

CHAPTER FIVE

The new ego psychology: Anna Freud and Heinz Hartmann

Summary

This chapter brings together two analysts (Anna Freud and Heinz Hartmann) who were perhaps the two most influential Freudian theorists from 1940–1960 and beyond. Their theoretical efforts were frequently labelled as ego psychology, since the Freudian theory that they promulgated began from Freud's structural theory (Chapter Four). Hartmann and Anna Freud were initially the main explicators of Freud's move to the structural model, and their clarification and development of the structural model help to make it the dominant theoretical influence in the USA. It is hard to understand the import of both Hartmann and Anna Freud without making some attempt to recreate the atmosphere that faced both these theorists in the mid 1930s.

Freud, at this point in time, was quite ill, and was to die in 1939. Melanie Klein was in England and having a substantial impact on the members of the British Psychoanalytic Society. European psychoanalysis was dominated by Freudian theory, but there was unease about considering Thanatos, or the death instinct (see Chapter Four), a central psychoanalytic concept. The idea of a

death instinct, while embraced by Klein, was certainly not finding strong acceptance in the Freudian community. Moreover, while Freud had proposed the structural model during the 1920s, few writers (including Freud) had shown the clinical relevance of Freud's newest theory. (Nunberg [1931] extended the idea of ego functions to include the synthetic function. Glover's paper on inexact interpretation in his book on technique [1955] to some extent utilized the new concepts embedded in the structural theory.) It remained for Hartmann and Anna Freud to begin to plumb the implications of the structural model. In 1958, Hartmann published *Ego Psychology and the Problem of Adaptation*, and Anna Freud, in 1936, *The Ego and the Mechanisms of Defence* (the English translation of which was published in 1946). These two works signalled a much fuller acceptance of the structural theory, particularly in the USA. Both of these volumes paid considerably greater attention to the conscious experiences of the patient. While the main focus of Freudian theory was the unconscious, both Anna Freud and Hartmann made the elementary but necessary point that one can only theorize about unconscious tendencies based on certain conscious experiences or actions. In the language of the structural theory, the unconscious is mediated through the ego and known through the preconscious and conscious aspects of the ego. Both Anna Freud and Hartmann also subtly but decisively rejected the idea of Thanatos, much to the disappointment of Freud. Freud, in "Analysis terminable and interminable" (1937c), noted that a number of analysts did not accept his instinct theory and he seemed clearly upset, particularly since some of the revisionists were his closest supporters.

Hartmann was concerned with the problem of adaptation as it related to evolution, and he was determined to move psychoanalysis into a theory that had commerce with the science and social sciences of his time. He did not give up the idea of instinct, but changed it in a manner that he thought fitted in with an organism that had instinctual tendencies that would produce survival of self and species. In this way, he partially returned to the concerns of the earlier Freudian drive theory (see Chapter Three). Neither he nor Anna Freud fully downplay the importance of the drives, but drives are now balanced in a view that tie together, in Hartmann's language, the "rationalism of enlightenment and the irrationalism

of the romantics" (1964a, p. 9). Hartmann maintains that analytic conceptions of health "which have developed on the basis of Freud's suggestions often proceed to assign undue prominence to one of these standpoints at the expense of the other" (*ibid.*). He states that when "biological values are acknowledged as supreme, one has approached dangerously near to that malady of the times whose nature it is to worship instinct and pour scorn on reason" (*ibid.*). While Hartmann provides the theoretical and even the meta-theoretical rationale for balancing reason, the environment, and the drives, Anna Freud offers clinical rationale for always beginning with the surface of the mind. Thus, by 1940, ego psychology had begun to achieve a balance that promised a great deal, but the stability of this balance was at least somewhat illusory. Before we approach the illusory elements of this balance, we should first encounter Anna Freud's and Hartmann's attempts to allow the structural theory to encapsulate and describe the normal and "pathological" functions of the human mind.

Anna Freud and the psychoanalytic legacy

I had thought initially of starting this chapter with the work of Heinz Hartmann, but, as I wrote about Hartmann, I began to realize the extent to which some of Hartmann's ideas resonate with, and to some extent depend on, Anna Freud's theorizing. Perhaps my decision is simply based on the historical fact that her volume was published first. At any rate, it is of historical interest that this volume was a present to her father.

Anna Freud, the daughter of Sigmund Freud, obviously holds a unique place in the history of psychoanalysis. She grew up with psychoanalysis and was the subject of one Freud's most famous papers ("A child is being beaten", 1919e), although Freud carefully explained (Ellman, 1991) that one should exercise the greatest caution in analysing friends or family since almost certainly the friendship will be lost. He was able to move around this prohibition when he treated his own daughter (Young-Breuhl, 1988). Anna was one of the analysts who pioneered child analysis and, by the late 1920s, she was in a debate with Melanie Klein that has lasted beyond the lifetime of either protagonist. We know that even after

Klein's death in 1963, the Freudians and Kleinians of Britain and, indeed, around the world, were in quiet and at times not so quiet combat. It is of interest that Coles (1992) begins his biography of Anna Freud by reporting his first view of this famous analyst. He was at Harvard in 1950 as an undergraduate and knew nothing about psychoanalysis. A friend of his told him that Anna Freud was about to give a lecture and that they should go to attend this talk. Coles asked his friend about Anna Freud and all his friend could say was that he could not explain it to Coles, but "She discovered child psychoanalysis" (1992, p. xv). This incident occurred in 1950, but, if Coles had met a Kleinian in Harvard Yard, I feel fairly certain that this hypothetical Kleinian would not have credited Anna Freud with "discovering child psychoanalysis". Coles, from the beginning of his biography to the end, pictures Anna Freud as a modest and yet heroic figure. In Elizabeth Young-Breuhl's moving biography of Anna Freud, one sees a more textured version of this eminent psychoanalyst.

There can be no doubt that Anna Freud led a life devoted to psychoanalysis, the welfare of children, and to her father Sigmund Freud. She was the youngest of his six children, born at a time (1895), when he was creating psychoanalysis. She was his child, patient, confidante, and, in many ways, the protector of her view of Freud's psychoanalysis. Anna Freud began her professional life as a schoolteacher in Vienna, and, after she became a psychoanalyst, she, with her long-time friend and companion, Dorothy Burlingham, "founded a nursery school for the poorest of the poor" (Coles, 1992, p. 16). In March of 1938, finally responding to the threat of the Nazis (to the *anschluss*), she and her father left Vienna for London. In London, she established the Hampstead Clinic, which is primarily a child treatment centre. This centre has also provided intensive clinical training for a large number of mental health workers from around the world. Her work during the Second World War, with Burlingham, afforded help for children who were traumatized or left without parents as a result of the continuous bombing of Britain by the Nazis. After the war, she worked with children from Europe who had been orphaned. For the rest of her life she was devoted to the cause of improving social and educational conditions for children in the UK, the USA, and in many other places in the world. This brief biographical note does not do justice to this rich, complex

life of Anna Freud, who, in many ways, holds a unique place in the history of psychoanalysis.

It must seem strange to a reader from this era to hear that Sigmund Freud analysed his own daughter. I have seen no explanation for this occurrence that is fully satisfactory. Coles quotes Dr Grete Bibring, who was certainly a close associate of the Freud family. She relates, "Now—it would never happen. Then—well I am not exaggerating: things were different; psychoanalysis was simply not what it has become today". Bibring goes on to relate that Anna was Sigmund's "treasured and loved companion and heir" (Coles, 1992, p. 12). There were no established analytic institutes during that era, and there were relationships between analyst and patient that today would, at the very least, be highly questionable. For example, Anna Freud maintained both an analysis and a friendship with Eric Erikson. Although I have read many descriptions of this era, it is still hard to justify some of the excesses when these same analysts were critical of others who strayed from what they thought was appropriate analytic practice. We always run the risk of judgements that are anachronistically biased, but, no matter how many descriptions of this era I encounter, this bias remains.

We should note that Anna Freud was friendly with a great number of analysts who migrated to the USA and the UK. Among these analysts was Heinz Hartmann, who, during and after his residency, was something of a teacher and friend to Anna Freud. Interestingly, what I credit as Anna Freud's influence of Hartmann can perhaps more easily be seen as Hartmann influencing Anna Freud before either of them had published their prominent volumes.

In our discussion of Anna Freud's *The Ego and the Mechanisms of Defence*, we will look at her original volume and a volume that reprinted her work (Sandler & Freud, 1983, 1985) some years later. In this reprint, there is an extensive discussion of her work. This discussion is primarily guided by Joseph Sandler, an eminent analyst and theoretician.

The Ego and the Mechanisms of Defence

In a relatively short monograph, Anna Freud is able to translate, redirect, and revise several aspects of Freud's structural theory.

Perhaps more importantly, she creates new concepts, but she modestly cloaks her new concepts within her father's theoretical writings. She begins her treatise by reminding analysts that the predominant view of her time and the previous era (1919–1930) was that the definition of psychoanalysis should be reserved for the new discoveries relating to the unconscious psychic life (A. Freud, 1946). She goes on to say that many analysts confine their "investigations exclusively to infantile phantasies carried on into adult life" (1946, p. 3). This view of psychoanalysis as depth-psychology was counteracted by Freud's essays on the new structural model (Freud, 1920g, 1923b, 1926d). Although she credits her father with this new perspective, before her volume little was done to explicate the implications of the structural model. The ego, in her interpretation of the structural model, is central to the id, the superego, and the external environment. The ego is "so to speak, the medium through which we try to get a picture of the other two (id, superego) institutions (1946, p. 6). When the id, or, more accurately, an unconscious impulse, makes an incursion into the ego, the ego "proceeds to counter-attack and to invade the territory of the id. Its (the ego's) purpose is to put the instincts permanently out of action by means of appropriate defensive manoeuvres" (1946, p. 8). This occurs because this incursion is experienced, for one or another reason, as anxiety provoking. In Freud's structural model, anxiety is a painful affect. Anxiety in controlled amounts acts as a signal to the ego that a potential danger may erupt in the form of unconscious impulses (see Chapter Four). If the ego is not able to defend against the incursion of an unconscious impulse, the ego then may well be inundated by anxiety. Anna Freud concludes that all defensive operations are intended to alleviate or prevent the ego from enduring pain. The analyst's task is to eventually understand the patient's quandary, since this quandary represents a compromise between the structures of the mind. The analyst's task is then to promote the eventual separation of the institutions to facilitate the patient's understanding of how this compromise was formed. The patient must be willing to experience psychic pain as part of the analytic process. This acceptance is a crucial step in the therapeutic process.

It may go undetected that, in this brief review, we see Anna Freud introducing the concept of compromise formation. Although

Freud had implicitly talked about a number of functions being compromise formations, Anna Freud is maintaining that the analytic task is to understand and be able to split apart the compromise formations that inevitably occur when an unconscious impulse gains expression in the ego. Her view of the analytic task is part of her new emphasis on the ego in clinical psychoanalysis. Before exploring her views on technique, it is important to see how she conceptualizes the role of defence and her classification of defence mechanisms.

