conversion symptoms and were considered to be hysterics. Most of the men were obsessive–compulsives, although Freud did report on a man whom he considered to be a hysteric. In both disorders, the initial cause was sexual abuse. Usually, obsessive–compulsive patients, after being abused, were also themselves abusers of younger children (siblings, relatives, friends, etc.). Freud thinks at this time that these patients attempted to do to others what had been done to them. This early activity led not only to obsessive–compulsive symptoms, but also to obsessive–compulsive and sadistic tendencies.

The manifestation of different symptoms (or choice of symptom, in modern parlance) depended in large part on the patient's ability for conversion. Alternatively, one might say that a symptom is determined by the disposition of affect when defence occurs. We have to remember that defence is a process where a strong idea is turned into a weak one and the affect is split away from the idea. Thus, the disposition of affect is the final pathway in the type of symptom that is produced. Freud assumed that there were innate biological tendencies that produced conversion symptoms. Thus, in conversion symptoms, the affect associated with the original memory is literarily converted into a physical symptom. There may be diverse symptoms, such as blindness, or paralysis, or aphonia. To the extent that an affect is converted into a physical symptom, the patient will experience little accompanying affect, hence the term *la belle indifference*. This term means that the woman is indifferent to her plight, although, as one can read from Freud's case material, this indifference is not long lasting. If the patient does not have the capacity for conversion, then a false connection is made with another idea. More specifically, if the affect is not converted, it becomes attached to another idea in the primary (conscious) system and this explains the overvaluation of certain ideas and behaviours. Thus, an obsessive–compulsive who wants constantly to clean is thinking about an activity that may relate to his defended-against idea. However, it is not clear to him why he has an overwhelming desire to clean things that have already been cleaned. Freud already has begun to think that the false connection is not a random event, but is strongly influence by how the secondary system is stratified.

We have talked about two types of symptoms, but Freud has also posited that anxiety, as a symptom, is an affect that is not otherwise discharged or converted. Thus, in a conversion symptom, if not all the affect is converted into a physical symptom, there can be anxiety or, perhaps, even a false connection formed. In a similar fashion, phobias can be false connections that are a result of an accumulation of a great deal of affect. This affect overwhelms the primary system and produces anxiety to the point of fear. We can see from even this brief look at Freud's ideas about affect that affect can be displaced and that quantitative factors are important in his understanding of how the person experiences affect. In the penultimate paragraph of "The neuro-psychoses of defence", Freud states his view of affect:

> I should like, finally to dwell for a moment on the working hypothesis which I have made use of in this exposition of the neuroses of defence. I refer to the concept that in mental functions something is to be distinguished—a quota of affect or sum of excitation—which possesses all the characteristic of a quantity (though we have no means of measuring it), which is capable of increase, diminution, displacement and discharge, and which is spread over the memory—traces of ideas somewhat as an electric charge is spread over the surface of a body. [1894a, p. 60]

If we look at Freud's views on the production of psychogenic disturbance, we can say that a traumatic environmental event (seduction or sexual abuse) early in life produces a tendency for later psychological disturbance. This disturbance is mediated by physiological factors that are related to the appropriate discharge of affect. The physiological and neuro-physiological factors that Freud posited will be remarked on more fully in the commentary section of this chapter.

Actual neuroses

The term "actual neurosis" is a somewhat strange term to the modern reader. It is hard to imagine that Freud thought that there were sexual practices in an adult's life that produced psychological symptoms. However, he thought that if there is not what he termed appropriate sexual discharge, the chances of developing psychological symptoms is greatly enhanced. If a man or women masturbated too much, Freud thought that this resulted in the symptoms of fatigue or neurasthenia. Similarly, if a person practised coitus interruptus, they might develop symptoms of anxiety neurosis. Clearly, the idea of appropriate discharge was important in Freud's conceptualizations of normality. Thus, a person needed to have consistent orgasms during intercourse to maintain normal discharge patterns. States of actual neurosis occurred when these patterns of discharge did not occur or were interrupted without timely discharge. Freud's treatment of adults whom he diagnosed as actual neurotics was to advise them to change their sexual practices. It is a matter of continuing interest that, through at least fifteen years of Freud's career, he continued to conceive of some individuals as suffering from an actual neurosis. During most of the 1890s, Freud had two major classifications of mental disorders: psychogenic and actual disorders.

