammenhänge. Sie können zerrissen werden, doch ihre ursprüngliche Zusammengehörigkeit bleibt bestehen.' ('For even where the two feelings sharply diverge, the philosopher sees the fine threads of the connection. These may be torn, but none the less their original unity remains.') One has only to turn to language, the most reliable guide to psychology, for ample confirmation of the same conclusion. The very word 'friend' comes from the Sanscrit 'freond,' which meant 'a lover,' and even in Shakspeare's time it was used indifferently to denote either of the two ideas, just as the corresponding word *φίλος* was in Greek. Perhaps the neatest expression of the relation between friendship and love is the French saying: 'L'amitié est l'amour sans ailes,' one in which is condensed the whole theory of the relation between unconscious and conscious affects.

The perspectives opened out by these reflections are too extensive to be even alluded to here, the aim of the present discussion being only to illustrate the fact that, thanks to the epoch-making work of Freud, Janet's prophecy quoted at the beginning of the paper is at last being realised.

#### SUMMARY.

The term suggestion covers two processes, 'verbal suggestion' and 'affective suggestion,' of which the latter is the more primary, and is necessary for the action of the former. Affec-

<sup>1</sup> Freimark, *Sexual-Probleme*, 1910, S. 867.

<sup>2</sup> Von Gleichen-Russwurm, 'Freundschaft,' 1911, S. 8, 16.

tive suggestion is a *rapport*, which depends on the transference (*Übertragung*) of certain positive affective processes in the unconscious region of the subject's mind; these are always components or derivatives of the psychosexual group of activities. The occurrence is a normal one, but takes place to an excessive degree in the psychoneuroses, on account of the large amount here present of desire that finds no adequate outlet; it is one form of the more general mechanism of displacement (*Ver-schiebung*), by means of which an affect is transposed from an original, unpleasant, and repressed (*verdrängt*) conception to another less unacceptable one. Suggestion plays the chief part in all methods of treatment of the psychoneuroses except the psycho-analytic one. It acts by releasing the repressed desires that are finding expression in the form of symptoms, and allowing them to become attached to the idea of the physician; psychologically this means the replacement of one symptom by another—namely, psychosexual dependence on the physician. This is often of temporary, and sometimes of permanent benefit, but in severe cases the replacement is inconvenient and detrimental. In psycho-analysis, on the contrary, the repressed tendencies are permanently released by being made conscious, and hence can be directed, by sublimation, to more useful, non-sexual, social aims.

## CHAPTER XIX

### REFLECTIONS ON SOME CRITICISMS OF THE PSYCHO-ANALYTIC METHOD OF TREATMENT<sup>1</sup>

WHATEVER else may be said about Freud's psychological theories and the psycho-analytic method of treatment no one has denied the great significance of them in modern thought. It is becoming increasingly difficult for any one interested in the problems of psychopathology, or, indeed, of psychology in general, to remain aloof from these theories, or to avoid ranging himself either in support of or in opposition to them. It would be out of place here even to attempt to indicate the significance they have for the sciences of sociology, mythology, and anthropology, as well as for psychology proper, but I wish at the outset to point out how necessarily fallacious it must be for any one to reach any dogmatic conclusion as to their value so long as he confines himself to only one of their aspects. One of the best tests of the value of any new theory is to find out how fruitfully it can be applied, and the extent of the regions over which Freud's principles have been found to be valid—in regions relating to the activities of past ages as well as the present, to the psychology of the normal, of the neurotic, and the insane—is perhaps the most definite piece of confirmatory evidence of the truth of them. In this paper, however, we are concerned with only one aspect of Freud's work—namely, the method of psycho-analysis that he has devised for the treatment of the psychoneuroses.

Those who hear or read for the first time of the psycho-analytic method may broadly be divided into two classes—namely, those whose interest is aroused though their intellect may be puzzled, and those who from the outset are repelled

<sup>1</sup> An address delivered before a joint meeting of the Chicago Neurological Society and the Chicago Medical Society, January 18, 1911. Published in the *American Journal of the Medical Sciences*, July, 1911.

and adopt a hostile attitude. The line between the two classes is not a very sharp one, for I think it is true that no one has ultimately adopted the theory and practice of psycho-analysis without first having to overcome various difficulties and obstacles in his own mind. Indeed, this is absolutely inherent in the situation, for one of the main tenets of psycho-analysis is that the nature of the unconscious mind, which is its chief subject-matter, is repugnant to both the æsthetic and logical standards of consciousness. One might, therefore, more fairly say that readers shew a great variation in the extent to which, in the further study of the subject, they are prepared to waive their own inevitable prejudices. To some the conclusions reached by Freud seem so grotesquely unlikely, and the objections to his method so obvious, that they do not feel it worth while to pursue the subject any farther. Others, equally conscious of the objections that immediately arise in their mind, are sufficiently open-minded or tolerant to think it possible that perhaps their difficulties are due to their insufficient grasp of the matter, and that adequate explanations may exist which they will find if they pursue their inquiry. This latter position has this *a priori* consideration in its favour—namely, that many of the objections commonly raised are so extremely simple and obvious in character that it would be a highly remarkable occurrence if a man of Freud's recognised intellectual power had overlooked or ignored them. This consideration becomes the more weighty when one recollects that assent has been given to the chief of Freud's conclusions by men of such scientific eminence and sane judgement as Professors Bleuler, Stanley Hall, August Hoch, Adolf Meyer, Putnam, and White. In view of this consideration it would seem unreasonable as well as unscientific to refuse to investigate Freud's conclusions, however strange some of them may at first sight appear. We have further to remember that most of us have a much more limited capacity than we flatter ourselves to have of assimilating new thought. As Nietzsche well put it, 'Mankind has a bad ear for new music.' The history of new movements in culture and science is replete with instances that illustrate this sad fact, and yet how rarely does anyone draw the obvious lesson that they themselves will not find it easy to avoid the same danger when the opportunity is offered to them. There are names that live in history only because of the notoriety the bearers of them won by absurd denunciations of new thinkers, and one

cannot help thinking that there are men at the present time who will be remembered by posterity for nothing else than their puerile hostility to the new teachings of psycho-analysis.

Of the principles of the psycho-analytic treatment itself I need here say but little, for I have already on several occasions outlined them,<sup>1</sup> and I may assume that they are fairly familiar to you. Very briefly put, they are as follows: It is a principle accepted by all psychopathologists, and no longer in discussion, that psychoneurotic symptoms are the product of underlying, dissociated mental processes, which are unknown to the patient, or, in Freud's sense, unconscious. The symptoms are, therefore, *substitutions* of unconscious mental processes, and they cease to exist when these are made fully conscious. Freud finds that the unconscious processes in question constitute an elaborate network of memories that centre around certain dynamic trends, or wishes, which are always of a sexual nature and are always connected with infantile experiences. They are incompatible, or out of harmony, with the rest of the patient's thoughts, and Freud holds that it is the conflict resulting from this fact that is the cause of their being split off, dissociated, or 'repressed.' They are under the ban of various inhibitions, or 'resistances,' and the patient automatically strives against acknowledging their very existence. Psycho-analysis is a method, having its special technique, that was devised for the purpose of overcoming these resistances, in order that the unconscious mental processes may be led back into consciousness. The chief aim of the treatment is to give the patient a better understanding of the innermost part of his mind, so that he may be in a position to divert the mental energy that was finding an outlet in the form of neurotic symptoms into more suitable and useful social channels. He cannot do this so long as the energy is locked up by unconscious fixations, so that it is necessary first to free it before it can be applied in healthier directions; it is a question of *reculer pour mieux sauter*.

The objections that have been brought against this method of treatment may for present purposes be divided into those concerning the practical using of the method and those concerning the theory of it. Most of them can be summarised in the statement that the theory is one-sided and largely untrue, while the application is harmful, impracticable, and unreliable.

<sup>1</sup> See Chapters XIII., XIV., and XVI.

It is easily demonstrable that some of the individual objections are, so to speak, not psychologically honest, in that they are only pretexts seized for the purpose of covering deeper ones, and often those who bring the objections are not conscious of the deeper roots of their antipathy to the method. It is, therefore, indispensable that we first say a few words about the relations of the subject to the normal. Freud maintains that the conflicts that lie at the base of neurotic conditions play an important and unavoidable part in the development of every one of us, and that on the outcome of these conflicts depends whether a given person will be healthy or neurotic. In other words, the difference between a neurotic and a healthy person is not that the former has been subjected to conflict and the latter not, but that the two have reacted differently to similar conflicts. The whole matter is one essentially of childhood. We all know that an infant comes into the world destitute of the various social conventions and inhibitions that play such a large part in adult life. He is originally egoistic; cannot appreciate why his different privileges and impulses have to be regulated or interfered with; has at first no sense of the rights or feelings of others; will attempt to satisfy his bodily needs where and when he thinks fit; craves for food, attention, and other wants, quite regardless of external considerations. His early education consists almost entirely in learning to subordinate his personal desires and interests to considerations that at first only remotely appeal to him—in other words, it consists in constant adjusting of conflicts between internal and external situations. It is only gradually that such barriers are built up as modesty, shame, disgust, horror, moral feelings, and so on. Freud holds that the personal impulses, largely originating in various physical sensations, that are in this way renounced, are far more significant to the child than is generally supposed, and that the compromise thus demanded in its education is often arrived at only at considerable expense to mental health, and is often an imperfect one. A healthy person emerges from this series of conflicts by managing to replace the primary personal activities and interests by external social ones, and the mental energy of the former constitutes one of the main driving forces for the later acquired ones, being one of the chief bases for the whole later character of the person. The normal process, therefore, is repression plus *satisfactory* replacement, while what happens in the future neurotic is repression plus

*unsatisfactory* replacement. Satisfactory replacement of impulses that were primarily sexual is termed sublimation, the energy, desires, and interests that were originally personal having been sublimated on to an impersonal, social sphere. In the neuroses, on the other hand, the symptoms are really a compromise between open expression of the original impulses and satisfactory replacement of them, or sublimation. In order to bring about normal sublimation, the impulses have first to be freed from their attachment to the neurotic symptoms.

The immediate bearing of these considerations is the conclusion that, as repression of certain primitive tendencies occurs in both the normal and the neurotic, one has to expect that both will shew a resistance, which is merely the obverse of repression, against being made conscious of the repressed mental processes. This is, in fact, what is found. The normal person is shocked, and finds it incredible, when he is told of the great frequency with which in their childhood neurotic patients indulged in sexual phantasies that refer to their parents. The reason is that the same thing is true of the normal, and he is resenting the information about the neurotic because really he is being told a disagreeable truth about himself. It is the people with secret attractions to various temptations who busy themselves most with removing those temptations from other people; really they are defending themselves under the pretext of defending others, because at heart they fear their own weakness. Similarly those who learn psycho-analysis regularly discover that the aspects of it that have most repelled them concern just the strongest and most deeply buried part of their own nature. In resisting these aspects they of course seize at all sorts of superficial reasons and excuses for thinking them untrue, but these are merely the cover for deeper personal grounds, the existence of which they are often unaware. In approaching the subject of the objections to psycho-analysis it is much more important to deal with this general truth than to argue about the superficial pretexts *seriatim*, and that is the reason why I have emphasised it at the outset.

Taking up first the objections to the theory or principles of the treatment, we may first consider the most important—namely, to the effect that Freud attributes an exaggerated importance to sexual factors in the causation of the neuroses. Well, to begin with, there is a frequent misunderstanding in

the minds of those who bring forward this criticism. They seem implicitly, if not explicitly, to take Freud's statements as if these meant that, according to him, the psychoneuroses are due to an unsatisfied desire for sexual intercourse, and naturally they triumphantly point to the obvious fact that a psychoneurosis may coexist with full opportunities for gratification of this desire. Such critics evidently overlook the fact that the sexual instinct comprises a range of activities very much wider than this specific one. The commonest manifestation of the instinct—namely, love—frequently exists without any trace of desire for sexual intercourse, at all events consciously. Then all sorts of other activities, such as perversions, masturbation and other auto-erotic acts, obviously have to be called sexual, although their relation to sexual intercourse is very remote. There are many people, both men and women, who never have any desire for normal intercourse, but investigation shews that they have some other form of sexual life, often a very complex one. Psycho-analytic and other research has clearly shewn that the desire for sexual intercourse is a highly specialised manifestation of the sexual instinct, and one relatively late in developing. It is preceded, and accompanied, by a great number of other sexual activities, some of which lead up to it, while others do not. It has been found that the instinct is a composite construction made up of several separate components. Distinct evidences of these components are to be observed even in early childhood, though the form they then take is very distant in appearance from what we call an adult sexual act. It is impossible to go farther into this matter here, but those interested in it are recommended to read carefully Freud's 'Drei Abhandlungen zur Sexualtheorie.'

It has sometimes been asked why sexual disturbances should play such an essential part in the production of the neuroses as Freud maintains. Logically this question should be put after it has been determined whether they do or not; not, as is usually the case, before. It is entirely a question of facts. All I can say here is that no one who has conscientiously, and free from all prejudice, explored the dark regions of the mind where neurotic symptoms arise has any doubt about the essentially sexual nature of them. Certainly conflicts occur in regard to other matters and play a part, often a very considerable one, in the genesis of the symptoms, but they are always secondary, and, as it were, only mirror the deeper, sexual ones. Freud



says:<sup>1</sup> 'Ich kann diesen Satz nur immer wieder von neuem wiederholen, weil ich es niemals anders finde, dass die Sexualität der Schlüssel zum Problem der Psychoneurosen wie der Neurosen überhaupt ist. Wer ihn verschmäht, wird niemals aufzuschliessen imstande sein. Ich warte noch auf die Untersuchungen, welche diesen Satz aufzuheben oder einzuschränken vermögen sollen. Was ich bis jetzt dagegen gehört habe, waren Aeusserungen persönlichen Missfallens oder Unglaubens, denen es genügt, das Wort Charcot's entgegenzuhalten, "Ca n'empêche pas d'exister."' [I can only repeat this sentence once more, because I never find it otherwise, that sexuality is the key to the problem of the psychoneuroses, as it is to that of the neuroses in general. Whoever disdains it will never be able to open the lock. I am still waiting for the investigations that will remove or limit the truth of this sentence. What I have heard against it up to the present has been only the expression of personal distaste or disbelief, which the words of Charcot are enough to meet: "That doesn't prevent it from existing."'] Those who have learned the importance of the sexual factors in the neuroses have also come to realise that this fact is not so surprising as it at first appears, for they have learned that the stream that we call the sexual instinct is much broader and deeper than is commonly supposed. The very fact that the greater part of it flows in underground channels creates an extensive illusion as to its extent, but even consciously we cannot doubt that it plays the most important part of all the instincts. From it is evidently derived the main impetus that gives rise to artistic, literary, and poetic productions, and far more of our daily interests and ambitions than we superficially imagine are in reality sublimations from deeper and ultimately sexual sources. The various childhood conflicts above referred to concern almost entirely root manifestations of the same instinct, and any one who has closely studied the steps by which infantile activities are transformed into non-sexual interests will not be at all surprised that frequently this delicate process does not proceed in the harmonious way that is necessary for the establishment of normal mental balance.

A critic might now remark: Granted all this, admitted that sexual factors are important, and perhaps the most important, agents in the causation of the neuroses; in view of the fact

<sup>1</sup> 'Sammlung kleiner Schriften zur Neurosenlehre,' 2<sup>e</sup> Folge, 1909, S. 103.

that most of them are unknown to the patient, why resuscitate them, what useful purpose can be served by delving into these disagreeable memories? This question involves two distinct matters, both of which, however, will be considered together—namely, the psychological explanation of the efficacy of the treatment, and the desirability or not of probing into a patient's innermost sexual life. The answer to the first of these questions was indicated above, when it was pointed out that the translation of the unconscious mental processes to consciousness necessarily signifies the harmonious fusion of mental elements that were previously in permanent conflict, and that the cessation of these conflicts carries with it the lasting cessation of the symptoms; the keynote here is that conscious knowledge of aberrant tendencies means a better and healthier control of them. As I have in two recent papers<sup>1</sup> fully discussed this matter, as well as the naïve allegation that the results of psycho-analytic treatment are due to suggestion, I will not deal with it further here. The second question is evidently based on the strong medical prejudice against handling sexual problems that is shewn in so many ways, in the total exclusion of sexual subjects from the medical curriculum, in the marked disinclination to accept the sexual aetiology of various diseases, and so on; the long fight, now settled, over the syphilitic origin of general paralysis was a striking instance of this. On the rare occasions when a sexual factor is mentioned in a medical textbook it is usually under the vague and misleading guise of 'sexual excesses.' It may be more comfortable to believe that hysteria is due to a toxic process than that it is due to psychosexual conflicts, but desire for personal comfort is not always the best guide to the discovery of truth. This medical prudery is responsible for much harm, both to the profession, who are thereby blinded to an important side of pathology, and to the patients that consult them. Yet there is no reason to suppose that medical men outside their work are oblivious to the important part that sexual interests play in daily life. I remember on one occasion when I read a paper expounding the psychosexual origin of certain neuroses the opinion was freely expressed that sexual thoughts could not have such a hold on the minds of neurotic patients as I maintained they did. After the medical discussion an informal smoking concert was held, in which the main entertainment consisted in the relating

<sup>1</sup> See Chapters XVI. and XVIII.

of sexual and skatological anecdotes and recitations. I could not refrain from thinking of Heine's well-known stanza from the 'Die Heimkehr':

'Blamier mich nicht, mein schönes Kind,  
Und grüss mich nicht unter den Linden;  
Wenn wir nachher zu Hause sind,  
Wird sich schon alles finden.'

This very nicely expresses the attitude in question. Only at home, in private, or in club life, are such topics to be mentioned, not in scientific discussions, in public, 'unter den Linden.' Yet it is with this intimate, personal, and human side of neurotic patients that we are necessarily concerned, for it is in these deeper recesses of their nature that conflicts and disharmonies arise, not on indifferent and impersonal topics. Evidently a given physician may from personal distaste refuse to investigate such matters, but he should recognise that by so doing he is allowing his personal prejudices to enter into a region where they do not belong—namely, scientific therapeutics. It is as though surgeons should officially proclaim that gynaecological therapeutics is too distasteful for medical men to concern themselves with.

Critics who bring forward this objection usually cover their personal disinclination that lies at the root of it by contending that such a procedure is harmful for the patient. In this contention there is an undeniable modicum of truth. It would be foolish to maintain that exploration of a nervous patient's sexual thoughts and fancies contains no potentialities for harm, any more than that exploration of a parturient uterus by a village midwife contains no similar potentialities. But it must be remembered that while an investigation of sexual thoughts is not necessarily harmless, it is also not necessarily harmful. In other words, it is a therapeutic procedure that in this respect resembles most others—namely, its potentiality for harm depends almost entirely on how it is carried out. Are the operations of trephining or laparotomy fraught with no risk whatever, to say nothing of the preliminary administration of chloroform? The universal criterion of the advisability or justifiability of carrying out risky therapeutic measures is, or should be, the question of whether the probable good is greater than the possible harm. In such cases as those just instanced it is generally recognised that the potentiality for harm is much

less in some hands than in others, and that by the adoption of suitable precautions this potentiality can often be minimised. Now it is contended for psycho-analysis that the various precautions that form part of its technique make it a definitely safe procedure. I should not like to assert that no harm can ever be done during psycho-analysis; it would, indeed, be strange if such a delicate procedure were safer than all other therapeutic procedures. Still, I will say that, in spite of vague statements to the contrary, no case has come to my knowledge where definite harm has been done to the patient through this treatment, and no one who is familiar with the facts will deny that at all events far more good than harm has been done. It is perhaps not out of place here to say a word of warning concerning those physicians who blindly rush into a psychosexual investigation under the name of psycho-analysis, but without any proper training in the matter. It should be obvious that psycho-analysis, perhaps more than any other therapeutic measure, needs a careful, disciplined study before it can be either adequately applied or judged.

Another very prominent objection brought against the psycho-analytic treatment is that it is said to be unreliable. This applies partly to the main theory, but especially to the interpretations of the patient's symptoms, utterances, and other mental material. Into the construction of the theory, as into that of all theories, it is plain that various preliminary hypotheses have entered; but it is maintained that these are the reverse of fanciful, and are always direct and legitimate inferences from facts objectively gathered. Freud himself says:<sup>1</sup> 'Ich setze keinen Stolz darein, die Spekulation vermieden zu haben; das Material für diese Hypothesen ist aber durch die ausgedehnte und mühevollste Beobachtung gewonnen worden.' ['I feel no pride at having avoided speculation; the material for these hypotheses, however, has been gained through the most extensive and laborious observation.] The question of actually proving in detail the various parts of the theory is technically an extremely difficult one, both for psychological reasons connected with the meaning of what constitutes scientific proof, and for extrinsic reasons, some of which will presently be mentioned. It has been said that up to the present not sufficient material has been published to establish either the truth of the theory or

<sup>1</sup> 'Sammlung,' *op. cit.*, S. 100.

the value of the treatment. I sometimes think that those who make this statement are unaware of the extent of the material that has been published by the Freudian school. There exist at least fifty books on psycho-analysis, seven periodicals are entirely devoted to the subject, while the number of papers now runs into thousands. Nevertheless, I freely admit that, in spite of this, not enough observations have yet been published to prove scientifically every inference and interpretation that has been made. On the other hand, we contend that enough has been published to demonstrate the principles of the method, to shew the truth of a number of detailed inferences based on the application of it, and thus to establish the right to ask that the other inferences be not denied by critics who have not personally investigated them. A word must also be said about the actual difficulties of publishing cases, which are much greater even than they appear. It is not merely that absolute general precautions must be taken to conceal the identity of the patient, but minor points in the analysis that shew the validity of it have to be suppressed, for it is just those that would betray this identity. Then, again, a given interpretation, which can be put in a sentence, may be based on several hours of detailed observation, most of which, the individual utterances of the patient, the tone, the emotional gestures, etc., are impossible to reproduce, although it is just these that inevitably convince one of the validity of the inference drawn.

There are, however, deeper reasons why many of the individual psycho-analytical interpretations seem very unlikely and often strained. It is evident that the connections between different thoughts proceed, or are supposed to, along paths quite foreign to our normal, more or less logical, thinking processes, and that is why any one who reads of them repudiates them as highly improbable. It is often forgotten, however, that they cannot fairly be compared with logical thinking, for they represent the workings of unconscious mental processes which are demonstrably quite different from our conscious ones. If, for instance, the conscious attention is designedly distracted during a word-association experiment,<sup>1</sup> it will be found that the intrinsic or logical reactions are largely replaced by superficial ones, especially by sound connections; in other words, the more automatic and less conscious mental func-

<sup>1</sup> See Jung, 'Diagnostische Assoziationsstudien,' 1906, Bd. i., S. 104, etc.

tioning becomes the more does it proceed by means of superficial connections of the kind familiar to psycho-analysts. I cannot now go further into the psychological questions here involved, but I wish to draw special attention to the following important consideration. There is every reason to believe that in the normal as well as in the neurotic there exists a strong general resistance to what may be called symbolic thinking, that is, to mental processes that proceed by means of analogy, superficial connections, and so on; in fact, our logical tendencies rightly repudiate what seems to us to be an absurd, irrational mental procedure. Yet in children and savages, during intoxication and insanity, in superstitions, folk-lore, and even in poetry, there is no doubt that metaphor, analogy, and symbolism play a very large part, sometimes even as large as they do in unconscious mental processes. A little study of the sources of dream material is enough to convince any one of how extraordinary are the superficial connections that are formed in their mind quite unknown to them. It is often further asked what guarantee one has in psycho-analysis that a given interpretation is correct. It would take too much time to answer this fully, and I can only assert that in the psycho-analytic technique special provision is made for objective criteria and tests of the truth of any given interpretation; the whole method is the very reverse of the vague, uncontrolled, and speculative procedure it is sometimes represented to be.

Very little need be said concerning the objections to the practicability of the psycho-analytic method of treatment, for to anyone who has assimilated the preceding considerations these objections will answer themselves. It has been said that the method is of extremely limited applicability on account of the time and, therefore, expense involved, of the number of cases that are intrinsically unsuited for the treatment, of the difficulty of using it with hospital patients, and so on. It is quite easy to see that the motive of these objections is to depreciate the treatment, rather than to criticise it seriously, for if the enormous value of it were generally recognised one cannot doubt that these difficulties would lose much of their weight, and would be to a great extent overcome. They can most shortly be met by comparing for a moment psycho-analysis with the sanatorium treatment for tuberculosis, for when this was first instituted exactly the same

objections were raised: it was a mode of treatment applicable only to the rich; it involved a great expense of time and money and the training of a special class of physicians; was suitable only for certain selected classes; had considerable potentialities for harm, and so on. But when it became realised that the open-air treatment gave the most effective results; that the long duration of it was something inherent in the circumstances; that there was no adequate alternative to it; that, in fact, to ignore it was tantamount to not doing the best for those afflicted with tuberculosis, then the difficulties were rapidly overcome, even for the poorest hospital patients. No doubt it is more satisfactory when we can achieve rapid cures of constitutional maladies, a fact that partly explains the gratification with which the recent Ehrlich-Hata discovery has been received. Still, it must be remembered that from the very nature of things there are certain modes of treatment which it is dangerous to press forward too rapidly, such as the re-education of the system by means of tuberculin, anti-rabic and other vaccines. Psycho-analysis, which is essentially a re-educative treatment that modifies mental trends of many years' standing, is just such a treatment where it is impossible to press. As a matter of fact, it compares very favourably in many respects with the sanatorium treatment of tuberculosis, for it requires less time, no special apparatus, buildings, nursing staff, and so on, and, above all, can be carried out in an ambulatory service when the patient is about his ordinary work; it is, indeed, very desirable that the patient should have some employment or other interest unless he is totally incapacitated. As to the limited scope of the treatment, we already find in practice that there is a wide range over which it is conveniently applied, and there is no doubt that with the good-will of the medical profession this range would be very considerably extended; although many intrinsic difficulties exist, many of the alleged ones are largely fictitious, being invented or exaggerated by those who really oppose the treatment on other grounds.

In these few remarks I am fully aware that I have not enumerated all the objections that have been brought forward against the psycho-analytic treatment, and have not even fully discussed any one of those I have mentioned, but I trust I have succeeded in my aim of illustrating the fact that there do exist answers to all of them which in the opinion of those who have properly investigated the matter are entirely adequate.

## CHAPTER XX

### PROFESSOR JANET ON PSYCHO-ANALYSIS: A REJOINDER<sup>1</sup>

In psychology, as in other subjects, it unfortunately happens from time to time that a writer prefers to substitute a polemical discussion of a given investigator's views for a scientific criticism of them, the sole aim of which would be to determine whether or not they are true. If one sets out in such a discussion with the deliberate object of discrediting the investigator in question, the readiest method of achieving this to the satisfaction of an uninformed or already biassed audience is either to distort his views or to impute to him views that he has never held. One has then the advantage of being able to select for one's strictures whatever views may lend themselves most suitably to the desired mode of attack. It is clearly easier to score if one may choose one's own target, or if one replaces the real difficult one by an imaginary attainable one. If, for example, one elects to use the weapon of ridicule, one first presents the adversary's views in burlesque form by means of distortion, caricature, and exaggeration, not disdaining the aid of invention and omission, so that they may be rendered more vulnerable to whatever shafts of satire and wit may be at one's command.

This type of procedure is only too familiar, and many of

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, February, 1915, vol. ix., p. 400. It may be asked why a controversial paper should be included in a collected series such as the present one. My reason, apart from the desirability of calling attention to some points in historical accuracy, is that it serves well to illustrate the contention of psycho-analysts that much of the opposition to their work has an emotional rather than an intellectual basis; if affective factors can influence the judgement of a man of Professor Janet's experience and distinguished eminence in psychology, it should not be surprising that the same may happen on even a grosser scale with men of a lesser intellectual calibre.



us have passed through the interesting experience of being the personal victims of it. It is customary in these circumstances to assume, wherever possible, that the procedure has not been a deliberate one on the opponent's part, but is the expression of uncontrolled tendencies in his mind, and the only comment usually made is on the lack of objectivity so unbecoming in a would-be critic. When, however, there is good reason to believe that the device has been *intentionally* adopted for the purpose mentioned, it is necessary to raise a definite protest, at least to the extent of rectifying the inaccurate statements that have been made. Ungrateful as such a task always is, silence on such an occasion is tantamount to an acquiescence in the lowering of the minimum standard of fairness and probity that should obtain in writings on scientific subjects if orderly advance is to be made.

Professor Janet's criticism of psycho-analysis, read last year before the International Congress of Medicine in London, contained a number of passages of a nature and tendency that, in the subsequent discussion, laid him open to the serious charge of deliberate unfairness. His sole answer to this, at the close of the discussion, was an apology that his ignorance of German, and consequent reliance on French and American abstracts of Freud's articles,<sup>1</sup> had led him to commit a series of inaccuracies, though he proffered no explanation of the fact that these inaccuracies were in one direction only. Whether this source of knowledge constitutes an adequate basis for the distorted presentation and mocking criticism characterising the articles that Professor Janet has so publicly tendered must be left to the reader's judgement. So far as I am concerned, however, the matter would have been left where it was, had not Professor Janet recently chosen to re-publish his paper, which had appeared in the official *Transactions* of the Congress, in both the *Journal de Psychologie* and the *Journal of Abnormal Psychology*,<sup>2</sup> without rectifying a single one of the mis-statements committed in the original draft. Even if his plea of ignorance at the time of writing the paper afforded the real explanation of these, and I shall presently give reasons for doubting the adequacy of this explanation, it is evident that after the date of the Congress this could no longer be

<sup>1</sup> It is a question here throughout only of articles that have never been translated from the German, not of the books that have been.

<sup>2</sup> Vol. ix., pp. 1, 153.

regarded as a valid excuse. Distasteful as the duty is, I feel constrained, therefore, to challenge these methods of debate, and shall do so by simply repeating some of the points made during the discussion of Professor Janet's original paper.

We may begin with an example of elaboration. In order to illustrate the confusion that he thinks arises from Freud's use of the term 'sexual,' as applied not only to physical acts, but also to mental tendencies, Professor Janet summarises Freud's article on *Wilde Psychoanalyse*, in which there is an account of a case where a physician, under the curious impression that he is quoting Freud's views, of which he had gathered a casual and erroneous impression, confounds these two aspects of sexuality, with very unfortunate results from the patient's point of view. Now, evidently the effect produced on the reader by this example would be greatly heightened if only it could be made to appear that such a gross blunder was committed, not by an ignorant outsider, but by a psychoanalyst—if possible, one in immediate touch with Professor Freud himself. Unfortunately, there is one difficulty in the way. In the article in question, Professor Freud categorically states, no fewer than three times, that the physician was quite unknown to him, and that he had never even heard his name before. He amply demonstrates that the physician could not have even a passing acquaintance with psycho-analysis, and was ignorant even of elementary matters of medical diagnosis. Professor Janet's imagination,<sup>1</sup> however, easily gets over a difficulty of this nature. In his abstract, eighteen lines long, he insists four times over that the physician was a pupil of Freud's, and in the following language:<sup>2</sup> 'A woman . . . consulted a young physician, a disciple of Freud's.' This 'young doctor, apt pupil that he was, told the patient,' etc. . . . 'This young *confrère* . . . seems to have correctly applied the doctrine he had been taught. Unfortunately, the patient . . . complained that she had been much distressed by such advice. Freud heard her grievance and in a vigorous article vituperated his too docile and compromising pupil. This pupil, said Freud, had,' etc. Now, it once happened to me to hear a young physician describe Professor Janet's method of treating

<sup>1</sup> That the invention originated with Professor Janet may be seen by comparing Acher's abstract of the article, which he quotes as the source of his information.

<sup>2</sup> I quote from the *Journal of Abnormal Psychology*, vol. ix., p. 177.

hysteria as consisting in training the patient to enter into soul-relationship with a spiritistic medium by means of telepathy. I am as responsible for making myself acquainted with the views of my co-workers in psychopathology as Professor Janet presumably is, and especially before criticising them, and if I had at an International Congress, and in two subsequent publications, described my young physician as an apt and docile disciple and pupil of Professor Janet's, it seems to me that my co-worker would have had just cause for complaint. Yet this is exactly what Professor Janet has done, for the ignorance and distortion shewn by the young physician was no greater in the one case than in the other.

Similar results may be achieved by the device of omission. In an article dealing with psychogenetic disturbances of vision, Professor Freud shewed how these may arise through a conflict concerning the use to which vision may be put, and that hysterical blindness may be a compromise-formation representing a talion self-punishment for the exercise of a forbidden use of the eyes.<sup>1</sup> He takes as a mythological illustration of the same principle the Godiva story, in which Peeping Tom gets blinded for a similar offence. The following passage is contained in Acher's abstract of the article, quoted by Professor Janet: 'In the beautiful legend of Lady Godiva, all the townspeople hid themselves behind closed shutters in order to lighten the task of this lady who was required to ride through the streets naked in daylight. *Anyone who looked<sup>2</sup> at the naked beauty was punished by losing his eyesight.*'<sup>3</sup> Turn now to Professor Janet's amended version of the passage (p. 159): 'This beautiful woman was condemned to ride through the streets naked, and the inhabitants of the town imposed upon themselves the obligation of shutting the blinds and *closing their eyes*<sup>3</sup> so that no one should see her. *They made themselves blind through a fine chivalry.*'<sup>3</sup> Who would be able to resist so poetic an explanation?' In other words, by altering the story, and omitting the essential point relating to the talion punishment of Peeping Tom, Professor Janet succeeds in his object of reducing to nonsense the illustration of what he calls 'this ingenious method.'

A still more conspicuous example of this device is the

<sup>1</sup> *I.e.*, sexual curiosity.

<sup>2</sup> These three words should be 'The only one who peeped'; otherwise the passage is an exact translation from Professor Freud's article.

<sup>3</sup> Not italicised in the original.

following: Describing Freud's views on the causation of morbid anxiety, Professor Janet writes (p. 169): 'Freud tells us that in all these cases we must always consider the sexual trouble as primary and essential, *simply because*<sup>1</sup> a certain analogy between the symptoms of the disease and sexual phenomena can be perceived; *because*<sup>1</sup> anxiety resembles in some ways the outward manifestation of sexual gratification, *therefore*<sup>1</sup> anxiety *must be*<sup>1</sup> a sexual trouble. We have never admitted vague analogies of this kind as sufficient proof of a determining cause. . . .' It is perfectly true that towards the end of his essay on the subject Professor Freud in a casual way does call attention to the resemblance in question, but to represent that this was the sole ground for his conclusions, and to suppress all mention of the detailed arguments, published cases, and experience, on which they were actually based, is a procedure that, one would have thought, might have given even a political controversialist pause.

As might be expected after this, there are many examples of the well-worn device of exaggeration in Professor Janet's article, of which three only will be quoted. (1) 'Freud begs physicians to devote all their efforts and intelligence to find a preventive that may satisfactorily meet all the exigencies of a coitus' (p. 162). Needless to say, Professor Freud has never done anything of the sort; the assertion is nothing but a gross exaggeration of a quite obvious remark he once made as to the desirability of such a preventive. (2) 'They (Freudians) affirm that in every neurosis these sexual troubles and memories are not simply *one cause* of the disease, but they are the *essential and only cause*' (p. 158). It is, of course, well known that no follower of Freud has ever affirmed, or held, this view. We consider that sexual disturbances constitute the specific cause, but that all manner of other causes, from defective heredity to mental shock, are also operative; Freud himself has dealt with these other causes at length, and is never tired of insisting on them. (3) 'Freud declared that these pathological discoveries would be to neuropathology what the discovery of the sources of the Nile had been to geography—that is to say, the greatest discovery in this science of the twentieth century' (p. 161). Professor Freud's actual remark runs: 'I consider this (the sexual ætiology of hysteria) to be the finding out of one of the Nile-heads of neuropathology,' the term 'Nile-head' being, of

<sup>1</sup> Not italicised in the original.

course, used as a metaphor (equivalent to 'source'), not as a simile; the part about the greatest discovery, etc., is added by Professor Janet.

When these milder methods do not suffice, entire views can be invented and imputed to the school under discussion, and Professor Janet does not shrink even from this. He writes, for instance: 'The discovery of the specific causal agent of the neuroses gives a therapy at once simple and precise. Normal and regular coitus will then suffice to cure all neuropathic disturbances' (p. 162). I cannot imagine that any physician in the world holds this view, for the very obvious reason that a considerable proportion of neuropathic patients have fulfilled this requirement for years without its doing away with their sufferings. At all events, it is plain that no psycho-analyst could entertain the view; if he did, why would he be practising psycho-analysis? Or are we to be accused of recommending and carrying through a lengthy, laborious treatment, knowing all the while that the maladies can be so easily cured without it by giving a simple piece of advice? Professor Janet seems to come halfway to this conclusion, for in another place (p. 181) he writes: 'Psycho-analysis seems to utilize two processes of treatment. The first . . . consists in advising the patient to practise regular and normal coitus, using an ideal preventive.' Here, perhaps, we need not charge Professor Janet with anything more than ignorance of the elementary rules of psycho-analytic treatment, but I may inform him that it is no part of this treatment to give advice of any kind to the patient,<sup>1</sup> let alone advice of such a responsible and equivocal nature as the one he suggests.

The palpable ignorance to which reference has just been made is so widespread throughout the whole article that one is embarrassed to know which examples to choose. Over and over again he describes Freud's theory of the neuroses in terms of traumatic memories, suppressing the fact that in the past twenty-five years Freud has advanced far beyond this starting-point, which now forms part of his theory only in a very special sense, and even then in an extremely subordinate and limited way. Such a statement as the following (p. 162), for instance, is, in the form in which it is expressed, directly untrue: 'He (Freud) continues to give to the neuroses, and even to certain psychoses such as dementia præcox, a

<sup>1</sup> See Chapter XVII.

single and truly specific cause—namely, a sexual trouble *caused by an experience which is conserved in the form of a traumatic memory.*<sup>1</sup> The same remark applies to the following (p. 15): 'It (psycho-analysis) seeks by every possible means to put in evidence the existence of an emotional memory, and seems to make this discovery the essential end, the sole object of the mental examination.' So pre-occupied is Professor Janet with this idea that he extends it even to the association experiment, as adapted by Jung. Referring to the occurrence of delay in the reaction-time, he says (p. 14): 'It would be very dangerous to necessarily postulate a traumatic memory simply because of such a reaction.' It would, indeed.

We learn (p. 15) that 'Freud does not seem to concern himself, as do so many writers, with disturbances of memory which transform many dreams, or with the systematization that the dream undergoes at the moment of waking.' So little is this the case that Freud, who in his detailed study of this interesting process has offered for the first time a precise explanation of it, coined a special term to denote it, 'secondary elaboration,' this being one of the four great mechanisms under the headings of which he describes the process of dream-formation. On another page (p. 33), by the way, Professor Janet confounds another of these—namely, 'displacement'—with the quite different process of 'transference.' As for the conception of 'repression,' so fundamental in psycho-analysis, any one acquainted with it will be startled at the idea of the example given by Professor Janet (p. 28)—not smoking for reasons of health—being considered an instance of it.

Of the same order are Professor Janet's repeated statements that psycho-analytical interpretations are merely arbitrary, capricious, and 'can with the greatest ease be varied in infinity.' The statements are quite worthless, for he simply does not know that the interpretations are the very reverse of this, being based on objective principles that have no reference to individual opinion, but only to the evidence of the facts themselves. Similarly: 'A system analogous to the Freudian one could easily be constructed by taking fear as the basis' (p. 167); this remains nothing more than an unsupported assertion unless such a system is actually constructed, and if this were done one would soon find out which of the two was based on fact and which on fancy.

<sup>1</sup> Not italicised in the original.

In his animus toward psycho-analysis, Professor Janet so often over-reaches himself by gross exaggeration that any detailed examination of his supposed criticisms is rendered unnecessary. Such remarks as this, for example, answer themselves: 'I would undertake to demonstrate in the same way that tuberculosis and cancer were the indirect and unforeseen consequence of masturbation in little children' (p. 179). Or again, in describing the way in which he thinks psycho-analytic patients are cured, he allows himself to say that 'They are flattered that the observations made upon them serve to establish a medical method which is to cure all the ills of human kind (*sic*); they experience a legitimate pride in the thought that they are collaborating with a great man in the reconstruction of medicine (*sic*)' (p. 181). Does Professor Janet really believe that Professor Freud, who deliberately withholds from his patients all knowledge of psycho-analysis except what they discover for themselves, conveys, consciously or unconsciously, to them such impressions? And, then, what of the numberless patients who are not 'collaborating with a great man,' but are merely being treated for their health by quite ordinary doctors?

I will refrain from inquiring into the delicate question of the meaning of such extreme bias as is displayed throughout Professor Janet's paper, and will conclude my comments by discussing a matter of some historical interest—namely, the relation of psycho-analysis to psychological analysis, *i.e.*, to the system of psychological study of which Professor Janet is indisputably the most distinguished exponent and of which he was the pioneer. My reason for doing so is that in his paper Professor Janet has seen fit to derive the former of these systems from the latter, and has insinuated the novel claim that Professor Freud's work practically owes its existence to his own. Of the numerous innuendoes to this effect, the following may be quoted. After pointing out that 'psycho-analysis has proceeded entirely from the first studies on traumatic memories' (p. 11), he goes on to say that it 'borrowed from psychological analysis the idea of traumatic memories' (p. 19). We learn that Professor Janet's earlier studies 'have had the honour of inspiring the works of Freud on the same problem of the mechanism of traumatic memories. On certain points the modifications he has made seem to me quite slight' (p. 25). Again: 'This writer (Freud) and his pupils have taken

as a starting-point my first studies on the existence and the characteristics of subconscious phenomena in hysterics, but without criticising them' (p. 26). Even the psycho-analytic method itself appears to have a similar origin. We saw above that, according to Professor Janet, psycho-analysis 'seems to utilise two processes of treatment.' The one consisted in advising the patient to practise regular coitus; 'the other method . . . consists, as I understand it, in generalizing the application of a procedure of examination which I myself pointed out in my first studies' (p. 182). Referring to the relation of his early studies to Breuer and Freud's 'Studien über Hysterie,' Professor Janet writes: 'At most, these writers only changed some terms in their psychological descriptions; what I called psychological analysis, they called psycho-analysis; where I used "psychological system," they used "complex" to designate the *ensemble* of psychological phenomena and of movement which are combined to constitute the traumatic memory; they have given the name "catharsis" to what I designated as a dissociation of fixed ideas, or a moral disinfection. The names were different but all the essential conceptions, even those which were still subject to discussion, such as that of the "psychological system," were accepted without modification' (p. 10). In other words, the 'Studien über Hysterie' differed from Professor Janet's writings merely in containing three new terms. For those who, unlike Professor Janet, have actually read the book, comment on this assertion is superfluous, and I will confine myself to one single remark—namely: Characteristically enough, Professor Janet's failure to find any new ideas in the book is to be correlated with the fact that of the three new terms he did find there, two do not occur in it, while he quite mistakes the meaning of the third one. The first term, 'psycho-analysis,' was coined some time after the book was published, and the word 'complex' was introduced, some ten years later, not by Breuer or Freud at all, but by another school, that of Zurich.

To read Professor Janet's account of the matter one would infer him to be under the impression that psycho-analysis arose as an uncritical taking over, and distorted exaggeration of, the principles he had inculcated in his earlier studies, so that he is in the unhappy position of a man who sees his own work being 'murdered' before his very eyes. He will be relieved to learn, therefore, that the truth of the matter is



quite otherwise. The development of psycho-analysis both originated and proceeded quite independently of psychological analysis in Janet's sense, was entirely uninfluenced by it throughout its whole course, and would not have been different in one iota if Professor Janet's work had never existed. The points of agreement between the two, mentioned in the 'Studien,' were not in any sense 'inspired by' Professor Janet's investigations, but were arrived at by Breuer and Freud some years before the first publication of the latter, as were also a number of points of divergence, such as the conception of abreaction, etc. It is true that Janet's first communication antedated Breuer and Freud's by seven years, but it is an open secret—indeed, Professor Freud has himself referred to it in a recent essay—that the delay in publishing their work was occasioned by hesitancy, due to personal reasons, on Dr. Breuer's part. The co-operation of the two authors antedated their first communication by as much as ten years, and it is expressly stated in the 'Studien' that one of the cases there reported was treated by the cathartic method more than fourteen years before the date of publication. Professor Janet has every right to claim priority in time, if any one doubted it, in the publishing of certain ideas, but he need no longer feel burdened with the responsibility of either the credit or the discredit attaching to the development of psycho-analysis.

At the International Congress of Neurology and Psychiatry, held in Amsterdam in 1907, Professor Janet dismissed Freud's theory of hysteria as being merely '*une mauvaise plaisanterie*' [a bad joke,] and it may be left to the reader's judgement to decide whether his present attempt at criticism has succeeded any better in contributing something of positive value to our knowledge. In his attack on Professor Freud's work, delivered before the International Congress of Medicine in 1913, Professor Janet has, in my opinion, allowed himself to be betrayed into a most serious lack of objectivity.

## CHAPTER XXI

### A MODERN CONCEPTION OF THE PSYCHONEUROSES<sup>1</sup>

IN no department of medicine are more divergent opinions promulgated, or more valueless papers written, than on the subject of psychoneuroses. The reasons for this lie partly in the great complexity and difficulty of the subject-matter itself, and partly in the fact that actual investigation of the problems has up to the present been confined to a small number of workers. One unfortunate consequence of this state of affairs is that the average practitioner, and indeed neurologist, has been led to look upon the subject as being essentially chaotic and vague, and has taken refuge in a few simple conceptions that are either quite superficial or throughout erroneous. Having had no opportunity for personally studying the subject at first hand, he is often unaware of the fact that there exists in connection with it a large body of precise knowledge, and that the progress made here in the past twenty years has been at least as extensive and valuable as that made in any other branch of medicine. The great need at the present moment is not a fruitless discussion of intricate problems on the part of those who have never investigated them, but the awakening of the medical profession to the fact that in their education there has been an important gap which should be filled. I would strongly urge that what we need is study, and not talk; facts, and not opinions. The weighty lessons of bacteriology were assimilated by the profession only when this subject had been embodied as an integral part of the curriculum at the medical schools, and we cannot hope that the no less weighty lessons of clinical psychology will be assimilated until this likewise has become an integral part of the medical curriculum.

<sup>1</sup> Read, as part of the Symposium on the Psychoneuroses, before the Canadian Medical Association, at Toronto, June 1, 1910. Published in the *Interstate Medical Journal*, August, 1910.

Few of those in a position to judge would admit that the study of clinical psychology is less complex, less difficult, or less significant—both to our patients and to society at large—than is even that of bacteriology.

I shall here attempt to sketch some of the more important and secure of the modern conceptions of the neuroses, and may state at the outset that we owe most of them to the fundamental work of Freud, who has for the first time brought order and intelligibility into the subject.<sup>1</sup> As Dr. Putnam has dealt with the general questions of ætiology, I shall confine my remarks in this connection to a single point—one of essential moment. It is highly desirable to bring our views in this matter into line with those on other diseases. Increased knowledge in ætiology means an increased precision in estimating the relative significance of the various pathogenetic factors. In place of an ill-defined group of banal causes, we come to distinguish a specific cause for each disease, and, by the side of this, various predisposing and exciting factors. For instance, whereas thirty years ago general paralysis was thought to be due to the combined action of a variety of agents, such as heredity, mental strain, alcoholism, and so on, it is now known invariably to result from a specific cause—namely, syphilis—the other factors playing a relatively subordinate part in its production. In the past fifteen years, thanks to the researches of Freud, we have learnt to recognise the specific cause of the neuroses—namely, some disturbance of the sexual function; in other words, one maintains that no neurosis can possibly arise with a normal sexual life. I know that this statement must at first sight seem strange. There is a strong tendency in medical circles to discount the significance of the sexual life in general; an illustration of this tendency is the total omission of the subject from medical textbooks and from medical teaching, so that most practitioners do not even so much as know the names of the manifold sexual disturbances. Even the importance of syphilis in disease has been accepted with the greatest reluctance. It took a quarter of a century to establish the syphilitic origin of tabes, and this was done only in the teeth of strong opposition on the part of the leading authorities, including Charcot, Leyden, and many others.

<sup>1</sup> As the present paper aims only at presenting Freud's views, this sentence should not be taken as intending to depreciate the value of the work done by Janet, Prince, and others, along different lines.

Many writers even maintain that it is improper to inquire into the sexual life of patients, and it is curious to note that it is just these writers who deprecate the importance of the subject. Now, a man may have the right to refuse to investigate a given matter, but he cannot at the same time pose as an authority on that matter. What would be thought of a physician who taught that it was wrong even to inquire for evidences of rheumatism in cases of juvenile heart disease, and then at the same time proclaimed that rheumatism played no part in this connection? Yet it is precisely such illogical conduct as this that many modern writers are guilty of in regard to the neuroses. Others admit that sexual disturbances may play a certain part, but would place them side by side with many other factors, and deny that they are in any sense specific. One can most readily criticise this position by drawing an analogy with the acute fevers, scarlet fever, rheumatism, poliomyelitis, and so on. If any one thirty years ago had enunciated the opinion that these are invariably due to infection with micro-organisms, and that other factors play a subordinate and non-essential part, he would certainly have been accused of gross exaggeration and defective judgement. Suppose, on the other hand, that to-day a physician were to teach that epidemic meningitis was due to the combined action of numerous factors, such as heredity, ill-nourishment, strain, chill, etc., and that in some cases possibly infection may *also* play a part? It would surely be said that his perspective of the relative importance of these factors was strangely distorted, and that he could have no true conception of the scope of infective agents. There still survive physicians, untrained in bacteriology, who take precisely this view of poliomyelitis, rheumatism, and similar conditions, and their position resembles that of most members of the medical profession in regard to the neuroses, who are untrained in clinical psychology.

We turn now to the question of classification of the neuroses. In the past it has been customary to group these according to the symptoms present. For instance, in a quite arbitrary way a large group of symptoms was brought together, and a patient suffering from them was said to have neurasthenia. Other symptoms were said to characterise hysteria, and these two terms, together with the occasional introduction of hypochondria, are still commonly thought adequate to describe all varieties of neurosis. It should be plain, however,

that this type of classification is from its very nature a tentative one, only to be used pending further investigation. It reminds one of the old 'simple continued fever,' which in former years was used to designate a number of conditions that are now known to be quite independent of one another. We cannot rest satisfied with any classification of disease that is based on an arbitrary grouping of symptoms, and every effort should be made to distinguish different types, not according to their superficial characteristics, but on the basis of their pathogenetic origin. Only when we penetrate into the actual nature and aetiology of different diseases can we separate the essential from the accidental, and thus differentiate one type from another. It is significant that the most discordant views on classification exist precisely where least is known of pathogenesis and aetiology—for instance, in the hinterland of chronic joint affections. Thanks to the researches of Freud, we are now in a position to recognise the essential pathogenetic characteristics of the neuroses, and thus to distinguish the different types.

Freud has pointed out that it is necessary to separate the 'actual neuroses' from the 'psychoneuroses,' the fundamental distinction between the two being the fact that in the former the individual symptoms cannot be further reduced and explained by any form of 'psychological analysis,' whereas in the latter the symptoms can be shewn to be the last links in a long chain of mental processes. Put simply, 'actual neuroses' are of physical, psychoneuroses of mental origin. They represent respectively disturbances of the two aspects of sexuality, which, like all biological instincts, has both a physical and a mental component. It is probable that the disturbances in the physical sphere are ultimately of a toxic nature, and it is highly suggestive that the symptoms of the actual neuroses shew striking points of resemblance with those accompanying disorders of the internal secretions, notably Graves' disease. A further difference between the two great groups of neuroses, the one on account of which the designation 'actual' was coined, is that the causes of this group are current ones, whereas those of the psychoneurotic group lie rather in the past and owe their effect to their continued activity in the unconscious mind.

There are three '*actual neuroses*'—neurasthenia, anxiety-neurosis, and hypochondria. Concerning the first of these, the

following general remark must be made at the outset: One of the matters on which investigators are most in accord is that the term 'neurasthenia' is commonly made to include entirely different conditions. Since Van Deussen first used the term,<sup>1</sup> over forty years ago, it has become applied over an ever-increasing range, so that Raymond's recent description of neurasthenia as *un géant informe* is only too well founded. In an average medical textbook at least five totally different conditions are confounded in the description of neurasthenia. The wide application of the term is doubtless due to the consolation there is in at least being able to give a name to conditions which are difficult to comprehend, and it depends on two kinds of mistakes. In the first place, many symptoms, such as obsessions, which are in no way part of neurasthenia, are grouped together with it by those who do not know the different pathogenesis of the conditions in question; and, in the second place, numerous errors in diagnosis are made owing to the insecure criteria commonly relied upon for this purpose. For many years it has been pointed out by various authorities that conditions grouped under the term 'neurasthenia' are really distinct from this. In 1864, Krafft-Ebing maintained the independence of obsessional states, twenty years ago Janet separated obsessions and phobias under the title of 'psychasthenia,' and fifteen years ago Freud demonstrated the nosological independence of the anxiety-neurosis. I should say that if a series of cases in which the diagnosis of neurasthenia had been made were submitted to exact analysis, it would turn out that the majority of them were really cases of anxiety-neurosis, obsessional neurosis, or of some form of hysteria; that many were mild or early forms of dementia præcox or manic-depressive insanity; that a small proportion were toxic psychoses, particularly early general paralysis and post-influenzal depression; and that only a minimal number, certainly fewer than one per cent., were really cases of neurasthenia. This being so, it is evident that all hypotheses, such as the intestinal toxin one, which are derived from observation of a series of cases thrown together without any analysis, stand on a very insecure foundation. To take, without any pathogenetic differentiation, a number of cases with functional gastric symptoms, to call them at will 'neurasthenic,' and then to proclaim that neurasthenia is due

<sup>1</sup> It is a common historical error to ascribe this to Beard.

to a hypothetical gastro-intestinal toxin, is exactly on a par with taking a number of cases of pain in the legs, calling them at will neuralgic, and then proclaiming that neuralgia is due to a hypothetical strain from overwalking. Nevertheless, there is a condition to which the term 'neurasthenia' may be applied, just as there is one to which that of 'neuralgia' may be applied; but in both cases it is one that constitutes a residuum after a number of other affections have been differentiated from it. When this has been done, and only then, we have the opportunity of studying the nature and origin of it. True neurasthenia—that is, a condition with pure fatigue, sense of pressure on the head, irritable spine, flatulent dyspepsia, and constipation, none of which symptoms has been secondarily produced by any of the affections mentioned above—will be found to depend on excessive onanism or involuntary seminal emissions.<sup>1</sup> The specific cause is the inordinate repetition of some form of auto-erotic activity, of an unsatisfactory nature, which occurs in spite of a painful mental conflict. The psychical energy of the person is being unduly taxed to replace the excitation that normally should come from without. The harmful effect of masturbation is frequently exaggerated, and sometimes altogether denied, the truth being between the two extremes.

The second 'actual neurosis' is given the name 'anxiety-neurosis,'<sup>2</sup> because morbid anxiousness or dread is the most constant symptom present, frequently dominating the clinical picture; and because all the other symptoms stand in the closest relation to this, being best regarded as secondary derivatives of it. The most typical form of the affection is the 'anxiety attack,' though chronic symptoms are often found during the inter-paroxysmal periods. In an acute attack the dread may be very intense, and is often accompanied by a sense of congestion in the head, with a fear of impending apoplexy, insanity, or death; consciousness may even be lost. There is a great increase in frequency of the heart's action, with anginal pain, marked palpitation, fluttering, and irregularity; it may seem temporarily to stop. General tremor and sweating occur, and the pupils may be widely

<sup>1</sup> Those tempted to dismiss this statement out of hand are reminded of the qualifications under which it is made—namely, the strict definition of the term 'neurasthenia.'

<sup>2</sup> A fuller discussion of this topic will be found in Chapter XXVII.

dilated. Nausea, and sometimes vomiting, occur, and they are frequently accompanied by diarrhœa and a free flow of urine. Respiratory symptoms are in some cases very pronounced, the chief being asthmatic attacks with air hunger and a sense of suffocation. Nightmare is a manifestation of this affection. Very frequently the attacks are larval or incomplete—that is, only some of the symptoms appear. The commonest of these are attacks of vertigo, palpitation, sweating, sudden hunger, an imperative desire to micturate or defæcate, and feelings of suffocation. They are accompanied by a variable amount of anxiety, though the patient, having his attention concentrated on the physical disturbance, may not directly complain of this. The vertigo is a locomotor one, like that due to eye trouble, the patient feeling that the floor is swaying, and that he cannot support himself; the legs feel heavy and trembling, and give way under him. There is no sense of external rotation of objects in a definite direction, as in auditory or cerebellar vertigo. In the chronic condition the patient is in a state of apprehensive expectation, dread, or uncertainty. This becomes readily attached to any idea that in any way justifies anxiety; it therefore frequently arises in connection with ideas that normally evoke a trace of this, such as thunder, snakes and insects, the dark, and so on. Sleeplessness and general irritability, with a hyperæsthesia to auditory sensations, are common accompaniments of this anxious state. Other chronic symptoms are giddiness, paræsthesias—simulating rheumatic pains—vasomotor congestions, and gastro-intestinal disturbances, especially nausea and diarrhœa. When one group of symptoms is especially prominent, particularly the respiratory, cardiac, or gastro-intestinal, the condition is very apt to be mistaken for organic disease. I have several times seen such cases with profuse sweating, occurring only at night, arouse a grave suspicion of phthisis.

The ætiological agents may arise in various ways that it is impossible here to enumerate, but they can all be resumed under the following statement: An anxiety-neurosis is the result of sexual excitation occurring under circumstances in which the mental constituent (desire) is not allowed to reach consciousness freely. Typical instances of these are the embraces of engaged couples, the employment of certain harmful preventive measures, particularly *coitus interruptus*; sexual



abstinence, particularly when previous indulgence is suddenly given up, such as on the death of the married partner or on refraining from long-continued masturbation. The desire is diverted from consciousness and becomes converted into its opposite—namely, dread; morbid dread is sexual desire that the subject does not wish to feel. Overwork and other forms of strain act only as exciting factors, and are powerless to produce an anxiety-neurosis unless the specific cause is present. The knowledge of the pathology of the condition thus enables us to carry out a rational and effective treatment, which is otherwise impossible.

It will be noted that the cause, and therefore the treatment, is almost exactly the opposite in these two forms of actual-neurosis. Neurasthenia is due to the combination of deficient afferent excitation (lack of external stimulation) with excessive efferent outflow, while the anxiety-neurosis is due to the combination of excessive afferent excitation with deficient efferent outflow.

The third actual-neurosis, hypochondria, is characterised by excessive preoccupation with the sensations and functions of various internal organs. It principally concerns the functions of the alimentary canal, although the cardiac and genital systems may also be implicated, and even the respiratory one (certain forms of bronchial asthma belong to this category). It is difficult to expound what is known about the pathology of the condition without presupposing some knowledge of the narcissistic component of the sexual instinct, but the main points are these: The capacity to yield on suitable excitation sensations of an erotic nature is in no sense confined to the genital area, the lips and skin (tickling) being, for instance, well-known examples to the contrary. Nor are these erotogenic zones, as they are called, confined even to the surface of the body, and there is reason to think that, in a very varying degree, this erotogenicity is exceedingly widely distributed. Now, the essential feature in the pathology of hypochondria is that there is a damming back of the 'sexual hunger' (Libido) into one portion only of the general erotogenic system—namely, the internal organs. The secondary result of this is an excessive attraction of interest on to the sensations and functions of the organs concerned. Like the other actual-neuroses, hypochondria is most often complicated by a psycho-neurotic superstructure which can be remedied by psycho-therapeutic treatment.

We come next to the *psychoneuroses* proper, and as there is a great deal that is common to the pathogenesis of all forms of these it will be convenient to make some general remarks of uniform applicability. The first step in the understanding of these affections is the realisation that the symptoms result from the activity of certain unconscious mental processes—that is, of processes which the patient is unable spontaneously to recall to his memory. If we confine our attention only to those processes that are conscious we are soon struck by the sense of discontinuity in the patient's mental life. We find that a bizarre obsessive thought suddenly arises, like a volcanic island in the Pacific, apparently from nowhere; or that a given harmless object awakes in him an uncontrollable fear or an outburst of rage. These processes seem to be quite isolated phenomena; they have apparently no connection with the rest of the patient's mental life, and when superficially regarded they are quite inexplicable and illogical. As soon, however, as they are traced by psycho-analysis to their origin it is found that they are connected with highly significant underlying mental processes, of which the patient was not at all aware. They then prove to be throughout intelligible, and the distress they occasion is shewn to be logically quite justified. The island ceases to be a freak of nature, and takes its place in the general rational scheme. The discontinuity of mental life is merely an apparent one, and disappears as soon as one realises that only a part of that life is conscious, another equally important part being unconscious. The knowledge of various unconscious mental processes given us by Freud has proved illuminating not only in the case of the neuroses, but also in the so-called normal, a theme that it would here be out of place to discuss, and it has thrown light on a number of matters that were previously obscure and incomprehensible. Without this knowledge it is quite hopeless to attempt to solve the many riddles of the psychoneuroses.

The next question is the source of the pathogenic activity of these unconscious processes, or rather the source of the unconsciousness of the processes, for, strangely enough, this is only another aspect of the same question. Their harmful effect is due to the fact that they are unconscious, and vanishes when they are made conscious; it is on this empiric knowledge that the invaluable psycho-analytic method of treatment is

based. The processes in question are unconscious because they have forcibly been kept so or made so by a defensive act on the part of the patient. They concern impulses and memories that the patient wishes to forget and cannot bear to recall, from which he has striven to get away. They are disagreeable to him for reasons such as shame, disgust, conscience, and so on. The occurrence just mentioned is technically described by the term 'repression.' Further study of the pathogenic repressed processes reveals the fact that they are always of a dynamic nature—that is, they represent a striving, a tendency, or, most simply expressed, a wish. This is a very important matter, for it will at once be noticed that it contradicts the current opinion that static mental processes, such as a painful shock, grief, etc., are the essential cause of hysterical symptoms. It gives us a new point of view, for we now describe the splitting of consciousness, or psychological disaggregation, which has long been known to be at the basis of hysterical symptoms, in terms of mental conflict. The symptoms arise as the result of a conflict between two forces, one of which is a wish that is striving to realise itself consciously; the other of which is an effort to keep back all knowledge of this wish—to 'repress' it. Neither of these forces is entirely successful, and the result is a compromise, which clinically is called a symptom. The 'repressed' wish comes to fulfilment in the patient's unconscious phantasy, but is not admitted to external expression until it has been distorted by the repressing action of the opposite force, which is termed the endopsychic censor. We can, therefore, formulate the general statement that every psychoneurotic symptom is the disguised manifestation of a repressed wish-fulfilment. Neither force altogether succeeds or altogether fails. The wish is not expressed in its native form, but undergoes distortion; and the censor fails to achieve its object of preventing the wish from reaching consciousness, though it succeeds in preventing the significance of this from being appreciated.

When the whole process is elucidated it becomes evident that the *underlying* dynamic forces, or wishes, are in every case of a sexual nature. The symptoms thus represent a perverse form of unconscious sexual gratification, a fact which explains the persistency with which so many patients cling to them. There is always an unconscious resistance against getting better, for giving up the symptoms means renouncing

a certain amount of sexual gratification, in many cases the chief one open to the patient. This dogmatic statement may sound unlikely, but it is a question that can be decided only by actual experience, and all those who have succeeded in fully unravelling such symptoms are unanimous in supporting this conclusion. It should be remembered, however, that while it is maintained that the underlying, and specific, wishes are always of a sexual nature, one must guard against giving the impression that according to psycho-analysis *all* the factors are sexual. This, indeed, would be as absurd as to maintain that in a case of pulmonary tuberculosis there are no other factors operative than the presence of the specific bacillus, whereas in both this case and that of the neuroses everyday experience, not to mention that of the war, shews just the contrary.

The actual pathogenesis of psychoneurotic symptoms is far from being as simple as I have just schematically indicated. In practice one always finds that a symptom results not from one submerged wish, but from many. In the series of unconscious psychical processes that underlie a given symptom are woven a great number of actual experiences that the patient has lived through. The memory of these experiences has in many instances got lost, through the process of repression. This is because the memories have become associated in the most complex manner with submerged wishes, so that the mental processes in question are exceedingly intertwined. On disentangling them one finds that the energy that goes to make up the symptom is derived from various sources, some of recent date, others of older. In every case, however, the most essential sources are those of earliest date—namely, in the first half of childhood. These are present in every case, so that one may lay down the general law that nothing happening to a child after the age of five can cause a psychoneurosis. Later experiences, of whatever kind, are only significant in this direction if the specific causes have already been in operation before this age. The importance of this for prophylaxis is obvious. The specific causes in question are various sexual experiences and errors in development in early childhood, of a kind that I have here no time to describe. Freud has shewn that the sexual life of children, though widely differing from that of adults, is far richer and more significant than is commonly supposed. From the early tentative sexual

trends are developed, on the one hand the relatively precise sexual functions of adult life, and on the other a great number of non-sexual mental capacities and activities. The early development of the sexual instinct is a highly delicate one, and one peculiarly prone to errors both of direction and of intensity.

The statements here made apply to the four forms of psychoneurosis, though there are special psychological features of each. The best-known form is the classical hysteria, which Freud terms 'conversion-hysteria,' on account of the conversion of psychical disturbances into physical symptoms that is its chief characteristic. The second form, the 'fixation-hysteria'—of which asthma is a good example—has a similar psychological mechanism, which, however, makes use in the conversion process of an abnormal somatic reaction already performed on an organic basis. The third form is the most frequent—namely, 'anxiety-hysteria'; in it both the cause and the effect are psychical, the symptoms constituting one of the several varieties of phobias. The fourth form is the 'obsessional neurosis,' of which the commonest and most important manifestations are the obsessions and doubts.

There is an interesting clinical correlation between the actual-neuroses and the psychoneuroses which is worthy of note. After a psychoneurotic structure has been demolished by means of psycho-analysis, one often enough finds, though not in the majority of cases, that a residual actual-neurosis is left exposed which had been, so to speak, the kernel of the whole disorder, and around which the psychogenetic symptoms had grouped themselves. Further, each of the actual-neuroses roughly corresponds with a given psychogenetic syndrome. Thus, when a conversion-hysteria has been dissected away one may find a residuum of neurasthenia; a neurotic headache, for instance, may have both psychogenetic and toxic causes. Similarly, behind an anxiety-hysteria there is often to be found a certain amount of anxiety-neurosis, while hypochondria corresponds rather with a psychotic condition, paraphrenia (*dementia præcox*).

In conclusion, I would again say that the knowledge gained by patient and thorough investigation of the pathogenesis gives us both a stable foundation on which to build our conceptions of the nature of the neuroses, and at the same time the power to deal radically and successfully with these most distressing of maladies.

## CHAPTER XXII

### THE PRACTICAL VALUE OF THE WORD-ASSOCIATION METHOD IN PSYCHOPATHOLOGY<sup>1</sup>

STUDY of the association-reactions, the inception of which we owe to Sir Francis Galton's work, carried out nearly forty years ago, has proved to be equally fruitful for both psychology and psychopathology, and is now one of the most valuable methods at our disposal for investigating the constellations of mental functioning. In a recent paper Gallus<sup>2</sup> remarks: 'Unter den psychologischen Versuchsanordnungen, die die Wissenschaft in so mannigfacher Gestaltung für die verschiedensten Zwecke bereits gestellt hat, hat wohl keine in der Praxis eine reichere Anwendung und intensivere Verbreitung gefunden als die Assoziationsprüfung.' ['Of the methods of psychological investigation with which science has already furnished us in such manifold form and for the most diverse purposes, none has found a richer or more extensive application in practice than the association test.'] At the present time the method is in regular daily use with a large number of neurologists and psychiatrists in Germany and America. A few years ago the Zurich school, under the guidance of Bleuler, and particularly of Jung,<sup>3</sup> very greatly increased the value of the method by the discovery of fundamental laws which had previously been overlooked, by the definite establishment of the theory of the procedure, and by the demonstration of its practical applicability. The object of the present paper is to call the attention of those who may not be familiar with the method to some of its practical aspects; for proper study of the subject Jung's indispensable volumes must be consulted.

<sup>1</sup> Published in the *Review of Neurology and Psychiatry*, November, 1910.

<sup>2</sup> Gallus, 'Ueber Assoziationsprüfung,' *Zeitschr. f. Psychother. u. Mediz. Psychologie*, Bd. ii., S. 106.

<sup>3</sup> Jung, 'Diagnostische Assoziationsstudien,' Bd. i., 1906; Bd. ii., 1910.

The method has a number of advantages for the practising physician that unfortunately are absent in the case of many other recent discoveries in the same sphere of medicine. It is extremely simple of application, does not consume an undue amount of time, and needs no elaborate apparatus. Useful results can be obtained after a very short training, although, as might be expected, the value of these immensely increases with experience; it stands here in contrast with, for instance, the Wassermann reaction, where in the hands of those not carefully trained the results are *quite* valueless. It is not intended by this remark in any way to under-estimate the importance of experience, but merely to point out that useful results, increasing in value as the observer's experience broadens, can be obtained almost from the first. The test makes no great demand on the patient, and is thus of wide applicability. All that he has to do is to call out the *first* word that comes to his mind after hearing the stimulus-word; after a short practice, with two or three examples, most patients are able to follow out this simple instruction. As to apparatus, all that is needed is a stop-watch, registering fifths of a second. The stimulus-words employed in the test should not be fewer than a hundred in number, and the choice of them is by no means a matter of indifference. They should always be words commonly used in everyday life, and therefore thoroughly easy of comprehension to all classes of patient. A certain grammatical variation is desirable, substantives, verbs, and adjectives being chosen in this (descending) order of frequency. Much variation in syllabic length is to be avoided, and it is better to choose words of one, or at most of two syllables. A certain number of what are 'critical' stimulus-words may be interpolated, particularly words that have more than one meaning, and which are likely to strike common 'complexes'; the significance of this will presently be explained. Personally, however, I do not consider this to be either necessary or free from objections. The technique of taking the associations is slight and easily acquired; it takes much practice, however, to learn to observe and interpret various matters concerning the mode of the patient's response, tricks of behaviour, slips of the tongue, interjections, involuntary gestures, indications of emotion or embarrassment, and so on, which are often of great assistance in the elucidation of the results. Thus, even before the reactions are studied

and analysed in detail, it will have been possible for a trained observer to learn a great deal about the working of the patient's mind, though this knowledge of course needs to be amplified and confirmed or corrected by the further investigation of the individual reactions.

The reactions obtained can next be classified according to their form, a fairly simple matter. Many classifications have been suggested for this purpose, but as yet no completely logical one has been devised. The following scheme is satisfactory enough for most practical needs, and is perhaps the most widely employed; for special purposes each main group can be much further sub-divided and more closely studied.

A. *Intrinsic Association*.—'Continuity.' An essential resemblance present between the meanings of the stimulus and reaction words.

I. Co-ordination. Essential similarity between the two.

Exam. Apple—pear.

II. Predication. The reaction-word expresses some predicate, judgement, function, or attribute of the stimulus-word. Exam. Snake—poisonous.

An important sub-group here is the defining or explaining association. Exam. Book—something to read.

III. Causal dependence. The idea of causation implied in the response. Exam. Pain—tears.

B. *Extrinsic Association*.—'Contiguity.' The resemblance present is a superficial or 'chance' one.

I. Coexistence. Simultaneousness. The two ideas connected through frequent simultaneous use. Exam. Pen—ink.

II. Identity. Synonyms or nearly so. Exam. Effect—result.

III. Motor-speech forms. The two words connected through frequent use in daily expressions, proverbs, quotations, etc. Exam. Pen—sword. Cat—mouse.

C. *Sound Association*.—The resemblance between the two words being primarily an auditory one.

I. Word completions. Exam. One—wonder.

II. Clang. Exam. Line—lying.

III. Rhyme. Exam. Cart—part.



*D. Miscellaneous.*

- I. Mediate. An indirect association, intelligible only on the assumption of an intermediary bond that does not appear in the reaction. The association of the bond may be any one of the forms mentioned above, and its relation to the stimulus-word (centripetal), and to the reaction-word (centrifugal), can be separately classified. Exam. of centripetal sound disjunction. Run—rifle ('gun' being the intermediary bond).
- II. Senseless. No discernible connection between the two words; in this case the reaction-word usually refers to some object in the immediate environment.
- III. Failure. No reaction at all.
- IV. Repetition of the stimulus-word. These last-mentioned forms will later be more fully discussed.

In the normal it will be found that, within a certain range, each of these different forms of association-reaction occurs with a fairly definite frequency-incidence, so that they can be stated in terms of percentages. This percentage-incidence varies according to certain factors and circumstances, some of which will presently be mentioned, but one can usually at once see if the normal variations are grossly exceeded; for instance, clang and rhyme associations rarely exceed two per cent. in the normal, whereas in mania they may reach ninety or even a hundred per cent. In different forms of mental disorder their relative incidence is disturbed, and often in quite typical ways that are of great value in diagnosis. Thus there are distinct association characteristics for idiocy, paraphrenia (dementia præcox), melancholia, mania, hysteria, epilepsy, and toxic psychoses. In this respect association-reactions shew some resemblance to a differential leucocyte count, the percentage disturbances of which often give important clues to the nature of the disease. Just as the leucocyte count shews certain variations in the normal according to sundry factors—such as the patient's age, the state of digestion, etc.—so does the association incidence, and in both cases it is essential to know these normal variations before forming an opinion as to the significance of any deviation in a given case. A few examples of these may be given. The associations of

a child differ from those of an adult in being more sensorial, and particularly visual, in character. They are more definitely conditioned by considerations of time and space, especially the latter; this is because they refer to certain precise memories, and not to general concepts. The great majority of the associations belong to the 'intrinsic' type. The associations in old age in several respects resemble those of the child, notably as regards the infrequency of motor-speech and sound associations, the increase of intrinsic ones, and the relative poverty of available language. They differ, however, from those of the child in being much more general, and not conditioned by given spatial and temporal memories. Still more important is the variation dependent on the level of education. Jung, in his detailed comparison of educated subjects with uneducated, found that with the former (1) clang associations were seven times as numerous as with the latter; (2) egocentric reactions were twice as numerous; (3) co-ordination and coexistence associations were much less frequent; (4) senseless reactions were notably more frequent; and (5) the agreement between the stimulus and reaction words in grammatical form and in length of syllable was much less. In other words, the association-reactions of the uneducated were of a decidedly higher quality than those of the educated, which resemble those that can be experimentally produced by artificial distraction of the attention, and approximate to those found in certain mental disorders. The explanation of this rather curious finding, which is very interestingly discussed by Jung, lies partly in the more extensive vocabulary and the greater linguistic fluency of the educated person, but chiefly in the different behaviour of the two classes towards the investigation, the uneducated person treating it more as a sort of examination and devoting to it a more strained attention.

Striking, further, are the variations that depend on the temperamental or character differences. Jung has here clearly defined several distinct types, which, however, are not sharply marked off from one another. They may be grouped under two main headings—objective and subjective respectively.

The *objective* type, which may be regarded as the more normal—*i.e.*, the more unlike the definitely pathological—is characterised by the predominance of quite impersonal

reactions. The stimulus-word is taken in a literal, material sense, and emotional disturbances or personal points of view play an entirely subordinate part. The reaction may depend on either the objective meaning of the stimulus-word or on its linguistic features.

The *subjective*, or egocentric, type is characterised by the remarkable influence on the reaction of quite personal memories, often of a strongly emotional kind. There are two main sub-groups, termed the predicate and constellation types respectively, of which the second is the more abnormal. With the first of these the reactions consist of descriptions, attributes, and judgements of the idea denoted by the stimulus-word, and these are of a markedly personal nature. Very characteristic is the emotional over-accentuation of the judgement, such as in the following examples:

man—noble.  
reading—horrible.  
sister—darling.  
yellow—hideous.

The explanation of this form of reaction is that the exaggerated outer expression of emotion conceals, by over-compensation, an inner emotional deficiency. Jung<sup>1</sup> writes: 'If a test person evinces a distinct predicate type it may always be inferred that a marked internal emotional deficiency is thereby compensated. Still one cannot reason conversely—namely, that an inner emotional deficiency must produce a predicate type. A predicate type can also betray itself through the external behaviour, as, for example, through a particular affectation, enthusiastic exclamations, an embellished behaviour, and the constrained sounding language so often observed in society.' This type is commoner in women, and is found in increasing frequency with the advance of age; a notable increase in frequency occurs in women after the fortieth year and in men after the sixtieth, no doubt owing to the poorer emotional life that follows the decrease in sexual vigour at these ages.

Instead of the subject responding in an exaggeratedly emotional way, he may respond in an exaggeratedly intellectual

<sup>1</sup> Jung, 'The Association Method,' *Amer. Journ. of Psychol.*, April, 1910, p. 237.

way, simple reactions being replaced by overdrawn elaborate definitions or explanations.

car—a vehicle for transportation.

hat—a protective head-gear.

rain—precipitated moisture.

book—a source of edification.