Mechanisms of defence and the sources of anxiety

Freud first used the term defence in 1894 (Freud, 1894a, see Chapter One) and then later used the term repression instead of defence (Freud, 1915d). Freud subsequently reverted back to the term defence when he developed theoretical concepts that included a number of defensive operations. In *Inhibitions, Symptoms and Anxiety* (Freud, 1926d), he decided to use the term defence as a “general designation for the techniques which the ego makes use of in conflicts” (A. Freud, 1946, p. 46). He retained the word “repression” for that special method of defence which serves the function of protecting the ego from intrusions from the id. The meaning of repression involves a guarding against the word or symbolic or thing representation of the drive. In other terms, repression guards against the ideational components of an unconscious fantasy becoming conscious. More importantly, in this context, repression is an example of a defence where the anxiety is felt by the ego to come from the id. Repression is a defence against the internal danger of an unconscious fantasy achieving consciousness. In her treatise on defence, Anna Freud distinguishes between those defences where the anxiety is perceived to be internal and those defences where the anxiety is perceived to come from the external world. There are several distinctions that she makes, but the main division is between what she describes as those defences that inhibit the ego and those that restrict the ego. Since she elaborately describes ego inhibitive defences, we will begin with her understanding of this type of defence.

Ego inhibitive defences and the danger situations

The distinguishing characteristic for this type of defensive reaction is that the defence is responding to an internal (id or unconscious) impulse. There are three (or four) types of danger situations that involve ego inhibitive defences. The first involves anxiety stimulated by the superego (see Chapter Four). Thus, when there is a danger of the unconscious fantasy (instinct) reaching consciousness, there is typically anxiety stimulated by the superego. Anna Freud describes this process by relating "that some instinctual wish seeks to enter consciousness and with the help of the ego gain gratification . . . but the superego protests. The ego submits to the higher institution" and begins the process of defence. Anna Freud emphasizes that the "ego itself does not regard the impulse with which it is fighting as in the least dangerous" (1946, p. 58). The ego, in this formulation, does not fear the instincts, but, rather, fears the superego. It is the superego structure, which is made up of ideals and prohibitions, which sets the standards as to what can be allowed into consciousness. Anna Freud lists superego anxiety as the most "familiar" type of anxiety encountered in analysis.

As a second form of anxiety, Anna Freud relates that little children defend against their impulses primarily in order not to disobey parental stipulations. Accordingly, she points out that the ego would be receptive to receiving the instincts, but that its defence "against them is motivated by dread of the outside world, i.e., by objective anxiety" (*ibid.*, p. 61). She has stated that the ego will receive instincts unless guided by anxiety directed from the superego or objective anxiety, but, despite this acceptance, the ego does not provide a welcoming atmosphere for the unalloyed gratification of id impulses. It is only when the ego is not well differentiated from the id that it is truly welcoming, as distinguished from tolerant, of the id. Thus, before the superego has been consolidated, objective anxiety motivates the use of inhibitive defences. If objective anxiety has continued to be a strong source of anxiety later in life, then this an indication of a superego that has not been well internalized.

A third type of anxiety that the ego faces comes from what Anna Freud terms the strength of the instincts. She cites Robert Walder, who describes it as the danger that the ego's whole organization

may be destroyed or submerged. It is most readily observed during puberty, or at one of the danger points of a developing psychosis. Here, in this source of anxiety, quantitative factors are decisive. The question is, how much incursion of the drives can the ego tolerate before there is a feeling that its structure will be destroyed or submerged? One has to wonder whether a massive incursion of unconscious impulses into the ego is not in some way qualitatively different than the other forms of anxiety.

There is another factor that Anna Freud mentions as a source of anxiety. She mentions it in passing, and clearly she thinks it is of some importance, but not fully a source of anxiety. She posits that, when the synthetic function of the ego is disrupted, this is particularly troublesome, since the ego's ability to compromise opposing tendencies (e.g., homosexuality–heterosexuality, sadism–masochism, etc.) will be disrupted. She states that “which of the two opposing impulses is warded off or admitted . . . is determined . . . by the amount of energy with which each is cathected” (*ibid.*, p. 65). Additional energy on either side of the tendency will be disruptive. In this formulation, the organization that Wälde (1936) posits is held together by what ego psychologists call the synthetic function. Any strong input from an internal or external source will lead to higher probability of this function being disrupted. This, in turn, will negatively affect the organization of the ego. We can see from this discussion that hypothesized quantitative factors are as important for Anna Freud as they were for her father.

Naming the defences

We have gone through some of the ways that anxiety will be created in the ego which will lead to the institution of some type of ego inhibitive defence. Anna Freud, in listing defences, ostensibly lists nine, which (at that time) are very “familiar . . . and have been exhaustively described in the theoretical writings of psychoanalysis” (*ibid.*, p. 47). The defences are regression, repression, reaction-formation, isolation, undoing, projection, introjection, turning against the self, and reversal. She adds a tenth defence, which “pertains rather to the study of the normal than to that of neurosis; sublimation, or displacement of instinctual aims”. In an interesting

discussion many years later with Joseph Sandler (Sandler & Freud, 1983, 1985), she was asked why she did not include identification with the aggressor on this list (since she has a chapter on this topic), and she replied modestly that she did not know if this defence would be accepted. When asked whether there were only ten defences, she replied that she did not know, but speculated there might be as many as twenty. The defences that are listed above are those that are responding to internal impulses where the anxiety is one of the three types of anxiety (superego, objective, strength of drives) that were previously described. There is, however, another type of defence that Anna Freud describes, which is ego restrictive defences.

Here, we can remind ourselves that all defensive operations are intended to alleviate or prevent the ego from enduring pain. The ten listed defences are designed to prevent pain arising from internal sources. Anna Freud, in extending Freud's paper on denial (Freud, 1925h) looks at defensive measures that protect the person (ego) from anxieties that emanate from the environment. In her discussion, she deepens and widens his concept of denial. She does this by looking at the developmental line of the defence. She observes that the young child is in constant contact with her/his parents to provide pleasure and meet its needs. The more one is dependent on the external world the "more opportunity there is to experience pain from that quarter" (1946, p. 74). The young child may not be able to change its environment by physical means or by exerting its will. Thus, at times, there is a need for denial to at least change the child's perception of the environment. Anna Freud sees denial as both a normal developmental occurrence and, in some circumstances, as a pathological defence. Thus, the child may frequently be free "to get rid of unwelcome facts by denying them, while retaining its faculty of reality-testing" (*ibid.*, p. 89) relatively unimpaired (denial in fantasy). This denial in fantasy is a usual and reversible activity that the child indulges in while it grows large enough to deal with the environment that at times is painful, physically or psychologically. When the denial is not reversible in adulthood or later in childhood, this is what Anna Freud calls denial in word and act. Both modalities (language and action) are affected by this type of denial, and the person acts as if there is a reality that is different than the consensual reality. In some circumstances, the

person may simply avoid aspects of reality and not be able to come into contact with a part of the environment. Anna Freud emphasizes that denial is not equivalent to a phobia, since, in a phobia, while the anxiety and the defence seem to be in response to the external world, one is "really afraid of his (one's) own inner processes" (*ibid.*, p. 109). In denial, "disagreeable external impressions in the present are warded off, because they might result in the revival of similar impressions from the past" (*ibid.*). The impressions from the past are part of the person's painful environment that the person has to change, or even obliterate. Denial and avoidance are examples of what Anna Freud calls ego restrictive defences, while the other listed defences are ego inhibitive defences.

What is restrictive and what is inhibited in terms of these defences? Here, we have to extrapolate and include Anna Freud's later writings and say that when ego inhibitive defences are used some ego function is inhibited. If we take classic examples, we can say that, in so far as one uses a hysterical style where repression is utilized (repression is hypothesized to be the main defence that people with hysterical styles utilize, whereas isolation is hypothesized to be the main defence that people with obsessive-compulsive styles utilize), then functions like memory and perception will be affected. Hysterics will be less likely to utilize detail when it is necessary, and often memories will be unavailable to them, particularly if repression is used extensively. In looking at obsessive-compulsives, who are hypothesized to use isolation as a main defence, the use of this defence will prevent them from being able to experience various emotions. This will hinder their ability to understand another person's emotional states. One may say this affects their ability to experience the colours and shades of interpersonal interactions.

Ego restrictive defences affect the most important function of the ego, that is, the person's ability to reality test. It may be that the person's sense of reality is affected, and not their reality testing directly; in any case, where ego restrictive defences are utilized, then to that extent an aspect of a person's relationship to reality is in peril. One may wonder about the sharp division between ego inhibitive and restrictive defences, but Anna Freud's dichotomous conceptualization remains throughout her life. In her discussions with Sandler, she wonders why analysts confuse her concept of

restriction with the results of a phobia. In phobic reactions, the person may well avoid aspects of reality, but, to repeat her perspective, in phobias, the danger is from within (id impulses). In restrictive defences or responses, the danger is from outside, or, as Sigmund Freud stated, in neurosis, the conflict is between the ego and the id; in psychosis, the conflict is between the ego and reality. Restrictive defences do not necessarily imply psychosis, but are certainly utilized in psychotic states. Clearly, all (or even most) uses of denial do not denote psychosis. This is the case even though Anna Freud maintains that, with restrictive defences, the conflict is between the ego and reality. Although we have focused on denial as an ego restrictive defence, there are certainly more benign forms of ego restriction that involve avoidance of a reality situation.

Some definitions, and questions about defence

Looking at Anna Freud's definitions of defence is both of historical interest and, more importantly, her theorizing about defence has strongly affected the way some analysts (Busch, 1995; Gray, 1994) have thought about the treatment situation. Since defence is a central concept in psychoanalytic theory, we will look at some definitions of defence and ask several questions about how the theory is conceptualized. For example, do defence mechanisms have a singular function, or do they at times act for the purpose of defence and at other points as another type of ego activity? Are all defences unconscious, and, if not, what is a conscious defence? Anna Freud presents ego inhibitive and ego restrictive mechanisms as dichotomous concepts: are there alternative ways of conceiving of these categories, and what are the implications of considering these categories as continuous functions? These questions will guide our entry into Anna Freud's and Sandler's discussion of the concept of defence.

Interestingly, the discussion with Sandler (1985) begins with two defences, projection and introjection. Sigmund Freud posited that these two defences were important neurotic mechanisms. Although Freud did say this at one point, it is interesting to note that he also mentions the mechanism of projection in explaining some of Schreber's symptoms (Freud, 1911c). Few would argue that Schreber was

neurotic. In various ways, the discussion of introjection and, particularly, projection gives a good representation of the status of Anna Freud's theorizing about defence and extent to which her views have changed since 1936. Introjection is seen as a mechanism taking in objects, and projection a mechanism where the person rids themselves of painful affects or ideas. She and Sandler conclude that projection is a mechanism where the child (or adult) removes feelings or actions from his own self-representation and represents the unwanted entity in the external world. Sandler, in this context, asks the more general question of whether there are activities that are listed as defences that at times are not used for the purpose of defence. For example, introjection may aid the child (or infant) build their internal world and, thus, may serve a positive non-defensive role in the child's development. Anna Freud agrees that, at times, what she has classified as a defence can be used for other than defensive purposes. Anna Freud is then asked about the difference between introjection and identification. She reported that when she wrote the book, in 1936, there had been a great deal of discussion of the two terms. Anna Freud saw introjection as a taking in of object representations and Sandler suggested that identification enriches the ego as a structure by changing a person's self representation(s). He also suggested that introjection could be seen both as a mechanism important early in life (infancy) and also as a mechanism that provided the five-year-old child with a way to form the superego. He maintained, with Anna Freud's apparent agreement, that identification changes the person's self-representation, while introjection is a process that allows the child to develop object representations. The object representations may occur early in development, or during the process of forming the superego.