Freud and the seduction theory

In talking about defended-against or incompatible ideas, Freud asks, "What is the content of these incompatible ideas?" Freud maintains, "In all the cases I have analysed it was the subject's *sexual life* that had given rise to a distressing affect". Here, Freud is talking about psychogenic disorders and sexual life in terms of sexual abuse during a person's childhood. This was written in 1894, and Freud was

seemingly convinced of the validity of the seduction theory or hypothesis. In a subsequent publication, Freud, for one of the few times in his career, states statistics and says that nineteen out of twenty of his patients were sexually abused in early childhood. He is convinced of this relationship and his conviction is documented in his letter to his friend, confidant, and co-conspirator, Wilhelm Fliess. One can see that, at this point in time, Freud's "neurotica" is exciting both Freud and probably his audience, Fliess. Freud's view will change shortly, and by 21 September he evinces strong doubts (Masson, 1985, pp. 264–266) and in October 1897 he writes to Fliess about his misgivings and how he thinks that, for both logical and psychological reasons, the seduction hypothesis cannot be the powerful explanatory concept that he once believed it to be.

The reasons stated in this letter, combined with his own self-analysis, now convince Freud that his hypothesis is incorrect, at least in the way that he originally formulated this concept. He cannot imagine that there are that many perverse fathers. He has to include his own father, since he has diagnosed himself as having certain hysterical symptoms. The questions abound about how he is to regard the sexual content that his patients have provided for him? He will answer these questions by the time we get to our next chapter, but for now Freud's self-analysis is providing him with a number of suggestions that he will take quite seriously. Clearly, there are many authors who have interpreted the reasons for Freud's original seduction hypothesis and the reasons that he gave up this theory (Good, 1995; Masson, 1984; Simon, 1992; Sulloway, 1979). Masson provides the most dramatic explanation and Good (1995, 2006) the most complete series of explanations.

It may strike the contemporary reader that the term "seduction" is rather a mild term for what most would call sexual abuse. What Freud was alluding to was a "passive sexual experience in the first years of childhood" (Masson, 1985, p. 52). Good (2006) relates this to Charcot's influence on Freud, where Charcot thought of hysteria as being caused by trauma where the sufferers were passive recipients of the traumatic experience. Hence, Freud was inclined to believe the patient's statements where they "ascribed their symptoms to passive sexual experiences in the first years of childhood—to put it bluntly to seduction" (Freud, 1914d, p. 17).

Freud's self-analysis

Freud's self-analysis takes place in the period from 1896 to 1900 and lasts for the rest of his career. Eissler (1971) enthusiastically calls Freud's self-analysis one of the great accomplishments in the history of Western civilization. This exaggerated view is perhaps better understood if one considers that Freud's insights into his own psyche were a factor that convinced him that the seduction theory was incorrect. Gay correctly writes that Freud's self analysis "has become the centerpiece of psychoanalytic mythology" (1988, p. 96). He points out that Freud himself has said

that, “True self-analysis is impossible, else there would be no illness” (1988, p. 96). However, Freud was inconsistent about this, as he was about a number of issues. As late as 1923 he returns to the idea of someone analysing themselves in his dream papers (Freud, 1923c). Since psychoanalysis is always a dialogue, how does Freud reconcile this idea with his self-analysis? Gay states that Fliess was the other person that Freud dialogued with and the dialogue took place mainly through letters and fantasy. I will not attempt to evaluate Freud’s self-analysis, except to say that I have previously indicated (Ellman, 1991) that Freud evaded treatment in the same way that many people avoid the treatment situation. Clearly, he was conflicted about many issues, and clearly he was an amazing human being who triumphed over many difficult circumstances. Would he have been better off had he gone into treatment? Obviously, this is an impossible question: better in what way and for whom, one could multiply the questions and no real answer would be satisfactory. One can only say that, in some way, Freud’s self-analysis convinced him that his seduction hypothesis was incorrect in the way that he formulated this hypothesis. He had to look for other explanations and, in the following chapters, we will explore the explanations that he put forth.