This type is found either in stupid persons, or in persons who are afraid of being taken as stupid. It is an over-compensation for an inner painful feeling of stupidity, for what may be called an 'intelligence-complex.' Such persons are unnatural and constrained in their conversation, use flowery phrases, high-sounding quotations, complicated words and the like. They wish to appear more than they are, to influence the surrounding company, and to impress others with a show of education and intelligence. In the predicate type in general it is probable that the idea denoted by the stimulus-word appears in an unusually plastic form, particularly its visual component; whichever attribute is seized on is then taken in a directly personal way.

The second sub-group of the subjective type is called the constellation type, because the reactions are markedly 'constellated,' or determined, by personal elements of a strongly emotional kind. These elements refer to certain precise 'complexes,'<sup>1</sup> which have arisen in definite past experiences. Naturally, every one has such complexes, and in one sense all association reactions are constellated—that is, they are determined by mental dispositions which have been built up by past experiences. In the constellation type, however, the reactions are influenced to a preternatural extent by special, individual complexes strongly invested with emotion. Two sub-divisions may further be distinguished, though not sharply. The 'simple constellation type' approximates to the predicate, but the determining influences are more specific and not so general. With the 'complex-constellation' type the emotional influences differ in two respects: they are stronger, and they are usually unconscious—that is, the person is not aware of

<sup>1</sup> The term 'complex' is of course used in the Bleuler-Jung sense, to indicate the whole group of mental processes relating to a given set of experiences that have become invested with a strong feeling tone, usually of a painful nature.

their content, which, being too unpleasant to remember, has been buried.

The different types are presented in the following classification:

A. *Objective.*

- I. Reaction principally conditioned *via* the objective meaning of the stimulus-word.
- II. Reaction principally conditioned *via* the linguistic features of the stimulus-word.

B. *Subjective.* Egocentric.

I. Predicate.

- a. Personal judgement (*Wertprädikat*). Emotional.
- b. Definition. Intellectual.

II. Constellation.

- a. Simple constellation.
- b. Complex constellation.

We have next to consider what may be learned, not from the reactions as a whole, but from the individual reactions taken separately. In doing so it will be necessary to touch on the relation of the association experiment to psycho-analysis, though only the practical aspects of this relation will be referred to. Treatment by means of psycho-analysis is based on the knowledge that psychoneurotic symptoms are due to the activity of unconscious complexes, are, so to speak, symbolic replacements of these, and that they permanently cease when the patient becomes fully aware of the complexes. It has, of course, long been known that hysterical symptoms, for instance, are psychogenetic in origin, and are due to the activity of disaggregated mental processes of high emotional value; every hysteria is a splitting of the personality, and the symptoms disappear when the disaggregated mental processes, the existence of which was unknown to the patient, are again united to and fused in the main body of personality. The underlying psychological process, however, was quite enigmatical until Freud demonstrated that the reason why the complexes are not present in consciousness is because they have been forcibly kept out by inhibitions. The critical mental processes are of a painful nature, and, being irreconcilable

with the conscious personality, have been 'repressed.' The psycho-analytic method of treatment may from one point of view be said to consist in seeking for buried complexes. When these are elucidated the symptoms disappear, for the pathogenic activity of the complexes depends on their being unconscious, and ceases as soon as they are completely introduced into consciousness. The association experiment can be made, in ways that will presently be described, a serviceable adjunct in this therapeutic exploration.

In carrying out a psycho-analysis one asks the patient to relate *all* the incoming thoughts that occur to him when he concentrates his attention on a given theme and suspends his natural criticism. In this procedure, which is known as 'free' or 'unforced' association, it is essential that the patient makes no selection of the thoughts to be related. Freud assumes that under these circumstances the incoming thoughts must stand in relationship to the point of departure, and in practice one finds that, when the guiding normally exerted during conscious thinking is abrogated, the direction of the thoughts gets taken over by underlying and important mental processes, the existence of which the patient was at first unaware of. As the analysis deepens, more and more significant thoughts are reached, until the mechanism of the symptom in question is laid bare. During the intermediate stages of the procedure all sorts of apparently unimportant thoughts occur, which the patient tends to belittle and depreciate on the plea that they are irrelevant, unessential, immaterial, without significance, and so on. These intermediate thoughts, however, which hint at the deeper ones, often provide most useful clues to the observer, who has to direct his attention precisely to them, and stand sceptically aloof from the patient's judgements. Freud accepted their importance on purely empirical grounds, feeling justified by the outcome, and one of the most valuable results of Jung's investigations has been the objective demonstration, on experimental grounds, that this assumption was fully correct.<sup>1</sup>

In his deviation experiments (*Ablenkungsversuche*), carried out first with the normal, Jung shewed that withdrawal of the

<sup>1</sup> The value of this is in no way lessened by the circumstance that of late Jung, in exchanging scientific for pseudo-philosophical interests, has surrendered his previous insight into the significance of the psycho-analytical conclusions.

subject's attention during the association test, by means of external tasks (adding of numbers, etc.), was followed by definite changes in the nature of the reactions obtained. These changes he describes as a 'flattening' of the reactions; the number of superficial associations is greatly increased, especially the clang and motor-speech forms. He was further able to shew the reverse of this—namely, that an undue predominance of superficial associations, such as occurs during fatigue, after ingestion of alcohol, in acute mania, etc., is always due to a diminution of conscious attention. Now, these are precisely the characteristics of the complex-constellation type of association met with in hysteria, and which correspond with the intermediate thoughts that occur during psycho-analysis. The explanation is plain when one recalls the well-known fact that attention may be attracted from a theme either by an external stimulus, such as a noise outside the room, or by internal processes, such as an absorbing grief or an engrossing train of thought. If mental processes of a highly significant, emotional kind are present, then, whenever no specially interesting train of thought is occupying the mind, as during fatigue, or in various states of distraction, or when conscious direction of the thoughts is entirely suspended, as during psycho-analysis, these mental processes seize the opportunity to take possession of consciousness. If their emotional strength is great, this may occur whenever conscious interest is diminished. We all know how such mental processes may surprise us even in the middle of work, and at times the most distant connection, the lightest note of resemblance, may serve to elicit them. Every man deeply in love passes through countless such experiences, in which the thoughts that possess him are brought up on the slightest occasion, by a glimpse of a woman's hat, by a fleeting scent, or a dash of colour.

The more consciously deliberate is the selection of the succeeding thought or reaction, the more likely is it to belong to the intrinsic form of association, and the more logical and rational will it appear. On the other hand, the more this deliberate control of thought is diminished, so that the process is carried out automatically, and therefore influenced by emotional complexes, the more superficial is the form of association. This is the reason why the intermediate thoughts that flow in during psycho-analysis, and to which Freud attributes such significance, often proceed by means of

illogical, unreasonable connections and superficial associations, such as plays on words and the like.

The influence exerted by a complex on a given association reaction must now be considered more in detail. To appreciate this it has to be remembered that an association experiment is something more than a method for the production of word-couplets. Words are condensed expressions for concrete things, actions, and situations, so that suddenly to ask a person to respond to a word denoting a given situation, marriage, death, etc., is, on a miniature scale, the same as suddenly asking him such questions as, 'What do you feel about this? How do you behave in this case?' Now, just as there are in real life actions and subjects about which the person cannot think quickly and surely, on account of embarrassments, painful memories, doubts and so on, so there are words relating to these subjects towards which he will not be able to react promptly and smoothly. In practice one often finds that a person sticks over certain words in the test, has a difficulty in responding, and shews curious abnormalities in his reaction. These words, which are called 'critical test-words,' have touched on some feeling-complex, and this interferes with the smoothness of the response. As Jung puts it:<sup>1</sup> 'The stimulus-words are therefore merely a part of reality acting upon us; indeed, a person who shews such disturbances to the stimulus-words is in a certain sense really but imperfectly adapted to reality. Disease is an imperfect adaptation; hence in this case we are dealing with something morbid in the psyche—with something which is either temporarily or persistently pathological.' Further than this, the actual content of the reaction-word produced under these circumstances is often a symbol of the mental content of the underlying complex, so that it provides a clue to the elucidation of this. This is the more important since the complex is concealed, either purposely or not, by the patient, so that the reaction betrays what he does not wish to reveal. Often, indeed, he is not in a position directly to reveal it, for the complex stands under the ban of various inner resistances and inhibitions which prevent it from being accessible to direct introspection; in other words it is, in Freud's sense, unconscious.

The disturbances just alluded to, which betray the influence

<sup>1</sup> Jung, *op. cit.*, p. 226.



of an underlying complex, may now be enumerated. They do not, of course, all invariably occur together, a matter that depends on various factors, and some are more important than others. In judging of the significance of a given disturbance, one has to take into account many considerations—the extent of it, the presence or absence of other disturbances, the type of patient, and so on. Such a disturbance is termed by Jung a 'complex-sign' (*Komplexmerkmal*); they will presently be illustrated in detail.

1. *Delay in the Reaction-time.*—This is perhaps the most important complex-sign, and the recognition of its importance constitutes one of Jung's most original contributions to the subject. The average length of the reaction-time (duration between the stimulus-word and the response) varies in different subjects between six- and twelve-fifths of a second. With a given association it varies *slightly* with certain factors, such as the grammatical form of the words, the meaning (concrete or abstract) of the stimulus-word, and the form of association. Any gross delay in the reaction-time, however, certainly any time twice the average, is always due to emotional influences—namely, to the stimulus-word having touched on a feeling-complex. The inhibition is fully analogous with the halting stammer of a person who, on an awkward occasion, is not fully self-possessed, such as a boy making lying excuses to his schoolmaster, or a shy suitor in the throes of a declaration.

2. *Failure to Respond.*—In certain cases the person may be unable to respond at all, within the conventional limit of thirty seconds, either because his mind 'becomes a blank' and no word comes, or because his mind gets overcrowded with confusing thoughts, so that he 'does not know what to say.' This disturbance is, of course, merely an exaggerated form of the previous one.

3. *Senseless Reaction.*—As was mentioned above, sometimes no connection can be traced between the stimulus and reaction words, the latter in this case usually referring to some object in the immediate surroundings. This is analogous with what happens in conversation when someone 'changes the subject' on an awkward point being reached, or guides the theme away from a delicate topic.

4. *Anomalous Superficial Association.*—In the midst of a series of intrinsic associations a strikingly superficial one, clang, etc., may occur. If this happens more than once with

similar stimulus-words it is suspicious of the existence of an underlying complex, which has internally withdrawn the patient's attention, causing the reaction to be purely superficial. This suspicion is strengthened if the reaction-time is unduly long, for, other things being equal, a superficial association-reaction generally takes less time than an intrinsic one.

5. *Repetition of the Stimulus-word*.—Sometimes, before responding, the patient repeats the stimulus-word. This again has its analogy in everyday life, when a person, on being asked an awkward question that takes him aback, falteringly repeats the question before he is able to formulate an answer.

6. *Repeated Use of the Same Word*.—If the same word keeps recurring throughout the examination, one may suspect that it has an unusual significance for the patient.

7. *Perseveration*.—By this is meant that a given association-reaction has so taken hold of the patient's mind that its influence is perceptible in one or more of the succeeding reactions. This may be shewn in several ways. For instance, the content of the stimulus or the reaction-word may be repeated, either quite literally or nearly so, in a subsequent reaction. This latter may or may not bear a relation to its own stimulus-word; if it does not, the occurrence is much more significant. This complex-sign is often combined with the preceding (sixth) one, in that a word aroused in one association-reaction recurs in several later ones. Again, one or more reactions may shew other complex-signs (delay in the reaction-time, etc.) owing purely to the perseverating influence of the preceding reaction, and even when this itself shews none.

8. *Uncommon Style of Reaction*.—The reaction is quite unexpected, out of the common, and quite inexplicable except on the assumption of some personal constellation which has determined it. Such reactions often occur as sentences, and generally are of the mediate form of association.

9. *Assimilation of the Stimulus-word*.—The stimulus-word is taken in a rare or unusual sense, or is misunderstood in a striking manner, being 'assimilated' (to use an expression from the science of phonetics) to some underlying personal complex. An analogy from everyday life is when a person fancies he hears his name being mentioned in a public place when really it is only a name bearing some resemblance to his own.

10. *Defective Reproduction of the Reaction.*—When after the test is finished the patient is asked to recall one by one the reactions he gave to the different stimulus-words, he may shew one of the following three errors in reproduction: He may have quite forgotten the reaction, he may have forgotten even having been given the stimulus-word in question, or he may incorrectly reproduce the reaction; in the last case the incorrect word is often of service in indicating the nature of the complex.

With the psychoses the discovery of the active complexes is of great value, partly as regards making an accurate diagnosis, but mainly for the purpose of investigating the actual mechanisms at work, so that the morbid picture may become more comprehensible throughout. A considerable number of such analyses based on association tests have been published, and, thanks principally to Jung's studies, much light has been thrown on these obscure questions. In the psychoneuroses, on the other hand, such investigations are of immense value not only in these respects, but also in effecting a permanent restoration of the patient to health, for, as was mentioned above, the pathogenic activity of the complexes is dependent on their being split off from consciousness, and vanishes when they have been united to consciousness.

My experience in the use of the word-association methods leads me to the conclusion that its practical value is mainly twofold: first, in the diagnosis of which mental disorder is present, more especially if this is a psychotic one; and, secondly, for the didactic purpose of training beginners in psycho-analysis, for which it is excellently suited. Although I have also used it extensively in exploration for therapeutic purposes, as an adjunct to psycho-analysis, I have not found that its use here possesses any advantage over the regular technique—except very occasionally indeed; for instance, with stupid people, and with some children.

The following examples are given to illustrate the complex-signs just described, and to indicate how these may point the way to highly significant mental processes that were concerned in the genesis of the affection. In each case only a selection is given of the associations taken. It would be beyond the scope of this paper to attempt to relate any analysis of the cases or even the full analysis of the individual association-reactions that shew complex-signs, but perhaps enough

material will be given to illustrate the significance of the subject.

CASE I.—The patient was a young man suffering from an obsessional neurosis, which had incapacitated him for two years. One of his main symptoms was an obsession that he was influencing any one at whom he looked, so that the other person became uncomfortably over-aware of his eyes. During treatment it was found that the roots of the trouble reached back to early childhood, and took origin in forbidden curiosity, which related to acts both of seeing and of touching.

Stimulus-word.	Reaction-time. <sup>1</sup>	Reaction-word.	Reproduction.
coal	9	fire	— ( <i>i.e.</i> , correct)
brother	6	sister	—
mount	17	Venus	—
tea	7	coffee	—
drop	9	water	—
cow	6	horse	—
pin	7	needle	—
blood	37	sack	—
tree	11	leaf	—
snow	7	ice	—
rail	6	fence	—
plate	7	cup	—
touch	25	piano	hear
train	9	seat	—
roof	8	house	—
rub	10	down	—
bag	18	sack	o ( <i>i.e.</i> , failure in reproduction)
watch	17	pocket	—
jump	11	run	—
mouse	10	rat	—
post	5	office	—
blue	12	white	—
pot	24	sugar	sweet
stick	14	candy	—
chair	9	sofa	—
ball	16	paper	o o ( <i>i.e.</i> , stimulus-word forgotten)
sheet	9	bed	—
egg	11	hen	—
wood	10	pile	—
note	9	paper	—
fire	8	water	—
sister	10	brother	—

<sup>1</sup> The reaction-times are all given in fifths of a second.

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
cup	8	saucer	—
warm	9	hot	—
turn	6	over	—
waste	16	labour	paper
dog	7	cat	—
hand	9	foot	—
tongs	11	curling	—
stone	23	glad	—
table	11	cover	—
ride	9	horse	—
paper	22	wall	thin
room	9	chair	—
red	8	white	rose
live	15	light	—
back	13	front	—

The first word to evoke complex-signs was 'mount.' After finishing the test I asked the patient to tell me what thoughts occurred to him when he concentrated his attention on the word. The following came: 'Mount of Venus; I read recently in a novel about the part of the hand palmists call by this name; it is also the place where Tannhäuser learnt the art of love; I have often wondered about his experiences; in Latin Mount of Venus would be *mons veneris*; I remember as a boy I used to think this was *mons venerable*; I must have heard it somewhere, but can't recollect where.' I did not tell him the anatomical meaning of the term, but later in the treatment it turned out that he had seen it when exploring, at the age of nine, a midwifery book of his uncle's, who was a medical man. The alteration to 'venerable' is an instance of the characteristic falsification by which early sexual memories are distorted and robbed of significance in consciousness.

The next word to note is 'blood,' which, like 'mount,' gave an unusual reaction with a lengthened reaction-time. 'Sack' is certainly a curious response to 'blood,' and any one unaccustomed to psycho-analytic work might be disposed to explain it by attributing it to 'chance.' However, investigation of mental processes, just as that of physical ones, brings with it an increasing realisation that there are other factors at work besides chance, though recourse to them is less convenient. The suspicion that something lay behind the reaction was strengthened by the reappearance of the word 'sack' as a response to 'bag,' again with a long reaction-time, and now

with a failure in reproduction. The perseverating influence of this last reaction is also to be noticed in the next succeeding one, both in the long reaction-time and perhaps also in the content of the response ('pocket'). Thought of blood brought the associations: precious blood; menstrual blood; woman; sacrilegious; sack; religious ideas. 'Sack' brought: *sacré cœur*—a picture of the Sacred Heart (in the Saviour's bosom) that used to hang in his room; a convent named *Sacré Cœur* in a French town where the patient had been a student; then, after a long pause, the following story: One evening he was on the point of seducing a girl in humble circumstances, who was a pupil at the convent, when he observed her surreptitiously swallowing small pieces of red paper. She refused at first to say what they were, but then confessed they were paper models of the Sacred Heart; the nuns, who had given them to her, had instructed her to swallow them if ever she was in sore temptation, when she would surely be saved. Their prediction was verified, at least on this occasion, for the patient was for the time overcome by remorse. The word 'sack' in the reaction, therefore, succinctly expressed his attitude in a very significant matter. I should add that on further investigation both words were found to be related to still more intimate memories, which accounted for the final letter of the word 'sack.'

'Touch,' with a long reaction-time, a false reproduction, and a rather unusual response ('piano'), reminded him of a lady whose piano-touch he greatly admired, and of a sister, to whose playing he used as a child to listen with delight. Both were very significant persons in his life in ways that cannot here be described, and the origin of his symptoms centred in thoughts relating to them.

'Blue,' 'red,' and three other colours not mentioned in the list given above, all produced the same reaction-word, 'white,' some with complex-signs. This was, as might be surmised, connected with a purity-complex, which referred to a certain woman, and also to the habit of masturbation, against which he had struggled hard. The false reproduction to red ('rose') reminded him of a red rose, the symbol of passion; he had recently had a dream in which the presentation of red roses to a woman played a significant part.

The reaction to 'pot' shewed a long reaction-time, and a false reproduction; a perseverating influence is to be noted

on the succeeding response ('candy,' with a long reaction-time). The words 'sugar,' 'sweet,' 'candy' shew that the stimulus-word 'pot' touched on some complex referring to an enclosed delectable. The following associations to 'pot' indicate what this was: 'Keep the pot boiling; warmth; love; sugar bowl; sugared pill; something disguised; the bowl of night; mask; memory of having reacted to the word "mask" in an association test four months ago with the word "nut";<sup>1</sup> the proof of the nut is in the kernel; something precious that is hidden; a Biblical quotation, "There is nothing covered that shall not be revealed, nor hid that shall not be known." ' Subsequent analysis made plain the nature of this hidden secret which was the subject of so much curiosity and desire.

The word 'ball,' which was misunderstood as 'wall' (assimilation), evoked marked complex-signs. The reaction-word ('paper') occurs in two other places, one as a false reproduction, shewing its activity in the patient's mind, and to it as a stimulus-word the reaction-word 'wall' follows, also with a significant disturbed reproduction and a delayed reaction-time. One must assume, therefore, that 'paper' was related to some feeling-complex, and probably in connection with 'wall,' as 'wall-paper.' 'Wall-paper' brought the following associations: Memory of a murder case in Edinburgh where a woman for a murderous purpose obtained arsenic from wall-paper; a morbid fear he had had of lying in bed close to the wall owing to the danger of being poisoned from the arsenic in it; wall-paper is a covering to hide things; 'the very walls have ears'; an obsession he had had that he might be spied on or overlooked when bathing; the thought of his present bedroom, which is separated by only a thin wall from a room where two girls sleep: he had jokingly remarked to them that the sound of their talking came through so plainly that he thought the partition must be made of wall-paper; the temptation he had successfully resisted to spy through a small opening in this wall; a similar temptation on a previous occasion to which he had succumbed; early memories of prying into forbidden secrets. The first of these associations, about the danger of wall-paper, related to a phobia which had arisen by displacement; the fear of being overseen through a wall (covering a corresponding repressed wish to be seen) was transferred on to the substance of the

<sup>1</sup> This astonishing hypermnesia was quite correct.

wall, hence the apparently absurd fear of wall-paper. The word 'paper' itself, however, was connected with still deeper matters. On thinking of it he was reminded of a comic song heard years before, the burden of which was a discussion of the curious places in which newspapers might be found. The only line the patient could recall was from the last verse, where as a climax the singer mentions having found one in a woman's bustle. Then came the memory of his brother's mania as a boy for chewing paper: 'He used to nibble my books like a mouse.' These apparently trivial associations were only the cover for more significant ones. The last one reminded him of how fond he was of playfully running his fingers up and down his little niece's back in a tickling way, crying 'Mousey, mousey!' This was a harmless echo of experiences, till now forgotten, which he had lived through from the age of five to seven with the little girl's mother, his then twelve-year-old sister, when his curiosity led him vainly to explore her dorsal regions as they lay together in bed. The desires then aroused proved of lasting significance in his later life, and were one of the deepest foundations of his symptoms. In the light of this the first association, about the newspaper in a woman's bustle, becomes more intelligible, and a clang association between arsenic and a vulgar name for the anus connected the whole complex to the phobia of wall-paper. The complex underlying the 'waste-labour' reaction, with its false reproduction of 'paper' (waste-paper), referred to the fruitlessness and wastefulness of his masturbatory and other sexual proclivities ('Love's Labour's Lost'). So that the innocent stumble in the association-reaction 'ball-paper' was not such an indifferent matter as it at first sight looked, and disclosed a large part of the patient's most intimate mental life.

The curious response to 'stone,' namely 'glad,' with its accompanying delay in reaction-time, was also strongly constellated. The first thought it brought to his mind in the analysis was 'Gladstone,' but the patient, who was an American, had never been interested in the politician of that name and had no special memories relating to him. His thoughts passed to a certain Gladstone Street, in a small town where he had spent two or three years, and two memories came back to him. A friend of his was engaged to a lady who lived in that street, and used to urge the patient to accompany him on his visits to the house; the visits made the patient



very uncomfortable, though he didn't know why. He further recalled that when going alone for an evening ramble he used constantly to find himself being unconsciously directed towards this particular street, though again he couldn't say why. The word 'glad' recalled the heroine of that name in the piece, 'The Dawn of To-morrow,' which was at the time being played in Toronto. The poor heroine Glad, by the exercise of various virtues, brings back to health and happiness a man who was suffering from an incurable nervous disease, as the patient had believed he was. His interest and sympathies were therefore attracted by the story, and he had half consciously read himself into the part of the hero, an extremely common process which Freud calls 'identification.'<sup>1</sup> The patient had not actually seen the play, but it reminded him of having seen the leading actress, Miss Eleanor Robson, whose acting he much admired, in another play, 'Merely Mary Ann.' In this the hero is attracted by a servant girl, of whom he wishes to take advantage, but is inhibited by moral scruples; the girl leaves him, comes by a fortune, which enables her to become well-educated and refined, and, after overcoming various complications, marries him. The patient, who, like the hero in the play, was an artist, had been involved in a *liaison* with a servant girl, which he had broken off because he did not think she would make him a suitable wife; being very fond of her, however, he had often regretted this, and had many times played with the idea that she might come into a fortune which would raise her as regards both education and social standing. He believed that if he were happily married he would get over his troubles. The word 'stone' brought to his mind a line of Tennyson's 'Break, break on the cold, grey stones,' which led ('break,' 'cold,' 'stone') to a complex that had caused him the greatest distress—namely, miserable fears that in consequence of his masturbation habit he was becoming sexually impotent (testicular atrophy, etc.). We can now see why he had felt himself into the two plays, where the hero is cured or made happy by a poor woman, why he couldn't bear to watch his friend's happiness in Gladstone Street, and why nevertheless he used unconsciously to direct his steps in the direction that symbolised his secret wishes (Glad-stone).

The last stimulus-word to strike a complex was 'lime.' He had evidently misunderstood this for 'lime,' another instance

<sup>1</sup> An interesting example of this mechanism is described in Chapter XXIII.

of assimilation. 'Limelight,' the idea in his mind, was connected with many strong wishes in his mind. When younger he had spent much of his time day-dreaming that he was a great actor, a great musician, a great orator, holding spell-bound an enraptured audience, and even when a boy he had often arranged private theatricals with himself as the sole performer, and his family and friends as audience. As will probably be surmised from the foregoing remarks, this tendency was only a surface manifestation of more secret desires connected with the subject of being gazed at. The word 'line,' which he had automatically avoided, brought to his mind the first line of a coon song: 'Down the line, where stars do shine' (the girl he had lost lived 'down the line'), then 'lying down,' then 'to lie down is used to denote sexual relations, to take it lying down also means to be a weakling or a coward, to be defeated.' The stimulus-word, therefore, had touched on his impotence-complex, and he had over-compensated for the inner feeling of weakness by developing an idea (lime-light) which not merely repudiated this, but in his fancy raised him to a glorious pinnacle of greatness.

As was mentioned above, it is impossible here even imperfectly to exhibit the precise nature and activity of the complexes revealed by the disturbances in the association-reactions; I can only state that they all stood in intimate relation with the various symptoms, and that the elucidation of them was followed by the happiest results to the patient.

CASE II.—The patient was a married woman suffering from a mixed neurosis, principally hysteria; it had confined her to bed for several years. Her chief symptoms were nervous dread, severe pains in all the limbs, gastric disturbances, and various mental inhibitions.

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
cat	8	animal	—
red	9	colour	—
door	14	stoppage	passage
cup	9	to drink out of	—
child	11	small boy	boy
star	11	body in the heavens	heaven
mother	15	parent	—
rail	26	something long	has length to it
bag	12	something to hold things	—
cold	9	atmosphere	—

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
block	8	square piece of wood	—
rub	20	hard	o
roof	11	black	—
nut	7	shell	—
horse	—	o	—
car	12	riding	—
blood	10	red	—
tool	9	instrument	—
seat	—	o	—
girl	9	child	—
tongs	8	brass	—
blue	14	blue	sky
turn	9	twist	—
egg	19	yellow	o
wood	13	yellow	—
stone	10	hard	—
room	17	house	o
grass	12	yellow	green
pink	8	ribbon	—
climb	8	ladder	—
dog	24	black	o
warm	9	fire	—

The associations evidently belong to the constellation type, and shew, further, a decidedly predicate quality.

The reaction to 'door,' with its delayed response ('stoppage') and false reproduction ('passage'), was connected with a 'constipation-complex,' from which she had suffered since childhood, and this in its turn was related to a repressed complex on the subject of pregnancy. The idea of abdominal distension from constipation was, as is so often the case with neurosis, unconsciously associated with the idea of pregnancy.

'Rail' awoke a directly erotic complex, as may be surmised from the reaction-words, and 'rub' the thought of masturbation, about which the patient had suffered intense remorse.

The word 'horse,' to which she failed to react, reminded her of a horse that had been named after her, and of which she had been devotedly fond. It had suddenly dropped dead the year after her father had died of heart disease. For two years she had had a great fear of dying from heart disease herself, a symptom accentuated by an anxiety-neurosis with marked cardiac palpitation. This memory led to other more important ones about her father, which are too long to repeat here.

'Seat,' to which also the patient failed to react, reminded

her of the following painful episode: At the age of fourteen, just after the onset of menstruation, she was induced against her will to play the piano before some strangers; she was unusually bashful and embarrassed. As she sat down awkwardly on the music-stool the seat collapsed, and the spike penetrated her genitalia, inflicting a rather severe injury. In connection with the occurrence she suffered agonies of shame in various ways, on the medical examinations, on solicitous enquiries from men acquaintances, on subsequent pain under embarrassing circumstances, etc. Since that time she had had a dread of music-stools and insecure seats. The episode was all the more significant to her in that the idea of it became associated with the repressed memory of onanistic acts carried out in childhood on low stools; hence her feeling of shame had a deeper source.

'Blue' reminded her of deep depression ('fit of the blues'), and pessimism about getting better.

'Egg' brought to her mind the great disgust with which she regarded this article of diet, a complex based on strongly repressed sexual ideas; the striking perseverating influence of the reaction-word 'yellow' will be noticed.

'Room' made her think of the exceeding distaste she had for the bedroom where she had spent so much of her time, and, indeed, for the whole house. This repugnance towards her home naturally had a deeper significance (an unhappy marriage); with women in general the home is apt to acquire symbolic meaning.

'Dog' reminded her of a black spaniel of which she was as a child passionately fond. Two months later in the treatment a previously forgotten (repressed) memory was recovered, relating to sexual excitations she had experienced at the age of six while riding or jumping up and down on this dog's back.

CASE III.—The patient was a man in middle life, who had suffered since the age of ten from an obsessional neurosis; for the past four months he had not been able to sleep without taking drugs.

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
wind	7	storm	—
waste	9	spendthrift	—
poker	8	shovel	—
ball	25	bat	o

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
green	10	white	blue
stone	10	heavy	—
sheet	18	blanket	cover
back	8	front	—
book	8	read	—
note	11	to play	—
come	14	chew	—
blue	9	white	—
rail	8	fence	—
touch	10	feel	—
live	—	smooth	o o
girl	9	boy	—
egg	11	to eat	—
talk	27	speech	o o
carpet	12	blanket	sheet
bag	36	full	o o
watch	8	chain	—
lace	10	tie	—
blood	23	life	—
nut	10	crack	—
roof	9	cover	—
rub	12	gently	—
horse	8	mare	—
table	13	cover	to eat
water	9	drink	—

The first word to evoke complex-signs was 'ball.' The associations of this produced by the patient were: The memory of a ball he attended five months ago; this occasion was the last time he had performed certain conjugal duties; he had greatly worried over the idea that he was becoming impotent. To 'dance' he brought the following: He could never learn to dance; he wanted his wife to teach him, but she had refused, being ashamed of his clumsiness. 'Bat,' the reaction-word to 'ball,' had reminded him that he had once been what he called an 'aggressive' baseball player, but had been forced to give up the game on account of his nervous trouble. The word 'ball' was thus linked to the 'deficiency-complex' in three different ways.

Every word denoting colour was reacted to by 'white,' once with a disturbance in reproduction. The associations the patient gave to the word were: Snow; pure; clean; clean collar; the fact that he had of late become very careless about his attire, to the great annoyance of his wife; he had always hated baths, and could not be induced to take more than one

or two a year. This last fact related to an important complex dating from childhood.

The stimulus-word 'sheet' was followed by an unduly long reaction-time, and the false reproduction 'cover' recurs twice later; 'sheet' itself occurs again as a false reproduction to 'carpet—blanket.' 'Cover' brought; Sheet over a dead person; the thought of a dead brother; the memory of a cousin whose dead body he had seen at the age of eleven: one eye was open, and it had greatly frightened him; he had always been very terrified of death, and as a boy used to pray to God never to let him die; various obsessions about death and murder, the analysis of which would take up too much space here.

'Come' was responded to by the word 'chew,' it having evidently been mistaken for 'gum' (assimilation); the patient had struggled to give up the habit of chewing gum, of which he was much ashamed, and of which his wife strongly disapproved.

'Live,' a stimulus-word followed by a remarkably long reaction-time, brought: Length of time; long life; righteous life; straight line; crooked line; rope; an obsessive impulse he had had at the age of fourteen to hang the man who was courting his eldest sister; various thoughts about death. 'Smooth,' the reaction-word, brought: Smooth surface; smooth monument; tombstone; death; life; smooth line of health; the thought that his line of ancestry was smooth, with no history of insanity, a fact that had comforted him in view of his fear of becoming insane as the result of masturbation.

'Talk' brought: Conversation; consideration (he complained about his wife's lack of consideration and sympathy); talk in a suitable way; gossip; the fact that his wife had the habit, which he much resented, of joining his sister-in-law to calumniate their husbands and his family, to whom he was especially attached.

'Bag,' the reaction to which also had a very long reaction-time and a failure in reproduction, gave the following associations: Privilege; good opportunity; delight; to suffer like Christ in agony. 'Full bag' gave: Years of plenty; prosperity; opportunity; death; 'I'll get better' (this referred to 'if his wife were to die'); lower regions; hell; depths; death; life; a woman's head; his wife's head; when he sees his wife's head in bed he gets the obsession that he might kill her.

'Blood' gave these associations: 'Blood always annoys me, it makes me think I have done something wrong; this morning I noticed a spot of blood on my collar; I remember some months ago seeing some blood on the water-closet seat; menstrual blood; I was present at my wife's last confinement, when she nearly died of bleeding; I was plagued for months by the foolish idea that the child was not mine.'

All these disturbances in the association-reactions plainly pointed, in spite of the patient's denial, to some deep-rooted hostility towards his wife, and gave clues that led to the elucidation of his obsession that she was unfaithful to him, and the fear that he might kill her in his sleep (one of the causes of his sleeplessness).

CASE IV.—The patient, a young woman, had suffered from hysterо-epileptiform attacks for six months.

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
coat	7	vest	—
brother	5	sister	—
mount	32	snow	o o
tea	10	coffee	—
come	7	go	—
blood	9	water	—
bed	8	cloth	—
snow	7	rain	—
nut	41	come	o
touch	13	felt	—
horse	10	cow	—

The stimulus-word 'mount' evoked a notably long reaction-time, and reproduction quite failed. The word brought to the patient's mind first the thought of a mountain near her home, then the memory of a girl friend who had been killed there in a tobogganing accident; then, after a long pause, the name of a young man (Robert Mountain), to whom she had been very attached. One day, when nutting together on the mountain (see the reaction to 'nut'), he had tried to seduce her, and nearly succeeded (*i.e.*, she just escaped a disaster, which, like that of her friend on the same spot, would have been due to losing control). The incident played an important part in the determination of her symptoms.

CASE V.—The patient was a young woman, who for six years had suffered from a mixed neurosis, with among other symptoms a persistent and annoying tic.

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Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
black	10	dress	—
wind	8	window	—
bare	24	baby	o
turn	9	go	—
cup	6	saucer	—
raise	12	store	—
deep	22	lake	sea
take	11	part	—
rub	9	knee	pain
risk	11	life	—
food	7	eat	—
boy	9	girl	—
pole	9	stick	—
copper	13	toes	—
talk	12	talkative	—
paper	8	write	—
green	6	grass	—
pot	7	flower	—
ball	15	play	playground
stone	10	wall	—
flower	10	plant	—
mother	22	sister	child
ride	9	drive	—
white	11	dress	—
pass	18	future	o
star	9	moon	—
rich	7	poor	—
jump	7	run	—
shoot	—	o	—
cold	11	gold	—
road	13	letter	o
post	11	box	—
nut	9	shell	—
roof	7	house	—
sister	14	child	—
train	10	horse	—
lie	10	down	—
blood	17	water	thin
bed	10	cot	—
lace	12	dress	blouse
tea	8	cup	—
water	26	lake	deep
lamp	13	fire	—
field	10	grass	—
word	8	hard	—
rock	15	deep	o
spend	9	money	o
watch	13	white	pray
cat	8	dog	—



Several significant complexes are concerned in this markedly constellated production. The least important is one dealing with the patient's personal appearance, 'a vanity-complex.' The stimulus-words 'black,' 'white,' and 'lace' all evoke 'dress' as a reaction-word. The curious association 'raise—store' was explained by the patient remarking that 'Ray's' was the name of the shop where she bought her clothes. In the same connection may be mentioned the equally curious association, 'copper—toes,' which referred to an old threat of her mother's to put copper toes on her boots if she persisted in being such a tomboy and wearing out her things so recklessly. The patient was a good example of the common type of girl who exchanges at the time of puberty a careless indifference towards dress for an exaggerated preoccupation with it. 'Talk—talkative' referred to another ground of complaint that her mother had in regard to her.

A more important complex was that relating to conception, which was a possible outcome of some recent experiences. The disturbed reactions to the stimulus-words 'bare (=bear),' 'mother,' and 'sister' shew the activity of this complex plainly enough; the latter two were explained by the fact that a married sister, with whom the patient was living, had a year-old baby. The word 'ball' gave the associations 'play—toy—child,' and belonged to the same complex.

The stimulus-word 'deep,' which had evoked a long reaction-time with an erroneous reproduction, brought the following thoughts to the patient's mind: Water; Lake Ontario is the deepest of the Great Lakes; a month ago she spent a morning on a rocky cliff overlooking the lake; she was very dejected at the time, and in her despair had all but thrown herself into the water. The response to 'deep' ('lake') was again given to the stimulus-word 'water'; it was followed by the erroneous reproduction of 'deep,' and this word was also the reaction-word to 'rock': both the latter reactions had an unduly long reaction-time, and the second one shewed a failure in reproduction. The association 'risk—life' further belonged to the same complex. The association 'road—letter' indirectly related to it; the stimulus-word was evidently assimilated as 'wrote,' and this reminded her of a highly significant letter she had written a fortnight previously, and to which she had as yet got no reply. Another instance of assimilation is seen in the association 'pass—future,' the

stimulus-word being evidently taken as 'past.' It reminded her of past conduct ('a woman with a past') which she feared might greatly compromise her future. The word 'pass,' which had been avoided, was also connected with an older complex, as was the word 'water,' which gave so many complex-signs. For two or three years after puberty she had frequently masturbated, and the impulse to do so had almost always been evoked by experiencing the desire to 'pass water.'

Finally is to be noted the disturbed reaction to the stimulus-word 'blood.' As may be guessed from the content of the reaction, this had touched on some family complex, and the nature of this might be inferred from the evidence of exaggerated affect concerning her mother's reprovals (associations to 'copper' and 'talk'). She had had a number of quarrels with her mother, whom she secretly hated, and was debating with herself whether she should permanently break with her family. The content of the reaction ('blood is thicker than water') indicates the nature of the sentiment that had restrained her in this.

The association-test just related is a good example of how the method may bring one at once to the heart of hidden conflicts in the patient's mind, without a knowledge of which no psychotherapeutic treatment has any prospect of permanent success.

CASE VI.—The patient was a man of middle age who had suffered for many years from a mixed neurosis, principally of the obsessional variety. Among many other symptoms were a number of obsessional sensations and hallucinations.

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
blue	7	sky	—
carpet	8	tack	—
block	12	axe	—
paper	9	wall	—
tongs	8	forge	—
note	8	book	—
climb	16	tree]	o
ball	10	ballroom	—
stick	12	sticky	—
field	8	grass	—
black	6	white	—
spend	22	spend	oo
hat	10	head	—
lace	7	curtain	—

Stimulus-word.	Reaction-time.	Reaction-word.	Reproduction.
copper	8	gold	—
jump	6	run	—
watch	13	black	—
talk	9	converse	—
back	19	foot	—
rich	15	poor	—
lamp	6	post	—
shoot	9	shot	—
green	7	blue	—
door	18	jam	o
run	9	walk	—
wood	13	tree	o
father	8	mother	—
ride	8	horse	—
water	23	pond	o o
turn	10	burn	—
dog	8	cat	—

Several complexes were here revealed by consideration of the disturbed reactions. The stimulus-word 'back,' which produced the unusual response 'foot' after an undue delay, brought up the following thoughts: 'Foot; foot-and-mouth-disease; I don't know anything about this except that it is a disease of cattle, and that it is very disgusting; cows; milk; cream; semen; masturbation.' The patient had masturbated for many years, usually when lying on his *back*, hence the disturbed reaction to this word. The word 'water,' the reaction to which shewed several complex-signs, brought: Water; urine; penis; water-closet (where he had often masturbated); sewage; pond; mud; slime; semen. The stimulus-words 'spend' and 'stick' had also touched the same complex. Stick had also connected with the memory of several painful thrashings he had had as a boy, and with experiences which revealed a strongly marked sadistic trend. This sadistic complex was touched by two other stimulus-words, 'block,' which brought up thoughts of the headsman, execution, torture, etc., and 'door,' which was associated to 'frame; blood on the lintel; Passover; sacrifice; suffering.'

The stimulus-words 'climb' and 'wood' were both responded to with 'tree,' there being in both cases a delay in the reaction-time, and a failure in reproduction. All the patient could recall at the time was the fact that he had always been fond of climbing trees, and could still do so with enjoyment. Later in the analysis it came out that some of his

earliest sexual excitations were brought about by the gripping movements of climbing, and, further, that he had had the habit as a young boy of defæcating from the branches of trees so as to enjoy the pleasure of witnessing the fall of the dejecta.

The association-reaction 'watch—black' referred to a boyish escapade, when, to escape his father's tyranny, he had run away from home with the intention of joining the famous Black Watch regiment, by whose exploits he had been greatly fired.

In conclusion, I would state that my experience has fully confirmed that of Jung and his pupils as to the practical value of the word-association method in enabling one objectively to determine the nature of the mental conflicts in which psychoneurotic symptoms take their origin.

## CHAPTER XXIII

### REMARKS ON A CASE OF COMPLETE AUTOPSYCHIC AMNESIA<sup>1</sup>

THE following case presents nothing remarkable from a casuistic point of view; it was a combination of hysterical fugue and complete autopsychic amnesia, such as occurs commonly enough. Further, no detailed study of the case could be undertaken; my observations were confined to three interviews with the patient, of a couple of hours each. In spite of these facts, a sufficient number of matters of interest was noted to make it seem worth while to utilise the case in illustrating a few of the simpler psychological mechanisms characteristic of hysteria. The actual interpretations offered of the various points must necessarily be of a tentative nature, but they are sufficiently in accord with the experience gained from extensive psycho-analyses to justify the pretension to a high degree of probability.

On May 20, 1909, a man of about thirty walked into St. Michael's Hospital, Toronto, and complained of pain in an old appendicitis scar. On being asked his name he discovered that he had forgotten it, and, what was more, that he could give no account at all of himself or of his past life. He was at once admitted under the care of Dr. H. B. Anderson, to whom I am indebted, not only for the opportunity of observing the case, but also for kind permission to make use of it in this paper. When I first saw the patient, on May 29, his mental condition was as follows: He conversed clearly and intelligently. Though he was naturally bewildered at his situation, his powers of attention, apperception, and comprehension, were quite intact. He gave evidence of having had a fair education, knew a little French and German, and spoke with a slight Irish accent. In short, there was nothing note-

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, August, 1909, vol. iv.

worthy beyond his extraordinary lack of memory. This is perhaps best described by considering separately his memory relating to his own personality and that to external matters.

Of his *personal or autopsychic memories*, only the following were present: He recollected having recently been on board a steamboat called the *Corona*—where he knew not—and, further, had a dim remembrance of having been a good deal at sea. The latter fact we at once corroborated by finding on his body extensive tattooing, of the kind common amongst seamen. He also remembered having undergone an operation on his left elbow in the Boston City Hospital about a year ago. Beyond this he knew practically nothing of himself. He could not tell us his name, address, profession, or nationality, and could give no information about his family or his past life. The memory of one or two unimportant matters concerning his travels returned later, as will presently be mentioned. His amnesia for all autopsychic processes was therefore complete. He had retained his somatopsychic memories, which are sometimes lost in cases of the kind.

Of his *general memories*, many disconnected fragments were present. He recalled the pictures of many seaport towns, with a few details about each. Thus he said he had been to Hamburg, and, when asked if he knew the St. Pauli, smiled and answered: 'Yes; it is in the gay district.' He had been to Rouen, and, when asked if he recalled anything noteworthy about a bridge there, said: 'There is a high one we had to strike our masts to pass; it is a "transporter."' Capetown, he said, lay between Table Mountain on the left and the Devil's Peak on the right, as seen from the sea. He similarly mentioned Durban, Sydney, Cherbourg, and other ports. He dimly remembered having been in the docks district of London. When told he was in Toronto, he remarked that he had never been to Canada, except on one occasion when his ship lay at Montreal. He did not know how long he had been in Toronto. The sight of a large departmental store through the window attracted his attention, and brought to his mind the name of J. C. Myers. He surmised that he must have had to do with some store of that name, but could not recall in what town. He could not remember whether he had ever been in Ireland, though it later came out that he had been born there and educated at St. Patrick's College,

Cork. He caught sight of some praying beads in the hospital, and several Latin prayers automatically came to his lips. From this he concluded that he must have been at one time a Roman Catholic, though he felt sure he had not attended church for many years. Of Boston he could recall several streets—Boylston Street, Beacon Street, Tremont Street—and knew the Common, though not the name of the pond in it. Of New York he recalled the Bowery, Chatham Square, the Battery Park and Central Park, and added that Brooklyn and Jersey City were both across the water. He dimly remembered taking part in an excursion from New York to Niagara with a crowd of about two hundred, but, except for one or two details of the town, nothing more. In reality, this trip had taken place some years before, and he could recall nothing of his visit to Niagara a week ago, which had immediately preceded his coming to Toronto.

The *Corona* steamboat mentioned by the patient plies across Lake Ontario, so we asked him if he was an American. He answered: 'Yes, I guess I must be; for all your clothes look strange to me, and cut differently to those I am used to seeing.' This led us to hope that indirect methods of questioning would succeed in restoring some of his memories where more direct methods failed, so, as the first step in exploration, we employed the 'guessing' device. This consists, as is well known, in getting the patient to recall a given mental experience under the pretence that he is merely volunteering a guess, and is not being expected actually to recall the experience as a personal memory.

The first application of this more than justified our expectations.

*Q.* You say you can't remember whether you are married or not. Now, suppose you had to guess whether you are or not, which would you say?

*A.* Well, if you put it in that way, I should say I was married and have a baby, but I can't remember anything about a wife or a baby.

*Q.* Not the wife's name?

*A.* Not at all.

*Q.* What sort of name would you give her, if you had to fit her with one?

*A.* (Pause.) I should think Annie; that comes easiest.

*Q.* And the baby?

A. Katie. (The correctness of both these answers was afterwards confirmed.)

Q. And your own name?

A. Whenever I think about my own name, the name Bert Wilson comes to my mind, but I am sure it is not mine. I can't remember my own name at all, except that I believe they call me Bert.

The last answer was so suggestive that it seemed legitimate to make the following speculations as being at least probable inferences from it—namely, that the patient's name was one resembling in sound Bert Wilson; that there was a real person called Bert Wilson, the memory of whom was playing an important part in the present symptoms, probably in the sense that the patient was for some reason unconsciously identifying himself with the other man; that, as he now recognised the falsity of that identification the amnesia for his own personality was not likely to be profound, and would probably yield to simple measures. It was also to be expected that when the memory of the true Bert Wilson returned it would do so only temporarily, and would again disappear for a longer or shorter period. The correctness of these seemingly fragile inferences was borne out by subsequent events.

As it was now probable that the patient had a young wife, who would be concerned about his absence, it became an urgent duty to try to recover his lost memories, particularly his name and address, as soon as possible. I therefore suggested to Dr. H. S. Hutchison,<sup>1</sup> who was present and in charge of the case, that we should facilitate this by inducing hypnosis. This was done, and after a little time the patient recalled that Myers's Store (see above) was in Albany, and that he himself lived in that town. He could picture to himself his house, but not the number of it, nor the name of the street in which it was. On having his attention directed to neighbouring streets, and particularly to the main ones, he slowly recalled that the one in which he lived was near Pearl Street. Then, by encouraging him to trace his steps from Myers's Store along Pearl Street towards his home, one gradually got him more familiar with the neighbourhood, and after an interval he burst out with: 'Williams Street, that's where I live, and that's my name, Richard Albert Williams.'

<sup>1</sup> I am obliged to Dr. Hutchison for taking careful notes during his interview, and for rendering me every assistance both then and later.



With that came back a flood of memories, from which we pieced together the following story: The patient had for many years been a sea-cook on English vessels, and for the past three or four years had been a chef at various places in New York State. He got married in May, 1908, and about two months later underwent an operation in Boston for a stiff elbow that had been badly injured in a railway accident. In the winter he was for some time ill with appendicitis, for which he also underwent an operation, and through which he lost a great deal of work. In February of the present year he left his wife in Albany, and took up a post in Rome, New York. His wife bore a baby on March 12, and soon afterwards rejoined him. Early in April the restaurant where he was employed closed for the summer, and on April 15 he left Rome to seek work elsewhere. He failed to get any, partly because his equipment and clothes were needy; these rapidly deteriorated further or got sold. He travelled to Brockport, Utica, Syracuse, Rochester, Buffalo, Tonawanda, etc., tramping much of the way on foot. His small supply of money gave out, he had to sleep in the open, and got but little food; towards the end of the time he went for five days without any food whatever passing his lips. In addition to this physical stress, he had to endure mental suffering of even greater severity, for he had left his wife with only money enough to last a couple of weeks, and these had now come to an end. He knew that she had no friends, was destitute in a strange place, and was not in a position to earn a living. He was exceedingly devoted to her, so that as time went by, and his chances of getting work became more and more hopeless, his anxiety reached an almost intolerable pitch. On May 17, when now in a very light-headed condition, he walked from Niagara to Lewiston; he took the ferry to Queenstown, and got on board the *Corona*, which crosses the lake to Toronto. In Toronto he slept in a Workman's Home, and for three days wandered the streets, seeking vainly for work, until the pain in his abdominal scar forced him to apply for relief at the hospital.

Before going any further, it is desirable here to interpolate a few general observations concerning the production of hysterical symptoms. That these are the external expression of mental processes which have become split off from the main body of consciousness—in other words, 'disaggregated'

—has, of course, been known for over twenty years. The cause of this disaggregation, though equally well established, is less widely recognised. It is commonly asserted to be due to the effect of psychical trauma acting on a mind congenitally unstable in certain respects. Those who hold this 'traumatic' view would probably find no difficulty in explaining the case described above, and in attributing it to the action of the physical and mental stress just specified. This view undoubtedly contains a modicum of truth, but the incompleteness of it becomes more and more apparent the deeper we penetrate into the basis of the symptoms; the inadequacy of it in the case here described will presently be made evident. Closer investigation into the nature of the pathogenic mental processes demonstrates that there is always a very precise reason why they have become split off or 'disaggregated'; the defect in assimilation of these processes is due, namely, to the incompatibility of them with the main body of the conscious personality. The patient cannot reconcile them with the rest of his mind, because they are to him painful or unpleasant. He automatically strives to forget them, to submerge them, or, as it is technically called, to 'repress' them.

From this point of view it is plain that every hysterical symptom essentially rests on a pathological amnesia, though in most cases not only the nature, but the very existence of the amnesia is unknown both to the patient and to the physician. In some cases, as in the present one, the amnesia does not become converted into a symptom, but remains as such, and is manifest to all. This latter condition is not so simple, however, as might be supposed from these remarks; for the amnesia which is obvious, and which can usually be overcome by very simple measures, is a secondary phenomenon, being dependent on a deeper mental process, which has been still more profoundly forgotten. Even when we have reached this second group of mental processes, it is only to find that it in its turn has been 'repressed' and forgotten because of its connection with a still deeper group, which is itself similarly conditioned. An hysterical symptom is thus seen to be built up by an extensive series of amnesias, of different levels. If only the uppermost amnesia is removed, it will readily recur, and the deeper the level reached in the analysis, the less likely is the symptom to be reconstructed.

The treatment of a case such as the present one would

consist in the following procedure: We ask why the patient wished to forget the memories in question, and we find it was because they are associated with other more painful thoughts he did not wish to recall. We then go on to ask why these other thoughts were too painful to recall, and we get a precisely similar answer—namely, because they are associated with yet deeper thoughts which he was still more desirous not to recall. We continue the investigation in the same way, constantly asking 'Why?' and continually penetrating deeper and deeper into the patient's mind, and reaching farther and farther back into his earliest memories. The pathogenic chain of associations is in this way traced to its original starting-point.

There was no opportunity of making any such analysis in the present case, but enough indications were present in connection with the terminal links in the chain to illustrate some of the mechanisms by which they were forged. The question with which we started was: 'What motive had the patient for not wishing to know who he was and where he had come from?' Or, put in another way: 'Why were his autopsychic memories so painful to him?' The patient himself naturally wanted to recover these lost memories, but some conflicting motive for suppressing them was also struggling in his mind to gain expression, and this 'repressed' wish had finally succeeded in attaining gratification.

A direct clue to these questions was obtained by innocently interposing in the conversation which ensued on the patient's recovering his personal memories the query: 'Who is Bert Wilson?' He at once replied: 'He was one of the cooks on board the *Louise*, the boat I went my first long voyage in.' 'What became of him afterwards?' 'I haven't heard anything of him since I was a boy. All I can remember of him now is that he was a darkey, and that in between his voyages he used to live with a white woman who kept a sailor's lodging-house in Shadwell, London.'

At this point the reflection naturally arises that the patient's motive in 'repressing' his personal memories might have been to escape from the unendurable situation in which he found himself. If we reconstruct his mental state at that period, we might express it in the following artificially definite phrases: 'Oh, if only I didn't have the frightful responsibility, to which I am not equal, of having a dependent wife! If only my wife could support herself without having to look to me!

If only I could go away, as Bert Wilson used to, on long voyages, and safely leave my wife, as he used to, in the knowledge that I should find her all right when I returned! If only I were like Bert Wilson! The passionate wish, although suppressed on account of the unmanliness and disloyalty it connoted, realised itself, as wishes so frequently do, and led to the belief that he really was Bert Wilson. I consider it very probable that some such process as here depicted actually occurred, though, like most interpretations of hysterical symptoms, it is merely part truth, and is only a very incomplete explanation of the real events. We shall presently note, however, several observations that go to support the suggestion just made. The mechanism of *unconscious identification* is exceedingly frequent in hysteria, and accounts for much of the so-called 'imitation' of the symptoms of other patients. The unconscious phantasy fuses its own 'repressed' wishes with the realisation of these wishes that happens to some one else, and identifies the individual personality with that of the other person. In the present case, it is likely that the similarity of the two names facilitated the occurrence of the process:

Bert Wil—son.  
Bert Wil—liams.

The significance of proper names to the personality varies considerably with different people, and is sometimes very remarkable.<sup>1</sup> There was much evidence to shew that with the present patient this significance was unusually great. One instance may at once be mentioned—namely, he volunteered the statement that he loved his wife so much that he could not bear the thought of any other woman being called by her name, Annie. Two other statements made at the same interview go to strengthen the suggestion ventured above: First, he said that he had, as a boy, greatly admired Bert Wilson, and had much envied him his access to his mistress on the convenient arrangement above referred to. Secondly, his journey to Toronto, where he knew no one and had no prospect of getting employment, had been suddenly determined by his seeing a placard in Buffalo announcing that navigation was open on Lake Ontario. The picture of the steamship on the advertisement aroused his old longing for the sea as a means

<sup>1</sup> See Chapter IV., pp. 52-57.

of escape from conditions he could no longer endure. In fact, he had himself, as a boy of twelve, escaped from school by climbing through a window at night and running away to sea.

My second interview with the patient was on May 31. He had fairly well retained his recovered memories, with one notable exception, which will be mentioned in a moment. One of my first questions was: 'Are you sure about your own name now?' He answered: 'Oh, yes. Frederick Albert Williams.' After a while, he remembered that he had made a mistake, and corrected the name to Richard Albert Williams. The origin of the mistake we shall come upon later. The most interesting feature of this interview, however, was the patient's absolute amnesia for the man Bert Wilson—an amnesia I had anticipated would probably occur, though I need hardly say that I let no inkling of this escape me that might act as a suggestive influence.

*Q.* Tell me again about Bert Wilson.

*A.* Wilson? You mean Jack Webb, don't you? (Pause.) Why don't you keep some fencing-foils or boxing-gloves here to pass away odd moments? (We were in my consulting-room.)

The unconscious deviating from a painful subject is very clearly seen here.

*Q.* Who was Jack Webb?

*A.* He was with me in the *Pimera* for a couple of years. We had a big fight, because I wouldn't stand his trying to boss the fo'castle, and I licked him. (Evidently the reason for the combative suggestion made to me in his preceding answer.)

*Q.* No, I mean Bert Wilson.

*A.* Bert Wilson! You mean the fighter in New York. (Perseveration of the combative idea.) (Pause.) No, I must be thinking of Bert Keyes. (Pause.) I remember *Jack* Wilson; he was a schoolmate of mine, and we ran away to sea together, but we went on different vessels, and I have hardly seen him since. (Again the idea of 'Wilson running away to sea' is in his mind, though in an innocent form; we also see now why the thought *Jack Webb* had come to him when he was asked about Bert Wilson—mediate clang association.)

*Q.* The man I mean was 'coloured.'

*A.* That must be Frederick Stanley.<sup>1</sup> He was a fireman on the *Mary Thomas* boat out from Cardiff. He was a West Indian nigger.

<sup>1</sup> Most of the names I have altered, for obvious reasons.

*Q.* No, the man I mean was a cook, not a fireman.

*A.* The only cook I can think of whose name is like that is Bert Williams, a man of my own name. He's a chef in the Mansion House in T——.

*Q.* No, that man is white. Bert Wilson was a cook, but he was coloured.

*A.* That must be Frederick Kerr. He was the second steward on the *William Cliffe*.

*Q.* Who were the cooks on the *Louise*?

*A.* Jimmy MacGregor was the first, and Jack Green the second.

The last questions were put in a leading way only after prolonged efforts, employed after inducing a hypnoidal state, had completely failed. In two hours I could evoke no memory whatever of Bert Wilson. One felt fairly sure that the first account of Wilson was correct, as was later substantiated. It is a safe rule, when an hysterical patient gives two different stories, to rely rather on the first, spontaneous one; the second is usually a product of subsequent 'repression.'<sup>1</sup>

In the third interview, on June 4, the patient at once recalled the names of the men mentioned on the previous occasion, but still had no knowledge of any Bert Wilson. He now stated, however, that on the *Louise* there had been, besides the two cooks whose names he had before mentioned, three other men in the galley; two of these were white, one the baker and butcher, and one whose duty it was to prepare the vegetables, and one was coloured, the sculleryman. The name of the last man he did not know, but remembered that he 'hailed from Dublin, and that he jumped [deserted] at Sydney.'

At first he said he had never been to Shadwell, and knew no one there; but after many efforts, aided by a map of Shadwell, he recalled the street in which the sailor's lodging-house was situated, and the name of the woman who kept it. He then volunteered that Frederick Stanley used to live with her when ashore. (We here get the probable explanation as to why the patient temporarily altered his name to Frederick in the preceding interview—further 'identification' of himself with a man who could go to sea and leave his wife.) 'But there was another darkey used to live with her [pause]; he was sculleryman on a boat with me [pause] running to

<sup>1</sup> Freud, 'Sammlung kleiner Schriften,' 2<sup>e</sup> Folge, 1909, S. 11.

Australia. He hailed from Dublin.' After a while he remembered that this boat was called the *Louise*. 'I fancy he was one time fireman of the *Mary Thomas*' (evidently now confounding Wilson and Stanley, the paramours of the same woman). He still could not recall the man's name, but from a written list of familiar and unfamiliar names, he picked out that of Bert Wilson. Even now he hesitated, and seemed to think there was something wrong. "'Bert" is all right, but "Wilson" seems to belong to Jack Wilson; when I think of the name "Wilson," Jack comes into my head and fills it.' After about half an hour's work on the point, however, the doubt was cleared up as follows: Bert Wilson was in fact the name of the negro sculleryman on the *Louise*, but it was a false name he had taken after deserting from a ship, so as to escape the penalties thus incurred.

Before again taking up the main theme of 'identification,' we may shortly consider two little matters which illustrate some processes characteristic of hysteria. The first concerns what Freud terms over-determination—that is to say, the convergent action of several factors to produce the same result. There may be two causative factors acting in the same direction, each of which may be unable alone to bring about the result, though the two succeed when they act in unison. The following is an instance of this: When the patient hesitated as to whether Bert Wilson was the correct name of the sculleryman, I asked him whether any alternative name suggested itself. He slowly replied: 'Perhaps Thomas. No; I am thinking of Captain Thomas, of the *Mary Thomas* boat, owned by Radcliffe and Thomas, and sailing from Cardiff.' Now, in inquiring why the name Thomas occurred to him in this connection, we find at least two trains of association indirectly binding the name Thomas to that of Wilson, so that when the patient was in doubt about the latter name, the former associated name suggested itself as a possible, though incorrect, alternative. The first train was that the *Mary Thomas* boat was the one on which Frederick Stanley had served—the man whom we saw above he confounded first with himself and then with Bert Wilson. The second train reaches farther: not only was there on the *Mary Thomas*, owned by Radcliffe and Thomas, a man who resembled Bert Wilson in the crucial respect of living with the same woman in London and under the same conditions, but another man,

Captain Thomas, who bore more indirect relations to the name Wilson. Immediately after the remark quoted above, the patient spontaneously continued: 'There was another Captain Thomas, of Llanelly, who sailed on a boat belonging to *Williams* of Cardiff (the same seaport as the last), but I can't remember the name of the boat.' He puzzled over this name, and couldn't be got to leave the subject. I suggested the name Sumatra,<sup>1</sup> but he answered: 'No; that was his first boat. I mean a later one.' After a long pause the name flashed to him—Gwalian. I asked him whether the name Gwalian reminded him of any other name, and he at once replied, 'Gwilym.' 'Do you know the meaning of that?' 'Yes; it is Welsh for *William*.' So that Captain Thomas had a double connection in his memory with the name Williams, which, as we have seen, was closely associated with the name Wilson.

These facts shew the astounding network of associations that is unconsciously operative in the lower forms of mental processes, and also illustrate some of the ways in which one mental process gets linked to another. Thus, William—Gwilym (translation from one language to another; the identity-form of extrinsic association)—Gwalian (clang association).

A very frequent occurrence in hysteria is that, of two groups of memories, it may be possible for the patient to recollect either at different times, but not both at the same time. Each of the two is harmless alone, but the two are incompatible, because the *relation* between them is associated with deeper painful memories. Thus, the present patient had the greatest difficulty in retaining both the names Bert Williams and Bert Wilson. When he was first seen he knew the latter name; for a short time after hypnosis he knew both. When I next saw him he knew only the former.

The 'repression' process also extends from the original memory on to harmless but associated ones.<sup>2</sup> It is a general rule in clinical psychology that an indirect and apparently harmless association is much more efficacious in evoking an external manifestation of a painful complex than is a direct association. Thus, in the association-reaction test a word indirectly bearing on a painful subject is more likely to be

<sup>1</sup> By a curious chance it so happened that I knew the captain in question and his boat.

<sup>2</sup> See Chapter V., pp. 114-116.



accompanied by delayed reaction-time, etc., than one directly bearing on it. A man accused of theft is more likely to give an abnormal response to the word 'left' than to the word 'steal.' In the present instance, the patient reacted normally to the word Williams at a time when he could not recall the word Gwalian.

Another instance of this was given at the first interview. The patient could recall many facts about New York, even some particulars about his former address there; but when I asked him in what street the Grand Central Station was—which he had left to go to his later address—he could not remember.<sup>1</sup> On being persuaded to guess, he suggested Twenty-Fourth Street.

This little example illustrates two common processes in hysteria. In the concealing of an unconscious complex, the conscious manifestation frequently consists of the identical material of the complex, but in a distorted form (Freud's *Verwendung desselben Materials*); when a word or a name in particular is being 'repressed,' the form that appears in consciousness is often composed of the identical letters of the word in an altered order. It was no mere chance that the patient did not guess 95 or 37. Further, one of the commonest modes of this distortion is, as here, simply the reversal of the content of the complex. This reversal may be either in space or in time; it is also particularly frequent in normal dreams.

When I asked the patient to guess again, he answered this time with 28 (24+4), then with 32 (24+4+4), then finally with 26 (24+2). The same play on the figures 4 and 2 is manifest throughout, 4 being naturally the more prominent of the two. It is, perhaps, also not without significance that the patient's address in New York was 4, Charles Street. Those who believe that the occurrence of these figures is a matter of mere chance are recommended to make a psycho-analysis of any figures which appear in their own dreams, or which they freely 'choose' for any purpose without there being any reason why some figures should be chosen rather than others;<sup>2</sup> if they do this they will soon be convinced that the occurrence of 'chance' figures is just as rigorously pre-determined by previous mental processes as are all our 'chance'

<sup>1</sup> The station is, as is well known, in Forty-Second Street.

<sup>2</sup> See Chapter IV., p. 41, and Chapter XI.

thoughts. The same unconscious play goes on with figures as with words in the lower forms of associative activity.

To continue the history of the case. After the return of the autopsychic memories, a number of other symptoms either developed or became more prominent—namely, agoraphobia, auditory hallucinations, marked concentric contraction of the visual fields, reduction in visual acuity amounting in the evening almost to amaurosis, simultaneous micropsia with the left eye and macropsia with the right. His physical health was fairly good, especially towards the end of his stay in the hospital. We failed to find employment for him in or near Toronto; and, as he said his prospects in Albany were good, we sent him there.

We may now summarise in the following way the 'identification' theme developed above. The patient's unconscious phantasy had fixed his cowardly and 'repressed' wish, to escape from his difficult situation, with the old memories of a man whose life was the actual realisation of that wish. Bert Wilson was a man he had formerly envied, of the same profession and almost the same name as himself, who used to free himself of ties by going away to sea (as the patient had himself done when a boy); who could happily leave his wife to look after herself, and would find her safe and prosperous whenever he returned; who had deserted from his duty, and had changed his name to escape from the responsibility of that desertion. The resemblance is certainly striking enough to influence a man in such desperate straits as was the patient.

Still, it is evident that this process, intelligible enough as it may seem, would not have occurred in a normal person, however great the stress to which he had been submitted. We cannot, therefore, have before us more than the beginning of an explanation of the symptom under discussion. We have penetrated below the first layer, but we are only at the outset of the task of tracing the symptom back to its earliest origins. This task was for obvious reasons pursued hardly any further in this case, but a few indications were present to serve, at all events, as a clue to the next step in the analysis.

When I saw the patient for the second time, fifty-seven hours after the first interview, one of my first remarks naturally was: 'I suppose you have written to let your wife know you are all right?' Not altogether to my surprise, he said: 'No, haven't you done so?' He explained this by

adding that 'he thought the news would come better from a doctor, so that he had put off writing till he heard from her and knew that she was all right,' though he had taken no steps to get any doctor to write. This lame excuse only added emphasis to the abnormal mode of reaction, which I think will be agreed was certainly unnatural for a man who was deeply concerned about his wife and baby, as the patient sincerely was.

Still more noteworthy were the following facts, elicited in the same interview: When he left Rome on April 15, it was with the fullest intention of going to Albany, where he had good prospects of getting employment, and he was at a complete loss to explain why he turned westward to Brockport, and not east to Albany. Some abnormal, unconscious impulse was evidently guiding his movements even at that early period. But most remarkable of all in this connection was the next memory, which was recovered after very great efforts. When he was in Brockport, he received a postcard, which was forwarded to him from his Rome address, offering him a situation for the summer at Saranac Lake. The salary was \$90 a month, and it was expressly stated that his wife and child would be given free board and lodging. On getting this invitation, which was exactly what he wanted, he turned away from Rome and Saranac, and proceeded to wander in the north-west part of the State looking for employment.

Light is thrown on these curious circumstances by a statement of the patient to the effect that all his life he had been subject to periodical attacks of what he himself called *Wanderlust*. He had not had an attack for a couple of years, but during the whole of March he had felt one coming on and progressively getting stronger and stronger. We thus have to deal with some form of hysterical fugue, but, although several suggestive points concerning it were elicited, it would take us too far from the purpose of this article to enter on a discussion of this extensive subject. Enough, however, has perhaps been said to indicate the complexities to which even the partial elucidation of a single symptom leads, and to illustrate a few of the psychological mechanisms by which such symptoms are produced.

In conclusion, a word may be added on the different forms of amnesia. It used to be taught that memory depends on four processes—registration, conservation, reproduction, and

localisation in time—and that an amnesia may be due to defective functioning of any one of these. The modern trend, on the other hand, is to look to reproduction as the source of every defect in memory. It is obviously incorrect to call the result of defective registration an amnesia, for what has never been acquired cannot be lost, so that we are at once reduced to the other three. The fourth process—localisation in time—has long ago been shewn to be unnecessary for even perfect recollection of a given memory. The present case gave numerous instances of this fact. For example, the patient gave a detailed account of the public events concerned with the late King's Accession and Coronation—his illness, etc.—but could not say whether it was before or after the Boer War, although he was in South Africa at the time of this; he gave the date of the Accession as six years earlier than one he gave half an hour after for the death of the Queen.

Most forms of amnesia are usually classified under one or other of the sub-groups of either retrograde or continuous amnesia. The present case was, of course, mainly retrograde in type, but many instances of continuous amnesia also occurred. For example, on May 31 the patient went to Hamilton to apply for work in a certain hotel there, but in the evening of the same day he had quite forgotten the name of the hotel, and also several important details of the excursion.

It is frequently assumed that the two main types of amnesia—retrograde and continuous—correspond respectively with defects of reproduction and of conservation. Thus Coriat<sup>1</sup> writes: 'If the conservation of experiences is at fault, it is then impossible to have memory of any kind, because nothing is stored up. Impressions then are forgotten as fast as they are experienced, making what is termed a continuous amnesia.' I must personally confess to the profoundest scepticism as to whether this latter process ever occurs; in other words, as to whether there exists at all an amnesia due to a defect of conservation. The more carefully we investigate cases of continuous amnesia, the more do we find that they are due to defects, not of conservation, but of reproduction. It was easy to shew in the present case that the continuous and anterograde amnesias were of this nature, for by special devices all such forgotten memories could be recovered, and my belief is that, theoretically at all events, this is always

<sup>1</sup> *Journal of Abnormal Psychology*, vol. iv., p. 4.

possible. It is evident that no one has the right to speak of a conservation amnesia until he has excluded the possibility of the symptom being due to defective reproduction. The evidence is rapidly increasing which indicates that, provided apperception, and therefore registration, are sufficiently unimpaired, then the memories will be indefinitely conserved, and any apparent loss of them is really due to defective reproduction only. Such a view is, of course, very hopeful, for it encourages one to expect that with improved special technique cases of amnesia will always yield to treatment, provided that the mental functioning in general does not too greatly deviate from the normal. Corcket<sup>1</sup> recently reported a case of complete hysterical autopsychic amnesia more marked even than in the instance here reported, which was unchanged at the time of writing, two years after the onset. The preceding considerations indicate that in the future such a case should be readily amenable to treatment.

<sup>1</sup> Corcket, *Ann. Méd.-Psychol.*, 1908, p. 37

## CHAPTER XXIV

### SIMULATED FOOLISHNESS IN HYSTERIA<sup>1</sup>

THE word 'simulation' is involved in so many misunderstandings and divergent meanings that whenever it is used in a title it is desirable to define it, even when, as here, it is not intended directly to discuss the main problems concerning the relation of it to mental abnormality. The two chief connotations of the term in medicine are: (1) The conscious and purposive feigning of a given symptom with the intention of deriving a palpable benefit therefrom, and (2) the deceptive resemblance that one symptom may bear to another. The extreme types of these are easily to be distinguished. An example of the first would be the deliberate feigning of insanity in order to escape punishment for a crime; of the second, the 'simulation' of bronchiectasis by an unusual form of pulmonary tuberculosis. There are, however, many different kinds of cases in which the distinction is by no means so obvious, and is sometimes, indeed, almost impossible to make; this is particularly so in the simulation of mental symptoms. It is occasionally a very difficult matter to decide whether the simulation of a mental symptom not really present is due to deliberate design, or to the effect of another, and unsuspected, disorder that is operating independently of the patient's will. The two criteria that are naturally first thought of—namely, whether the patient is conscious of the simulation and whether he has anything to gain by its occurrence—are open to many sources of fallacy. Awareness on the part of the patient in no way demonstrates deliberate production of the symptom, nor is it always present at a given moment even in cases of this nature. Again, a symptom that occurs quite independently of the patient's will may be distinctly welcome to him and of

<sup>1</sup> Read before the Detroit Society of Neurology and Psychiatry, February 3, 1910. Published in the *American Journal of Insanity*, October, 1910.

considerable benefit, while on the other hand the advantage accruing from the deliberate feigning of a given symptom may to the observer appear to be quite incommensurate with the drawbacks and suffering endured.

From the extensive and excellent work<sup>1</sup> that has in recent years been done on the subject of simulation of insanity some conclusions stand out with peculiar distinctness. Of these the following may be mentioned: Deliberate simulation of insanity is a rare occurrence, much more so than was previously thought; in the cases of this nature the great majority of the patients shew positive mental disorder, most frequently feeble-mindedness, hysteria, and paraphrenia (dementia præcox); deliberate simulation is commonly the product of motives that in their quality or intensity shew marked deviation from the normal, and is an undertaking very difficult for a healthy person to sustain for more than a short time.

In the psychoneuroses, and especially in the case of hysteria, the problem is even more complex. Purposiveness and imitation are attributes so easily ascribed to hysteria by superficial consideration that it is little wonder that it has taken thirty years' investigation to convince neurologists that the symptoms are not the product of conscious deception. This conclusion, certain as it is, has up to the present been only partially assimilated by the medical profession at large, which still talks of 'detecting' hysteria almost as often as of diagnosing it. Some of Freud's recent work may, when imperfectly understood, have the effect of reinforcing this ancient error; I refer to his demonstration that each hysterical symptom does in fact have a meaning, in a sense a purpose, and serves

<sup>1</sup> See particularly Becker: 'Beiträge zur Lehre von der Simulation und Aggravation bei traumatischer Neurose,' 1906. 'Die Simulation von Krankheiten und ihre Beurteilung,' 1908. 'Ueber die Bedeutung der Sommerchen Untersuchungsmethoden für die Frage der Simulation,' *Aerztl. Sachverst. Ztg.*, 1908, Nr. 19. 'Ueber Simulation von Schwachsinn,' *Klinik f. psych. u. nerv. Krankheiten*, Bd. iv., S. 69 u. 85. Bolte: 'Ueber einige Fälle von Simulation,' *Allg. Zeitschr. f. Psychiatr.*, Bd. lx., S. 47. Bonhöffer: 'Klinische Beiträge zur Lehre von den Degenerationspsychosen,' 1907. Bresler: 'Die Simulation von Geistesstörung und Epilepsie,' 1904. Jung: 'Ueber Simulation von Geistesstörung,' *Journ. f. Psychol. u. Neur.*, Bd. ii., S. 181. Köppen: 'Ueber die Entlarvung von Simulation bei Geisteskranken,' *Deutsche Med. Woch.*, 1907, Nr. 24. Mairet: 'La simulation de la folie,' 1908. Peuta: 'Die Simulation von Geisteskrankheit,' 1906. Raimann: 'Simulation von Geistesstörung,' 1907. Riehm: 'Zur Frage der Simulation von Geisteskrankheit,' *Allg. Zeitschr. f. Psychiatr.*, Bd. lxx., S. 28.

the function of gratifying a personal aim of the patient's. He holds that an hysterical symptom is the symbolic and distorted expression of the fulfilment of a 'repressed' (*verdrängt*) wish, that it is the only means open to the patient of obtaining a secret pleasure. There is, however, this fundamental difference to be noted between Freud's conception and the current view—namely that, according to him, the whole process always takes its roots in the unconscious, and is usually unconscious throughout; both the wish and the gratification are unknown to the patient. That is the reason why urging the patient consciously to overcome the symptom meets with such limited success. It is only when the underlying process is made conscious that it becomes within the patient's power permanently to overcome the symptom.

The symptom of foolish, silly behaviour has long been recognised as a frequent one in hysteria, and is often thought to be characteristic of the mental state of this malady. Only a few observers, however, have noted how closely allied it is to another, equally frequent, mental trait—namely, childishness. When associated with a peculiar kind of foolish funniness, called by Oppenheim '*Witzelsucht*,' it has been given the name of '*Moria*' by Jastrowitz. The complete syndrome, therefore, comprises the following symptoms: foolish, witless behaviour, an inane, inept kind of funniness and silliness, and childishness. Very little had been contributed to the elucidation of the obscure symptom in question until the adoption of Freud's psycho-analytic method, and it is hoped that the following case may throw some light on the nature and origin of it, as well as illustrate the difficulties in diagnosis that its presence may give rise to.

The patient, a boy of 15, was kindly transferred to my care by Dr. C. K. Clarke on September 20, 1909. He was then suffering from attacks of a peculiar kind that will presently be described. The history was that he had been quite well until two months before. On July 21, when at work, he was hit on the head by a number of bobbins which he was piling up above him. He was slightly stunned, but went on with his work. That night he seemed to be a little out of sorts, and lay quiet, curled up on the hearthrug. On July 25 his mother first heard about the accident, and on the next day she took him to see a doctor. During these five days the boy's behaviour had quite changed, in that he had become



moody and sulky, refused to speak to any one, and resented answering questions addressed to him. The doctor sent him into the hospital, where he rapidly became very excited and even delirious. That night he was extremely restless, had to be held in bed, and did not recognise his mother. The doctor said that he had brain fever, and had his head shaved. On the next day his mother took him away from the hospital, but he continued in the same excited and restless condition for about ten days. During this time he was very noisy and obstreperous, and they had difficulty in feeding him or in getting him to answer any questions. He gradually recovered, but had never been quite well since. In the succeeding two months he suffered from attacks that regularly recurred every ten days. In these he behaved in an exceedingly foolish and childish manner, restlessly wandering about the house whistling, played silly pranks, and teased his brothers and sisters, using rough horseplay; he would slap them until they got annoyed, and then would hug and kiss them to excess. On two occasions he got into a waggon that was outside the door, and aimlessly drove off. He could give no explanation of all these actions, and could with difficulty be persuaded to talk. One curious feature, the significance of which we shall see later, was that he kept avoiding his father, with whom he had previously been on good terms, and that when his father addressed him he would instinctively put up his arm as if to guard from a blow. In between these attacks, which lasted about ten days each, he did not return to his normal state, but continued to behave in a peculiar, foolish, and childish manner, though not in such a marked degree. He would often be afraid to go to the closet alone, even in broad daylight, and would insist on his mother accompanying him. Again, he would make only the feeblest efforts to wash himself, so that his mother had to do this for him as if he were a child. He slept well, and his appetite was good, though very capricious.