Although we have tentatively stated a definition for projection, in addition, Sandler and Freud agree that the term "projection" implies a reflexivity. Thus, if a person has an unconscious thought (e.g., I hate him), the thought is projected to someone where the hatred is directed at the projector; "I hate him" then is returned as "he hates me" (this is the reflexivity). Interestingly, when asked about Freud's (1911c) analysis of Schreber, where Freud utilizes the concept of projection to explain some of Schreber's delusions, Anna Freud maintained that Freud was talking about projection and a reversal. Freud posited that Schreber first projected his homosexual

loving feelings to another, but the projection was then reversed from "he loves me" to "he hates me". This reversal occurred because "very little would be accomplished by the mere projection of the homosexual wish . . . there would still be a homosexual relationship" (Sandler & Freud, 1985, p. 141). This explanation seems to run counter to a variety of clinical situations where some individuals who project their homoerotic feelings find homosexual relationships in every corner. Why this could not be true of Schreber is not explained by this comment. Although projection is seen as a main defence to externalize mental contents, Sandler maintains that there are simpler forms of projection where the person believes what they unconsciously or, at times, pre-consciously, wish to believe. For example, if a man wishes that women are attracted to him and want to make advances towards him, projection then allows him to see women as making advances towards him regardless of the actual situation. Sandler would call that a projection. Anna Freud would call that an externalization. Here, again, when pressed for answer as to why this would be an externalization rather than a projection, she answered that this was the convention of the time. Clearly, neither Anna Freud nor Sandler could see a logical reason for this distinction. Thus, what is described as both externalization and projection seems to be related concepts with no clear distinguishing characteristics. In my view, externalization implies an easier access to consciousness.

Looking at introjection and projection as prototypic defences, we can make several conclusions about the status of the theory of defence. If we look at introjection, we can say that it is conceived of as a defence but, under some conditions, may not function as a defence. Thus, introjection may help the developing child to internalize meaningful object relationships, or, at least, object representations. If we look at the concept of projection, it becomes hard, if not impossible, at this point in time to distinguish projection and externalization. Sandler says, after a long discussion, that "people will have to be given license to use projection and externalization interchangeably" (1985, p. 145). Clearly, in the discussion of projection, there is an attempt to look at the conditions where a person attempts to place an idea or affect (that is part of conflict) as part of another person. Anna Freud attempts to hold on to the idea that projection (as opposed to externalization) involves conflicts around

aggression, but, after looking at a number of examples, she cannot hold on to this discrimination. What one can say is that humans attempt to evacuate their minds of impulses that cause conflict. At times, what is projected is a wish or desire that the person wishes were true. Thus, the man who sees all women being attracted to him is putting a wish into these women and this activity changes his perception of the women around him. Is this a defence, or under what conditions would one call this a defence? Is the desire to distort reality in some way necessarily a defence? At any rate, it is hard to see the benefit of calling this an externalization as opposed to a projection. In lieu of some other types of experience or data, we might ask whether or not some of the precision attempted in these conceptualizations is purely academic in the pejorative sense of the term academic. In addition, as we look at some other defences, we might ask: are there any ego activities that are seen as purely defensive, or, in other terms, are there ego activities that are used only for the purpose of defence?

Commentary

Let us consider some examples where it is clear that the same activities that are called defensive, at other times are viewed as ego activities, where the main emphasis is not defensive. The examples we will consider are sublimation and identification with the aggressor. Sublimation, defined as "the displacement of the instinctual aim in conformity with higher social values" (*ibid.*, p. 56), clearly can be seen as having other than defensive value and purpose. Although there may be a defensive function to sublimation, the value of sublimation is placed with the transformation of instinctual tendencies towards activities that are under the control of the ego. I have changed Anna Freud's definition, for it seems clear that the term "higher social values" may differ widely in different cultures. The core meaning of the concept is that sublimation is a transformation process that allows the ego (person) to depart from the demands of the drives. It seems possible that this process can occur in a culture that another culture defines as having low social values.

Identification with the aggressor is much more frequently seen as having a purely defensive function. However, any identification

may alter the self-representation in a manner that has certain adaptive components. This type of identification may provide the child with an impetus to aggressively or assertively defend their new creations. It may be a useful trait in a competitive society. It seems that this, or any, identification may be utilized in an adaptive manner. The argument may be that this identification is at least motivated by defensive concerns, but even this argument does not take into account the child's (or adult's) possible idealization of the aggressor and a desire to be like the aggressor and have the aggressor's power.

Without continuing this listing of defences, we can say that Anna Freud is correct that many of the defences she has described at times are not utilized purely as defences. However, one may go further and say that the concept of defence has been sorely stretched, and that perhaps most of these mechanisms should be considered as normal tendencies that also have a defensive function. If the concept of compromise formation is an aspect of one's theory (as it is with Anna Freud) then almost every activity has a defensive component. Thus, one may question a good deal of the list Anna Freud has compiled and wonder if one should consider these activities (ego activities, in her terms) as defence mechanisms. This discussion, or question, is more than academic, since, if one has a clear concept of defence, it may be that defence is what is analysed first or, in some ideas about technique, defence is analysed virtually exclusively. If one recognizes that a defensive action serves many functions, then it may be that one might question whether one should necessarily slant one's treatment concepts towards the analysis of defence. If we look at the array of defences that Anna Freud has proposed, it seems that only isolation, repression, and denial are pure defences.

Having stated this, we can note that Anna Freud's distinction between denial in fantasy and denial in word and deed seems to belie the previous statement. During childhood, there is a clear adaptive consequence of denial in fantasy. This type of denial bolsters the child's self esteem and prevents the environment from becoming overwhelming for the child. However, even though there is an adaptive aspect of denial, the function of denial is always the same, to alter a feature of reality. Thus, in the lexicon I am proposing, denial is a pure defence. If we view the concept of repression,

we reach the same conclusion. Repression is a defence that features a separation between the ideational and affective component of an unconscious representation. The separation is then followed by a counter (anti-cathexis) against the idea becoming conscious. To put this process in other terms, it is an unconscious activity by the ego to inhibit or block an unwanted idea from becoming conscious. There is no other meaning to repression than this; even if one maintains that, at times, it is adaptive to utilize defensive processes, the purpose is always the same: to prevent an unconscious element from reaching consciousness. In a similar manner, isolation involves a separation between the idea and the affect, but, in the case of isolation, the affect is inhibited while the ideational component is available to the conscious aspects of the ego. It seems that, of all the defences that Anna Freud has listed, only denial, repression, and isolation are used purely for defensive purposes. Denial leads to a restriction of the ego while repression and isolation lead to an inhibition of the ego. Repression and isolation are unconscious defences and the effects of these defences can only be detected either when the defence fails, or when there is some hypothesized inhibition of an ego function.

If all we are left with are denial, repression, and isolation, then Anna Freud becomes a type of botanist of defensive tendencies and perhaps this is why she considers it possible that there may be as many as twenty (or more) defences. In other terms, if each defensive tendency is called a defence mechanism, then the theoretical rationale is diluted and one has to be content with categorizing defensive tendencies. This focus on defence takes one away from analysing the person, and analysing the person is something that she states is important to her. To gain a fuller appreciation of this, we need to discuss some of her ideas about psychoanalytic treatment.

Psychoanalytic treatment and a brief history of psychoanalysis

Anna Freud, in reviewing the history of psychoanalysis, notes that some views of psychoanalysis held that the "term should be reserved for the new discoveries relating to the unconscious psychic life, i.e. the study of repressed instinctual impulses, affects

and phantasies" (1946, p. 3). She counters this assertion by maintaining that "From the beginning analysis, as a therapeutic method, was concerned with the ego and its aberrations" (*ibid.*, p. 4). The aim, in her view, was always the same: "the restoration of the ego to its integrity" (*ibid.*). This is an interesting view, since Freud did not have a full concept of the ego until the 1920s but, nevertheless, before the 1920s used the term to denote the self or the entire person. In this statement, Anna Freud is stipulating that it was always her father's intention to balance the emphasis of unconscious fantasy with the patient's conscious concerns. She typically underestimates that her concerns are a new direction for analysts. She writes as if her emphasis was always her father's emphasis.

Despite her assertion, she briefly reviews the history of psychoanalytic technique and begins with a pre-analytic method, hypnosis. In her view, the hypnotist did not want to engage the ego, but, rather, to bypass ego functions to get at unconscious memories. Her belief was that, with this method, when the patient was away from the physician the ego revolted and reinstated the old symptoms and conflicts. The results of hypnosis were seen as temporary, since the ego of the patient was not recruited as part of the treatment situation. There was a mechanical attempt to extirpate the pathogenic memories.

Interestingly, after stating why analysis moved away from hypnosis, Anna Freud then takes up what some analysts call the fundamental rule of psychoanalysis, free association. In some ways, it has gone unrecognized how Anna Freud has looked at the limitations of free association. She states that the rule of free association was again an attempt to bypass the ego and concentrate only on the id, or id derivatives that appear in the patient's associations. She stipulates that when the analyst tries to impose this rule, he/she asks the patient to be passive in judging what comes to mind and only report (by verbalizing) what appears in consciousness. She cautions the analyst against trying to force the patient to free associate, since, even if the patient complies, this will make a treatment a one-sided affair. Even if were possible to convince the patient to do this, she contends that this would be little better than the technique of hypnosis. She tells us that "Fortunately for analysis such docility in the patient is in practice impossible" (*ibid.*, p.13). At some point, the patient will begin to employ their characteristic defences

against the intrusion of unconscious ideas that would be anxiety-provoking. Anna Freud then notes that this is what Freud considered to be resistances to the analytic method. She points out that the "resistances" of the patient are also unconscious, part of the unconscious aspects of the ego. Having noted this, she begins to describe why it is at least as important to analyse the unconscious aspects of the ego as it is to analyse the unconscious impulses of the id.

One of the first tasks of the analyst (perhaps the first from her perspective) is to recognize the type of defence mechanism the patient has employed and to begin to bring this activity firmly into the analysis. When the analyst, for example, can "bring that which has been isolated back into its true context" (*ibid.*, p. 15), then the analyst can re-establish severed connections between the ego and the id. In other terms, the analysis of defence allows the ego to tolerate id derivatives without (one hopes) the derivatives gaining control of the ego. We might pause a moment and discuss what is meant by gaining control of the ego. Both Freud and Anna Freud assumed that when defended against unconscious impulses entered consciousness (or the conscious aspect of the ego) there would be an attempt for these impulses to gain gratification. Gratification occurs in partial form simply by the impulses gaining consciousness, but if the person acts out the impulse in reality, this is a more significant and fuller gratification. If there is a defended against wish to humiliate one's father, the analytic attempt is to keep the wish, once conscious, in the analytic situation. The wish is then enacted or discussed in the analytic situation and is subject to analysis and transformation. If the wish gained control of the ego, this would mean that the patient felt compelled to enact this wish, regardless of the consequences to themselves or their father.