This era begins Freud’s psychoanalytic journey, and, although I have to some extent downplayed Freud’s self-analysis, Eissler’s volume systematically looks at Freud’s psychopathology in a manner that one should not dismiss. Although I believe that Eissler’s idealization causes some difficulties in his analysis, his volume is still one that is replete with interesting interpretations. Certainly, the era ends with Freud leaving the seduction hypothesis, which leads to the next era, where he puts forward new concepts that involve very basic ideas about how human beings develop, think, and process relationships.

Note

1. In this translation, it appears that Freud is using the term ego in the modern sense of the term, that is, the ego of the structural theory. This is, however, an anachronistic view, since Freud does not have a structural concept of ego at this point in time. One could say that ego is equated with the person’s sense of self, but even this explanation lacks clarity and simply presents a different, imprecise description to the term. For the time being, we will be content to say that the term ego conforms to the person’s conscious or primary views of themselves. Ideas that are incompatible with these views are opposed in one way or another. Defence is a way in which incompatible ideas are kept out of the person’s conscious or primary associations about themselves.

Chapter Two

The psychoanalytic era begins: dream theory–psycho-sexuality

In this chapter we go over both *The Interpretation of Dreams* and *Three Essays on the Theory of Sexuality*. I have put the summaries of both at the beginning of the chapter, although these works are discussed separately.

Summary of "the dream book"

Although Freud initially presented a complex model of dreaming, the emphasis of this model was on the wish. The wish, to paraphrase Freud, is the capital needed to fuel the dream, and Freud and those that followed him have focused heavily on the capital in the business of dreaming. Freud maintained that dreams are instigated by unconscious wishes. After making this assertion, Freud, in Chapter Seven of *The Interpretation of Dreams* (1900a), frequently reminds us of Socrates helping his listeners search for the meaning of the good and the beautiful. The sceptic might ask, if all dreams are instigated by a wish, what about anxiety dreams or dreams that feel horrific and typically are called nightmares? Freud answers these queries and his answers lead him to consider a realm of experience that, up to that point in time, had been largely unexplored: the earliest and deepest recesses of human experience. He defines an unconscious wish as a pleasure that has its source in early childhood. It is a pleasure that, if activated, shows the mind in conflict, since what is pleasurable at one level (unconscious) will cause anxiety on another level (pcs-conscious). This conflict is mediated by the censorship (which serves a defensive function), and these

two levels of awareness are *primarily* governed by different modes of cognition (primary *vs*. secondary process).

Why does a dream occur? Here, Freud posits that sleep is both a condition for regression and, during sleep, the censorship is weakened. Thus, the emergence (representation) of a wish (which was activated during the previous day) can more easily occur during sleep. The censorship that is still active provides the impetus for a compromise formation. This compromise formation consists of the transformation of the wish into sensory form that is disguised sufficiently to allow the person to dream and stay asleep. Anxiety dreams, in Freud's theory, signal the failure of the dream process and dream-work to adequately disguise and deal with the wish. In the dream book, Freud theorizes about how different systems communicate, and it is this communication that he labels as transference. It is via the dream that Freud gives theoretical definition to this concept that will gradually change the way he conceptualizes the treatment situation. As a last point in this brief summary, Freud attempts to show the similarities between dream formation, symptom formation, and, during the same time period, a variety of other phenomena (momentary forgetting, slips of tongue, etc. [Freud, 1901b]). In short, Chapter Seven is unparalleled in psychoanalytic thought, in that Freud attempts the most general theory that has been put forth probably up to the present time. Despite this heroic attempt, Freud will find various difficulties with his theoretical structure and certainly others will find even greater difficulty.