When I saw him the most noticeable feature was his apparently foolish stupidity. He giggled in a curious silly way, and his behaviour was throughout asinine. He refused to speak, and answered questions, in a monosyllable, only after repeated inquiries. He had some slight headache, which was general and continuous. I was struck by the incongruity between the slightness of the accident and the apparently grave consequences of it. The bobbins weigh only

nine ounces each, and had left no mark on his scalp. There was not the slightest evidence or probability of any fracture of the skull, and on careful neurological examination no abnormal physical signs whatever could be made out. The question of diagnosis was at this stage by no means an easy one, for the boy's mental state closely resembled that found in the stage of recovery from cerebral irritation due to physical trauma. However, for the reasons just stated, I felt that the remarkable symptoms could hardly have been produced by an organic lesion, decided that the case was probably one of hysterical automatism, and advised psychotherapeutic treatment.

On his next visit he was in one of what his mother called his bad spells. In an interview of nearly an hour I never once got him to speak or answer me. He ignored my questions except that he occasionally gave a silly giggling smile. As a rule he sat there stupidly, and would not co-operate in the examination. When one tried to test his reflexes he resented it like a timorous child who does not understand what is being done. After a while he began to blubber and cry, and tearfully clung to his mother's skirt. This culminated in his bellowing 'Want to doe home; Tum home with me.' He absolutely refused to be soothed by either his mother or me, and behaved like an inconsolable baby, so that finally she had to take him home. The speech alteration accorded well with his babyish behaviour, for it is well known how characteristic of early childhood speech is the replacement of posterior linguo-palatals by the corresponding anterior ones.

It will be seen at this point that the patient had relapsed into the mental state of a child about three years old, and was acting throughout in correspondence with this. Partial dis-aggregation had occurred of his later memories, which had lost their normal vividness and significance, and in his phantasy he was living over again the time of his early childhood. As was mentioned above, this is an occurrence by no means rare in hysteria. The first description of it seems to have been by a writer in 1584,<sup>1</sup> who related a case in an hysterical nun of twenty-five: for nine days she relapsed into a state of child-

<sup>1</sup> 'Histoire admirable et véritable des choses advenues à l'endroit de Jeanne Féry, religieuse professe du couvent des sœurs noires de la ville de Mons, âgée de vingt-cinq ans, possédée du maling esprit et depuis délivrée (1584)' ('Collection Bourneville,' 1886, p. 25).

hood; she played at doll with a saint's image, talked and behaved just like a child of four years old, and was unable to eat meat or other solid food, living only on milk. Another early description, under the name of 'état surnaturel de l'enfance,' was given by Carré de Mongeron,<sup>1</sup> who, in portraying some hysterical nuns of Saint-Médard, writes: 'On voit tout à coup un air enfantin se répandre sur leur visage, dans leurs gestes, dans leur ton de voix, dans l'attitude de leur corps, dans toutes leurs façons d'agir, et quoique leurs convulsions leur fassent faire alors des mouvements à la façon simple, innocente et timide avec laquelle ils énoncent leurs pensées; néanmoins, cet instinct leur fait souvent dire bonnement des vérités très fortes.' It is one form of the syndrome termed by Pitres, in 1882, 'ecmnésie,' which he defines as a partial retrograde amnesia with reversion of the personality to that corresponding with an earlier period of life.<sup>2</sup> He relates the case<sup>3</sup> of a girl of twenty-eight who passed into a delirious state in which she fancied herself seven years old, and acted accordingly. This case and the syndrome in question were fully discussed by one of his pupils, Blanc-Fontenille, in a thesis<sup>4</sup> devoted to the subject; this author's definition, however, of ecnesia as 'une forme d'amnésie dans laquelle la mémoire est entièrement conservé pour tous les événements antérieurs à une période déterminée de la vie du sujet et complètement abolie pour les événements survenus postérieurement à cette période' is rather too broad, for it would include all forms of retrograde amnesia, such as the common post-traumatic one. A classical instance of ecnesia is the celebrated case of the youth to whom the name of Louis V. was given, studied by many observers.<sup>5</sup>

After this no interest appears to have been taken in the

<sup>1</sup> Carré de Mongeron, 'La vérité des miracles,' 1737, t. ii., p. 88.

<sup>2</sup> Pitres, 'Leçons cliniques sur l'hystérie,' 1891, t. ii., p. 219.

<sup>3</sup> Pitres, *op. cit.*, p. 292.

<sup>4</sup> Blanc-Fontenille, 'Étude sur une forme particulière de délire hystérique (délire avec ecnesia),' *Th. de Bordeaux*, 1887.

<sup>5</sup> Camuset, 'Un cas de dédoublement de la personnalité. Période amnésique d'une année chez un jeune hystérique,' *Annales Méd.-Psychol.*, janvier, 1882, p. 75. Jules Voisin, 'Note sur un cas de grande hystérie chez l'homme avec dédoublement de la personnalité,' *Arch. de Neurol.*, 1885, t. i., p. 212. Berjon, 'La grande hystérie chez l'homme,' *Th. de Bordeaux*, 1886. Bourru et Burot, 'Variation de la personnalité,' 1888. Mabillet et Ramadier, 'Dérangement spontané ou provoqué d'états successifs de personnalité chez un hystéro-épileptique,' *Rev. de l'hypnotisme*, 1888, t. ii., p. 42.

subject for more than a decade, but in the past few years, chiefly owing to the instigation of Dupré,<sup>1</sup> much attention has again been attracted to it. Dupré gave the name of 'puérilisme mental' to the condition: in the same year as he published his first paper he and Garnier<sup>2</sup> reported the case of a woman of thirty-three who for a fortnight lived like a child of five or six, and who afterwards lost her memory for this period. Soullard, following Dupré's teachings on the pathology of the condition, devoted a volume to a study of it.<sup>3</sup> Leroy<sup>4</sup> reported a case that resembled the one described in the present paper in that it occurred at the time of puberty, the patient being a boy of thirteen, and that it consisted in repeated attacks of mental puerilism. Janet, in his book on psychasthenia,<sup>5</sup> referring to the 'besoin de direction' and 'besoin d'être aimée' as stigmata of this disorder, says that the fear of loneliness when extreme may culminate in what Gandy termed a '*retour à l'enfance*,' where the patients insist on being treated as children. He mentions the case of a boy of twenty who (like the present patient) would not leave his mother's petticoats and wanted her to nurse him like a baby; he has noted the syndrome in patients as much as forty years of age. In a later publication<sup>6</sup> he describes two further cases. In one of them, the patient, a girl of nineteen, had violent scenes with her step-mother, which were followed by a relapse to the age of seven; she developed a peculiar speech, characteristic tics, and other features that had been present at this age. He pointedly remarks in reference to this case, 'ce n'est pas du puérilisme réel, c'est une comédie du puérilisme qui est jouée involontairement à la suite d'une idée fixe.' The second case was that of a girl of twenty whose stepfather had several times attempted to assault her, evocating an intense reaction of fright and disgust. She kept saying that she used to be happier as a little girl, before her mother remarried, and in her hysterical

<sup>1</sup> Dupré, 'Un syndrome psychopathique particulier: le puérilisme mental,' Congrès de Bruxelles, 1903, t. ii., p. 269.

<sup>2</sup> Garnier et Dupré, 'Transformation de la personnalité et puérilisme mental chez une hystérique,' *Presse Médicale*, 18 décembre, 1901, p. 337.

<sup>3</sup> Soullard, 'Le puérilisme mental,' 1904.

<sup>4</sup> Leroy, 'Un cas de puérilisme mental chez une hystérique: Guérison par suggestion,' *Tribune Médicale*, 18 février, 1905, p. 104.

<sup>5</sup> Janet, 'Les Obsessions et la Psychasthénie,' 1903, t. i., pp. 391, 392.

<sup>6</sup> *Ibid.*, 'Un cas de délire somnambulique avec retour à l'enfance,' *Rev. Neurol.*, 1908, p. 1172.

crises she reverted to this happy period, played at dolls, and so on. Capgras and Terrien<sup>1</sup> traced, in a woman of thirty-five, the attacks of mental puerilism to a marked nostalgia and desire to revisit the pleasant scenes of her childhood. Arnaud<sup>2</sup> refers to a case he had published in 1893, in which the patient, a woman of thirty-nine, acted for months as if she were only fifteen years old; she had the delusion that she had been re-incarnated and was recommencing her life.

Of the publications in Germany, where not many have appeared, two may be mentioned. Pettow,<sup>3</sup> under the title of 'retour à l'enfance,' reports a case where the symptom seemed to be due to a pronounced pædophilia. A valuable contribution was recently published by Strüssler,<sup>4</sup> who describes seven cases in great detail. They all occurred in soldiers undergoing punishment,<sup>5</sup> and shewed the typical extensive retrograde amnesia, combined with regression of the personality to a period of early childhood. As the patients recovered they presented the Ganser syndrome. Strüssler observed that the few remaining memories of the current time were always agreeable ones, and that the ones hardest to recover were the least pleasant ones—concerning the punishment, etc. He explains the occurrence as a 'flight into disease,' the motive being to replace the disagreeable present by an imaginary past, and says that, in their desire to forget the thought of the unhappy present, the patients go too far and forget everything; 'the patient, as a contrast to his present existence, seeks refuge in the childhood time with his father and mother.'

As regards the pathology of mental puerilism the following conclusions may be reached from a study of the literature. In the first place, it seems clear that the symptom may occur in a variety of disorders. Most of the reported cases are

<sup>1</sup> Capgras et Terrien, 'Puérilisme mental par idée fixe chez une débile,' *L'Encéphale*, avril, 1912, Année vii., 1<sup>re</sup> sém., p. 361.

<sup>2</sup> Arnaud, Discussion of preceding paper, *loc. cit.*, p. 368.

<sup>3</sup> Pettow, 'Eine sexuelle Anomalie,' *Zeitschr. f. d. ges. Neurol. u. Psychiat.*, Originalien, 1911, Bd. iv., S. 692.

<sup>4</sup> Strüssler, 'Beiträge zur Kenntnis des hysterischen Dämmerzustandes—Über eine eigenartige, unter dem Bilde eines psychischen "Puerilismus" verlaufende Form,' *Jahrb. f. Psychiatr. u. Neurol.*, Bd. xxxii., S. 1.

<sup>5</sup> As might have been expected, numerous cases have been observed in soldiers during the present war, where the desire to flee from reality has so often been overwhelmingly strong.

evidently hysterical in nature, but some of the recent French ones are cases of some form of psychosis; Dupré and Tarnier,<sup>1</sup> for instance, record one in manic-depressive insanity. Pitres first pointed out,<sup>2</sup> and it has frequently since been confirmed, that the condition can in some cases be artificially brought about in hypnosis, a fact well illustrated by the production of the personality Sally in Prince's Miss Beauchamp case.<sup>3</sup> Charpentier and Courbon,<sup>4</sup> following Dupré, state that there are three kinds of mental puerilism: (1) *puérilisme confusionnel*, of toxi-infective origin, and to be found in hysteria (which they believe to be a toxic disorder!), tuberculosis, and so on; (2) *puérilisme démentiel*, in organic and senile dementias, where there is an intellectual enfeeblement; and (3) *puérilisme constitutionnel*, in mental debility, where there is an arrest of development. In this scheme psychological factors are entirely ignored. Janet, on the contrary, opposes to Dupré's view of mental retrogression the functional conception of the *idée fixe*. As to the origin of this fixed idea, however, he has little to say, still less as to the presence of any motive or reason in it. Many of the cases recorded shew that the symptom in question arises particularly when the patient is in an unpleasant or distressing situation, and Sträussler's valuable suggestion that it indicates a flight in the imagination back to the happy days of childhood, to the safety and comfort of the mother's arms, is amply supported by a study of the cases reported by independent observers. Unfortunately he does not push his analysis beyond this point, nor does he correlate with the puerilism the allied symptom of 'foolishness,' one which in my opinion affords a valuable clue to the understanding of the whole syndrome. Even clinically we see a close association between the two symptoms, for it is plain that the terms 'Dummstellen,' 'Moria,' 'Witzelsucht,' 'état surnaturel de l'enfance,' 'retour à l'enfance,' 'ecmnésie,' 'puérilisme mental,' are merely different terms for different aspects of what is fundamentally a unitary syndrome. We have therefore to take up the problem at this point, and see

<sup>1</sup> Dupré et Tarnier, 'Puérilisme mental chez une maniaque,' *L'Encéphale*, juillet, 1911, Année vi., 2<sup>e</sup> sémi., p. 32.

<sup>2</sup> Pitres, *op. cit.*, p. 221.

<sup>3</sup> Morton Prince, 'The Dissociation of a Personality,' 1906.

<sup>4</sup> Charpentier et Courbon, 'Le puérilisme mental et les états de régression de la personnalité,' *L'Encéphale*, octobre, 1909, p. 319, and décembre, 1909, p. 513.

what light a more detailed study of the 'foolishness' will throw on the general question.

That the symptom of simulated foolishness (*Dummstellen*) was in the present case intimately connected with the infantile form of ecnesia is evident when the detailed features of it are more closely studied. The foolishness shewed all the characteristics of childishness—namely, complete irresponsibility, apparent purposeless naughtiness for its own sake, absurdity, silliness, and almost imbecile ignorance. Following Freud, I have elsewhere<sup>1</sup> pointed out (in connection with Hamlet's simulation of madness) that the occurrence of this particular form of foolishness sometimes seen in hysterical adults has its exact counterpart in the fits of exaggerated childishness at times indulged in by some children. These fits when pronounced are often the prelude to nervous giggling, uncontrollable laughing or outbursts of weeping. The motive actuating the behaviour of these children is to delude the elders into regarding them as being 'too young to understand,' and into, therefore, ignoring their presence. The reason for this artifice is that they may by means of it overhear or see various private matters that they are not supposed to. When a mother chats with her intimate friends over various private topics, frequently the child will resort to the strangest devices in order to stay in the room and listen to the conversation. Then when some one remarks him, and by her look insinuates a doubt as to the propriety of conversing in his presence, he will interrupt his innocent crooning over his toys and indulge in exaggeratedly foolish antics, to disarm, as it were, the suspicions of the company by convincing them of his thorough simple-mindedness and innocence; such children are not always so innocent as they appear. It need hardly be said that this curiosity is in most cases concerned with matters of a directly sexual nature, such as, for instance, obstetric topics; indeed, there is no doubt that children in this way overhear and even witness marital embraces far more frequently than most parents suppose, often with very harmful consequences. Psycho-analysis of infantile memories reveals the remarkable frequency with which the subjects had passed through such experiences when in the same room as their parents, or in an adjoining one. This gratification of sexual curiosity may in many complex ways greatly influence

<sup>1</sup> *Amer. Journ. of Psychol.*, January, 1910, p. 110.

the phantasies of children at a surprisingly early age, a remark that no doubt will appear strange to those who do not realise how much richer and more extensive is the psychosexual life of young children than, through 'repression' and later amnesia, appears to be the case.

Another allied motive behind this acting of foolishness and simplicity lies in the freedom the child thereby wins in doing and saying things that otherwise would not be permissible. Just as many thoughts are allowed in the adult to come to expression if only they are clothed in the form of a joke, so in the child many remarks and actions are overlooked when made with a simulated air of innocence; an *enfant terrible* is often more knowing than he is credited to be. Freud writes in this connection:<sup>1</sup> 'Aus meinen Psychoanalysen Neurotischer weiss ich, dass die sogenannte Naivität junger Leute und Kinder häufig nur solch eine Maske ist, um das Unanständige unbeirrt durch Genieren aussprechen oder tun zu können.' [From my psycho-analysis of neurotics, I know that the so-called *naïveté* of young people and children is often only a mask assumed so as to enable them to say or do something improper without embarrassment.] I can amply confirm this from my own analyses of both adults and children; patients have often told me of instances where they put embarrassing questions to parents or teachers 'so as to see what they would say,' at a time when they were fully oriented on the point, though assuming an air of seraphic innocence.

To return to consideration of the present patient. For unavoidable reasons I was unable to carry out a full psycho-analysis, but analysis of the actual symptom in question had the result both of elucidating the psychogenesis of it and of thereby removing it. At first the patient disclaimed all knowledge of sexual matters, and in an automatic parrot-like way said that 'doctors brought the babies,' a belief obviously inconsistent with the information usually possessed by a boy of his age and class. It soon came out that he not only had the fullest knowledge of the subject, but had passed through a number of sexual experiences. Further, he was able to recall having at the age of four or five experienced sexual excitations in his mother's caresses, and having at different times indulged in various improper phantasies about her. The unconscious motive of his present delirium was, by feign-

<sup>1</sup> Freud, 'Zur Psychopathologie des Alltagslebens,' 3<sup>e</sup> Aufl., 1910, S. 97.



ing the helplessness of a child, to obtain a repetition of his old intimate relation with his mother, to get taken into her bed and nursed, to be washed and otherwise cared for by her just as a child; he had even insisted on her accompanying him to the closet, and arranging his clothes. The guilty dread of his father, which was mentioned above, arose from his jealous dislike<sup>1</sup> that he had as a child felt towards him in relation to sleeping with the mother. His violent outburst in the hospital was occasioned by the fact that he had for medical reasons been placed in an isolation ward which happened to have barred windows. He was terrified whenever he caught sight of the bars, for his guilty conscience gave him the idea that he had done something wicked and had been put in gaol.

After a few weeks' treatment he recovered, went back to work, and has been quite well ever since.

<sup>1</sup> See a development of this subject in the *Amer. Journ. of Psychol.*, January, 1910, p. 96 *et seq.*

## CHAPTER XXV

### THE MENTAL CHARACTERISTICS OF CHRONIC EPILEPSY<sup>1</sup>

THE customary concentration of attention on the more sensational aspects of epilepsy—namely, the fits—has, by furnishing a narrower conception of it, done much to retard our knowledge of the disease as a whole. Observation of the mental and physical characters present in the inter-paroxysmal periods is of especial importance in at least two directions. In the first place, it affords a more secure basis for accurate diagnosis than does consideration of the fits alone, for it is now definitely known that every single feature that used to be thought pathognomonic of an epileptic fit may also occur—though less frequently and in a less typical setting—in an hysterical one.<sup>2</sup> As I have elsewhere remarked,<sup>3</sup> it is often possible to exclude epilepsy by observation of a given fit, but it is much harder to exclude hysteria in this way, and many authorities refuse to make the diagnosis of epilepsy unless they have determined the presence of the characteristic mental changes during an inter-paroxysmal period.<sup>4</sup> The matter of exact diagnosis is of greater practical importance than used to be thought, since Sadger,<sup>5</sup> Stekel,<sup>6</sup> and others, have shewn that many cases

<sup>1</sup> Read before the National Association for the Study of Epilepsy, at Baltimore, May 7, 1910. Published in the *Maryland Medical Journal*, vol. liii.

<sup>2</sup> Hoche, 'Die Differentialdiagnose zwischen Epilepsie und Hysterie,' 1902, S. 18.

<sup>3</sup> Ernest Jones, 'The Mechanism of a Briquet Attack as distinguished from that of Psychasthenic Fits,' *Journal of Abnormal Psychology*, December, 1907, p. 220.

<sup>4</sup> Heilbronner, 'Ueber kleine gehäufte Anfälle,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xxxi., S. 472.

<sup>5</sup> Sadger, 'Ein Fall von Pseudoepilepsia hysterica psychoanalytisch erklärt,' *Wiener Klinische Rundschau*, 1909, Nr. 14-17.

<sup>6</sup> Stekel, 'Die psychische Behandlung der Epilepsie,' *Zentralblatt für Psychoanalyse*, 1911, S. 220.

passing as epilepsy are amenable to psycho-analytic treatment. In the second place, observations made during this period are beginning to yield more fruitful conceptions of the nature and origin of the disease than consideration of the fits alone has been able to do.

It would be impossible here to review the extensive knowledge that has of late years been acquired concerning the mental state of epileptics, and I shall merely recall some of the chief characteristics of this, and try to point out how some valuable generalisations are beginning to be made in this direction. The main features of the mental state in chronic epilepsy, all of which are naturally more pronounced in advanced cases of the disease, may be summarised as follows: Perhaps the most important, practically, is the gradual reduction of intellectual capacity, which may progress to feeble-mindedness or even to profound dementia. Early evidences of this are the tardiness of general psychical reactions, a certain heaviness in thinking, a difficulty in seizing new ideas, a slowness in following the thoughts of others—which frequently leads to serious misunderstandings—and a resulting conservative adherence to established and rigid opinions. With it goes a poverty and restriction of ideas, a limited and stereotyped vocabulary, and a gradual narrowing of the field of interest. This narrowing differs from that of most dementing processes, particularly from that of paraphrenia (*dementia præcox*), in being a concentric one, the patient becoming more and more confined to the interests and knowledge of his immediate environment. The memory commonly suffers, and there are four distinctive features about the resulting amnesia: First, it is much greater in extent than the degree of the general intellectual impairment would lead one to expect. Secondly, matters of distant interest are forgotten more than personal ones, so that the patient may retain a detailed memory for unimportant occurrences in his own life at a time when he cannot answer the simplest question of general knowledge; thus, the field of memory, like that of interest, is concentrically retracted—again unlike what occurs in paraphrenia and other dementias. Thirdly, there is little or no tendency to fill in gaps in the memory by means of confabulation, such as is so frequent in Korsakow's psychosis and other conditions. Fourthly, it is much easier to cure the amnesia by getting the patient to recall the forgotten occurrences during hypnosis,

a matter that has perhaps been most fully investigated by Riklin.<sup>1</sup> As I have elsewhere pointed out,<sup>2</sup> it is probable that all amnesias are due to defects in reproduction rather than in conservation, so that, theoretically at least, it is always possible that any given forgotten memory might be recalled. However, in practice one knows that some amnesias—*e.g.*, hysterical ones—yield to treatment much more readily than others; the amnesias of epilepsy differ from those of the other psychoses in being relatively amenable.

In his relation with surrounding persons the epileptic shews the following characteristics: He is slow in grasping an idea presented to him, but having once done so, he is equally slow in passing on to the next; he remains with his attention fastened on it, and pedantically elaborates the thought to an extent out of proportion to its true significance. He describes it in a minutely circumstantial way that is often wearisome to his audience, sparing no detail; in his speech he makes use of stilted expressions and hackneyed phrases, which contrast with the actual poverty and limitations of his vocabulary. His *rappor*t with the physician and others about him curiously alternates. At one period he may shew the taciturnity and withdrawal into himself that we are accustomed to associate with different types of paraphrenia, while at another an expansive mood and an accessible or even over-friendly attitude may accompany an active desire for company that is at times the source of much embarrassment. This periodic alternation of behaviour and mood is one reason why on the mental side the resemblance of epilepsy to manic-depressive insanity is sometimes extremely striking. In both of these periods irritability and quick-temperedness may be very prominent, and the well-known outbursts of rage are always liable to be evoked on the slightest pretext.

The conduct and character of a chronic epileptic have a number of traits that together make up a distinctive clinical picture. The constant impulse to be busily engaged, on even trivial affairs, is marked by an exaggerated sense of importance that the patients attach to all their doings. This latter feature is part of a highly characteristic general trait—namely, the egocentric nature of the patients' mental processes. This

<sup>1</sup> Riklin, 'Hebung epileptischen Amnesien durch Hypnose,' *Journal f. Psychol. u. Neurol.*, Bd. 1., S. 200.

<sup>2</sup> See Chapters V. and XXIII.

is often exceedingly pronounced, so that the whole of the patient's thoughts and interests centre about his own personality, and naturally it may extend until it causes grave distortion in his conception of his environment. It may, for instance, lead to external, indifferent occurrences being wrongly interpreted by the patient, who may thus develop delusions of persecution or injury. The personal vanity that such patients frequently manifest in a high degree is also a part of the same general trait; the vanity is usually more developed in regard to the body itself than to mental capacities, giving rise, on the one hand, to a fondness for dress, uniforms, decorations, etc., and, on the other, to an abnormal preoccupation with the state of the body, particularly as regards health. The excessive significance that the patients attach to the affairs of their own family is also a consequence of this egocentric trait, and of the general narrowing of their interests to purely personal matters. Other characteristics, particularly those of an infantile nature, will presently be referred to in another connection.

Much work, the best of which is that of Jung's,<sup>1</sup> has been done on the association reactions of epileptics, with the object of establishing the precise nature of the more distinctive features of their mental state. It is found that the reactions in many respects resemble those of imbeciles, notably in the general delay in the reaction-time of the responses, the frequent repetition of the stimulus-word, the high percentage of intrinsic associations, particularly those of the defining type, and the tendency to give answers in the form of sentences. There are, however, certain positive differences, which in a considerable number of cases enable one to make a definite diagnosis of epilepsy from a study of the association reactions alone. The intrinsic associations are peculiarly concrete, and consist of explanations and definitions of a clumsy and often minutely detailed nature; very characteristic is the tendency to supplement the response by adding a phrase that is meant to confirm or complete it. The sentences used are often built in a conventional way, as if taken from a school primer. Extrinsic associations are relatively rare, especially motor-speech ones; they are, however, not restricted and stereotyped, as in the case of imbecility, with the exception of those having an egocentric quality. There is a great tendency to monotony

<sup>1</sup> Jung, 'Analyse der Assoziationen eines Epileptikers,' *Journal f. Psychol. u. Neurol.*, Bd. v., S. 73; 'Diagnostische Assoziationsstudien,' 1906.

in the form of the response; thus, a given part of speech, such as adjectives, may be adhered to throughout, or substantives may be always stated in the plural, and so on. Allied to this is the obvious poverty of vocabulary, which is sometimes very striking. Indications of a rich affective mental life are frequent, in contradistinction to imbecility; therefore great delays in the reaction-time with certain stimulus-words, or total failure to respond (complex-indicators), are very frequent. A peculiarity here is the fact that the evidence of a strongly feeling-toned process sets in later and lasts longer than in other conditions; this is shewn by the delay in the reaction-time occurring, not at the critical test word, but at the succeeding one, and by the perseverating effect for two or three words later.

In the preceding account of the mental state no mention has been made of occurrences that are of great importance, both to the individual patient and to society—namely, the sexual activities of epileptics. It is notorious that these are often of a turbulent or even violent nature, and, further, that perverse acts of different kinds are especially common; in fact, there is a popular tendency to think of the presence of epilepsy as being a probable explanation whenever any unusually shocking or bizarre sexual crime has been committed. A great deal has been published on this subject, most of which, however, is of purely descriptive or casuistic interest; as a rule the instances have been considered as isolated occurrences, and almost as being only accessory features of the malady. It is only of late years that an attempt has been made, first of all in a striking paper by Maeder,<sup>1</sup> to review these various activities and to correlate them with the other abnormal processes. This line of investigation certainly deserves to be more closely pursued than has up till now been the case, for the following two reasons: In the first place, as will presently be indicated, a knowledge and understanding of these sexual activities, which are usually ignored, gives us in many cases a deeper insight into the meaning of various symptoms that at first sight seem not to be connected with the sexual functions. In the second place, since Freud's valuable researches our conception of the significance that errors in sexual development have for the pathogenesis of the psychoneuroses and many of the psychoses has been radically widened. Freud has

<sup>1</sup> Maeder, 'Sexualität und Epilepsie,' *Jahrbuch der Psychoanalyse*, Bd. i., S. 119.

been able to shew that all psychoneuroses are ultimately due to errors in the development of the sexual instinct, and it is quite probable that the large group of the psychoses included under the term 'paraphrenia' (dementia præcox) emanates from a similar source. It has, indeed, been found possible to formulate the essential characteristics of these disorders in terms of abnormal sexual functioning, and the question at once arises whether it might not be possible to do so in the case of epilepsy. Two considerations make this attempt less hopeless than might at first sight appear—namely, the facts that, on the one hand, the sexual side of epilepsy is undeniably a prominent one, while, on the other, the actual pathogenesis of the malady, apart from certain organic cases which are plainly to be separated, is wrapped in profound obscurity.

The most important conclusions that Maeder arrives at after an extensive study of the facts, are these: The sexual desires of epileptics are stronger and more imperious than those of the normal—whether from a primary excess, a lesser inhibition, or, more probably, from both, is not definitely known. They consequently tend to overflow the normal channels of outlet, and are manifested not only in the normal manner, but in all kinds of perverse activities; there is no kind of perversion that may not commonly be met with in epilepsy. In this latter respect the sexual activities resemble those of normal young children. Freud<sup>1</sup> has shewn that the sexual life of young children differs from that of adults in several respects, notably in the fact that the sources of pleasure are with them much more diverse; the infant manifests the potentiality for all kinds of sexual perversions, and on this account Freud describes its sexual life as *polymorph pervers*. In epilepsy these abnormal potentialities are not suppressed, as they usually are, but come to direct expression in the shape of actual perversions. Maeder therefore describes the sexual life of epileptics as 'polyvalent,' borrowing an analogy from chemistry. It further resembles that of the normal child in being predominantly auto-erotic. This is shewn not only in the extraordinarily large part played by masturbation and other auto-erotic activities throughout the malady—these have a close relation to pre- and post-paroxysmal periods, and may frequently occur in crises as equivalents for the attack—but still more strikingly in the late stages. When intellectual

<sup>1</sup> Freud, 'Drei Abhandlungen zur Sexualtheorie,' 2<sup>e</sup> Aufl., 1910.

impairment has advanced to a degree that in other dementing processes—*e.g.*, general paralysis—still allows of allo-erotic manifestations, normal love, attempts to seduce, and so on, the sexual life of epileptics has become almost exclusively of an auto-erotic type. A difference is here seen between hysteria and epilepsy; in hysteria the symptoms are all disguised expressions of various sexual activities, particularly the 'perverse' ones characteristic of normal children, but in epilepsy these forms are greatly exaggerated and less disguised, while the auto-erotic element is even more pronounced. Stating these conclusions in their most general form, we may say that the sexual activities of epileptics retain the manifold variety met with in normal children, but differ from those of children in that the potential quality of these has become replaced by more fully developed modes of expression.

We may now cite a few instances to illustrate how much more intelligible certain of the mental features indicated above become when they are correlated with various sexual processes. The most prominent stigma of the epileptic character is its markedly infantile nature, and this fact appears in a new light when we recognise its dependence on the infantile nature in epilepsy of the most fundamental of all psychical activities—namely, the sexual life. The stigma in question is revealed in a great number of traits. The busyness and the sense of importance they attach to their minor actions, the craving for recognition and praise, the desire to be rewarded for creditable behaviour of a trifling kind, the delight in dress and decoration, the peevish capriciousness and pettiness, the fondness for spying on their comrades, the importance they attribute to their birthdays, the excessive delight in receiving presents, the simplistic piety of their family relations, and, above all, the markedly egocentric nature of their interests and conduct, are all typical instances of this. I would also attribute their conservatism and slowness in acquiring new affective states and ideas, or in surrendering old ones, to the exaggerated difficulty with which they renounce infantile sexual tendencies. The characteristic vanity already spoken of above is a mild form of the most exquisitely auto-erotic manifestation—namely, that technically known as 'narcissism'—and in some cases may even pass over into this. To be correlated with this psychosexual infantilism is the well-known fact that epilepsy is essentially a disease of youth; in at least four-



fifths of the cases the attacks begin before the age of twenty.

In the infant sexual interests are not so localised anatomically as they are in the adult, but extend to other regions, particularly to the alimentary orifices. These accessory interests are commonly over-accentuated in epileptics, a fact that accounts for a number of symptoms. Their excessive fondness for kissing is due to the unusual significance attaching to the labial mucous membrane, as probably is the curious symptom known as bulimia, attacks of craving for food. Similarly, their morbid concern for the intestinal functions and for the dejecta, the so-called 'stool-hypochondria,' is due to an excessive sexual importance of the anal mucous membrane; they have not been weaned from the normal interest taken by infants in excretory functions. Various fetishisms also arise from this extension of sexual interest to other parts of the body. The excessive psychical significance acquired by the hands is due partly to this, and partly to their association with the act of masturbation; patients will sometimes be unable to answer a question concerning their health until they have consulted the appearance of their hands. Constant hand-rubbing is extremely frequent with epileptics, and is almost always a means of obtaining auto-erotic gratification.

The variations of mood in epilepsy are closely connected with the form of sexual activity. The periods of self-absorption, reserve, and taciturnity correspond with predominance of auto-erotic interests, and those of expansiveness with allo-erotic. In the twilight-states are developed half-conscious phantasies, in which sexual wishes come to imaginary fulfilment. The irritability and mental hyperæsthesia of epileptics may be correlated with the same symptoms in the anxiety-neurosis, and, like these, are due to undischarged sexual tension.

Of the perverse forms of allo-erotic activity, three may briefly be mentioned. The passion for touching, smoothing, and stroking all possible objects, but especially the skin of another person, is an over-development of one of the normal preliminary sexual acts, and recalls the eighteenth-century definition of the French encyclopædists: 'L'amour est le contact de deux épidermes.' Many epileptics behave unusually in shaking hands, retaining the hand of the other person as long

as possible, and even lifting it to their heart, their cheeks, or their lips. The tendency to exhibitionism—*i.e.*, display of covered parts of the body, particularly the genital organs—is very common in epilepsies. During minor attacks, or in states of partial obnubilation, a patient will frequently so adjust his position or clothing as to expose a part of the body, and when medically examining advanced cases it is usually easier to get a view of the abdomen than of the tongue. This strikingly contrasts with the behaviour of hysterics, who typically are noticeably modest even in attacks when consciousness is profoundly affected, and it may be made use of as a diagnostic sign of considerable value. The tendency to undress partially that is so frequently seen just after an attack of major or minor epilepsy is also of exhibitionistic origin, though many writers—*e.g.*, Gallus<sup>1</sup>—have naïvely attributed it to the need to go to bed induced by the feeling of sickness. Algolagnia, or association of lust and pain, is one of the best-known aberrant sexual tendencies of epileptics. The sadistic component of this—namely, the obtaining gratification by the infliction of pain—is responsible for a great many lust murders and other acts of cruelty and violence. The masochistic component—namely, the obtaining gratification by suffering pain—is in its slighter degrees very frequent. The sentimental mawkishness, the dependence, and the tendency to self-subjection present in so many epileptics are instances of this. In this connection may also be mentioned the fanatical, extravagant, and pathological religiosity that is as characteristic of epilepsy as delusions of jealousy are of alcoholic 'paranoia,' or delusions of grandeur of general paralysis. Gallus<sup>2</sup> states that this is due, not to the intellectual deterioration, as is commonly supposed, but to the morbid tendency to dependence. In the light of modern knowledge one may now go beyond this, and affirm that both arise from a common source—namely, the feminine, or masochistic, component of the sexual instinct.

Since the earlier part of this paper was written one of the most experienced authorities on the subject of epilepsy, Pierce Clark, who is also proficient in psycho-analysis, has undertaken very searching investigations into the disorder from the psychogenetic point of view, and has already published several lengthy

<sup>1</sup> Gallus, 'Der Geisteszustand der Epileptischen,' *Volkmann's Sammlung*, Nr. 536, 537, S. 829.

<sup>2</sup> *Ibid.*, *op. cit.*, S. 817.

studies.<sup>1</sup> It is not easy to summarise his conclusions because they are very detailed in nature and not yet finished enough to permit of short formulas, but the main trend of them is as follows: He thinks it unlikely that the causation of epilepsy, even of 'true' or 'essential' epilepsy, is of a physical nature, that the psychogenetic factors are of cardinal importance, and that there is much promise of successful results through appropriate treatment of the latter. The key to the problem he sees in the erroneous development of the sexual instinct in such cases, as Freud has shewn it is in the case of the neuroses. He writes, for instance: 'There can be no question that the essential nucleus of the affective defect in the epileptic is concerned with sexual infantilism, as shown in my case-study to follow.' The pathological self-love noted by most observers he relates to an abnormal retention of infantile narcissism, with which goes also a marked fixation at the homosexual phase of development, although he finds that overt homosexuality in the ordinary sense is rare with epileptics. The distinguishing characteristic of epilepsy seems to be the great irregularity of the fixations in the psychosexual development, so that manifestations may be simultaneously seen relating to all stages of this, a conclusion very similar to Maeder's formula of polyvalency. Further, adopting a striking suggestion made by Ferenczi,<sup>2</sup> Pierce Clark thinks it probable that the epileptic fits represent the periodical abreaction of accumulated energy in a form that corresponds with a regression to the infantile period of inco-ordinate movements, and he draws an interesting parallel between these two sets of phenomena. Clark works out these and other ideas in great detail in conjunction with both the descriptive and genetic aspects of epilepsy, and it is indispensable to consult his original writings on the subject, particularly the first two of those referred to above. He has certainly demonstrated finally the importance of psychological

<sup>1</sup> Pierce Clark, 'The Nature and Pathogenesis of Epilepsy,' *New York Medical Journal*, February 27, March 6, 13, 20, and 27, 1915; 'A Study of Certain Aspects of Epilepsy compared with the Emotional Life and Impulsive Movements of the Infant,' *Interstate Medical Journal*, October, 1915; 'Some Therapeutic Suggestions derived from the newer Psychological Studies upon the Nature of Essential Epilepsy,' *Medical Record*, March 4, 1916; 'Clinical Studies in Epilepsy,' 1917.

<sup>2</sup> Ferenczi, 'Stages in the Development of the Sense of Reality,' reprinted as chap. viii. of his 'Contributions to Psycho-Analysis,' English translation, 1916.

studies in epilepsy for the understanding and treatment of this hitherto intractable malady.

In conclusion, it may be repeated that observation of the mental state during an inter-paroxysmal period is of high importance for establishing the diagnosis of epilepsy, and, further, that investigation of the deeper sources of the mental abnormalities is likely to prove of great value in enabling us more hopefully to penetrate into the nature of epileptic disturbances.

## CHAPTER XXVI

### THE INTER-RELATIONS OF THE BIOGENETIC PSYCHOSES<sup>1</sup>

WHETHER the worker be actuated primarily by therapeutic motives or by the desire to increase scientific knowledge, it is in either case impossible for him to carry out any detailed explorations in the mental processes of his patients without acquiring as a result some notions, however tentative, regarding the distinctions between the various types of disorders with which he has to deal. Those who have used in their investigations the most thorough of the psychological methods—I refer to the psycho-analytical school inaugurated by Freud—have, it is true, chiefly devoted their attention to the numerous problems of individual psychopathology, and have not for the most part displayed any very special interest in the not always profitable questions with which nosology is mainly concerned. Nevertheless, in the course of years, and, one might almost say, automatically, certain general conceptions of a nosological character have gradually crystallised out from their work, some of which I desire to bring now before the notice of this gathering. I do so at the request of Dr. Adolf Meyer, than whom no one knows better how tentative and fragmentary such a contribution must necessarily be.

As the greater part of psycho-analytical work has been done in connection with the neuroses, it is natural that here the greatest progress has been made, and, indeed, it may be said that in this field our nosological conceptions are approaching a stage of relative completion. It has been found that the two main types of psychoneurosis, the obsessional neurosis and hysteria, present clear distinctions in their essential nature

<sup>1</sup> Address delivered at the opening exercises of the Phipps Psychiatric Clinic, the Johns Hopkins Hospital, Baltimore, April 18, 1913. Published in the *American Journal of Insanity*, vol. lxix.

and in their psychological mechanisms, so that it is now nearly always possible not only to separate them in general, but also to estimate in a mixed case how much of the content belongs to the one condition and how much to the other.<sup>1</sup> With regard to the large group of symptoms, such as most of the phobias, various vaso-motor manifestations, and so on, that have traditionally been considered to form part of hysteria, but which Babinski and others have in recent years attempted to split off from this, psycho-analysis has shewn that they are in their nature so closely allied to hysteria as to make it preferable still to include them under this term; according to psycho-analysis, therefore, hysteria is held to cover at least as wide a field as it ever did. These three forms of psychoneurosis—the obsessional neurosis and the three varieties of hysteria (conversion, fixation, and anxiety-hysteria)—Freud groups together under the name of 'transference neuroses,' in contradistinction to the paraphrenic conditions, where the element of transference is far less pronounced—less so, indeed, than in the normal. The progress made in the more obscure problem of classifying the various anxiety states (*Angstzustände*) has been slower, as might have been expected, but even here a considerable degree of insight has been attained in recognising the distinctions and resemblances between these states, and we are now in a position at least to formulate the problem in a more satisfactory way than was previously possible.<sup>2</sup>

In the field of the psychoses proper (the relatively small group of 'organic' psychoses, such as general paralysis of the insane, arterio-sclerotic insanity, and the like, are here excluded) less has been accomplished, but still something. Light has been thrown both on the distinctions and inter-relations between several of the individual psychoses and on the relation of the neuroses to the psychoses in general. The first step was the demonstration, by Abraham, Bleuler, Jung, and others,<sup>3</sup> that the commonest psychosis, dementia præcox (Bleuler's *Schizophrenie*, or, to use the more recent term of Freud's, *Paraphrenia*), exhibits unconscious psychogenetic mechanisms

<sup>1</sup> See Freud, *Jahrbuch der Psychoanalyse*, Bd. i., or in default of this Hirschmann, 'Freud's Theories of the Neuroses,' English translation by Payne, 1913, chapters vi. and vii.

<sup>2</sup> See Chapters XXVII. and XXVIII. of the present volume, and especially the works of Freud there referred to.

<sup>3</sup> These works are reviewed in the number of the *Jahrbuch* already referred to.

akin to those met with in the neuroses, and that the disease manifestations represent an introversion of interest accompanying a regression of mental processes towards a more infantile type, one aptly described by Bleuler under the expression 'autism.' Some two years ago Freud published a study of paranoia,<sup>1</sup> which from the point of view of nosology alone is of remarkable interest. In it he shewed that the close connection clinically known to obtain between paranoia, dementia paranoides, and paraphrenia, has its exact counterpart in the psychological basis of these three conditions. They represent, namely, in this order an increasing regression towards more and more primitive stages of ontogenetic development, each corresponding with what may be called a caricature of a phase of growth through which every individual has to pass; we have here, therefore, a psychological explanation of the familiar clinical finding that the same case which at its onset appeared to be one of simple paranoia may later pass through the stage of dementia paranoides and terminate in a frank dementia. From this point of view one would be inclined to regard the type of 'pure' paranoia that does not go on to dementia as not differing essentially from other paraphrenias, and as representing merely a milder form of a very similar disease process, a conclusion already reached on clinical grounds by a number of psychiatrists. The differences that these three conditions shew in extent of regression will in the future no doubt be correlated with variations in the original mental disposition of the individual, and may perhaps also be described in terms of racial atavism.

We are not yet in a position profitably to discuss the fundamental causes of the differences between the neuroses and the psychoses, but the preliminary task has been entered on of defining wherein these differences reside. The most satisfactory formulation of them at present possible would seem to be this: that the introversion or turning away of interest from the outer world, which is the most characteristic feature of both, has proceeded to a further degree in the case of the psychoses, carrying with it a loss, absolute or relative, of the 'feeling for reality' (Janet's *sentiment du réel*, Freud's *Realitätsgefühl*). In the neuroses the introversion essentially relates to the 'sexual hunger' (*Libido*), whereas in the psychoses there is present as well as this also an introversion of other interests,

<sup>1</sup> Freud, *Jahrbuch*, Bd. iii., S. 1.

with a relative abrogation, temporary or permanent, of the reality-principle; whether this abrogation can be ascribed, as Freud seems inclined to think, to a particularly complete introversion of the sexual hunger is a moot question in the forefront of interest at the present time.<sup>1</sup> Even here, however, the difference would seem to be one of degree rather than of kind, for, on the one hand, the feeling for reality is generally retained to some extent in most cases of psychosis, while, on the other, it is always partly abrogated in every case of neurosis and occasionally for a short time altogether; from this hint one might surmise that possibly the distinction between the two groups is less sharp than is usually thought. This consideration goes to render more intelligible the curious association of neurotic and psychotic manifestations so often found existing in the same case, the classical example of which is the frequent combination of hysterical and catatonic symptoms. From a psychological, as well as from a clinical point of view, it may be said that in such cases the hysterical product covers the catatonic one. What has happened is that the reaction of the individual towards various psychological conflicts, which he cannot resolve, has led first to the creation of hysterical symptoms, and then, these failing in their function of a defence mechanism, to a further degree of introversion, culminating in catatonia. It should not be forgotten in this connection that symptoms of mental disorder are very properly so called; they never make up the disorder in themselves, but are only symptomatic of it. Indeed, it is psychologically more accurate to regard them not so much as direct signs of the disease itself as evidences of desperate attempts to remedy it; they indicate the action of protective processes rather than of destructive ones.

Physical symptoms of hysteria ('conversion-hysteria') are not the only neurotic manifestations that may conceal a more serious state of affairs. Occasionally, and this is not so widely known as it should be, hysterical phobias ('anxiety-hysteria') may also play the same part. Cases even occur of absolutely typical anxiety-hysteria where, after the phobias are made to disappear by treatment, paraphrenic manifestations, particularly of the paranoid variety, shew themselves for the first time, almost giving the impression that the neurosis had in a

<sup>1</sup> See Freud's essay on paranoia, referred to above, and his historical article in B.I. v. of the *Jahrbuch*; also the discussion of the subject in his 'Allgemeine Neurosenlehre,' 1917, S. 492-498.



way served to protect the person from the necessity of erecting a second line of defence, paraphrenia, until it was removed. We know that there are patients who are not strong enough to live without their protecting neurosis, and the development of a paraphrenia is one of the calamities that may occur when it is taken away. Cases of this sort are fortunately very rare, but they are the source of much anxiety to the physician responsible for the care of them, so that the matter is one deserving of special attention. Then, again, epileptiform attacks of psychogenetic origin, clinically indistinguishable from true epileptic fits, may also occur as a cover-syndrome, and quite apart from the familiar paraphrenic epileptiform seizures, the origin of which is as yet not known. The obsessional neurosis may at times be exceedingly difficult to distinguish from paranoid conditions,<sup>1</sup> and, though I have never seen a clear case of the kind, one could readily imagine the two being combined in the same way that hysteria and catatonia so often are.

One of the most interesting nosological questions of present-day psychiatry is that concerning the status of manic-depressive insanity. As is well known, Kraepelin's gradual extension of the conception during the past six or eight years has been effected mainly at the expense of the paraphrenic group, the first step in this direction having been taken by recognising that catalepsy and other catatonic symptoms might also occur in manic-depressive insanity; even the appearance of a considerable terminal deterioration is now held not necessarily to exclude this diagnosis. A striking result of this tendency has been an increasing difficulty in establishing a demarcation between the two groups, the endeavour being accompanied by a certain artificiality and an undeniable arbitrariness. Although Kraepelin himself still maintains that the two conditions are fundamentally distinct from each other in their nature, there are not wanting psychiatrists, and even in his own school, who are beginning to doubt this, and who regard the difficulty of separating them clinically as indicating that an essential connection subsists between them. An interesting example

<sup>1</sup> I have published a study of a case of this sort, where, for instance, the obsessional ideas were accepted by the patient in the same way that delusions are. 'Einige Fälle von Zwangsneurose' (Fall I.), *Jahrbuch der Psychoanalyse*, Bd. iv., S. 563.

of this trend is furnished by Urstein's recent work,<sup>1</sup> in which the conclusion is reached that manic-depressive insanity is to be regarded as a syndrome of catatonia.

Psycho-analytic investigations of this condition have as yet been too sparse to allow of more than fragmentary contributions being made to the nosological problem, but, in the light of the considerations just mentioned, these possess a certain interest. In the first place, as confirming the doubts that have elsewhere been cast on the available clinical criteria, it has been shewn by Brill<sup>2</sup> that cases occur, clinically indistinguishable from manic-depressive insanity, but which prove on psycho-analysis to be of the nature of anxiety-hysteria. In rare instances this has also been my own experience. There comes to my mind particularly the case of a male patient, kindly sent to me by Dr. Adolf Meyer, where the diagnosis of manic-depressive insanity had been made by Kraepelin himself and several other psychiatrists. Clinically, it was a typical case of cyclothymia, of the depressive variety, extending over the greater part of the patient's life, but both the psycho-analysis and the subsequent course of the case shewed that it was beyond doubt one of anxiety-hysteria. Such cases must, of course, be separated from the true manic-depressive group, but I know of no way in which this can be done at present except through psycho-analysis. As regards the true variety, Abraham<sup>3</sup> has, in a recent paper, drawn a striking analogy between the psychological structure of the manic-depressive syndrome and that of the obsessional neurosis, while, in a case reported some four years ago,<sup>4</sup> I called attention to the presence of psychogenetic mechanisms similar to those met with in paraphrenia. Much more work needs to be done before any definite conclusions can be formulated from the psycho-analytical point of view as to the nosological status of manic-depressive insanity, but I have little hesitation in hazarding the opinion, on general principles, that the relation

<sup>1</sup> Urstein, 'Das manisch-depressives Irresein als Erscheinungsform der Katatonie,' 1912.

<sup>2</sup> Brill, 'Psychanalysis,' 2nd edition, 1914, ch. iii., 'The Actual Neuroses.'

<sup>3</sup> Abraham, 'Ansätze zur psychoanalytischen Erforschung und Behandlung des manisch-depressiven Irreseins,' *Zentralbl. f. Psychoanalyse*, Jahrg. ii., 1912.

<sup>4</sup> 'Psycho-Analytic Notes on a Case of Hypomania,' *American Journal of Insanity*, October, 1909.

between it and paraphrenia will be found to be of the same nature as that subsisting between hysteria and paraphrenia; in other words, that the two conditions represent merely different stages and varieties of a profound introversion rather than two entirely distinct disease processes. It is further probable, to my mind, that manic-depressive insanity, with perhaps other conditions, notably certain of the epilepsies,<sup>1</sup> may profitably be regarded as representing intermediary stages, so far as the extent of the introversion is concerned, between the neuroses and paraphrenia. In any case, it seems to shew a number of links connecting it in both directions. On the one side we see that its psychological structure can be closely paralleled by that of the obsessional neurosis, and that a perfectly typical manic-depressive syndrome may occur in anxiety-hysteria, while, on the other side, the resemblances it bears to paraphrenia are only too familiar to the diagnostician; the intimate associations between it and catatonia are emphasised by Urstein, being, indeed, a direct result of Kraepelin's redistribution, itself the inevitable product of faithful observation, and, on the other hand, the prominence of paranoid delusions in so many cases has actually led some psychiatrists, notably Specht,<sup>2</sup> to advance the astonishing proposition that the greater part of the paranoia group should be included under it, a fact which at all events indicates that the transition of such cases to dementia paranoides would be less violent than might at first sight be imagined.

I must frankly confess that the train of thought on which these views are based constitutes to a great extent a reversion to an older attitude, discarded by most recent psychiatrists, one which, being opposed to any form of faculty psychology, lays stress on the features common to all varieties of psychogenetic disorders. One holds, in short, that in this field we have to deal with various types of reaction to a fundamentally allied group of difficulties—namely, intra-psychical conflicts of a biological nature<sup>3</sup>—rather than with a number of entirely distinct 'disease entities.' This attitude towards the problems of nosological psychopathology is in full accord with the

<sup>1</sup> See Chapter XXV.

<sup>2</sup> Specht, 'Ueber die klinische Kardinalfrage der Paranoia,' *Centralblatt für Nervenheilkunde und Psychiatrie*, 1908.

<sup>3</sup> The designation 'biogenetic' is suggested for disorders of this kind—*i.e.*, those produced through internal conflicts between biological instincts.

tendency advocated by our distinguished host, Dr. Adolf Meyer, who has constantly urged that we should study our patients from a broader point of view and regard them as biological organisms striving to remedy their maladjustments. It is true that this attitude in no way relieves us from the necessity of trying to define the different types of reaction that we encounter, a matter that is evidently of cardinal importance for both prognosis and therapeutics, and I would only add in conclusion that even in this field of diagnosis alone the services rendered by psycho-analysis are not to be underestimated.

## CHAPTER XXVII

### THE PATHOLOGY OF MORBID ANXIETY<sup>1</sup>

THAT the present subject is one of immense importance becomes evident from the following considerations. Including its indirect manifestations, morbid anxiety is the most frequent single symptom in psychopathology, and, I feel tempted to add, perhaps in all medicine; it has been called, and without gross exaggeration, the Alpha and Omega of practical psychiatry.<sup>2</sup> Secondly, the intensity of distress it may give rise to is equalled by that of very few other forms of suffering. Thirdly, the study of the pathogenesis of it is qualified, as perhaps no other, to lead us towards a comprehension of those deeper biological problems concerning the relation of body to mind that underlie the questions of the derivation of mental disturbances in general. Lastly, it is a disorder that in a great many cases obstinately resists treatment, unless this is based on a proper understanding of the pathology of it. This feature of refractoriness is dwelt on by most writers of experience, and was, for instance, one of the reasons why Oppenheim proposed the subject for discussion in a symposium held at the last meeting of the Society of German Neurologists.<sup>3</sup> He quotes a touching letter from one of his patients: 'Ich kuriere nun schon an die 6 Jahre herum, ohne dass mein Zustand sich auch nur vorübergehend gebessert hatte, ich bin bei den Autoritäten aller Länder gewesen. Ist denn wirklich die Medizin so arm, dass man einen körperlich und geistig gesunden Menschen von solch einem Leiden nicht befreien kann?' ['I have been

<sup>1</sup> Contribution to the Symposium of the American Psychopathological Association, held at Baltimore, May 10, 1911. Published in the *Journal of Abnormal Psychology*, vol. vi.

<sup>2</sup> Dick, 'Die Angst der Kranken,' *Allg. Zeitschr. f. Psychiatrie*, 1877, Bd. xxxiii., S. 231.

<sup>3</sup> Oppenheim, 'Pathologie und Therapie der nervösen Angstzustände,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xli., S. 173.

going about being treated now for six years without my condition being even temporarily bettered; I have visited the authorities of every country. Is the science of medicine really so poor that some one who is bodily and mentally sound cannot be freed from such an affliction?']<sup>1</sup> He further states that, 'In der Regel muss sich aber eine psychotherapeutische Kur, wenn sie sich einigermaßen wirksam erweisen soll, auf viele Monate erstrecken. Und ich kenne eine Anzahl von Patienten dieser Art, die einer dauernden geistigen Führung bedürfen oder sich mindestens einige Monate in jedem Jahr der seelischen Behandlung unterziehen müssen.' [As a rule a psychotherapeutic treatment to be at all effective must be extended over many months. And I know a number of patients of this kind who need a permanent mental directing, or who have to undergo mental treatment for at least several months of every year.]<sup>2</sup> Fortunately this pessimism is not justified in fact; it only arises when, from an imperfect knowledge of the pathogenesis, the proper line of treatment is not carried out.

The first problem is to define as nearly as may be what is to be understood under the term 'morbid anxiety.' It is at once obvious that the word 'anxiety,' the significance of which has been debased through the use of such expressions as 'to be anxious to catch a train,' etc., has now a much weaker meaning than the term needed to denote the condition under consideration, and which is more accurately described by the German word *Angst*; when, therefore, the word 'anxiety' is employed in the following pages it will be in the more significant sense of *Angst*, or intense, morbid dread. It is customary to distinguish anxiety in this sense from fear,<sup>3</sup> but it would seem that the resemblances between the two emotions are great enough to predicate at least a common biological source for them, and there is little doubt but that the differences between the two are due rather to the respective circumstances under which they arise than to more fundamental divergences. All writers seem agreed in regarding these differences as the same as those existing between *normal* and *morbid* fear, which

<sup>1</sup> Oppenheim, *op. cit.*, S. 188.

<sup>2</sup> *Ibid.*, *op. cit.*, S. 190.

<sup>3</sup> See, for instance, Hoche, 'Pathologie und Therapie der nervösen Angstzustände,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xli., S. 195. Janet, 'Les Obsessions et la Psychasthénie,' 1903, t. i., p. 463. Stekel, 'Nervöse Angstzustände und ihre Behandlung,' 2<sup>e</sup> Aufl., 1912, S. 2, 3.

can be formulated, as Oppenheim has done,<sup>1</sup> under two distinct headings:

1. Preponderance of certain physical symptoms, many of which can be objectively investigated. Hoche, indeed, defines *Angst* as fear *plus* specific bodily sensations.<sup>2</sup> The main symptoms will presently be enumerated.

2. Disproportion between the intensity of the emotion and the occasion of its occurrence. This is a more accurate statement than the one describing anxiety as an exaggerated form of fear, for normal fear may be very intense whereas anxiety need by no means always be so; it is not so much an excessive fear as a *relatively* excessive fear. The essential feature is the disproportion, anxiety being evoked on a given occasion where the normal would either experience a slighter degree of fear or none at all. It is obvious that in estimating the morbidity of a given attack of anxiety one has thus to judge by an empirical standard of how much fear is to be allowed to the normal in various circumstances. Often it is easy to decide this, but considerable difficulty may arise in borderland states; it will presently be pointed out that for certain definite reasons our standard of normality is too low, so that we are too generous in allotting some degrees of fear to the normal that, strictly speaking, have a pathological basis.

On taking up the clinical features of anxiety states we have to note the following facts. *First*, anxiety may appear as a symptom of any form of psychoneurosis or psychosis. Those in which it is most prominent are hysteria, in the special form to which Freud has given the name anxiety-hysteria, in the obsessional neurosis, as obsessive phobias, in melancholia, especially in the cases occurring in women past the climacteric age, and in alcoholic conditions, especially the acute ones, such as delirium tremens. As is well known, Wernicke in 1894 attempted to mark off a group of psychoses as an independent condition, to which he gave the name 'anxiety-psychosis.'<sup>3</sup> This view did not find any wide acceptance, and, since the appearance of Forster's detailed clinical study,<sup>4</sup> it may be regarded as a settled matter that anxiety occurring in any psychosis is merely one symptom of some

<sup>1</sup> Oppenheim, *op. cit.*, S. 183.

<sup>2</sup> Hoche, *loc. cit.*

<sup>3</sup> Reported in the *Allg. Zeitschr. f. Psychiatrie*, 1895, Bd. li., S. 1020. See further his 'Grundriss der Psychiatrie,' 1900, S. 236.

<sup>4</sup> Forster, 'Die klinische Stellung der Angstpsychose,' 1910.

more comprehensive condition. *Secondly*, on the other hand, there is no doubt that as a neurosis anxiety states may appear in a pure form. The first delineation of this condition was given by Hecker,<sup>1</sup> but it was Freud<sup>2</sup> who recognised the unitary nature of the syndrome and its nosological independence. It is true that this condition is most frequently found to be complicated by some other neurosis, but the occurrence of it in a pure form, called by Freud the 'anxiety-neurosis,' gives one a unique opportunity to investigate the pathology of the main symptom, anxiety, and was the occasion of Freud's formulating his views as to the significance of this. *Thirdly*, intense anxiety is such an unendurable form of suffering that every effort seems to be made on the part of the organism so far as possible to get rid of it. At all events it is found in experience that in any long-standing case of anxiety-neurosis one of two things—or both—has happened. Either the physical manifestations increase at the expense of the mental—tending to replace them to a greater or less extent—or the person guards against the outbursts of anxiety by the creation of sundry inhibiting phobias. These processes occur to a very varying extent in different cases, and they are hardly ever completely successful; the problem, however, is greatly complicated by their presence, and for the elucidation of the pathogenesis of pure anxiety one does better to investigate the cases in which they are less prominent. The importance of the former of these processes is two-fold: In the first place, it raises the difficult question of the relation of mental to bodily processes, and is one of the reasons why stress has so often been laid on the organic causes of anxiety states. In the second place, it is a matter of considerable practical importance, because when a patient's symptoms are related to one or other system of organs the physician's attention is apt to get focussed there, and the general nature of the condition may be overlooked; the mistakes in diagnosis that in this

<sup>1</sup> Hecker, 'Ueber larvierte und abortive Angstzustände bei Neurasthenie,' *Centralbl. f. Nervenheilk. und Psychiatrie*, 1893, S. 565.

<sup>2</sup> Freud, 'Ueber die Berechtigung, von der Neurasthenie einen bestimmten Symptomenkomplex als "Angstneurose" abzutrennen,' *Neurol. Centralbl.*, 1895, S. 50. Republished in the 'Samml. kleiner Schriften zur Neurosenlehre,' 2<sup>e</sup> Aufl., 1911, S. 60. The most exhaustive discussion of the pathology of morbid anxiety is contained in his recent 'Vorlesungen zur Einführung in die Psychoanalyse,' Dritter Teil: 'Allgemeine Neurosenlehre,' 1917, cap. xxv.



way arise are very numerous, and though these clinical aspects do not here concern us they are referred to because they go far to explain the fact that the great frequency of anxiety states is not generally recognised. The latter of the two processes also raises a series of fresh problems, concerning the psychogenesis of specific phobias, which have to be kept distinct from those relating to anxiety proper.

It is not necessary here even to enumerate the different views that have been put forward concerning the pathology of anxiety; those interested in the historical aspects of the subject may be referred to the writings of Forster,<sup>1</sup> Hartenberg,<sup>2</sup> Loewenfeld,<sup>3</sup> Pitres and Régis,<sup>4</sup> etc. We have, however, briefly to review the types of explanations that have been offered, which can fairly well be classified into definite groups. It may be said at the outset that very few writers now believe in either an exclusively mental or exclusively physical origin of anxiety, and that there is a general convergence towards the conclusion that both kinds of factors are operative. This biological conception, which is the one also adopted here, in itself indicates that the solution of the problem is likely to be found by investigation of the inherited instincts, for it is in this sphere that the physical and the mental aspects of the human organism approach each other most closely. Before developing this conception it will be convenient first to consider the mental and physical aspects separately, from both a descriptive and pathological point of view.

In the mental manifestations the emotional element is naturally the most prominent. It consists in a curious admixture of dread, panic, terror, anguish, and apprehension. It varies greatly from, on the one extreme, a slight abashment, awkwardness, embarrassment, or confusion, to, on the other, a degree of indescribable dread that may even rob the sufferer of consciousness. Common to all degrees is a sense of something impending, of anxious expectation of something harmful or awful. One needs an artist to portray the higher grades of dread. Guy de Maupassant in his novel 'La Peur' sketches with a few rapid strokes a strikingly accurate picture: 'C'est quelque chose d'effroyable, une sensation atroce, comme

<sup>1</sup> Forster, *op. cit.*

<sup>2</sup> Hartenberg, 'La névrose d'angoisse,' 1902.

<sup>3</sup> Loewenfeld, 'Die psychischen Zwangerscheinungen,' 1904.

<sup>4</sup> Pitres and Régis, 'Obsessions et phobies,' 1903.

une décomposition de l'âme, un spasme affreux de la pensée et du cœur, dont le souvenir seul donne des frissons d'angoisse. Mais cela n'a lieu, quand on est brave, ni devant une attaque, ni devant la mort inévitable, ni devant toutes les formes connues du péril! Cela a lieu sous certaines influences mystérieuses, en face de risques vagues.'

The anxious expectation may become especially linked to certain ideas or occasions, usually loosely, so that it readily passes from one to another; the commonest of these are hypochondriacal ideas, ideas of moral scrupulousness, fears of loss of property or of professional capacity, etc. Freud speaks of there being in this stage a quantity of 'free, floating anxiety' which becomes attached to one idea after another. We here have the beginning of the passage of the condition into a true phobia, where the fear is, so to speak, precipitated on to a given idea, and becomes localised. The general mental effect shews an alternation or a combination of over-excitation and inhibition; as a rule the former is found with slighter grades, the latter with higher grades of anxiety. For instance, the thought processes may be either hurried and agitated, one idea rapidly chasing the other, with very superficial associations between them, or there may be a blocking of them, an inhibition, so that the mind may even 'become a blank.' The various kinds of insomnia frequently met with in this affection should here be mentioned, as also the bad dreams (anxiety dreams) that almost constantly accompany it; I have elsewhere pointed out<sup>1</sup> that the nightmare is a typical symptom of the anxiety-neurosis. The fullest account of the mental state is given by Loewenfeld.<sup>2</sup>

In the genesis of anxiety most writers attach importance to mental factors. Mannhardt<sup>3</sup> says that one of the chief causes of the condition is overwork, Oppenheim<sup>4</sup> finds that in most cases grief or some psychical shock has been the provoking agent, Dagonet<sup>5</sup> traces it to a feeling of depression, which infects the mind with a sense of danger, and similar remarks will be found in most writings. So far as I know, the only

<sup>1</sup> 'On the Nightmare,' *American Journal of Insanity*, January, 1910, p. 383.

<sup>2</sup> Loewenfeld, *op. cit.*, S. 306-308, 318-330.

<sup>3</sup> Mannhardt, 'Die nervösen Angstgefühle,' S. 15.

<sup>4</sup> Oppenheim, *op. cit.*, S. 174.

<sup>5</sup> Dagonet, 'Les sentiments et les passions,' *Annal. méd.-psychol.*, 1895, t. ii, p. 5.

writer who holds an intellectualistic (ideogenous) conception of anxiety is Dubois,<sup>1</sup> who consequently believes that it can be treated by means of persuasive reasoning with the patient. He maintains that such patients shew a general mental deficiency, superstitiousness, and lack of judgement; he attributes both anxiety and phobias to 'faint-heartedness and defective logic.' This conception approximates to Janet's<sup>2</sup> less intellectualistic one of a 'lowering of the mental tension' and 'incapacity to give attention or experience emotions demanded by the circumstances,' *i.e.*, a general psychasthenia; similarly Varendonck<sup>3</sup> describes the origin of fear as a 'mode of adaption to the new.' In contradistinction from Dubois practically all other writers<sup>4</sup> point out that such patients often shew an astonishing general courage in face of real danger and difficulties, with unusually high intelligence and strong will power; many a hero of the battlefield has been overcome with extreme nervousness (*i.e.*, anxiety) on having to make an after-dinner speech, and they often remark that they would rather face the former situation than the latter; the same applies to men distinguished for moral courage. As Oppenheim<sup>5</sup> epigrammatically, but unfortunately not metaphorically, remarks, 'Der Mut kann im Grosshirn herrlich thronen, während im Bulbus die Angst gebieterisch ihre Herrschaft ausübt.' ['Courage can reign in splendour in the cerebrum while anxiousness is exercising an imperious mastery in the pons.'] Further, most observers<sup>6</sup> are agreed that the various fears and anxieties cannot be influenced by mere explaining and reasoning in the way Dubois believes; there is no question but that any success obtained by Dubois is, as Oppenheim<sup>7</sup> remarks, to be ascribed to suggestion.<sup>8</sup> In fact the patients rarely need telling that their fears are groundless; much of their distress arises from

<sup>1</sup> Dubois, 'Psychologie und Heilkunst,' *Berl. klin. Woch.*, 1909, Nr. 25. 'Zur Psychopathologie der Angstzustände,' *Ibid.*, Nr. 33. 'Pathogenese der neurasthenischen Angstzustände,' *Volkmann's Sammlung Klinischer Vorträge*, 1909.

<sup>2</sup> Janet, *op. cit.*, p. 561.

<sup>3</sup> Varendonck, 'Phobies d'enfants,' *La revue psychologique*, mars, 1910, vol. iii., p. 38.

<sup>4</sup> Cf., for instance, Janet, *op. cit.*, p. 464.

<sup>5</sup> Oppenheim, 'Zur Psychopathologie der Angstzustände,' *Berl. klin. Woch.*, Juli 12, 1909, S. 1294.

<sup>6</sup> See, for instance, Loewenfeld, *op. cit.*, S. 305.

<sup>7</sup> Oppenheim, *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xli., S. 190.

<sup>8</sup> See Chapter XVIII.

their being unable to control fears that they realise are 'foolish.' Oppenheim<sup>1</sup> puts this forcibly, when, referring to the dread of thunder, he says, 'Versuche nur, sie zu beruhigen und von der Nichtigkeit ihrer Furcht zu überzeugen. Und wenn du mit Engelszungen zu ihr sprächst und die Redekraft der Propheten besäsest, es gelingt dir nicht, sie der qualvollen Lage zu entreissen.' ['Only try to calm them and convince them of the nothingness of their fear. And though you speak to them with the tongues of angels, and possessed the oratory of the prophets, you will not succeed in detaching them from their tormenting situation.'] We shall see that the reason why morbid fears cannot be removed by appeals to the patient's conscious processes is that the cause of them does not lie there. The conscious process, *e.g.*, the idea of an approaching thunderstorm, that evokes the anxiety attack is not the *cause* of this, but only the exciting agent; it is merely a signal that acts by arousing through association the real cause, which is entirely unconscious. A view allied to Dubois's superficial conception of the genesis of these troubles is that which attributes them to implanted ideas and fearful emotions, *e.g.*, by the bogey stories of nursemaids or an erroneous religious training. This notion would hardly be worth discussing, in spite of its prevalence, were it not that in the latter instance there is a modicum of truth, there being in fact a close connection between morbid anxiety and most forms of religion. Those who trace morbid anxiety to early religious ideas, however, are guilty of a curiously simple error of logic. Because the two stand in a certain relation to each other it is inferred that one must be the cause of the other, the truth being that they are both manifestations of a common cause. To hold that an over-religious training is the cause of anxiety is like holding that the smoke of a fire is the cause of the heat it gives out.

Turning to the physical symptoms of anxiety we note the same admixture of over-excitation and inhibition phenomena as that referred to in connection with the mental symptoms. Thus one sees at one time a rapid, excited heart's action or a polypnœa, at another time a feeble pulsation with bradycardia or a bradypnœa with deep, sighing inspirations; pollakiuria may alternate with retention of urine, hunger with loss of appetite, etc. The symptoms themselves need not here be detailed, as they are well known from the writings of Freud,<sup>2</sup>

<sup>1</sup> Oppenheim, *Berl. klin. Woch.*, *loc. cit.*

<sup>2</sup> Freud, *op. cit.*

Janet,<sup>1</sup> Loewenfeld,<sup>2</sup> Mosso,<sup>3</sup> and others. They may be described with fair accuracy as excessive manifestations of the normal, physiological accompaniments of fear. They are, however, rarely developed in a uniform manner; in most cases certain manifestations stand out with great, or even almost exclusive, prominence. The most frequent regions in which this occurs are, in order, those of the precordium, the head, the sternum, and the epigastrium, the first being by far the most frequent.<sup>4</sup> In such cases the patient often actually refers his anxiety, usually under the name of 'nervousness,' to the region most concerned; in other words, he feels it to be there, just as he would in the case of a painful sensation. They sometimes very aptly put it, 'I am not at all afraid, but my stomach is.' As a rule the feeling is one of great weight and choking oppression, which may be accompanied by disagreeable paræsthesias, sometimes hardly to be distinguished from pain. Pseudo-angina is merely a symptom of precordial anxiety,<sup>5</sup> as many cases of so-called bronchial asthma are of the sternal variety.<sup>6</sup> The bodily secretions are profoundly affected, cessation of the salivary<sup>7</sup> and gastric flow, with increased pouring out of urine and sweat, being the rule. Excessive and irregular functioning of the involuntary muscle fibres takes place, which may result in a peristaltic diarrhæa, strangury, tenesmus, seminal or vaginal emissions, vasomotor constriction with coldness of the skin, etc. From this outline it will be evident that bodily processes are affected which are not at all under control of the 'will' in the ordinary sense, though it has experimentally been proved that all of them may be influenced by deeper, automatic mental processes. Ignorance of the latter fact has contributed to the opinion being formulated by many writers that the cause of anxiety

<sup>1</sup> Janet, *op. cit.*, pp. 218-231.

<sup>2</sup> Loewenfeld, *op. cit.*, S. 308-312.

Mosso, 'Fear,' English translation, 1896.

<sup>4</sup> Forster, *op. cit.*, S. 15.

<sup>5</sup> Loewenfeld, *op. cit.*, S. 309. Stekel, *op. cit.*, ch. vi.

<sup>6</sup> Loewenfeld, *loc. cit.* Stekel, *op. cit.*, ch. vii.

<sup>7</sup> The fact that the salivary flow is inhibited by anxiety is made use of in India to detect thieves. A grain of rice is put into the mouth of each suspected person, and the one in whose mouth it remains dry is held to be the culprit (Pick, *Medizinische Klinik*, 1909, No. 40). The principle of the procedure is identical with that underlying the modern examination of criminals by the word-association test, and the fallacies and limitations of the method are similar in the two cases.

states is to be sought exclusively in organic processes, other adjuvant factors strengthening this opinion being the general materialistic leanings of the medical profession, the inadequacy of the mental explanations commonly proffered, the failures of psychotherapy, and the remarkable extent and severity of the physical symptoms just mentioned.

The explanation of the pathology of anxiety on a physical basis has been, and still is, attempted along many different lines, and only a selection of the views held need be referred to. In general they may be divided into two classes: those that postulate an *undue excitability* and readiness of response on the part of the nervous centres concerned with the regulation of the visceral organs, and those that postulate an *undue excitation* of the nervous system as a result of disturbance of those organs. Of the two views the former seems at present to be the more widespread; it was maintained in two of the three papers on the subject read at the last meeting of the Society of German Neurologists. It is foreshadowed in Roller's<sup>1</sup> hypothesis of a 'functional disturbance in the medulla oblongata,' and in Luys's<sup>2</sup> opinion that there is in these cases an ischæmia of the brain. The most modern form of it is expressed by Hatschek,<sup>3</sup> who postulates a 'special excitability of the subcortical, or spinal and sympathetic, centres,' and by Oppenheim,<sup>4</sup> who speaks of a 'morbidly heightened excitability of the vasomotor-secretory-visceral nervous centres.' It need hardly be said that no evidence whatever has been adduced for this hypothesis, which remains a pure supposition. According to Oppenheim and Hatschek the *modus operandi* is that these lower nervous centres react more readily, not so much to visceral excitations, as to 'ideas and sense impressions'; there is, therefore, a relative inefficiency of the normal cortical inhibitions.

The second view was first formulated by Arndt,<sup>5</sup> who saw in an abnormal functioning of the heart the primary cause, an idea closely allied to that of Krafft-Ebing's<sup>6</sup> of an 'over-

<sup>1</sup> Roller, 'Zur Pathologie der Angst,' *Allg. Zeitschr. f. Psychiatrie*, 1880, Bd. xxxvi., S. 149.

<sup>2</sup> Luys, 'Traité clinique et pratique des maladies mentales,' 1881, p. 496.

<sup>3</sup> Hatschek, 'Zur vergleichenden Psychologie des Angstafektes,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xli., S. 211.

<sup>4</sup> Oppenheim, *Deutsche Zeitschr.*, *op. cit.*, S. 187.

<sup>5</sup> Arndt, *Allg. Zeitschr. f. Psychiatrie*, 1874, Bd. xxx., S. 89.

<sup>6</sup> Krafft-Ebing, *Lehrbuch der Psychiatrie*, 1890, S. 141.

excitability of the vasomotor nerves of the heart with consequent vascular constriction.' Ball<sup>1</sup> speaks of 'reflex impulses that arise in the internal organs and are conveyed by way of the sympathetic,' and Régis<sup>2</sup> sees in cœnæsthesic troubles the starting-point of the disorder. It is little wonder that, in view of these conceptions, Mannhardt<sup>3</sup> has proclaimed massage over the solar plexus to be a sovereign remedy for the trouble. Hoche<sup>4</sup> also definitely regards it as essentially of physical origin. He states that it may arise in two ways, as the result either of reflex irritation or of poisoning (mostly with carbon dioxide); of these the latter is, according to him, considerably the more frequent. It is of interest in this connection that Freud also thinks that the first anxiety attack—that occurring during the act of birth, and of which, according to Freud, all subsequent attacks are but repetitions—was of toxic origin, due to the accumulation of carbon dioxide in the blood.<sup>5</sup> Meynert's<sup>6</sup> hypothesis is a combination of these two sets of views; he supposes a 'dyspnœic nutritional state of the cortex, the result of vaso-constriction produced by excitation of the vasomotor cortical centres.'

Plainly the views just mentioned arise through attention being especially directed to the physical symptoms of the anxiety syndrome. If there were no other symptoms to be accounted for, the inadequacy of these views would not be so evident, but it cannot be disguised as soon as we begin to apply them to the mental symptoms. These are supposed essentially to consist in the apprehending of disagreeable physical sensations, a conception practically identical with that underlying the James-Lange hypothesis of the emotions. It is hardly possible satisfactorily to discuss the views in question without first considering in detail this hypothesis. This, however, cannot be done in the space at my disposal, and I propose to avoid the difficulty by assuming that the criticisms of numerous psychologists—Lipps, Wundt, etc.—have been effectual, so that at the present day the hypothesis is no longer tenable, at all events in its original form. I would only remark that in my opinion the purely clinical

<sup>1</sup> Ball, 'Leçons sur les maladies mentales,' 1890, p. 178.