Anna Freud, after discussing the limitations of free association, points out that the dream interpretation, or the exclusive discussion of dreams, is similar conceptually to the concept of free association. Here, too, the patient is in a relatively passive situation, having received a dream during a regressed state (sleep) and reported it back to the analyst. The interpretation of the dream (if one is able to) helps "in the investigation of the id", but is not a full form of the new analysis. Interpreting both symbols and slips of the tongue (parapraxes) is considered to be comparable to free associations. Direct interpretation of parapraxes or symbols bypass the ego and,

as such, are like the older forms of treatment (hypnosis and the pressure technique). Clearly, in making these comparisons, Anna Freud is attempting to get the analytic world to concentrate on a fuller version of the patient's productions than she feels has been the case in the past. Thus, she overstates the limitations of each of the activities she discusses, since she wants to put the analyst into a situation where he/she is looking at the patient's transference states. There are obviously many ways that an analyst might approach the discussion of a dream, but Anna Freud is responding to the way analysts of her time approached the issue of dream interpretation. In the same way, she is responding to the way Freud approached free association in a well-known case, the Rat Man (Freud, 1909d).

Although Freud wrote about transference in a number of papers and explicitly in three papers on transference, Anna Freud begins where he left off and assumes that her reader is familiar with Freud's papers on transference. She says that the analysis of libidinal transference states provides information about the patient's past and, thus, helps fill an amnesic gap in the patient's past. This, however, assists us "in the observation of the id only" (1946, p. 19). While this may seem like a minor statement, here, in a few pages, she radically changes the direction of transference analyses. For Freud, transference of erotic impulses was the crucial aspect of analytic treatment. The erotic transference fuelled the repetitions that occurred and filled in the analysis of the past, so that one could reconstruct the patient's past. While this is of some interest, Anna Freud considers this only one factor in analysis, and not, by any means, the most important factor. This is a large shift from her father's emphasis, and this shift is subtly stated so that it will not arouse anxieties among the older analysts.

In Anna Freud's next category, the analysis of transference of defence, she posits that this is the crucial aspect of analysis. The repetition compulsion, she states, does not only extend "to former id-impulses but equally to former defensive measures against the instincts" (*ibid.*, p. 20). She chides analysts not to say that the patients are "pulling the analyst's leg" when the analyst recognizes a defensive stance on the part of the patient. Thus, a patient may say that she/he cannot talk about a given topic and Anna Freud warns against putting pressure upon the patient to be candid, to

expose the id-impulse which lies hidden under the defence as manifested in the transference. The patient should be considered to be candid when they are talking about an issue in a way that is available to him/her. In my terminology, she is asking the analyst to trust the patient and to trust the analytic process. If one can analyse the patient's defences we can

fill in a gap in the patient's memory of his instinctual life [and] . . . we acquire information which completes and fills in the gaps in the history of his ego-development or, to put it another way, the history of the transformations through which his instincts have passed. [*ibid.*, p. 21]

Reconstruction is still important to Anna Freud, but it is reconstruction of the ego and the modifications of the ego that have occurred as a result of conflict.

She relates that analysis and reconstruction of the libidinal transference is normally relieving to a patient. The analyst is, in effect, saying, "it is not me that you are in love with, but, rather, you are expressing a past love in the transference". This type of analysis allows the patient to eliminate a potentially embarrassing state. Frequently, the libidinal transference itself is not ego syntonic, and the patient is pleased to be rid of it. This is not the case with defences, since usually they are ego syntonic. Anna Freud tells us that with defence analysis we cannot count on the co-operation of the patient. She states, "Whenever the interpretation touches on the unknown elements of the ego, its activities in the past, that ego is wholly opposed to the work of analysis" (*ibid.*, p. 22). Anna Freud, reluctantly following Reich (1933), calls this analysis "character analysis". (She writes that this type of analysis is "commonly described by the not very felicitous term character analysis" [*ibid.*].) She is willing to use this term because it implies a characteristic response to anxiety that is part of, and accepted by (syntonic to), the ego. We can now substitute Freud's early statement when he tells us that analysing the transference is the most difficult part of the treatment (Freud, 1905e). Character analysis (in the transference) is the most difficult part of the analysis. For Anna Freud, it is also the most important aspect of the analysis.

We leave Anna Freud at this point, but we will return to her work later in the volume when we discuss the issue of defence

analysis. Of course, we have only touched on Anna Freud's vast contributions, and at the end of this chapter we will briefly touch on her concept of developmental lines.

Heinz Hartmann

Jacob Arlow wrote,

The passing of Heinz Hartmann on May 17, 1970 brought to a close one of the most influential and significant careers in the history of psychoanalysis. For more than two decades Hartmann was without question the outstanding theoretician of psychoanalysis and its leading intellectual figure. His work centered on ego psychology. He saw it as the integrating element of psychoanalytic theory and practice, as well as the basis for a theory of general psychology. [1970, p. 620]

Although, clearly, Arlow was presenting a point of view that was based on his own allegiance to the classical position, there is no question that during the time period that he cites Hartmann and Anna Freud were two of the leading figures in psychoanalysis. Interestingly, while Fairbairn is perhaps better known today than in his lifetime, Hartmann's fate can be viewed as the mirror image of Fairbairn's. Hartmann is rarely referred to today, except as a historical figure or to show that his concepts are outdated. Hartmann, like Freud, is often criticized for his use of the concept of psychic energy. Hartmann and his contemporary, David Rapaport, attempted to systematize psychoanalysis. Unfortunately, they took both the concept of psychic energy and the critics of this concept quite seriously. Hartmann felt that Freud had posited several sources of psychic energy, and Hartmann accepted this view and added several other psychic energy concepts. While Hartmann's theories were certainly tied to the concept of psychic energy, the main impetus of his theorizing was an attempt to create both a general psychology and a psychology that tied psychoanalytic theory to environmental interactions.

Hartmann seemed uniquely qualified to integrate psychoanalytic theory and practice into appropriate correlation with each other and with the findings of related disciplines. Hartmann's

family on his father's side was a blend of ancestors who were both prominent scientists and social scientists. His father was a well-known academic and historian who later took the post of Austrian ambassador to Germany. The Hartmann household has been described (personal communication) as being an intellectual foundry able to produce the finest of intellects, and, clearly, Heinz Hartmann was a prime product. He was interested in literature, philosophy, and the sciences and social sciences of his time. He was a student of Max Weber, and, through Weber, met with many of the prominent European intellectuals. In the background of this intellectual mixture was the Vienna Circle, whose ideas of verifiability were a continuation of Mach and, later, Bridgeman. Their views on how to operationalize concepts and which concepts were useful would have excluded a large portion of Freudian theory. Hartmann was attempting to answer the Vienna Circle to keep some of the internal language of Freud's theory alive and vibrant. Clearly, he recognized that an American psychiatrist (Sullivan) had been strongly influenced by the logical positivists. He also recognized, as did Anna Freud, that the challenges to Freudian psychoanalytic theory were multiplying rather than abating. Freud had fought back against Adler, Jung, and Rank from 1910 through the 1920s, but now, in the USA, Sullivan, and from Germany (to the USA), Horney and Fromm, were all presenting views in opposition to Freudian drive theory. Moreover, from Hartmann's perspective, the culturalists and Sullivan were leaving or downplaying the centrality of unconscious fantasy. Interestingly, Freudian critics of Hartmann were to see him in a similar light and felt that he and, to lesser extent, Anna Freud were in the process of reducing the theoretical and clinical importance of unconscious fantasy.

Early considerations

Schafer remarks, in assessing Hartmann's contributions (1970, 1976), that it seemed evident that Hartmann was keenly aware of the lack of elegance in psychoanalytic theory as it stood at the end of Freud's life. Schafer describes how Hartmann attempted to systematize a psychoanalytic set of propositions that were in a state of disarray. Freud's postulates were not set in any type of hierarchical

order, there were a variety of definitions that were used for the same concept, and these definitions, in turn, were not consistently related to one another. Given the enormous task of coherently arranging these concepts, Schafer finds it striking that Hartmann did not detail his own contributions, nor did he highlight his differences with Freud. Perhaps it is equally striking that Schafer is noting this, for, at that point in time, many psychoanalytic articles (in the USA) would start off with an almost compulsory reference to Freud and would try to show how their contribution was related to a Freudian idea. This, of course, was part of the ritual of showing that indeed one was a *bona fide* psychoanalyst. Schafer was part of a group that sprang from Rapaport and was beginning to critique psychoanalysis in a manner that was as yet unknown in the USA. (Although certainly Sullivan and Fromm were critics of Freudian theory, they were not critics from within the Freudian circle.) In fact, Schafer begins his article (1970) by both noting the open-mindedness of Hartmann's thought and the unfortunate trend to make ego psychology the new orthodoxy.

While considered to be quite orthodox, Hartmann, in some respects, could be considered to be revolutionary, if not in tone, frequently in substance. As early as 1927, Hartmann advocated a scientific approach to psychoanalysis. His concept of scientific approach might be questioned, but certainly he and Kris consistently advocated the study of developmental processes as a method of validating and providing changes in psychoanalytic conceptions. Later, Hartmann stated that all hypotheses, including the hypothesis about instincts, "must be checked . . . as to consistency and conformity with whatever factual knowledge we have in the field with which we are dealing" (1948, p. 370). This is a very different point of view than Freud evinced, since Freud was sceptical about whether other sciences could add to the knowledge accumulated by psychoanalysis. He was particularly sceptical about psychological research adding to, or being capable of verifying, psychoanalytic propositions. Clearly, Hartmann wanted to require psychoanalytic theory to be explanatory (and not merely descriptive), and at some point the theory should produce statements that were capable of being empirically verified. This strong position was never realized.

As Schafer has noted, it may be that the revolutionary aspects of Hartmann's positions were not well noted, since his approach was

always steeped in the history of Freud's writings. Hartmann starts off his 1956 essay on the development of the concept of the ego in Freud's work by assuring the reader that, for the analyst, Freud's thought continues to be very much alive, "indeed an essential element" (1964b, p. 268) in their everyday clinical work. He initially gives the impression that Freudian theory had achieved a substantial degree of systematization and verification. Then, for the rest of the essay, he notes that Freud rarely systematized his thoughts but, rather, went on to new concepts without fully integrating the new with the old. Despite this statement, he continually looks for suggestions in Freud's writings that would contain the elements of, or the precursors to, systematization. Both Hartmann and Kris find that the concept of the ego lays the groundwork for what Kris called "the new environmentalism in psychoanalysis" (Hartmann, 1964b, p. 292). Hartmann also sees Freud's volume on anxiety (*Inhibitions, Symptoms and Anxiety*, 1926d) as the "tracing of internal to external danger situations" (1964b, p. 292). This interaction between the environment and an internal sense of danger is seen as a new development for Freud and a way to differentiate the dependency of the ego on the id and superego and move ego interests towards the external world. In this new formulation, the ego is clearly the seat of anxiety and the seat of all emotions. Hartmann sees Freud as maintaining that "thought processes and ego processes in general are working not with instinctual energy, but with a modified form of energy, called sublimated or desexualized" (*ibid.*, p. 293). Hartmann, having changed Freud's emphasis, then states, "This seems to me a rather radical re-evaluation of the economic role of the ego" (*ibid.*). Similarly, Hartmann sees Freud's new concept of the ego as leading him to conceptualize "the normal as well as the pathological individual" (*ibid.*). Freud's main vector was clearly communicated to the analytic community in that he was interested in describing a patient's mind from his theory of the interior. There is no question that his ideas about the continuity of human experience could be translated into his interest in the normal. It is Hartmann who is trying to redirect the community towards describing the normal as well as the pathological. Hartmann points out that, late in his life, Freud was still modifying his theory of the ego. For example, in 1937c, Freud posited that there are inherited characteristics of the ego and, in 1940a, maintained that there are

self-preservative tendencies in the ego but not in the id. Hartmann states that this “clarifies also the difference between the id of the human being and the instincts of the animals” (*ibid.*, p. 295). Again, Hartmann takes a possible suggestion of Freud’s and makes it part of a new theory. Hartmann places human self-preservative tendencies as part of adaptive tendencies in the ego. This, then, keeps the id as being a seat of pleasure and of irrational tendencies. This is in line with one view of Freud’s theoretical concepts.