<sup>2</sup> Régis, 'Précis de Psychiatrie,' 1906, 3<sup>e</sup> éd., p. 251, etc.

<sup>3</sup> Mannhardt, *op. cit.*, S. 16.

<sup>4</sup> Hoche, *op. cit.*, S. 196, 200.

<sup>5</sup> Freud, 'Vorlesungen,' etc., *op. cit.*, S. 461.

<sup>6</sup> Meynert, 'Psychiatrie, Klinik der Erkrankungen des Vorderhirns,' 1884.

study of anxiety states affords weighty evidence against the probability of the hypothesis. Janet<sup>1</sup> has commented on the obvious objection that, in the case of various organic diseases, e.g., *morbus cordis*, the physical manifestations characteristic of the anxiety syndrome may occur in an even more severe degree than here without being followed by any anxiety,<sup>2</sup> and Loewenfeld<sup>3</sup> has pointed out that the occurrence of the abortive anxiety attacks, i.e., pronounced physical manifestations with little or no anxiety, stands in direct conflict with the James-Lange hypothesis. Indeed, writing on the subject of fear, Stanley Hall<sup>4</sup> goes so far as to say, 'What problem could better illustrate the crude scholastic stage of the contemporary psychology of feeling and emotion than the elaborate recent discussions of the problem whether they are the results of tension of muscles, vessel walls, etc., or (whether) the latter are primal and causative?'

An escape from the deadlock in regard to the question of 'physical or mental' has been sought by endeavouring to state the problem in terms of biology. Biologically fear must be regarded as being a protective mechanism, a defensive reaction against anticipated harm, and Stanley Hall,<sup>5</sup> developing a suggestion of H. M. Stanley, has very plausibly argued that even in man it fulfils many beneficial functions. In a later study he writes:<sup>6</sup> 'The protensive or futuristic attitude or orientation toward a pejorative state is the specific *quale* of the psychic condition called fear. . . . Fear is thus the chief paradigm of psychic prolepsis as well as the chief spur of psychic evolution.' It is interesting to recall that with morbid anxiety the anticipatory dread of impending harm or danger, of pain in the broadest sense of the term, is a constant and characteristic feature, and this fact, therefore, should not be lost sight of when discussing the pathology of the emotion; in regarding anxiety from this point of view it is not necessary, however, to agree with Forster that it is possible to trace it to

<sup>1</sup> Janet, *op. cit.*, p. 463.

<sup>2</sup> The reason why anxiety sometimes occurs in these cases will be pointed out later.

<sup>3</sup> Loewenfeld, *op. cit.*, S. 314.

<sup>4</sup> Stanley Hall, 'A Study of Fears,' *American Journal of Psychology*, January, 1897, p. 241.

<sup>5</sup> *Ibid.*, *op. cit.*, pp. 242, 243.

<sup>6</sup> *Ibid.*, 'A Synthetic Genetic Study of Fears,' *American Journal of Psychology*, April, 1914, p. 149.



older memories of bodily pain or that the physical manifestations are nothing but reflexes evoked by the pain sense.<sup>1</sup>

It was Darwin<sup>2</sup> who first expressed the thought that perhaps the tendency to fear certain objects is inherited from past generations. Stanley Hall<sup>3</sup> has elaborated this suggestion to explain why fear arises in certain situations of life, under certain circumstances, in connection with certain ideas, etc., and recently Hatschek<sup>4</sup> has also laid stress on the atavistic nature of morbid anxiety. No one can doubt that this is a very valuable point of view, and unquestionably true so far as the predisposition, the capacity of fearing, is concerned; the tendency to fear must in other words be regarded as a true inherited instinct. But when it comes to explaining by the same atavistic hypothesis the fear of certain objects, the anxiety under certain circumstances, serious, and in my opinion insuperable, objections can be raised. In the first place inherited habits, whether mental or physical, are characterised by stereotyped behaviour, by regularly occurring under similar circumstances, and so on. Anxiety and fear, on the other hand, as King<sup>5</sup> has pointed out in this connection, shew just the opposite features to this, varying remarkably in intensity and in regard to the kind of situation that evokes them, and being in many cases very difficult to predict the occurrence of even in the same person. Then, again, the conception that certain ideas or memory contents can be directly inherited is not supported by any evidence, and is quite foreign to our experience of child development.<sup>6</sup>

The results of the discussion up to the present may be summarised in the following three statements: (1) As the condition frequently occurs when the bodily health is, so far as can be determined, otherwise perfect, there is no evidence in support of the views either that the nervous centres are in a state of primary over-excitability or that abnormal irritative impulses are arising in any pathologically altered visceral

<sup>1</sup> Förster, *op. cit.*, S. 13-15.

<sup>2</sup> Darwin, 'The Expression of the Emotions in Man and Animals,' Pop. Ed., 1904, p. 40.

<sup>3</sup> Stanley Hall, 1897, *op. cit.*, pp. 244-248.

<sup>4</sup> Hatschek, *op. cit.*, S. 210.

<sup>5</sup> King, 'The Psychology of Child Development,' 2nd edition, 1906, p. 56.

<sup>6</sup> The distinction between inherited mental activities and acquired mental contents has been sharply drawn, and the subject strikingly developed, by Otto Gross, 'Ueber psychopathische Minderwertigkeiten,' 1909, S. 15, etc.

organs. (2) Morbid anxiety and its physical accompaniments are essentially an exaggerated manifestation of a normal biological instinctive activity, the function of which is to protect the organism against pain (in the wide sense). (3) As the outburst of anxiety frequently takes place as a reaction to trivial occasions, which in the normal give rise to little or no anxiety, and also occurs quite spontaneously, independently of any ascertainable external cause, it follows that the external agents (including here also ideas of danger, etc.) cannot be regarded as the true cause of the anxiety, but at most as evoking factors. We have further noted the difficulty, which theoretically indeed amounts to an impossibility, of explaining the condition by either an exclusively 'mental' or an exclusively 'physical' hypothesis, and should be prepared to give the preference to any explanation that accounts equally for the mental and physical symptoms. Before formulating a unitary explanation of this kind, however, it will first be necessary briefly to separate again these two classes.

Further light on the mental aspect is obtained by a study of the psychogenesis of phobias—*i.e.*, conditions in which outbursts of anxiety are more or less successfully guarded against by the building up of specific, protective fears. The subject itself does not properly belong to the present discussion, so that I will only shortly state two conclusions which are invariably reached whenever a psycho-analysis of a phobia is made. (1) Morbid fears of external objects or situations are projections of fears on to the outside that arise in relation to internal mental processes. This process of projection, as is well known, is very common in everyday life. To give a simple example: A business man, whose affairs were financially unsound, heard a harmlessly meant reference to the finance of his business made by a friend, and immediately began to defend this with unnecessary heat; he had projected his inner feeling of reproach on to his friend, and read into the latter's words a meaning that was not intended. *Qui s'excuse s'accuse*. In dementia præcox, as Freud,<sup>1</sup> Jung,<sup>2</sup> and Maeder<sup>3</sup> have shewn, the process is remarkably frequent. The following is an

<sup>1</sup> Freud, 'Weitere Bemerkungen über die Abwehr-Neuropsychosen,' *Neurol. Centralb.*, 1896, S. 447. Reprinted in 'Sammlung,' etc., S. 132.

<sup>2</sup> Jung, 'Ueber die Psychologie der Dementia Præcox,' 1907.

<sup>3</sup> Maeder, 'Psychologische Untersuchungen an Dementia-præcox Kranken,' *Jahrbuch der Psychoanalyse*, Jahrg. ii., S. 237.

instance of it in the present connection: One of my women patients had a phobia of flower seeds, and this had arisen as a defence reaction against certain internal temptations relating to 'seed' of another kind. (2) Morbid fears are the external expression of internal wishes. It is plain that every fear is but the obverse of a wish—*e.g.*, a wish that the feared event may not happen. Two opposite mental processes are always closely associated with each other, so that it is not surprising that in psycho-analysis one finds fear to be intimately connected with desire; this becomes especially comprehensible when one recollects the fact, familiar in daily life to every one, that the readiest way of disguising a thought is to replace it by its opposite. The essential association between desire and anxiety is indeed demonstrated by the linguistics of the very word in question, for we speak of being anxious (desirous) to meet some one just as we do of being anxious (apprehensive) about the outcome of some event. This is, however, far from being the only mechanism at work in the construction of a phobia. The fear has morbid features only when the underlying wish is of a repressed kind, so that the phobia replaces this in consciousness. A simple illustration of the process is afforded by the case of a patient of mine whose child was the only obstacle that stood in the way of a divorce and a prospectively happy remarriage; she suffered intensely from the continuous dread that her child might in some way die, and had great difficulty in admitting to herself the possibility that she might have harboured a corresponding wish.

Returning now to the physical aspects of the problem, we have seen that practically all writers on the subject are agreed in reducing the matter to a question of over-excitation of the nervous centres. Whether this over-excitation is a relative one, due to the action of normal stimuli on over-excitable centres, or an absolute one, due to the action of pathological stimuli on normal centres (the two 'physical' views discussed above) is irrelevant to the main point; the failure to discover a source for pathological stimuli has led most writers to predicate the former supposition. This failure, however, may have been due to the search having been directed solely to *pathological* stimuli, the possibility of abnormally strong *physiological* ones being overlooked. Janet<sup>1</sup> has stated the problem at this stage very justly: 'En deuxième lieu l'angoisse

<sup>1</sup> Janet, *op. cit.*, p. 561.

contient des sensations de troubles organiques, ceux-ci nous apparaissent comme le résultat d'une décharge intéressante les appareils des fonctions organiques. Cette décharge est en rapport avec une fuite du courant inutilisé par les phénomènes supérieurs. Des fuites de ce genre sont nombreuses: un exemple bien frappant nous est donné par l'excitation génitale et la masturbation.<sup>1</sup> In other words everything seems to point to the symptoms being an *aberrant* discharge of excitations or impulses that cannot find their suitable outlet, or, as I have elsewhere<sup>2</sup> expressed it, an excessive afferent excitation with deficient efferent outflow. Freud,<sup>3</sup> agreeing with other writers up to this point, solved the difficulty by shewing that the abnormally directed impulses were not, as had been thought, of a pathological nature, but were physiological sexual impulses that were not finding a suitable outlet. Although Freud arrived at this conclusion quite empirically as a result of clinical experience, it would seem as though a *a priori* reasoning, if logically carried through, could lead to no other result, especially in view of such considerations as the failure to find any source of pathological stimuli, the plain hint of a biological solution in relation to one of the inherited instincts, the nature of fear as being a defensive function, and so on. However, conclusions are apt to seem easy once they have been pointed out; *c'est le premier pas qui coûte*.

If one now tries to formulate Freud's conclusion in general terms, it would run somewhat as follows: *Under certain circumstances, which will presently be mentioned, sexual excitations arise that cannot follow their natural course of leading to either physical gratification or conscious desire for such; being deflected from their aim they manifest themselves mentally as morbid anxiety, physically as the bodily accompaniments of this.* The circumstances in question may be of either a physical or mental nature, usually there being a combination of both; in both cases a state of tension due to physical over-excitation results from the unsatisfactory functioning of an important organic system. It is impossible to enumerate here more than a few of them; for further details Freud's writings must be consulted. The physical ones are conditions which cause sexual excitation without satisfactory gratification, such as the over-arduous

<sup>1</sup> He then relates some interesting examples of the kind.

<sup>2</sup> Chapter XXI., p. 390.

<sup>3</sup> Freud, 'Ueber die Berechtigung,' etc., *op. cit.*

embraces of engaged couples, coitus interruptus (probably the most frequent cause), abrupt introduction of girls or women to gross sexual experiences, disproportion between desire and potency, and in certain circumstances, particularly when previous indulgence is suddenly given up, sexual abstinence.<sup>1</sup> Freud<sup>2</sup> has pointed out the resemblance of the physical accompaniments of anxiety states to those of the sexual act (rapid heart's action, hurried breathing, sweating, dry mouth, peristaltic contraction of involuntary muscles, etc.). The mental conditions are those that lead, by means of repression, to unconscious fixation of important components of sexual desire, so that they cannot reach consciousness; such are infantile conflicts arising during the normal suppression of perverse tendencies or incestuous attractions. A consideration of great practical significance is that such fixations may render the person incapable of obtaining gratification even though regularly exercising sexual relations; the case is then one of anxiety-hysteria.<sup>3</sup> Morbid anxiety is commonly described by Freudians as being derived from repressed sexuality. While this is clinically true, it is psychologically perhaps more accurate to describe it as a reaction against repressed sexuality, a reaction derived from the instinct of fear. The following remark of Bacon's is very applicable in this connection: 'We know diseases of stoppings and suffocations are the most dangerous in the body; and it is not much otherwise in the minde.' Desire that can find no direct expression is 'introverted,' and the dread that arises is really the patient's dread of an outburst of his own buried desire.<sup>4</sup> In other words, morbid anxiety subserves the same biological function as normal fear, in that it protects the organism against mental processes of which it is afraid.<sup>5</sup> It has a further biological

<sup>1</sup> This term is here used in its strict sense, as defined by H. v. Müller (*Sexual-Probleme*, 1909, S. 309), as meaning abstinence from physical gratification of the type of sexuality characteristic of the person concerned. Thus a person whose main sexuality is of a perverse type is abstinent even though exercising normal intercourse, while a normal person is abstinent even if he masturbates daily.

<sup>2</sup> Freud, 'Sammlung,' *op. cit.*, S. 81.

<sup>3</sup> See Chapter XXVIII.

<sup>4</sup> Typified in the common fear of becoming insane—*i.e.*, of losing control of oneself.

<sup>5</sup> This conclusion could not be more succinctly put than in John Hunter's remark, which has been neglected for over a century, 'Anxiety is expressive of the union of two passions, desire and fear.'

root in being an exaggeration of the normal feminine apprehension of sexuality, and is thus a form of masochism. The biological instincts of fear and sex are indeed intimately intertwined throughout their whole evolution, a chapter which demands a special exposition in itself.

I wish to lay stress on the fact that, at least so far as the somatic anxiety neurosis is concerned, the conclusion just enunciated is not a matter of psycho-analysis, so that it can at any time be tested by means of direct clinical investigation. Indeed, it has been extensively confirmed by a number of observers who are either firmly opposed to psycho-analysis or else indifferent towards it; their unbiassed testimony is therefore of especial interest. A few writers, on the other hand, admit the facts, but deny the conclusion. Janet,<sup>1</sup> for instance, says: 'Si on peut avoir des renseignements, des aveux dans la vie sexuelle des malades, on voit qu'elle est presque toujours troublée et qu'elle est bien troublée en effet dans le sens qu'indique Freud. . . . J'admets donc le fait signalé par M. Freud, mais je crois qu'il faut l'interpréter.'<sup>2</sup> He then discusses the lack of gratification obtained by such patients, evidently cases of psychical impotence, but considers this failure to be merely a manifestation of their general psychasthenic defect.<sup>3</sup> Psycho-analysis shews, however, that these defects, like all 'psychasthenic' ones, are the result of specific disturbances in the early development of the psycho-sexual life, and clinical observation shews that when the defects concern the sexual function itself, as in Janet's cases of impotence, the physical tension that results secondarily leads to an anxiety neurosis; there is in fact a vicious circle in the pathology. The objections raised by other authors are more superficial and have been fully met by Freud, both in his original paper and in a later one;<sup>4</sup> to answer them here would be merely to repeat Freud's words. Many consist of nothing but irrelevancies; thus, the only reason Oppenheim<sup>5</sup> gives for not accepting Freud's theory of the anxiety neurosis—a matter which has nothing to do with psycho-analysis—is that he cannot agree with Stekel's interpretations of dream symbolisms. Freud's observations and conclusions have been

<sup>1</sup> Janet, *op. cit.*, p. 622.

<sup>2</sup> *I.e.*, explain it away.

<sup>3</sup> Janet, *op. cit.*, pp. 562, 623.

<sup>4</sup> Freud, 'Zur Kritik der "Angstneurose," ' 'Sammlung,' *op. cit.*, S. 94.

<sup>5</sup> Oppenheim, *op. cit.*, S. 180.

confirmed, quite apart from psycho-analysis, by Gattel,<sup>1</sup> Kish,<sup>2</sup> Strohmayer,<sup>3</sup> Tournier,<sup>4</sup> Tschisch,<sup>5</sup> and others. Loewenfeld,<sup>6</sup> for instance, writes: 'Die Libidoerregung kann aber auch und zwar unabhängig vom Willen des Individuums Wege einschlagen und Erscheinungen produzieren, die wir als pathologisch betrachten müssen. Das wichtigste hierher gehörige Phänomen ist das Auftreten von Angstzuständen im Gefolge sexueller Abstinenz und analoger Verhältnisse. Hierbei handelt es sich um ein andauerndes oder periodisches Abströmen eines Erregungsquantums von den kortikalen Geschlechtssinnzentren nach den bei dem Angstzustand beteiligten kortikalen und subkortikalen (bulbaren) Apparaten.' [Sexual excitation can, however, and independently of the person's will, enter paths and produce occurrences that we must consider as pathological. The most important phenomenon in this connection is the appearance of anxiety states in consequence of sexual abstinence and analogous circumstances. Here it is a question of a lasting or periodic flowing of a sum of excitation from the cortical sense centres of sex-towards the cortical and subcortical (bulbar) apparatus that is concerned in the anxiety state.] A great number of writers have published their experience of disorders resulting from sexual abstinence that are plainly symptoms of the anxiety neurosis; I need only refer to Erb,<sup>7</sup> Féré,<sup>8</sup> Gyurkowechky,<sup>9</sup> Kafemann,<sup>10</sup> Krafft-Ebing,<sup>11</sup> Loewenfeld,<sup>12</sup>

<sup>1</sup> Gattel, 'Ueber die sexuellen Ursachen der Neurasthenie und Angst-neurose,' 1898.

<sup>2</sup> Kish, 'Névrose cardiaque d'origine sexuelle chez la femme,' 1897.

<sup>3</sup> Strohmayer, 'Ueber die ursächlichen Beziehungen der Sexualität zu Angst- und Zwangs-zuständen,' *Journ. f. Psychol. u. Neur.*, December, 1908, Bd. xii., S. 69.

<sup>4</sup> Tournier, 'Essai de classification étiologique des névroses,' *Arch. d'anthropologie criminelle*, 15 janvier, 1900.

<sup>5</sup> Tschisch, Sixth Congress of the Society of Russian Physicians, 1896.

<sup>6</sup> Loewenfeld, 'Ueber die sexuelle Konstitution,' 1911, S. 217.

<sup>7</sup> Erb, 'Bemerkungen über die Folgen der sexuellen Abstinenz,' *Zeitschr. f. Bekämpfung d. Geschlechtskr.*, 1910.

<sup>8</sup> Féré, 'L'instinct sexuel,' 1899.

<sup>9</sup> Gyurkowechky, 'Pathologie und Therapie der männlichen Impotenz,' 1897.

<sup>10</sup> Kafemann, 'Die Sexualhygiene des Mannes in Beziehung auf ansteckende Krankheiten und funktionelle Störungen,' *Sexual-Probleme*, 1907, S. 97 u. 194.

<sup>11</sup> Krafft-Ebing, 'Ueber Neurosen und Psychosen durch Abstinenz,' *Jahrb. f. Psychiatrie u. Neur.*, 1889, Bd. viii., S. 1.

<sup>12</sup> Loewenfeld, 'Die psychische Zwangerscheinungen,' 1904, S. 358, and *Sexualleben und Nervenleiden*, 4<sup>o</sup> Aufl., 1906, ch. vi. and vii., esp. S. 264.

Marcuse,<sup>1</sup> Neisser,<sup>2</sup> Nyström,<sup>3</sup> Porosz,<sup>4</sup> Runge,<sup>5</sup> and Rutgers.<sup>6</sup> This mass of work cannot be ignored by any one whose discussion of the subject is to be taken seriously.

An interesting indirect confirmation of the truth of Freud's conclusion has lately been afforded through Herz, of Vienna. In a book<sup>7</sup> devoted to the subject, and in a number of articles,<sup>8</sup> he proclaimed the discovery of a special form of cardiac neurosis, to which he gave the name of 'sexual psychogenic cardiac neurosis—phrenocardia,' because the essential cause of it consists in lack of sexual gratification. The nosology and sexual aetiology of this phrenocardia has been confirmed by Erb,<sup>9</sup> Romberg,<sup>10</sup> Rumpf,<sup>11</sup> and others; the general importance of sexual disturbances for the pathogenesis of cardiac neuroses has also been emphasised by Curschmann,<sup>12</sup> Hoffmann,<sup>13</sup> and Treupel.<sup>14</sup> Now, although Herz does not mention Freud at all, it is apparent to any one who has read Freud's papers published in 1895 that phrenocardia is identical with the cardiac symptoms of anxiety neurosis there fully described;

<sup>1</sup> Marcuse, 'Die Gefahren der sexuellen Abstinenz für die Gesundheit,' *Zeitsch. f. Bekämpfung der Geschlechtskr.*, 1910, Bd. xi., Heft 3. Also published in brochure form.

<sup>2</sup> Neisser, *Mittheilungen der Deutsche Gesell. f. Beh. d. Geschlechtskr.*, 1904, S. 10.

<sup>3</sup> Nyström, 'Des Geschlechtsleben und seine Gesetze,' 1904; 'Die Einwirkung der sexuellen Abstinenz auf die Gesundheit,' *Sexual-Probleme*, 1908, S. 398.

<sup>4</sup> Porosz, 'Ueber das Wesen der sexuellen Neurasthenie,' *Monatsschr. f. prakt. Dermatol.*, 1903.

<sup>5</sup> Runge, 'Das Weib in seiner geschlechtlichen Eigenart,' 1900.

<sup>6</sup> Rutgers, 'Sexuelle Abstinenz und Lebensenergie,' *Die Neue Generation*, 1900, S. 271.

<sup>7</sup> Herz, 'Die sexuelle psychogene Herzneurose (Phrenokardie),' 1909.

<sup>8</sup> *Ibid.*, 'Seufzerkrampf,' *Wien. klin. Woch.*, 1909, No. 39. 'Die Herzneurosen,' *Die Heilkunde*, 1910, No. 1. 'Ueber die psychischen Behandlung von Herzkranken,' *Wien. klin. Rundsch.*, 1910, S. 75, etc.

<sup>9</sup> Erb, *Monatsschr. f. Psychiatr. u. Neur.*, August, 1909, Bd. xxvi., S. 170 and *Münch. Med. Woch.*, 1909, Nr. 22.

<sup>10</sup> Romberg, 'Die Lehre von den Herzneurosen,' *Deutsche Zeitschr. f. Nervenheilk.*, 1910, Bd. xxxviii., S. 185.

<sup>11</sup> Rumpf, 'Zur Diagnose und Behandlung der Herz und Gefäßneurosen,' *Deutsche Med. Woch.*, 1910, S. 1305 u. 1353.

<sup>12</sup> Curschmann, 'Ueber Angina Pectoris vasomotoria,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xxxviii., S. 216.

<sup>13</sup> Hoffmann, 'Die Lehre von den Herzneurosen,' *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xxxviii., S. 207.

<sup>14</sup> Treupel, *Deutsche Zeitschr. f. Nervenheilk.*, Bd. xxxviii., S. 228.



indeed, Stekel<sup>1</sup> had, in 1908, devoted to the subject a special chapter of his book.<sup>2</sup>

I have not cited the writings of any members of the Freud school in support of the conclusions here maintained, but need hardly say that their experience is unanimously in favour of them. Indeed, to any one who has carried out psycho-analysis it is an obvious truism that morbid anxiety is but another expression for unsatisfied sexuality, a truism that is confirmed anew in every case studied. I will only refer to the hundred cases narrated by Stekel<sup>3</sup> in a book that gives an excellently full account of the clinical and therapeutic aspects of the different varieties of anxiety states.

Only two analyses of cases of anxiety states have been published in English,<sup>4</sup> by Jung<sup>5</sup> and Brill<sup>6</sup> respectively. I have space here to record only a condensed abstract of a third one, chosen, out of a considerable number, because of several interesting features. It represented an unusually pure form inasmuch as the anxiety had remained undiminished in intensity for some years, and was further striking in that the localisation of the physical symptoms was strongly determined by mental factors.

The patient was a lady, aged forty-six, who had been brought up amid well-to-do and refined surroundings. Her education had been fairly good, and her chief interest, apart from the usual social ones, lay in music, particularly in piano music. There was no history of nervous trouble in any other

<sup>1</sup> Stekel, *op. cit.*, ch. vi.

<sup>2</sup> This unblushing plagiarism of Herz's has been followed by another on the part of De Fleury (*Bull. de l'acad. de méd.*, December 21, 1909), Church (*Journ. of the Amer. Med. Assoc.*, July 23, 1910), and Mendel (*Neurol. Centralbl.*, Oktober. 16, 1910), who have independently of one another discovered a 'male climacteric,' also described years ago by Freud as part of the anxiety neurosis. Church and Mendel consider it to be due to regressive changes in the sexual organs. Yet another instance is that of Oppenheim (*Neurol. Centralbl.*, 1911, S. 290), who has described under the name of 'Dauerschwindel' a syndrome recognised by Freud in his original paper as a typical constituent of the anxiety-neurosis; Oppenheim has the hardihood to write that he has searched the literature in vain for any reference to the condition.

<sup>3</sup> Stekel, *op. cit.*

<sup>4</sup> *I.e.*, when this paper was delivered, of course; it is not necessary to enumerate the many cases published since then; see, for instance, Frink's 'Morbid Fears and Compulsions,' 1918.

<sup>5</sup> Jung, 'The Association Method,' *American Journal of Psychology*, April, 1910, p. 252.

<sup>6</sup> A. A. Brill, 'The Anxiety-Neuroses,' *Journal of Abnormal Psychology*, June-July, 1910, p. 60.

member of the family. She had married at the age of thirty-five, had borne two children, and had enjoyed a happy married life; seven years later her husband died suddenly. She herself had had no illness or nervousness until the age of twenty-six, when an attack of influenza left her with chronic indigestion. When this was bad it was accompanied with some slight general nervousness, but neither seriously inconvenienced her until the onset of her present trouble. This occurred eight months after her husband's death, and took the form of a severe 'breakdown' which confined her to bed for several months, and from which she had never recovered. In the past four years her condition had varied somewhat from time to time, but for two months previous to my seeing her she had again been confined to bed. Her symptoms were as follows: In the region of the stomach was a sensation of discomfort and distension, with some nausea and flatulence. Accompanying this, and largely situated there, was a feeling of extreme 'nervousness' and agitation. Mentally there was great restless anxiety, with a sense of uncontrollable dread at some unknown impending terror. Physically the attack was characterised by violent trembling of the whole body, especially of the limbs, hurried breathing, excited and irregular heart's action, and profuse cold sweating. She suffered continuously to some extent from these symptoms, being never quite free of them, but they were much worse during the attacks, which lasted for several hours, and occurred daily in the early morning; on this account she could never sleep after about two in the morning. No evidence of any organic gastric affection had ever been made out, though diligent search had been made (internal measurements of the stomach, analysis of the contents, etc.). Careful treatment, chiefly directed towards the stomach condition but also of a psychotherapeutic nature, had been carried on throughout her illness, but without any avail. Weir Mitchell treatment, as is so often the case with such patients, had only made her condition worse, and had had to be given up after a six weeks' attempt.

Such were the main facts elicited by an ordinary medical inquiry. No doubt the condition would, as a rule, have been interpreted as being due to a severe grief occurring to a patient who was subject to chronic 'functional dyspepsia,' a sequel of influenza. Oppenheim<sup>1</sup> states that grief and mental shock

<sup>1</sup> Oppenheim, *op. cit.*, S. 179.

are such satisfactory explanations of the aetiology of anxiety states that it is not necessary to search for repressed sexual complexes. The presence and activity of such complexes, however, is not affected by ignoring them, whereas they can be robbed of their power for harm by introducing them into consciousness. In the present case the effect of so doing was that after a month's treatment the patient was sleeping regularly throughout the night, after another month she was once more able to take up with enjoyment the social duties she had had to neglect for the past four years, and after a third month the symptoms were practically at an end.

The first important step in obtaining a sexual history was when the patient, under a display of shame and remorse as painful as I have ever witnessed, confessed that from the age of twelve up to the present time she had lived through an almost continuous struggle against masturbation; she had kept her guilty secret from her mother, her husband, and every doctor who had treated her. With a partly correct intuition she interpreted her anxiety symptoms as a dread against once more succumbing to the temptation, which had naturally been greater since the cessation of marital relations. In fact the 'nervous breakdown,' eight months after her husband's death, had been preceded the month before by a temporary relapse in this direction.

Such intense shame and remorse is rarely seen as a reaction against ordinary masturbation beginning at the age of puberty; as a rule it has deeper sources, being formed, for instance, as a reaction against infantile auto-erotic tendencies, which have been repressed in the unconscious, and to which the later habit has become unconsciously associated. Liberation of these unconscious complexes causes the reaction to assume more normal proportions, and this is followed by a diminution in the force of the remaining temptation; these fortunate results followed the usual rule in the present case. The memories of the earlier auto-erotic activities were brought to consciousness by means of psycho-analysis, mainly of dreams.<sup>1</sup> They concerned both phantasies and onanistic acts relating to the urethra and the two alimentary orifices, with the corresponding excretions. Bed-wetting, continued almost nightly up to the age of thirteen, had acquired the significance of a nocturnal pollution, as, indeed, it frequently does. It had

<sup>1</sup> One is recorded in Chapter XII., p. 266.

caused her great embarrassment and shame, for it so happened that it affected her social life in a considerable measure. On account of it she was not allowed to drink anything after three in the afternoon, a restriction she evaded by guiltily stealing forbidden drinks; as a radiation of the corresponding affect she acquired a fondness for glycerine, vinegar, and whisky. At the age of three and a half a baby sister was born, and her imagination, excited by the event, subsequently elaborated the following explanation of it: Children grew inside the body, and were evidently formed out of food; they entered the world through the only possible orifice, the anus. The food was stimulated to this activity through admixture with some fluid (analogy of urine and fæces; later, watering and manuring of vegetation). This fluid was supplied by the doctor, was therefore some special kind of medicine that had to be swallowed. She acquired a 'fascination' for medicines, and throughout her childhood days drank all she could obtain. In later years she had a pronounced loathing for medicinal fluids that had features at all resembling semen, for instance, buttermilk, flax-seed emulsion, and koumiss, all of which were forced on her with the aim of bettering the stomach condition.

As she grew older and buried all memory of these tendencies by repression they manifested themselves in partly sublimated and partly reactive activities; for instance, the habits of finger-sucking and nail-biting (both of which were preserved through adult years), of biting and eating slate pencils, revelling in the making of sand pies, of mixing earth and water in a pot to make flowers grow (which was followed later by a passionate delight in flowers and in gardening), of manufacturing cold cream, cakes of soap, etc., and later in a fastidious abhorrence of dirt or untidiness in any form. She managed to prevent the creation of any neurosis, as a compromise formation on the part of the complexes, until she was twenty-six, when she had the attack of influenza. At this time she was severely disappointed in a love-affair on which she had built many hopes; simultaneously it was decided, on account of bad wrist trouble, that she must for ever give up the practice of piano playing. The latter had served as an outlet for much of her emotional life, partly through the æsthetic pleasure of music, partly because, as is often the case, it was unconsciously associated with the act of masturbation, and was serving as

a sublimated vent for this tendency. Her adult emotional (psychosexual) outlets and aspirations being thus violently checked, she was thrown back on the infantile forms, on the basis of which was constructed the neurosis. The first symptom of this was distressing nausea occasioned by the medical administration of whisky, which was in many ways—one was mentioned above—associated with the infantile complexes. The various gastric symptoms, nausea, distension, flatulency, pain, etc., were individually psychically constellated, and were products of the infantile forms of her sexual life. Her heterosexual tendencies became fully awakened in marriage, and the renouncement of them was followed by a still more stormy return to old conflicts, with the outburst of the graver stage of the neurosis.

In this case we see the early stages of a tendency to phobia formation, to which the neurosis did not actually lead. Many phobias of edible substances, or of objects resembling these, are but elaborations of a basis similar to that just described. The case illustrates one of the ways in which anxiety symptoms may become localised in one or other system of organs. Another way is through the presence of actual organic disease. I have observed, for instance, that cardiac symptoms are pronounced when an anxiety condition supervenes on a case of heart disease more frequently than when it occurs alone; even in such instances, however, psychical factors generally play a part in determining the localisation. The basis for the production of an anxiety-hysteria is so common that even when, as in the case just described, they have previously remained latent, the altered mode of life—*e.g.*, sexual abstinence, caused by an organic disease, particularly heart disease—may provoke the first outbreak of a neurosis; this is the reason why anxiety symptoms are far from being a rare complication in chronic cases of, for instance, heart disease.

Attention carefully directed to the study of anxiety states has shewn that they are a great deal commoner than is generally supposed, the significance of the symptoms being often overlooked through clinical ignorance. Psycho-analytic research has further made it highly probable that many kinds and degrees of fear that pass for normal—*e.g.*, fear of fire, of mice, etc.—take their origin in unconscious complexes and are psychologically as 'abnormal' as any phobia. If one reads the description of fears amongst normal people, such as these

collected by Binet,<sup>1</sup> Calkins,<sup>2</sup> Stanley Hall,<sup>3</sup> and Varendonck,<sup>4</sup> the analogy between them and hysterical phobias inevitably forces itself on one. It is assuring to reflect that much of the fear, and anxiety, that bulks so large in the sum of human distress, even amongst the so-called normal, is entirely avoidable, and will one day be prevented when psycho-analytic experience is more widely recognised.

The conclusions thus reached can be condensed into the statement that *morbid anxiety means unsatisfied love*. That already the Greeks had an intuition of the close connection between these two instincts is indicated by their belief that Phobos and Deimos, the gods of Fear, were born of Aphrodite, the goddess of Love. And could this connection be more exquisitely depicted than it is in their (and the world's) greatest woman poet, Sappho? 'For when I look even for a moment on thee, no voice comes any more, but my tongue fails utterly and a soft glow at once spreads over my face, and I see no more with my eyes, and my ears are filled with sounds, and the sweat pours down, and trembling seizeth all my body, and I am more pallid than grass, and am so distraught that I seem nigh unto death itself.'

<sup>1</sup> Binet, 'La peur chez les enfants,' *L'Année psychol.*, 1895, pp. 223-254.

<sup>2</sup> Calkins, 'The Emotional Life of Children,' *Pedagog. Seminary*, vol. iii., pp. 319-323.

<sup>3</sup> Stanley Hall, 1897, *op. cit.*, pp. 147-249, and 1914, pp. 149-200, 321-392.

<sup>4</sup> Varendonck, *op. cit.*, pp. 5-45.

## CHAPTER XXVIII

### THE RELATION BETWEEN THE ANXIETY NEUROSIS AND ANXIETY-HYSTERIA<sup>1</sup>

As is well known, the views of Freud and his school have in the past few years undergone a continuous development in regard to the problem of morbid anxiety, as well as in regard to other problems. The object of this communication is to define, so far as a single member of the school may do so, the present attitude towards this subject and to attempt to render more precise the relations between the conceptions of the anxiety neurosis and anxiety-hysteria.

The progress in our knowledge of anxiety states may be represented in three stages, which can briefly be described as follows: In 1895 Freud separated from neurasthenia a clinical group to which he gave the name 'anxiety neurosis,' and which comprises the characteristic symptoms, both physical and psychical, that are now well known.<sup>2</sup> The causes of this syndrome he found to be not psychical, but physical factors, consisting of incomplete satisfaction of physico-sexual needs under circumstances when these are excited; typical causative situations are those such as repeated coitus interruptus and certain forms of sexual abstinence. It is thus a matter of a combination of undue physical excitation and insufficient efferent discharge.

In 1908 Freud coined the term 'anxiety-hysteria' to denote certain phobias the psychological structure of which resembled that of ordinary hysterical symptoms. The causes here are, as with hysteria in general, certain deviations in the development of the infantile psychosexual instincts, with the consequent accompaniment of repressed intrapsychical conflicts.

<sup>1</sup> Read before the International Congress for Medical Psychology, at Zurich, September 9, 1912. Published in the *Internat. Zeitschr. f. aertzliche Psychoanalyse*, Jahrg. i.

<sup>2</sup> For a description of these see Chapter XXVII., pp. 478-482.

The third step, one made independently by Freud and most psycho-analysts, was the discovery that the same psychological factors that play the chief part in anxiety-hysteria are also to some extent operative in some *apparently* pure cases of the anxiety neurosis.

The effect of this new knowledge is a double one: On the one hand it leads to the necessity for revising various questions, such as the relation between the 'actual neuroses' and the psychoneuroses, while on the other hand it makes immediately intelligible a number of clinical problems that previously had been quite obscure. For instance, it explains some of the problems concerning the relation of the anxiety neurosis to hysteria, a matter to which Freud had already in his first communication (1895) devoted special attention, and it also explains the clinical finding that cases of hysterical phobia usually shew as well symptoms of the anxiety neurosis. If we consider the essential elements of the infantile conflicts that lie behind such phobias we can understand how they often lead to another symptom—namely, to an absolute or relative incapacity to obtain sexual gratification even when favourable conditions for this are freely present; in other words, to an absolute or relative impotence. This incapacity can then bring about an anxiety neurosis just as the absence of external opportunity for adequate gratification can, and this in spite of the fact that the psychoneurotic symptoms themselves render possible a sort of disguised gratification and a certain relief of tension.

As to the sexual origin of pathological anxiety there is, in my opinion, nothing more to be said. I have elsewhere<sup>1</sup> shewn that, quite apart from actual experience, logical reflection alone, if only this is carried through consistently and without prejudice, can lead to no other conclusion, and there is no other part of the whole Freudian theory that finds a more constant confirmation in daily practice. The main problem is to determine the relative importance that is to be ascribed in the causation of anxiety states to the psychological and to the physical lack of gratification respectively, especially in the pure anxiety neurosis. One could make the matter easy by saying that, from its very biological nature, the sexual instinct must have both a psychological and a physical side—a statement which is of course obvious—but the question is which of the

<sup>1</sup> See Chapter xxvii., pp. 487-489.



two is the more important in the present connection, a question which evidently is of weighty significance in regard to therapeutics.

That the physical factors to which Freud called attention in his first communication are actually concerned is indicated by two considerations—first, that the removal of them is followed by a rapid improvement in the symptoms, and secondly, that their presence in such cases is to be found with extraordinary frequency, if not constantly. Even such an opponent as Janet<sup>1</sup> could not overlook the latter fact; he writes: 'Si on peut avoir des renseignements, des aveux dans la vie sexuelle des malades, on voit qu'elle est presque toujours troublée et qu'elle est bien troublée en effet dans le sens qu'indique Freud.' Several authors have assumed, perhaps under the influence of the stress that Freud in the communication referred to laid on the bodily factors, that the problem is purely a physical one, and speak, as does for instance Loewenfeld, of a tension due to libidogenic substances. Although recent investigations on the inter-relation of ductless glands, particularly Cushing's work on the hypophysis, make the existence of such chemical substances probable, it should not be forgotten that there is no absolute proof of this, so that it would seem wiser to avoid all dogmatising in this direction so long as we have nothing on the subject beyond speculation. In any case it is certain that even in connection with the physical factors in question there are two important psychical points of view that should not be overlooked:

1. Such factors hinder adequate satisfaction of various psychical tendencies of probably considerable importance, which can scarcely be satisfied in any other way. With many people, perhaps especially with men, there remains, after sublimation has accomplished all it can, a certain surplus of desire, an impulse towards psychical discharge, and a wish to assure oneself once again of that feeling of individual value and capacity that nothing can give to the same degree as satisfactory personal relations of an intimate kind. When the lack of such relations hinders the psychical discharge there results a damming-up of an essentially psychical order (quite apart from any accompanying bodily accumulation).

2. When the various physical factors are considered to

<sup>1</sup> Janet, 'Les Obsessions et la Psychasthénie,' 1903, t. i., p. 622.

which Freud called attention (sudden introduction of girls to gross sexual experiences, and so on), it is seen that they all concern situations in which there must of necessity arise an intrapsychical conflict; for instance, no human being leads an abstinent life entirely of his own free will, but only because a certain part of his personality is victorious in the conflict with the other, instinctive part. The importance of such conflicts is not to be under-estimated, for they act in the same way as the current conflicts in cases of anxiety-hysteria—*i.e.*, through the reinforcement of older ones originating in childhood. I am perhaps the more inclined to bring this factor of intrapsychical conflict into prominence because for biological reasons I derive morbid anxiety not directly from repressed sexuality (as is so often done), but from the inborn fear-instinct, which has been stimulated to exaggerated activity (as a defence mechanism) in response to the danger of the repressed sexual wishes. This conception can be related to Freud's view in which he traces the 'anxiety transformation of sexual hunger' to the fact that the ego deals with an internal danger in the same way that it is accustomed to deal with external dangers; it fears them and defends itself against them. A parallel can thus be drawn, in my opinion, between pathological anxiety and the pathological love of the obsessional neurosis, which is an exaggerated and defensive response to repressed hate.<sup>1</sup>

In addition to these considerations the two following have also to be thought of: There are cases of anxiety neurosis in which the removal of the physical factors (coitus interruptus, etc.) leads to a partial improvement, but not to complete recovery, and then there are cases, exceptions it is true, in which such factors are altogether absent—*i.e.*, in which sexual intercourse is freely performed in the normal way. As is generally known, the analysis of such cases always reveals the presence of infantile psychical factors, identical with those characteristic of anxiety-hysteria. For all these reasons, therefore, psychical factors have to be credited with an essential significance in the causation of most, if not all, anxiety states.

Can physical factors alone ever produce morbid anxiety? Perhaps not, for the following reasons: In cases where the psychical factors are less prominent—*i.e.*, where the psychosexual development approaches the normal, and where current

<sup>1</sup> Freud, *Jahrbuch der Psychoanalyse*, Bd. i., 2<sup>e</sup> Hälfte.

conflicts are not very important—experience shews that such persons can tolerate a very considerable amount of sexual tension without harm, far more than those with a more neurotic predisposition. Further, one sees that when sexual abstinence is forced on animals—*i.e.*, when the renunciation is due to purely external and not to internal causes (moral conflicts, etc.)—the result is not an anxiety state but a condition of general irritability. The latter example is, it is true, only an analogy, and not an exact comparison. But the question cannot be tested with human beings, for, as was mentioned above, in most cases where physical factors are operative psychical ones are also; in cases where pressure is imposed from without—*e.g.*, in prisons and insane asylums—the persons can hardly be compared with the normal. The difficulty of isolating somatic factors in a pure form makes it necessary to remember, therefore, that when we use the expression 'physical factors' we refer to a given situation in which of necessity psychical factors also play an important part.

A few words may be said on the more general question of the relation of the 'actual' to the psychoneuroses. The distinctions between them drawn by Freud are mainly three: first, the individual symptoms of the former differ from those of the latter in the impossibility of reducing them further through any form of psychological analysis; secondly, the causes of the former are physical, those of the latter psychical; and thirdly, the causes of the former are current, while those of the latter lie rather in the past (childhood). This scheme was correct at the time it was drawn up, and was an important advance on the previous confused neurological opinions; without it, it would have been impossible to make any further progress. It retains its correctness also at the present day, but it is incomplete in the sense that it does not contain the whole of the truth, and therefore needs revising and extending. The history of the past twenty years has shewn that the most ruthless efforts in the direction of revision and extension of Freud's earlier incomplete views have been those made by Freud himself, and the present instance is no exception to the rule. In a recent illuminating communication,<sup>1</sup> which might have been written in reference to the present subject, he says: 'Die Psychoanalyse hat uns gemahnt, den unfruchtbaren

<sup>1</sup> 'Ueber neurotische Erkrankungstypen.' *Zentralblatt für Psychoanalyse*, Jahrg. ii., S. 302.

Gegensatz von äusseren und inneren Momenten, von Schicksal und Konstitution, aufzugeben, und hat uns gelehrt, die Verursachung der neurotischen Erkrankung regelmässig in einer bestimmten psychischen Situation zu finden, welche auf verschiedenen Wegen hergestellt werden kann.' [Psychoanalysis has led us to give up the unfruitful contrast of external and internal factors, of fate and constitution, and has taught us regularly to find the causation of neurotic disease in a definite psychical situation,<sup>1</sup> which can be brought about in various ways.] The difference between the anxiety neurosis and anxiety-hysteria cannot be described better than in terms of the various types of onset enumerated by Freud in this article. The former condition (anxiety neurosis) corresponds to the onset resulting from renouncement (type A). The renouncement results in the loss of psychical gratification, as a consequence of the unsatisfactory psychosexual life, and the accompanying conflicts lead, in the way mentioned by Freud, to an introversion of the sexual hunger (*Libido*) and a regressive revival of older infantile conflicts. With hysterical phobias, on the other hand, where current conflicts and renouncement also play a considerable part, the most important factors are the demands of reality (*Realforderung*) or the inhibited development (types B and C). But, as Freud insists, the distinction between the various types is to some extent artificial and schematic, inasmuch as in most cases the different factors mentioned above are all concerned. The distinction is therefore entirely a quantitative and not a qualitative one, in some cases the one type or factor playing the most prominent part, in other cases the others. It is throughout comprehensible that with patients where the second and third factors are especially strongly developed it needs a lesser activity of the first one, or perhaps none at all, in order to evoke the illness. This consideration completely explains the variability of the different causative factors in anxiety states, the deeper and the more superficial, the older and the current ones. When the first are more prominent the patient may remain free from symptoms so long as there is no obstruction in the way of psychosexual gratification (current conflicts, etc.); but he can offer much less resistance than another person to the action of 'physical' pathogenic factors, and will also, therefore, suffer sooner from an anxiety state.

<sup>1</sup> Not italicised in the original.

The three distinctions given above between an actual and a psychoneurosis will now be considered a little more closely. The symptoms of anxiety-hysteria (phobias, etc.) are not only capable of a further psychological analysis, but cannot be conceived in any other way; they symbolise various wishes that have been subjected to repression. The symptoms of the anxiety neurosis seem to have a rather more complicated origin: on the one hand they represent the normal physiological accompaniments of fear, which has arisen through the psychical mechanism discussed above—*i.e.*, as a defence reaction to repressed sexual impulses—and which, just like the phobias, symbolises both the wish and the censor opposed to it; on the other hand they may have an individual psychological mechanism of their own, quite similar to that of the phobias. An example: Breast dread shews both fear (free, floating pathological dread) and also certain definite apprehensions that are symbolised by the localisation of the symptom; I have always found that this, especially when it is very pronounced—as with the anxiety equivalents—is over-determined by psychical factors. The second distinction in question, the bodily in contrast to the mental, has been discussed above, and we saw that the latter factor plays an important part in every case, whether of anxiety neurosis or anxiety-hysteria, while our knowledge of the former factor is as yet too indefinite to allow any precise statements to be made. In general it can be said that the 'physical' factors (in the sense defined above) are as a rule much more pronounced with the anxiety neurosis than with the anxiety-hysteria, but even in this there is considerable variation. Similar remarks apply to the third distinction, the contrast between current and past factors, a subject that was clearly and exhaustively discussed by Freud in the communication mentioned above. We see, therefore, that there is no difference of principle between the conceptions of anxiety neurosis and anxiety-hysteria, since both conditions merely represent different types of the way in which the same final result, 'a definite psychical situation,' may be attained. The anxiety neurosis may thus be regarded as a single type or a syndrome of anxiety-hysteria; the latter is probably the wider conception.

Finally, some of the therapeutic applications of the preceding considerations may be emphasised, and this will be done in the form of a short statement, which needs no discus-

sion in that it follows directly from what has been said. It concerns only the anxiety neurosis. Psycho-analytic treatment of such cases should be undertaken under two circumstances: first, if the removal of the 'physical' factors—*e.g.*, coitus interruptus, etc.—does not lead to an adequate improvement in the symptoms, and secondly, if these factors are of such a kind that they cannot easily be removed—*e.g.*, abstinence in widows over a certain age, in girls, etc.

The conclusions that we have reached may be summarised as follows: The essential cause of all kinds of anxiety states consists in a lack of psychical gratification of the sexual hunger (*Libido*); the anxiety arises in the inborn fear-instinct, and the exaggeration of its manifestations represents a defensive response to repressed sexual impulses. In all cases the psychical factors play an important part, in many even the sole one. The physical factors are often contributory, but they alone are perhaps never sufficient to evoke an anxiety state; in addition these factors always have an important psychical side. The physical factors are much more prominent in the anxiety neurosis than in anxiety-hysteria (phobias, etc.). The anxiety neurosis may be considered as a single symptom of anxiety-hysteria, the latter being the wider conception.

## CHAPTER XXIX

### A SIMPLE PHOBIA<sup>1</sup>

THE following case of a simple phobia is related, not as a detailed study, but merely to illustrate some of the differences existing between the two current psychological views regarding the nature and origin of such symptoms, and in the hope that thereby some slight contribution will be made to the task of clarifying and rendering precise the problems at issue.

The patient was a young man, suffering from a mild neurosis. The only feature of this that concerns us here was the following phobia, one of a common type. Whenever he stood at the brink of a height he became afflicted with slight manifestations of morbid anxiety (dread, nervousness, giddiness, palpitation, tachycardia, sweating, etc.). He experienced a definite fear of falling, or, to be more precise, a fear lest he might jump over, and would hastily draw back to a safer position or clutch on to any fixed object. In a fuller description he added some further details, of which the only ones worthy of note were these two. The symptom was always most severe when the edge was one overlooking deep water, such as on a quay or on a high deck aboard ship. The vicinity of any other man when he was near a dangerous edge made him afraid that the latter would throw him over; although he realised, of course, the unreasonableness of this fear, it caused such discomfort that it cost him a very considerable effort to walk or stand with another man in a position of this sort. The latter fear applied only to other men, not to women.

Investigation of the patient's history brought to light the following relevant facts. He had had the phobia as long as he could remember, though it varied considerably in intensity from time to time. He recalled, with no special difficulty and merely by carefully searching his memory, a series of occur-

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, June, 1913.

rences that deserve the name of psychical traumata, and which seemed to have a direct bearing on the present symptom inasmuch as they concerned situations that closely resembled those under which the symptom was manifested. Two of these were much more serious than the others, and were also the earliest in time. The memories will be narrated in order, the first being of the most recent occurrence.

This one referred to an incident that occurred when the patient was ten years old. He was taken to a village concert by a grown-up friend, who, on account of the hall being crowded, made him sit on a window ledge some six feet above the stairs. He was very afraid of falling off, and, after he had endured it for about half an hour, his fear got the better of his mortification, and he got the friend to lift him down. Clearly, however, the incident contained not so much a serious trauma in itself as an occasion that was well adapted to bring the phobia into prominent evidence.

The year previous to this he had been taken up a tower, about 200 feet high, by his father. On reaching the circular projecting balcony at the top, which was quite in the open, though of course protected by a railing, his father laughed at his fears, and forced him to walk around the tower on the balcony. He accomplished this in great terror, the memory of which was still disagreeable.

The third incident was one that had occurred when he was seven years old. At the end of the school playground was a wall that divided it from lower ground on the side of the hill, the height of the wall being between fifteen and twenty feet. One day a school-teacher (a young man) lifted him over this wall as a practical joke, and suspended him upside down by his ankles, playfully threatening all the while to let him drop. As may be imagined, this had caused in the boy a fit of abject terror, though it is worthy of note that it disappeared soon enough after he was safely back in the playground.

The last of the series, and the only one that shewed any dimness in the memory of it, dated back to the age of three.<sup>1</sup> The patient seems to have been a fretful child, much given to crying, and on one occasion, when he had probably been more than usually troublesome, a visitor who was staying in the house, and whom the child had good reason to dread,

<sup>1</sup> All the dates could be definitely determined by extrinsic references, which need not be here detailed.



picked him up in anger, carried him outside, and held him over a high cask of water, into which he threatened to drop him unless he became quiet.

These were the only relevant traumata that could be elicited by any form of inquiry, from either himself or his parents. According to one view regarding the genesis of phobias we have here all the essential facts necessary to explain the case, granted that a given congenital predisposition<sup>1</sup> was present—for instance, an unusually developed fear-instinct. The explanation that would be offered might run somewhat as follows: A pronounced manifestation and activity of the fear-instinct was aroused by each of the traumata just mentioned, and in a perfectly natural and intelligible way. This had two after-results: in the first place, the emotion of fear and the idea of falling (or being thrown over) became ineradicably associated, so that the effective presence of the latter always tended to arouse the former. Possibly the form of the earliest trauma would account for the exceptional intensity of the phobia when the patient was near deep water. In the second place, the intensity of the emotion aroused was the reason of its persisting so remarkably, usually latent, but capable of being called forth in the presence of any situation that resembled the original ones; in other words, a body of emotion had been created which remained with the patient as a memento of the experiences he had once passed through. Some writers would probably add the elaboration that, as the result of the nervous shock, a group of mental processes had become dissociated from the rest of the mind, and that this dissociation remained as a permanent effect of the trauma.

Supporters of the second view, which, in contradistinction to the first, or *static* one, may be termed the *dynamic* view, would agree as to the influence of the series of shocks, but would express their disbelief in the efficacy of these alone to produce the result in question; they would thus regard the explanation just given as incomplete rather than incorrect. They would maintain that such effects as those described can never result from psychical traumata alone, but only when these become associated with, and perhaps reinforce, certain dynamic trends already present in the mind.

In support of this criticism attention may be directed

<sup>1</sup> I will say nothing more about this, for it is equally assumed by both views under consideration, and is thus common ground.

to two considerations. In the first place, psychical traumata, and even severe ones, may certainly occur without leading to lasting phobias (or any other symptoms), so it is plain that some other factor must be operative in the cases when they do. To invoke the congenital differences between people as the sole explanation of this other factor, without making any further inquiry to determine if possible what other influences are at work, is only to make an unprovable assumption, which in any event leads to no increase of our comprehension of the mental conditions in question. In the second place, experience shews that phobias may sometimes arise independently of any connection with preceding psychical traumata of a serious nature; that is to say, in cases where any traumata that may have occurred have been of such a kind as either to present no intrinsic resemblance to the phobia (in the way that they do in the present instance, on the contrary), or else to be of only an insignificant intensity. It would seem, therefore, that these traumata can be regarded neither as the whole cause of the phobia, nor even as the essential cause.

It is held by the second group of observers that the dynamic trend, or wish, is symbolised in the phobia, and that it is the continued action of this wish which is responsible for the persistence of the phobia; when the activity of the former ceases, that of the latter does also. To express the matter most shortly, it is held that every phobia represents a compromise between one or more repressed wishes and the inhibiting forces that have repressed these; the activity of these wishes constitutes the essential and specific cause of the morbid mental state.<sup>1</sup>

The same phobia by no means always represents the same repressed wish, though it does some wishes so much more frequently than others that these may be called types. The common types of wish that underlie the present phobia are the two following: (1) The repressed desire to experience some moral fall. This is symbolised by the physical act of falling, in just the same way that the spiritual idea of purification from sin is symbolised in the material act of ablution with water (baptism). The word 'fall' is very commonly employed to indicate the idea in question—one need only mention such expressions as 'to fall from grace,' 'fallen women,' 'backsliding after conversion,' etc.—and the two connotations of the word,

<sup>1</sup> See Chapter XXVII.

the literal and the metaphorical, generally become associated in the unconscious, as do the various connotations of any given word or of any pair of similarly sounding words. (2) The repressed desire to make some one else fall, either literally (to throw them down and hurt or kill them) or metaphorically (to encompass their ruin). The present case is an interesting example of the way in which this cruel wish may become associated with, and replaced in consciousness by, the fear of heights. The chief mechanism involved is that of 'projection,' so common in both the disordered and the normal (especially the infantile) mind. We find it typically in the guilty conscience, for instance in the fear of punishment for sin, and a similar theme is to be met with in countless dramas and novels in which the doom that the villain prepares for the hero recoils on himself.<sup>1</sup> A murderously inclined man is afraid of being murdered—he ascribes to others the evil desires of his own heart; a liar does not trust an honest man (Bernard Shaw justly says that the chief punishment of a liar is not at all that he is not believed, but that he cannot believe others); and so on. In insanity one finds regularly that delusions of persecution on the part of others are the reflections, or projections, of evil thoughts deep in the patient's own mind. The whole attitude of jealousy and fear of the rising generation so frequent in older people (wonderfully dramatised in Ibsen's 'Master Builder') is partly due to a projection on to the former of the hostile attitude that they themselves when young indulged in towards their elders, and now feel towards their juniors. Instances could be indefinitely multiplied, but these few will probably serve to recall to the reader a familiar human tendency.

The full analysis of the case described above cannot be here related, but some of the principal findings in the present connection were these. As a baby the patient had been very sickly and ailing; his mother was of an unusually affectionate disposition; he was the only child; for these reasons he was unduly pampered by his mother, who doted on her first-born, and nursed him night and day. He no doubt highly appreciated this affection, for when another child arrived—late in his second year—he shewed every sign of resentment at this apparently superfluous intrusion into the circle of love where he had hitherto reigned supreme. Particularly did he object

<sup>1</sup> This theme of 'retribution' is extensively handled in Otto Rank's valuable work, 'Das Inzest-Motiv in Dichtung und Sage,' 1912.

to renouncing the pleasure of being cradled in his mother's arms, which till now had always been open to him,<sup>1</sup> and the having to wait disconsolately while the baby was being nursed. The following trivial incident will illustrate this: One day when he was a little over two years old he called out vehemently to his mother, 'Put the baby down in the cradle to cry, and nurse me.' The words 'to cry'<sup>2</sup> are especially to be noticed, these clearly being an unnecessary refinement of unkindness. No doubt his real feelings, the free manifestations of which were already being hampered by growing inhibitions, would have been more truly expressed in some such phrase as, 'Heave the little brat on to the floor, throw it away for good.'

Another feature of importance was that throughout his childhood he had suffered greatly from fear of his father, as well as of the visitor mentioned above, a man who was closely identified in his mind with his father. Most of this fear was caused by a projection of the hostile thoughts bred by his jealousy of his father. He secretly hated his father, and nursed phantasies of killing him, so he ascribed to his father a similar hostility and also feared the latter's retribution if his evil thoughts became known. Therefore, when first the visitor, and later on the father, forced him into a situation where he was in peril of falling from a height (the cask and the tower incidents), his instinctive reaction was, 'It's come at last. The all-knowing father has discovered my sinful thoughts, and he is going to do to me what I wanted to do to my little sister and to him.'

The hate, jealousy, and hostility that had arisen in earliest childhood had persisted in the patient's unconscious up to the present, in reference both to the relatives first concerned and other associated persons, on to whom it had later been transferred. Being of course repressed through the influence of moral training, and covered as well by a real love, it had never been consciously experienced in its full intensity, manifesting itself chiefly through endless friction and irritability, with occasional quarrels. The suffering and unhappiness resulting from these constituted one of the punishments that

<sup>1</sup> It should not be forgotten that the height of a mother's arms is greatly magnified in the imagination of a little child, just as the size of any grown-up person is: hence the giants of mythology.

<sup>2</sup> The wording is in all probability correct, for the incident, which was often repeated as a family story, was told me by the mother, who remembered it, as well as many others, very distinctly.

the patient's guilty conscience brought upon him for his cruel wishes. The phobia was another, a more direct self-punishment. When the pent-up wishes were released by being admitted to consciousness, and thereby weakened through the influence of various mental processes to which they had previously been inaccessible, a considerable improvement took place in his general mental condition, and the phobia became reduced to more normal proportions; the fires that had fed it being extinguished, there was nothing to keep it alive.

On the basis of this explanation it is intelligible that the most prominent part of the phobia had been the patient's fear that some other man would throw him over; in his unconscious his avenging father was always with him. The fear that he himself might jump over was a more direct expression of the repressed desire to do wrong, to 'fall.' The localisation of water was produced by a number of thoughts relating to the associations 'throwing down—killing—death—birth' that need not here be detailed.<sup>1</sup>

According to the second of the two views discussed above, therefore, a phobia is a reaction to a repressed wish. It expresses the patient's fear (an emotion derived from the fear-instinct) of a dissociated part of his own mind, of a dangerous tendency that he is afraid might overpower his better self; in popular phraseology it is 'a fear of himself.' The influence of any psychical trauma is merely incidental; it may be made use of by the phobia-building agency, thus, as in the present case, helping to determine the precise form this process shall take.

To avoid any possible misapprehension, I will repeat in conclusion two remarks already made above: first, that the particular repressed wish we have discussed is far from being the only one that may underlie a phobia of falling (nor was it by any means the only one in this case, though it was the chief one); and secondly, that the object of the present communication is not so much to produce any convincing evidence as to illustrate the contrast between two views by reference to a given case.

<sup>1</sup> See Chapter VIII., p. 203.

## CHAPTER XXX

### ANALYTIC STUDY OF A CASE OF OBSESSIONAL NEUROSIS<sup>1</sup>

(THE following case-report is a small section extracted from a detailed study of the obsessional neurosis published elsewhere, which includes general considerations on the nature of the disease as well as the casuistic material on which these were based. It is much the shortest case of those reported, and is selected for republication here mainly on grounds of economy of space. With the other cases strikingly successful therapeutic results were recorded, while with the present case the length of treatment (one month) precluded any question of cure. The patient (a gratis one) was supported by relatives, who shewed the customary lack of sympathy and comprehension in regard to his sufferings, and refused to allow him to stay longer in Toronto (where I then was), so that after a month the treatment had to be broken off. It is interesting, however, to see how occasionally one can attain an extensive knowledge of the structure of a neurosis in a short time without being in a position to bring the treatment to a successful conclusion. Freud<sup>2</sup> has several times pointed out that the mere fact of the patient getting to know the causes and nature of his symptoms is of little avail in itself, and that a true cure can only take place when the resistances are overcome which had previously prevented him from realising these causes, a consummation that in this case was made impossible through lack of time.)

The patient was a printer, forty-six years old. He had suffered from obsessional attacks at four different periods of his life, being relatively free in the intervals between them, and each of these attacks lasted longer than the preceding ones. The first was when he was twenty-eight years old, at which time he was obsessed for a month by the idea that his mother

<sup>1</sup> Read at the Second Annual Meeting of the American Psycho-Analytical Association, at Boston, May 30, 1912. Published in the *Jahrbuch der Psychoanalyse*, Bd. v.

<sup>2</sup> See, for example, Freud, *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 94; also Chapter XVI. of the present volume, p. 309.

had committed a murder. This recurred four years later and then lasted for three or four months. About four years ago, at the age of forty-two, he acquired the obsession that he was suffering from diabetes, and this afflicted him for more than a year. His present trouble, which had tormented him for the past eighteen months, was the idea that the body of his little daughter had been stolen out of her grave.

Superficially considered, these three obsessions seem to be quite unconnected, and it is a typical case of the kind usually quoted in support of the prevailing medical theory of the obsessional neurosis. According to this theory the neurosis is conditioned by a primary psychasthenic state, on the basis of which all possible disconnected and meaningless ideas may develop as secondary products. The adherents of this view have therefore no further interest in the actual content of the obsessional ideas—nor in their genesis—other than merely to classify them without any investigation. A short study of our patient's obsessions, however, sufficed to make it clear not only that they were closely interwoven with one another, but also that they represented an integral constituent of his personality.

Let us first consider the present condition of the patient. His thirteen-year-old daughter had died the day after an operation for appendicitis. Indications of the obsession made their appearance on the evening of the funeral, and within a month it had almost fully developed. (The patient had in the first instance told me that it had only begun two months after the death, an example of the way in which patients manage to overlook the significance of events connected with the causes of their obsessions by dislocating the chronology of such events.) The obsession first took the form that some one had stolen his daughter's body out of the grave in order to cut it up. Probably it was a doctor who had done it for purposes of dissection. He asked me again and again whether various public buildings which he passed on his way to me were not medical institutions, because he had the idea that the corpse might be in one of them; when I assured him they were nothing of the sort, these ideas would disappear for a time. Besides this he thought the body might have been taken by a butcher, whose calling was in the patient's mind associated with that of a doctor. Six months after the child's death the obsession was further reinforced. The exciting cause of this was that he fancied he

had seen his child's face on the back of a passing rag-cart; before he could convince himself that he was mistaken the cart was out of sight. After this incident he could never see a rag-cart without being seized with the same idea, and as it usually entered his mind only when the cart had passed him it was always too late to look into the matter thoroughly enough to convince himself that the whole thing was merely imagination. Soon the same thing happened at the sight of other refuse-carts, those removing the refuse of street sweepings or dust-bins, and most of all those removing the refuse of slaughter-houses, such as grease, bones, etc. In a short time the obsession had further extended to every imaginable cart, and even to various other vehicles, trams, cabs, etc.—a good example of the generalisation of a morbid idea. But not only might carts and carriages contain the corpse; he also fancied that he saw it on the street in any suspicious bundle, in old newspapers, refuse-bins, and so on.

Going out of doors thus became a martyrdom for him, for not only had he at every step to examine all conceivable suspicious objects, but he was also perpetually exposed to the trauma of having to pass by such objects without having the opportunity of examining them. This was especially the case in trams, so that before long he had to give up that way of getting about, since he could not bring himself to shut his eyes but was compelled to look out of the window all the time 'for fear that he might go past his daughter's body without knowing it.'

To begin with he felt tolerably well at home, where he occupied himself in going over again in his imagination the various objects that he had seen when last out without being able to examine them. He had been obliged to give up his work soon after the onset of the trouble, it being simply impossible for him to do anything. After a time various possibilities took shape even at home: he could see things out of the window, newspapers flying about, parcels left on door-steps,<sup>1</sup> dim objects in the neighbours' rooms, and so on, and naturally he was obliged to inspect all such things with the greatest care. Later on the state of affairs grew worse, for when his wife covered the windows (to keep him from them) and he was left in artificial light only, he would fancy he saw the dreaded sight through key-holes, cracks in the wall, etc.

<sup>1</sup> A common mode of delivery in Canada.



Thus his activity was confined to shutting himself off from the outer world by making his house a sort of hermitage, so that he might endlessly review the numerous possibilities concerning his ideas. In this he was, like all such patients, very inventive and would meet the objections of his relatives with a skill in argument that many a professional debater might have envied. At the beginning of every visit to me I had first to assure him, in reply to his piteous questions, that I did not believe in the possibility of the event he so dreaded (the body-snatching). By the next time he would have quite forgotten what I had said and would beg me to repeat it. Once I was imprudent enough to bring forward the argument that eighteen months after death the body would be so far gone in decay that he could not possibly recognise it (an argument, by the way, that did not convince him, because, of course, the thief could have artificially preserved the body) and used the expression 'it is no longer there,' meaning naturally that only the skeleton was left. As soon as he had left my house the thought occurred to him that I was after all of his opinion and agreed with him that the body was 'no longer' in the grave—*i.e.*, that it had been stolen; he could not sleep the whole night and was in a state of acute distress until our next talk. If there are therapists who can cure such disorders by argument alone, they must have at their command powers of a super-human order.

It may be imagined that the patient's daily journey from his dwelling to me was no light matter and often became simple torture for him, as well as being distressing for his wife. He could not be out of doors for a moment without his wife, and only by dint of her encouragement and assurances could he pass the innumerable doubtful objects in the street. The patient was far from prepossessing in appearance. With his unusually small and badly developed figure, his shrinking, timid bearing, and his morose and anguished countenance, he presented, as he came in bathed with sweat from the exertion of his journey, as distressing and pitiable a figure as I have ever witnessed.

## CHILDHOOD.

The patient was the eighth of eleven children, of whom five were boys and six girls. The ones who possessed the greatest psychical value<sup>1</sup> for him were: (1) Frederick, the eldest boy, who was fifteen years older than the patient and who took the father's place on the latter's death; he was extraordinarily strict and harsh; (2) Maggie, the eldest girl; she was thirteen years older than the patient, and mothered him; (3) Sarah, two years younger than himself; (4) Thomas, four years younger than him; and (5) Lucy, five years younger than him.<sup>2</sup> When the patient was five years old his father died, and he could recollect nothing of him except being at the funeral.

The family was always very poor and was supported by the elder children. According to the patient's account, Frederick, the chief prop of the family, deserted it, four years after the father's death, in order to marry. He bore a grudge against him for this and took it as a wrong done to his mother. He himself behaved quite differently, stayed with his mother and supported her till he married, at the age of thirty-two; she still lived then with him until friction between her and his wife made it impossible. (This is always a suspicious indication of unconscious erotic conflicts.) As he said himself, he was always 'a mother's boy,' and he ranked filial devotion to her above everything else. As a child he preferred staying at home and helping her to playing with other boys. The mother seems to have been somewhat hard, at all events in comparison with the patient's craving for affection, and she was very violent-tempered. He was an extremely sensitive child, with easily wounded feelings, and was always making himself unhappy over the thought that no one loved him. He believed that his mother preferred his brother Thomas to him; she spoilt him as the youngest and even allowed him to sleep in her bed till he was ten years old. The patient resented especially this last indulgence and, as he maintained, simply because he was afraid the brother might 'disturb' his mother. As is the case with most rationalisations, the wording betrays the very

<sup>1</sup> In a large family it will always be found that only a few of the members, usually two or three, are psychically important to any one child; in the present case the only really important ones of the ten were the two youngest.

<sup>2</sup> The names here given of the brothers and sisters are fictitious.

thoughts that were meant to be concealed. Naturally he was terribly jealous of Thomas, and this was the main reason why the question of where babies come from had especially occupied him since the latter's birth.

Jealousy and mistrust remained as marked characteristics throughout his life and were often the cause of difficulties in his work. Generally he liked those set over him, but on the smallest reprimand he became out of humour and sullen. In other words, the smallest indication that he might not be valued or loved enough resulted in withdrawal into himself, hatred, and even a mild form of persecutory delusion; in some instances, which cannot be more closely described here, this reaction was of a pathological intensity. In these experiences his homosexual tendencies evidently played an important part, which was quite clear from his dreams. The same type of reaction (conversion of love into hate) appeared too in connection with his heterosexual tendencies if the object of his affection did not return it to the extent he desired. These facts suffice to explain the patient's first symptom, which afflicted him as a child for a considerable time: namely, the anxiety lest his mother might in a fit of rage kill little Thomas. He ascribed this fear to the fact that his mother used often to say when angered by the bad behaviour of one of the children, 'I'll kill you, you little devil,' but he could not explain why he should feel this anxiety on Thomas's account and not on his own. It is interesting to note that at this early age a strongly marked paranoiac tendency was already present in the psychopathology of the patient, just as in his later reactions there was shewn a pronounced tendency to the formation of persecutory delusions. He *projected* on to his mother, namely, his wish to kill his brother, and I had good reason to think that at that early period the phantasy was in the patient's mind that his mother had killed his father to please himself (this naturally corresponding with his own wish), but it was not possible for me to obtain proof of the correctness of this surmise.

#### INFANTILE SEXUALITY.

The infantile sex-life of the patient was enacted more in phantasies than in actual life, so that we shall have to pay special attention to them. His few real experiences were of little significance. When he was seven years old, his eldest

sister once tried to bring his private parts into contact with hers, but he resisted her and there was no erection. In the following year he carried on mutual masturbation for a time with another sister, three years older than himself, where, according to him, she was the instigator. About the same time he once performed coitus with a girl of his own age, he being here the instigator. After that he had no other heterosexual experiences till he was twenty, and only very few from then till his marriage. From the age of ten, however, his inner life was rich in sexual phantasies.

His *exhibitionistic impulse* was especially developed, as could be seen not only from his dreams but also from the following remarkable character-reactions. He hated every kind of display and anything striking, whether in dress or in behaviour. His consequent contempt for clothes did not improve his unsightly appearance. All his acquaintances seemed to him too showy in some respect or other, so that he never made friends and withdrew more and more from the world. He was completely lacking in humour; he never remembered laughing, and only on rare occasions did I see him encompass a smile, one of a peculiarly cheerless and dreary kind. When, as seldom happened, he allowed himself to be persuaded to go to a place of amusement, he only watched the audience the whole time and wondered how they could be so stupid and laugh so foolishly; he came to the conclusion that they felt obliged to be amused so as to get something for their money. His inability to understand fun naturally made him unpopular with his fellow-workmen, and he often got into difficulties through his sensitiveness to harmless jokes and the grudge he would afterwards bear against the perpetrators. I feel disposed to attribute this lack of humour in part to the strong repression of the exhibitionistic impulse, which is known to be of fundamental importance in this connection.<sup>1</sup> It was probably further connected with his repressed narcissism<sup>2</sup> and the homosexuality that lay at the basis of his tendency to paranoia<sup>3</sup> (sensitiveness and delusions of persecution). As is

<sup>1</sup> See, especially in relation to the comic, Freud, 'Der Witz und seine Beziehung zum Unbewussten,' 1905, S. 193-197.

<sup>2</sup> Narcissism, exhibitionism, and homosexuality are inherently inter-related.

<sup>3</sup> On the relation between homosexuality and paranoiac delusions of persecution see Freud, *Jahrbuch der Psychoanalyse*, Bd. iii., and Ferenczi, 'Contributions to Psycho-Analysis,' 1916, ch. v.

generally recognised, humour is one of the chief means of self-defence against the slings and arrows of an unfriendly world, and an exaggerated sensitiveness towards its affronts essentially consists merely in taking them too seriously. Two of his brothers had the same gloomy and sullen nature, which he regarded as an inheritance from his mother, who had possessed it in a high degree. The sisters took rather after the father, who had a more sunny disposition.

The reverse side of these character-reactions occasionally appeared, however. As a small boy he used to boast to strangers (usually girls) about himself, his family, and especially his big brothers. At that time he was very fond of dressing up in a childish way and took, for instance, great pride in wearing an orange-coloured scarf of his brother's, the badge of a political party he belonged to. His whole life through he revelled in unbridled phantasies of mighty achievements, to which his utter ineffectiveness formed a tragical contrast. In imagination he saw himself filling the most exalted positions, playing the principal part in great affairs of state, swaying the mob and spurring them on to great deeds, daringly rescuing railway trains in danger, and so on. Most of these phantasies were plainly of an exhibitionistic order: thus, he moved the crowd by his marvellous oratory or ravished an audience by his violin-playing; oftener it was a wind instrument, a horn or flute, which he played in a way that the world had never known before; or, again, on the stage he filled the whole theatre with enthusiasm by his wonderful acting, and so on. The compensatory or consolatory nature of these phantasies is too evident to need further comment. His unconscious phantasies were, as usual, still more unrestrained; in them he was King of England, the American President, or even Christ Himself.

As might be expected, humility and diffidence were highly developed in the patient. Although he belonged to the lowest stratum of society, he was too 'modest' to perform an excretory act in the presence of another man. In company he was extremely diffident and embarrassed, and was always afraid of making a *faux pas*—e.g., of using a wrong implement at table, and the like.

The counterpart of the exhibitionistic impulse—namely, the *impulse to look* (*Schautrieb*)—was an almost more important factor in his life; it chiefly appeared as curiosity and desire for knowledge. The usual problem as to the origin of children

had greatly exercised him in youth. He could not recollect the birth of any of his brothers or sisters, although one was born when he was six years old. He recalled only the birth of a neighbour's child the following year, no doubt a 'cover-memory.' The current explanation in the neighbourhood was that children grew under different vegetables, and some of the children were given as nicknames the names of the plants under which they were supposed to have grown—*e.g.*, cabbage, turnip, etc. The first actual observation that had to be connected with this theory was the part played by the doctor.<sup>1</sup> How was it that the doctor could dig them up, and no one else? From this consideration he had an immense respect for the medical faculty, which to a certain extent he kept throughout his life. He had often wished that he was clever enough to become a doctor, but gave up the possibility as being beyond his powers. The thought of whether the doctor sometimes injured the children as he dug them out with his spade proved to be of especial importance in regard to his later phantasies. Then he also wondered how the doctor brought the baby into the house, and he came to the conclusion that on his way it was hidden in his pocket or under his overcoat. His chief game as a child—indeed, almost his only one—was to sit by himself on a wooden bench and imagine that he was going round with a cart, stopping at various houses and delivering parcels.<sup>2</sup> (The three most usual significations of the word 'to deliver' are, of course, to hand in (a letter, parcel, etc.), to bring to birth, and to rescue.) Here we have the key to the cart and driver in his present obsession; another source is supplied by the fact that the only cart he could remember in his village was a watering-cart, in which he was always extremely interested, and which looked exactly like a refuse-cart.

The patient could not remember having connected the idea of birth with the mother before his ninth year (earlier phantasies had obviously been forgotten), and then he doubted the possibility of there being room for a child inside her body. (This particular doubt often points to phantasies about the exit—the anal opening—being too small for the purpose.) He

<sup>1</sup> In Canada doctors attend practically all confinements.

<sup>2</sup> The unconscious meaning of the children's game of 'postman,' and of much of the excitement with which older girls wait for the post—*i.e.*, a baby—to come, even when they have no reason to expect any interesting letters.

then came to the conclusion that the doctor cut the child out. This thought shews a strong repression of the earlier theory (common to all children) that the anus is the channel of exit, and was associated with the other early conscious supposition that the doctor cut or dug the children out of the earth,<sup>1</sup> an idea that soon became connected with sadistic thoughts.

Although the analysis was not carried far enough actually to revive the patient's remembrance of it, the ideas described above represent in a distorted manner the common infantile theory that children arise in food or intestinal contents and emerge from the body through the same passage as these. In support of the correctness of this interpretation it may be mentioned that the patient generally used the word 'soil' to denote faeces. I have never otherwise come across the use of the word in this sense,<sup>2</sup> which is clearly derived from the childish conception of the doctor's digging babies out of the ground; children thus come from dirt, excrement. The symbolism of dung, vegetables (kitchen-plants), and growth that played an extensive part in his dreams shewed how closely these ideas were bound together in his mind.

In further confirmation of this I may also say that the patient displayed in a very pronounced way the *anal-erotic*

<sup>1</sup> The earth being here, as usual, a symbol for the mother.

<sup>2</sup> An etymological note: The only similar use of the word I have found is in the subject of hygiene, where the discharge pipe of a water-closet is called the 'soil-pipe.' In modern English there are two words 'soil' written exactly alike and having nearly related meaning, though of different origin. It is of no small psychological interest to examine the sources of these two, especially with regard to the main complex of our patient. The first word is a substantive which means simply 'earth'; it is derived from the Latin *solea*, the sole of the foot. All students of either psycho-analysis or mythology are familiar with the close connection between the ideas of earth, fertility, and foot-print; it is recorded of most goddesses of fertility, for instance, that flowers at once sprang up on the spots where their feet touched the earth. In late Latin the word *solea* was used for 'earth' through confusion with the word *solum*, hence the French word *sol* (earth) and our substantive 'soil.'

The second word is the verb 'to soil,' to make dirty. This is derived through the French *souiller* from the Latin *sucula* (diminutive of *sus*, a pig). It might be supposed that this was in reference to the unclean habits of the animal in question, but the name *sus* was given to the animal from its extraordinary fertility, which characteristic also accounts for the important part it played in cults and mythology. The word *sus*, in fact, comes from the Sanscrit root *su*, 'to beget,' just as does the word 'son' and the German *Sohn*. Closely related ideas, such as those of fruitfulness and excrement, constantly come to expression in the words denoting them, however widely they may have been separated in the lapse of time.

character traits described by Freud.<sup>1</sup> He had been from childhood painfully tidy, careful, and neat, and could not endure the least want of cleanliness. He was so obstinate that on several occasions he had been dismissed for rudeness to his superiors and because he refused to undertake any work except on exactly the lines that he thought right. He had the typical attitude towards money. For years he had suffered from constipation and from gastric symptoms of a neurotic nature, including periodic bulimia. He had many birth dreams in which his teeth were extracted,<sup>2</sup> which he then threw down the water-closet. The associations to the following dream imagery illustrate the connection of ideas in his mind: 'He saw earth with young wheat sprouting and tram-rails running through it.' The scene in the dream was a place where a boy had been killed a little time before. Wheat—nourishment—food—farmer (father) sowing seed in the soil. Tram-rails: they would lead to the place where the wheat was unloaded—unload is a vulgar expression for giving birth to a child and also for defæcation. A further association was to the new cash machines in the shops which throw out money.

The subject of *flatus* was also very important in his unconscious. A recurring dream had to do with the greatness of God's works as displayed in thunder-storms and tempests where the wind was so great as to burst open the back door (usually the house was that of his younger sister). Probably this was also the origin of his ambition to distinguish himself as a performer on a wind instrument, a phantasy that was over-determined by the fact that his elder brother played the piccolo.

There were also indications present of '*urethral erotism.*' As a child he often vied with other boys to see which could squirt his water highest in the air. As quite a little boy he had more than once let it fall into his mouth (Sadger's secondary auto-erotism). He was passionately fond of being out in the rain and feeling the rain drive on to his bare skin. The patient is thus another example of the intimate association between ambitiousness and infantile urethral erotism.<sup>3</sup>

His *sadism* chiefly found expression in the form of hate. He did not seem to have been more cruel in childhood than

<sup>1</sup> Freud, 'Sammlung kleiner Schriften zur Neurosenlehre,' Zweite Folge, Kap. IV; see Chapter XL. of the present volume.

<sup>2</sup> See Chapter VII., p. 143.

<sup>3</sup> See Ernest Jones, 'Urethralerotik und Ehrgeiz,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, 1915, Jahrg. iii., S. 156.



other boys—though he was exceedingly fond of teasing and plaguing his sisters—and in later years his repressed feelings betrayed themselves only in his unusual sensitiveness about acts of cruelty. The masochistic tendencies were less pronounced, but appeared in dreams as well as in many of his symptoms. I ought to mention here that at the age of fifteen he was apprenticed to a butcher (the calling that in his mind ranked nearest to a doctor's) and stayed in the business for some years. He finally had to give it up, however, because he could not endure the bloodshed and the handling of the offal.<sup>1</sup> He was hypersensitive to the sight of blood, always a very significant feature (indicating repressed sadism).

#### MURDER OBSESSION.

As was remarked above, the patient had at two periods of his life, at the age of twenty-eight and of thirty-two respectively, suffered from the obsessional thought that his mother had killed some one. The first occasion on which it appeared was on his seeing leaning against the kitchen-door a hatchet with which she had been cutting up veal. We recognise here the same idea of something young being cut in pieces that had its place in his childish theory of the doctor who cut the children on digging them up. At first the obsession took the form of a fear that his mother, who was addicted to drink, might in a fit of drunkenness commit some frightful and indescribable crime. The crime soon took the definite form of a murder, usually of some one young, but it was later extended to all forms of bodily injury. If he read in the newspaper of a crime of this sort, he was overcome with terror lest his mother might have been the perpetrator, and he could not rid himself of the idea even when it was quite impossible that his mother could have been anywhere near the scene of the deed, for, as he pointed out, 'it is so easy to make a mistake in estimating time and distance' (the typical love of uncertainty that the obsessional neurotic shews). He used to search all over the house for traces of the murder, for bloodstains, etc., paying very special attention to the water-closet, into which the body might have been thrown. He would rush frantically about the house 'as if he was on the point of making some great discovery.' At this time there lived in the house only himself,

<sup>1</sup> The combination of sadistic and anal-erotic interests characteristic of the obsessional neurosis. See on this point Chapter XXXI.

his mother, and a five-year-old niece.<sup>1</sup> If he read of a deserted or exposed child he asked himself 'whether this was his mother's doing?' If the neighbours threw out bones into the yard, he was compelled to investigate them carefully in order to convince himself that they were not human.

Although, as we shall see, the matter is not quite simple, it is already clear that the obsession was only a renewal of those ideas that earlier had filled him with apprehension lest his mother might kill little Thomas. In the obsession the association of birth and murder appears unmistakably, and we find along with these the ideas of refuse and fæces that played a central part in his later symptoms. It is therefore specially interesting to learn that in both attacks of the murder obsession he was freed of it by his brother Thomas coming home and reassuring him that everything was all right—*i.e.*, that he was still alive and hadn't been murdered. On both occasions the patient suffered for a considerable time after the disappearance of the obsession from the compulsion to wash his hands constantly, just as Lady Macbeth did in similar circumstances and for the same reason.

We now come to a very important event that took place when the patient was nineteen, and which concerned his favourite sister Lucy, to whom he was devoted, and who was then thirteen years old. One day she was preparing some broth for her mother, who was ill in bed, when her clothes caught fire and she died ten days after from the effects of the burns. The patient made his mother responsible for the calamity, which, he said, would not have occurred if the stove had not been so old-fashioned. She was to blame not only for having such a dangerous stove, but for allowing her child to use it in spite of its dangers. It is clear that the reproach, at least so far as the mother was concerned, was not altogether justified, since the patient at that time was the head of the family and might just as well have been held answerable for the condition of the stove, especially as he was not earning enough to buy a better one. The mild self-reproach he might reasonably have felt he transferred to his mother (his typical projection), but its intensity when so transferred arose not from the current situation, but from a much earlier one. If his unconscious

<sup>1</sup> Probably his thoughts had been occupied with this child, hence the second onset of the obsession. I found later, it is true, that, as is so usually the case, this had lasted longer than the patient had first told me; the same was true of his other obsessions.

could have spoken out, it would have said, 'I asked you to kill the brother I hated; instead you murder my darling sister.' Not only had the event awakened the dormant self-reproach on account of his own death-wishes; its principal significance lay in the fact that in the idea of a beloved person having had to die through the mother's fault he had found a suitable expression for the remorse and self-punishment that accompanied his repressed wishes.

A further comment may be made which shews how completely was the crime imputed to his mother identical with the one committed by his own secret wishes. By the latter a member of the family, of the same sex as himself, who interfered with the affection he wanted for himself, was got out of the way; in the other case he blamed his mother for having brought about the destruction of a member of the family of the same sex as herself (mother-daughter hatred). In other words, he projected on to his mother not only the same deed, but also the same (jealous) motive. He confirmed this interpretation by several remarks concerning the relation between his mother and sisters.

#### DIABETES OBSESSION.

Some years after the occurrence of the murder obsession the thought appeared that he was suffering from diabetes, one which is traceable to the same group of ideas. The exciting cause of this obsession was the shock he received at the sight of a man seized with a heart attack and falling dead. Thereupon he began to brood over his own health, but the diabetes idea only arose about a fortnight later. In other words, there was, as is usually the case, first a period of incubation during which the stirred and repressed thoughts were seeking to find a suitable means of expression. This is a typical example where a surface psychologist would explain the whole matter as 'auto-suggestion of the idea of an incurable disease on the part of a hypochondriac, brought on by the sudden death of an acquaintance; the choice of diabetes being either a pure accident or to be ascribed to an otherwise unimportant collocation of ideas.' But if we examine the facts, instead of theorising, we obtain a much deeper insight into the state of affairs.

The patient had only known one person who had suffered from diabetes. This man had died eight years before, and his diabetes was commonly imputed to excessive drinking.

All the patient knew of the disease was that it was a severe and chronic one, that in it sugar appeared in the blood and urine, and that urine was passed in extraordinary quantities—*i.e.*, the essential points concerning it. He imagined in addition that the urine might become red, an indication of how closely associated were the ideas of urine and blood in his mind. He cut himself in the arm to test whether his blood was not sweeter than it should be. It may well be imagined that to make up his mind on the point was no easy matter for some one suffering from *folie de doute*, and that therefore the operation had to be repeated several times. The same attempt was made with the urine, but his disgust was so great that he could do it only two or three times. The idea of a chronic wasting disease made him think (in the analysis) of the ravages of tuberculosis in his own family. His father, his younger sister, and finally an older brother had died of it, and he was familiar with the distressing symptoms of diarrhœa, profuse expectoration, and exhausting night-sweats. The idea of fluid losses from the body led to the following chain of thought: in the incubation period mentioned above he had suffered, evidently in connection with his state of morbid anxiety, from night-sweating, which reminded him of tuberculosis. From this it may be inferred that during this time his unconscious had been playing with a tuberculosis phobia,<sup>1</sup> and, as a matter of fact, he confirmed this by volunteering the statement that at that time he had been afraid of getting tuberculosis. Finally, however, the diabetes idea had secured the preference as corresponding better with the underlying thoughts. Then came a memory relating to his mother. She had only twice in her life been seriously ill: once, when he was thirty-five, she suffered from a chronic uterine hæmorrhage that was then cured by an operation, and once, when he was nineteen, from chronic dysentery; it was during this latter illness that his little sister was burned to death. He also recalled her drinking habits, the significance of which we touched on before. Then he told me how much he had before his marriage suffered from seminal emissions (commonly called 'night-losses'). We see here the usual equivalence of the principal fluids of the body: urine, sweat, blood (one linked with many

<sup>1</sup> The use of the word phobia here, together with the indications given above of the patient's chronic apprehensiveness, signify that the case was a mixed one, of anxiety-hysteria and obsessional neurosis.

phantasies not mentioned here), and, most important of all, semen. He had heard that night-losses drain one's vital forces and that they led to chronic wasting diseases; from the sexual, auto-erotic nature of the phenomena and the connection between them and a masturbation complex there resulted a strong sense of guilt.

The meaning of the obsession now becomes clear. It was a new form of the self-punishment that had already played a part in the first obsession. It almost openly says: 'As punishment for the murderous thought directed against your brother you must die of an insidious wasting disease which you have brought on yourself by your evil habits.' (The guilt of the masturbation—or rather of the phantasies accompanying it—is allied to that of the murder thoughts, both being due to the incest complex in regard to the mother.) The significance of the masturbation complex in the diabetes symptom is further shewn in the fact that the obsession was followed by an obsessive hand-washing that was more intense and lasted longer than after the two previous attacks. The projection of blame and punishment on to the mother that characterised the former obsessions was by no means absent here also, though it assumed a more concealed form. The mother's drinking habits, her hæmorrhage, and her dysentery were all symbolised in the diabetes obsession and were doubtless important in determining the choice of this. It is thus the mother who as punishment for her sins suffers from the fatal disease, and the form of the punishment is determined by her bad habits (of drinking) just as it was with himself (masturbation). How absolutely the patient identified himself with his mother is shewn by the fact that when she felt at all unwell he was always overcome with apprehension lest she might die, as he was in his own case. The thought forces itself on one here that the paranoiac mechanism of projection, just as is certainly the case with its opposite of introjection,<sup>1</sup> may be regarded as only a special form of identification.

There were naturally other sources of the diabetes obsession besides those just detailed, notably those of an urethral-erotic nature. Since some of these will be considered later on, it is not necessary to discuss them in this connection.

<sup>1</sup> See Ferenczi, *op. cit.*, ch. ii.

## RELATION TO WIFE AND CHILDREN.

Here I have chiefly to lay stress on the fact that the patient's relation to his wife and children exactly corresponded with his attitude towards his mother and her children. His only remaining child was a twelve-year-old boy; the dead girl, Lily, was the subject of his present obsession, as was described above. It will at once be surmised by the reader that while the patient's wife represented his mother in his unconscious, as is the case with most neurotics, so Lily stood for his youngest sister Lucy, and his son for his youngest brother Thomas. He was exceedingly jealous of his son, who, he said, was his mother's darling and displaced him in his wife's affections. The boy's nature was the exact opposite of his father's; he was bright and cheery and easily made friends. The patient had repeated dreams in which he was beating his son for being impudent, lazy, or stupid. In reality he reproached himself severely for having many times beaten the boy. The meaning of this exaggerated self-reproach was cleared up as follows: It happened by a coincidence that his sister's boy, of exactly the same age as his own, was operated on in the same hospital and on the same day as his little daughter, and, like her, for appendicitis. His thoughts about the situation followed the lines of the old superstition 'a life for a life,' and he was willing to sacrifice the boy if only that would keep his daughter for him. But when the boy recovered and the girl died, he took it as a punishment for his evil thought. A deeper source of the self-reproach, one which he admitted only after overcoming great resistances, was that he had had the same thought about his own son; he had wished that the boy might die instead of the girl. The circumstance of his nephew being ill in the same way and at the same time as his daughter gave him the opportunity for indulging in this hostage phantasy in a more harmless form. Such thoughts are common and natural enough in the normal, but what gave them here its pathogenic weight was the fact that the hostile wish thus expressed was not merely a passing one, comprehensible in the circumstances, but that it was the revival of long-buried repressed animosities which had been directed first against his little brother and then against his own son, animosities that, as always in the obsessional neurosis, constituted a principal part of his whole personality.

The patient at first maintained with great positiveness that

his marriage was very happy and that his spouse was an ideal wife against whom he had no complaint to make and for whom he felt nothing but affection. Such extreme assertions usually mean that the wife was an excellent mother-substitute, but in themselves they are no decisive proof that she is a permanent success in this part. He admitted later that her love was not demonstrative enough to satisfy his great need for tenderness, and he was in a perpetual state of doubt as to the true strength of her feeling for him. For this reason he transferred to her the hostility he had entertained for the same reason against his mother. She was generally cheerier than he was, and he was jealous of the way in which she rapidly won the affection of children (her own and strangers') as well as grown-ups. At first he denied ever having had thoughts of infidelity, but after the analysis of two obviously polygamous dreams (brothel type) he admitted that it was only the thought of the children that restrained him in this direction; this, again, naturally furnished a further pretext for inimical feeling towards them because their existence stood in the way of his wishes. In the following dream both of the wishes relating to his wife came to expression: He dreamt that she married again (a stranger)—*i.e.*, that he was free. His reflection on this was that to dream of a wedding meant death, so that a death was to be expected in his wife's family (a good illustration of the connection between superstitiousness, obsessional neurosis, and repressed hostility).

Some years before, his wife had had two artificially induced miscarriages. The patient most strongly disapproved on moral grounds of her conduct and regarded it as tantamount to murder. He was, however, partly to blame in the matter himself: for, in the first place, he was the cause of the pregnancy (against his wife's will); and, in the second place, the motive of her action was their poverty, which resulted from his inability to earn money; this again was his fault, for he had lost one place after another on account of his disagreeableness and other peculiarities, and it became more and more difficult for him to find a new one.

It is comprehensible that the course of events here provided him with good opportunity for projecting on to his wife the murderous thoughts that were always lurking in his mind, and we shall presently see that he took full advantage of it. Like his mother, his wife was irritable and subject to uncon-

trollable outbursts of rage, which naturally in this connection was a specially important similarity. The patient loved his little daughter passionately; she was the apple of his eye and made up to him for all his blighted affections and disappointed hopes. He absolutely doted on her, and all his possibilities of happiness in life were centred on her. Her sudden illness and speedy death were a terrible blow for him and would have been hard enough to bear without the ghastly obsession that followed. For six months he visited her grave daily, but since the setting in of the obsessive hallucination he was not in a condition to do so any longer. The girl had evidently been of an attractive disposition and a very intelligent child who made quick progress with lessons. He often compared her with her mother and very much to the disadvantage of the latter. His wife was quite uneducated and could not even read or write, in which respect she also resembled his mother; she was on this account despised by his sisters (no doubt in part an expression of their reaction against their mother). His little daughter had just begun with some success to teach her mother, when she fell ill. The patient believed that the child's death could have been avoided. She had once before had a mild attack of appendicitis, and he thought that if they had then called in a better doctor, if they had more clearly recognised the seriousness of the matter, if the subsequent treatment had been more careful, or if the doctor had been called in earlier on the second occasion, the child's life might have been saved. Her mother should have understood more about the care of children and the nursing of them when ill. The root of the whole matter was nothing else but her mother's ignorance and want of education (unconsciously he was here again comparing her with his own 'murderous' mother). After he had thus put the whole responsibility for the death on to his wife he could risk allowing a little of it to leak through into his own consciousness; he reproached himself that he had not taken the matter more seriously while there was yet time, that he had not been more amiable to Lily when she was still alive, that out of stinginess he had often denied her small pleasures, and so on.



## SYNTHESIS OF THE OBSESSION.

If we endeavour to picture the state of the patient's mind at the time his child died, we see that a more favourable opportunity could scarcely have occurred for the outbreak of the latent neurosis. In no other conceivable situation would an escape from reality have been so pressing a need. Behind him lay all his life a hopeless failure, and there, cheated of love, of work, of friends and even acquaintances, he stood at the deathbed of his favourite child, the only object in life that made it at all worth living. Shortly before her death he had been to see his sister's boy, a lad the same age as his own unloved son, and he superstitiously felt that fate would not bring them both back to life and health. What wonder that, like the Romans of old, he was ready to offer a hostage to fate and secretly prayed that the boy—if needs be, his own boy—might be sacrificed, if only thereby his darling might be spared.

Still, all this is a general human picture and might well lead to grief, despair, and bitter distress, but not to a psycho-neurosis. Unfortunately for his mental health the intolerable thoughts now aroused took their origin in inner conflicts and terrible feelings that reached far back into his past. The sacrifice that he was now willing to bring about to save his child was identical with another that he had earlier wished to make on more selfish and less excusable grounds. He had wished that the boy, who in the earlier time was his little brother, might die so that he might have full and undisturbed possession of his mother's love. His moral cowardice had even brought him so far as to wish that the woman might be the perpetrator of the deed for his sake, and without hesitation he ascribed to her both his wish and his motives. In both cases he met with bitter punishment by a remarkable trick of fate. In his youth he was doomed to lose his favourite sister in circumstances that to a guilty conscience inevitably led to blame being imputed to the mother. The secret wish that his mother might commit a murder had been fulfilled<sup>1</sup> in

<sup>1</sup> As Freud has pointed out (*Jahrbuch der Psychoanalyse*, Bd. i., S. 411), a never-failing characteristic of the obsessional neurotic is his exaggerated belief in the omnipotence of his thoughts (*Allmacht der Gedanken*); whatever he wishes must happen and does happen. This is always absolute in his unconscious and is often enough implicit in his conscious superstitions. One finds the same conviction prevailing in childhood and in savages. See Ferenczi, *op. cit.*, ch. viii., and Freud, 'Totem und Tabu,' 1914, Kap. iii.

the most terrible manner, and the thought that his mother was a murderess long haunted him in the shape of an obsession the meaning of which was but slightly veiled. Now after the lapse of years comes the second blow in response to the death-wish he has once more entertained. His little daughter is torn from him at the same age as his sister was, and his wife, who has deliberately robbed him already of two children, is to blame for her ignorance and want of education (also his mother's faults). He levels reproaches at himself for having married a wife so like his mother (in the unconscious, for having married his mother). In both cases the responsibility which he had completely transferred to the woman rested just as much with himself; the reproach thus came from his own heart and signified consciousness of his guilt and remorse thereat.

Freud would express the matter thus: Obsessions are the symbolic expression of childish wickednesses that the patient has either not yet abandoned in his heart, or for which he has not yet forgiven himself; they represent unresolved conflicts. In them both the buried wishes and the forces of repression (remorse, etc.) are manifested; not, as in hysteria, by the construction of a compromise-formation, but through successive symbolical representations of the different sides of the conflict. We will now examine the genesis of the obsession more closely.

The night after his daughter's funeral the patient did not sleep at all. Towards morning he was tormented by the thought that the child was all alone out there in the cold and was longing to come home. Then he thought 'What if some one had taken her out of the grave!' Immediately followed the thought, 'If that is the case, perhaps I shall find her again.' He rejected this idea as absurd, but the first thought—that perhaps some one had taken the dead body out of the grave—kept coming back. He thought over the various possibilities, as, for example, whether the undertaker had changed the coffin on the way to the cemetery, or how and with what end the corpse could have been stolen afterwards. He became agitated when he read in the newspaper of bodies being discovered, and he was in a state of constant tension up to the occurrence some months later, which has already been described (the hallucination of the child's face), after which he connected the finding of the child with definite places, such as refuse-carts, dust-heaps, and so on.

Although the obsession appears at first sight to be con-

cerned exclusively with death, it proves on more careful examination to be closely related in content with his childish theories of birth. The points of connection fall into three fairly well defined groups.

(a) First, the idea of cutting. As a child he had supposed both that the doctor cut open the mother's body to take out the child and that he dug the children out of the earth (with a spade). He had wondered if the doctor did not often injure the child in these operations. To cut the mother and to cut the child are ideas, therefore, that are closely associated and also belong inherently to the subject of birth. Now Lily had died the day after the doctor had cut open her body (the operation for appendicitis), and an essential part of his obsession was the thought that a doctor might have taken the body to dissect it—*i.e.*, for professional purposes, which to his childish mind had essentially meant 'to bring a baby.' Occasionally he had the further thought that it was not a doctor but a butcher who had removed the body, but the two callings were closely associated even consciously, while—as appeared from dreams—they were blended in his unconscious. The butcher idea was also connected with other themes—eating, offal, throwing away, etc.—which obviously belong to his alimentary complex.

(b) Secondly, the idea of taking away or bringing. The connection between the ideas of birth and of bringing need hardly be pointed out; the commonest explanation given to children is that the doctor or the postman or the stork *brings* the baby. The same word, 'delivery,'<sup>1</sup> is actually used both for letters and parcels and for confinements.

I have previously mentioned that the patient's favourite game in childhood had been to go around with a cart and deliver parcels to various neighbours, naturally only in fancy; perhaps we have here one of the many sources of the special pleasure boys take in driving, whether in reality or in imagination. Here, as elsewhere, opposites are closely connected in the unconscious, so that the idea of taking away is fused with that of bringing, for in the statement of the first case of this series<sup>2</sup> the association between the ideas of child-birth and of

<sup>1</sup> The fact that the word also means 'to rescue,' 'to help to escape,' 'to save,' can hardly be insignificant, and may be taken as a further confirmation of Freud's view as to the association between birth- and saving-phantasies, a theme I have discussed at length elsewhere; see *Jahrbuch der Psychoanalyse*, Bd. v., S. 57-65, and also Chapter X. of the present volume.

<sup>2</sup> *Jahrbuch der Psychoanalyse*, Bd. iv.

taking away fæces was fully discussed, as also the relation between these themes and those of kidnapping and injustice; we need not go into the matter further here, especially as there is nothing new to learn about it from the present analysis.

Probably this is the explanation of the patient's belief that he might find his child in refuse-carts and the like, not in the carts that bring something to the house, but in those that take away something from it. The things that are taken away are not something precious, but the most valueless objects—a similar contrast association as that obtaining between fæces and money.<sup>1</sup> A significant circumstance not hitherto mentioned is that the idea of the child being stolen out of the grave came into the patient's mind with peculiar force when he remembered to his great annoyance how his eldest brother, Frederick, 'stole' some flowers from her grave at the funeral (sentimentally, no doubt). The flowers 'stolen' were lilies, the patient's and his daughter's favourite flowers; her name, too, was Lily. Thus it was Lily who was stolen from the grave. The association between flowers and dung, both in reality and in phantasy, is well known, and the contrast value of the concepts of fæces and lilies is an extraordinarily high one. Frederick, as has been mentioned, was the father's proxy. On the strength of the infantile theory referred to above, of the father's theft being an idea equivalent to his begetting a child, the circumstance that Frederick stole lilies from the grave was for the patient's unconscious a direct incitement to the idea of the child's re-birth.

(c) In the third place I wish to draw attention again to the relationship between the obsession and the unconscious conception of babies as fæces. In his dreams, which I need not here describe individually, the patient so clearly identified his little daughter with fæces<sup>2</sup> that there could be no manner of doubt about the equivalence of the two conceptions in his unconscious. The significance of the flower episode for the genesis of the obsession was pointed out above. It was none the less striking, however, that all the places where he imagined he saw his daughter were without exception connected with the idea of excrement: thus, offal, manure, rubbish, sweepings,

<sup>1</sup> See Chapter XL.

<sup>2</sup> This astounding equivalency, so very alien to our conscious life, can only be comprehended when one is familiar with the infant's attitude towards its excrement, which it invests with feelings of the highest possible value. See Chapter XL.

and so on; besides these, pieces of waste paper and grubby rags were suspicious objects, or, to use the patient's words, 'anything that can be carried and dropped.'<sup>1</sup> Furthermore we have the fact which came to light in quite an undisguised way that the hallucinatory obsessions happened most frequently in the water-closet; it was absolute martyrdom for the patient to go there, and finally it became so unbearable that he was quite unable to do so unless his wife first of all bandaged his eyes. In this connection the fact may be recalled that this place had also played a large part in the first obsession; the patient was afraid of finding there the corpse of the person whom his mother was supposed to have killed.

The study of the contents of these obsessions shews us clearly that with the patient, as perhaps also with every one, the thoughts of birth and death lie inseparably close together. Perhaps it is not too much to say that the response to every insoluble psychic conflict is a taking flight in what appears to be a death phantasy—*i.e.*, a return to the place whence one came, a creeping back into the mother. From this wider point of view we begin at last to understand the fundamental significance attaching to the ideas of immortality, transmigration of souls, re-incarnation, re-birth, and salvation—*i.e.*, regeneration or re-birth—as palliatives of human sorrow.

Our patient, too, had responded to his insoluble conflict and unbearable trouble in this way. An insane person would simply have constructed the hallucination that the child had come back from the dead and was again with him—as one so often sees in the hallucinatory psychoses where a lost lover or child is in this way restored; an hysteric might have brought about a complete amnesia for the whole complex; but our patient, in spite of his paranoid tendencies, was not insane and could not become so, so that his hope of once more seeing his child alive could only be fulfilled by her being born again. So fantastic a thought, however, could appear in consciousness only in a disguised form.

It is important to distinguish here between the impelling motives bringing about the neurosis and the content of the latter. The principal motives were: the need to soften his unbearable anguish by means of an escape into the world of

<sup>1</sup> 'To carry' also means to be with child. 'To drop a child' is a vulgar expression for child-birth, while 'droppings' is a phrase commonly used for the excrement of animals.

phantasy, where the child was once more born to him, and the need to sate the repressed hatred felt against his wife, one which had arisen among other reasons from her destruction of two hoped-for children. As is always the case, this flight from the painfulness of reality was chiefly effected by a return to the pleasures and phantasies of early childhood; consideration of the content of the obsession leaves no doubt as to the truth of this conclusion.

As I have elsewhere<sup>1</sup> pointed out, coprophilic and necrophilic phantasies are extraordinarily closely connected, the former being, of course, the primary, and the idea of a child who springs from a corpse or out of a grave plays a prominent part not only in mythology and folk-lore, but even in modern literature. The content of the obsession clearly shews that the re-birth phantasy is in essence identical with his infantile theories as to the birth of his brothers and sisters; his main motive in searching for the answer to the latter question had been bound up with the murderous wish entertained against his brother. In later years, when faced with similar problems of love and hate, use was once more made of the old solution. For his unconscious, birth was always a growth out of 'mother-earth.'. And since now his child Lily lay buried in a part of what belonged to his mother, what was more natural than that she should once more emerge from it, as from the source of all life?

I hope to have shewn that the concept of 'congenital psychasthenia' does not exhaust the problems of such cases as the one here described, and that the obsessions of our patient were not to be ascribed to accidental and chance associations, but followed strictly the innermost trends of his personality.

<sup>1</sup> 'Das Problem des "Gemeinsamen Sterbens," namentlich mit Bezug auf den Selbstmord Heinrich von Kleist's,' *Zentralblatt für Psychoanalyse*, Jahrg. i., S. 564, 565.

## CHAPTER XXXI

### HATE AND ANAL EROTISM IN THE OBSESSIONAL NEUROSIS<sup>1</sup>

IN a recent contribution on the subject of the obsessional neurosis,<sup>2</sup> one to which this paper is really an addendum, I laid stress on the remarkable prominence of the part played in the disease by anal erotism,<sup>3</sup> and the experience of other psycho-analysts of whom I have since inquired<sup>4</sup> coincides in this respect with my own. As is well known, Freud in his chief contribution to the subject<sup>5</sup> directed especial attention to the predominating influence of hate in the genesis of the disease, the alternation of the affects of love and hate and the mutual interaction between these being mainly responsible for the characteristic features of compulsion and doubt (obsessions and *folie de doute*), with which they are strictly to be correlated; I may add that my own experience, as illustrated in the cases reported in the contribution just referred to, confirms Freud's conclusions on these points in every respect. If, therefore, my finding, mentioned above, is correct, it is to be expected that there must be some inherent connection between hate and anal erotism, certainly in the obsessional neurosis, and perhaps altogether.

Of the psychogenesis of hate there is not a great deal known. That it often bears a close relation to sadism is a familiar

<sup>1</sup> Read at the Third Annual Meeting of the American Psycho-Analytical Association, in Washington, May 9, 1913. Published in the *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., Heft 5.

<sup>2</sup> *Jahrbuch der Psychoanalyse*, Bde. iv. and v. One of the cases there reported is re-published in Chapter XXX. of the present volume.

<sup>3</sup> Those unfamiliar with this topic are recommended to read first Chapter XL., otherwise the present one will be quite unintelligible.

<sup>4</sup> I wish particularly to thank Drs. Ferenczi and Seif for the information they have given me regarding their experience.

<sup>5</sup> Freud, 'Bemerkungen über einen Fall von Zwangsneurose,' *Jahrbuch der Psychoanalyse*, Bd. i., S. 357.

fact of experience, though there is much reason for doubting whether this is necessarily a primary one. As it appears to me, the genesis of hate is probably preceded by an earlier undifferentiated state in which pain (*Unlust*), annoyance, and perhaps anger, is experienced when the infant finds that any of his wishes are not being immediately gratified, and particularly when the gratification of these wishes is being actively prevented. We can speak of anger only when feelings of this kind become attached to certain definite persons, but this in itself does not constitute hate. For hate to arise, it is necessary that a durable affective bond be established between the two persons concerned, or at least that the one hated be a replacement-figure for some one who is the bearer of this bond. Like all affective bonds, this one, too, is primarily a positive one, and it remains such in the unconscious. It may have at one time manifested itself consciously as love, in which case we have the familiar event of love being turned to hate, or there may have been only an unconscious attempt to establish a love relationship, which has failed. In any case the hate is to be regarded as an expression of disappointed or baulked love, which doubtless is the reason why the most intense and furious hatreds are to be met with in regard to members of the same family or other persons where love might have been expected—*e.g.*, between lovers or married partners.

There also seems to be regularly concerned in the genesis of hate some admixture of fear, though this is by no means always conscious, and the suggestion of such an idea is often repudiated with indignation. We never hate a person who is not in some way or other, often not at all obviously, superior to or stronger than ourselves, or who at all events has some power over us. Thus, we may be angry with an inferior, a stranger, or some one who is quite indifferent to us, but in order to hate properly we must be concerned with a person who is in some way superior to ourselves, with whom we have or have had much to do, and whom we had hoped to love. These conditions are most often fulfilled in the case of some one standing in a near relationship to us, especially a member of our own family, and it is likely that all hate, like charity, begins at home, later and outside manifestations of it being merely displacements of this primary form.

Leaving now the subject of the nature of hate, and passing to that of its origin, we have to consider the occasions in the



child's early life where the conditions just mentioned are in operation. To the infant, and, indeed, to a large extent to older children, love on the part of a parent, or other member of his environment, is synonymous with the giving of pleasure to it. The child feels that he is loved when the person obeys his commands and gratifies his wishes, or at least refrains from interfering with their gratification. Any behaviour of the opposite kind on the part of any one on whom the child makes demands is at once interpreted by the latter as a sign of insufficient love, or even hostility, and becomes the basis in later years of such reactions as the chronic feeling of being slighted or, in insanity, delusions of persecution. In paranoia, for instance, it is now known that such delusions always arise to begin with in connection with persons whom the patient has tried to love, but for internal reasons (repression of homosexuality) has been unable to.<sup>1</sup>

Perhaps the most familiar example of this situation in the infant's life is the common Œdipus one, where the parent of the same sex acts as either a passive or an active obstacle in the way of the child's desire for contact with the other parent. The child's annoyance and anger, which cannot, of course, be gratified, are apt to pass over into chronic hatred, either conscious or—more often—repressed, and the far-reaching consequences of this in later life are too well known to this audience for me to have to discuss them here. In this situation we have a typical illustration of the conditions necessary for the development of hate, a would-be loved being, stronger than the person, acting as an obstacle to the obtaining of pleasure and hence becoming both feared and hated.

It is sometimes forgotten, however, that there is a still earlier situation in infancy which may lead to the same result, and the consequences of which may in certain circumstances be no less significant. This is the situation where the infant for the first time finds itself in serious conflict with the outer world, probably one of the chief ways in which it comes to appreciate the very existence of an outer world as something distinct from itself—namely, during the education of the sphincters. There is no doubt that, especially in cases where the anal erotism is unusually pronounced and where the child

<sup>1</sup> Freud, 'Psychoanalytische Bemerkungen über einen autobiographisch beschriebenen Falle von Paranoia,' *Jahrbuch der Psychoanalyse*, Bd. iii.; and Ferenczi, 'Contributions to Psycho-Analysis,' 1916, ch. v.

is exceedingly loath to relinquish its supreme control over the functions in question, this conflict can become one of the greatest importance, the interference of the nurse or mother being resented in a high degree.<sup>1</sup> The lasting effect of this early experience was strikingly illustrated in a paraphrenic patient of mine, a man aged twenty-five, whose chief delusion was that his mother was interfering with him in every possible way. He was a most pronounced anal-erotist, and whenever he went to the water-closet he had the visual hallucination of his mother being there disturbing him; he usually took about an hour to accomplish the act of defæcation, most of the time being occupied in performing various ceremonies to exorcise this hallucination. As might be expected, his attitude towards his mother was one of open hatred. The conflict involved in the interference with anal erotism on the part of the mother, therefore, must be regarded as one of the important sources of chronic hatred, and in this connection it is interesting to note that Federn, in his detailed essay on the subject of pain lust,<sup>2</sup> lays great stress on the part played by anal-erotic sensations themselves (apart from the conflict here mentioned) in the genesis of sadism, which is so often associated with hate; I might, further, recall the case related by Brill<sup>3</sup> at our last meeting, one in which the ideas of defæcation and cruelty were so closely connected in the patient's mind that he was able to carry out the act only by having recourse to the aid of sadistic phantasies and symptomatic actions.

In the obsessional neurosis the association just described between hate and anal erotism is certainly very frequent, being in my experience a constant occurrence, and the recognition of it seems to me to throw some light on the structure of the disease itself. As is now known, the chief characteristic in the psychology of the neurosis is the mutual paralysis of the tendencies of love and hate, with the resulting alternation of compulsion and doubt. This curious phenomenon becomes more intelligible when we remember that the hate, according to my view, is first developed towards the *Imago* of all later love-objects, the mother herself; thus the capacity to love is

<sup>1</sup> In an interesting essay on the subject, Lou Andreas-Salomé (*Imago*, 1916, Jahrg. iv., S. 249) has confirmed and developed my suggestion as to the importance of the conflict with the outer world that arises in this situation.

<sup>2</sup> Federn, *Internationale Zeitschrift für ärztliche Psychoanalyse*, Jahrg. i., S. 42-44.

<sup>3</sup> Brill, *Journal of Abnormal Psychology*, August, 1912, Case III.

impeded or paralysed at its very inception. It is only to be expected that any one whose love towards the mother has from the beginning alternated with hate should shew the same alternation towards all secondary love-objects. This seems to me to be the real explanation of the profound ambivalency that runs through the whole of such patients' love-life.

This consideration perhaps also explains—it certainly accords with the fact—why the obsessional neurosis occurs with so much greater frequency in men than in women, or at least it indicates the presence of one more factor in addition to those already pointed out. The effect, namely, of the anal-erotic conflict in women is in harmony with that of the normal incestuous one, whereas in men it stands in contradiction to this. It leads a girl to hate her mother, either consciously or unconsciously, merely a little earlier and a little more cordially than would otherwise have been the case, but her maximum capacity for love—towards her father—is left unimpaired. With a boy, on the other hand, it leads to a much more involved state of affairs; he is hostile to his father for other reasons (*Œdipus-complex*), and now he is made to hate the person whom by nature he is most intended to love—namely, his mother. The paralysis of the capacity to love is therefore necessarily greater in the case of the male, and one cannot help correlating this with the much higher incidence of the obsessional neurosis in the male sex.

Another matter that the preceding association throws more light on is the attitude of defiance towards a stronger person, which is an essential constituent of hate. Since anal erotism is the chief source of the character trait of defiance in general, this being one of the triad of character attributes originally described by Freud,<sup>1</sup> it is probable that from it arises the defiance always found in the obsessional neurosis, just as Federn<sup>2</sup> has suggested it is in the case of that accompanying sadism. In the neurosis it is most often transferred on to the person of the father, who for *Œdipus* reasons is the most suitable object to receive it, the transference being also favoured by the homosexual tendencies that are always abnormally pronounced in this disease.

Before concluding, I may add some further considerations

<sup>1</sup> Freud, 'Charakter und Analerotik,' reprinted in his 'Sammlung kleiner Schriften,' 2<sup>e</sup> Folge, Kap. iv.

<sup>2</sup> Federn, *op. cit.*, S. 42.

as to the part played by anal erotism in the genesis of the obsessional neurosis, and particularly in regard to the sense of power. It is known that one of the most remarkable psychological characteristics of the obsessional neurosis is the patient's inordinate belief in the 'omnipotence of his thoughts' (*Allmacht der Gedanken*), the conviction that his mere wishes are followed by immediate results in the external world.<sup>1</sup> It is further known that ideas of power, just as the allied ones of contempt and of money, are intimately connected with the anal-erotic impulse, a circumstance which Federn<sup>2</sup> relates—rightly or wrongly—to the use that infants make of it to display their power over the persons of their environment. This may explain the bringing of the idea of power into relation with certain definite persons, but there are deeper connections between this idea and anal erotism itself. In his recent work on animism<sup>3</sup> Freud correlated the feeling of omnipotence, of supreme power, with the narcissistic phase of development, which arises through the fusion and directing of the various discrete auto-erotic impulses of infancy, and among these the anal-erotic is certainly one of the two most important. Ferenczi writes:<sup>4</sup> 'Psycho-analytical experience has made it clear to me that this symptom, the feeling of omnipotence, is a projection of the observation that one has slavishly to obey certain irresistible instincts.' This statement applies to anal erotism more strikingly than to any other part of the infantile 'sexual hunger' (*Libido*), and I would relate the sense of compulsion in the obsessional neurosis, one which in its genesis is closely connected with the feeling of omnipotence, in part to the overpowering force with which an anal-erotic desire may present itself.

As is well known, the feeling of omnipotence is in the obsessional neurosis most typically shewn in the belief that has been well called the omnipotence of thoughts, a fact which becomes quite intelligible when we remember that sexualisation of the thought processes is highly characteristic of this neurosis as distinct from any other.<sup>5</sup> Now, I have pointed out else-

<sup>1</sup> See Chapter XXX., p. 534.

<sup>2</sup> Federn, *op. cit.*, S. 41.

<sup>3</sup> Freud, 'Animismus, Magie und Allmacht der Gedanken,' *Imago*, Jahrg. ii., Heft i.; reprinted in his 'Totem und Tabu,' 1913.

<sup>4</sup> Ferenczi, *op. cit.*, p. 183.

<sup>5</sup> See on this matter Freud, *op. cit.*, *Jahrbuch*, Bd. i.

where<sup>1</sup> that both the ideas of speech and of thinking are equivalent in the unconscious with that of passing flatus, which they frequently symbolise in consciousness, and in the light of the preceding considerations I am inclined to think that this bears some relation to the genesis of the patient's faith in the omnipotence of his thoughts. In a recent illuminating essay<sup>2</sup> Ferenczi has divided the development of the sense of reality into four stages, and these stages also represent the progressive series of efforts that the infant has to make in order to retain, so far as is possible, his primary inborn feeling of omnipotence. The third of these stages Ferenczi terms the 'period of omnipotence by the help of magic gestures.' In it the child has to give certain 'signals' to the persons of his environment in order to bring about the alteration it desires in the outer world. Provided only that it gives these signals it can retain its ancient belief in the omnipotence of its wishes, in their power to secure fulfilment. The signals have to be either visible movements—chiefly of the hands—or else sounds, and the latter are evidently the more important, if only for the reason that they are the only ones that can be perceived both by day and by night, both when the nurse is in the same room and when she is in an adjoining one. Amongst these signals, sounds accompanying anal activities play a part second only in significance to the voice itself, so that they constitute one of the chief means through which the infant retains its belief in its omnipotence, a consideration that throws some light on the above-mentioned association between the belief and anal erotism in the obsessional neurosis. The fourth stage of development is called by Ferenczi the 'period of magic thoughts and magic words,' the signalling gestures being here largely replaced by the beginnings of speech, and it is interesting in the present connection that he should at this point refer to a previous article of his in which he shewed that the superstitious belief in the omnipotence of thoughts and words is retained in adult life in connection with obscene words and phrases to a more striking extent than with any others.

<sup>1</sup> 'Die Empfängnis der Jungfrau Maria durch das Ohr: Ein Beitrag zu der Beziehung zwischen Kunst und Religion,' *Jahrbuch der Psychoanalyse*, Bd. vi.

<sup>2</sup> Ferenczi, *op. cit.*, ch. viii.: 'Stages in the Development of the Sense of Reality.'

If followed, however, these considerations would lead us far away from the purpose of the present paper, which was merely to call attention to the prominent part played by anal erotism in the obsessional neurosis and, if possible, to throw some light on the connection between it and hate.

In a subsequent paper<sup>1</sup> Freud has confirmed my conclusions as to the importance of the general association between hate and anal erotism and as to a high development of this combination being the most specific characteristic of the obsessional neurosis. He then proceeds to explain the meaning of this empirically discovered state of affairs. It will be remembered that he conceives of the course of development of the infantile sexuality as consisting first in a grouping together of the originally discrete auto-erotic 'partial impulses' into a whole, secondly in these being directed towards an object, which to begin with is the self (stage of infantile narcissism) and only later is an external object. After the last of these stages is accomplished (the choice of an external object) there emerges from the fused and co-ordinated impulses one which achieves a permanent primacy—namely, the genital erotogenic zone. He now gives a number of grounds for holding that there is normally an intermediate stage between the two last mentioned—that is, after the choice of external object, but before the primacy of the genital zone is achieved—and this he terms the 'pregenital' stage of development.<sup>2</sup> There are perhaps several varieties or sub-stages of this. Two at least are known. The most important is the sadistic-analerotic one discussed above, and the characteristic of the obsessional neurosis is that the regression on which it is based reaches back to its 'fixation-point' in this sadistic-analerotic phase of normal development, a phase that in such patients has, no doubt for congenital,

<sup>1</sup> Freud, 'Die Disposition zur Zwangsneurose,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., Heft 6.

<sup>2</sup> The social consequences of this gain in knowledge will prove to be more far-reaching than might appear. Some years ago, on hearing M. Anatole France make the remark that the two great forces which socialism had to overcome were militarism and capitalism (force and possession), I realised that these corresponded in society with the sadistic and anal-erotic components of the pregenital stage of individual development, so that the world movement to transcend the present pregenital civilisation by developing a higher social level has a profound psycho-biological meaning.

constitutional reasons, never been properly traversed in the course of development.<sup>1</sup>

The other pregenital stage is the 'oral' or 'cannibalistic' phase of development, one to the study of which Abraham<sup>2</sup> has recently made an interesting contribution.

<sup>1</sup> See also Freud, 'Allgemeine Neurosenlehre,' 1917, S. 375 *et seq.*

<sup>2</sup> Abraham, 'Untersuchungen über die früheste prägenitale Entwicklungsstufe der Libido,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, 1916, Jahrg. iv., S. 71.

## CHAPTER XXXII

### PSYCHOSEXUAL IMPOTENCE AND ANÆSTHESIA<sup>1</sup>

THE conditions of psychosexual impotence and anæsthesia constitute, after the various manifestations of fear, perhaps the commonest and most distressing symptom of all forms of neurosis. The interest attaching to them, however, like that of so many psychopathological problems, extends far beyond the purely medical sphere, for they raise both psychological questions of general interest, relating to the nature and development of the sexual instinct, and sociological ones, relating to our institutions and arrangements in the domain of sex, that are of the widest import. Not being a sociologist, I shall leave the latter questions on one side, though I cannot refrain from expressing the opinion that the material provided by the clinical psychologist is worthy of special consideration on the part of sociologists, who will surely build on sand if they ignore it. This paper, therefore, will be concerned with the more individual aspects of the subject.

Like most neurotic symptoms, impotence and anæsthesia lead to distressing effects, not only in the person suffering from them, but also in those in closest contact with him or her. Naturally, in this case the secondary effects apply most to the marital partner, but they radiate to other members of the environment as well, notably to the children, if any. There are interesting differences between the distress caused in the two sexes respectively, as regards both the primary and the secondary effects produced. One striking difference is that the suffering is much more direct in the case of the man, more obviously related to the sexual cause; in the case of the woman the suffering more typically is due to indirect neurotic consequences. It is, further, my opinion, though this is perhaps

<sup>1</sup> Read before the British Society for the Study of Sex Psychology January 18, 1918. Published in the *Journal of Abnormal Psychology*, vol. xiii.



more open to doubt, that whether the symptom be impotence or anæsthesia, in either event it is the man who suffers more.

Taking first the case of impotence, one may say that it is impossible for a man to be a victim of this complaint and yet retain anything like the normal amount of self-confidence and belief in his capacity or value. It is enough for him to have a suspicion of impotence at a time when he has never put the matter to the test, or a fear that at some future time it may come about, for his confidence and capacity in general to be seriously impaired; and if the impotence is complete, then it too often happens that a great part of his thought is taken up with the endeavour to conceal his pitiable state, if not from himself, at least from the world around. An attitude of slinking furtiveness, a constant apprehension of detection, a dread of measuring himself with other men (except in phantasy) or of taking his due place in life, a propensity to suspiciousness in general or to specific phobias—in short, a total inability to hold his head erect and look the whole world in the face,—these are but a few of the familiar symptoms which I need not further enumerate before a non-medical audience. But one must not forget the further group of effects produced by the enforced abstinence, by the impossibility of obtaining any adequate gratification of the 'sexual hunger' (*Libido*), not to mention the third group of symptoms that will almost certainly be present as indirect results of the causes that brought about the impotence itself. When all this is taken into consideration it will be seen that the condition is one of the most distressing that can afflict a man, and that the amount of mental suffering that results from it far outweighs that due to many serious, and even dangerous, physical complaints.

The effects of anæsthesia do not present the same picture. Even in a woman who has previously known what it is to enjoy sexual experiences, and who has then for some reason become anæsthetic, one rarely sees anything like the deplorable sense of inferiority that I have just indicated in the case of men, and there is practically none with women who have never known this experience—*i.e.*, with the worst cases of anæsthesia. In fact, one more often sees the reverse of this—namely, an exaggerated tendency to narcissism, a state of affairs that is partly a cause and partly a result of anæsthesia; the woman, unable to give what the man most wants, attaches in a compensatory way an excessive value to her other charms. What

the woman suffers, therefore, as the result of anæsthesia is for the most part indirect, and springs from the following three sources. In the first place, the 'sexual hunger' that has failed to achieve the normal goal must have done so because it has become attached elsewhere, such as happens in unconscious incestuous fixation. The repression of this always leads, in such cases, to the formation of compromises known as neurotic symptoms, where the repressed tendencies find an unconscious gratification. The commonest outlet is the occurrence of innumerable fears of the various objects and situations in life that can unconsciously symbolise sexual experiences: thus, morbid fears of horses, dogs, mice, snakes, of burglars, tramps, rough soldiers, of powerful inanimate objects such as trains and motor-cars, of surgical operations, of dangerous weapons, from daggers to Zeppelins, and so on. To this comes the 'sexual hunger' that is stimulated by the caresses of married life, but which cannot be gratified. The resentment at being expected to participate in intimate experiences that give no pleasure, and which may even be repugnant, accumulates as time goes on, and is increased by the gradually dawning realisation that she is denied the happiness that other women know.

On the whole the mate of an anæsthetic woman suffers more than the mate of an impotent man, for reasons connected with the difference in the nature of the instinct in the two sexes. As was indicated above, it is also, as a rule, much more direct, for the man is, for physiological reasons, necessarily more conscious of his needs than the woman. It is rare for an anæsthetic woman to have any strong desire for sexual intercourse, though she may, it is true, wish that she had the desire. With men, on the contrary, impotence is generally accompanied by strong sexual desire which they are unable to gratify. This difference in awareness in the two sexes is also present, as a rule, when it is the partner who is at fault.

Steiner,<sup>1</sup> who has had an extensive experience of the subject, states that impotence, and by implication anæsthesia, inevitably leads to shipwreck in marriage. This is obviously a matter where it is hard to be sure, not only because happiness in married life is a relative term, but also because one naturally comes to hear more about the cases where it has failed. Still, I can well believe that a happy married life where the impo-

<sup>1</sup> Steiner, 'Die psychischen Störungen der männlichen Potenz,' 1913, S. 40.

tence or anæsthesia is anything like complete or permanent must be an extremely rare event. I have never personally even heard of an example of it, while the number of cases that in my experience have resulted in shipwreck runs into a good many tens, if not a hundred. The usual course is an increasing resentment, with bickering and quarrelling over trifles, dissatisfaction and discontent, querulous complainings on all possible occasions, with its final outcome in the replacement of love by hate. The disappointed 'sexual hunger' seeks other outlets, either with other people or elsewhere; it often leads, for instance, to exaggerated solicitude and anxiousness for the children, who are reared in the worst kind of atmosphere, and usually become neurotic in consequence.

#### IMPOTENCE.

After these general remarks on the significance of the conditions I will consider them more closely, beginning with impotence; then, in conclusion, I will point out the respects in which the two conditions are similar and dissimilar. The conception of impotence is evidently a relative one. A man may be impotent with women, but not with his own sex; he may be impotent with one woman, but not with another; he may be impotent at some times, and not at others. I take the term to mean 'a complete or incomplete inability satisfactorily to carry out the act of heterosexual coitus *per vaginam*.' The word 'satisfactorily' connotes several things: the mechanism should not be too easily put out of action, there being a reasonable margin here according to average experience—that is to say, while the conditions for its action have, of course, to be suitable and favourable, they should not be too fastidiously specific, such as they were in the oft-quoted case of the man who could not perform the act unless his partner was dressed in a particular and unusual attire; the erection should be adequate; the time period should be under control within certain limits—both extremes are to be met with here, the so common one of *ejaculatio præcox* where emission takes place shortly after or even before penetration, and the rarer one where it is hardly possible, or even impossible, to produce an emission; and, finally, the sensations aroused should be duly pleasurable and not at all painful. It will be noticed that homosexuals would by this definition be regarded as impotent

(except in so far as they are ambisexual), and I think rightly so, however potent they may be with members of their own sex; it must be admitted, however, that both the genesis and the results of the impotence here are in many respects different from those of the other, heterosexual type. I do not know of any statistics as to the frequency of the condition, but I should imagine that only the minority of men pass through life without shewing signs of it at one period or another, though, of course, in varying degree.

The physiology of the condition is somewhat as follows: There is a disharmony present between the two phases of the sexual act, those termed by Moll concretation (to which I prefer Havelock Ellis's term 'tumescence') and detumescence. Typically there is an inhibition of the manifestations accompanying the former phase and an undue excitability of the mechanism characteristic of the second phase. It is probable that there is a direct relationship between these two deviations from the normal, the former of which is the primary. That is to say, the undue readiness to respond on the part of the ejaculatory mechanism is probably the result of the inhibition of the phenomena of tumescence, particularly that of erection; the excitement that is blocked in the one path flows over to the other, efferent one. But we can get no further in physiological language; when we inquire into the nature and source of the inhibition in question we come across factors that can only be described in psychological terminology.

As might be expected, these factors are to be found in the earlier sexual history of the person, and they may for convenience be grouped into three according to the period of their occurrence. On retracing the history one hears in a certain number of cases that the first attempt at sexual intercourse was unsuccessful because of apprehension, and that ever since the patient has suffered from the fear of similar calamities. This factor may have some accessory importance at times, but it cannot be regarded as the specific cause of impotence, for, apart from its inconstant appearance, it obviously does not explain the initial impotence. A more important group of factors belong to the adolescent period preceding the first coitus experience. Most writers on the subject attach weight to excessive masturbation as a cause of impotence, and it certainly seems to be an operative factor in many cases. The way in which it acts, however, is more subtle than is generally

supposed, and will be considered presently in connection with the earlier development of the sexual instinct. Enforced abstinence, with its accompaniment of auto-erotic nocturnal pollutions, I cannot regard as an adequate cause in itself, as many writers maintain, but I have no doubt that it is in a large number of cases an adjuvant cause of some importance. This is naturally denied by most physicians and others who have strong motives for wishing to believe that sexual abstinence can never be harmful, but those who are willing to investigate the matter impartially may be referred to the extensive evidence quoted by Marcuse<sup>1</sup> and also Hirschfeld and Burchard,<sup>2</sup> all of which is independent of the work done by the psycho-analytical school which supports the same conclusion.

There are many references to the topic of impotence in the psycho-analytical literature, the most valuable contributions being those made by Ferenczi<sup>3</sup> and Freud;<sup>4</sup> mention should also be made of the work done by Steiner<sup>5</sup> and Stekel.<sup>6</sup> All these authors ascribe the inhibition underlying impotence mainly to incest fixations in infantile sexual development—Steiner, for instance, calls them the factor *par excellence*—and I can amply confirm this conclusion from my own experience. In addition to this there are two other factors relating to the infantile period of development—namely, fears in connection with early sexual activities, and influences affecting the boy's attitude towards the female genitalia. These three factors will now be considered in this order.

According to Freud, the essential feature in the psychology of impotence is that two trends which should become fused

<sup>1</sup> Marcuse, 'Die Gefahren der sexuellen Abstinenz für die Gesundheit,' 1910, S. 54-58.

<sup>2</sup> Hirschfeld and Burchard, 'Zur Frage der psychischen Impotenz als Folgeerscheinung sexueller Totalabstinenz beim Manne,' *Sexual-Probleme*, 1913, S. 252.

<sup>3</sup> Ferenczi, 'Analytische Deutung und Behandlung der psychosexuellen Impotenz beim Manne,' *Psychiatr.-Neurolog. Wochenschrift*, 1908 (reprinted in his 'Contributions to Psycho-Analysis,' Engl. Transl., by Ernest Jones, 1916); 'Parästhesien der Genitalgegend bei Impotenz,' *Internat. Zeitschr. f. Psychoanalyse*, 1913, S. 379.

<sup>4</sup> Freud, 'Über die allgemeinste Erniedrigung des Liebeslebens,' *Jahrbuch der Psychoanalyse*, 1912, Bd. iv., S. 40.

<sup>5</sup> Steiner, *op. cit.*, and 'Die funktionelle Impotenz des Mannes,' *Wiener Med. Presse*, 1907, Nr. 42.

<sup>6</sup> Stekel, 'Nervöse Angstzustände und ihre Behandlung,' 2<sup>e</sup> Aufl., 1912, cap. xxiv.

harmoniously together have failed to do so. These are the sentiments of tenderness and of sensuality; by the latter is meant what is popularly called sexuality in the narrow sense. The first of these is genetically the older, is partly egoistic in its origin, and is first manifested in regard to the mother, older sister, or nurse. From the beginning it has distinct erotic components, which grow in strength as time goes on. They are constantly directed away from a sexual goal that they would spontaneously aim at, by the inhibiting action of the incest barrier. At puberty there is added a powerful current of unmistakable sensuality, which always at first attaches itself in the unconscious to the early incestuous objects of affection. Normally, however, all these trends become weaned and detached from the forbidden objects and seek gratification with an accessible object outside the family. If this is successfully accomplished the two sentiments of tenderness (love) and sensuality combine, and the loved object becomes endowed with the highest possible degree of value for the person.

Only too frequently, however, matters do not proceed so smoothly, and the fusion of the two sentiments is incomplete or does not take place at all. Manifold factors can operate in bringing about this failure. Inaccessibility or unattractiveness of the new object, enforced abstinence, etc., can hinder the normal development, as can on the other side undue attraction of the original Imago, to whom the feelings have got inseparably anchored. In the latter case the most usual result is masturbation to the accompaniment of libidinous phantasies. In these phantasies the actual forbidden object is replaced by new ones, but this is a change only in phantasy and does not represent any progress in the real development of the 'sexual hunger.' In the person's relation to actual women there is a double attitude, corresponding to the two ununited sentiments. On the one hand, he can fall in love with one type of woman, one who has traits that unconsciously remind him of the Imago, but he finds it impossible to bring sensual thoughts into relation with her, and if he marries her he is impotent. On the other hand, he is capable of sexual excitement, and usually of sexual acts, with women of another type—namely, one for whom he feels neither respect nor tenderness; thus, typically, prostitutes. There are many men who, impotent with the woman they love, can develop high

sexual capacity and pleasure with an inferior woman, with whom ethical and æsthetic scruples need not be considered, and who is a complete stranger. I commend this fact to the attention of social reformers, for it shews that prostitution is not altogether a mere *faute de mieux* replaceable, for instance, simply by making early marriage possible. It is likely that we have here also the explanation for the frequency with which men marry women of a lower class than their own and of an inferior stamp to themselves.

The second infantile factor leading to impotence is the fear of punishment for sexual activities. This always ultimately takes the form of punishment inflicted on the offending member, the penis—*i.e.*, some form or other of castration. The actual threat that the member will be 'cut off' or 'taken away' is common enough in childhood, and even when it is not made it is readily imagined by the boy, on the logical principle of the talion ('If thy right hand offend thee, cut it off'). The punishment is usually, of course, for investigation or manipulation of the penis, though it may arise in connection with other sexual interests—*e.g.*, urination—or with castration wishes directed against the sexual rival, the father. When, now, one remembers that the habitual masturbation of adolescence is usually a revivifying of infantile activities, and that it is frequently accompanied by phantasies of incestuous origin, the excessive remorse, conflict, and dread that is so common in connection with it become more intelligible. It is also plain that this second factor is often very closely associated with the first one discussed above. I quite agree with Ferenczi's<sup>1</sup> general statement that 'next to unconscious (onanistic) incest-phantasies, fears of castration are the most frequent cause of psychical impotence; most often both are the cause (dread of castration on account of incest-wishes).'

The third factor concerns the attitude towards the female genitalia, and there are two matters to be mentioned here. If the presence of a penis in the object is necessary to produce sexual excitement—*i.e.*, if the man is a complete invert—then he will of course be impotent with women. Apart from this, however, there is in many men a curiously close association between the female genitalia and the organs of excretion, the whole being conceived of as a common cloaca. In such circumstances a varying degree of repulsion and disgust has to

<sup>1</sup> Ferenczi, *Zeitschrift*, *op. cit.*, S. 380.

be overcome before sexual pleasure is possible, and the association in question can very well be a serious hindrance that will aid other factors in bringing about a state of impotence.

A word may be said as to the outlook in cases of psychical impotence. In my experience the condition is curable with either extreme ease or extreme difficulty. In the former event a few words of reassurance and advice, the latter including abstinence for a couple of months, is enough to restore the potency that has temporarily been lost. In the latter event a thorough course of psycho-analysis may be necessary to remove the causative agents, and I feel sure that there are a number of cases that cannot be cured in any other way.

#### ANÆSTHESIA.

The frequency-incidence of sexual anæsthesia in women is a much debated but rather fruitless topic. Statistics are given that vary from 25 to 50 per cent., those of Otto Adler,<sup>1</sup> who is one of the most experienced observers, being 33 per cent. It is a difficult matter to obtain reliable data on; the frequency must vary in different nations and in different social strata, and, as most writers do not distinguish clearly enough between absence of pleasurable sensation and absence of orgasm, it is not possible to make at all accurate statements in terms of percentages. What can be asserted without fear of contradiction is that a very considerable number of women never experience any pleasurable sensation whatever, that a much larger number experience it in only a slight degree and without ever knowing in their own life what an orgasm means, and that with only the minority of women is the capacity for full sensation and orgasm properly developed. In other words, the majority of women, like the majority of men, shew imperfections in their capacity for the sexual act.

The fundamental causes of anæsthesia are the same as those of psychical impotence, though they operate in rather different ways, but there are considerable differences in the more accessory causes. By the fundamental cause I mean the incest complexes described above in connection with the problem in men. The fate of the two sentiments of tenderness and sensuality which fail to unite, is, however, not quite the same

<sup>1</sup> Otto Adler, 'Die mangelhafte Geschlechtsempfindung des Weibes,' 1904, S. 13, 14.



as in the case of men. The former sentiment is gratified rather in self-love, narcissism, than in love of the object, and there is rarely to be found that extraordinary over-estimation of the sex object that is so characteristic of men's love for women. With this is doubtless to be connected the fact that women rarely shew the craving for an inferior object with whom to gratify their sensual desires in the way that was described above as occurring with so many impotent men. One may say that the women who run away with a man of an inferior social standing, their coachman or chauffeur, are for the most part of a masculine type. But instead of this curious trait, so common in men thus afflicted, the anæsthetic woman often shews another trait that is much less marked with men—namely, a close association between the feeling of sexual excitement and the idea of prohibition. This difference is probably due to the circumstance that as a rule men break through the prohibitions of the period intervening between puberty and marriage much more often than women. What is stamped on the sexual attitude of this period in the two cases is carried over into the later sexual life: thus, impotent men associate their attitude in this period with experiences with inferior women, both on grounds of accessibility and for the neurotic reason expounded above, and find it hard later to dissociate the two ideas and thus remain impotent with the woman they love; while women associate their attitude in this period with the sense of prohibition, and so find it hard later to separate the two. Such women often strive to keep the sense of naughtiness, wickedness, or at least secrecy, for it is only when they have this sense that they are capable of experiencing pleasure and of gratifying their sensuality. They love to keep their engagement, or even their marriage, secret; in married life they often are unfaithful to their husband, with whom they are anæsthetic, and are capable of experiencing sexual pleasure with some one else, the necessary condition of forbiddenness being here present.

The second factor mentioned in the case of men, that of punishment in regard to auto-erotic activities, takes a different form in the case of women. With them the equivalent of castration is the fear that their hand will be cut off or the phantasy that they once had a penis which has been cut off. The voluptuous phantasies accompanying masturbation are of the same nature and have the same effects as those of men.

But the other connections and effects of masturbation differ markedly according to its type. The rarer one, vaginal masturbation, is less harmful from the point of view of future potency than the much commoner one of clitoris masturbation. Persistence of clitoris masturbation is one of the most important agents in leading to anæsthesia, because it means fixation on the infantile, male form of sexuality and so prevents the development of the adult feminine form—namely, vaginal sensibility. The circumstance that the primacy among the various erotogenic zones has in the case of the female to pass over from one region to another during the transition from girlhood to womanhood—namely, from the clitoris to the vagina—whereas it remains throughout life in the same region in the case of the male, is one fraught with potential difficulties for the normal development of the sexual instinct in women, and is perhaps the main reason why neurotic deviations are commoner than with men. It is, for instance, closely bound up with the problems of narcissism and homosexuality in women, components the exaggeration of which play a comprehensible part in the production of anæsthesia. This anatomical transition, from the clitoris to the vagina, is almost comparable in importance to the psychological transition from the infantile sexual object in the family to the adult object—namely, the lover; but, whereas men have to deal with only the difficulties of this latter transition, women have to deal with those of both, to change their object and to reverse their sexual attitude. This is so in any event, but the difficulty is materially increased in cases of prolonged clitoris masturbation, which makes it much harder to renounce the infantile attitude that is bound up with the sensations derived from the clitoris.

Of the third factor, the attitude towards the genitals themselves, something has already been said. The size of the male organ is often a matter of some importance. Some women are astonished and alarmed at finding it larger than they had expected, an attitude which may be due to excessive psychological attachment to the sight of a boy's organ, but which is more often a sign of narcissism, the resentment being due to a comparison between the organ and their own clitoris, its homologue. More often one hears of disappointment at finding the organ smaller than was expected, this coming from an exaggerated idea of it having been formed from an infantile imagination, or occasionally sight, of the father's organ. In a few cases I have

found anæsthesia contributed to by the persistence of an infantile idea that the male organ, seen in a boy, was of adventitious origin and associated with excrement. Then there is a point of some importance in regard to the attitude towards the female genitalia themselves. It is very common indeed for girls to grow up without ever having digitally explored the vagina or even without knowing of its existence; with such girls it is natural that they should conceive of the menses as being some form of excretion, and, indeed, they often imagine that the flow emanates from the urethra.<sup>1</sup> Not knowing of the existence in them of any specifically sexual organs—in any case the invisibility of these strikingly contrasts with the anatomy of the male—they find it hard in later life to dissociate sensual feelings from those investing the processes of excretion, notably disgust. These anatomical considerations also explain the illusion so widespread among women that sexuality is a peculiarly male attribute, to which they are unfortunate victims, an idea that has far-reaching social consequences when applied by women of the militant 'feminist' school.

This is a suitable connection also to mention the most popular medical view concerning anæsthesia—namely, that it is due to dread of pregnancy.<sup>2</sup> There is a great deal of truth in this view, but the factor is not so primary as is generally supposed. It has three deep roots in infantile life. On the one hand, the desire for a baby is very early with most girls, and usually takes the form of the wish that their father would present them with one; the desire thus early gets associated with forbidden incestuous thoughts, and may retain guilty feelings throughout life. In the second place, the incomprehensibility of the phenomenon of child-birth, through complete ignorance of the extensibility of the vaginal tissues, leads to it becoming associated with a violent tearing or cutting open of some part of the body, and hence with the sadistic conception of coitus so common in childhood. From this results the exaggerated fear that so many women have of the

<sup>1</sup> This association between menstruation and excretion is of considerable importance in neurotic symptomatology, and has also played an extensive part in the anthropology of sex. It goes far to explain the curious rituals and beliefs concerning the uncleanness of menstruation, which Van Waters has made a valuable collection of, without, however, elucidating them (*Journal of Religious Psychology*, vols. vi. and vii.).

<sup>2</sup> See, for instance, Otto Adler, *Sexual-Probleme*, Jahrg. viii., S. 12.

pains of labour, one frequently fostered, it is true, by the sensational stories of their friends and nurses. In the third place, there are both physiological and psychological reasons why the process of child-birth constantly becomes identified in the unconscious with the act of defæcation, an association that in a number of ways affects the woman's attitude towards the matter of pregnancy. These are a few hints thrown out that could be very much amplified, but perhaps enough has been said to indicate that the idea of pregnancy is not so unitary and simple as might be imagined. They will be found also to throw some light on the often observed relation between pregnancy and anæsthesia. This in many cases greatly diminishes after the first conception, an event due not solely, as is commonly thought, to the deepened love between the man and wife, but still more to the replacement of the imaginary and guilty pregnancy by a real pregnancy for which she receives praise and admiration. The opposite result is just as often seen after the woman has borne as many children as, for financial or other reasons, she wishes to, for then the fact that the possibility of pregnancy is to be dreaded and avoided causes a reversion to the older sources of dread and guilt in this association.

#### SUMMARY.

We have seen that the phenomena of psychical impotence and anæsthesia have much in common, but that there are some striking differences between them. It is probable that on the whole the condition is more extensively present in women than in men, but that men suffer more than women in regard to it, certainly more directly. Of all neurotic conditions it is the one that produces the gravest disharmony, as regards both the social value of the person afflicted and his marital and family life.

In both sexes the most important single cause, which may well be called the specific cause, is unconscious incestuous fixation dating from early childhood, the effect of which is that the sentiments of tenderness and sensuality remain distinct instead of fusing harmoniously as they should. The adolescent's possibilities of overcoming this are obviously diminished by the strictness with which total abstinence is ordained for the period between puberty and marriage, a period that commonly covers the fifteen or twenty most active years of sexual

vigour. At the same time the unconscious fixation is often strengthened by habitual masturbation with its intrapsychical conflicts. In the struggle to overcome these difficulties the victim of impotence or anæsthesia is in the majority of cases successful only at the cost of establishing an unfortunate association between sexual excitement and a given mode of conduct, which is different in the two sexes; this is, in the man's case, a demand for absence of ethical, social, and æsthetic standards on the side of the partner, and in the woman's case clandestinity and prohibition. Thus in a large number of typical cases potency is incompatible with marital fidelity, and can be attained only at the cost of adultery. It is often said that the phenomena of adultery and prostitution are dependent on irremovable features of human nature and social organisation—the former being dependent on polygamous and polyandrous propensities, and the latter on the inaccessibility of legitimate sexual objects. However true this may be, the clinical psychologist is bound to point out that the phenomena in question are certainly also dependent, in part at least, on purely neurotic tendencies, on the existence of psychosexual impotence and anæsthesia.

There are more important differences than the one just mentioned in the relation of men and women respectively to sexual incapacity. Two features of the situation are especially unfavourable in the case of men and two in that of women. The former two are these. First, the sexual mechanism is more delicate in the case of men, and therefore much more susceptible of being disturbed. The main reason for this is the existence of the process of seminal ejaculation, an exclusively male phenomenon. Impotence, in fact, chiefly comes about through a disturbance of the harmonious relation between the two components of coitus—tumescence and detumescence. Secondly, it is both biologically and psychologically much more important that sexual capacity should be unimpaired with men than with women, and the results of such impairment are correspondingly graver. It is obvious that sexual incapacity in a man takes away the possibility of coitus, and therefore, practically always, of fertilisation, whereas in a woman it has neither of these effects. To a man coitus means an act to be performed, to a woman it means an event to be experienced; for a man the capacity to enjoy sexual pleasure is essential for the performance of what is expected of him, while for a woman

it is *much more* in the nature of a luxury, though it certainly cannot be described as being only this.

Of the features unfavourable to women the more important is the circumstance that in the course of development the main sexual sensibility has to be transferred from one region to another, from the clitoris to the vagina, a process that frequently fails to be consummated. The nearest analogy to this in the male is the development, at the time of puberty, of seminal ejaculation, one also that brings with it many difficulties in adjustment. In the second place, the association between excretory functions and sexual processes is for several reasons much closer in the case of the woman, and is correspondingly hard to sever. In the same connection should also be mentioned the importance, social and psychological, of pregnancy, a phenomenon that focusses most of the factors leading to anæsthesia in women.

I will close with a few general remarks suggested by the facts of impotence and anæsthesia. In Freud's judgement, psychical impotence is in no sense an isolated occurrence, but a feature that to a greater or lesser extent characterises the sexual life of all civilised men. The causes we have traced to various repressions in the course of individual development. But there is reason to think that the state of affairs would not be so very dissimilar if the social restrictions on sexuality were greatly diminished, for this seems to be accompanied—as, for instance, during the decay of the civilisations of antiquity—by a serious loss in the value of love and of life altogether. One cannot avoid the thought that there must be something in the nature of the sexual instinct itself that is not conducive to the attainment of full gratification—at all events in the presence of any form whatever of civilisation. Freud<sup>1</sup> points out two features that are probably of fundamental importance in this connection: first the fact that, as a result of the incest barrier, the sexual object is always merely a substitute for the original one, which the unconscious never surrenders the hope of; and secondly that nothing can alter the anatomical fact of the proximity of the sexual organs to those of excretion, one that stands in inevitable conflict with the æsthetic demands of civilisation. So far as can be seen at present, and subject to unpredictable increases in our knowledge, there seems to be an unavoidable incompatibility between the demands of civilisation and the possibility of complete development of sexual capacity.

<sup>1</sup> Freud, *op. cit.*, S. 49.

## CHAPTER XXXIII

### WAR SHOCK AND FREUD'S THEORY OF THE NEUROSES<sup>1</sup>

A MATTER that used to hamper the opponents of psycho-analysis to some extent was that there was no alternative theory of the neuroses seriously tenable. It was clearly impossible to explain all neurotic manifestations by the catchword use of the two terms 'heredity' and 'suggestion,' for our conceptions of heredity, however important in this connection they may well become in the future when more is known of the subject, are at present too vague to explain any complex psychological phenomena, and the idea of suggestion merely introduces yet another problem without solving any of the old ones.

The experience of neurotic affections engendered by the war, however, has enabled the critics of psycho-analysis to put forward the view that the factors invoked by Freud in explanation of these affections need not be present, and therefore cannot be regarded as essential, in the way maintained by him, whereas, on the other hand, a different set of factors is undeniably present and operative; not only so, but these latter factors are held to be all-sufficing, so that it is not necessary to search for any others in the ætiology of the conditions in question. Some opponents of psycho-analysis, particularly those more concerned with combating an unwelcome theory than with ascertaining truth, have even maintained that the experience of the war has proved *all* Freud's views to be utterly untenable and false.

It would be easy to criticise the standpoint thus adopted, though that is in no sense my purpose here. Two points alone may be raised. If, as some writers assert, the strain of war

<sup>1</sup> Read before the Royal Society of Medicine, Section of Psychiatry, April 9, 1918. Published in the Proceedings, vol. xi.

conditions is in itself sufficient to account for the development of a psychoneurosis without the introduction of any other factor, then how is one to explain the actual incidence of war neuroses? Neurotic symptoms amounting to a definite clinico-pathological condition are by no means so common as is sometimes stated. I do not know of any statistics on the matter, but I should be surprised to hear that more than 2 per cent. of the Army serving in France are affected in this way. This consideration in itself shews that some other factors than war strain must be involved, factors relating to the previous disposition of the men affected, and the problem is to determine what these are. In the second place, as to the dogmatic assertion that Freud's theory of the psychoneuroses cannot apply to those arising under war conditions. An essential feature of this theory is that psychoneuroses result from unconscious mental conflicts. To ascertain whether these are operative in a given case, therefore, it is obviously necessary to employ some method, such as psycho-analysis, which gives access to the unconscious. It may, I think, be taken as certain that those who deny the action of these conflicts in either the war neuroses or in what, by way of contradiction, must be called the peace neuroses have not thought it necessary to use any such method, and they thus place themselves in a position very similar to that of a writer who would on *a priori* grounds deny the details or even the existence of histology without ever having looked through a microscope, the only avenue to histology. I choose this simile because it seems to me that the relation of psycho-analysis to clinical psychiatry is not at all inaptly described<sup>1</sup> as being like that of histology to anatomy. Or one might draw an analogy from a strictly medical field. If some one were to take a series of cases of tuberculosis supervening on measles or typhoid, and then maintain that because this ætiological factor was present therefore no micro-organism could be, so that Koch's views as to the causation of tuberculosis were entirely unfounded, one would surely have the right to ask whether any search for the bacillus had been made in the cases in question, and to satisfy oneself that the observer had grasped the difference between essential and merely exciting causes of disease. If the answer to both these inquiries were in the negative, I think it will be agreed that no great weight would be attached to the

<sup>1</sup> By Freud, 'Allgemeine Neurosenlehre,' 1917, S. 286.



claim that Koch's theory of the nature of tuberculosis had been demolished. Yet this is precisely the order of scientific thinking evinced by those who maintain that Freud's theory of the neuroses has been demolished by the simple observation that they may manifest themselves under the stress of warfare.