Whether one agrees with Hartmann’s discussion of Freud or not, it is clear that his explication of these concepts puts Freud in line with Hartmann’s emphasis on the biological basis of the ego and the evolutionary role of adaptation in human beings. In emphasis, Hartmann, and Hartmann, Kris, and Lowenstein (Kris and Lowenstein being frequent collaborators of Hartmann), attempted to keep psychoanalysis aligned with a biological approach. While the ego has biological roots, its development is formed by social or environmental conditions as well. From his earliest work, Hartmann thought of the ego as the centre of an individual’s functioning. A crucial function of the ego is the synthesizing function, which provides organization and integration for planning, thought, and most cognitive tasks. The synthetic function of the ego allows for smoother adaptation for the individual. The biological basis of the ego is, in Hartmann’s view, as firm as the biological basis of the drives was for Freud, and the ego has independent energy from birth onward. The ego may still harness energy derived from the id, but ego functions such as perception and motility are present from birth and have energy that is independent of the drives (or id). While I have stated that Hartmann’s emphasis on reality and survival mechanisms is reminiscent of Freud’s first drive theory (see Chapter Three), Hartmann is specifically attempting to correct the views that Freud put forth (Freud, 1939a).

The evolutionary slant of Hartmann’s work has been under-emphasized, and his views of survival mechanisms are extremely important in how he conceives of early development. He has influenced, and been influenced by, Spitz, whose hospitalism studies powerfully emphasize the role of human contact in early development. It is not well known that Spitz derived his predictions from Freud’s later instinct theory. Despite these derivations, Spitz conceived of the results from his New York (1945, 1957) and Denver

studies in terms of the ego psychology that Hartmann was developing. For Hartmann, Spitz's studies emphasized the importance of early infant-mother contact in terms of the survival of the infant. Thus, the dependency of the human infant had to meet with a certain type of mothering to survive physically and psychologically.

Some prominent critics

Part of the difficulties in presenting Hartmann's work is that the stereotypes of his work are so ingrained in almost all psychoanalytic theorists that it is difficult to detail his work without wanting to fall back into a characteristic stance put forth by other authors. Authors as divergent as Bergmann (2000) and Greenberg and Mitchell (1983) interestingly overlap in their critiques of Hartmann. Certainly, Bergmann is usually more sympathetic, but, writing at a later time, one might argue that his is the more devastating critique since his volume belatedly announced the end of the Hartmann era. Before going over some of Hartmann's basic concepts, I have decided to feature an essay of Hartmann's where he is using some of his basic concepts to explain aspects of the onset and the underlying causes of schizophrenia. In my view, understanding this essay helps in seeing another side of the Hartmann legacy.

The metapsychology of schizophrenia

Hartmann looks at the role of infant-mother interactions in several of his papers. but it is in "Contributions to the metapsychology of schizophrenia" (1953) that he shows how his theory might be clinically relevant.

Although this paper is about a clinical issue, Hartmann's tone in this paper is similar to the rest of his work. Even the title, which includes the term "metapsychology", might almost warn a reader of the theoretical complexity of the paper. In the course of the paper, Hartmann references numerous figures who have written on schizophrenia, some of whom are psychoanalysts, and many who were not analysts. Piaget and Morris are cited, and some of Piaget's ideas are incorporated into Hartmann's hypothesis about the aetiology of

schizophrenia. We can spend a reasonable amount of time on Hartmann's characteristic erudition, but what may be more notable in this essay is that he mentions two of the prominent Kleinians, who were considered by some Freudians as the enemy. Embedded in Klein's theory is a psychotic position (paranoid-schizoid position) and Hartmann mentions her work as part of the increasing number of childhood analysts who are interested in studying childhood psychoses. Rosenfeld and Klein are also mentioned, in terms of the self-destructiveness seen in schizophrenic patients. Both Klein (see Chapters Six and Eight) and Rosenfeld (1952) talk about the splitting of the ego as a result of self-destructive impulses. Hartmann's attempts to be inclusive are more a result of proper academic discipline rather than a powerful desire to integrate other psychoanalytic viewpoints with his ego psychological approach. Despite this, his knowledge of other viewpoints and his intellectual integrity lead him to be more inclusive than he may have fully acknowledged or realized.

Still, in discussing psychosis, Hartmann begins with Freud's distinction that, with neurotic patients, conflicts are seen as occurring intrapsychically between the ego and the id. In psychosis, the conflict is conceived of as occurring between the ego and reality. For Freud, the main factor in psychosis is the strength of the drives, while Hartmann gently but decisively moves the locus of difficulty to the ego as the mediator between the drives and reality. Hartmann particularly focuses on the aspects of the ego that are involved in what Freud called counter-cathexis, or defence. Hartmann, in making this point, reviews Nunberg's statement that loss of object libido destroys repressions and Freud's observation that schizophrenics show a greater reactivity to a variety of stress situations. While Hartmann seemingly accepts these statements, his focus on defence sharpens when he points out that schizophrenics use what he terms primitive defences. The defences that he describes as primitive, both he and Anna Freud posit as being intermittent or not consistently providing a constant counter-cathexis. Put in other terms, repression is a defence that, when working efficiently, is constantly providing a defensive function; primitive defences are utilized intermittently and in response to an external situation that is perceived to be dangerous. For example, projection is a defence that locates an anxiety-provoking idea in another person or

situation. A projected idea is too anxiety provoking to be contained internally, and so it is perceived as an external threat or fear. In Freud's first dramatic use of projection, he saw Schreber (Freud, 1911c) as projecting his homosexual ideas on to other figures whom he then feared would rape him and turn him into a woman. What Hartmann terms primitive defences usually alter a person's ability to reality test. This constitutes a severe difficulty, particularly if these defences are a person's primary defences.

For Hartmann, the type of defensive processes employed by schizophrenics is crucial to his understanding of the onset and continuation of the schizophrenic process. His views on defence are intertwined with the concept of neutralization and his stance on the role of aggression in defence. His views on neutralization, while deriving from Freud's view of sublimation, differ in several important ways. Freud thought of Eros, or sexuality, as providing the impetus for sublimation, while Hartmann sees either the sexual or aggressive drives as being able to be neutralized. In Freud's conceptualization of sublimation, the drive was converted and controlled by the ego; the drive is thought of as providing the impetus for a given activity. Thus, although the sexual drive was transformed in sublimation, the activity was thought to be recognizable as a derivative of the drive. In Hartmann's conception of neutralization, the drive is totally converted and can be used by the ego (person) for any ego activity. There is little or no hint of the drive in the neutralized energy. One of the questions Hartmann poses in his view of schizophrenia is the extent to which the drives have been de-neutralized during the onset of schizophrenia.

Freud's view stated that during the schizophrenic process there was a movement from object ties to a state of early narcissism. While Hartmann will utilize this view, his conceptualization features the role of aggression in understanding the aetiology of schizophrenia. It is the aggressive drive that fuels the process of defence and it is the breakdown of defensive processes that floods the schizophrenic with aggressive energy. Moreover, it is the early failure to convert the aggressive drive into neutralized energy that renders an individual susceptible to breakdown. Defence, in this hypothesis, is literally seen as a counter-cathexis and the counter aspect is seen as an aggressive or assertive activity by the ego to control or inhibit the expression of unconscious representations. (If

one were to look at the logic of Hartmann's concepts, the idea of a counter-cathexis that has aggressive overtones is somewhat at odds with the idea of energy that is truly neutral.) Hartmann, in describing the interactions of people who are susceptible to breakdown, pictures a cycle of recurring aggression. He posits a person who both sees the world as full of aggression and who themselves behave in an aggressive manner (either overtly or covertly). This individual, seeing aggression surrounding him/her, increases his/her own aggressive tendencies and thereby increases the probability of an aggressive response from other individuals. This circular interaction is described by Hartmann on yet another level, as he asserts that this aggressive interaction has the effect of making internal structures (like the superego) harsher and more critical. The individual is then faced not only with external aggression, but internal aggression and self-punitive assaults. The superego in vulnerable individuals is seen as a structure that is inconsistent and harsh and punitive. Given that the person has not a fully developed superego structure, it is personified and replete with voices which are not appropriately de-personified or internalized as gently prohibitive or ideal structures. (When using the term "personified", it is easiest to think of a young child who, to control himself, has to picture his parents saying no in order to stop or inhibit a behaviour. De-personification is the concept of the child internalizing a value that gradually becomes his own without the person of the parent attached to the value.) Whether one wants to call what Hartmann is describing a superego or a precursor to superego development is a terminological question that we will not discuss. However, in describing schizophrenia, Hartmann reminds the reader that "Freud's hypothesis [was] that free aggression increases the proclivity for conflict". In the type of aggressive sequence that Hartmann describes, there is a high probability of aggression becoming de-neutralized, and this aggression "may be interiorized and absorbed by the superego" (1953, p. 198).

Clearly, what Hartmann is describing is not a temporary condition, but a long term tendency. Thus, the onset of schizophrenia depends either on a particular intense interaction or traumatic life event, or factors that he alludes to but does not describe (physiological or neurophysiological changes). The key factor, from Hartmann's perspective, is the de-neutralization of aggression that

would occur in a susceptible individual following an incident that stirred aggressive responses. We can break into this cycle at a number of points, but if we start with an incident that stirs an aggressive response in a susceptible individual, we can say that this will lead to some freeing of aggressive energy (de-neutralization) which will increase the probability of an aggressive response from the individual and, in turn, increase the probability of an aggressive response from the environment (people in contact with the susceptible individual). This will, in turn, increase the internal aggressive energy, which may be taken up by the superego and lead to a high probability of the person facing internal and external aggression. Since the de-neutralization that occurs interferes with the more stable defences (repression, for example), the person will be much more likely to utilize or turn more towards what Hartmann terms primitive defences. These defences are what Anna Freud describes as ego restrictive defences (projection, denial, etc.).