I do not mean, however, to assert the contrary of this proposition—namely, that the validity of Freud's theory has been proved in the case of war neuroses, as I should maintain it has been in the case of peace neuroses. I simply hold that the matter is at present *sub judice*, and must remain so until sufficiently extensive investigations shall have settled the question one way or the other. It so happens that the traumatic neuroses are the field in psychopathology that has hitherto been the least explored by psycho-analysis even in peace-time, while the opportunity of psycho-analytic investigation of the war neuroses has, in this country at least, been so meagre that the time is not ripe for any generalisation on the subject. Personally I have examined a considerable number of cases in the cursory way that is usual in hospital work, but I have been able to make an intensive study of only some half-dozen cases, and I do not know of any other cases that have been investigated by the psycho-analytic method. In spite of this paucity of material, a feature inherent in intensive work, the critic of psycho-analysis may legitimately demand of the analyst, who advances considerable pretensions in regard to understanding the pathology of neurotic affections in general, that he should be able to formulate at least some tentative conception of the relation between the phenomena commonly observed in the war neuroses and the psycho-analytical theory. In the following remarks an attempt will be made to meet this demand, although, as has just been explained, there can be no question of solving the numerous and as yet unstudied problems raised by the observations made in connection with war shock.

It is desirable in the first place to clear away some general misconceptions on the subject. The task of assimilating our new experiences in connection with the war with any previously held theory of neurotic affections has undoubtedly been rendered more difficult by the attitude of those workers whose interest in such problems is of contemporary origin. They lay much too much emphasis on the newer and perhaps more sensational aspects of the phenomena observed, instead of trying to correlate the more familiar and better understood

ones. This attitude has been so pronounced with some writers that one might almost imagine that before the war there had never been such calamities as wrecks, earthquakes, and railway accidents, and that men had never been tried to the limit of their endurance with privation, fatigue, and danger, while familiar symptoms like hysterical blindness and paralysis are thought worthy of detailed description and are treated almost as novelties in psychological medicine. So far as I know, however, although some symptoms—*e.g.*, dread of shells—assume a form that is coloured by war experiences, no symptom, and hardly any grouping of symptoms, occurs in war neuroses that is not to be met with in the neuroses of peace, a fact which in itself would suggest that fundamentally very similar agents must be at work to produce the neurosis in both cases.

Another very prevalent misconception, one strengthened by the official use of that unfortunate catchword 'shell-shock,' is that war neuroses constitute a more or less unitary syndrome. It is so often forgotten that the term 'shell-shock' can only mean, and no doubt was originally intended to mean, a certain ætiological factor, and not the disease itself. I have preferred to use the less ambiguous and more obviously ætiological term 'war-shock,' one coined, I think, by Eder.<sup>1</sup> Even when the term 'shell-shock' is avoided, its place is usually taken by the all-embracing expression 'neurasthenia'—in most cases, in fact, where there are no physical symptoms of hysteria present. True neurasthenia in its strict sense, on the contrary, is a relatively rare complaint, certainly in anything like a pure form; I have not come across a single case myself in connection with the war. The results of war strain are anything but unitary; most of the diverse forms of neurosis and psychoneurosis are found to be represented, and until these are adequately distinguished one from another it is impossible to make any satisfactory study of their individual pathology. A further point still more often overlooked, and perhaps even more important, is that not only are the results diverse, but the ætiological factors concerned in war strain are much more complex than is sometimes realised. Careful study of the cases shews that what was the most important pathogenetic agent with one patient had nothing to do with the neurosis of a second patient, although he may have been equally ex-

<sup>1</sup> Eder, 'War Shock,' 1917.

posed to its influence. For instance, the sight of a near friend being killed may have greatly affected one soldier and been closely related to his subsequent neurosis, whereas with a second patient who has gone through the same experience there may be no connection between it and *his* neurosis; the same applies to the other painful features of warfare, the tension of waiting under shell fire, the experience of being buried alive, and so on. These considerations indicate the great importance of the individual factor predisposing to particular neurotic reactions, and point to the necessity for careful dissection of the various pathogenetic factors in a number of cases before making generalisations as to the way in which the numerous separate influences grouped together as war strain may operate.

Coming now to the points of contact between war experience and Freud's theory, one may remark, to begin with, how well the facts of the war itself accord with Freud's view of the human mind as containing beneath the surface a body of imperfectly controlled and explosive forces which in their nature conflict with the standards of civilisation. Indeed, one may say that war is an official abrogation of civilised standards. The manhood of a nation is in war not only allowed, but encouraged and ordered to indulge in behaviour of a kind that is throughout abhorrent to the civilised mind, to commit deeds and witness sights that are profoundly revolting to our æsthetic and moral disposition. All sorts of previously forbidden and buried impulses, cruel, sadistic, murderous, and so on, are stirred to greater activity, and the old intrapsychical conflicts, which, according to Freud, are the essential cause of all neurotic disorders, and which had been dealt with before by means of 'repression' of one side of the conflict, are now reinforced, and the person compelled to deal with them afresh under totally different circumstances.

It is plain, as MacCurdy has well pointed out,<sup>1</sup> that men entering the Army, and particularly on approaching the battlefield, have to undergo a very considerable readjustment of their previous attitudes of mind and standards of conduct, a readjustment which is much greater in the case of some men than in that of others, and also one which some men find it much more easy to accomplish satisfactorily than do others. The man's previous standards of general morality, of cleanli-

<sup>1</sup> MacCurdy, 'War Neuroses,' *Psychiatric Bulletin*, July, 1917, pp. 252, 253.

ness and æsthetic feeling, and of his relation to his fellow-man, have all to undergo a very considerable alteration. In all directions he has to do things that previously were repugnant to his strongest ideals. These ideals are ascribed by some—*e.g.*, Trotter<sup>1</sup> and, following him, MacCurdy—to the operation of the herd instinct, in other words to the influence of the social *milieu* in which he may happen to have been brought up. I think personally that behind this influence there are still deeper factors at work of a more individual order, derived essentially from hereditary tendencies and the earliest relation of the child to its parents. However this may be, it is certain that every one has such ideals, though he may not describe them under this name, and that in the course of development he insensibly builds up a series of standards of which his ego approves—and which I therefore propose to refer to by Freud's term of the 'ego ideal'—together with a contrasting series of which his ego disapproves.

As every student of genetic psychology knows, this gradual building up is never performed smoothly, but always after a number of both conscious and unconscious internal conflicts between the conscious ego on the one side and various impulses and desires on the other, after a series of partial renunciations and compromises. Further, it is exceptional for the whole result to be satisfactory; there always remain certain fields—more especially in the realm of sex—where the resolution of the conflict is an imperfect one, and it is just from this imperfect resolution that, according to Freud, neurotic affections arise. The question whether a neurosis will result in a given case is essentially a quantitative one. The mind has the capacity of tolerating without harm a certain amount of stimulation from these internal impulses and desires that are not in unison with the ego, and when this limit is passed the energy derived from them flows over into neurotic manifestations. The mind has several methods for dealing with the energy of the anti-ego impulses successfully—that is to say, without the impairment of mental health—and it is only when these methods are inadequate to deal with the whole that neurosis ensues. Two of these methods may especially be noted. One is the deflection of the energy in question from its primitive and forbidden goal to another one in harmony with the more social standards of the ego; as every schoolmaster knows, sport is an excellent example of

<sup>1</sup> Trotter, 'Instincts of the Herd in Peace and War,' 1916.

this. When the primitive goal was a sexual one, this process of deflection, here on to a non-sexual goal, has been given the name of 'sublimation,' but there are similar refining and modifying processes at work in connection with all anti-ego impulses—*e.g.*, cruelty. A second method is to keep the energy in a state of repression in the unconscious, the conscious mind refusing to deal directly with it and guarding itself against its influence by erecting a dam or barrier against it, known as a reaction-formation. Thus in the case of primitive cruelty, a cruel child may develop into a person to whom the very idea of inflicting cruelty is alien and abhorrent, the original impulse having been quite split off from the ego into the unconscious and its place taken in consciousness by the reaction-formation barrier of horror and sensitiveness to pain and suffering. In such ways as these a state of practical equilibrium is attained in the normal, the power of the ego-ideal having proved sufficient either to utilise for its own purposes (by means of modifying) or to keep at bay the impulses and desires that are out of harmony with it. In some people the state of equilibrium thus attained is of considerable stability; they have what is popularly called a reserve of mental and moral force with which they can meet disappointments, difficulties, and emergencies of various kinds in life, which means in practice that their capacity for readjustment to radically new situations is fairly elastic.

Now, on approaching the field of war the readjustment necessary is one of the more difficult ones experienced in life, although it is by no means so difficult as can arise in various situations appertaining to the field of sex. It is an adjustment which practice shews is possible to the large majority of men, but there is no doubt that the success with which it is carried out is extremely variable in different people; and it probably varies in the same person from time to time for either internal reasons or for external reasons relating to the precise environment at the moment, to the precise war experiences through which they may be passing. It is further clear that the readjustment is likely to vary in its success almost entirely with the success with which the earlier adjustments were made during the development of the individual. This statement is meant to carry more than its obvious meaning that the more stable a man is the more surely can he meet the problems and difficulties of warfare: it has a deeper implication. Namely, there is an important relationship between the two phases of difficult ad-

justment, the current one and the older one. Fundamentally it is the same difficulty, the same conflict; it is only the form that is different. Let us suppose, for instance, that the original difficulty in adjustment was over the matter of cruelty, that in childhood the conflict between strong tendencies of this kind and perhaps specially strong ideals of the contrary sort was an exceptionally sharp one, so that it was never very satisfactorily resolved, though a working equilibrium may have been established on the basis of powerful reaction-formations and various protective devices for avoiding in every possible way contact with the subject of cruelty. Such a man may well have unusual difficulty in adapting himself to the cruel aspects of war, which really means that his long-buried and quite unconscious impulses to cruelty, impulses the very possibility of whose existence he would repudiate with horror, are stimulated afresh by the unavoidable sights and deeds of war. In bayonet practice, for instance, the man is taught how best to inflict horrible injuries, and he is encouraged to indulge in activities of this order the very thought of which he has all his life been trying to escape from. He now has to deal afresh with the old internal conflict between the two sides of his nature, with the added complication that there has to take place an extensive reevaluation of his previous standards, and in important respects an actual reversal of them. He has to formulate new rules of conduct, to adopt new attitudes of mind, and to accustom himself to the idea that tendencies which he had previously disapproved of with the whole strength of his ego-ideal are now permissible and laudatory under certain conditions. One would get a very erroneous view of the picture I am trying to draw if one imagined that the process of readjustment in question goes on in the person's consciousness. This is never entirely true, and often not at all true; the most important part of the readjustment, and often the whole part, is quite unconscious. We thus see that to obtain a proper understanding of the problems of an individual case, and to be able to deal with them practically in therapeutics, it is often necessary to appreciate the relation between a current conflict and an older one, for the real strength and importance of the current one is often due to the fact that it has aroused buried and imperfectly controlled older ones.

I have taken the one instance of cruelty, but there are many others in connection with warfare. It may, indeed, be said in

general that the process of re-adaptation in regard to war consists of two distinct sides: on the one hand, war effects an extensive release of previously tabooed tendencies, a release shewn in endless ways—for instance, even in the language of camps; and on the other hand, the acquiring of a strict discipline and self-control along lines widely different from those of peace-times. The one is a correlative of the other, and we have perhaps in these considerations a psychological explanation of the feature of military life that is so puzzling to most civilians—namely, the extraordinary punctiliousness that a rigid discipline attaches to matters which to the outsider appear so trivial. An undisciplined army has always been the bane of commanders, and perhaps the risks attaching to indiscipline are related to the release of imperfectly controlled impulses that war deliberately effects.

The way in which a relative failure in war adaptation may lead to a neurosis can be illustrated by a parallel drawn from the more familiar problems of peace neuroses. Imagine a young woman who has never been able to reconcile the sexual sides of her nature with her ego-ideal, and whose only way of dealing with that aspect of life has been to keep it at as great a distance from her consciousness as possible. If now she gets married, it may happen that she will find it impossible to effect the necessary reconciliation, and that, being deprived of the *modus vivendi*—namely, the keeping sexuality at a distance—which previously made it possible to maintain a mental equilibrium, she develops a neurosis in which the repressed sexual desires achieve a symbolic and disguised expression. Similarly in a war neurosis when the old adjustment between the ego-ideal and the repressed impulses is taken away, it may prove impossible to establish a fresh one on the new conditions, and then the repressed impulses will find expression in some form of neurotic symptom.

So far as I can judge, the specific problems characteristic of the war neuroses are to be found in connection with two broad groups of mental processes. One of these relates to the question of war adaptation considered above, the other to that of fear. The latter is hardly to be regarded as a sub-group of the former, inasmuch as there is no readjustment or transvaluation of values concerned, as there typically is with the former. The moral attitude towards fear, and the conflicts arising in connection with it, remain the same in war as in

peace. In both cases it is considered a moral weakness to display or be influenced by fear, and especially to give in to it at the cost of not doing one's duty. The soldier who would like to escape from shell fire is, so far as moral values are concerned, in the same position as a man in peace-time who will not venture his life to save a drowning child. Indeed, the conflict cannot be as sharp in the case of the soldier, for he would find very widespread and thorough sympathy for his quite comprehensible desire, and there would be much less social blame or guilt attaching to him than to the man in the other situation mentioned. So that the problem of fear, which we all agree plays a central part in connection with the typical war neuroses, seems to be apart from that of war adaptation in general as expounded above.

Before discussing the problem of fear, however, I should like at this point to review the position and see how far we have got in the attempt to approximate the facts of war neuroses to the psycho-analytical theory. This theory of the neuroses is a very elaborate one, including many problems of unconscious mechanisms, distinctions between the predispositions and mechanisms characteristic of the different neuroses, and so on, but it is possible to formulate the main principles of it along fairly simple lines, and I now propose to do this in a series of statements.

1. The first principle in Freud's theory of neurotic symptoms is that they are of volitional origin. This principle, long suspected by both the medical and the lay public, and the real reason why in the past they have been so confounded with malingering, would be at once evident were it not for the fact that it is not true of volition in the ordinary sense of conscious deliberate voluntary purpose. In other words, it is not true of the will as a whole, but only of a part of it—namely, a part that the patient is not aware of. Thus, neuroses are not diseases or accidents that happen to a person, as the French school of psychopathology maintains, but are phenomena produced and brought about by some tendency in the person's mind, and for specific purposes. Freud distinguishes three classes of motives that operate in this way, one essential, the other two not. The indispensable one is an unconscious desire to obtain pleasure by gratifying in the imagination some repressed and dissociated impulse, a motive, therefore, arising in the part of the mind that is not in harmony with the ego-ideal. A second motive



is to achieve some end in the outer world; for instance, sympathy from an unkind husband, which the person finds easier to do by means of a neurosis than in other ways. The third set of motives has the same purpose as the last, but may be distinguished from it in that they concern the making use of an already existing neurosis rather than the helping to bring one about. Both the latter sets are usually, but not always, unconscious; more strictly, they are preconscious—that is, they do not relate to deeply buried tendencies, and so are correspondingly easy to reveal; Freud terms them the primary and secondary 'gain of illness' respectively. Now, I take it that this principle of volitional origin is no longer very widely questioned by modern psychopathologists, and in the case of war neuroses the main motives are visible and comprehensible enough—namely, the desire to find some good reason for escaping from the horrors of warfare.

2. The second principle is that all neurotic symptoms are the product of an intrapsychical conflict which the person has failed satisfactorily to resolve, and that they constitute a compromise-formation between the two conflicting forces. Here, again, I think that those who have been investigating the psychology of war neuroses will agree with this principle. MacCurdy<sup>1</sup> in particular has described in great detail the conflict that arises in soldiers between, on the one hand, the motives actuating to continuance at duty and concealment of a growing sense of incapacity and apprehension, and, on the other, the awful sense of failure accompanying the sometimes almost overwhelming desire to escape from the horrors of their position. The neurosis offers a way out of this dilemma, the only way that the particular person is able to find, and the actual symptoms, which are often grossly incapacitating, such as blindness, represent the fulfilment of the desire against which the man has been fighting. We reach, therefore, the wish-fulfilment part of Freud's theory.

3. The third principle is that the operative wish that leads to the creation of the neurosis is an unconscious one. Freud means this in the full sense of the word, and in this sense the principle has not yet been confirmed from the experience of the war neuroses. There are, however, different degrees of unconsciousness of a mental process, and the important point to Freud is not so much the degree of the unawareness in itself—this being

<sup>1</sup> MacCurdy, *op. cit.*

largely an index of the repression—as the repression or dissociation that has led to the unawareness. What he maintains is that the wish producing the neurosis is one that is not in harmony with the ego-ideal, and which is therefore kept at as great a distance as possible from it. Any one who has read the touching accounts given by MacCurdy or Rivers<sup>1</sup> of the shame that soldiers feel at their increasing sense of fear, and the efforts they make to fight against it, to conceal it from others, and if possible from themselves, will recognise that the wish in question is one alien to the ego-ideal and is well on in the first stages of repression, even if it is half-avowed.

4. The fourth principle is that current repressed wishes cannot directly produce a neurosis, but do so only by reviving and re-inforcing the wishes that have been repressed in older unresolved conflicts. According to Freud, a pathogenetic disappointment or difficulty in readjustment leads first to an introversion or turning inwards of feeling, and the wish that has been baulked seeks some other mode of gratification. It tends to regress back to an older period of life, and thus to become associated with similarly baulked and repressed wishes belonging to older conflicts. It is the combination of these two, the present and the old, that is the characteristic mark of the pathogenesis of neurotic disorders as distinct from other modes of reaction to the difficulties of life.

Freud considers that there are probably always three factors in the causation of any neurosis: a specific hereditary predisposition, secondly an unresolved infantile conflict which means that the person has not satisfactorily developed past a given stage of individual evolution—in other words, that he has been subjected to what is called an 'infantile fixation' at a given point in development—and thirdly the current difficulty. There is a reciprocal relationship between these three factors, so that if any one is especially pronounced the others may be correspondingly less important. For instance, if the hereditary factor is very pronounced, then a person may become neurotic from the quite ordinary experiences of childhood and adult life, for he is incapable of dealing adequately with them. In the case of war neuroses it is evident that the current factor is of the greatest importance, being, indeed, the only one that so far has attracted attention. The only traces of infantile

<sup>1</sup> Rivers, 'The Repression of War Experience,' Proceedings of the Royal Society of Medicine, Section of Psychiatry, December 4, 1917.

factors I have seen noted have been the instances where the localisation of hysterical symptoms seems to have been determined in part by the site of old injuries, and in a general way the many traits of childhood, such as sensitiveness to slights, self-centredness, and desire to be guarded, protected, and helped, which are sometimes very evident in the cases of war neurosis.

We thus see that only one-half of the psycho-analytical theory has so far been confirmed by the observations of war neuroses. According to this theory, there are typically two sets of wishes concerned in the production of any neurosis. One of these, the 'primary gain of illness,' a current one, alien to the conscious ego-ideal, and therefore half repressed and only half conscious—if that—has not only been demonstrated by a number of observers, but has been shewn to be of tremendous importance, and certainly the effects of treatment largely turn on the way in which it is dealt with. The other factor, the infantile and altogether repressed and unconscious one, which, according to psycho-analysis, is also essential to the production of a neurosis, has not been systematically sought for, though I have found it in the few cases I have been able to make a full study of. Its presence or absence is a matter of greater theoretical importance than might perhaps appear, even though its practical importance may often not be great. For my own part I have the utmost difficulty in believing that a current wish, however strong, that is half conscious and sometimes fully conscious can ever in itself produce a neurosis, for it contradicts all one's knowledge concerning the nature of neuroses, as well as my experience, such as it is, of war neuroses themselves. I would therefore urge that no conclusion is possible on the matter one way or the other until adequate investigations have been carried out. That it has its practical side also will be pointed out when we come to consider the chronic cases where war neuroses pass over into peace ones.

5. The principle of the psycho-analytical theory that has aroused the strongest opposition is that the primary repressed wish ultimately responsible for the neurosis is always of a sexual nature, so that the conflict is between the two groups of instincts that go to make up the whole personality, those concerned respectively with preservation of the self and of the species. Dr. MacCurdy has suggested to me that this is so only because, apart from war, there is no instinct that comes into such strong

conflict with the ego-ideal as does the sexual one, but that in war the conflict between the instinct for self-preservation and the ego-ideal is enough to lead to a neurosis. This may seem very plausible, but I shall be surprised if it is confirmed by future research. That a neurosis, which after all is a disorder of the unconscious imagination, should arise from a conflict between two states of mind that are fully in contact with reality would be something entirely contradictory of our past experience, as would also a neurosis arising from a conflict between two tendencies both belonging to the ego. I shall venture to put forward an alternative hypothesis presently when discussing the subject of fear, which we have next to consider.

Freud states<sup>1</sup> that from one point of view all psychoneurotic symptoms may be regarded as having been constructed in order to prevent the development of fear—another point of contact between his theory and the observers of war neuroses, who would surely agree that fear is the central problem they have to deal with. By fear is here meant rather the mental state of dread and apprehension, increasing even into terror, and accompanied by well-marked bodily manifestations, a state for which psychopathologists have agreed to use the term 'morbid anxiety' (or, shortly, 'anxiety') in a special technical sense as being the nearest equivalent of the German word *Angst*.

Morbid anxiety is certainly the commonest neurotic symptom, and the theory of its pathogenesis has been the occasion of a very great deal of investigation,<sup>2</sup> with, in my opinion, very fruitful results. We meet it in the form of a general apprehensiveness of impending danger and evil, as the anxiety neurosis, and also in hysteria, in the form both of apparently causeless attacks of dread and of innumerable specific phobias. In all its forms its most striking feature is the disproportion between its intensity and its apparent justification, so that it seems at first sight extremely difficult to correlate with the biological view of fear as a useful instinct that guards against danger. Practically all modern investigations into its pathogenesis agree that it stands in the closest relation with unsatis-

<sup>1</sup> Freud, *op. cit.*, S. 470.

<sup>2</sup> The latest discussion of the subject will be found in Freud's 'Allgemeine Neurosenlehre,' 1917, chapter xxv., 'Die Angst.' See also his papers in 'Sammlung kleiner Schriften zur Neurosenlehre,' 1906, chapters v., vi., vii.; and a general review of the subject in Chapter XXVII. of the present volume.

fied and repressed sexuality, and, in my judgement, the conclusion that morbid anxiety represents the discharge of repressed and unconscious sexual hunger is one of the most securely established in the whole of psychopathology; it is impossible here to consider the extensive evidence in support of this conclusion, and I can only refer to the published work on the subject.<sup>1</sup>

The next question is, What is the relation between morbid anxiety as seen in peace neuroses and real—*i.e.*, objectively justified—fear, as seen in various situations of acute danger and so prominently in the war neuroses? The point of connection is the defensive character of the reaction. Morbid anxiety, as we are familiar with it in the peace neuroses, is a defensive reaction of the ego against the claims of unrecognised 'sexual hunger' (*Libido*), which it projects on to the outside world—*e.g.*, in the form of phobias—and treats as if it were an external object; it is, in a word, the ego's fear of the unconscious. But there appears to be an important difference between it and 'real' dread in that the latter concerns only the ego itself, arises only in connection with external danger to the ego, and has nothing to do with the desires of repressed sexual hunger. One is tempted to say that the latter (real dread) is a normal protective mechanism that has nothing to do with the abnormal mechanism of morbid anxiety. Here, however, as elsewhere, the line between normality and abnormality is not so absolute as might appear, and consideration of the matter leads one to examine more closely into the nature of real dread itself. We then see that this can be dissected into three components, and that the whole reaction is not so appropriate and useful as is commonly assumed. The reaction to external danger consists normally of a mental state of fear, which will be examined further in a moment, and in various activities suited to the occasion—flight, concealment, defence by fighting, or even sometimes by attacking. On the affective side there is, to begin with, a state of anxious preparedness and watchfulness, with its sensorial attentiveness and its motor tension. This is clearly a useful mental state, but it often goes on further into a condition of developed dread or terror which is certainly the very reverse of useful, for it not only paralyses whatever action may be suitable, but even inhibits the functioning of the mind, so that the person cannot judge or decide what he

<sup>1</sup> See also Stekel, 'Angzustände,' 2<sup>e</sup> Aufl., 1912.

ought best to do were he able to do it. The whole reaction of 'real' fear is thus seen to consist of two useful components and one useless one, and it is just this useless one that most resembles in all its phenomena the condition of morbid anxiety. Further, there is seen to be a complete lack of relation between development of dread and the degree or imminence of danger, nor does it bear any relation to the useful defensive activities. Thus, one does not flee because one is frightened, but because one perceives danger; in situations of extreme danger men very often respond with suitable measures of flight, fight, or what not, when they are not in the least degree frightened; on the other hand, the neurotic can be extremely frightened when there is no external danger whatever. The inference from these considerations is that even in situations of real danger a state of developed dread is not part of the useful biological mechanism of defence, but is an abnormal response akin to the neurotic symptom of morbid anxiety.

In a recent publication<sup>1</sup> Freud has made the striking suggestion that the developed dread sometimes found in situations of real danger is derived, not from the repressed sexual hunger that is directed towards external objects, as is the case with morbid anxiety of the peace neuroses, but from the narcissistic part of the sexual hunger that is attached to the ego, and I venture to suggest that we may here have the key to the states of terror with which we are so familiar in the war neuroses. The psycho-analytic investigations of recent years have laid increasing stress on the distinction between 'object-libido,' the sexual impulses that are directed outwards, and the 'ego-libido,' the narcissistic portion that is directed inwards and constitutes self-love. There is good reason to suppose that the latter is the more primary of the two, and also the more extensive—though the least explored as yet—so that it constitutes, as it were, a well from which externally directed sexuality is but an overflow. The analogy naturally occurs to one of the protoplasmic outpourings in the pseudopodia of the amœba, and the reciprocal relation of these to the main body seems to be similar to that between love of others and self-love. It has been known for some time that there is a limit on the part of the organism to tolerate without suffering more than a given quantity of sexual hunger in its familiar sense of impulses directed outwards, and analytic study of the psychoses, notably

<sup>1</sup> Freud, *op. cit.*, S. 502.

of paraphrenia, has shewn that the same is even more profoundly true of the narcissistic sexual hunger. In both cases, before other symptoms are formed so as to deal with the energies in question and bind them, the first thing that happens is a discharge in the form of morbid anxiety, so that we reach the comforting conclusion that a normal man would be entirely free from dread in the presence of any danger, however imminent, that he would be as fearless as Siegfried; it is a gratifying thought that there seem to be many such in our Army to-day. It seems to me probable that the intolerance of narcissistic sexual hunger which leads to dread in the presence of real danger is to be correlated with the inhibition of the other manifestations of the fear instinct, with the accumulated tension characteristic of the mode of life in the trenches.

I would suggest, therefore, that investigations be undertaken from this point of view with cases of war neurosis, especially the anxiety cases. Many of the features noted by MacCurdy,<sup>1</sup> for instance, accord well with the picture of wounded self-love: thus, the lack of sociability, the sexual impotence and lack of affection for relatives and friends, the feeling that their personality has been neglected or slighted, that their importance is not sufficiently recognised, and so on. Perhaps a new light may also be thrown in this way on the attitude of such patients towards death. I understand that a great part of the war neurotic symptoms, and the battle dreams in particular, have been widely interpreted as symbolising the desire to die so as to escape from the horrors of life, an interpretation that does not accord well with the equally widespread view that the fundamental cause of such neuroses is a fear of death. I greatly doubt, on the contrary, whether the fundamental attitude is either a fear of death in the literal sense or a desire for death. The conscious mind has difficulty enough in encompassing in the imagination the conception of absolute annihilation, and there is every reason to think that the unconscious mind is totally incapable of such an idea. When the idea of death reaches the unconscious mind it is at once interpreted in one of two ways: either as a reduction of essential vital activity, of which castration is a typical form, or as a state of Nirvana in which the ego survives, but freed from the disturbances of the outer world.

A word in conclusion as to the therapeutic aspects of psycho-

<sup>1</sup> MacCurdy, *op. cit.*, pp. 269-272.

analysis in the war neuroses. Even if it were possible, I see no reason whatever why a psycho-analysis should be undertaken in the majority of the cases, for they can be cured in much shorter ways. But I consider that a training in psycho-analysis is of the very highest value in treating such cases, from the understanding it gives of such matters as the symbolism of symptoms, the mechanisms of internal conflict, the nature of the forces at work, and so on, and there is certainly a considerable class of case where psycho-analysis holds out the best, and sometimes the only, prospect of relief—namely, in those chronic cases where the war neurosis proper has, by association of current with older conflicts, passed over into a peace neurosis and become consolidated as such.



## CHAPTER XXXIV

### PSYCHO-ANALYSIS AND EDUCATION<sup>1</sup>

It was to be expected that the laborious investigations carried out by means of psycho-analysis would lead to conclusions of great import regarding the subject of education, for in the first place they have to deal with the deepest problems of character-formation, conduct, feeling, and motive, and in the second they lay especial stress on the significance for all later mental life of childhood experiences and tendencies. This expectation, however, is only partly justified in fact, for at the outset it must be said that up to the present psycho-analysis has not revealed a great deal of importance from the point of view of education properly so called—that is, of the artificial training, developing, and *positive* drawing out of various capacities and functions. The reason for this lies in the fact that those who have worked with the method have as a rule become trained in scepticism and caution, and prefer not to draw conclusions until these are based on an adequate system of evidence; they have been able to determine that the psychological problems of education are fraught with more complex difficulties than many writers on the subject suspect, but these problems have rarely lain sufficiently in the path of psycho-analytical research to render them so far capable of solution. On the other hand, psycho-analysis has a number of conclusions to enunciate on the more important *negative* side of the subject—namely, as to the nature and harmful effects of faulty education; the reasons why this aspect is more important than the other may perhaps become plainer towards the close of the present paper.

We should begin by shortly considering the subject of psycho-analysis itself, with some of its teachings, but the psychology of the matter is so technical and complex, and the

<sup>1</sup> Published in the *Journal of Educational Psychology*, November, 1910.

range of topics over which the method has found application so extensive, that it is impossible here to do more than give a summary indication of a few of the conclusions reached that are cognate to the present topic.

These conclusions are due to the painstaking investigations of the originator of psycho-analysis, Professor Freud of Vienna, though they have since been confirmed by a number of other workers. Of the method itself nothing need be said except that it is a special means for penetrating into the deeper and less accessible layers of the mind, which form the basis for the more superficial structures that are later acquired. This static metaphor is in itself a misleading one, for psycho-analysts have learned to regard the mind from an essentially dynamic point of view, as being composed of a series of desires, trends, wishes and ambitions, which are constantly striving to find expression and gratification. Desire, in the broadest sense of the word, is the fundamental driving force of all mental activities, and is behind not only our external conduct and functionings, but also our interests, attentions and even capacities, or at all events the extent to which these latter can be developed and manifested. The individual trends and desires are not isolated functions in the mind, but often are intimately connected one with another. A desire that is for any reason thwarted tends to reach expression by reinforcing an associated desire, so that they find a common outlet. This occurrence is so frequent that the majority of our actions are determined not by a single motive, but by several; for a reason that will presently be pointed out, however, the person is usually able to recognise only the most superficial or accessible of these, so that he has but a limited extent of actual self-knowledge. Further, a desire that arises in a person's mind for the first time is not likely to be very effective or significant unless it becomes attached to others that are already present; in other words, a motive appeals more readily to him if it is linked, by resemblance, to earlier ones that are already operative in him. A simple illustration of this is the fact that, other things being equal, such a movement as the one to abolish capital punishment is more likely to appeal to a man who has previously been distinguished by humanitarian tendencies than to a man whose official duties have caused him to be largely occupied with the infliction of suffering, as so many legal functionaries are. It follows that in the acquirement of a new motive or interest

potentialities already present play an important part. This is fairly obvious, at least in the abstract, so far as quite new and strange functions are concerned, but psycho-analysis has shewn that the same considerations apply much more extensively than had previously been thought possible to even more stable and integral functions. The surface motive for an act or an interest is rarely the complete explanation that it appears, and provides only some of the operative energy; more of this energy, and often the greater part, arises from deeper, associated trends from which it has been transferred, as it were, to the surface one. Mental life is thus seen to constitute a connected chain of activities. Theoretically one must suppose that its continuity is perfectly even, and practically one can, by means of psycho-analysis, demonstrate this to a very considerable extent. The appearance of discontinuity that it commonly presents is simply due to the failure to recognise anything more than the surface tendencies. Frequently the deeper ones, which fill in the apparent gap in continuity, are inaccessible to direct introspection—that is, they are unconscious—and can be reached only by means of special methods of investigation. Attention must again be called to the fact that knowledge of these unconscious trends explains not only actions that otherwise are regarded as unintelligible or as 'causeless' and accidental, but also many important features of quite normal behaviour.

A corollary that follows from these considerations is that the older in the life of the individual is a given tendency or desire the more significant is it apt to become, for it not only has equal value with those acquired later, but plays a considerable part in determining which later ones will be acquired, and with what intensity. Indeed, the history of any later mental activity is not fully known until it has been traced back through childhood to some constituent of instinctive mental life. The inherited instincts, or the environmental modifications of these, are thus seen to constitute the ultimate basis of all mental life. The objection naturally raised to this conclusion, that the earlier desires fade and in time lose their intensity—being replaced by others that are totally disconnected—contains the fallacy that it assumes a discontinuity which does not exist; this can be shewn by psycho-analysis, and hitherto in no other way. The objection is further founded on ignorance of the facts that the deepest and most primary desires are unconscious, and that

the most striking characteristic of unconscious desires is their capacity to retain their activity for truly astonishing, and almost unlimited, periods.

Experience teaches that when later interests, desires, and ambitions are traced to their origin many more of them than is commonly thought are found to arise in the psychosexual instincts. (The term 'sexual' is here used to denote not only tendencies directly concerned with the reproductive act, but also all those indirectly concerned, including the maternal instinct, various pleasurable sensations and activities such as masturbation or other forms of auto-erotism, and so on.) This really follows from the view that mental life is evolved, in the individual, from the inborn instincts; for of all these the sexual ones are among the most fundamentally important, certainly from the point of view of complex mental activities; it is the manifold richness of his sexual life that biologically most distinguishes man from the lower animals. Without wishing to give undue prominence to the subject, I propose to devote the main part of this paper to those conclusions of psycho-analytic investigations that relate to the sexual development of children, for the reason that they are among the most novel and important of them.

The child comes to the world endowed with a number of natural instincts, the mental aspects of which are at first by no means prominent. When these develop they are essentially shewn in a search for the repetition of once-experienced pleasurable sensations, first those of taste and touch, later those of sight, smell and hearing. After a variable number of months education of the child begins, and this is from the first of a double nature. On the one hand he is weaned to interests outside himself, such as the recognition of various people and objects, and on the other hand he is weaned away from certain egocentric interests, such as his demand to satisfy his instinctive bodily needs (hunger, etc.) regardless of time and place. Thus at an early age begins that conflict between social and purely personal considerations on the satisfactory resolution of which largely depends the success of education in its broadest sense. As the years go by the child finds that he has to renounce more and more of his immediately personal interests, which he must learn to replace by external social ones. The sacrifice in this way demanded is much more considerable than is commonly supposed, for psycho-analysis has established that in the first

four years of life the child is far more preoccupied than is generally thought with matters from which his interest has to be weaned. Before the ban of social pressure has come to exert its full force his attention is attracted by excretory acts and products, by vaguely pleasurable sensations situate in the parts of the body concerned with these, and later by problems and curiosities on all sorts of forbidden topics—the difference between the sexes, the relations between the parents, the origin of children, and so on. The extent to which such matters occupy the mind of the young child is always under-estimated by adults and is impossible to determine by a casual examination, for on the one hand the later memories for those years are always both deficient and erroneous, and on the other hand this aspect of the child's mind is rarely accessible to direct inquiry, on account of the barrier invariably existing on the subject between child and adult. As the child grows older, the desires and tendencies in question meet with such obstacles as an increasing sense of shame, guilt, wrongness, remorse, and so on, and are fought against by the child, who now half-consciously strives to get away from them, to forget them, or, as it is technically termed, to 'repress' them. These repressed mental processes are later thus forgotten, and along with them a major part of all the mental experiences associated with them in time; this is the reason why so little of early childhood life can be recalled by the adult.

The desires, thoughts, impulses, tendencies and wishes thus repressed do not, however, die; they live on, but come to expression in other forms. Their energy is directed along more useful paths, a process known as 'sublimation,'<sup>1</sup> and upon the extent and kind of this sublimation depends a great deal of the future interests and activities of the individual. To take a simple example: the impulse proudly to display the body, and especially certain parts thereof, which is pronounced with some children, may later be manifested in such ways as an undue predilection for certain toilettes—for instance, openwork blouses, clockwork stockings, or startling waistcoats, or, on a higher plane, by the desire to shine before an audience, to be the centre of general attention and admiration, and so on. In fact, it may be said that a very great part of our social and cultural activities are sublimated forms of 'natural,' instinctive tendencies which have in course of education become repressed into the unconscious, and thus forgotten.

<sup>1</sup> See Chapter XXXV.

It must not be thought, however, that this renunciation of instinctive tendencies in favour of less personal ones is always carried out so smoothly and successfully as has just been indicated. In many cases, perhaps in most, the conflict due to the encroachment on the child's personal liberties is resolved only at a considerable cost to his later usefulness as a citizen. There are, unfortunately, three other possibilities open besides that of sublimation. In the first place, the tendency may be too strong to be repressed, or it may become too strong if certain errors in upbringing are committed, and in this case it may reappear in the adult as a sexual perversion; this is the least frequent possibility, but it is by no means a rare one. In the second place, the repressing force may not altogether fail, as in the last instance, nor altogether succeed, as in the process of sublimation; instead, a compromise is reached between the opposing tendencies, in which the repressed wish is manifested in an indirect, disguised form. It then constitutes a nervous symptom, so that the symptoms of the psychoneuroses, hysteria, obsessions, etc., may be said to be the negative of the perversions. When we recall the exceeding prevalence of these conditions, and of certain forms of insanity which arise in a similar way, we see that errors of development in early childhood life are the rule rather than the exception. It may be added that a number of 'bad habits' frequently met with during school life, such as nail-biting, bed-wetting, certain facial twitches (tics), attacks of ill temper, etc., have a similar origin, and are often the precursors of more serious troubles in later life. In the third place, the child may react to the tendency, which is being repressed, by proceeding to the opposite extreme, an occurrence known as excessive reaction-formation. Of this group the following are examples: an over-sensitiveness to the sight of suffering, which may render the spectacle of life an intolerable nightmare; a morbidly harsh and bigoted austerity, sometimes unfortunately misnamed 'Puritanism,' which narrow-mindedly sees evil in the most innocent enjoyments of life, and is unrelenting in its cruel severity towards human frailties; an exaggerated sense of shame, which martyrs the individual as he passes by some of the necessary aspects of life; a passion for household cleanliness and orderliness that makes all domestic comfort impossible. Many more could be added to the list, but only one other will be mentioned, and that on account of its extreme social importance. This is the

attitude of excessive shame or even disgust towards matters of sex in general, an attitude that culminates in the bizarre whimsies of certain fanatical sects, such as the Russian Skoptecs, or of the present New England movement in favour of 'ethical marriages.'<sup>1</sup> From it results, among other things, a morbid dread of maternity, a degradation of the conception of this function—turning the most important stage of it into a secret shame—and an incompatibility for the most essential marital relations (it has been stated that a third of all civilised women are anæsthetic in this regard, an estimate that cannot be very far wrong). A man or woman burdened with this reaction-formation is taking a dangerous step in entering marriage, for the possibilities of future unhappiness and even misery resulting under such circumstances are only too great.

From the foregoing it will be seen that, according to the findings of psycho-analysis, the sexual life of children is much richer, both physically and mentally, than is generally believed, and that the manner of its development is of decisive importance for the whole life history of the individual. It is of course obvious that it widely differs from that of adults, in what precise respects need not here be considered.<sup>2</sup> One matter must, however, be mentioned—namely, that the early relations of the child to the people with whom he is brought into close contact—therefore above all to the members of his own family—are frequently, if not regularly, tinged with eroticism. The typical desire of the boy, for instance, is to displace his father in his mother's affections, or, more vividly expressed, to kill his father and marry his mother, constituting what is called the 'Œdipus-complex.' This complex is, as a rule, quite unconscious, only traces and slight indications of it being allowed to penetrate through into consciousness. Mythology, folk-lore, literature, and other products of the imagination, contain innumerable examples of the Œdipus-complex, depicted either openly or, more often, in a disguised form. A striking instance is to be found in the following description in Diderot's 'Le neveu de Rameau': 'Si le petit sauvage était abandonné à lui-même, qu'il conserva toute son imbecillité et qu'il réunit au peu de raison de l'enfant au berceau la violence

<sup>1</sup> *I.e.*, marriages in which conjugal relations are confined to the occasions when it is desired to beget children.

<sup>2</sup> See Chapter III., p. 31.

des passions de l'homme de trente ans, il torderait le cou à son père et coucherait avec sa mère.<sup>1</sup>

These early and dim incestuous thoughts and sensations are of dominating significance for later relationships, friendships, marriage, etc., and there is no more important part of the child's mental growth than the overcoming of them. To state this more generally: an essential stage in the satisfactory development of the individual's capacities and activities consists in gradually freeing himself from family ties, and in his replacing dependence on the parent by a sense of personal responsibility and self-direction. Too often this stage is only incompletely passed through, to the great detriment of the person's individuality. A high level of ethical responsibility is only possible through the child's learning to be self-reliant, and to recognise the desirability in forming his decisions of giving heed to his own knowledge and conviction as to what is right, not only to the traditions he has blindly adopted from his parents. It must further be repeated that the bond by which a conservative dependence on one or other parent is maintained, and which often defies all reason and common sense, frequently arises in a sexual attraction dating from early childhood, of which the subject is now completely unconscious.

If we now briefly summarise those of the foregoing conclusions that have the most direct bearing on the subject of education they may be stated as follows: Mental life should be regarded in a dynamic way, as a stream of desires and interests that tend to seek gratification. New desires and interests are not independent occurrences, but largely depend for their intensity, or even their existence, on older trends. The direction taken by the oldest of these—namely, those of early childhood life—is of predominant importance for the whole future of the individual. The driving forces of mental life, therefore, are ultimately derived from the primary instincts, and can never be independent of them. It follows that satisfactory mental functioning is best attained by inducing a harmony between the different components of the mind. Many of these, particularly early in life, are of such a kind as to be unacceptable to the standards of modern civilisation, and have to be suppressed, or, rather, transformed into others of greater social value. In this process some become 'repressed'

<sup>1</sup> Compare the quotation from Browning on p. 633.



and are buried in the unconscious; they however retain their power, for good or evil, and the latter is often only lost when they are again made conscious, as in the psycho-analytic method of treatment. Stress must be laid on the facts that repression is a delicate process which in certain circumstances may bring with it grave consequences to the individual, and that filial piety, if carried to excess, is also not without seriously detrimental results.

We have next to notice some of the lessons that may be learned from these considerations. The chief of them is that the main task of education should be not the mere addition of something, *e.g.*, knowledge, to the child, but the ordering of the influences that act on him, in such a way as to allow the freest scope possible for the development of the capacities that will make him a useful citizen in the broadest sense of the word.<sup>1</sup> Several corollaries follow from this, which reflect unfavourably on our present educational methods.

In the first place, in order to obtain the best results it is necessary to make education a more individual matter than it is at present. Teaching by rote large numbers of children in exactly the same way is based on the antiquated and erroneous view that the aim should be the acquirement by the pupil of a uniform standard of knowledge, whereas it should rather be the education, or drawing out, of his special potentialities. That the endeavour to fit every child to a preconceived pattern, instead of bringing about a free development of his latent qualities, is necessarily grievous, is strikingly pointed out by a sentence of Bernard Shaw's: 'The vilest abortionist is he who attempts to mould a child's character.' This comment applies even more forcibly to the general upbringing of a child than to the narrower question of teaching. It will have to be recognised in the future that the transformation of primitive, egocentric activities into those of a social order is a process that cannot be carried on with all children by the same means, or to the same extent. There is a limit to which this transformation is possible, and any attempt to force it beyond this must defeat its own object by bringing about results, *e.g.*, neuroses, which greatly impair the social usefulness of the person in question. As to the means, the most important point to bear in mind is that success is best achieved by

<sup>1</sup> The Montessori system of education has already made, in a limited sphere, a beginning in this direction.

gradually weaning the child to social interests, and not by merely forcibly suppressing and forbidding the primitive ones without replacing them by others.<sup>1</sup> If the latter is the course pursued, then the likelihood is great that they will continue to act unconsciously and produce unfortunate results. The same remark applies to unacceptable desires or interests that may arise in later life. The way to deprive these of their power for harm is not to shun them, to get away from them, to 'repress' them, but manfully to face them, to deal with them, and to express them one way or the other. As Blake said over a century ago, 'Sooner murder an infant in its cradle than nurse unacted desires.'

In the second place, it is desirable that education should concern itself more than hitherto with what may be called the human side of the child, and not exclusively with the intellectual. This applies to the school as well as to the home, though, as this paper refers to education in the broader sense, other influences than those of the school must also be considered. Prominent in the present respect is the much-discussed question of sexual enlightenment, and, as psycho-analysis shews the unsuspected significance of the child's sexual development for later years, a little must now be said about this. The general arguments for the necessity of this course being adopted have so often been cogently presented that I shall here confine myself to mentioning some of the respects in which they may be reinforced by the conclusions of psycho-analysis. Any one who still has any doubt left on the matter is recommended to read the second chapter of Dr. Havelock Ellis's 'Sex in Relation to Society'—an excellent volume that should be in the hands of every teacher, and indeed of every thoughtful citizen; a number of useful books on the subject are there cited.

It has been repeatedly pointed out of late years, and nowhere more vigorously than on the side of the Church, how impracticable it is to hope that a child will long retain his ignorance as regards sexual matters, and that, as the sources from which he will draw his information are only too likely to be impure, it is safer deliberately to implant a healthy knowledge in his mind which will prevent him from being evilly influenced later on. It is really hardly possible for a normal child to avoid drawing inferences from the experiences he meets with on all sides, his own sensations, the witnessing

<sup>1</sup> See Chapter XXXV.

of domestic animals, the birth of younger children, the manifold indirect hints in the conversations of his elders, the still broader ones in what he reads—even in the Bible itself, the talks of older comrades or of licentious servants; and so on; whoever denies this certainly under-estimates both the intelligence and the natural curiosity of children. It has been urged that it is unnecessary to do more than leave this process of enlightenment to take its own course, to which Ellis remarks, 'this is as much as to say that there is no need to supply sources of pure water when there are puddles in the street that anyone can drink of.' These considerations are strongly confirmed by the facts disclosed by psycho-analysis—namely, that actual sexual experiences (and often speculation on the topics of sex) regularly occur in early childhood—before the age of five—and are from the very nature of the child's mind unavoidable; when direct information is denied him, as is usually the case, he invents various explanations, which often contain a curious modicum of truth. These are usually forgotten, but it can often be shewn that they exert a profound influence not only on his later attitude towards the subject, but also on his whole character. A child rarely accepts the false explanations given by his parents, who under-estimate his intelligence; he usually deceives them into thinking he does, and after the age of five or six, when he has forgotten his own explanations, he may deceive himself. It must further be pointed out that the customary endeavour to keep the child's mind a blank on the subject is far from being a negative one, as parents commonly maintain it to be; the organised conspiracy of silence is soon noticed by the child, and he is subjected to a mass of suggestion, all the more potent for being indirect, which teaches him that the subject is taboo, mysterious, improper, peculiar, and essentially wicked. Those who object to direct enlightenment, therefore, should recognise that they are really defending a false enlightenment, a positive teaching of shame and guilt.

Another argument that has been frequently advanced, especially by members of the medical profession, is that ignorance of the basal facts of sex<sup>1</sup> is the worst preparation for the state of marriage. Every doctor must have met with instances

<sup>1</sup> To avoid misapprehension it should again be remarked that this ignorance is never primary, but is based on repression and forgetting of earlier knowledge or speculation in childhood.

of bizarre ignorance and misapprehensions in this direction, and is aware of what suffering in married life they may cause. A chapter from Nietzsche, entitled 'On Female Chastity,'<sup>1</sup> displays such a sympathetic appreciation of what this suffering means to many women that it deserves to be quoted at length: 'There is something quite astonishing and extraordinary in the education of women of the higher class; indeed, there is perhaps nothing more paradoxical. All the world is agreed to educate them with as much ignorance as possible *in eroticis*, and to inspire their soul with a profound shame of such things, and the extremest impatience and horror at the suggestion of them. It is really here only that all the "honour" of woman is at stake; what would one not forgive them in other respects! But here they are intended to remain ignorant to the very backbone:—they are intended to have neither eyes, ears, words, nor thoughts for this, their "wickedness"; indeed, knowledge here is already evil. And, then! To be hurled as with an awful thunderbolt into reality and knowledge with marriage—and indeed by him whom they most love and esteem: to have to encounter love and shame in contradiction, yea to have to feel rapture, abandonment, duty, sympathy, and fright at the unexpected proximity of God and animal, and whatever else besides! all at once!—There, in fact, a psychic entanglement has been effected which is quite unequalled. Even the sympathetic curiosity of the wisest discerner of man does not suffice to divine how this or that woman gets along with the solution of this enigma and the enigma of this solution.'

There is no doubt that, whatever may be said about children, it is frequently necessary, and always desirable, for men and women of a marriageable age to receive instruction concerning the physiology and hygiene of sexual life. The importance of training girls in domestic economy and household management is becoming generally recognised, in view of the fact that this is likely to form one of their main duties in life. It is even more needful that they should be educated in other, intimate matters, on which their future efficiency and happiness may largely depend; such education is by no means to be limited to the care of children, important a subject as this may be. Ellis has a valuable section on this matter in the book previously referred to (Chapter XI.), where he writes:<sup>2</sup> 'Girls are educated with the vague idea that they will marry,—quite

<sup>1</sup> 'The Joyful Wisdom' (Foulis edition), p. 104.

<sup>2</sup> *Op. cit.*, p. 52.

correctly, for the majority of them do marry,—but the idea that they must be educated for the career that will naturally fall to their lot is an idea which as yet has never seemed to occur to the teachers of girls. . . . Women are trained for nearly every avocation under the sun; for the supreme avocation of wifehood and motherhood they are never trained at all!<sup>1</sup> Psycho-analysis has furnished an important contribution to this matter through the disclosure that not only the ignorance just referred to, with all its lamentable results, but also most of the frictions, unhappiness, and secret cankers that mar so many married lives, and turn a great number of them into hideous purgatories, are due to defective or erroneous education in childhood. The harmful effect on later life of erroneous sexual development in these first years is incalculably great.

A third cogent argument in support of the same thesis relates to the disastrous effect on the relations between parent and child of undermining his faith in the parent on a matter that is to him of the deepest significance. I will again quote Ellis,<sup>2</sup> for no one could state it more clearly than he has done: 'Even, however, if there were no other reasons against telling children fairy-tales of sex instead of the real facts, there is one reason which ought to be decisive with every mother who values her influence over her child. He will very quickly discover, either by information from others or by his own natural intelligence, that the fairy-tale, that was told him in reply to a question about a simple matter of fact, was a lie. With that discovery his mother's influence over him in all such matters vanishes for ever, for not only has a child a horror of being duped, but he is extremely sensitive about any rebuff of this kind, and never repeats what he has been made to feel was a mistake to be ashamed of. He will not trouble his mother with any more questions on this matter; he will not confide in her; he will himself learn the art of telling "fairy-tales" about sex matters. He had turned to his mother in trust, she had not responded with equal trust, and she must suffer the punishment, as Henrietta Fürth puts it, of seeing "the love and trust of her son stolen from her by the first boy

<sup>1</sup> A contemporary novelist, describing his heroine's attitude towards marriage, says: 'Her teachers and mistresses had done their best to stamp her mind with an ineradicable persuasion that it was tremendously important, and on no account to be thought about.'

<sup>2</sup> *Loc. cit.*

he makes friends with in the street." When, as sometimes happens (Moll mentions a case), a mother goes on repeating these silly stories to a boy or girl of seven who is secretly well-informed, she only degrades herself in her child's eyes. It is this fatal mistake, so often made by mothers, which at first leads them to imagine that their children are so innocent, and in later years causes them many hours of bitterness because they realise they do not possess their children's trust. In the matter of trust it is for the mother to take the first step; the children who do not trust their mother are, for the most part, merely remembering the lesson they learned at their mother's knee.' The findings of psycho-analysis amply confirm these considerations also, by shewing how frequent is the course of events just described. It is almost a regular occurrence for children of the age of four or five to turn from their parents, to withdraw into themselves, and to pursue private speculations about the topics concerning which they have been denied information, whether by a direct refusal or by evasion. Phantasies of bitter resentment against the parent commonly occur at this time, and often form the basis not only of a later want of confidence, or even a more or less veiled hostility, as regards the parents, but also of various subsequent disharmonies, neurotic disturbances, etc., of a kind that cannot here be described. As was mentioned above, the actual speculations and phantasies are usually repressed and forgotten, an appearance of innocence being thus produced which is deceptive to both the outsider and the child himself. The illusions most parents entertain as to the innocence of their children in such matters are wellnigh unbounded. As regards young children it is usually unshakably strong, and with older ones it is frequently very astonishing. The following instance of the latter may be related, for it is by no means rare: A mother on bringing to me her nineteen-year-old daughter for treatment volunteered in the course of a private conversation the information that the girl had had no love-affairs, and was not interested in men's society, 'being too young to occupy her mind with such thoughts.' It turned out, however, that the young lady was secretly married and had parted from her husband on the day after the ceremony, had been the paid mistress of a number of men since the age of fifteen, had twice been infected with venereal disease, and had in her childhood indulged in the most unbridled phantasies and conduct. I have only to add that

she had never been away from home, and that her mother, who was as convinced of the girl's 'innocence' as of anything in life, was a quite intelligent lady, and devoted to her daughter. The case is an extreme one, to be sure, but it shews to what lengths a mutual lack of trust can be carried. All these dangers to which the girl succumbed, and a rather bad neurosis as well, might have been avoided if the mother had not blinded herself to the signs of dawning sexual life in her child, and had frankly met the desire for knowledge with judicious information and guiding.

Accepting, therefore, the need for sexual enlightenment, we turn to the more debatable problems as to how and when it should be carried out, problems that are hardly to be kept distinct, for they both raise the question of who is the proper instructor in such matters. Here again the knowledge gained by psycho-analysis dictates more negative advice than positive: that is, it has less to say about how to instruct a child than about how not to. This is fortunate, for the latter problem is more difficult than the former; in fact, when one appreciates what dangers are to be avoided, the problem of how to instruct the child presents no very serious obstacles, though, it is true, it is by no means always an easy matter. Of these dangers a few words will be said later; we shall first fix our attention on the positive side, and to do so it is well to realise clearly what should be the aims of the enlightenment. Chief among these are: in the first place, to inculcate an attitude of naturalness towards matters of sex, so that the child will be steeled against the conflicting attitudes he will later encounter; in the second place, to prepare him for the physiological occurrences inseparable from his existence, puberty, etc., and above all for the functions he will one day have to perform; in the third place, to give him such a knowledge of sexual hygiene as to enable him to guide his sexual life amidst the numerous dangers and difficulties that are likely to beset it. These three aims should be carried out principally in the order mentioned, and on the whole need to be carried out by different instructors. Enlightenment should, therefore, be brought about by a series of graduated steps, and should be adjusted to the varying needs of individual children; rule of thumb cannot replace judgement and intelligence in this sphere any more than elsewhere in education.

The first in time of these stages, and the chief in impor-

tance, is without doubt best allotted to the parent, and above all to the mother;<sup>1</sup> this is one of her most grateful and responsible functions, for on the success with which she performs it may largely depend the future welfare and happiness of her children. For it she needs no technical knowledge whatever, and only one capacity—unfortunately, however, a rare one—namely, that of being able to speak to her child on the subject frankly and naturally. Dr. Allen well remarks<sup>2</sup> that 'if the instructor feels any embarrassment in answering queries of the child, he is not fitted to be the teacher, for the feeling of embarrassment will, in some subtle way, communicate itself to the child, and he will experience an indefinable sense of offended delicacy which is both unnecessary and undesirable. Purification of one's own thought is, then, the first step towards teaching the truth purely.' The essential thing is that the child's spontaneous questions should be answered truthfully and simply, with, of course, due regard for his capacity to understand; it is rarely necessary in the first few years to go beyond this and give him knowledge that he does not demand. It sometimes happens, however, especially with intelligent children, that repression develops so strongly that the child never puts such questions, divining already that they would be unacceptable. It is then necessary to probe tactfully into his thoughts on the subject, and take a favourable opportunity to enlighten him on the main points. Ellis<sup>3</sup> writes: 'The child's desire for knowledge concerning the origin of himself is a perfectly natural, honest and harmless desire, so long as it is not perverted by being thwarted. A child of four may ask questions on this matter, simply and spontaneously. As soon as the questions are put, certainly as soon as they become at all insistent, they should be answered, in the same simple and spontaneous spirit, truthfully, though according to the measure of the child's intelligence and his capacity and desire for knowledge. This period should not, and, if these indications are followed, naturally would not, in any case, be delayed beyond the sixth year. After that age even the most carefully guarded child is liable to contaminating communications from outside. . . . Nor is it necessary for her (the mother) to have the slightest

<sup>1</sup> It is rarely expedient for a father to enlighten a daughter, and never a boy.

<sup>2</sup> Mary Wood Allen, 'Child-Confidence Rewarded,' p. 5.

<sup>3</sup> *Op. cit.*, pp. 48, 49.



technical knowledge at this stage. It is only essential that she should have the most absolute faith in the purity and dignity of her physical relationship to her child, and be able to speak of it with frankness and tenderness. . . . If, as a few believe should be the case, the first initiation is delayed to the tenth year or even later, there is the difficulty that it is no longer so easy to talk simply and naturally about such things; the mother is beginning to feel too shy to speak for the first time about these difficult subjects to a son or daughter who is nearly as big as herself. She feels that she can only do it awkwardly and ineffectively, and she probably decides not to do it at all. Thus an atmosphere of mystery is created with all the embarrassing and perverting influences which mystery encourages.' This argument that the initiation should not be delayed until later years is evidently strengthened by the consideration advanced above—namely, that sexual ignorance does not exist in children of these years, so that for the greater part the harm is by then already done. As Dr. Blom rightly remarks, 'better a year too early, than an hour too late.' Dr. Jung has published<sup>1</sup> an impressive example of a beginning neurosis in a little girl of four, which was frustrated and cured by a parent versed in psycho-analysis; his remarks on the case contain many important suggestions in reference to the subject of this paper.

The mother's teaching, however, of which the æsthetic aspects are as important as the informative, should normally be supplemented by those of the school. During the child's school years the dawning sexual life plays such a significant part that to guide it into useful directions should constitute one of the teacher's most important tasks. There are two imperative reasons why at the present time the school should play a leading part in this respect: in the first place, the attitude to the subject of the present-day mother is so frequently ignorant, shameful, or lewd that the teacher has to replace her so far as is possible, and to perform duties that more properly belong to her; in the second place, it is necessary to train the coming generation in such a way that when their turn comes to bring up children they will not be found wanting, as their own parents<sup>s</sup> for the most part have been. There lies, therefore, before the teacher a generation's pioneering work; in the time to come

<sup>1</sup> In the third section of a paper entitled 'The Association Method,' *American Journal of Psychology*, April, 1910.

his task will be less extensive and responsible, but at present he has in his hands one of the greatest opportunities that have ever occurred to his profession, and on the manner in which he responds to this opportunity much will depend of the efficiency and happiness not only of his present pupils, but of their future descendants. It cannot be said that the members of the teaching profession, with very few exceptions, are well prepared for this task, and it is even doubtful whether they are better so than the average parent. Improvement is especially desirable in two respects: first, the attitude of teachers towards affairs of sex needs to be much simpler and franker than it commonly is, and secondly, they need a fuller knowledge concerning the fundamental facts. For the latter purpose invaluable help would be gained by a series of lectures being given to all teachers by competent instructors selected from the medical profession. It is essential that on such occasions the doctor should confine his instruction to his professional knowledge, and deal with the subject on physiological, not ethical lines. This should include the knowledge of how to recognise early signs of nervous disorders in children, for conditions that later cause life-long invalidism and misery commonly evince themselves in childhood, and might be prevented if the early indications were appreciated and appropriately treated. It must further be added that the considerations advanced above suggest in no uncertain voice the desirability of children not being educated too exclusively by unmarried teachers; a good deal might be said on this topic, which would, however, take us too far from the direct object of this paper. The actual mode of instruction carried out in the school is also unnecessary to consider here, nor can the details of it be settled without some experimental trial; those interested in the subject are advised to read a valuable paper fully dealing with it by Maria Lischnewska.<sup>1</sup> In reference to it Ellis says:<sup>2</sup> 'Such instruction would be formal, unemotional, and impersonal; it would be given not as specific instruction in matters of sex, but simply as a part of natural history.'<sup>3</sup> It would supplement, so far as mere knowledge is concerned, the information the child had already received from its mother. But it would by

<sup>1</sup> 'Die geschlechtliche Belehrung der Kinder,' *Mutterschutz*, 1905, Heft 4, S. 137.

<sup>2</sup> *Op. cit.*, p. 57.

<sup>3</sup> Stress should especially be laid on this point.

no means supplant or replace the personal and intimate relationship of confidence between mother and child. That is always to be aimed at, and though it may not be possible among the ill-educated masses of to-day, nothing else will adequately take its place.' The vexed question of co-education of boys and girls has too many aspects to be discussed here, though it has an evident bearing on the present subject. I would merely venture a personal and tentative opinion—namely, that, regarding the question from a purely psychological point of view, I am inclined to think that even if both sexes are educated together in the early years their education should proceed separately after the age of nine or ten.

Last, but also very desirable, is the part to be played by the doctor. It would be advantageous for all children to be given before leaving school lectures on sexual hygiene; these are best given by a doctor, and, of course, to each sex separately. This, however, is by no means sufficient. Every young adult should at all times have direct access to a doctor in whom he would feel confidence, and from whom he could seek advice or knowledge on the many perplexities that are apt to arise. How often does a doctor see patients in after-life who have suffered years of misery that would have been averted by a simple explanation given at the right time! At two periods this advice may be especially needed; about puberty, and just before marriage.

Before concluding, I wish to say a little more on the negative side of the subject—namely, on the dangers to be avoided during sexual development. When enlightenment becomes the usual course followed with children, there will certainly be a risk of its largely consisting of warnings and forbiddings.<sup>1</sup> If a child learns the significance of certain bodily sensations only to be told that they are wrong and improper, then more harm than good will have been done. The most urgent of all the reasons why enlightenment is necessary is the fact that at present to so many children the subject becomes one of guilt, shame, remorse and terror, with the result of crippling them in after years through neurosis or in other ways. Unless the avoidance of this is kept in the forefront of attention, it is far preferable to leave the whole matter alone, and patiently to submit to the present evils. Better no enlightenment than a false one. It is therefore above all necessary for the parent

<sup>1</sup> The signs of this have become only too evident already (1918).

and teacher to strive to acquire a freer, simpler and broader attitude than is now customary, before undertaking the delicate task of avoiding the doing of harm. In years to come we shall perhaps learn how to train and refine the impulses that are so important both for the individual and for the race; at present we should concentrate our efforts on not injuring them. The vital question of the art of love, for instance, is one that can hardly be touched at the present day, when a prurient prudishness spreads its baneful influence over the whole of the finer side of life. Ellis points out that:<sup>1</sup> 'Even in the great revival of sexual enlightenment now taking place around us there is rarely even the faintest recognition that in sexual enlightenment the one thing essentially necessary is a knowledge of the art of love. For the most part, sexual instruction as at present understood, is purely negative, a mere string of thou-shalt-nots.'

A great deal of good in the matter of prevention of harm can be done in quite indirect ways, by a knowledge of the kinds of influences which may thus affect a child. Of these I will refer to only one, premature sexual excitation. Although it is true that the harmful effect of this is in great part due to the child reacting to it by way of shameful and guilty emotions—thus producing pathological repressions—and not so much to the occurrence itself, still the probability of such a reaction is great enough to make it desirable, on this score alone, to avoid wherever possible premature excitation. Now the most important point that the findings of psycho-analysis teach in this connection is that children are at present exposed to harmful excitation to a much greater extent than is believed. Parents in their blissful blindness imagine that there is no risk in circumstances which in fact are fraught with dangerous possibilities. Their ignorance is due to their believing that children are too young to be affected by certain occurrences at an age which psycho-analysis shews to be extremely susceptible in this regard. In particular the risks inherent in certain sleeping conditions that are only too common are undoubtedly greater than is generally recognised. Children of a very tender age, from two to five, are liable to experience excitation provoked by older children, or by nurses, which may have serious consequences in later years. It should be an invariable rule that every child should from the beginning

<sup>1</sup> *Op. cit.*, p. 517.

sleep in his own bed, and that children of opposite sexes should not sleep in the same room. Further, it must be pointed out that many ill effects ascribed to nursemaids, servants, and governesses are often due to improper practices on the part of these, and not to the 'frightening of the child with bogies,' as is commonly believed; the bogies in the child's mind are of a real nature, though, for reasons that cannot here be gone into, they may take imaginary forms. Again, in no circumstances should a young child—by this I mean an infant of more than a twelvemonth old—sleep in the same room as his parents, or in a directly communicating one. It will hardly be credited how commonly young children are vaguely excited by over-hearing marital embraces, often with harmful consequences.

In this paper it has only been possible to deal with the fringe of a large subject, and to consider some of the more urgent and elementary questions. Much careful work in this direction remains to be done, but perhaps enough has been said to indicate the importance of some aspects of education that are at present too much neglected. There is every reason to believe that if these aspects are scientifically, and not prudishly, scrutinised, it will result in incalculable benefits to the health, efficiency, morals and happiness of generations to come. In conclusion, I would repeat that the first thing we have to learn is to stop doing harm; then, perhaps, we may learn to do good.

CHAPTER XXXV

THE VALUE OF SUBLIMATING PROCESSES FOR  
EDUCATION AND RE-EDUCATION<sup>1</sup>

IN a previous paper<sup>2</sup> on the relation of psycho-analytical work to the problems of education, I laid special stress on what may be called the *negative* aspects of education—that is to say, on the avoidance of measures calculated to produce lasting injury on the child's mind, and I pointed out a number of respects in which present-day methods fell short of even this humble ideal. In the present paper I propose briefly to call attention to some *positive* aspects of the relation between psycho-analysis and education—namely, certain respects in which the knowledge gained through psycho-analytical work might to great advantage be made use of for educational purposes. The knowledge in question relates to the process known as sublimation, one which is at the basis of a great part of educational endeavour.

The word 'sublimation,' borrowed from the terminology of chemistry, was introduced by Freud to denote a psychological process defined by him<sup>3</sup> as 'die Fähigkeit, das ursprünglich sexuelle Ziel gegen ein anderes, nicht mehr sexuelles, aber psychisch mit ihm verwandtes, zu vertauschen' ['the capacity to exchange an originally sexual aim for another one which is no longer sexual, though it is psychically related']. In another place<sup>4</sup> he defines it as 'den Prozess der Sublimierung, bei welchen den überstarken Erregungen aus einzelnen Sexualitätsquellen Abfluss und Verwendung auf andere Gebiete eröff-

<sup>1</sup> Read at the Twentieth Annual Meeting of the American Psychological Association, in Washington, on December 29, 1911. Published in the *Journal of Educational Psychology*, May, 1912.

<sup>2</sup> Chapter XXXIV.

<sup>3</sup> Freud, 'Sammlung kleiner Schriften zur Neurosenlehre,' 2° Folge, 1909, S. 181.

<sup>4</sup> Freud, 'Drei Abhandlungen zur Sexualtheorie,' 2° Aufl., 1910, S. 83.

net wird' [' a process by which outlet and application in other regions is opened to over-strong excitations arising from the individual sources of sexuality']. A few general remarks on this subject will be necessary before we can discuss the bearing of it on education.

It has, of course, long been recognised that the sexual instinct supplies important contributions to the more general mental tendencies and capacities, the evidence for this being principally of two kinds: In the first place the close association and even resemblance between the sexual impulse and such activities as those of religion and art leave no doubt in the mind of most thinkers that the former furnishes a considerable body of feeling which finds application in these spheres. Some authorities would go so far as to trace religious and artistic activities entirely to the sexual instinct—and indeed the evidence in favour of this view is much more extensive than is generally appreciated—but the commoner opinion is that the instinct merely adds some of its own peculiar feeling and impulses to religious and artistic tendencies that are already present in the mind, and which originate in other sources. This problem does not concern us here, and it need only be repeated that the main point is accepted by practically all writers—namely, that at all events *some* of the driving force behind the impulses and interests of art, religion and many other mental activities is derived from the sexual instinct. The following passages illustrate this idea; very similar ones might be quoted from Metchnikoff, Moebius, Schopenhauer, and many other writers. Bloch says:<sup>1</sup> ' Aus diesen innigen Beziehungen zwischen sexueller und geistiger Produktivität erklärt sich die merkwürdige Tatsache, dass gewisse geistige Schöpfungen an die Stelle des rein körperlichen Sexualtriebes treten können, dass es psychische *sexuelle Aequivalente* gibt, in die sich die potentielle Energie des Geschlechtstrieves umsetzen kann. Hierher gehören viele Affekte, wie Grausamkeit, Zorn, Schmerz und die produktiven Geistestätigkeiten, die in Poesie, Kunst und Religion ihren Niederschlag finden, kurz, das ganze *Phantasieleben* des Menschen im weitesten Sinne vermag bei Verhinderung der natürlichen Betätigungen des Geschlechtstrieves solche sexuellen Aequivalente zu liefern, deren Bedeutung in der Entwicklungsgeschichte der menschlichen Liebe wir noch näher zu betrachten haben.' [' These close relations between sexual and

<sup>1</sup> Bloch, ' Das Sexualeben unserer Zeit,' 2<sup>e</sup> Aufl., 1907, S. 100.

mental productivity explain the remarkable circumstance that certain mental creations can take the place of the purely physical sexual impulse, that there are psychical *sexual equivalents*, into which the potential energy of the sexual instinct can be transformed. Here belong many affects, such as cruelty, anger, pain, and the productive mental activities that find expression in poetry, art, and religion; in short, the whole *phantasy-life* of mankind in the widest sense has the power, when the natural activities of the sexual impulse are hindered, of furnishing such sexual equivalents, the significance of which in the evolution of human love we shall presently have to consider more closely.] Loewenfeld<sup>1</sup> similarly declares: 'Dass die Libido oder überhaupt die Sexualität einen sehr bedeutenden Einfluss als Triebkraft auf das seelische Leben ausübt, hierüber sind alle jene, welche sich mit diesem Probleme beschäftigten, einig.' ['That sexuality exercises a highly important influence as a driving force for mental life is a matter on which all those who have occupied themselves with this problem are unanimous.']

In the second place, experience has shewn that various activities possess in a high degree the power of diverting sexual impulses, and of thus alleviating undue tension of sexual origin. The general recognition of this fact is illustrated by the frequency with which the advice is given to those leading an abstinent life, or struggling with the habit of masturbation, to apply their interest and impulses to sport, work, and so on. That the energy thus won from the sexual sphere represents a cultural gain and has proved of the highest significance in the progress of civilisation is also widely appreciated.

There are, however, several matters in this connection that are not commonly recognised, and which are of considerable importance in regard to the problems of education. The usual view of sublimation, one implicit in most writings on the subject, is that it is a process whereby the normal sexual desire of an adult becomes, more or less consciously, replaced by an interest in other matters. This conception contains, as we shall see, a number of important errors; they may be summed up by opposing the following statement: Sublimation concerns not so much the normal sexual desire as the individual components of the sexual instinct; it refers to the child far more than to the adult; it is an unconscious process, not a conscious

<sup>1</sup> Loewenfeld, 'Ueber die sexuelle Konstitution,' 1911, S. 173.



one; and it does not consist in a replacement. These points may next be considered in detail, and in the reverse order from that just given.

1. The exchange of the secondary social aim for the original sexual one constitutes not so much a replacement of the one by the other as a diverting of the original energy into a fresh direction; the occurrence is, in fact, better described by the term displacement than by that of replacement. The conative aspects of the affects in question may perhaps be best denoted by the expression desire, or, in Freud's language, the wish. Now, without maintaining that this is, strictly speaking, a form of energy,<sup>1</sup> or that the laws relating to physical energy can be directly applied to it, one cannot avoid seeing certain resemblances between it and physical energy, sufficient at all events to justify one in drawing an analogy between the two for purposes of illustration. The principle of the conservation of energy, for instance, is certainly valid in the mental sphere to a far greater extent than has generally been supposed. The careful psycho-analytical work of the past few years has shewn with ever-increasing plainness that on the one hand desires and other affective processes are very tenacious of existence and resist decay with a really astounding vigour, and that on the other hand what appears to be a cessation of desire is frequently found on closer examination to be actually a transformation of the form in which the desire is being manifested. One feels, therefore, very inclined to venture the generalisation that the same principles of conservation and transformation of energy hold in the mental as in the physical sphere. Such a theory would require a very extended experiential testing before it could be raised to a level of high probability, but the impression one receives of the truth of it is at times very intense when one over and over again witnesses how a given desire may run through a person's life, baffled here and thwarted there, but constantly and untiringly seeking for some means of expression. In psycho-analytical work one sees clearly that the process above referred to of replacement and diverting of interest is substantially one of continuity, and that the later expression is, so to speak, a psychical equivalent of the earlier one. In other words, the energy employed in making use of the new interest *is derived from the old one*, and the later activity is only another, more indirect, means of

<sup>1</sup> See on this point Bleuler, 'Die Psychanalyse Freuds,' 1911, S. 73, 74.

gratifying the same desire. In this way various fundamental desires may run through the whole of a man's life, though the continuity of their manifestations may be not at all apparent to the casual observer or to the subject's introspection.

One reason why this continuity is in most cases not obvious is because the resemblance between the two forms of expression does not appear on the surface, and is often to be revealed only through some analytic procedure. In many instances the association between them is apparently merely a superficial one, and the fact is overlooked that this covers a deeper and inherent connection in the subject's unconscious. The transference of the desire from one field of interest to another is effected by means of the mechanisms that Freud in his 'Traumdeutung' has shewn to be characteristic of unconscious functioning in general; further, the causes of the transference are the same here as in other mental processes where the same mechanisms are to be observed, in dreams, wit, neurosis, and so on. Most often it is largely a matter of displacement alone. The affect, or conative trend, becomes dislocated from the idea with which it was originally connected, and associated with another more suitable one. It is important here to keep in mind that it is the same affect, or desire, that is operative in the two cases; it is not a replacement of one interest by another, but a displacement of a given affect from one idea to another, from the first interest to the second. More complex changes are brought about in the occurrence that is characterised by the replacement of one affect by another—for instance, love by hate or anger. In some cases it is believed by a number of writers that a true conversion takes place by which the one affect becomes literally transformed into the other, particularly love into fear; while others, including myself, consider that the first affect operates rather by evoking an exaggerated manifestation of the second one, which is thus in a way a reaction to a stimulus. In either event the empiric result is the same—namely, that the one affect, which is unable to find satisfactory expression, disappears from view and is succeeded by the other, which therefore stands in some genetic relation to the first.

2. It is important to bear in mind that the process of sublimation is mainly an unconscious one; that is to say, it takes place without the subject being aware of it. It does, of course, happen that, either spontaneously or on advice, a person who

is troubled with a desire that cannot be gratified devotes himself to the pursuit of sport, study, and so on, and in so doing consciously sets going the first stage of the sublimating process by providing the opportunity for this, but even then the actual transference of the affect proceeds unconsciously, as one discovers through psycho-analysis. Occurrences such as these, however, comprise, as will presently be explained, only a small part of what is known as sublimation, and in most instances the whole process is entirely unconscious. This is emphasised in the following passage of Loewenfeld's,<sup>1</sup> who fails, however, to draw some very obvious inferences from it: 'Dabei muss noch wiederholt betont werden: *Nicht die im Bewusstsein sich vordrängende Libido, d.h. das als solches fühlbare geschlechtliche Verlangen ist es, was die förderlichen Einwirkungen der Sexualität auf unser Seelenleben zu stande bringt. Dieser Einfluss kommt lediglich der in das Unterbewusstsein herabgedrängten oder überhaupt nie in das Bewusstsein gelangten Libido, resp. den ihr entsprechenden zentralen Erregungen zu.*' [It must again be repeated: It is not the "sexual hunger" that forces itself into consciousness, *i.e.*, sexual desire felt as such, that brings about the furthering effects of sexuality on our mental life. This influence comes solely from the hunger that has been driven down into the subconscious or which has never entered consciousness at all (or the central excitations corresponding with this).']

3. Of predominant importance in regard to the problems of education is the fact that the process of sublimation is much more a matter of childhood mentality than of adult. Any sublimation that occurs in adult life is but a feeble copy of the enormous extent to which it goes on during childhood, especially during the first half of this; in fact, the weaning of the child to external and social interests and considerations, which is the essence of sublimation, is perhaps the most important single process in the whole of education. The spontaneous activities and interests of children are totally different from those which are the aim of educational strivings, and they have to be replaced by these. In accordance with the principle mentioned above, however, this replacement is not so much the putting of fresh educational interests in the place of the earlier spontaneous ones as the diverting of fundamental desires and interests into new channels; it is the utilising of the same

<sup>1</sup> Loewenfeld, *op. cit.*, S. 180.

energy in other ways. Appreciation of this fact would lead to a much closer study than has hitherto been made of the nature of the energy that stands at our disposal for educational purposes, and of the forms in which it spontaneously manifests itself. Teachers empirically recognise the importance of presenting their subject-matter in such a way as to 'appeal' to children, but the efforts so far made in this direction have been based on a very inadequate study of what the primary interests in children that have to be appealed to really consist in. From Clark University appeared some time ago a stimulating paper<sup>1</sup> containing the data of a questionnaire on 'the spontaneous constructions and primitive activities of children,' including such matters as the kind of things children *spontaneously* do with snow, sand, earth, string, stones, knives, and so on. This paper of Acher's is valuable not only for the extensive data it contains, but also for the clear-sighted vision shewn for the immediate bearing of these on the problems of education. I cannot do better than quote the following passages from it: 'The student of child study who is familiar with the material that has been collected in the past two decades on this subject cannot but be impressed with the great difference which exists between the theory of education which this child study investigation suggests on the one hand, and the theory which underlies much of the actual school work on the other. It is quite evident that there are many instincts and interests of children already revealed by these investigations which are not taken account of and utilised by the school programme of to-day. . . . It thus becomes the imperative duty of educators to follow this course of development and work with the current of psychic evolution and not against it, as is so often the case at present. . . . It is becoming more and more clear as the child study material accumulates that the child has feelings, motives, instincts and interests that should guide the educator in his work rather than that the educator should undertake to direct and modify the child's development. The child must be allowed to evolve naturally and in harmony with its racial inheritance. But in the school work of to-day the social inheritance of comparatively recent times continues to be imposed on the child and the deeper impulses of its soul are scarcely touched. . . . It is needless to say that there are hundreds of other vague instincts,

<sup>1</sup> E. A. Acher, *American Journal of Psychology*, vol. xxi., p. 114.

motives and interests in the child's soul besides those above referred to. The full and complete expression of these would give every child a richness of mind that would characterize it all through life and enlarge its sphere of interests to an extent hardly dreamed of now.'

There are, unfortunately, two serious deficiencies in Acher's work, deficiencies that are inherent in his method of approach, and which need to be remedied by work done along other lines that may serve as a complement to his observations. Namely, he omits to trace either forwards or backwards the spontaneous activities studied by him. On the one hand, not developing the principle of the displacement of energy discussed above, he fails to indicate the precise educational and social uses to which these activities can be put, nor does he discuss the normal fate of the tendencies in question. On the other hand, he fails to see that they are not, as he thinks, primary in nature, but are themselves the outcome of still deeper and older tendencies present in the individual from the earliest childhood. This could not, of course, have been determined from a mere questionnaire inquiry, and it well illustrates the limits of this method. By psycho-analysis of the individual one is enabled to trace in great detail the psychogenesis and later evolution of each of these activities, and if a sufficient experience demonstrates the presence of constant features in this evolution one can with considerable probability formulate certain generalisations along these lines. It may be said that any one accustomed to psycho-analytical work could at once interpret the majority of Acher's observations in terms of still more primitive childhood tendencies,<sup>1</sup> and also indicate a variety of later manifestations in which they might become expressed. This matter will presently be considered from another point of view.

4. The process of sublimation is concerned with much deeper agents than mere ungratified sexual desire in the popular narrow sense. The whole subject is commonly discussed in a superficial manner as if it were a question of the individual being disappointed in love and seeking consolation in the arms

<sup>1</sup> Karl Gross ('Das Spiel als Katharsis,' *Zeitschr. f. päd. Psychol.*, 1911, Heft 7/8) considers that play in children has the function of temporarily unloading and working off the tension originating in primitive instincts, particularly the combative and sexual ones, the direct operation of which is impeded by the influence of a civilised environment. He traces the desire for a number of later activities, such as dancing, mountain-climbing, and so on, to a like source.

of religion, of work and what not, or of his being spurred on by the stimulus of love into some artistic or other activity. For instance, Loewenfeld<sup>1</sup> constantly tests the significance of sublimation for scientific and artistic work, etc., by trying to correlate a given production with a possible love-affair. Such things may presumably happen, but they constitute a very small part of what is meant by the term sublimation. It cannot be insisted on too strongly that sublimation is concerned not so much with normal sexual desire, in the narrow sense, as with the individual biological components of the instinct, *i.e.*, with the various infantile tendencies that later on form the basis of erotic desire as well as of many other (non-sexual) interests. This is clearly of cardinal import for education, for it means that sublimation is not a matter of displacing for other purposes a diffuse energy, but an accurate and specific transference of energy from one given field of interest to another; each special later interest corresponds with a special primary component of the sexual instinct.

In psycho-analytical work one also obtains an insight into the function served by the process of sublimation and the forces that bring it about. It is found that the earlier tendencies that are in this way displaced by later ones are of such a kind as to be unacceptable to the social and ethical standards of a civilised community, and therefore also to those of the child as soon as he begins to be subject to the pressure of his environment, *i.e.*, after the age of about six months. They concern such tendencies and traits as preoccupation with his own body, and especially with particular parts of this, interest and pleasure in various bodily functions, especially those of excretion, selfish inconsideration for others, jealousy and resentment at being disturbed or interfered with, curiosity about such questions as the difference between the two sexes, the origin of babies and the nature of marital relations, and so on, tendencies most of which modern writers group under the broad term of sexual. These tendencies have to be renounced by the child, the completeness and ease with which this is accomplished varying greatly from one instance to another. They, of course, become forgotten in later life, or, as it is technically called, 'repressed'; this is one reason why they are so extensively ignored by adults, and the significance of them for childhood development greatly under-estimated. They do not,

<sup>1</sup> Loewenfeld, *op. cit.*, S. 190, 191, 210, 220, etc.

however, die, as is generally supposed, but undergo a transformation, finding an outlet in more suitable modes of expression, and thereby furnishing energy of incalculable value for social and educational activities; this is the process of sublimation.

It is difficult to furnish actual instances of sublimation that would carry due conviction, because one is not justified here in assuming any considerable familiarity with unconscious mental processes, so that the instances given will run the risk of appearing mere unsupported and improbable assertions. With this reservation, however, the following remarks may be made: It has fallen to me, as to most other psycho-analysts,<sup>1</sup> to have the opportunity in a great number of cases to trace the impulses that led various persons to enter upon their respective profession or employment, and even matters so important as this one finds to be dictated by unrealised and buried tendencies to a far greater extent, in comparison with external inducements and opportunities, than is generally supposed. These external factors, important as they may seem to the casual observer, are often but the pretext for the expression of some primary, submerged striving. A child, for instance, who has conquered a sadistic love of cruelty may when he grows up become a successful butcher or a distinguished surgeon, according to his capacities and opportunities. One in whom the exhibitionistic fondness for self-display was pronounced may develop into an actor, an auctioneer, or an orator. There comes to my mind a patient who as a child had shewn an unusually strong interest in the act of micturition, in the guidance of the flow, in the force of it, and so on: when a little older he was passionately fond of playing with streams and puddles, manipulating them in every possible way; he is now a well-known engineer, and has constructed a number of canals and bridges. Others, whose primary interests concerned more solid excretions, sublimated these in their childhood through various games ('spontaneous activities' of Acher), and later became—one an architect, another a sculptor, a third a type-moulder, and so on; one, finding that solid substances were more easily moulded and played with after they had been heated, developed a fondness for cooking and became a chef. Naturally it is not maintained

<sup>1</sup> See, for instance, Stekel, 'Berufswahl und Kriminalität,' *Archiv für Kriminalanthropologie und Kriminalistik*, 1911, Bd. xli., and Fortmüller's review of Ostwald's 'Grosse Männer' in the *Zentralbl. für Psychoanal.*, Jahrg. i., 1911, S. 348.

that these factors were the only ones operative in determining the choice, and still less that the professions named are always chosen as a result of the particular unconscious agents just mentioned, but extensive experience of the tenacity, vigour and durability of such unconscious factors forces one to estimate their importance much more highly than is generally done.

Returning to the subject of education, we have to note that processes similar to those just indicated in connection with general matters, such as the choice of a profession, are also at work in narrower and more specific interests of childhood life. Whether a particular subject, geography, history, etc., will appeal to a given child, and whether he will be successful in his studies of it, very largely depend on the special aspect that is first presented to him, and on the extent to which this aspect becomes associated with interests already existent in his mind. On the other hand, special difficulty that a child may have in acquiring a given subject is often due, not, as is usually thought, to any inherent deficiency in this respect, but to inhibitions that originate in a more primary interest with which the subject has become secondarily associated, and which has transferred on to the latter its own affects, difficulties and conflicts. The main thesis of this paper is that a fuller knowledge of the primary interests and tendencies of the child would enable us to devise methods of education that would, as it were, link on the tendencies we wish to develop to those already existing, and thus by accurately diverting the primary interests utilise them for social and educational purposes with much greater effect than is achieved by our present empirical and rule-of-thumb methods.

If these principles are accepted, the question inevitably arises as to whether they are at all compatible with the present system of mass teaching, or whether on the contrary they do not lead to an insistence on a more individualistic system; the importance of the question lies in the fact that it is a practical one, so that the value of the principles will probably be estimated by it. It cannot be denied that the weight of the foregoing considerations must be added to that of evidence from very different sources which goes to shew that much greater attention will have to be paid to the individual child if the best results are desired. Indeed, this whole question may be regarded as settled on the scientific side; it is now merely a financial one. In this connection, however, we may add the



following consideration: As has been insisted on by both Freud<sup>1</sup> and Loewenfeld,<sup>2</sup> there are distinct limits set by nature to the extent to which sublimation is possible, and it is, above all, important to bear in mind that these vary enormously with different individuals. Our present system of forcing all children, except those obviously defective, through the same intellectual mill is probably productive of much less harm than our even stricter custom of exacting, under fearful penalties, a uniform moral, social and ethical standard of behaviour. In all these respects there should be a greater regard for the individual constitution and individual tendencies, a more lenient tolerance combined with a more prescient knowledge. In every branch of education there is need of a looser rein, but also of a more clear-sighted guidance. This would give us, it is true, a greater variety in the social commonwealth, but also a more accurate fitting of the individual to the tasks he has to fulfil, and a much greater development of individual capacity and efficiency.

To those who are startled by these prospects we may offer the following consolatory consideration, which will shew that more compromise with the existing modes of education is possible than might have appeared from the previous remarks. Experience teaches that there is a considerable stereotypy in the forms that sublimation of a given tendency takes, and, as there are only a quite limited number of such primary tendencies, it follows that the results of sublimation must shew a considerable resemblance in a large number of individuals. So far as one can see, there seems to be no limit to the possible variations that the effects of sublimation may shew, this being one cause of the fact that no two individuals are precisely alike, but nevertheless it is found in actual practice that similar paths are followed in a considerable number of cases, particularly when the environment is about the same. If, then, it is agreed that the children who deviate from the average are to be relatively neglected, much as they are at present, it should be possible to devise educational methods that are best adapted for the more usual types of sublimation. It will be obvious that the task of making the necessary preliminary investigations and of devising these methods cannot be relegated to the school teacher, who has not only neither

<sup>1</sup> Freud, *American Journal of Psychology*, April, 1910, p. 218.

<sup>2</sup> Loewenfeld, *op. cit.*, S. 221.

the training nor the opportunity for such detailed investigations, but to whom certain aspects of them, *e.g.*, the sexual, may be counted upon to appear distasteful, and that it is probably a matter for the combined efforts of pædagogical and pædological psychologists. Their findings must then be communicated to the teacher, for whom it might not even be obligatory to understand the full rationale of them.

The problems of *re-education* meet us in several different forms, according as the subject is a neurotic or insane patient, a pervert, a criminal, or any other social failure. In all these the process of sublimation has failed to effect its social purpose, and the unsocial or morbid activity that has resulted is the product of primary childhood tendencies that have never been properly controlled; the subjects are victims of what may be called miscarried sublimation. The problems of the nature and variety of this miscarriage involve a study of many other matters besides those strictly belonging to education itself, and I will here confine myself to one of them where the relation to the latter is especially close—namely, concerning the possibility of the foregoing principles being applied to the treatment of the insane. I refer in particular to the advanced cases of dementia where the patients often lead a practically vegetative existence. They are not only unable to do any useful work, but even to care for or feed themselves, and their activities may be reduced to the monotonous and reiterated performance of some apparently meaningless movement. Thanks to the studies of Freud, Abraham and many others, it is now known that these activities represent a distorted and degenerated form of infantile conduct of an auto-erotic kind. Defeated in life, and prevented by their internal inhibitions and conflicts from permanently sublimating their inborn tendencies in satisfactory directions, *i.e.*, from 'adapting themselves to their environment,' they have reverted to a state of early childhood, and their interests and activities are correspondingly reduced and simplified. These are manifested mostly, as has just been remarked, in distorted and at first sight unrecognisable ways, but often enough in the naked infantile form itself; an unmistakable instance of the latter is the frequency with which the depths of dementia are accompanied by preoccupation with the dejecta, a condition which in an adult patient is equally troublesome and repulsive.

Many efforts have been made to divert the available energy of such patients into useful or, at all events, less repellent channels; a recent example that may be referred to is the work of Miss Kent<sup>1</sup> on habit-formation in dementia præcox. All such endeavours that I am aware of, however, have been not only too pretentious in their scope, but have not taken into account the actual nature of the energy that is to be diverted. The interests that are intended to replace the stereotyped behaviour, *i.e.*, the manifestations of the infantile tendencies, are in most cases totally disconnected with the latter, whereas every effort should be made to provide interests that would directly link on to them; to do this it is, of course, indispensable that a preliminary study be made of the precise meaning of the patient's manifestations, and therefore of the nature of the energy that is at his disposal. Further, it will be evident from the previous considerations that sublimation proceeds by gradual stages, these being, in fact, parallel with the development of the individual. One cannot, therefore, aim too high at first, but must imitate nature in advancing deliberately from one stage to the next. It seems reasonable to infer that, when an adult has reverted to a condition which psychologically is very close to that of infancy, the surest way to arouse him from his apparently hopeless state would be to get him to traverse paths similar to those characteristic of infancy. A more hopeful line of work than that commonly attempted would therefore be to correlate the activities spontaneously shewn by the patients with those that they correspond with in childhood, and then make use of the paths of sublimation instinctively employed by the normal child. No doubt modifications would have to be introduced to suit the special circumstances, but in general I am convinced that much could be learned for this purpose by studying closely the evolution of early childhood. There is every prospect that attempts carried out in this direction would prove of considerable value in the treatment of advanced dementia.

Fortunately, these unambitious efforts represent the least hopeful re-educational problems. With such patients it may be said that their sublimating capacities are for all practical purposes paralysed, and one would be satisfied to be able to restore even a modest level of mental activity. In all other classes of case one aspires to loftier aims, certainly to making

<sup>1</sup> G. H. Kent, *Psychological Review*, vol. xviii., p. 374.

the individual an efficient member of society. This, however, is not the place to enter into the success of psycho-analysis in undoing the morbid development of these subjects by means of unravelling the psychogenesis of their unhealthy manifestations, and in thus enabling them to divert for social purposes the tendencies which their early education failed to sublimate. It is clear that, however brilliant such success may be from the point of view of the individual—and even here it is often hampered to a serious extent by both intrinsic and extrinsic factors—from the point of view of society it can only be regarded as a palliative measure for dealing with an extravagant evil. It is time that society, confronted with the undiminishing hordes of her failures, began to inquire into the significance of a state of affairs that can almost be described as a bankruptcy of true education. The real meaning of this extravagance would then be discovered—namely, that civilisation has reached, or is on the point of reaching, the limit beyond which unguided sublimation can no longer be successfully maintained.<sup>1</sup> The instinctive strivings of mankind have displaced from the primary inborn tendencies a mass of energy that through various social activities has built up what we call civilisation, but it seems probable that the amount of energy in this way accessible is even now overdrawn. If the present level of civilisation is to be maintained, and further progress made, it will become necessary to supplement the instinctive forces making for sublimation by a conscious and co-ordinate guidance. The first logical step in this direction must be a careful and unprejudiced penetration, along psycho-analytical or similar lines, into the deeper layers of the mind, particularly of that of the child. Such an investigation is bound to yield invaluable results for education, not only in the narrower sense of school teaching, but also for child-training in the broadest sense of the word.

<sup>1</sup> Since this sentence was written the world-war has provided an illustration of one of the ways in which the bankruptcy in question may become manifest.

## CHAPTER XXXVI

### THE UNCONSCIOUS MENTAL LIFE OF THE CHILD<sup>1</sup>

IN the following remarks the subject of the unconscious mental life of the child will be dealt with from the point of view of a particular mode of approach to child-study on the one hand, and of a particular conception of what is meant by the term 'unconscious' on the other; in other words, from the standpoint of psycho-analysis.

The mode of approach to child-study to which I refer is primarily that of a psycho-analytic exploration of the adult neurotic mind, a fact which in itself immediately excites prejudice as to the validity of any conclusions reached in this way. Three critical questions will at once suggest themselves in this connection: First, to what extent are we justified in transferring to the normal conclusions avowedly based on investigation of the abnormal? Secondly, what value has an examination of the adult mind for the purpose of child-study, and are not memories of childhood distorted beyond expression in the adult mind? Thirdly, how much reliance can be placed on the psycho-analytic method of research, and on the conclusions reached by the use of it?

It is not possible to discuss the last of these questions here, for to do so would lead us too far from the present subject, and I must therefore be allowed for the purposes of these remarks to make the assumption that the lines on which the psycho-analytic method is carried out are sound ones, so that I may confine myself here to expounding some of the conclusions that have been arrived at by those who employ it. In the case of the other two questions I can at least indicate the nature of the answers that may be given to them.

As to the first question, concerning the relation of the

<sup>1</sup> Read before the Child-Study Association, in London, March 16, 1916. Published in *Child-Study*, vol. ix.

normal to the abnormal mind, there is this to be said. Although at first sight there seem to be evident differences between the workings of the neurotic and what may be called the normal mind, nevertheless closer attention to the matter shews that these are always differences in degree rather than in kind, that the same forces are in play in the two cases, and that—strange as it may appear—disease does not add any new element that is not already present in the healthy mind. The grouping of the forces operative may be modified in the case of a neurosis, and their relative perspective altered, but the structure and mechanisms of the mind remain precisely the same as in the normal, and one of the principal differences between the two is that, owing to the magnification afforded by neurotic reactions, it becomes easier to discern and trace out the action of fundamental character traits when one is dealing with a neurotic person. Further, neurotic tendencies have such a widespread incidence—no one being entirely free from them—that it would be more correct to regard an absolutely healthy mind as the more abnormal, in the sense that it constitutes a theoretical abstraction rather than a description of what is actually met with.

The third criticism mentioned above, concerning the relation between the child and adult mind, calls for a more detailed explanation. The familiar saying, 'the child is father to the man'—one to which no more than lip service is usually paid—is taken very seriously and applied very literally by the psychoanalyst. As the result of his investigations, he holds not merely that certain interesting resemblances can be perceived between the child and the adult into which it later develops, an observation easily made and generally recognised, but that the child's mind persists throughout the whole of life in an unaltered form by the side of, and concealed by, the adult mind. This persistence is of a peculiar kind, for which no analogy can be found elsewhere in nature; what constitutes its unique feature is the curious circumstance that the child's mind is to be found in adult life in its original and unchanged form at the same time as the adult mind into which it has developed, a paradox which becomes perhaps less startling, however, when one bears in mind the difference between form and energy, between what may be called the static and the dynamic aspects of mental processes.

It is true that, in so far as the infantile mind still produces

external manifestations in adult life, it does so only in a modified form and rarely in its primitive way (really only in mental disorder), but the reason for this is that the unchanged form of the infantile mind is entirely withdrawn from external observation in adult life, being buried in the depths of the unconscious. It constitutes the core and the characteristic part of the unconscious mind, which up to the present has been found capable of exploration only by means of the psycho-analytic method. To the consideration of its typical features we shall return as soon as we have come to an understanding about the meaning of the term 'unconscious mind.'

Without entering into the historical question of the many senses in which this term has at various times been employed,<sup>1</sup> I propose simply to indicate the sense in which it is used in psycho-analysis, which is the one in which it will be used in this paper. The word 'unconscious' here does not so much mean that there is no quality of consciousness attaching to the mental process in question—though this is probable enough—as that the conscious ego is *unaware* of it. Thus an unconscious idea means an idea, which may be merely a latent memory, that at the given moment under consideration is not present in consciousness, so that the ego is not aware of it. This is a simple enough conception, but there are two further matters in regard to it that are not so commonly appreciated. The first is that such ideas are not always latent, as might well be supposed, but that in various circumstances they may exert important activities without at all penetrating into consciousness. The readiest proof of this is to be obtained from observation of so-called post-hypnotic phenomena, where an idea implanted by the physician while the subject is in a somnambulant state may subsequently lead to quite complicated actions being performed by the subject, without his having the least notion of the source of such impulses—*i.e.*, of the implanted idea. Similar proofs of the dynamic power of unconscious ideas may easily be obtained by investigation of dream life, or of various everyday slips in mental functioning, such as slips of the tongue and pen, errors of memory, etc.<sup>2</sup>

The second point is that the correlation between the importance of a given idea and its absence from consciousness is not at all what it is commonly assumed to be. The general opinion about this is that if an idea is not present in conscious-

<sup>1</sup> See Chapter VI.

<sup>2</sup> See Chapter IV.

ness it is because it is not important enough, and that it can penetrate into consciousness only when it attains a sufficient strength—*i.e.*, a sufficient degree of affective significance. This, however, is only true within a very limited range. It can easily be shewn that many unconscious ideas are quite the reverse of weak or insignificant—indeed, that they represent a most essential part of the personality.

We have therefore to draw a distinction between two classes of unconscious mental processes: between those on the one hand that fail to reach consciousness because of their lack of importance, and those on the other hand that fail to do so because of their excess of importance. To these two classes have been given the names of 'preconscious' and 'unconscious' respectively. Preconscious thoughts comprise the vast number of thoughts that are not present in consciousness at a given moment, but which have the capacity of entering consciousness under appropriate circumstances without any special difficulty—*e.g.*, when they are called up by a suitable train of association. Thoughts that belong to the unconscious proper, on the contrary, have not this capacity. Between them and consciousness there is interposed an almost insuperable barrier, and without adventitious aid it is not possible for them to surmount this. On any attempt being made to bring these unconscious thoughts into consciousness the barrier manifests itself, subjectively as a sense of intense repulsion against the thoughts on the part of the person, and objectively as a sense of opposition against the attempt on the part of the outsider.

There is good reason to believe that this opposition, or 'resistance,' as it is called, is a manifestation of the same set of forces that are in constant action in restraining the unconscious thoughts from entering consciousness, so we see that the barrier in question is really a dynamic pressure exerted against the onward flow of unconscious thoughts. This dynamic pressure is given the technical name of 'repression,' and it is easy to shew that its function is to keep from consciousness, so far as is possible, thoughts that are unpleasant and painful to the ego. It does not need much introspection to detect traces of this mechanism even in consciousness itself—namely, the tendency to ignore what we would rather not see or know, and to turn our attention away from thoughts that are personally distasteful; it is indicated in the very use of such



phrases as 'repulsive ideas,' 'thoughts that repel one,' and so on. But from the nature itself of the process it is evident that we can have little conception of the extent to which it is in operation, for thoughts from which conscious attention is deflected are, by definition, those of which we are least aware. I lay emphasis on this expression 'deflection of attention,' for it is a common mistake to regard the process of repression as one in which the person deliberately pushes out various thoughts from consciousness, whereas it is much more a process that *prevents* them from ever entering consciousness, though the former occurrence is naturally the more familiar to us.

Investigation of thoughts that belong to the unconscious proper shews that they possess a number of peculiarities which sharply distinguish them from conscious and preconscious thoughts, peculiarities which I cannot even enumerate here.<sup>1</sup> They differ in both their content and their mode of functioning. We may, therefore, summarise the foregoing statements by saying that when one uses the expression 'unconscious' in the psycho-analytical sense, one denotes by it mental processes that are (1) unconscious, (2) dynamically active in the production of external manifestations, (3) of high significance to the personality and (4) endowed with certain peculiar attributes that sharply distinguish them from the type of mental functioning with which we are familiar.

As was indicated above, the core of the unconscious mind, in the sense just defined, not only dates from the period of early childhood, but actually is the infantile mind itself, which has persisted in an unaltered form as if it had been embedded in the centre of all later mental activity. The manner in which this curious state of affairs comes about will presently be considered. Before taking up this genetic question, however, I wish to call attention to another matter in more direct continuation of our discussion. Investigation by means of psycho-analysis reveals the remarkable and fundamental fact, on which I desire to lay special emphasis, that parallel with, and no doubt related to, the barrier which we have said exists between consciousness and the unconscious proper there is also an external barrier between the infantile and the adult mind, both in the same individual and in the relation between adult and child.

The difficulty experienced by an adult in attempting to get

<sup>1</sup> See Chapter VI.

on intimate terms with the recesses of a child's mind has often been commented on, and, indeed, constitutes probably the main obstacle in the way of child-study, but there are two matters in this connection that certainly are not commonly appreciated in their full import. One is the extent to which the resistance on the part of the child operates. When one hears a fond mother confidently assert that her child tells her everything there is in his mind, one may be perfectly certain that she is the victim of a gross illusion. Not only does the child from the tenderest years instinctively preserve his inmost thoughts from any adult, however dear, but he is both unable and unwilling to formulate many of them even to himself, and these are by no means the least important.

The second matter, the resistance on the part of the adult, is still more generally ignored. The only trace of any recognition of it is to be found in such remarks as 'How hard it is to see things from the child's point of view!' a difficulty usually ascribed to defective imagination. Far more important, however, is the affective opposition to seeing various things that go on in the child even when the opportunity does present itself, and still more to appreciating them at their true significance when it is no longer possible altogether to overlook their existence. This opposition is not merely similar to, it is identical with, the resistance we have described above as operating against the recognition of unconscious thoughts on the part of consciousness. To repeat this in other words for the sake of emphasis, the difficulty experienced by adults in penetrating into the child's mind is grossly identical with the barrier that exists between his own consciousness and his unconscious, and until this barrier is overcome, as it is in psycho-analysis, it is impossible for an adult to see the child's mind as it really is.

This is the final answer to those critics of psycho-analysis who maintain that they have assiduously studied the child's mind without being able to find in it the various characteristics and contents described by psycho-analysts. Of course they are unable to do so, for the simple reason that they are unable to see what is in their own mind. Until a person has access to the recesses of his own mind he certainly will fail to penetrate to the recesses of another's mind, above all to those of a child's.

It is perhaps in place here to broaden the statement made above as to the basis on which the psycho-analytical theory is

built. I said to begin with that the mode of approach to child-study here under consideration is primarily that of a psycho-analytical exploration of the adult neurotic mind, and I dealt briefly with the objections to this mode of approach. While this remains true historically, the statement should be completed by pointing out that other equally important sources of material have since become available to us. These are, first, various anthropological data—mythology, folk-lore, comparative religion, etc.; secondly, psycho-analysis of normal adult minds, so far as any mind can be called normal or at all events healthy; thirdly, psycho-analysis of children's minds, of which a number have now been published; and last, but not least, direct observation of normal children by eyes whose vision has been sharpened by the breaking down of the barrier always existing between consciousness and the unconscious mind, eyes whose gaze is no longer interfered with by the refracting prism of prejudice which divides the field of vision into what may be seen and what may not be.

We have now to take up the genetic question of how a distinction comes to be effected at all between the unconscious and the conscious mind, and here I shall have to adopt the form of a somewhat didactic exposition of the conclusions that have been reached as the result of psycho-analytic work. In the first place, there is no reason to suppose that the form of mental activity present during the first few weeks or even months of life exactly corresponds with either conscious or unconscious activity as we know these in later life, though it probably resembles the latter of these more than it does the former. It is practically certain, for instance, that there is at that time no consciousness of self as distinct from the rest of the world, and this general lack of differentiation is probably characteristic. The splitting of the mind, therefore, into conscious and unconscious processes represents an acquired state of affairs, and not a primary situation.

According to Freud,<sup>1</sup> there exist from the very beginning of life two separate systems of mental activity which constitute the precursors of what later would be called conscious and unconscious thinking respectively. He conceives the mind, to start with, as an apparatus or machine which can be stirred into activity by any stimulus, emanating either from without or from within the individual, and maintains that the object of

<sup>1</sup> 'Die Traumdeutung,' 1914, Kap. vii.

the resulting activity is always to restore the original condition of rest by bringing about a state of affairs in which the effect of the disturbing stimulus is nullified. The result of setting the primary system in action is to create a condition of diffuse restlessness and excitation, which radiates widely throughout the mind, and which seeks in every direction for an outflow of the accompanying energy. The tendency to replace this state of excitation, which is experienced as pain or 'displeasure' (*Unlust*), by the relief of satisfaction, which is experienced as pleasure (*Lust*), constitutes what we term a wish.

At the very beginning of life, immediately after birth, there is hardly time for this state of affairs to develop, for those in attendance, the mother, nurse, and so on, at once see to it that the stimulus is nullified—*i.e.*, that the child's wants are stilled. It is, for instance, kept warm, protected from light and sound stimuli, and, if necessary, fed. On the next occasion that a similar stimulus occurs—let us take that of hunger—the excitation set up proceeds in both of the two directions open to it, towards the afferent, sensory side, and the efferent, motor side of the mind respectively. The former results in a re-animation of the perception which on the previous occasion represented the cessation of the disturbing restlessness, in this case the sensations and perceptions accompanying the act of being fed.

In other words, the child imagines it is being fed, a process known as hallucinatory gratification of a need, in which a perceptual identity of the current situation with a previous one is brought about. Under pathological circumstances in the adult this process is apparently capable of procuring satisfaction over a long period of time. An example frequently seen is that of a hallucinatory psychosis in which the patient secures in his imagination something that is denied him in reality, such as the restoration of a lost object of affection; the same is to a less extent true of ordinary day-dreaming. As a rule, however, and especially where the exciting stimulus is insistent, such as in the case of an organic need, the imagined gratification soon ceases to retain its capacity for satisfying the need, and recourse must be had to other methods. The diffuse excitation now presses against the motor end of the psychical apparatus, and in the instance in question the child squirms and cries. This has the effect of moving the environment—the nurse or mother—to take steps which re-establish the per-

ceptual identity of gratification in the current situation with that of the previous situation, the stimulus of hunger being therefore stilled by the actual sensations of repletion, as distinct from the preceding illusory gratification.

It is on the basis of such experiences as the one just described that the child's mind comes to develop the second system of mental activity mentioned above. This differs fundamentally from the first in both its aim and its mode of functioning. We have seen that the effect of a stimulus applied to the mind is to set up a psychical impulse which awakens the memory of something that on a previous occasion stilled this excitation, and the goal of which is to revive the perception that accompanied this gratification. The most direct way of accomplishing this is for the stirred memory immediately to excite a new perception of the same kind in the form of a hallucination. But the bitter experience of life soon shews the inadequacy of this method of satisfying the need, and modifies this primitive mode of mental functioning—or, rather, substitutes for it a second, more practical one.

In the action of this second system the tendency of the psychical impulse to 'regress,' as it is technically called, from the memory picture backwards towards a corresponding perception is inhibited, and the accompanying energy is directed towards other ways of attaining the desired goal—namely, the reproduction of the satisfying perception. The only other possible path to this is a complicated one *via* the motor side of the mind, as a result of which an alteration in the environment is brought about that produces a real perception instead of an imaginary one. Thus an adult who is hungry enters a restaurant and gives an order for food, or takes some corresponding step of a motor nature. Regarded as a whole, it is clear that, however complicated the path followed that leads to the desired alteration in the environment, it in any case represents merely a circuitous route to the same goal, the wish-fulfilment, which in the primary system was attained by the direct but unsatisfactory method of hallucination.

The two systems, therefore, though they aim ultimately at the same goal—the allaying of excitation—achieve this by quite different means: the one leading to imaginary gratification, the other to real gratification. They may in this respect, as well as in others, be compared to the difference between day-dreaming and action as two methods of satisfying desire. We

have now to consider more closely the differences in the actual working of the two systems, the second of which supplants and controls the first. There are two main differences between them, which have this in common: that they are both concerned with a control and *inhibition* of the free movement of psychical energy characteristic of the first system.

Everything in the functioning of the first system is concentrated on this one matter of allowing the freest possible movement to take place throughout the whole system. Thus an excitation passes with the greatest readiness from one idea or memory to another, no form of association being too narrow a bridge to allow of the passage. The well-known characteristics of logical thought are entirely lacking; direct contradictions are ignored, the slightest play on words is made use of, ideas are grouped together that have only faint resemblances between them, and there results a general levelling of thought not altogether unlike the kind familiar to psychiatrists in the condition of acute mania.

In the second system, on the contrary, a ban is placed on this freedom of movement. The first reason for this is, so to speak, an economical one. As much of the energy as possible has to be reserved for its ultimate purpose of altering the environment by means of motor effort, and so all dissipation of it has to be avoided as far as possible. The energy accompanying the original excitation is localised at its appropriate site, while tentative efforts are made to seek out the memory traces that are most suitable for leading to the desired motor goal. The localisation of the energy produces, it is true, a temporary state of tension at that site, but as soon as the channel is cleared in the appropriate motor direction the localising inhibition is removed and action at once follows.

The second reason for the inhibition in question has to do with the pleasure-pain principle. If the original stimulus is definitely disagreeable, such as a fright or pain, then inco-ordinate motor manifestations are aroused, until sooner or later the individual becomes withdrawn from the sphere of action of the stimulus and pain ceases to be felt. Here there is no subsequent tendency to re-animate the painful perception—*i.e.*, to imagine the pain; on the contrary, in the primary mental system there will be a tendency to get away from the painful memory whenever there is any chance of its being aroused, and to excite the memory would bring with it the

danger of the excitation passing over, as a regression, into the perception, with the production of fresh pain. This turning away from the painful memory, which represents, no doubt, a repetition of the original flight movement, is the first example and the prototype of what in later life would be termed psychical repression, and it is an ostrich-like behaviour that is commonly enough to be observed in adult life.

In the first mental system, therefore, anything disagreeable is simply ignored and cannot be incorporated at all in any psychical concatenation; *the system can do nothing except imagine the fulfilment of wishes*. The second system, on the other hand, cannot ignore the painful in this way, for it has to have at its disposal as many memories as possible in order to use the knowledge of their nature in making its selection of suitable paths for affecting the outer world. It can make use of a painful memory for this purpose only when it is able in some way to prevent the development of pain that stimulation of a painful memory would naturally cause. It prevents this in the same way as we saw above it prevents a diffusion of energy—namely, by exerting an inhibiting and localising influence—in this case, on a painful affect. A common analogy to this in daily life is when a man brings himself in cold blood to speak of a topic which under other circumstances—*e.g.*, when his feelings are not under control—would prove extremely painful; that is to say, although the idea is actively in consciousness he can suppress the feelings connected with it. This affective inhibition, as it may be called, is never quite complete; but, on the other hand, if it fails to take place, then the primordial pleasure-pain principle enters into operation, the memory is discarded, and cannot be used even by the second mental system. This is just what happens in the important mechanism of psychical repression.

We have now given an outline sketch of the two mental systems present in the earliest period of life, and only a few words will be necessary to indicate the mode of transition from these systems into the conscious and unconscious sections of the mind that are met with in later life. It may be said that the first system remains practically unaltered, and constitutes part of the unconscious mind of later years. The second system undergoes a series of progressive changes in development, the study of which belongs to genetic psychology rather than to psycho-analysis. The relationship between the two

systems, however, becomes modified in a number of important respects, concerning which something must be said.

The control of the primary system of thought by the secondary remains imperfect throughout life, and in a number of circumstances the second one, our logical, conscious thinking, falls partly or entirely under the influence of the first. The most perfect examples of this are in delirium, insanity, and our ordinary night dreams, which is one of the reasons why the study of dreams affords the key to the understanding of insanity.<sup>1</sup> Closely allied to these conditions are the common psycho-neurotic 'nervous troubles,' which are the expression of a compromise between the two systems. The action of the unconscious constantly affects our daily life, our character, judgements, and conduct, in a multitude of subtle ways that cannot be here described; but I may refer to the common occurrence of a total failure on the part of our logical, conscious thinking processes in such matters as apparently inexplicable forgetfulness, slips of the tongue or of the pen, errors in memory, and like tricks of the mind.<sup>2</sup> In all these cases the second (logical) system has fallen under the influence of the first (unconscious) one, and the apparent failure in the mental machinery is really nothing other than the normal, correct functioning of a quite different mental system.

Inadequate control on the part of the secondary system, with the consequent danger of the situation being more or less completely taken over by the primary one, is essentially due to the concomitant action of two factors, both of which originate in childhood life. It has to be remembered, in the first place, that the secondary system develops, especially in its fuller elaboration, more slowly, and consequently later, than the primary one, so that the kernel of the mind remains throughout life the unconscious group of wish-impulses. They cannot be altered or worked upon directly by the preconscious and conscious parts of the mind, the power of which is restricted to the guiding of these wish-impulses into suitable and practicable directions.

Now, among the unconscious and indestructible wish-impulses are a considerable number the fulfilment of which would be in flagrant contradiction with the aims of the later developed secondary system, and these on ethical, social, æsthetic and similar grounds. The fulfilment of such wishes

<sup>1</sup> See Chapters VIII. and XII.

<sup>2</sup> See Chapter IV.



would no longer produce a pleasurable affect, but a disagreeable one, and it is this affective transformation of pleasure into pain that constitutes the essence of psychical repression. What in the child is expressed in this simple form of dislike takes on in later life more elaborate forms of repudiation, condemnation, and so on.

Examples of affective transformation in early childhood are very easy to find: A child of two will in all innocence do things that disgust him when he is a few years older; a boy of five will torture animals, hurt his sister's feelings by destroying her most cherished possessions, and purloin the property of others with a callousness that would be impossible to the same boy a few years later on; a girl of six will wear skirts of a length that would bring a blush to the cheeks of a maiden of sixteen, and will, of course, think nothing of it; and similar examples are a matter of everyday observation. The standards are entirely different at the two ages, as they are in the two systems of the mind, and, indeed, for much the same reasons.

The state of conflict in which a large part of the primary mental system permanently remains in regard to the secondary system, one which later becomes the conflict between the unconscious and consciousness, radically affects the relationship between the two systems. It is no longer possible, in such cases, for the secondary system to restrict its activity to the mere finding of suitable ways to alter the environment so as to bring about a gratification of the wish in question. It is now opposed to the wish itself, and vetoes the gratification of it. This state of affairs is pregnant with consequences for the whole development and activity of the mind. Before the unconscious wish can achieve expression it has somehow to pass the barrier that we described as existing between the unconscious and consciousness, one which we now see to be a construction of the secondary mental system.

It is rarely possible, at least in mental health, for it to pass this barrier in an unaltered form, and it has to undergo a complex series of modifications before it can emerge in a form suitable to the demands of the secondary system. In this distorting process a certain amount of renunciation is inevitable, at least of the original aim of the wish; and an exchange of aims takes place, the original one being replaced by one better adapted to the standards of the secondary system.<sup>1</sup>

<sup>1</sup> See Chapter XXXV.

The renunciation and exchange are by no means always carried through with the smoothness that might be desired, and the unsatisfactorinesses and frictions so often to be observed in mental functioning can in great part be traced to the difficulties and imperfect success met with in the attempt.

The other factor leading to inadequate control on the part of the secondary system, one which often coincides with the first one just mentioned, is the reinforcement of the primary, unconscious wishes that occurs when they are strengthened by impulses arising from the organic instincts. These are, of course, mainly the instincts of nutrition and sex, and, as the former never enters into anything approaching the violent conflict with the standards of the secondary mental system that the latter habitually does, it is comprehensible that—as is fully confirmed by investigation—sexual impulses are principally responsible for the more serious conflicts between the two regions of the mind.

It was remarked above that the two factors now under discussion both take their origin in the period of childhood, so that it may be appropriate to say here a few words on the much-discussed subject of infantile sexuality, or, rather, on the interesting question of how it comes about that the very existence of so evident a phenomenon can be overlooked and even denied. This I would ascribe to the following circumstances: In the first place, there is the strong tendency, sometimes fully carried out, artificially to restrict the very conception of sexuality, not merely to excitations and their consequences in the genital area, but even to certain selected ones of these, the selection being arbitrarily performed rather on ecclesiastical than on scientific principles.

Now, although no psychologist or biologist would seriously subscribe to such a limited definition, the tendency in question is so strong that, however much reason may say to the contrary, it often continues unconsciously to influence the attitude on such matters. It is, for instance, easy for some people to forget that the appearance of the hair, the depth of a voice, the sparkle in an eye, are matters that have very definite sexual aspects. In the next place—and this is perhaps only another side of the same tendency—there is apt to be concentrated too much attention on the end aim of the instinct, on its culmination in the fusion of the two genetic elements, and the absence of this element in the male below the age of puberty is triumph-

antly pointed to as proof that no sexual manifestations at all are possible before this period. To maintain, however, that until a given function has attained its final form nothing at all of it can be present is a view that is contradicted by observation of any single function of the body or mind; it would be practically tantamount to asserting, in spite of all the evidence to the contrary, that a boy cannot speak until his voice has 'broken.'

All that is true in this attitude is that the manifestations of the sexual instinct before and after puberty shew certain striking differences, the earlier manifestations being, as might be expected, more tentative and preparatory in nature than the later ones. If, for instance, one adopts the convenient division of sexual manifestations into the fore-pleasure group, the tendency of which is to pass gradually into stages of greater excitement, and the end-pleasure group, the tendency of which is to procure relief of tension in a culminating act, then one may say that the manifestations before puberty are almost entirely confined to the former group. Further, the earliest phases in the evolution of the sexual instinct comprise many modes of activity—*e.g.*, various interests in excretory functions, that through repression are made partially or wholly to disappear from sight before the final, adult form of the instinct is attained. The pre-puberty manifestations, therefore, are much more diffuse and undifferentiated than the adult ones, which are developed out of the earlier ones by a gradual process of refinement and elimination. This increasing restriction is brought about by repression of the discarded elements, and is the very reason why the sexual nature of the latter is no longer recognised.

Some characteristic features of the *content* of the unconscious may be inferred from what has been said as to its genesis. That it is predominantly, though by no means exclusively, of a sexual nature has already been indicated. A still more striking feature is its ruthless and absolute egocentricity. It is difficult to convey this without giving examples in detail, but I may, for instance, say that to bring about a European War, with all its appalling desolation, for the sake of a perfectly trivial personal gain, such as a slight increase in salary, is the kind of unconscious phantasy which I know from repeated experience to be not at all an exaggeration. No consideration whatever is paid to the interests or feelings of any other person than His Majesty the Ego.

In this the unconscious exactly reproduces the mental attitude of the infant, as portrayed, for example, by Browning in 'A Soul's Tragedy': 'The sweetest child we all smile on for his pleasant want of the whole world to break up, or suck in his mouth, seeing no other good in it—would be rudely handled by that world's inhabitants, if he retained those angelic infantine desires when he has grown six feet high, black and bearded.' To which it may be added that many more of them find the retention of such desires compatible with the height of six feet than is good for their own peace of mind or for that of the world.

Side by side with this feature may be placed the fact that the unconscious is entirely non-moral. That this is inevitable will be realised when one remembers that the unconscious dates from a period preceding any knowledge of good and evil—hence the legend of the Golden Age of Innocence—and has ever since remained impermeable to such knowledge. It is a great mistake to call these unconscious impulses immoral; they are not that in themselves, but only when expressed in terms of another world, the world of consciousness. Their own tendency is neither against morality nor for it, but purely and simply towards the satisfaction of their own needs. One might just as well speak of an animal or an insane patient as being moral or immoral; the infantile mind and the unconscious mind are neither. In the unconscious mind, social, moral, ethical, altruistic, and æsthetic considerations are simply ignored, as completely as though they did not exist.

I have now discussed, though only too briefly, the nature, genesis, content, and mode of functioning of the unconscious mental life of the child, but I have not been able to do more than touch on what is perhaps the most interesting and profitable aspect of the subject from the point of view of child-study—namely, the way in which these unconscious impulses become translated into the more recognisable traits in the child's character. I will conclude, however, by expressing my opinion that for any really serious study of the development of the child's mind a first-hand knowledge of the unconscious mental life constitutes an indispensable basis.

## CHAPTER XXXVII

### THE CHILD'S UNCONSCIOUS<sup>1</sup>

It has long been surmised that mental processes may go on without being present in consciousness, and of the various terms that have been employed to denote these, such as subconscious, subliminal, co-conscious, etc., perhaps the best suited and least committal is the word unconscious, meaning simply non-conscious—mental processes of which one is not aware. It is a matter of everyday experience that our thoughts, interests, and conduct may be affected and guided by older thoughts, educative influences, and so on, which at the moment in question are far from consciousness; indeed, it would be an intolerable burden did they all need to be recalled to consciousness on every occasion that their influence was to be exerted. The unconscious mind, therefore, whatever else it may include, at least comprises all the preceding forgotten, half-forgotten, and not forgotten mental processes that may still retain any form of activity or any capacity for manifesting a perceptible effect. We shall, however, see that it comprises far more than this.

It is necessary to distinguish between different classes of mental processes that may be grouped together under the name 'unconscious,' and a convenient basis for such a classification is the relative ease or difficulty with which the mental processes in question can be brought into consciousness. In the first place, therefore, we have those that are not present to consciousness at any given moment, even though they may be affecting conscious thoughts, but which can without any noticeable difficulty be recalled into consciousness. Common examples of this group are afforded by the occasions on which a slip of the tongue is produced by a thought in the background of consciousness that it was not intended to utter, but which

<sup>1</sup> Read before the Nottingham Froebel Society, December 16, 1916.

has nevertheless managed to slip through and replace the thought consciously intended.<sup>1</sup>

We then have a large class of unconscious thoughts and memories which are difficult or even impossible to recall voluntarily, but which can be readily recalled if the appropriate stimulus in the form of a suitable association is presented, there thus being no inherent obstacle against the possibility of recall to consciousness. Many people, for instance, have the experience with which I am familiar of not being able at a distance to recollect the names of villages and farms in the neighbourhood of a home that was left in boyhood; whenever I visit my home, however, the names in question flash into my mind as the train gets nearer and nearer there.

These groups, and some others of minor importance, are marked off from other unconscious mental processes by the term 'preconscious,' which indicates that they stand at the threshold of consciousness, so that when the appropriate circumstances are present they can be recalled into consciousness without any very great difficulty. There is now a much more important group to which the name 'unconscious proper' is given, and this is the one I chiefly wish to discuss here. Its great characteristic is that the mental processes comprising it cannot be recalled to consciousness either by an effort of the will or by the applying of any form of association stimulus. The exploration of this field of thought, therefore, important as it is, is attended with peculiar difficulties, and it is only within the last ten or twenty years that they have been surmounted. This brilliant achievement we owe to Professor Freud, who devised for the purpose a special technical method of investigation, known as psycho-analysis. By the use of certain devices, and the analysis of certain material, notably dreams, he has shewn how it is possible to make a person aware of mental tendencies, desires, and thoughts the presence of which he had not previously realised. The substance of this paper will be based on familiarity with this method and the conclusions reached by the use of it.

Now, what is this unconscious part of the mind, what comprises its contents, whence does it arise, how does it manifest itself, and what is its significance? I have dealt with the theoretical aspects of the subject in a paper, which some of you may have seen, that was published in *Child-Study* last

<sup>1</sup> See Chapter IV.

March and April,<sup>1</sup> and here I propose mainly to discuss the more practical bearings of the new knowledge. The first point to be made in answer to the questions just asked is that the subject of the unconscious mind bears a specially close relation to that of child-study, and therefore to education, in that the unconscious mind at all periods of life is nothing more or less than the infantile mind. The study of the unconscious and its manifestations is thus primarily a genetic one.

A leading characteristic of the unconscious is its dynamic and conative nature. The unconscious proper, unlike the pre-conscious, is not a depository for passive mental material, but a region where the most active functioning goes on. It is essentially made up of desires and wishes. These wishes are constantly striving for gratification, imaginary or real, and it is to this active striving that the external manifestations of the unconscious are to be ascribed. They constitute the very core of the personality, the fountain-source from which flow many of our desires, our interests and activities, and much of our conduct. The desires and motives that we are aware of in ourselves, and which form the moving force of life, invariably derive *some* of their energy from this source, and from one point of view may be regarded as infinitely modified, elaborated, and reinforced modalities of these primary infantile wishes. It will be seen from this statement alone how great is the importance that one claims for a knowledge of the unconscious, for without it we can have no *complete* understanding of any single mental act.

✓ The characteristic of the unconscious on which I wish to lay the greatest stress is at first sight a negative one, but it has profound consequences for the development of the individual; it is, namely, that in the unconscious no moral or logical standards obtain. It is not accurate to say that the unconscious mind is immoral or illogical; the truth rather is that it is non-moral and non-logical, the moral, social, ethical, æsthetic, and logical canons that obtain in the person's consciousness being simply not existent in the region of the unconscious. There exists a logic of its own, but it is one of the emotions rather than of the intellect. In the unconscious, the limitations of time and space, for instance, can be ignored with even greater freedom than in the fancies of our waking imagination. For both these reasons the wishes in question are in constant con-

<sup>1</sup> Chapter XXXVI.

flict with the standards obtaining in the same person's consciousness, and the two regions of the mind are fundamentally incompatible. This, in fact, is why the two regions are apart from each other, and why there is an almost insuperable barrier between them. It is, in short, the explanation of the existence of the unconscious.

When any attempt is made from outside to bring these unconscious thoughts into consciousness, the barrier separating the two regions of the mind manifests itself in the form of opposition against the attempt. It is probable that this opposition, or 'resistance,' as it is called, is due to the same forces that are constantly restraining the unconscious thoughts from penetrating into consciousness, so we see that the barrier in question is really a dynamic pressure exerted against the onward movement of unconscious thoughts and wishes. To this is given the technical name of 'repression,' and it can be shewn that its function is to keep from consciousness, so far as is possible, wishes and thoughts arising from within that would be unpleasant or painful to the particular person's consciousness. Traces of this mechanism are fairly easy to detect even in consciousness itself—namely, the tendency to ignore or be blind to that which we would rather not see or know, and to turn our attention away from thoughts that are distasteful or disagreeable. But by definition it is evident that we can normally have little conception of the extent to which it is in operation, for thoughts from which conscious attention is deflected are in consequence those of which we are least aware. I lay stress on this expression 'deflection of attention,' for consideration of it helps us to understand what is found by experience—namely, that there are two subdivisions of mental processes in the unconscious proper; on the one hand those which have at one time been present in consciousness, but which on account of their incompatibility with other conscious elements have either at once or at some subsequent period become repressed, and on the other hand those which for the same reason have never been allowed to enter consciousness even for a moment. ✓

It would be a natural reflection that matters which we put out of our mind, as the saying goes, thoughts which we avoid as being disagreeable, must thereby lose their significance for us, and in any case cannot account for the tremendous conflicts which I have just maintained exist between two regions of the



mind, and which lead to such potent consequences in mental development. Nor is it in the least evident at first sight what is the source from which these repressed mental processes derive the strength and importance I have just ascribed to them. Well, to begin with, it has to be pointed out that depreciating and discrediting constitute one of the chief methods of repression, so that we often both dismiss thoughts and pretend they have no importance just when really they are too important for us to face; I am speaking, of course, of psychological importance, of importance for our personality. The result is that we constantly deceive ourselves when we try to estimate the importance of such thoughts, and it is exceedingly hard to attain to an objective standard of valuation in such matters.

A weightier consideration, however, is that the chief mental processes to be repressed and kept from consciousness are not those relating to external disagreeable matters, but are wishes and impulses of *internal* origin, and that they derive ultimately from the primary vital instincts. Hence their strength. Our conscious attitudes and standards are only to a slight extent inborn; they represent on the whole acquired tendencies, thus constituting a later and more superficial layer superimposed on the inborn one. The unconscious, on the other hand, is the part of the mind that stands nearest to the crude animal instincts as they are inborn in us, and before they have been subjected to the refining influences of education. It is commonly not realised how extensive is the work performed by these influences, especially in the earliest period of life, nor how intense is the internal conflict they provoke before they finally achieve their aim. The process of adjusting the internal egoistic pleasure-seeking tendencies to the demands enforced by the environment is a much more painful and difficult one than might be imagined, and is rarely carried out without considerable internal friction and often lasting impairment of function. Yet if it did not take place the individual would remain a selfish, conceited, impulsive, aggressive, dirty, immodest, cruel, and egocentric animal, inconsiderate of the needs of others, and unmindful of the complicated social and ethical standards that go to make up a civilised society. And, according to the findings of psycho-analysis, the results of this refining process are rarely so perfect as is generally supposed; behind the veneer of civilisation there remains throughout life a buried mass of crude primitive tendencies, always struggling for ex-

pression, and towards which the person tends to relapse whenever suitable opportunity is offered, an illuminating example of which is a state of war, when men will permit themselves to commit the most unthinkable acts.

The picture thus delineated, of a mind in perpetual conflict within itself, of a never-ending struggle between the animal and the god in man, no doubt appears a dark one, and may perhaps be too reminiscent of the moral outlook of the early Christian fathers. Psycho-analytical science, however, has made two cardinal contributions, denied to theological insight, which go far to introducing brighter tones into the picture. The first of these is that the primitive repressed tendencies are not, as the theologians taught, directly immoral—that is to say, they are not aimed against the social and æsthetic canons which they offend. They are concerned with only one thing, their own gratification, and simply do not take into account the complicated considerations of social standards. We do not call a young child immoral when he grasps at a cake within his reach, regardless of the question of legal ownership; the child in so doing does not intend to defy the laws of property in the way a thief does; he simply wants to satisfy his desire to eat that particular cake, nothing more or less. It is only when judged from our adult conscious point of view that the child is here behaving immorally; from its own point of view it is merely non-moral, it excludes (from ignorance) moral considerations. This instance is typical for the infantile and the unconscious mind in general. The tendencies in question are innocent in intention, although not in fact; really they are neither innocent nor guilty when seen from their own point of view.

The second contribution in question has to do with the fate of these repressed primitive tendencies. It is usually believed, or assumed, that if they can be buried out of sight they are then deprived of all power of activity, and, further, that this is the best thing that can happen to them. Neither of these popular beliefs is true. Repressed tendencies retain all their power for activity, and continually exercise it, even when buried in the unconscious. Also, it is a very good thing that this is so, for it is from these primal instincts that a great part—indeed, the greater part—of all our driving force in life is derived. One of the mechanisms by means of which this is brought about has been given the name of 'sublimation.' By

this is meant the exchange of the original aim of a forbidden sexual wish for an associated, but non-sexual one of a more permissible kind. The energy of the original wish-impulse is transferred to another, more satisfactory plane, where it may be gratified. Perhaps if I give an illustration of the process it will make my meaning clearer, and then we could proceed to the discussion of further matters in connection with it. Many infants are fond of playing various games involving the manipulation of mud and dirt, an instinct which doubtless has its roots in coprophilic interest in the excreta. As time goes on the grossness of the performance increasingly repels the developing sense of cleanliness and æsthetics, and as a result of this the child alters the direction of its interest. Mud-pies become replaced by sand-castles, and it is worth noting that efforts are made to retain the consistency of the earlier material. Dry sand is not so satisfactory to the child as wet sand, which can be moulded, and water is often added to the moat of the castle as well. Later on the same child that has devoted an unusual amount of interest and feeling to games of this kind may go a step further and develop a fondness for the manipulation of other plastic material, in a childish way for putty, coal-tar, and the like, or more seriously for plasticene work and clay-modelling, from which it may branch off in more variegated directions still, into such pursuits as metal-moulding, wood-carving, sculpture, and so on, according to its capacities and opportunities. I find that the development I have just indicated is often misunderstood and incorrectly described by parents and even by teachers. They are apt to express it somewhat as follows: That the child becomes more and more fastidious and gets bored with its previous games, which have become too dirty or too uninteresting; that it loses interest in them, and so turns to something new. This, it is true, describes what actually happens, and it is quite accurate to say that the child does lose its conscious interest in the previous occupation. But what is usually overlooked in this description is the fact that the later interest is not an entirely different and novel interest, as is generally supposed, but merely *another form* of the same interest, and another mode of gratifying the same instinct. Psycho-analysis of the unconscious components of these interests demonstrates quite clearly the absolute continuity of the tendency operating, and also that, however sharply the different interests are distinguished in consciousness, in the

unconscious they remain identical or are treated as simple equivalents one for the other. This is often the case when not the least resemblance between different interests appears in consciousness, which is in general focussed on differentiation rather than on identification; it may surprise you to hear, for example, that the setting up of printer's type, the developing of photographic plates, and cooking, are all equivalent in the unconscious, and are derivatives of precisely the same primitive interest.

Psycho-analytical experience, therefore, leads one more and more to insist on the continuity of mental development, to regard it not as a series of gradually acquired accretions, one subject of interest or study after another, but as an ever-expanding branching out from a relatively small number of primitive roots. The analogy of a tree naturally occurs to one in this connection. It is the same sap that nourishes all the various branches, and the different parts of the tree—the twigs, leaves, and flowers—are not added on from without, but are continuous developments of growth-impulses arising within the organism.

The bearing of this point of view on education is evident. I will not deny that there is already a general notion to the same effect widely spread among the teaching profession; teachers intuitively know that a child has to be led from one interest or field of study only by linked-up steps to the next one, and that it is hopeless to attempt violent jumps. But the psycho-analyst applies the matter in much greater detail, and with probably a more robust faith in the flawless nature of determinism. With every single new interest and fresh attitude of mind he would inquire into its antecedent, being confident that it could invariably be related to something that had gone before, and that it is always only a new form of an ancient tendency. I would go so far as to maintain that no entirely new form of interest or type of mental reaction can enter the mind after the age of four or thereabouts. The same is true of character tendencies. Over and over again it has happened to me to have to investigate in the greatest detail a person's whole life-history, and I am constantly being impressed at finding how regularly the same mode of reaction to circumstances recurs again and again throughout life, though ever in changing forms. Without the person having the least idea of it beforehand, it can be shewn that the precise way in

which he met a given occurrence, or behaved in a given situation, was determined by the same fundamental character tendency that years before had caused him to behave in such a way on a totally different occasion, and that a life which at first sight appeared to be made up of a series of disconnected episodes is really nothing but the working out in the most diverse ways of a relatively few persistent tendencies and modes of reaction, just as to a trained ear a Bach fugue is perceived to be an almost indefinite variation of a few fundamental themes. As was hinted above, this continuity is rarely apparent on the surface. The instinct, of which the superficial tendencies are but manifestations, is buried in the unconscious, and what appears in consciousness may be a quite unrecognisable form in which it is seeking expression. The continuity, therefore, although primary and absolute, is mainly an unconscious one; there is an underlying unity in spite of the apparent discontinuity. To take a current analogy for this: If we could imagine any one not knowing that there is a European War going on, it would never occur to him to relate as part of a whole such disparate activities as the winning of iron ore in Spain destined to make steel for our cannon and ships, and of the rare metals in Burmah used for hardening the steel of our guns, the clerical work performed in London offices, the buying of horses in South America, and the chartering of ships to carry Swedish timber used for making pit-props in Welsh mines from which coal comes to run the railways that carry men and munitions. Yet once he is given the key to it all—the fact that there is a single purpose uniting all these and a million other activities—he co-ordinates and comprehends what previously might have appeared only a series of disjointed and perhaps rather meaningless activities. In the same way, when one unravels the unconscious tendencies that lie behind and animate all our conscious interests and activities, one perceives the unifying threads of continuity running through the multifarious complexities of our lives.

We have now to inquire a little more closely into the mechanisms comprising sublimation, the process whereby mental energy gets deflected from certain undesirable and asocial interests and transferred on to those of a more permissible and satisfactory kind. I must insist at the outset on a point that was briefly indicated above—namely, that the non-moral repressed instincts which appear so reprehensible when judged

from the conscious point of view are the most valuable sources of energy that we possess. Life without them would be quite unthinkable, so that the negative attitude of merely trying to suppress and crush them can only lead into a blind alley. The attitude towards them should be throughout a positive one; not how can I get rid of this thing that I do not like, but how can it be put to a good use. The primary instincts of the unconscious, undesirable as they may appear at first sight, should be regarded as the crude material of life, out of which both good and evil tendencies can be derived according to the form of development. With every single one of them we can point to valuable character traits that can be derived from it; and not only so, but in the case of any so-called evil tendency that may be mentioned we can point to the undifferentiated non-moral source from which it draws its force, and to the other more satisfactory channels along which the very same force might have flowed, and often can still be made to flow. This may be illustrated by a few superficial analogies, imperfect as they are in comparison with the exact studies of psychoanalysis. Thus it is plain that the desire to possess the goods of other people is common to both the burglar and the financier, the impulse to kill a hated opponent can make either a murderer or a good soldier; and the history of love teems with examples of the most beautiful and the most detestable uses to which this instinct may be put. The conclusion reached from genetic study, therefore, is that the important matter is not so much the *nature* of the source of a given tendency, as the *way* in which this source of energy is made use of. Light can only be thrown on this question by a detailed study of the unconscious sources themselves, and of the precise laws relating to the transfer of energy from them.

The indispensable factors making for sublimation are the internal repressions arising from a gradually increasing perception of the incompatibility of the original unrefined forms of instinctive activities with the more recently developed standards of social, moral, and æsthetic feelings, these feelings being largely acquired from the environment, but being in all probability partly also inherited. As a result of this internal conflict sublimation of the primitive energies follows automatically, provided that external opportunity is also present. It is exceedingly rare that the whole process takes place with the desired smoothness, and something must be said as to the

ways in which trouble may arise in the process and the reasons why it does arise. Failures in satisfactory sublimation may result in one of three harmful products. The first of these is that the primitive tendencies are too little acted on, so that they may persist or irrupt later in a crude form that from an adult standpoint can only be judged as immoral, anti-social, or the like. Excessive cruelty or personal uncleanness are typical examples of this. In the second place, the exact opposite of this may occur. The repression is so great that an extreme reaction takes place against the primary tendency, leading to undesirable and troublesome character traits. For instance, the passion for nudity, which is so strong in infancy, may lead later by way of reaction to the opposite characteristic of excessive shyness, bashfulness, shrinking, and self-consciousness, which may be of torturing severity and greatly hampering in the practical relations of life. Or a cruel child may later swing round into being so extremely sensitive to the idea of the infliction of pain that the very thought of suffering becomes intolerable. A third outcome of a failure in repression and sublimation is perhaps the commonest of all—namely, the development of nervous troubles. These represent a compromise between the two conflicting tendencies, and like most compromises it is an unsatisfactory one, in which neither side gets what it wants. A neurosis always means an unconscious conflict that has not been solved, and the treatment by means of psycho-analysis aims at solving the conflicts and thus dealing with the radical causes of the trouble. Every neurotic symptom is the masked and disguised expression of two forces, on the one hand some unconscious repressed wish that is striving for gratification, and on the other the counteracting repressing tendency. It differs from our first case of failure in sublimation in that the repressed wish does not come to open and relatively unrestrained gratification, as there, and from the second case, of excessive character reaction, in that the repressing tendency does not exercise such a powerful sway. It is a compromise between the two. How, now, does it differ from sublimation itself, which is also a product of interaction between the same two conflicting forces, though it would be hardly right to term it exactly a compromise? There are some psychological differences, into which we need not enter, but the great practical difference is one of value. In sublimation gratification of the repressed wish is obtained in a satisfactory

way and in the world of reality, whereas in a neurotic symptom, which is, of course, a product of the imagination, gratification is obtained in a way that may subserve no external social function in the world of reality, while it may bring endless misery and suffering both to the individual and to those around. The fact that all neurotic troubles take their origin in the unsolved conflicts of the unconscious mind is in accord with the fact that their roots invariably date from childhood, although, of course, the external manifestations may set in at almost any age. This in itself is a highly important consideration for educationalists, especially when it is realised that people with neurotic troubles are much commoner than those without. I feel sure that the whole question of recognising the earliest signs of these troubles and of taking steps to prevent their later development will in the future play a much larger part in educational work than it has in the past.

The question will naturally be asked as to what are the circumstances that decide whether sublimation is to pursue a smooth and satisfactory course or to result in one of the failures that have just been indicated. So far as we know at present, there seem to be three principal factors concerned in this—the strength of the original unconscious tendencies, the strength of the repressing forces, and the matter of external opportunity; and something can be done to modify each of these. They are mentioned in their order of importance. First of all the strength of the primitive tendencies. Nothing, of course, can be done directly to diminish this, but a great deal can be done to prevent their being further strengthened and reinforced. The attitude of society is already set along these lines, though much of the effort expended is misdirected through ignorance, and is consequently mis-spent. The aim may be summed up in the phrase: avoidance of excitement in general, and of specific excitations in particular. The desirability of this in bringing up children is, as I say, fairly well recognised, but the particular paths of excitation that it is most important to avoid are not generally known. This especially applies to the first four or five years of life, so that it is perhaps of less interest to the present audience. I will therefore only say that the possibility of precocious sexual excitation in these early years, notably through unwise sleeping arrangements, is extensively overlooked by parents and others, owing, of course, to the popular error that the young child has no sexual life. I use



the expression 'popular error' avowedly, because if there is one thing that psycho-analytical investigation has established more irrefragably than another, it is that sexuality is inseparable from life at all ages, although its existence is discounted and ignored in young children, partly because its manifestations at that age are very different from those familiar in adult life, being much more diffuse, tentative, and undifferentiated, but much more because of the blindness of adults induced by their own personal repressions.

While I am on the subject of infantile sexuality, which plays such a central part in the unconscious, it may interest you to know our conclusions on the much-debated question of sexual enlightenment.<sup>1</sup> The principles which should guide one, in my opinion, are simple enough, though difficult of attainment at the present day. They may be summarised in the words 'honesty and avoidance of excitation.' Now, nothing in the world is more difficult to obtain than honesty in regard to sexual matters. Not only is the amount of conscious lying and deception on the subject simply colossal, but the unconscious distortions, misconceptions, and prejudices are quite unlimited. Therefore, although I strongly hold that children should be told the truth in such matters, when I am asked if I believe that they should be talked to about them I can only say, having regard to the prevailing dishonesty, it depends on who is going to do the talking. At all events, one simple conclusion stands out amidst all the perplexities: no child, of whatever age, should ever be lied to in regard to sexual topics. The harm that is done, both directly and indirectly, by the common practice of lying boldly to children, on the specious ground that it is better for them not to know until later, is unquestionably very great indeed, and is responsible for a large amount of subsequent neurosis. It is a good general rule not to tell an infant anything about such matters until and unless it spontaneously wants to know and asks, and then invariably to answer its questions truthfully and simply. If a child does not ask spontaneously by the age of four or five it means that something has gone wrong, that it has indirectly gathered from its parents' attitude that this is a forbidden subject which must not be approached; it then becomes desirable to take more active measures, with, of course, the necessary tact. As to sexual enlightenment in the schools, I do not consider this

<sup>1</sup> See also Chapter XXXIV.

desirable unless it is done as part of the anatomical studies carried out in a course of physiology and not as a thing in itself. Of course, a teacher should be prepared to deal with the question in the individual child, on the rare occasions when she gets the chance, but I do not suppose that the majority of teachers at present are qualified to do so with a very sure hand.

Going on with the question we were answering in regard to successful sublimation, I said that the second factor was the strength of the repressing forces. When this is too great it results in either neurotic trouble or excessive reaction-formation rather than the first type of failure mentioned. Now, the greater part of repression comes ultimately from without, so that it is in the power of the environment either to increase or to diminish it. At the present day there is no doubt that the error generally committed is in the direction of excessive repression. The adult code of behaviour and adult standards of feeling are exacted from the child at too early an age and in too rigorous a manner. If greater freedom were allowed, more patience exercised, and more faith reposed in the child's capacity for gradually renouncing infantile habits that may be displeasing to the adult, its powers of sublimation would come into action in a much smoother way than is now usually the case. At present what so often happens is that violent internal conflicts are set up, ideals impossible of attainment are striven for and expected, and mental disharmony results.

The third factor, that of external opportunity for sublimation, is the least important, although the novice in the subject usually expects it to be the most. It might be thought that if an understanding had been reached of the primitive tendency that was struggling for expression, and there was a knowledge of the lines along which sublimation of this tendency was possible and likely, to provide the opportunity for these lines and to encourage a transference of interest along them would be a most helpful proceeding. I will not deny that it can often be of some use, but this is a good deal less than might be thought. One of the reasons for this is that it is exceedingly difficult, and usually impossible, to foretell what particular path out of the many possible ones will be followed in any given case. One gets more and more impressed with how extraordinarily spontaneous and automatic the process of sublimation is, and consequently how difficult to encourage directly. The path has to be chosen from within, and not selected for

the child from without, otherwise the feeling, interest, or energy simply will not flow, or only temporarily. It is exactly the same psychological situation as in the case of a poet. It is no use suggesting to him that such and such a theme and procedure would be the very thing for him to adopt in his next great poem. If he is a true artist, such a suggestion has no effect whatever, unless, of course, it happens by chance to coincide with a spontaneous impulse of his own. He knows that the inspiration must proceed from within, that he must feel the need to create in a given direction, and that he must follow this impulse rather than try to think out consciously what would be a suitable one, much less ask a friend for advice in such a matter. Therefore we come to the conclusion that so far as opportunity goes all that is necessary is to see that it is present in as many directions as possible, though it is not desirable to do very much in the way of active encouragement. It is rather a question of *allowing* sublimation to take place, by seeing that the circumstances are favourable, than of trying actively to bring it about.

The object or idea on to which interest is transferred from the unconscious, in either sublimation or neurotic troubles, is termed a symbol, because it has the power of symbolising on occasion the corresponding unconscious idea. A symbol has thus two meanings, and derives its significance from two different sources.<sup>1</sup> One of these is its real actual place in the world, the significance inherent in itself and its setting, while the other is the unconscious source with which it stands in more or less close association. A person's attitude towards such an idea should normally come to be appropriate to the real significance of the idea—*i.e.*, his attitude should be an objective one. Only too often, however, it remains partly subjective, some of it being determined by the attitude of the unconscious towards the buried, associated idea. This is the true meaning of subjectivity, which is the cause of half the troubles and difficulties of life. The person reacts to the idea more or less as if it were the unconscious idea with which it is associated, and he defends his attitude and beliefs on the subject with a tenacity that may be proof against all argument. This constitutes what is called unreasonableness, and we have here the reason why logical argumentation is so feeble a weapon against such an attitude, for it is not directed against the real source of resistance—

<sup>1</sup> See Chapter VII.

namely, the underlying idea for which the other is merely a symbol. On the other hand, it is a familiar experience that such a position can be moved only by an appeal to the emotions, for then we are interposing a counter-force that may succeed in neutralising the unconscious emotional basis of the person's strong attitude. Such situations, are, of course, of daily occurrence in school life. A child becomes inexplicably unreasonable or obstinate over some matter or other, and one is often as perplexed to understand the curious behaviour as helpless to deal with it. What has happened on such occasions is that the exciting cause of the reaction in question has stirred up some emotional group of thoughts in the unconscious, thoughts that are unconsciously associated with the external occasion which symbolises them, and the child is really reacting to these unconscious thoughts in a way that would be perfectly intelligible if we only knew what they were.

Another of the interesting ways in which the unconscious plays a large part in school life, and not very dissimilar to the last, is in regard to the question of intellectual capacity. Educationalists in general are much too prone to consider this question as entirely one of presence or absence of intellectual ability, ignoring the very important emotional factors that so often lie behind. Sublimation is most successful when the symbolising idea on to which interest has to be transferred from the unconscious primary idea stands at a certain definite associative distance from the latter. If this distance is too great—*i.e.*, if the resemblance between the two ideas is too slight—then the feeling-interest does not pass over readily enough, the associative bridge being too slender to carry it. If, on the other hand, the associative distance is too small—*i.e.*, if the resemblance between the two ideas is too great—then the repression affecting the primary unconscious idea will tend also to affect the symbolising one, and the result is an inhibition of interest. This produces externally the appearance of intellectual incapacity, and, in fact, psychiatrists have given the name of emotional stupidity to the phenomenon, as for all practical purposes the person is actually stupid. Extreme examples of it are common enough in ordinary life, where owing to some obstinacy or blindness of emotional origin a person may not be able to grasp the simplest and most impeccable syllogism. They simply can't see it, as they say, although the point in question or the inference to be drawn

may be perfectly patent. It is noteworthy that such situations are apt to be peculiarly maddening to the person who is trying to get the other to see the point, and this is probably due to an intuitive perception on his part that the blindness of the other is not true stupidity, but an unconsciously feigned stupidity of emotional or wilful origin; his anger is the result of his will being successfully opposed by another will. I am convinced that this inhibition of interest plays a much larger part in school work than is at all suspected. Many times in the psycho-analysis of patients I have found that an apparent incapacity for a given school subject, say mathematics or history, was really not a true incapacity, as it seemed, but an inhibition of interest produced by some aversion from the subject, an aversion of which they were entirely unaware, and which was due to the subject being unconsciously associated with some topic that was personally disagreeable. I have also often obtained a confirmatory proof of this by noting that after the unconscious association had been cleared up and dealt with by means of psycho-analysis the person was then able to take an interest in, and develop an unsuspected capacity for, the previously impossible subject of study. Psychological mechanisms of this sort are often of an extraordinary delicacy and subtlety. The difference between one geometrical figure and another, between the spelling of one word and another, and still more in such gross matters as the difference between the feeling for one language and another, may strike quite different roots in the unconscious, and dictate all sorts of preferences and distastes. It is for this reason that I am personally very sceptical of the final validity of such intellectual tests as the Binet-Simon scale, for I know that failure to perform one of the constituent tests may not at all mean what it seems to—namely, an intellectual deficiency in the given direction, but some very fine emotional inhibition arising in the unconscious. The individual differences in such matters are infinite. It is in no sense true to say that the same test has been applied to the various children. It is not the same test, for a given task will mean something different in each case according to what unconscious thoughts it may get associated with.

The day is no doubt far distant—though it must come in time, and there are in the meantime golden opportunities for pioneers—when every teacher will be expected to have some

working knowledge of the unconscious mind; but even now there are certain broad lessons to be learnt from the studies of others, and not least of these is the educational advantage to be gained from a greater tolerance with the perplexities of childhood and the patient understanding of the differences between individual children.

CHAPTER XXXVIII

THE SIGNIFICANCE OF THE GRANDFATHER FOR  
THE FATE OF THE INDIVIDUAL<sup>1</sup>

IN an interesting essay, of which the reader will be reminded by the title of this paper, Jung<sup>2</sup> has pointed out what significance the father's personality may have for the development of the individual, and every psycho-analyst can only confirm his conclusions, for he finds them illustrated afresh in every new case he studies. It seems to me, however, that the influence exerted by the grandfather<sup>3</sup> also merits, perhaps, closer attention than has hitherto been devoted to it, since from this source as well valuable clues may be obtained to the understanding of many character traits and neurotic reactions. Rank has, indeed, repeatedly pointed out in his mythological studies<sup>4</sup> the part that may be played in phantasy by the idea of the grandfather, but comparatively little attention has been paid to the purely clinical side of the subject.

It is probable that the interest, the admiration, and the phantasies that gather round the figure of the grandfather are always derived from an attitude of mind earlier taken up in respect to the father, but there are some important points in which that figure is distinguished from other repetitions of the father-image. In the first place it is much older than the other reproductions, since it nearly always goes back to the earliest period of childhood. More particularly at the time when the boy is beginning to weave what Freud terms his

<sup>1</sup> Published in the *Internat. Zeitschr. f. ärztl. Psychoanalyse*, May, 1913.

<sup>2</sup> Jung, 'Die Bedeutung des Vaters für das Schicksal des Einzelnen,' *Jahrb. der Psychoanalyse*, Bd. i.

<sup>3</sup> *Mutatis mutandis*, what follows is equally applicable to the grandmother, but for the sake of simplicity we may confine our attention to one of the grandparents.

<sup>4</sup> See especially his 'Der Mythos von der Geburt des Helden' and 'Das Inzestmotiv in Dichtung und Sage.'

'family romance'<sup>1</sup> and is engaged in getting rid of the real father by replacing him in his imagination by a more satisfactory figure (whence in the second great period of repression—viz., puberty—the idea of God largely arises), the grandfather may present himself as an acceptable substitute.<sup>2</sup> As Rank has shown, the replacement-figure is always endowed with the qualities of the father, so that an analysis of the phantasy brings us straight back to the latter. The grandfather is therefore peculiarly suited to play this part, because of his resemblance and relationship to the father (in the case of the grandfather on the paternal side). The process is often furthered through the greater tenderness and forbearance that marks, as a rule, the attitude of an older man towards children; many a stern father becomes in later life an indulgent grandfather, partly, perhaps, because his feeling of responsibility in the rearing of children gets dulled with the philosophy of age. As the child grows older, the association already established becomes strengthened by the increasing resemblance of the father to the memory-picture of the grandfather.