Interestingly, some research has looked at Hartmann's hypothesis of the importance of aggression (Silverman, 1967) and shown that the subliminal introduction of an aggressive stimulus increases the severity of symptoms in a schizophrenic population. While this research is by no means definitive, it is an interesting derivation from Hartmann's theoretical views on schizophrenia. Part of the reason to look at this particular essay of Hartmann's is that he shows us how he uses some of his concepts, such as neutralization and the superego, with respect to this clinical entity. Moreover, he tells us about his assumptions about the role of genetic predispositions and neutralization with respect to vulnerability to schizophrenia. He tells us that "these countercathetic structures, factors like postponement of discharge, but also what Freud called the 'protective barrier against stimuli' are probably among the genetic precursors of later defense mechanisms" (1953, p. 204). He cites Bergman and Escalona's (1949) study and their theoretical concept of a thin protective barrier in an infant who cannot adapt to a constant stimulus. They hypothesized, and eventually presented some data that indicated that a thin protective barrier was a factor in making some young children (and infants) overly sensitive to external stimuli. (Freud's view of the protective barrier involved the idea that the cortex provided a shield against intense stimuli. This prevented very intense stimuli from causing trauma. Escalona, who

was a well-known researcher in psychoanalytic circles, used this concept and tried to show that some infants had a thin protective barrier. Her research, while illustrative, was never statistically convincing.) Hartmann assumes that to the extent that one manifests traits such as difficulties in postponing discharge or being extremely sensitive to external stimuli, this will effect the stability of defensive organization. Interestingly, he also provides what he calls an object relations hypothesis with respect to the development of defensive organization.

I said before that full object relations . . . presuppose, as on contribution from the ego, some degree of neutralization of libidinal as well as aggressive energy which secures constancy of the objects independent of the need situation. [1953, p. 199]

Thus, the mother must be available in a consistent manner across the infant's states and, in particular, must be perceived by the infant as comforting when the infant is not inundated by an extreme state (crying, hunger, pain, etc.). It is his view that the mother will not be easily perceived as a separate object unless the infant can view her in quiet times as well as during times of strong need. The mother, in this formulation, helps the infant begin the neutralization process and helps to make energy available for defence and other ego functions.

Some basic issues and concepts

Before going into concepts that we have not yet covered, it is important to note that, in Hartmann's view of neutralization, he specifically rejects the concept of Thanatos, or the death instinct. Freud thought that the death instinct was brought under control when it fused with Eros (the life, or sexual, instinct). Hartmann rejected the theory of Eros and Thanatos and, instead, substituted sex and aggression in his dual drive theory. He also maintained that fusion of drives was not necessary for the transformation of aggression. Hartmann, Kris, and Lowenstein (1949) assert that not only can the sexual drive be transformed (desexualized), but the aggressive drive can be transformed (deaggressivized). Both of these processes

were conceived of as neutralization. Thus, the aggressive drive not only supplanted Thanatos, but it was seen as undergoing transformations that were not present in Freudian theory.

"The average expectable environment" is a phrase from Hartmann that, for a time, was widely quoted and taken as an important condition for normal development. If the average expectable environment is present, one would anticipate normal maturational and developmental growth. In comparing Winnicott's concept of the good enough mother with Hartmann's concept of the average expectable environment, Greenberg and Mitchell state that, for Hartmann, "The emphasis is placed not on a particular quality of responsiveness from the parents, but on characteristics that are innate in man's psychological (and biological) endowment" (1983, p. 249). Winnicott's view of the mother and her providing a "facilitating environment" is specifically "human", while Hartmann's average expectable environment "is a generally biological concept" (*ibid.*, p. 250).

If we compare these quotes with Hartmann's views on the aetiology and onset of schizophrenia, they are somewhat different than one would expect from a biological theorist. One must remember that, in virtually every era (including the present one), schizophrenia has been conceived of as a disorder with strong biological and genetic roots. Hartmann acknowledges this, but, in his essay, his prime concern is, interestingly, an aspect of the experience of the individual. In his view, they are flooded by aggressive ideation (I am for a moment moving away from the energetic language of Hartmann). On an interpersonal level, the person is experiencing the world as a dangerous place full of aggression. They have not internalized identifications that are helpful guidelines for the do's and don'ts of the world (in other terms, a stable superego structure). Rather, they have internalized harsh images that are accusatory, punishing, and at times are experienced as threatening the person's existence. This adds to the person's perception of aggression surrounding them, internally and externally. The cycle of aggression that Hartmann posits is one that Kleinians would explain in terms of projective identification. The person projects his aggression into the world and the world returns his aggression, and he then represents the world as an aggressive, life-threatening place. The environment for adult schizophrenics is created by a

horrifying internal world that is threatening and terrifying. This world, according to Hartmann, was created by several interdigitating factors. However, before we recount his view of early development, we should note that the onset of schizophrenia is generally noted by either a precipitous shift in environmental conditions or an extreme biological shift, such as the onset of adolescence.

Hartmann's views on the causative factors in schizophrenia blend concepts such as the protective barrier and object relations. If we put this in Winnicottian terms, we can say that it is hard to be a good enough mother to an infant that feels easily threatened, or, at least, disrupted by stimulation that most other infants find acceptable or even pleasurable. Good enough mothering would require an auxiliary ego that provides the infant with more than usual protection. The mother would have to gird herself to the experience that some of what she provides might be felt as aversive by the infant. Her response to this rejection has to be supportive rather than be experienced as a rejection by her infant. Thus, the mother of this type of infant has to be resilient and able withstand what many mothers might experience as an injury (it is hard to feel that what I am providing as a parent is being rejected). Hartmann sees the infant as needing a consistent mother throughout the day, not only at times of need. We need to remember that times of quiet wakefulness are extremely important in this conceptualization. The mother must be perceived during periods where the infant is not besieged by either internal or external stimulation. If this does not happen, then the infant's beginning ability to form internal regulatory channels or controls, defences being one type of internal control, will be impaired. Here, I am maintaining that even in a syndrome like schizophrenia, Hartmann has a strong object relations perspective. Part of the difficulty in reading Hartmann is that he is encased in a language of energies. This is why I have deliberately stated some of his concepts in this paragraph without reference to Freudian, or, rather, Hartmannian psychoanalytic language. To return to Greenberg and Mitchell, they state that Hartmann "holds at birth the most essential part of the new environment is the infant's mother" (1983, p. 251). However, in their view, the mother, for Hartmann, is only important in terms of her controlling "the physical properties of the environment" (*ibid.*). Contrary to this characterization is Hartmann's view that one of the aspects of good

enough mothering is how the infant is tended at times when there is no strong need state. I have restated Hartmann's views on schizophrenia to show that his concepts can be utilized with or without reference to biology or the energetic language that he uses.

Unfortunately, most of Hartmann's writings have little to do with the type of specificity I have outlined from the "Meta-psychology of schizophrenia". Usually, Hartmann is trying subtly to move the Freudian opus in directions that he thinks will provide psychoanalysis with the concepts that will make it a general psychology. Hartmann, like Greenberg and Mitchell, question Freud's theoretical ideas about the development of the reality principle. They assert that Freud posited that the developing of the reality principle delays immediate pleasures so that more lasting pleasures can be obtained. Greenberg and Mitchell conclude that, for Freud, "Reality remains outside the pleasure sequence . . . [and] Object relations a fortiori remain at the periphery of the theory of motivation" (*ibid.*, p. 252). Hartmann is more circumspect, and makes a distinction between ontogenetic and phylogenetic considerations in viewing his version of Freud's concepts.

Freud assumed, as do the ethologists, that in animals there are instincts that ensure that the animal adapts to its environment, or help the animal to do so. Although this assumption was similar, Freud's view of instinct is different than the view of ethologists, who see instincts as either fixed action patterns or derivatives of fixed action patterns. Freud assumed that reality came from the pleasure attendant on dealing with reality. Thus, the shift from the pleasure principle to the reality principle was based on the accrual of pleasure from reality. Hartmann posited that there were no instinctual drives in humans that guarantee adaptation. For Hartmann it is the ego (and principles of regulation) that has survival value. He reasoned that "the reality principle . . . would historically precede and hierarchically outrank the pleasure principle" (1958, p. 44). Hartmann's theory changes the Freudian notion of the development of reality testing. In addition the importance of the pleasure-unpleasure sequence is diminished in Hartmann's conceptualizations. Since Hartmann viewed the reality principle as preceding the pleasure principle, logically, Freud's view of primary process would then also have to be altered. At the very least, primary process no longer could be seen as primary in the sense of

coming first developmentally. This could, in fact, help with a logical conundrum in what I have called Freud's third psychoanalytic theory (see "Commentary" on Chapter Three). The reality principle preceding the pleasure principle is, for Hartmann, one way of emphasizing the role of adaptation in human development. It is crucial for the survival of the infant to be able to respond in some way to its mothering parent in order to survive. Hartmann, in this way, saw mothering as providing the stimulus conditions that he called the average expectable environment.

A concept seemingly as popular as the average expectable environment was Hartmann's concept of ego autonomy. Ego autonomy might be considered to be a mirror image concept of Freud's view of the ego. Hartmann's ego is initially seen as possessing energy of its own and is the structure that implements the reality principle. Thus, not only is there initial ego autonomy, but the first or overriding principle of the mind (reality principle) is initiated by the ego. Autonomy of the ego is not simply an early development, but, rather, mental health is in part seen as dependent on ego autonomy. Hartmann's ideas were supported and strengthened by Rapaport (1967), who posited that a normal (or ideal) ego is governed by neither the drives nor reality. Bergmann (2000) notes that Sandler adds that a healthy ego gains autonomy from the superego. This view is one that will be contested by a number of analysts, but, for a period of time, it was considered a powerful criterion of mental health. Whether this was merely a conceptual sign of health or one that analysts truly relied on is open to debate. Whatever one's perspective, there is no question that the concept of ego autonomy is a far cry from Freud's ideas in *The Ego and the Id*. Freud's ego is pictured as a rider on a mount that is difficult to control (compromised and controlled by either or both the id and superego). While Freud was hoping for some relief for the weary neurotic, Hartmann and the ego psychologists were looking for much more control over one's internal and external environments. This is most clearly seen in the concept of secondary autonomy. Hartmann assumed that conflicted areas of the ego can become autonomous as a result of good developmental conditions or, alternatively, through psychoanalytic treatment. These factors in the development of secondary autonomy were termed changes in function, and, as such, were not seen as aspects of the ego that had to be or should be analysed. This

new angles, on previous concepts that Klein has provided, but, since she will review this material in the next paper we will encounter, let us go on to the cross-roads of Klein's theorizing and look at her next paper, in 1945, "The Oedipus complex in the light of early anxieties". This paper, written after the Freud–Klein controversies, is Klein's definitive statement about the nature of the Oedipus complex.

A brief note on two terminological confusions

In the two papers on the depressive position (Klein, 1935, 1940), Klein uses the term position as frequently as Freud used the term instinct in his early paper on sexuality (Freud, 1905d). We see in these papers an obsessional position and a manic position, etc., but this is an early exuberance in the use of this term. In Klein's later theorizing, there are only two positions: the paranoid–schizoid and the depressive position. The paranoid–schizoid position will be Klein's name for paranoia after her "discussion(s)" with Fairbairn in the mid 1940s. (In the next chapter, we will discuss Klein's 1946 paper where she introduces the term paranoid–schizoid position.) Klein also uses the term ambivalence when she is referring to images or representations that are split and of opposite valence. Freud, at times (e.g., Freud, 1915c), also used the term ambivalence in this manner. Many authors today would distinguish an ambivalent attitude towards a single undivided object from a split object that is represented in two (or more) distinct representations.

The Oedipus complex: a more complete statement

Klein, in presenting her views on the Oedipus complex (1945), is now no longer attempting to minimize her differences with Freud. Klein's clinical material in this essay is primarily from her analysis of Richard, a treatment that she presented in detail in one of her last publications, *Narrative of a Child Analysis* (1961). She also presents clinical material from her analysis of Rita, a case that she has previously presented (1932). Klein, at this point in time, restates many of her previous views: both sexes have early Oedipal development but

now early is somewhat earlier than she has previously theorized. Based on her clinical work, she still regards frustration tolerance and the degree of sadism as strong aetiological factors in determining the type and extent of an individual's conflict-laden world of internalized objects. Klein maintains that, from the beginning of life, libido is fused with aggression. This view is a departure from Freud, who saw the fusion of the instincts as a developmental step. (It is my view that, unless we can translate these concepts into concepts with observable consequences, this is largely an academic point. It is the case that Klein, at many points, seems to stress aggression and sadism more than Freud, at least at some points in his theorizing.) More importantly, Klein posits that it is the search for new sources of gratification that produces libidinal progression. Frustration is a factor in all developmental interactions, since, from her point of view, the infant wants "*unlimited* gratification". Inevitably, therefore, whatever the infant's frustration tolerance, he/she will suffer at least some frustration during breast-feeding. Following this frustration, the infant turns towards the penis for oral gratification. "The breast and the penis are, therefore, the primary objects of the infant's oral desires" (1945, p. 408). It comes as no surprise that both Richard and Rita have strong oral-sadistic impulses, and conflicts and excessive anxiety and guilt around the expression of these impulses. This fixation to an early stage of development leads to regression to this stage, and does not allow true genital primacy to be securely established. Klein's view is that psycho-sexual stages are much more fluid than Freud's descriptions had stated or implied. In each era of the child's development, one might see oral, urethral, and anal, as well as genital, impulses arising and active in the child's mind. However, if we look at Klein's statement that the breast and the penis are the primary objects of the infant's oral desires, one can only conclude that within the oral phase (or stage) of development there are characteristic tendencies that dominate each particular epoch of development. It is the present contention that this is the only logically necessary interpretation of Klein's statement. The same point can be maintained when Klein talks about a stage (or phase) of genital primacy. Here, one can only assume that there is a point in development where there is (or should be, in optimal development) genital primacy. By genital primacy, there is an assumption of genital sexual concerns

with age-appropriate identifications taking place. During this period, according to Klein, superego development should also be less terrifying and more integrative and significantly less dominated by sadistic introjects. Thus, Oedipal dynamics are, at this point, similar to those described by Freud, although Klein still maintains important differences with Freud. Before we recount those differences, let us consolidate the pregenital differences that divide Freud and Klein.

Klein's later theory: the starting points

Klein, from this point (1945) on, sees object relations beginning from birth onward. Thus, frustration and gratification during (breast) feeding lead immediately to the splitting of the breast and the formation of a loved, good breast and a hated, bad breast. The good is idealized as all good, and, in a mirror image portrait, the bad is terrifying and hated. Frustration at the breast leads both infant boy and girl to the penis, and the penis undergoes a fate similar to the breast. Through a combination of introjection and projection, the good and the bad are both taken in and cast out at different points of environmental interaction. Klein still hypothesizes a double form of representation, with reality images or external images being constantly influenced by internal representations. For example, Klein theorizes that internal images of the breast (mother) and the penis (father) constantly are effecting the realistic representations of mother and father. Klein states, "There is a constant fluctuation between internal and external objects and situations" (1945, p. 409).

In her previous publications, Klein viewed the Oedipus complex as beginning as a result of the frustration of being weaned. Sadism and aggression were seen as the affective and motivational components that initiated the Oedipus complex. Klein now sees Oedipal phenomena coinciding with the onset of the depressive position. The infantile depressive position is the core of her developmental theory, and "the child's fear of the loss of his loved objects, as a consequence of his hatred and aggression, enters into his object relations and Oedipus conflicts from the beginning" (*ibid.*, p. 410). Since, now, object relations are present from birth, the images of the good and bad breast and penis are ones that will shortly be part of

an early (the first) superego development. In this interpretation of Klein (with which many psychoanalysts who are identified as Kleinians or neo-Kleinians would disagree, maintaining that Klein had left the concept of psycho-sexual stages and replaced it with the concept of positions), she is seen as loosely holding to the concept of psycho-sexual stages. The stages are identical to Freudian theory (with the inclusion of a urethral stage), but are more fluid, and each psycho-sexual zone makes an appearance in every stage. Thus, in the oral phase of development, there will be urethral, anal, and, certainly, genital phantasies accompanying the oral themes of libidinal incorporation and oral sadism. In this view of Kleinian theory, there is an oscillation of positions within each stage of development. Thus, in the oral stage there is a period of time where paranoid tendencies predominate (soon to be the paranoid-schizoid position). This is followed by the depressive position. The depressive position coincides with the Oedipus complex, while superego fragments precede, and are consolidated during, the depressive position. In pregenital stages there is a splitting of the object during the paranoid position, and then the object is consolidated or formed during the depressive position. Inevitably, during pregenital stages, there is a splitting of the object after the occurrence of the depressive position. This is due to the infant's or developing child's inability to tolerate the intensity of pining for the lost object. With the progression of stages, superego development contains less intense sadistic elements and the superego becomes increasingly influenced by libidinal or loving elements. As the phases progress, there are increasingly successful attempts at reparation, which aid the softening, or libidization, of the superego. The oscillation of positions occurs throughout development and, as such, Klein sees human beings as always potentially in touch with psychotic elements and anxieties.

Klein's ideas about bisexuality begin from a Freudian base, but here, as well as in most areas, Klein has a good deal to add to Freudian theory. Klein's view of pregenital development is dominated by what she terms the feminine position. The boy's feminine position is arrived at

Under the dominance of oral, urethral and anal impulses and phantasies and is closely linked with his relation to his mother's breasts.

If the boy can turn some of his love and libidinal desires from his mother's breast towards his father's penis, while retaining the breast as a good object, then his father's penis will figure in his mind as a good and creative organ which will give libidinal gratification as well as give him children as it does to his mother. These feminine desires are always an inherent feature in the boy's development. They are at the root of his inverted Oedipus complex and constitute the first homosexual position. The reassuring picture of his father's penis as a good and creative organ is also a precondition for the boy's capacity to develop his positive Oedipus desires. For only if the boy has a strong enough belief in the "goodness" of the male genital his father's as well as his own can he allow himself to experience his genital desires towards his mother. When his fear of the castrating father is mitigated by trust in the good father, he can face his Oedipus hatred and rivalry. Thus the inverted and positive Oedipus tendencies develop simultaneously, and there is a close interaction between them. [1945, pp. 410-411]

In this passage, Klein maintains that, in pregenital development, the boy is primarily in a negative Oedipal situation. It is only the trust and love of the good father that can help the boy face his rivalrous hatred and come closer to resolving Oedipal conflicts. The interesting aspect of Klein's description is the length of the negative Oedipal phase that she seems to suggest. While, in her theorizing, the boy will encounter Oedipal themes several times during development, it appears that it is not until genital primacy has been achieved that positive Oedipal themes will clearly predominate over negative Oedipal tendencies. This description, of course, places the mother as central in the development of both male and female children. What Klein has done is develop a theory of internalization that takes into account the reality of the primacy of early maternal influence. Freud, in various places, takes note of this fact, but rarely places the maternal influence as central in his formal theorizing.

While Klein sees castration anxiety as a central concern of the boy, unalloyed castration anxiety does not really appear until the genital phase of development, if indeed this anxiety can ever be considered to make an unalloyed appearance. For example, she states,

If various fears are excessive and the urge to repress genital desires is over-strong, difficulties in potency are bound to arise later.

Normally such fears in the boy are counteracted by the picture of his mother's body as the source of all goodness (good milk and babies) as well as by his introjection of loved objects. When his love impulses predominate, the products and content of his body take on the significance of gifts; his penis becomes the means of giving gratification and children to his mother and of making reparation. Also, if the feeling of containing the good breast of his mother and the good penis of his father has the upper hand, the boy derives from this a strengthened trust in himself which allows him to give freer rein to his impulses and desires. In union with his father he feels that his penis acquires reparative and creative qualities. [*ibid.*, p. 412]

In this extract, one can see that at every point of development there is an internal drama of objects moving in conflict with destructive consequences, or in concert towards reparation and creative activities. Thus, all internal objects remain as representations, and are replayed in the oscillation of positions. The oscillation of positions is assumed to be a life-long occurrence. There are, of course, individuals who, for example, are more prone to paranoia, but there will always be some movement of positions in everyone, if only during brief situational occurrences. Clearly, the quality and the nature of internal objects can shift and be transformed. As development progresses, Klein assumes that internal and external, as well as good and bad, representations will be unified. The same can be said for superego representations that derived from internal objects. As the boy is able to identify with the good, loving penis (father), he sees the father as less threatening and the superego of the boy becomes a guide to external action and accomplishment.

Klein, in this paper and in her earlier work (1928), makes note of the fact that both the boy and girl envy the babies and the penis that they phantasize are inside the mother's body. For the boy, this is part of the inverted or negative Oedipal complex. The important aspect of this is that both the boy and the girl go through what Klein has previously called the femininity phase of development. She has previously linked this phase with anality, but the implications of her present theory is that the femininity phase is something that begins with the first Oedipal situation and, in the male, continues as a dominant theme until genital primacy. In the boy, the positive and negative Oedipal themes become blended during the Oedipal themes of the genital phase of development.

The girl, however, begins life with an unconscious knowledge

that her body contains potential children whom she feels to be her most precious possession. The penis of her father as the giver of children is equated to the production of children and becomes the object of great desire and admiration for the little girl. This relation to the penis as a source of happiness and good gifts is enhanced by the loving and grateful relation to the good breast. Despite this "knowledge" the little girl has grave doubts about her future as a woman who can bear children. The mother is seen as a magical figure able to produce anything and "all goodness springs from her breast". [1945, p. 413]

This magical sense is reinforced by the phantasy that babies and the penis reside in the mother's body. Although the boy shares some of these phantasies, the "desire to receive her father's penis" and her ultimate desire to produce babies is a characteristic end product of the girl's development. Her psychological life is built around her interior world and her "inner objects". Her Oedipal conflicts centre not on castration, as is ultimately the case for the boy, but around the impulse to rob her mother of babies and the penis inside her. The danger in terms of the talion principle is that, in retaliation, the girl's body will be attacked and her good objects will be taken away or spoilt.

Although the boy goes through a phase of envy (part of the inverted or negative Oedipal), for the girl the envy of the mother is a crucial aspect of her positive Oedipal complex. It is part of her motivational stance in terms of her principal identification with her mother. Despite the fact that Klein sees penis envy as a factor in the girl's development, it is an expression of bisexuality and, in this way, is similar to the boy's desire to be a woman (and possess what his mother possesses). Klein further downplays the role of penis envy (as compared to Freud's emphasis) by maintaining that "penis envy covers in some measure the frustrated desire to take her mother's place with the father and to receive children from him" (*ibid.*, p. 414).

We have previously discussed the girl's superego during genital primacy. Here, Klein slightly adds to her theorizing about the girl's superego development. Since the girl's focus is more internal and receptive, she wishes to fill her internal world with good objects.

In the feminine position she is driven by her sexual desires, and by her longing for a child, to internalize her father's penis . . . while in the male position she wishes to emulate him in all her masculine aspirations and sublimations. [*ibid.*]

This combination of positions allows the girl to be actively receptive and giving (or bountiful) and identify with the mother as the possessor (even if temporarily) of all that is good.