A deeper reason for this association is as follows: With very many children there is a lively desire to become the parents of their own parents, and they may even entertain the fantastic belief that just in proportion as they grow bigger, so will their parents grow smaller, till in time the present position of affairs will be completely reversed. This curious construction of the imagination, which is probably one of the sources of the belief in re-incarnation, is evidently closely connected with incestuous wishes, since it is an exaggerated form of the commoner desire to be one's own father.<sup>3</sup> It also subserves a hostile attitude towards the parents,<sup>4</sup> and gratifies the wish to change the actual situation in such a way that the child is in a position to order

<sup>1</sup> See Freud in Rank's 'Der Mythos von der Geburt des Helden,' 1909, S. 64-68.

<sup>2</sup> There are many examples of the equivalency 'God-Grandfather' replacing the more usual one of 'God-Father.' Thus, the Estonians called their God Pikker 'Wanna Essa,' which means 'Old Father.' The American Indians called their Almighty 'Grandfather.' The Norse Thor has also the name Atli—i.e., Grandfather.

<sup>3</sup> See Chapter X., p. 234.

<sup>4</sup> In a simultaneously published article, Abraham ('Einige Bemerkungen über die Rolle der Grosseltern in der Psychologie der Neurosen,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 224) lays special stress on the relation between the grandfather-complex and hostility towards the father (or mother, as the case may be).



those about who now order him. An amusing approximation to the realisation of this phantasy in actual life is afforded by the occasional instances in which father and son marry daughter and mother respectively; the son thus becomes the husband of his father's mother-in-law—*i.e.*, so to speak, his father's father—and the occurrence is usually announced in the newspapers under the heading 'A man becomes his own grandfather.'

In the case of the maternal grandfather another factor comes into play. If the mother, as so often happens, is inordinately attached (through infantile fixation) to her father, the son instinctively feels that the latter—that is to say his own grandfather—is his rival in his mother's affections, perhaps even more so than the father himself. There then arises an Œdipus-situation in which the part of Laius is played by the grandfather. Rank<sup>1</sup> has called attention to some excellent examples of this situation in mythology; the typical form of the story (as in the Perseus legend) is that in which a tyrant keeps his daughter locked up so that she may not marry, the suitor overcomes all difficulties, and the son born to them appropriately wreaks vengeance by slaying the grandfather who had tried to hold the mother in his possession.

So far the subject has been treated from the point of view of the boy, but the same also holds good in the case of the girl. Here, too, the grandfather is a substitute for the father. In the phantasy mentioned above—which may be termed the 'reversal of generations phantasy'—the girl, on turning herself into the mother of her parents, will obviously become thus the wife of her grandfather, just as the boy on the same presumption becomes his grandmother's husband. I would ask those who may be inclined to dismiss with a smile what they take to be merely a foolish conceit of fancy to reflect that one of the official prohibitions of the Jewish and Christian religions runs, 'Thou shalt not marry thy grandfather' (or 'grandmother'). No religion forbids so emphatically and solemnly what no one wishes to do. True, this particular prohibition seems to us to-day altogether unnecessary, but one should not forget that many a desire which in modern life can be gratified only in concealed phantasies had in past times a far weaker barrier to pass in order to achieve fruition.

Some of the resultants of the 'grandfather-complex' may now be mentioned. The most striking is the tendency to

<sup>1</sup> Rank, 'Der Mythos,' *op. cit.*

gerontophilia—*i.e.*, a special fondness for old people. This may also come about from the father being well over middle age when the child was born. One need only recall the remarkable predilection many women, and in particular young girls, shew for old men; as I write this I am told of a recent marriage, in which no part was played by money, between a man eighty-four years old and a girl of nineteen; similar cases are far from rare. The counterpart on the male side is, of course, the almost equally common attraction that older women possess for some men.

Unusual interest in the pedigree and the ancestors is often traceable to this complex, although, perhaps, its source is more usually curiosity with respect to the problem of birth. I remember one patient who was completely absorbed in this pursuit. She had devoted twenty years to tracing out her family genealogical tree in all its ramifications, and had followed several lines back for more than four hundred years. Her father had died when she was still a child, and she had grown up in the house of her grandfather, whom she revered. It is a well-known fact that in those parts of Asia where special veneration is paid to old people, who are deferred to in an unusual degree, some kind of ancestor-worship regularly prevails, whether in the form of direct adoration or devotional awe.<sup>1</sup> The way in which feelings that originally related to the father may be transferred to more distant figures after their connection with the father has undergone repression has been strikingly illustrated by Abraham in his recent Egyptian study.<sup>2</sup>

It has often been observed how much many boys 'take after' their grandfather, whether in traits of character or in general mental trend or even in tricks of demeanour. An interesting example is related by Rudyard Kipling in 'The Tomb of his Ancestor.'<sup>3</sup> The occurrence became very evident in the researches carried out on the question of the inheritance of genius, in which the series 'mediocrity—genius—mediocrity' or

<sup>1</sup> In other 'civilised' countries the contrary is often seen—namely, that awe is replaced by hostility. In parts of the world where no special respect is paid to old people, and where 'to be led by one's grandfather,' as popular parlance has it, is reckoned a reproach, there is also noticeable a lack of pride in family tradition and in descent.

<sup>2</sup> Abraham, 'Amenhotep IV. (Echnaton). Psychoanalytische Beiträge zum Verständnis seiner Persönlichkeit und des monotheistischen Aton-Kultes,' *Imago*, Jahrg. i., S. 334.

<sup>3</sup> The present German Emperor seems to be a marked instance of the kind.

'genius—mediocrity—genius' was far oftener noted than the appearance of genius in immediately succeeding generations. It is unnecessary to quote examples of this well-established fact—some will occur to every reader; it has given rise to many ingenious hypotheses and general principles claiming to formulate the law of 'the alternation of generation as applied to genius.' Perhaps these pronouncements will be made superfluous if only we keep steadily in view how on the one hand a great father tends to act as an oppressive influence on the son, and how on the other the figure of the grandfather may become in the way described above the central point of the inmost interest of the grandchild. The same holds good of qualities other than genius; dipsomania in particular affords a good example.

An interesting product of the 'reversal of generations phantasy'<sup>1</sup> occurs in later life, and is connected with the present subject. The phantasy, namely, becomes one of the sources of the manifest incestuous love of parents for their children, besides that of normal parental affection and all attachment to the younger generation. I have, for instance, invariably found that a man who displays an abnormally strong affection for his daughter also gives evidence of a strong infantile fixation in regard to his mother (often with an insufficient affection for his wife due to the same cause). In his phantasy he begets his mother (*e.g.*, in the form of a rescuee), becomes thus her father, and so arrives at a later identification of his real daughter with his mother. Such people fit into the situation either of parent or of child, but only imperfectly into that of marital partner. Good daughters, for example, often become good mothers without being good wives; they deal with their husband either by treating him as a child, or by neglecting his existence when children appear. In the mental life of the present generation the past and the future ones are molten into a unity, just as elsewhere in the life of phantasy the past and the future are treated as identical and as mutually interchangeable. Thus mother and daughter complexes are closely related, as are father and son complexes. What is true of love is, of course, equally true of other states of feeling—*e.g.*, hate; the celebrated case of Count Cenci is a striking example of this.

Finally, a few words may be devoted to a more neglected member of the family group—namely, the unmarried aunt.

<sup>1</sup> See also Chapter XXXIX.

<sup>2</sup> See Chapter X., p. 233.

I have had several patients whose interest and affection centred round her figure. The feeling-attitude had generalised into a tenderness for all elderly spinsters; one man fell in love with every spinster over forty he came across. The meaning of this is clear: the unmarried aunt is the substitute for the virgin mother, the conception that has held so powerful a place in most religions. It indicates, of course, a strong repudiation of the father's existence.

In his investigation on the subject of the marriage of near of kin, Abraham<sup>1</sup> has made clear the significance of the attraction first cousins often have for each other, and has demonstrated its incestuous origin. In the considerations adduced above I have endeavoured to extend the scope of his results by pointing out the emotional attitude towards other members of the family. The generalisation can be safely hazarded that all members of the family group, from brother to grandfather, from sister to aunt, are all replacement-formations of the image of the original trinity of father, mother, and child.

<sup>1</sup> Abraham, 'Die Stellung der Verwandtenehe in der Psychologie der Neurosen,' *Jahrbuch der Psychoanalyse*, Bd. i., S. 110.

CHAPTER XXXIX

THE PHANTASY OF THE REVERSAL OF  
GENERATIONS<sup>1</sup>

IN a previous paper<sup>2</sup> I called attention to the importance of a peculiar phantasy which is not at all rare among children, to the effect that as they grow older and bigger their relative position to their parents will be gradually reversed, so that finally they will become the parents and their parents the children. Since this was published I have come across a number of illustrative references to the theme, and I should like to mention some of these before discussing the significance of the phantasy. It should be noted that there are several component parts, or degrees, of the phantasy—the gradual reversal in size, the extension of this to the belief that the child is in imagination the actual parent of its parent—*i.e.*, equivalent to its own grandfather—and the consequences of the phantasy in adult life, especially as regards the attitude towards children and the belief in re-incarnation.

A good description of the phantasy itself was given a few years ago by James Sully:<sup>3</sup> 'A number of children, I have found, have the queer notion that towards the end of life there is a process of shrinkage. Old people are supposed to become little again. One of the American children referred to, a little girl of three, said once to her mother: "When I am a big girl and you are a little girl I shall whip you just as you whip me now."<sup>4</sup> I have collected a number of similar observations.

<sup>1</sup> Read before the Psychiatric Society, at Ward's Island, New York, February 8, 1913; published, in part, in the *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., Heft 6.

<sup>2</sup> Chapter XXXVIII., p. 653.

<sup>3</sup> James Sully, 'Children's Ways,' 1906, pp. 64-66.

<sup>4</sup> This remark supports my opinion that one of the important determining factors of the phantasy consists in hostility and revenge-wishes directed against the parents (see Chapter XXXVIII., p. 653).

For example, a little boy that I know, when about three and a half years old, used often to say to his mother with perfect seriousness of manner: "When I am big, then you will be little; then I will carry you about and dress you and put you to sleep." And one little girl asked about some old person of her acquaintance: "When will she begin to get small?" Another little girl asked her grown-up cousin, who was reading to her something about an old woman: "Do people turn back into babies when they get quite old?"

'Another interesting fact to be noted here is that some children firmly believe that persons after dying and going to heaven will return to earth as little children. An American lady writes to me that two of her boys found their way independently of each other to this idea. Thus one of them speaking of a playmate who had been drowned, and who was now, he was told, in heaven, remarked: "Then God will let him come back and be a baby again."

'What, it may be asked, is the explanation of this quaint childish thought? I think it probable that it is suggested in different ways. One must remember that as a child grows taller grown-ups may seem *by comparison* to get shorter. Again old people are wont to stoop and so to look shorter; and then children often hear in their stories of "little old" people. I suspect, however, that in some cases there is a more subtle train of thought. As the belief of the two brothers in people's coming back from heaven suggests, the idea of shrinkage is connected with those of birth and death. May it not be that the more thoughtful sort of child reasons in this way? Babies which are sent from heaven must have been something there; and people when they die must continue to be something in heaven. Why, then, the "dead" people that go to this place are the very same as the babies that come from it. To make this theory "square with" other knowledge, the idea of shrinkage, either before or after death, has to be called in. That it takes place before death is supported by what was said above, and probably also by the information often given children that people when they die are carried by angels to heaven, just as the babies are said to be brought down to earth by the angels.'

Tisdall,<sup>1</sup> more recently, refers to the phantasy in connection with the belief in re-incarnation: 'Here perhaps we should mention an idea which is not uncommon among European

<sup>1</sup> St. Clair Tisdall, *Church Quarterly Review*, July, 1911, vol. lxxii., p. 337.

children of tender age. The present writer, for instance, can well remember that, when a little more than three years old, he had a firm conviction that his parents would by-and-by grow little again and become *his* children in their turn. From observations made to him since by very young English boys and girls he has reason to conclude that the same strange fancy exists in not a few childish minds of to-day. He has heard a little boy say to his mother: "Mamma, when you are little, I will take care of you." Does this throw any light on the origin of the re-incarnation doctrine? Is it natural to the childhood of the race as well as (perhaps) to that of the individual? And does its reappearance in adults among ourselves betoken the "second childhood" of the race?

The logical consequence of the phantasy, which the imagination at times does not fail to draw, is that the relative positions are so completely reversed that the child becomes the actual parent of his parents. An example of it in the sphere of religion is that of Indra, who was reputed to have begotten his father and mother from his own body.<sup>1</sup> Another is to be found in an ancient Egyptian delineation,<sup>2</sup> in which Queb, the earth-god, and Nut, the sky-goddess, are represented as being the parents of their father Schu, the air-god, who is elsewhere supposed to have begotten them.

Another way of stating this conclusion is that the child becomes identified with his grandfather, and there are many indications of this unconscious identification in mythology, folk-lore, and custom. Grandchild—*i.e.*, great child, as grandfather is great father—is in German *Enkel*, which originally meant 'little grandfather.'<sup>3</sup> In the fairy-tale of 'Little Red Riding Hood,' which is a disguised birth-phantasy, the grandmother, as Rank<sup>4</sup> has pointed out, is treated as the equivalent of a new-born babe, as is indicated by her breathlessness on emerging (*i.e.*, being born) from the wolf's belly. The custom of naming children after their grandparents is extremely widespread in both civilised and uncivilised races; among many it is not merely a common habit, but an invariable rule.<sup>5</sup>

<sup>1</sup> Rigveda, I. 159<sup>2</sup>; x. 54<sup>3</sup>. For comments on this see Macdonell, 'Vedic Mythology,' in Bühler's *Grundriss der Indo-Arischen Philologie und Altertumskunde*, Band iii., Heft 1.

<sup>2</sup> Brugsch, 'Religion und Mythologie der alten Ägypter,' 1888, S. 210.

<sup>3</sup> Kluge, 'Etymologisches Wörterbuch.'

<sup>4</sup> Rank, 'Völkerpsychologische Parallelen zu den infantilen Sexualtheorien,' *Zentralbl. f. Psychoanalyse*, Jahrg. ii., S. 426.

<sup>5</sup> See Dieterich, 'Mutter Erde,' 2<sup>e</sup> Aufl., 1913, S. 127.

Andree<sup>1</sup> gives examples from North American Indians and other tribes in which the child who receives the dead grandfather's name is for some time treated with the same respect as the latter, the people definitely believing that the grandfather has returned in the person of the child; there are even complicated rites for determining which particular grandfather has returned on the occasion of a birth. The Labrador Eskimos name their children after the last person who has died in the village, and Hawkes,<sup>2</sup> in describing this custom, plausibly connects it with the belief in the transmigration of souls.

It seems probable that the last-mentioned belief is, in large part, to be traced to the phantasy here described, but I am inclined to believe that it would be more accurate to attribute both to a more fundamental belief—namely, that in personal immortality. Neither the child's mind nor the adult unconscious can apprehend the idea of personal annihilation (as distinct from the idea of lasting disappearance of *other* people),<sup>3</sup> and with only a small minority of people is the belief in this possible even to full consciousness. This narcissistic conviction of personal immortality extends to persons loved or respected<sup>4</sup> by the ego, so that when such a person disappears it is assumed that it can be only for a time, and that he will surely be seen again, either in this world or the next. To the primitive mind the former place of reappearance is the more natural; hence our children, just like adult savages, imagine that when an old person dies he will shortly reappear as a new-born child.

While, however, this originally narcissistic conviction of immortality affords an indispensable basis for the phantasy in question, there are other important motives that contribute to its genesis. The two chief of these, in my opinion, concern the impulses of love and hate respectively. The former is a parental impulse,<sup>5</sup> usually of the maternal type, which manifests itself in the desire to nurse, fondle, and care for the loved

<sup>1</sup> Andree, 'Ethnographische Parallelen und Vergleiche,' 1878, S. 171.

<sup>2</sup> Hawkes, 'The Labrador Eskimo,' Memoir 91 (No. 14, Anthropological Series), Canadian Geographical Survey.

<sup>3</sup> See Chapter XXXIII., p. 580.

<sup>4</sup> Even in adult life this refusal to believe in death is often shewn when great national leaders or heroes are concerned, striking examples being Barbossa, Rákoczi, Napoleon, and Lord Kitchener.

<sup>5</sup> This term is here used in a purely descriptive sense, with all reservation as to what future analysis may dissect the impulse into; two components at least are clearly visible—the reaction to the parents' affection and anal erotism.



parents, the illusion being cherished by the child that they are its children. That this impulse is in play is not only shewn by direct observation of the child who exhibits the 'reversal' phantasy, but is supported by the fact that in most individuals the parental instinct is awakened before the instinct to combine with a member of the opposite sex (the sexual impulse in the popular sense). This is true of both the young child and the adolescent, though more strikingly so with some individuals than with others. On the extent to which it is true depend a good many character traits in later life, the two extremes being, on the one hand, the type that, like the narcissistic child, wants to receive everything and give nothing in return, and, on the other, the type that is always burning to help or comfort everyone around. The second contributory impulse, that of hate, relates to hostility in regard to the parent or parents. The 'reversal' phantasy then gratifies this by placing the child in the imagination in a position of power over the parent, as was illustrated in the anecdote quoted above.

The most important consequence of the 'reversal' phantasy is the way in which it determines the later attitude of the individual towards children, especially his or her own. It is no exaggeration to say that, to a greater or lesser extent, there always takes place some transference from a person's parent to the child of the corresponding sex. A simple instance of what I mean is given by Merimsohn,<sup>1</sup> who makes one of his characters, an old man, say: 'My mother loved me more than the other children because I bore her father's name. He was a Rabbi in our town, and my mother used to hope that I too would become a Rabbi.' It is quite common to find a mother trying to mould a boy along her father's lines, or a father trying to mould a girl along his mother's—*i.e.*, making the child incorporate in itself its grandparent's character. The child's own personality is thus moulded, or distorted, not only by the effort to imitate its parents, but by the effort to imitate its parent's ideals, which are mostly taken from the grandparent of the corresponding sex. I have often followed this process in detail, and noticed how the parent's attitude towards quite minute specific traits, the admired ones and the disliked ones, in his or her own parent is reproduced when dealing with his or her child. The social significance of this should be apparent

<sup>1</sup> Merimsohn, quoted by Kaplan, 'Grundzüge der Psychoanalyse,' 1914, S. 290.

in regard to the transmission of tradition; it throws a light on, for instance, the considerations adduced in Benjamin Kidd's last work.<sup>1</sup> One has, of course, to take into account the reaction of the child, which may be either positive or negative; that is, the child may either accept the transference or rebel against it, in the latter case developing character traits of exactly the opposite kind to those it is sought to implant.

A curious and often distressing form of the transference just described is the negative one. I have studied several instances in which a person who from childhood had developed a hostile attitude towards one or other parent then took up the same attitude towards his or her own child: a woman who hated her mother and then hated her daughter, or a man who hated his father and then hated his son. The original hatred for the parent must be very strong, and usually quite manifest, for it—when transferred later—to overcome the natural parental affection for the child. I have more than once even known a man dread to have a male child—and actually avoid having any children on this account—because of his hatred for, and fear of, his father. The meaning was that he feared his son—*i.e.*, the re-incorporated grandfather—would take revenge on him for the hostile impulses he had displayed, either openly or unconsciously, usually in childhood. I will express this complicated thought more plainly in another form: *A* experiences in childhood, and possibly also later, hostile impulses directed against his father *B*, and fears that his father will punish (*e.g.*, castrate) him for them in the appropriate talion manner. When *A* grows up, he fears to have a son, *C*, lest *C*, the unconscious equivalent of *B*, will carry out this punishment on him. There is a double reason, it is true, for his fear: he fears his son *C*, not only as a re-incorporation of *B*, but also as a separate individual, his son; feeling from his own experience that sons always tend to hate their fathers. There are many examples of this situation in mythology. Thus, Zeus did actually carry out on his father Cronos the very injury of castration that the latter had effected on his own father, Uranos; so Uranos is avenged by his re-incarnation, Zeus.

<sup>1</sup> Benjamin Kidd, 'The Science of Power,' 1918.

## CHAPTER XL

### ANAL-EROTIC CHARACTER TRAITS<sup>1</sup>

PERHAPS the most astonishing of Freud's findings—and certainly the one that has evoked the liveliest incredulity, repugnance, and opposition—was his discovery that certain traits of character may become profoundly modified as the result of sexual excitations experienced by the infant in the region of the anal canal. I imagine that every one on first hearing this statement finds it almost inconceivably grotesque, a fact which well illustrates the remoteness of the unconscious from the conscious mind, for of the truth of the statement itself no one who has undertaken any serious psycho-analytical study can have any doubt.

There are, however, two biological considerations, relating respectively to the ontogenetic and phylogenetic antiquity of the physiological process concerned, that should render the statement made above a little less unthinkable, if not actually plausible. One is that the act of defæcation constitutes one of the two greatest personal interests of the infant during the first year of life, a fact which should carry due weight to any student of genetic psychology, for the basis of that science is the principle that all later tendencies and interests are considerably affected by earlier ones. With this may be correlated the circumstance that the alimentary function in general is the most constant preoccupation of all animals other than man. The other consideration is that many of the sexual processes and organs have been derived from the excretory ones, in both the individual and the race, and are very largely modelled on them; in the lower animals, for instance—and, indeed, partly so even in man—common ducts are used for both. That the primordial function of excretion, and the fundamental association between it and sexuality, should result in far-reaching effects on mental development should not, therefore, be altogether surprising.

<sup>1</sup> Published in the *Journal of Abnormal Psychology*, vol. xiii.

The subject should logically be prefaced by a description of the facts of anal erotism itself, and even the question of infantile sexuality in general, but so many discussions and illustrations of this are now to be found in the literature that I can deal with the matter here very briefly. The salient features as elucidated by psycho-analysis are: The mucous membrane lining the anus and anal canal possesses the capacity of giving rise, on excitation, to sexual sensations, just as does that lining the entrance to the alimentary tract. The sensations vary in intensity with the strength of the stimulus, a fact frequently exploited by infants, who will at times obstinately postpone the act of defæcation so as to heighten the pleasurable sensation when it occurs, thus forming a habit which may lead to chronic constipation in later life. The pleasure experienced in this way is one which, as a rule, becomes repressed in very early life, so completely that perhaps most adults are no longer capable of obtaining any conscious pleasure from stimulation in this region, though there are a great many with whom this capacity is still retained. The psychical energy accompanying the wishes and sensations relating to the region is almost altogether deflected into other directions, leading to the sublimations and reaction-formations which are the subject-matter of this paper. I do not propose here to touch further on the varieties of anal-erotic activities or on their importance in regard to education, to psychoneurotic symptomatology, and to the study of perversions, each of which topics would occupy a considerable chapter in itself.

In the article in which Freud<sup>1</sup> originally communicated his conclusions, he confined himself to pointing out the three character traits that are most typically related to highly developed anal erotism—namely, orderliness, parsimony, and self-willedness or obstinacy. These constitute the cardinal triad of anal-erotic character traits, though a number of other attributes have also been described by Sadger and the present writer. As no systematic account of them has hitherto been given, an attempt will here be made to classify them and to point out their inter-relationship. As might have been anticipated, some of them are of a positive nature—that is, they are sublimations which represent simply a deflection from the original aim; while others are of a negative nature—that is,

<sup>1</sup> Freud, 'Charakter und Analerotik,' *Psychiatrisch-Neurologische Wochenschrift*, 1908; reprinted in his 'Sammlung kleiner Schriften zur Neurosenlehre,' Zweite Folge, 1909, cap. iv.

they constitute reaction-formations erected as barriers against the repressed tendencies.

Blüher<sup>1</sup> would distinguish between 'defæcation erotism,' or erotism in connection with the act of defæcation, and 'anal erotism,' or erotism in connection with any other activities—*e.g.*, masturbation, pæderastia—relating to the anal region; he holds that the former is invariably auto-erotic, a statement not in accord with the facts of perversion. I would suggest, on the other hand, that, as all allo-erotic manifestations in connection with this region must ultimately be derived from erotism relating to the act of defæcation, there is no reason for introducing a separate term, though a useful distinction may be drawn between the different aspects of the originally auto-erotic anal erotism. One can separate, namely, the interest (and the character traits resulting therefrom) taken in the act itself of defæcation from that taken in the product of this act. This separation of character traits cannot be made quite sharply, it is true, for with some of them both of the interests in question play a part. Of Freud's triad, for example, the self-willedness is doubtless related to the first of the two interests mentioned, and the orderliness to the second, but the parsimony seems to be almost equally determined by both. And when one studies more closely still the relationships of the traits, the same complexity is to be found; the orderliness, for instance, passes over into pedantic persistence in the performance of duties, which is related rather to the first class of interest. Nevertheless, a certain gain in clearness is perhaps achieved by keeping distinct, so far as is possible, these two aspects of anal erotism.

Taking first the attitude of the infant towards the act itself, and the later influences of this on character-formation, we find that there are two typical features constantly noted, though, of course, to a very varying extent in different cases. The one is the endeavour of the infant to get as much pleasure as possible out of the performance, the other is his effort to retain his individual control of it in opposition to the educative aims forced on him by the environment.

The first of these endeavours he carries through by postponing the act as long as he can—children have been known even to go to the length of squatting down and supporting the anal orifice with the heel so as to keep back the stool to the last

<sup>1</sup> Hans Blüher, 'Studien über den perversen Charakter,' *Zentralblatt für Psychoanalyse*, Jahrg. iv., S. 13.

possible moment—and then performing it with intense concentration, during which he resents any disturbing influence from without. Sadger<sup>1</sup> has pointed out how this attitude may be mirrored in later character tendencies. Such people are very given to procrastination; they delay and postpone what they may have to do until the eleventh or even the twelfth hour. Then they plunge into the work with a desperate and often almost a ferocious energy which nothing is allowed to thwart, any interference being keenly resented. Undue sensitiveness to interference is very characteristic of this type, especially when combined with marked concentration out of proportion to the importance of the occupation. A kindred trait is intense persistence on an undertaking once engaged on, from which they allow nothing to divert them—even though considerations arising later may put the desirability or the value of the undertaking in a totally different perspective. Such people are often notorious bores. They are equally hard to move to a given course of action as to bring them from it once they have started on it. They are typically slow-minded and heavy in thought; once they have got on to a topic there is no breaking it off until they have gone up hill and down dale in saying all they want to about it, and in the meantime no one else is allowed to interrupt or get a word in on the matter—if they try to do so they are simply ignored or else their interruption greatly resented. On the other hand, these attributes are often very valuable, for the thoroughness and dogged persistence with which tasks are carried through has its rewards in the quality of the results. Such people often shew an extraordinary capacity for forcing their way through difficulties, and, by their persistence, get things done in despite of apparently insuperable obstacles. The trait of persistence is often related to pedantry and obstinacy, being halfway between the two. A typical kind of behaviour when such a person is faced with the question of a possible undertaking—for instance, the preparations for a dinner-party, the writing of an article, etc.—is as follows: First there is a period of silent brooding, during which the plan is being slowly, and often only half-consciously, elaborated. At this time not only are they not to be hurried, which would only result in a flustered annoyance, but they keep postponing the preliminary steps as long as it is at all possible, until the other participants despair of the performance being

<sup>1</sup> Sadger, 'Analerotik und Analcharakter,' *Die Heilkunde*, 1910, S. 43.

ever accomplished—at least in time. Then follows a spell of feverish and concentrated activity, when all interference is resented and nothing is allowed to prevent the programme laid down being carried through to the bitter end in all its details. The self-willed independence that is implicit throughout this description comes to expression in another interesting character trait—namely, the conviction that no one else can do the thing in question as well as the subject himself, and that no one else can be relied upon to do it properly. As a result such a person cannot depute work, for he has no faith in its being done adequately unless he attends personally to every detail. Such people are therefore very hard to get on with as colleagues, for, although on occasion they will get through absolutely enormous masses of work (Napoleon I), they are subject to inhibitions during which nothing goes forward, since they refuse to allocate any of the work, however urgent it may be, to a deputy or assistant. There are many historical examples—Napoleon is again one—of persons of this type organising an elaborate system which functions marvellously well while its author, with tireless energy, attends in person to every detail, but which runs the risk of collapse as soon as the master hand is inactive; for, having assumed it all himself, he has given no one else the chance of being trained in responsibility. One notes the relation of the trait last discussed to narcissism and exalted belief in personal perfection, an association we shall have to comment on again in considering other aspects of the anal-erotic character.

✓ It is astounding how many tasks and performances can symbolise in the unconscious the act of defaecation, and thus have the mental attitude towards them influenced by the anal-erotic character traits when these are present. Three classes of actions are particularly prone to become affected in this way. First, tasks where there is a special sense of duty or of 'oughtness' attached; therefore especially moral tasks. Much of the pathologically intolerant insistence on the absolute necessity of doing certain things in exactly the 'right' way is derived from this source. The person has an overwhelming sense of 'mustness' which brooks of no argument and renders him quite incapable of taking any sort of detached or objective view of the matter; there is only one side to the question, and it is not open to any discussion at all. Secondly, tasks that are intrinsically disagreeable or tedious, towards which, therefore, there is already some counter-will. This class often coalesces with the

former one, when the moral duty is of an unpleasant or distasteful nature. A typical sub-group is the kind of task that Americans aptly term 'chores,' boring routine duties like tidying drawers, cleaning out a cupboard, filling in a diary, or writing up a daily report. This passes over into the third class, in which the task concerns objects that are unconscious symbols for excretory products. Some of these will be enumerated later, but a few may be mentioned here: any form of dust or dirt, anything to do with paper, any kind of waste product, money. With all these groups we may note the alternation of inhibitory procrastination and feverish concentration described above. For example, a housewife afflicted with a marked anal complex will keep postponing the doing of a necessary duty such as the cleaning out and tidying a lumber room until finally she is seized with a passionate energy for the task, to which everything else is subordinated with no discrimination as to relative importance or expediency; similarly with the getting up to date with one's accounts or one's notes, with the arranging of disorderly material, and so on. The most perfect example of all, and one quite pathognomonic of a marked anal complex, concerns the act of writing letters. There are few people who do not at times find it a nuisance to bring their correspondence up to date, but the type under discussion may shew the completest possible inhibition at the thought of so doing, and most of all when they have the strongest desire to write a given letter. When they finally succeed in bringing themselves to the task, they perform it with a wonderful thoroughness, giving up to it their whole energy and interest, so that they astonish the long-neglected relatives by producing an excellently written and detailed budget; they despatch epistles rather than write letters in the ordinary sense.

With all these activities the desire for perfection is visible. Nothing can be done 'by halves.' When an anxious relative begs for news, if only a line on a postcard, the person finds it quite as impossible to grant the request as to write an ordinary letter; he can write only after he has accumulated enough energy to produce a really satisfactory work of art; nothing less will suffice. The same tendency to perfection may further be displayed in the calligraphy of the letter, which is also related to the trait of neatness that will be considered later; such people often evince remarkable care in the fineness and beauty of their handwriting. The lady afflicted with what the Germans



call a *Hausfraupsychose* will often find it difficult to attend regularly to the routine tasks of house work, and may neglect and postpone them until the unconsciously accumulated energy bursts forth in an orgy of cleaning activity.<sup>1</sup> These outbursts of activity are commonly followed by a marked sense of relief and self-satisfaction, to which succeeds another fallow period of apparent inactivity.

It is further to be noted that with different members of the type there is a considerable variation in the relative prominence of the two phases of the process. With some, namely, the expressive phase of thoroughness, insistence, persistence, and general energy is the dominant one, whereas with others it is the inhibitory phase of inactivity, brooding, delay, and postponement, which may even extend into temporary or permanent paralysis of various activities—such as complete inability ever to write any letters.

We have discussed so far the consequences of one feature of the infant's attitude towards the act of defecation—namely, his endeavour to get as much pleasure as possible out of the performance of it; we have now to consider the second, correlated feature—the endeavour to retain his individual control of the process. Like the previously mentioned feature, this also has two aspects—the opposition displayed against any attempt from without to dictate conduct, and the resentment shewn against any attempt to thwart conduct that has been decided on. These reactions constitute the character trait of Freud's triad which he calls *Eigensinn* (self-willedness, obstinacy), and which may attain a chronic attitude of defiance. The person objects equally to being made to do what he doesn't want to, and to being prevented from doing what he does want to. In other words, there is an inordinate, and often extreme, sensitiveness as to interference. Such people take advice badly, resent any pressure being put on them, stand on their rights and on their dignity, rebel against any authority, and insist on going their own way; they are never to be driven and can only be led. As children they are extremely disobedient, there being, indeed, a constant association between defiant disobedience and unmastered anal erotism. Later a reaction-formation against this may develop, leading to unusual docility, but it can generally

<sup>1</sup> Sadger, *loc. cit.*, points out that women are especially apt to display these outbursts periodically at times of suppressed sexual excitement—e.g., in relation to menstruation.

be observed that the docility is only partial and conditional—that is to say, they are docile only in certain circumstances, when they like and not otherwise, control of the situation thus being ultimately retained by the individual.

A curious sub-group of these character traits depends partly on the attitude described above and partly on the appreciation of value—about which more will be said presently—that the infant sets on his excretory product, in sharp contrast with that of the adult. Many infants feel it as an injustice that what they have so interestedly produced should at once be taken away from them, and this goes to strengthen the resentment against the general interference on the subject, resulting in an intense feeling against any form of injustice. Such people in later life are very sensitive on the matter of exact justice being done, even to a pedantic extent, and on all kinds of fair dealing.<sup>1</sup> They get particularly agitated at the idea of something being taken from them against their will, and especially if this is something that symbolises fæces in the unconscious, as, for instance, money does; they cannot tolerate being cheated of the smallest amount. This complex often also serves to start a fear of castration—*i.e.*, of some valued part of the body being taken away, though, of course, this has other sources as well. The concept of time is, because of the sense of value attaching to it, an unconscious equivalent of excretory product, and the reaction just mentioned is also shewn in regard to it; that is to say, people of this type are particularly sensitive about their time being taken up against their will, and they insist in every way on being master of their own time.

When, now, these hated intrusions and interferences nevertheless take place, the subject's reaction to them is one of resentment, increasing on occasion to anger or even outbursts of extreme rage. Brill<sup>2</sup> and Federn<sup>3</sup> have commented on the relation between anal-erotic sensations and the earliest impulses of sadism, and I have elsewhere<sup>4</sup> pointed out the importance played in the genesis of hatred by the early educative interference with anal-erotic activities. My communication referred

<sup>1</sup> See Ernest Jones, 'Einige Fälle von Zwangsneurose,' *Jahrbuch der Psychoanalyse*, Bd. iv., S. 586.

<sup>2</sup> Brill, 'Psychoanalysis,' Second Edition, 1914, chap. xiii., 'Anal Eroticism and Character.'

<sup>3</sup> Federn, 'Beiträge zur Analyse des Sadismus und Masochismus,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 42.

<sup>4</sup> Chapter XXXI.

especially to the pathology of the obsessional neurosis; in a subsequent paper Freud<sup>1</sup> confirmed the conclusions there reached, and also pointed out that the combination of sadism and anal erotism, a high development of which is characteristic of the obsessional neurosis, constitutes a stage in the development of the normal child, one of the stages to which he gives the name 'pregenital.' Andreas-Salomé<sup>2</sup> also has dealt at length with the importance for later sadism of the conflict between the infant and his environment over the matter of defecatory functioning. Where this has been very pronounced it may lead to a permanent character trait of irritability, which will manifest itself either as a tendency to angry outbursts or to sullen fractiousness, according to the degree of repression and other factors (cowardice, etc.). It is interesting that Berkeley-Hill<sup>3</sup> should in this connection refer to a Tamil saying which runs, 'A man who has a short temper suffers from piles.' Infantile anal erotism that has been inadequately dealt with may be suspected in any one who is the victim of chronic irritability and bad temper, and perhaps the reason why this trait is so often seen in elderly persons of either sex is that in later life, when sexual vigour is waning, there is a tendency to regress towards a more infantile and less developed plane of sexuality; it is known that old people often shew other anal character traits to a greater extent than in earlier life—e.g., personal carelessness, parsimony, and so on.<sup>4</sup> The reaction of annoyance and bad temper is especially apt to be brought out by intrusions on the part of the environment of just the sort described above—namely, either when the person is prevented from doing what he has set out to, or when he is made to do what he does not want to. Typical situations are: hindering the person from concentrating on a task which he has gradually forced himself to undertake, and from which he is now not to be deterred; compelling him to part with money or time against

<sup>1</sup> Freud, 'Die Disposition zur Zwangneurose,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 525.

<sup>2</sup> Lou Andreas-Salomé, "'Anal" und "Sexual,"' *Imago*, Jahrg. iv., S. 249.

<sup>3</sup> Owen Berkeley-Hill, 'The Psychology of the Anus,' *Indian Medical Gazette*, August, 1913, p. 301.

<sup>4</sup> On the other hand, Von Hattingberg points out that some of the character traits—e.g., obstinacy—may shew themselves in childhood only, and disappear later; 'Analerotik, Angstlust und Eigensinn,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. ii., S. 244.

his will; pressing and urging him to undertake something at once when he wishes to brood over it; and so on. Finally, in connection with the tendency to anger and bad temper should be mentioned the vindictive desire for revenge when injured or thwarted, which in many people of this type is developed to an extraordinary extent.

It is not hard to see that many of the temperamental traits mentioned above are closely related to narcissistic self-love and over-estimation of self-importance, a fact which indicates the importance of the contribution made by anal erotism to infantile narcissism. I am referring here especially to self-willedness and all that goes with this, the insistence on pursuing one's own path regardless of the influence brought to bear by other people, the resentment at external interference, the conviction that no one else can carry out a given undertaking as well as oneself, etc. Persons of the type under consideration are apt to have a strongly marked individuality, and study of them throws many difficulties in the way of accepting Trotter's views as to the significance of a social or herd instinct.

A character trait that I have not yet been able fully to analyse, but which is certainly related to the foregoing ones, has considerable importance for general happiness and efficiency. It consists of an inability to enjoy any pleasurable situation unless all the attendant circumstances are quite perfect. People who display this trait are extremely sensitive to any disturbing or disharmonious element in a situation; a satisfactory mood is readily impaired by slight influences; they are—to put it colloquially—easily 'put out.' The attitude is often shewn in sexual situations, though by no means only here; the striking of a slightly discordant note, the thought of an unimportant duty not attended to, the slightest physical discomfort, these and similar circumstances are sufficient to abolish potency for the time being. They cannot enjoy an operatic performance, a motor ride, a social function, unless they are exactly 'in the mood,' and the right mood is only too fickle and erratic. The trait commonly goes with chronic irritability, and its anal-erotic origin is further to be suspected from its relation to the allied characteristic of being unable to settle down to any task until everything is arranged beforehand to the last detail; such a person cannot write a letter, for instance, until every article on the desk is arranged in exactly the right place, until the pen or pencil is precisely in order, and

so on—an attitude which is certainly of anal-erotic origin. As may be imagined, such people are, as a rule, not only difficult to live with, but are rarely happy; they worry, they fidget, they take everything too seriously, and their life is a never-ending struggle to get things right, to arrange matters so that they may at last get some enjoyment in spite of all the difficulties in the way. In this connection it is noteworthy that pædiatrists<sup>1</sup> have called attention to the fact that children who suffer much from intestinal disturbances in infancy usually grow up to be unhappy, irritable, and unduly serious—*i.e.*, into the type just indicated.

Yet another character trait that is often strengthened by anal-erotic complexes is the desire for self-control, especially when this becomes a veritable passion. There are people who are never satisfied with their capacity for self-control, and who ceaselessly experiment with themselves with the aim of increasing it. This may take either a physical or moral direction. To the former category belong the people who are always doing things like going without sugar in their tea, giving up smoking temporarily, putting their legs out of bed on a cold night, and indulging in all sorts of ascetic performances in order to reassure themselves of their power of self-control and to 'shew themselves that they can do it.' In the moral sphere the effects are, of course, more disturbing still, and need not be enumerated here. Although there are naturally many other sources of these ascetic and self-martyring impulses, one not unimportant one, as I have analytically illustrated elsewhere,<sup>2</sup> is the lasting influence of the infant's ambition to achieve *control* of his sphincters, his first great lesson of the kind.

Interest in the act of defæcation often leads to interest in the site of defæcation—*i.e.*, in the anal canal itself. Without going into the possible effects of this on the sexual development, which are, of course, of considerable importance, I may just mention a few characterological consequences that I have noted in the course of psycho-analysis.<sup>3</sup> The most interesting one is the tendency to be occupied with the reverse side of various things and situations. This may manifest itself in many different ways; in marked curiosity about the opposite or back side of objects and places—*e.g.*, in the desire to live on the other side

<sup>1</sup> *E.g.*, Czerny, 'Der Arzt als Erzieher des Kindes,' 1908.

<sup>2</sup> *Op. cit.*, *Jahrbuch*, S. 587.

<sup>3</sup> *Op. cit.*, *Jahrbuch*, S. 581-583.

of a hill because it has its back turned to a given place; in the proneness to make numerous mistakes as to right and left, east and west; to reverse words and letters in writing; and so on. Another curious trait of the same origin is a great fascination for all underground passages, canals, tunnels, etc., and I have also known the same complex lead to an extreme interest in the idea of centrality; one of my patients was always restlessly searching to discover what was really the exact centre of any town he might be in, and developed many philosophical ideas as to what constituted the very 'centre of life,' the 'centre of the universe,' etc.

We pass now to the second of the two categories put forward above—namely, the character traits derived from interest in the excretory product itself. Some of these traits relate purely to this aspect of the subject, but most of those to be next considered relate partly to it and partly to the former theme of interest in the excretory act. They all represent either positive or negative reactions—*i.e.*, either sublimations or reaction-formations respectively. To understand them it is essential to realise the primary attitude of the infant towards faecal material. There is every reason to think that, to begin with, this attitude is throughout positive, in contradistinction to the adult one. The infant regards his product as part of himself, and attaches to it a strong sense of value and of possession. He soon learns to invest the idea with a negative feeling-attitude of disgust, as for something unclean. This comes about more slowly and less completely with some children than with others, depending largely on the degree of repression. It seems likely that some of this repression may be entirely endogenous, an inherited tendency. It is much more marked in the case of other people's excreta than with our own, with liquid than with solid excreta, and with the sense of smell than with that of touch or sight. Before this reaction-formation develops, the infant's natural tendency—not always indulged in—is to keep and play with the material in question, the two typical forms of which are moulding and smearing.<sup>1</sup> In this stage the infant will produce and smear with excreta as a token of affection and pleasure, a demonstration usually misinterpreted by the recipient and not appreciated at its proper value.

<sup>1</sup> On the pleasure in smearing see Federn, *op. cit.*, S. 41, and many passages in Stekel's writings.

Before we go on to discuss the character traits derived from these attitudes, a little must be said about the unconscious copro-symbols, on to which the corresponding feelings get transferred. The most natural one is food, this being the same substance in an earlier stage; many idiosyncrasies, both positive and negative, in regard to various articles of diet—*e.g.*, sausages, spinach, rissoles, etc.—are due to this unconscious association. Another obvious symbol is any dirty material, street-filth (including, of course, dung), soiled linen and other things, dust, coal, house or garden refuse, waste-paper, and, indeed, waste material of all description, for in the unconscious the ideas denoted by the words 'waste' and 'dirty' seem to be synonymous—the *tertium comparationis* doubtless being that of 'refuse.' Either disgusting or waste matter relating to the body is especially apt to become thus associated. The former of these may be illustrated by the material of loathsome diseases—*e.g.*, purulent and other secretions—and this is also the reason why a corpse is often a symbol of fæces. Examples of the latter one are hair and nails, parts of the body that are apt to get dirty and which are periodically cast off. Books and other printed matter are a curious symbol of fæces, presumably through the association with paper and the idea of pressing (smearing, imprinting).

The two most remarkable, and perhaps most important, fæcal symbols are money and children, and, as they occasion profound surprise to every one who first hears of them, a little may be added by way of explanation. Concerning the money symbol Freud writes:<sup>1</sup> 'Überall, wo die archaische Denkweise herrschend war oder geblieben ist, in den alten Kulturen, im Mythos, Märchen, Aberglauben, im unbewussten Denken, im Traume und in der Neurose ist das Geld in innigste Beziehungen zum Dreck gebracht. Es ist bekannt, dass das Gold, welches der Teufel seinen Buhlen schenkt, sich nach seinem Weggehen in Dreck verwandelt, und der Teufel ist doch gewiss nichts anderes als die Personifikation des verdrängten unbewussten Trieblebens. Bekannt ist ferner der Aberglaube, der die Auffindung von Schätzen mit der Defäkation zusammenbringt, und jedermann vertraut ist die Figur des "Dukatenscheissers." Ja, schon in der altbabylonischen Lehre ist Gold der Kot der Hölle.' [ 'Wherever the archaic mode of thought has prevailed or still prevails, in the older civilisations, in myths, fairy-tales,

<sup>1</sup> Freud, 'Schriften,' *op. cit.*, S. 136.

superstition, in unconscious thinking, in dreams, and in neuroses, money has been brought into the closest connection with filth. It is well known how the gold with which the devil presented his admirers changed into filth on his departure, and surely the devil is nothing other than the personification of the repressed unconscious impulses. The superstition is also well known that brings the discovery of treasure into association with defæcation, and every one is familiar with the figure of the "gold-bug" (literally "excreter of ducats").<sup>1</sup> Indeed, even in the ancient Babylonian doctrine gold was regarded as the dung of hell.] Many linguistic expressions point to the same association. A popular German name for piles is 'goldene Ader,' golden veins. We speak of a 'dirty or filthy miser,' of a man 'rolling' or 'wallowing' in money, or of a man 'stinking of money.'<sup>2</sup> On the Stock Exchange a man who is hard up is said to be 'constipated,' and similar expressions such as 'currency,' 'liquid money,' etc., doubtless come from the same source. In insanity, and, as Wulff<sup>3</sup> has pointed out, also in drunkenness, the association often comes openly to expression, the patient referring to his excreta as wealth, money, or gold. In Browning's poem 'Gold Hair: A Story of Pornic,' the ideas of hair, decomposition, gold colour, money, and miserliness, are brought into the closest association.<sup>4</sup> In Freud's original

<sup>1</sup> A fairy-tale equivalent is the goose with the golden eggs. For other mythological examples of the association see Dattner, 'Gold und Kot,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 495.

<sup>2</sup> From an endless number of literary examples of the association I will quote the following two: 'I hate equality on a money basis. It is the equality of dirt' (D. H. Lawrence, 'The Rainbow,' 1915, p. 431).

'More solemn than the tedious pomp that waits  
On princes, when their rich retinue long  
Of horses led and grooms besmeared with gold.'

MILTON: 'Paradise Lost,' Book V.

The association is common enough in erotic art, especially in caricature (because of the connection between contempt and anal erotism). Two examples may be cited from Broadley's 'Napoleon in Caricature,' 1911: One, by Fores, depicts Napoleon and George III. as 'The Rival Gardeners'; at the side is a wheelbarrow filled with coins and labelled 'Manure from Italy and Switzerland.' The other, entitled 'The Blessings of Paper Money,' is by George Cruikshank; there is a figure of Napoleon withdrawing a large pan filled with gold coins from underneath John Bull, who is being dosed with paper money.

<sup>3</sup> Wulff, 'Zur Neurosymbolik: Kot—Geld,' *Zentralbl. f. Psychoanalyse*, Jahrg. i., S. 337.

<sup>4</sup> In the Norse tale of Bushy Bride the heroine's hair drops gold as she brushes it. For associations in mythology between hair and gold see also Laistner, 'Das Rätsel der Sphinx,' 1889, Bd. ii., S. 147, etc.



article on the subject he proffered the opinion that the association is in part a contrast one—between the most valuable substance man possesses and the least valuable; but it is now known that the connection is a more direct one—namely, that the sense of value attaching to money is a direct continuation of the sense of value that the infant attaches to its excretory product, one which in the adult consciousness is replaced by its opposite, though it still persists unaltered in the unconscious. In a very suggestive paper, Ferenczi<sup>1</sup> has worked out in detail the stages by which the child passes from the original idea of excrement to the apparently remote one of money. Shortly put, they are as follows: transference of interest from the original substance to a similar one, which, however, is odourless—*i.e.*, mud-pies; from this to one that is dehydrated—*i.e.*, sand; from this to one of a harder consistence—*i.e.*, pebbles (some savages still barter in pebbles, and there is still in German an expression 'steinreich,'—*i.e.*, stone-rich—to denote wealth); then come the artificial objects like marbles, buttons,<sup>2</sup> jewels, etc., and finally the attractive coins themselves (helped, of course, by the value attached to them by adults). In conclusion, I may mention a curious copro-symbol in this connection—namely, one's last will and testament; the association is doubtless the sense of value and the prominence of the idea of something being left finally behind.<sup>3</sup>

The association between children and faeces comes about in the following way: In the young child's spontaneous phantasy the abdomen is merely a bag of undifferentiated contents into which food goes and out of which faeces come. The knowledge that the foetus grows in the mother's abdomen—a fact easily observed by children without its being realised by grown-ups, and later forgotten—leads to the natural inference that it grows out of food, which is perfectly correct except for the initial pair of cells; and then, since the child has no knowledge of the

<sup>1</sup> Ferenczi, 'Contributions to Psycho-Analysis,' English Translation, 1916, chap. xiii., 'The Ontogenesis of the Interest in Money.'

<sup>2</sup> Some neurotics have an intense feeling that all buttons are filthy objects, one doubtless furthered by the association between them and soiled clothes.

<sup>3</sup> The importance that in the anal complex gets attached to the idea of 'parting with something left behind' may largely contribute to the sentimental attitude many people display on the occasion of parting with various personal objects which they have possessed for a long time, especially if the parting is a final one; the other source of this attitude is the death complex, where, of course, the idea of finally parting is equally prominent.

vagina, he can only conclude that the baby leaves the body through the only opening through which he has ever known solid material leave it—namely, the anus.<sup>1</sup> This 'cloacal' theory of birth again has its germ of truth, for the vagina and the anus were originally one passage, in pre-mammalian animals. The baby is thus something that in some special way has been created and formed out of fæces;<sup>2</sup> fæces and children are, after all, the only two things that the body can create and produce, and the impulse to do so is remarkably similar in the two cases, especially to a young child whose feelings about its excreta are not yet what ours are. The child finds in Nature plenty of confirmatory evidence for its view that charming things grow out of matter with a bad odour—*e.g.*, flowers<sup>3</sup> out of manured soil, etc., this being one of the sources of passionate delight in flowers (characteristically enough, mostly on the part of girls), which are unconscious symbols for babies. I have elsewhere<sup>4</sup> collected a number of words the etymology of which illustrates the association between babies, fæces, and odour. An otherwise unintelligible symbolism I have noted<sup>5</sup> becomes explicable in the light of the preceding considerations—namely, that the idea of stealing money from a woman can symbolise the idea of begetting a child by her. The association between the ideas of corpse and fæces—both being something that was alive and is dead—may also contribute to the belief that babies come from some one who has died.<sup>6</sup>

The possible reactions to these various symbols are so numerous and complex that they are not easy to classify. The anal-erotic complex is genetically related to two of the most

<sup>1</sup> This view is usually forgotten, and then replaced by the more acceptable one that the baby emerges through the navel.

<sup>2</sup> Clinical examples of this are given by Freud, *Jahrbuch der Psychoanalyse*, Bd. i., S. 55, and Jung, *Jahrbuch der Psychoanalyse*, Bd. ii., S. 49. Many examples of the same belief in mythology and folk-lore are quoted by Rank, 'Völkerpsychologische Parallelen zu den infantilen Sexualtheorien,' *Zentralbl. f. Psychoanalyse*, Jahrg. ii., S. 379, 380, 381. The idea has often been depicted in art, of which an example is to be found in Fuchs, 'Das erotische Element in der Karikatur,' 1904, S. 85.

<sup>3</sup> On the association between flowers, hair, and odour, see Scheuer, 'Das menschliche Haar und seine Beziehungen zur Sexualsphäre,' *Sexual-Probleme*, Jahrg. viii., especially S. 173; and also in this connection a note of my own, 'Haarschneiden und Geiz,' *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. ii., S. 383; and Chapter XXX. of the present volume.

<sup>4</sup> *Jahrbuch der Psychoanalyse*, Bd. vi., S. 192.

<sup>5</sup> *Ibid.*, Bd. iv., S. 585.

<sup>6</sup> See Chapter XXXIX., p. 661.

fundamental and far-reaching instincts, the instincts to possess and to create or produce respectively. On the whole they are opposed to each other, the one being an impulse to keep, the other an impulse to give out,<sup>1</sup> and they may roughly be correlated with the two phases described earlier in this paper—the tendency to keep back and postpone production and to produce feverishly.<sup>2</sup> The character of the person will greatly depend on whether the stress is laid on the one or the other of these two impulses. The question is complicated by the fact that the 'retaining' attitude of the first phase may extend over on to the product itself after it has been brought forth, so that a hoarding tendency ensues. Further, enormous complexities result from the fact that the different attitudes possible vary with different symbols, so that the same person may in one respect shew a positive attitude, in another a negative one; in one respect a sublimation, in another a reaction-formation; in one respect a giving out, in another a holding back; and so on. It is therefore only possible to delineate certain general types in a rather schematic way, and to call attention to the more characteristic reactions. At the risk of making some errors of over-simplification, I shall try to group the possible reactions into four on the basis of two principles: that of the two impulses just mentioned, and that of sublimation *versus* reaction-formation, this one depending on whether the original sense of value is retained or not. Thus we have two groups derived from the 'keeping back' or possessing instinct, according as the sense of value is or is not retained, and similarly two with the creative or productive instinct. These four groups will next be illustrated in this order.

A. 1.—The most typical sublimation product of the 'retaining' tendency is the character trait of parsimony, one of Freud's triad; in the most pronounced cases it goes on to actual miserliness. There are two aspects to the trait, the refusal to give and the desire to gather, and with a given person one of these may be much more prominent than the other; he may be either niggardly or avaricious, or both. Such people are mean, and grudge giving or lending.<sup>3</sup> The attitude naturally applies

<sup>1</sup> It is interesting that Bertrand Russell, in his 'Principles of Social Reconstruction,' 1916, should make this opposition the basis of an extensive sociological philosophy.

<sup>2</sup> The two might also be termed the 'retaining' and the 'ejecting' tendencies respectively.

<sup>3</sup> We appropriately speak of such people as being 'close,' 'tight,' etc.

most to the various copro-symbols—*e.g.*, money (most of all), books, time, food (food-hoarders!), and so on. The irrational—*i.e.*, unconscious—origin of the attitude is often shewn by the way in which the person will grudge giving a copper or a penny stamp (which are more directly associated symbols) much more than a considerable sum given by cheque. Sometimes the trait is marked only in a limited sphere; a common one is where a quite well-to-do person grudges the cost of the laundry, and resorts to various petty devices to diminish it; the tendency not to change underclothing more than is absolutely necessary is often doubly motivated, consciously by the dislike of parting with money—*i.e.*, sublimated dirt—and unconsciously by the dislike of parting with bodily dirt. When such people are compelled to part with more than they are willing to, they display the reaction of annoyance and resentment discussed earlier in this paper; thus, when money is stolen from them, and particularly when it is stolen by their being given 'bad'—*i.e.*, 'rotten'—money<sup>1</sup>—that is, when they are made to excrete against their will.

The second aspect mentioned is the impulse to gather, collect, and hoard. All collectors are anal-erotics, and the objects collected are nearly always typical copro-symbols: thus, money, coins (apart from current ones), stamps, eggs, butterflies—these two being associated with the idea of babies—books, and even worthless things like pins, old newspapers, etc. In the same connection may be mentioned the joy in finding or picking up objects of the same sort, pins, coins, etc., and the interest in the discovery of treasure-trove. The treasure-trove is usually buried underground, which connects with the interest mentioned above in concealed passages, caves, and the like; the interest is also evidently strengthened by other sexual components, *Schaulust* (visual sexual curiosity), incestuous exploration in the body of Mother Earth,<sup>2</sup> etc.

A more edifying manifestation of the same complex is the great affection that may be displayed for various symbolic objects. Not to speak of the fond care that may be lavished

<sup>1</sup> *Jahrbuch, loc. cit.*

<sup>2</sup> In 'Paradise Lost' (Book VIII.) we read how men, taught by Mammon,

. . . with impious hands  
Rif'd the bowels of their mother Earth  
For Treasures better hid. Soon had his crew  
Op'n'd into the Hill a spacious wound  
And dig'd out ribs of Gold.'

on a given collection—a trait of obvious value in the custodians of museums and libraries, etc.—one of the most impressive traits in the whole gamut of the anal character is the extraordinary and quite exquisite tenderness that some members of the type are capable of, especially with children;<sup>1</sup> this is no doubt strengthened both by the association with innocence and purity presently to be discussed, and by the reaction-formation against the repressed sadism that so commonly goes with marked anal erotism. A curious accompaniment of this tenderness is a very pronounced tendency to domineer the loved (and possessed) object; such people are often very dictatorial or even tyrannical, and are extremely intolerant of any display of independence on the part of the loved object.

A. 2.—The chief reaction-formation shewn in conjunction with the 'retaining' tendency is the character trait of orderliness, the third of Freud's triad. It is evidently an extension of cleanliness, on the obverse principle to the saying that 'dirt is matter in the wrong place'; presumably it is no longer dirt if it is put in the right place. When marked, this trait may amount to a definite neurotic symptom, there being a restless and uncontrollable passion for constantly arranging the various details of a room until everything is tidy, symmetrical, and in exactly 'its right place.' One illustration of this familiar trait will suffice: I have seen books, never used, kept on a table, and although they were all of the same size and looked perfectly neat, the owner could not rest without putting them in the precise order he had ordained as fit and proper; a picture ever so slightly askew would have made it out of the question for him to continue a conversation. Such people are extremely intolerant of any disorder; they are bound to clear away any waste paper or other objects 'left lying about.' Everything must be put in its proper place, and if possible put away out of sight. A more useful development that occurs in some members of the type is a high capacity for organising and systematising.

In the field of thought this tendency commonly leads to undue pedantry, with a fondness for definitions and exactitude, often merely verbal. An interesting and valuable variety occasionally met with is a great dislike for muddled thinking,

<sup>1</sup> It is quite characteristic even of misers to be passionately fond of their children—e.g., Shylock, Balzac's Eugénie Grandet, etc.; with the former of these, Shakspere clearly illustrates the equivalency and unconscious identity of the daughter and the ducats.

and a passion for lucidity of thought; such a person delights in getting a matter quite clear, has a fondness for classifying, and so on.

The intolerance for disorder is closely related to another trait, the intolerance for waste. This has more than one source. It represents a dislike of anything being thrown away (really from the person)—a manifestation of the retaining tendency under consideration—and also a dislike of the waste product because it represents refuse—*i.e.*, dirt—so that every effort is made to make use of it. Such people are always pleased at discovering or hearing of new processes for converting waste products into useful material, in sewage farms, coal-tar manufactories, and the like.

A correlated trait, to which Freud called attention, is reliability, the capacity for being depended on. It is related to the passion for thoroughness and efficiency, with the dislike of deputing, that was discussed earlier in the paper. People having it can be trusted not to neglect any duty or to leave things undone or half done.

*B. 1.*—In this category comes the opposite of parsimony—namely, extreme generosity and extravagance. Some psychoanalysts would call this type 'anal-erotic' as distinct from the 'anal character' of the former, but it seems to me that they are equally character types derived from anal-erotic complexes, differing only in that one is positive and the other negative. One can distinguish two varieties of even the positive aspect of the 'giving-out' type according to what is done with the product; with the one variety the person's aim is to eject the product on to some other object, living or not, while with the other the aim is to manipulate the product further and to create something else out of it. The two will next be considered in this order.

(*a*) The simplest type of the former aim may be called a sublimation of the primitive smearing impulse. An unrefined and usually repressed form of this is the impulse to stain or contaminate, found, for instance, in the perversion known as pygmalionism, the impulse to stain statues with ink, etc., and in the perverse impulse to defile women or their clothing by throwing ink, acid, or chemicals over them;<sup>1</sup> it sometimes lurks

<sup>1</sup> Thoinet, 'Attentats aux Mœurs,' 1898, pp. 484 *et seq.*; Moll, 'Gutachten über einem Sexual-Perversen (Besudelungstrieb),' *Zeitschr. f. Medizinalbeamte*, 1900, Heft xiii.

behind the erotic passion for young children (desire to contaminate their innocence). Two sublimations of this impulse are of great social significance—namely, interest in painting and in printing<sup>1</sup>—*i.e.*, in implanting one's mark on some substance. Lower forms of the same tendency are the common fondness of the uneducated for carving or writing their names—*i.e.*, leaving a memento of themselves which may injure and spoil something beautiful (and therefore spoilable); on the same plane there are innumerable manifestations of this spoiling, defiling impulse, usually associated with destructiveness (Freud's pregenital sadistic-anal-erotic stage of development<sup>2</sup>)—witness the War.

When, with retention of the sense of value, the original product is replaced by money, jewels, etc., and when, further, the original sexual impulse has developed on to the allo-erotic plane, there is brought about a form of love-life characterised by the overwhelming predominance of the act of giving. It is true that, from both the psychological and physiological basis of love, the greater part of all love-life is modelled on the prototype of giving and receiving, but in the type in question all other aspects of love are entirely subordinated to this one act. Such people are always making presents; they woo their mate by only one method of making themselves agreeable and attractive, by giving her jewels, chocolates, etc., etc. The immature and pregenital level of this form of love-life is shewn by the fact that it is commonest with persons who are relatively impotent or anaesthetic; the usual pair who love in this way is an old man and a young girl, the former having reverted to this infantile level and the latter never having left it.

It is probable that the very desire to impregnate is contributed to by the complex in question (see above for child symbolism), but we are here on a more adult genital plane of development, so that it is only possible to detect traces of the complex in some people.

(b) The desire to manipulate the product further and to create out of it leads to various sublimations, beginning with the usual fondness of children for moulding and manipulating plastic material, putty, plasticene, etc. The commonest sublimation is in the direction of cooking,<sup>3</sup> which may later be

<sup>1</sup> There are obviously other sources, even in the unconscious, for these interests, but the importance of the one here given is not to be under-estimated.

<sup>2</sup> See Chapter XXXI., p. 547.

<sup>3</sup> See *Jahrbuch, op. cit.*, S. 568.

replaced by an aversion from cooking or continued as a passion for it. It finds extensive application in two other spheres of life, the industrial<sup>1</sup> and the artistic: good examples of the former are metal-moulding, building, carpentry, engraving, etc.; examples of the latter are sculpture, architecture, wood-carving, photography, etc.<sup>2</sup>

B. 2.—We have next to consider results of the reaction-formations built up against material that has been emitted, or symbols of this. The most obvious one is a strong dislike of dirt and a passion for cleanliness. Sadger<sup>3</sup> points out that intense dislike of dirt on the body itself is usually indicative of a masturbation complex, the anal-erotic one manifesting itself rather in an aversion from dirt in regard to external objects, particularly clothing and furniture—where with neurotics it may become exceedingly exaggerated; he gives as a special mark of an anal-erotic complex the dislike of street dirt and the tendency to lift the skirts specially high from the ground (excepting, of course, the cases of girls where this is due rather to an exhibitionistic impulse). My experience agrees with his in this conclusion, with, however, one modification. I find that the anal-erotic reaction often extends to the *inside* of the body, there being a conviction that everything inside is inherently filthy;<sup>4</sup> I have known such people be unwilling even to insert a finger into their own mouths, and to have the custom of drinking large quantities of water daily with the idea of cleansing the dirty inside of the body.

In striking contrast with the character trait of loving care in regard to objects, which was mentioned above (under A. 1), is the attitude of the present type. Such people, so far from being proud of their possessions and productions, take very little interest in them. They are often quite indifferent to their immediate surroundings, to their furniture, clothes, and so on. As to their own productions, whether material or mental, their chief

<sup>1</sup> It does not seem altogether fanciful to correlate the enormous extension of interest in industrialism that took place a century or so ago with the wave of increased repression of anal erotism that can be shewn historically to have accompanied it, especially in England.

<sup>2</sup> Lest it may be thought that any of these conclusions are speculative, I may say that every one is based on the data of actual analyses, as are all the conclusions presented in this paper.

<sup>3</sup> Sadger, *op. cit.*, S. 44.

<sup>4</sup> Accompanying this is often to be found a marked hypochondria, especially in regard to alimentary functioning of all kinds.



concern after the process is finished is to get rid of them as completely as possible, and they discard them with no wish to know what becomes of them. This attitude may, through the association explained above, even extend to the children produced, though such cases are rare; when this happens, the woman may delight in the process of pregnancy itself, but take no interest in the results of it.

An extension of this reaction is the exaggerated disgust and aversion sometimes displayed in regard to any idea of contaminating or spoiling. Such people are abjectly miserable at the thought of anything, especially beautiful objects, being injured, spoiled, ruined, and their life in an industrial age is one long protest against the intrusion of man, with all his squalor and ugliness, into the previously untouched spots of Nature. The staining of table-linen, the defacement of a book, the injuring of a picture, the growth of a town over what were fields and woods, the post-prandial performances of trippers in the country, the building of a new factory or the extension of a railway—all evoke the same reaction of agonised distress and resentment.

A variety of the reaction that is very important sociologically is what may be called the morbid purity complex. I refer to the purity fanatics who can only conceive of sexuality as a kind of anal erotism, and to whom, therefore, all its manifestations are necessarily filthy.<sup>1</sup> They have so perverted the very meaning of the word 'pure' that it is hardly possible to use it nowadays without exposing oneself to the so often well-founded comment, 'To the pure all things are impure.' My experience also tallies with Sadger's<sup>2</sup> in tracing to the same origin what he calls 'the theory of the pure man' that so many neurotic girls hold—namely, the belief that a man is defiled unless he enters marriage with no previous experience of allo-erotic functioning. To such people sexuality is so inherently filthy in itself that it can only be removed from this reproach—if at all—by surrounding it with the most elaborate precautions and special conditions.

A little should be said, in conclusion, of a theme that has so far not been touched on here—namely, the psychological derivatives of the flatus complex, of the infant's interest in the production of intestinal gas. I have devoted a monograph<sup>3</sup> to

<sup>1</sup> See *Jahrbuch, op. cit.*, S. 580.

<sup>2</sup> Sadger, *op. cit.*, S. 45.

<sup>3</sup> 'Die Empfängnis der Jungfrau Maria durch das Ohr: Ein Beitrag zu der Beziehung zwischen Kunst und Religion,' *Jahrbuch der Psychoanalyse*, Bd. vi.

some aspects of the part played in art and religion by this complex, the manifestations of which are a good deal more extensive than might be supposed. I have shewn<sup>1</sup> that in the unconscious the idea of flatus forms important associations with a series of other ideas having similar attributes, notably those of sound, light, odour, fire, breath, speech, thunder, thought, mind, soul, music,<sup>2</sup> poetry,<sup>2</sup> and that a number of mental attitudes towards these ideas is influenced by the association in question. I do not propose to repeat these here, but will simply illustrate them by a few examples. A passion for propagandism of ideas and a belief in telepathy<sup>3</sup> may be largely determined by this complex. So may an intense aversion for already-breathed air, with a fanaticism for fresh air, a passionate interest in the subject of breath control, and the conviction that breathing exercises afford a panacea for mental and bodily ills. With speech, quite apart from gross inhibitions like stuttering, the influence of the associated flatus complex may extend into the finest details of syntax and grammar; a man, for instance, who was habitually reticent in speech cherished the ambition, which he very largely carried out, of being able so to construct his clauses, on a very German model, as to expel all he might have to say in one massive but superbly finished sentence that could be flung out and the whole matter done with.

#### GENERAL SURVEY.

The number of character traits and interests ranged over in the preceding remarks has been so great, and the account given of them so bald, that it may conduce to perspicuity if I once more review shortly the subject as a whole. One should keep well in mind the two fundamental phases of the process—the first one of 'keeping back' and the second one of 'giving out' respectively, each of which gives rise to its own series of character traits. With both of them the person strongly objects to being thwarted, to being prevented from either 'keeping back' or 'giving out,' as the case may be; this attitude

<sup>1</sup> *Jahrbuch der Psychoanalyse*, Bd. iv. and v.

<sup>2</sup> It is noteworthy that the anal-erotic complex plays a part in relation to each of the five arts, architecture, sculpture, painting, music, and poetry, as might have been expected from the important contribution to aesthetics in general that is provided by the reaction-formation against anal erotism.

<sup>3</sup> See *Jahrbuch*, Bd. iv., S. 590, u. ff.; and also Hitschmann, *Internat. Zeitschr. f. ärztl. Psychoanalyse*, Jahrg. i., S. 253.

may lead to marked individualism, self-willedness, obstinacy, irritability, and bad temper. Heavy-mindedness, dogged persistence, and concentration, with a passion for thoroughness and completeness, are characteristics equally related to both phases.

Much of the person's later character will depend on the detailed interplay of the attitudes distinctive of each phase, and on the extent to which he may react to each by developing either a positive sublimation or a negative reaction-formation. The sublimations result in two contrasting character types: on the one hand a parsimonious and perhaps avaricious one, with a fondness for possessing and caring for objects, and a great capacity for tenderness so long as the loved person is docile; on the other hand, a more creative and productive type, with active tendencies to imprint the personality on something or somebody, with a fondness for moulding and manipulating, and a great capacity for giving, especially in love. The reaction-formations lead to the character traits of orderliness, cleanliness, pedantry, with a dislike of waste; they also afford important contributions to æsthetic tendencies.

It will be seen that the total result is an extremely varied one, owing to the complexity of the inter-relations of the different anal-erotic components with one another and with other constituents of the whole character. Some of the most valuable qualities are derived from this complex, as well as some of the most disadvantageous. To the former may be reckoned especially the individualism, the determination and persistence, the love of order and power of organisation, the competency, reliability and thoroughness, the generosity, the bent towards art and good taste, the capacity for unusual tenderness, and the general ability to deal with concrete objects of the material world. To the latter belong the incapacity for happiness, the irritability and bad temper, the hypochondria, the miserliness, meanness and pettiness, the slow-mindedness and proneness to bore, the bent for dictating and tyrannising, and the obstinacy which, with the other qualities, may make the person exceedingly unfitted for social relations.

## GLOSSARY

I HAVE been asked by several readers to append a glossary to the present edition, and it seems only fair to do so, as the book is addressed to a double audience—a medical and a psychological one, each of whom uses terms with which the other may not be fully conversant. A definition of the terms not here included will usually be found in the text, under the references given in the index.

**Abreaction.**—The process of working off a pent-up emotion by living through it again in feeling or action.

**Affect.**—Feeling. The essential constituent of emotion.

**Agoraphobia.**—Dread of open spaces.

**Algolagnia.**—Sexual excitement at the presence of pain; may be active or passive.

**Allo-erotism.**—Erotism in connection with the idea of another human being.

**Ambivalency.**—The coexistence of opposed feelings—*e.g.*, love and hate.

**Amnesia.**—A localised defect of memory.

**Anesthesia.**—Absence of feeling, often only so far as consciousness is concerned.

**Anal erotism.**—Erotic excitation aroused by stimulation of the anus.

**Aphonia.**—Loss of speech, often hysterical.

**Auto-erotism.**—Self-generated erotism, gratified in relation to the person alone; a contrast to allo-erotism.

**Bisexuality.**—Sexual feeling for members of both sexes.

**Castration complex.**—The idea of injury to the penis, testicles, or clitoris.

**Catatonia.**—A form of dementia præcox, catalepsy (also found in hysteria) being a prominent symptom.

**Catharsis.**—The purging of the effects of a pent-up emotion by bringing it to the surface of consciousness.

**Censor, endopsychic.**—The sum of repressing forces.

**Claustrophobia.**—Dread of closed spaces.

**Cloaca theory.**—The infantile belief that the child is born through the rectum.

**Coitus interruptus.**—Withdrawal of the penis before the orgasm so that the emission takes place outside.

**Coitus reservatus.**—Coitus with no orgasm, or at all events only a delayed one.

**Complex.**—A group of emotionally invested ideas partially or entirely repressed.

**Condensation.**—Unconscious fusion of ideas.

**Constellation.**—A group of emotionally invested ideas not repressed.

**Conversion, hysterical.**—Symbolical expression of a complex by means of physical manifestations—*e.g.*, disgust by vomiting.

**Coprophilia.**—Interest in excreta.

**Cunnilingus.**—Apposition of the mouth to the vulva.

**Cyclothymia.**—Mild form of manic-depressive insanity, often not recognised as insanity.

**Dementia præcox.**—The commonest form of insanity.

**Dipsomania.**—Periodic uncontrollable desire for alcohol.

**Displacement.**—Transference of an affect from one idea to another.

**Ejaculatio præcox.**—Seminal emission at the beginning of coitus.

**Erotogenic zone.**—An area of the body stimulation of which gives rise to erotic sensations.

**Euphoria.**—Sense of well-being.

**Exhibitionism.**—Sexual excitement at the act of displaying an erotogenic part of the body.

**Fellatio.**—Apposition of the mouth to the penis.

**Fetishism.**—Sexual gratification in connection with a part only of the loved object—*e.g.*, foot, glove, etc.

**Fugue.**—Flight.

**Ganser's syndrome.**—Collection of certain symptoms, most prominent of which is the giving of an approximate answer to every question.

**General paralysis.**—Fatal form of insanity, always due to syphilis.

**Hetero-erotism.**—Allo-erotism.

**Hetero-sexuality.**—Love for a member of the opposite sex.

**Homosexuality.**—Love for a member of the same sex.

**Idiogamy.**—Possibility of potency confined to only one woman.

**Incest.**—Sexual act with a near relative, or the desire for this; often unconscious.

**Introjection.**—Absorption of the environment into the personality, so that external events are reacted to as though they were internal, personal ones.

**Inversion, sexual.**—Homosexuality. May be either objective, only the sex of the love-object being changed, or subjective, where the attitude (masculine or feminine) is inverted as well.

**Korsakow's psychosis.**—A form of toxic insanity, with neuritis and peculiar memory changes, most often due to alcoholism.

**Libido.**—Sexual hunger; the mental aspect of the sexual instinct.

**Manic-depressive insanity.**—"Circular" insanity, with irregularly alternating phases of mania and melancholia.

**Masochism.**—Sexual enjoyment of mental or physical pain, usually inflicted from without; the counterpart of sadism.

- Masturbation.**—Auto-erotic gratification procured by manual manipulation, usually, but not always, of the genitals.
- Mixoscopia.**—Excitement at witnessing a sexual act.
- Narcissism.**—Self-love; a stage of development in which the auto-erotic impulses are co-ordinated, but the object is still the self and not yet another person.
- Nosology.**—The classification of diseases.
- Nosophobia.**—Dread of disease.
- Œdipus complex.**—The (usually unconscious) desire to kill the father and possess the mother.
- Onanism.**—Auto-erotism. Wrongly named, for the sin of Onan was coitus interruptus.
- Ontogenesis.**—Development of the individual.
- Oral erotism.**—Erotic excitation aroused by stimulation of the mouth or lips; characteristic of one of the two forms of the pregenital stage of development.
- Paræsthesia.**—Perverted sensation.
- Paranoia.**—A form of insanity characterised by systematic delusions.
- Paranoid dementia.**—A form of dementia præcox resembling paranoia, but differing in that the delusions are less completely systematised and there are other symptoms present of dementia præcox.
- Paraphrenia.**—The group of paranoia and dementia præcox, sometimes used to refer to the latter only.
- Phylogensis.**—Development of the race.
- Preconscious.**—Mental process of which one is not aware at a given moment, but which it is possible, more or less readily, to recall to consciousness.
- Projection.**—The ascribing to the outer world mental processes that are not recognised to be of personal origin; very characteristic of paranoia.
- Psychosis.**—Insanity.
- Rationalisation.**—The inventing of a reason for an attitude or action the motive of which is not recognised.
- Reaction-Formation.**—Development of a character trait that keeps in check and conceals another one, usually of the exactly opposite kind.
- Regression.**—Two meanings: (1) Resolution of an idea into its sensorial components instead of the usual passage onwards in the direction of action; (2) Reversion of mental life, in some respect, to that characteristic of an earlier stage of development, often an infantile one.
- Repression.**—The keeping from consciousness of mental processes that would be painful to it.
- Resistance.**—The instinctive opposition displayed towards any attempt to lay bare the unconscious; a manifestation of the repressing forces.
- Sadism.**—Sexual enjoyment at the infliction of bodily or mental pain; the counterpart of masochism.
- Sadistic conception of coitus.**—The common infantile notion that coitus consists in the male hurting the female.

**Somatic.**—Bodily.

**Sublimation.**—The deflection of the energy of a sexual impulse to a non-sexual and socially useful goal.

**Transference.**—Two meanings: (1) Displacement of affect from one idea to another; (2) Specifically displacement of an affect, either positive or negative, from one person on to the psycho-analyst.

**Trauma.**—Injury, mental or bodily.

**Unconscious.**—Two meanings: (1) All mental processes not in consciousness at a given moment; (2) Specifically those that cannot be brought into consciousness by any effort of the will or act of memory. The former includes the latter, which is the typical psycho-analytical sense, together with the preconscious.

**\*Voyeur.\***—A pervert who obtains sexual gratification from the mere act of looking; the counterpart of exhibitionism. Visual sexual curiosity.

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