Freud and Klein

If we again compare Freud and Klein's conceptualizations, we have to be aware of from what vantage point we are making this comparison. If one is a cognitive psychologist, Klein and Freud appear quite similar in terms of the majority of their theoretical assumptions. From within the Freudian position, from 1935–1945 Klein was considered to be quite radical in terms of her theoretical suppositions. Klein, in addressing the differences, says that Freud maintains that genital desires begin at about age three and are in ascendance until age five. During this period, the Oedipus complex arises and the genital that is featured is the phallus. Castration anxiety is a core anxiety for boys and penis envy and hatred of the mother takes part in anxiety situations for the girl. Klein's discussion of Freud is a limited one, and so I will wait for the commentary section to try to show that some of the differences between them are illusory and some greater than Klein acknowledges. An indisputable difference is that Klein changes the name of a stage from phallic to genital. She states that Freud's earlier term "genital stage" is more appropriate than phallic. She sees both sexes as experiencing genital sensations from early infancy onwards. Both the positive and negative (inverted) Oedipus complex is first experienced under the influence of "oral libido . . . It is during the stage of genital primacy that the positive Oedipus situation reaches its climax" (*ibid.*, p. 416).

One palpable way of viewing the shift from Freud to Klein is to think about the shift from penis to breast or from father to mother. Clearly, Klein's theorizing is centred on the phantasies that involve the contents of the mother's body. The breast is initially divided

into a good and bad object, and these first introjects form the basis of the superego. Just as the father's penis (or a representation of the father) will be important in the course of superego development, the mother (or, initially, the breast) will serve as the foundation for superego development in both the girl and the boy. Both sexes have a task in integrating these images, but the girl will develop the more loving and giving superego in optimal development.

Now we can see that Klein has shifted a good deal in her new psychoanalytic theory. She has retained the idea of instinct, but has utilized this concept much more fully than Freud or any previous Freudian. Love and hate are present at birth as manifestations of the fused drives. There is no initial experience possible without love and hate providing the valence for the experience and the subsequent object that becomes internalized. Objects are internally present from the first moments of life and divided or split on the basis of the affective valence that begins immediately to shape the contents of the infant's mind. The Oedipus complex is present during the first six months of life, and, by that time, there is also superego development. The developmental positions (now primarily the depressive position) are the single most important developmental occurrence and, through the depressive position, Oedipal phenomena are experienced, integrated, and then split apart anew. The oscillations of paranoia and the depressive position continue throughout development, as does the recurrence of Oedipal phenomena and superego development.

The superego is a phantastic internalization of objects filtered through the, as yet, unintegrated affects of love and hate. Integration occurs in several ways: external and internal object representations are gradually brought together, good and bad, or idealized and denigrated, objects are gradually repaired and integrated, and superego representations are integrated as development progresses. One could simplify this statement and maintain that, in optimal development, split structures are gradually integrated into whole objects or structures. Klein's assumption is that when an object is split, there is also a split in the ego, and this tends to make the ego a mass of objects. Certainly, in this respect, she is the first theorist who places the internalization of the object as the centerpiece of her theoretical structure. Since, for Klein, development is not linear, there is constant need to repair the object and to consolidate the

splitting that the paranoid position has provided. The sequence of paranoia to depressive position that involves pining and leads to mania requires reparation at each new juncture of the depressive position. In this comparison, I have not bothered to present Freud's views, since these have been presented in some detail. Suffice it to say that, while some aspects of Freudian theory provided the structure for Klein's innovations, from inside psychoanalysis it may feel as if everything has changed; from outside psychoanalysis, while the content of the theory has changed, the architecture looks quite similar.

Perhaps we can end this chapter by saying that, by 1945, Klein is fully ready to be her own theorist. To make a case for a continuous event (the development of Klein's theorizing) occurring at one point in time is, of course, a fiction. One can say that in 1928 (or before), she reconceptualizes the Oedipal situation. By 1935, she establishes the idea of position (depressive position) and links the formation of the depressive position with paranoia, depression, and manic-depressive states. She also, with Joan Riviere, is able to somewhat de-emphasize the role of sadism and destructive tendencies. With Riviere, she gives an account of how the child repairs its internal world from the frequent disruptions and sadistic assaults that she theorizes occur throughout development. By 1945, after the Freud-Klein controversies (or discussions, if you tend to use reaction-formation), Klein clearly declares her differences with Freud. Klein, in her new Oedipal paper, changes developmental ideas and the structuralization of the superego, and acknowledges the fact that she is presenting a theory that takes psychoanalytic thought in new and different directions.

Commentary

It is hard to overestimate the influences of Ferenczi and Abraham on the early development of Klein's theorizing. Ferenczi was not only Klein's initial analyst and teacher, but he is the first analyst to provide concepts of projective-introjective sequences that eventually lead to Klein's concept of projective identification. Ferenczi writes (1909),

To understand better the fundamental character of neurotics one has to compare their behaviour with that of patients suffering from dementia praecox and paranoia. The dementia patient completely detaches his interest from the outer world and becomes autoerotic (Jung, Abraham). The paranoiac, as Freud has pointed out, would like to do the same, but cannot, and so projects on to the outer world the interest that has become a burden to him. The neurosis stands in this respect in a diametrical contrast to paranoia. Whereas the paranoiac expels from his ego the impulses that have become unpleasant, the neurotic helps himself by taking into the ego as large as possible a part of the outer world, making it the object of unconscious phantasies. This is a kind of diluting process, by means of which he tries to mitigate the poignancy of free-floating, unsatisfied, and unsatisfiable, unconscious wish-impulses. One might give to this process, in contrast to projection, the name of introjection. [1909, pp. 41–42]

This is one of Ferenczi's first published statements about projection and introjection, and one where he is using these terms to explain clinical phenomena. Freud uses Ferenczi's ideas to account for his concept of the purified pleasure ego (see Chapter Three). Klein sees the utility of these theories, and develops the concept of projective-introjective sequences (later, projective identification) into a mode of communication in the earliest moments of life. It is also a defence mechanism and at least one of the ways of accounting for transference reactions.

Abraham was really the first and most influential analyst to provide a full developmental theoretical picture for Freud's psychosexual stages. When Fairbairn critiques the psycho-sexual stages (see Chapter Nine), he does not go to Freud's writings, but, rather, chooses Abraham's conceptualizations, since they are the richer panoramas of early development. Klein's concepts of early development in many ways spring from Abraham's theoretical/clinical writings. Abraham attempts to develop fixation points for a number of disorders. Klein's concept of the depressive position is reminiscent of Abraham's view of manic-depressive disorders being concomitant with the second half of the oral stage. The first half of the oral stage is a fixation point for schizoid and schizophrenic disorders. It is not too large a leap to think of the paranoid-schizoid position, followed by the depressive position, as in some way

harkening back to Abraham's conceptualizations. To be sure, Abraham's views only provided an adumbrated picture of Klein's vibrant concepts. It is also important to note that Abraham's views on envy were different from, and more developed than, the ones that Freud had proposed. Freud mostly discussed the role of envy in terms of penis envy, although he implied a larger role for envious feelings in other writings (1914c, 1915c). Abraham saw envy as appearing much earlier in development and, at first, having nothing to do with penis envy. His concept of envy derived in the oral stage surely was a factor in Klein's later postulates, where envy occupied a crucial role in the paranoid-schizoid position (see Chapter Eight).

Perhaps the two most striking aspects of this Kleinian era is her dating of the Oedipus complex at a much earlier period than Freud, and her concept of the depressive position. Klein's moving the Oedipal period to an earlier time is, in part, based on her analysis of children. She eventually defends her reconstructions (1957) by quoting from Freud's "Constructions in analysis" (1937d) paper. Clearly, Freud developed his theory, in large part, on the basis of reconstructions, or constructions, if one prefers. That Klein used the same method of theory development is here not the question. Here, the question, or, rather, the interpretation of Klein's Oedipal views, is based on her presumed desire to remain within the Freudian tradition. Klein states that she has repeatedly seen that the Oedipal complex comes into operation earlier than had been assumed (Klein, 1928). She could easily have maintained that early triangulation is a forerunner and an important determinant of Oedipal dynamics without positing that Oedipal dynamics appear and reappear right after weaning, then again in the anal stage, and again in what Freud called the phallic stage of development. Later in her theoretical writings, the Oedipal stage is coincident with each appearance of the depressive position. My view is that Klein presented her theory in this manner because Freud had recently said (1923b) that Oedipal dynamics were the bedrock of analytic understanding in the clinical situation. If Oedipal dynamics were the bedrock, how could Klein presume to go beyond the bedrock? One compromise position is that she was not going beyond the bedrock; it was simply that the bedrock occurred earlier than was previously thought to be the case. This was a way to include her new concepts within the Freudian opus despite the fact that Klein's

early Oedipal manifestations were quite different from Freud's view of the Oedipal complex. Clearly, her view of the Oedipal complex is one that varied depending on when it occurred in development. In Klein's first Oedipal complex, there is a terrifying drama taking place, with a superego structure that is equally terrifying. Although this concept captures some of the drama of Freud's theory, it does not overlap with his picture of the struggle during this period. A main component of the Freudian Oedipal stage is coming to understand that the Oedipal couple may, at times, have different priorities than the Oedipal child. The Oedipal drama features castration anxiety and penis envy, but it also features the growing capacity for love and understanding biological and emotional differences. It is hard to see anything but the barest rudiments of understanding love and emotional differences in Klein's first Oedipal manifestations. At most, there is a unified object that rather quickly is lost in the coming oscillation of stages and in her later theory of positions. Nevertheless, however one defines Oedipal dynamics, the main question is whether the concept of the depressive position is a useful one.

Here, it seems to me that Klein has provided a view that is useful not only for developmental theory, but also for clinical experience with adults. She has taken up an element of Freud's theory and completely transformed his concepts. Freud assumed that with the development of the purified pleasure ego (Chapter Three) there was a movement away from reality and a new structure was formed with the beginning of the stage of narcissism. Klein posits that, during development, with the onset of the depressive position a whole object is formed, and then, in the next stage, the object is split and reformed in the subsequent depressive position. As stages progress, the object is more differentiated, and in the genital (Freud's phallic) stage the depressive position and the Oedipal complex largely coincide with Freud's conceptualization of the Oedipal stage. Thus, whether one wants to call early triangulation Oedipal or not, Klein's contributions, even in the era covered in this chapter, have no rival (excluding Freud) in terms of the originality of her theory. Even in her relatively early to her middle writings, she has transformed psychoanalytic theory.

As a last point in this section, in the body of the chapter it was mentioned that Freud and Klein had different ideas about the

strength of the superego. For Freud, a strong superego is a united structure that provides consistent ideals and prohibitions. Freud thought of the male superego as stronger, because the ideals were firmer and ostensibly more consistent. It seems to me that he mistook rigidity for consistency; the more flexible female superego is consistent in the sense of being able to judge different situations and adjust to them as her principles will allow. Klein's idea of the strength of the early superego involved the ferocity of what Anna Freud would consider a punitive superego structure. Thus, Klein's early superego would, in Freudian terms, be considered a primitive fragmentary structure. However, Klein's concept of the later superego of the well-adjusted female (the bountiful female superego) is a strong, unified structure with loving ideals. It is hard to see the male superego as any "stronger" than Klein's description of the mature female superego.