Summary of Three Essays on the Theory of Sexuality *(three essays)*

In this work we see Freud (mostly) leaving the seduction hypothesis. Childhood interest in sexuality and bodily functions now becomes a universal tendency. In the first essay, Freud points out that what we call perversions are usual occurrences during different points of development, part of the human condition. He maintains that many of our assumptions about sexuality are biased, and a result of either anxiety or defences against certain types of sexuality. He tries to debunk the prejudices of his time against homosexuality. He maintains that homosexuals are not moral degenerates, although he still holds open the possibility of homosexuality being a result of childhood conflict.

In the second essay, he discusses both the new stages of development that he puts forth (autoerotism and object love) and describes the child's interest in various bodily functions. In the third essay, he describes how males and females differentiate in terms of sexual interest and tendencies. Reading these essays in original form brings the realization that Freud's stages of oral, anal, and phallic organization did not appear until later in his career.

Introduction: the unconscious and psycho-sexuality

It is in this period of Freud's writing that he begins the modern era of psychoanalysis. He now embraces the concepts of the unconscious and universal psycho-sexuality. In this chapter we will discuss two of his best known works, *The Interpretation of Dreams* (dream book) (1900a) and *Three Essays on the Theory of Sexuality* (three essays) (1905d). Interestingly, when students read the three essays, they are always somewhat confused. They are searching for what they already know (or believe) to be Freud's theory of psychosexuality, and they have difficulty in finding it in these essays. This is partly because of the fact that Freud continuously revised the essays by adding footnotes and, at times, even whole passages to this work. As we will see, Freud's theory of psycho-sexual development does not parallel the more finished, unified, and yet somewhat simplified, version of his ideas that are popularly portrayed in beginning psychoanalytic text books (Brenner, 1955). The same might be said for arguably Freud's most cherished work, *The Interpretation of Dreams.* In this work, he puts forth not only a theory of dream formation, but a model of mental organization that continues as a feasible theory for certain aspects of cognitive functioning. In fact, the work is so dense, rich, and comprehensive that it remains without parallel in psychoanalytic theorizing. It is important to note that we will be concerned throughout this volume with Freud's revisions of his ideas, particularly concepts that are presented in the three essays and in the dream book. We will look at additions to each volume (or any volume) during the era that Freud made the addition. Thus, our first view of the dream book and the three essays will be based on the text that was presented during that time period.

The dream book

Dreams are instigated by unconscious wishes. This sentence seems clear enough to the modern ear, but Freud will take this statement and from it build a model of the mind. He forges this model by utilizing a late nineteenth century version of the Socratic method. Freud gives us a dialogue between the sceptical listener and the theoretician that frequently reminds us of Socrates searching for, or helping his listeners search for, the meaning of the good and the beautiful. The sceptic might ask, if all dreams are instigated by a wish, what about anxiety dreams or dreams that feel horrific and typically are called nightmares? Freud patiently answers these queries and his answers let him consider a realm of experience that, up to that point in time, had been largely unexplored: the earliest and deepest recesses of human experience. He must define what he means by a wish and how wishes originate. He must tell us why wishes occur in disguised form and how this disguise develops. He must also give us a theory that distinguishes waking and sleeping mentation (a word

that is used by sleep researchers, or, at least, a word that I encounter primarily in the sleep research literature, which stands for any type of discernible mental activity) and he implicitly begins to articulate a theory of different states of consciousness. It is easy to be anachronistic and forget that Freud had no idea of sleep stages and certainly did not know anything about rapid eye movement (REM) sleep (Ellman & Antrobus, 1991) or state of consciousness research.

Most importantly, in this new theory of wishes Freud needed to distinguish between levels of consciousness, and here he begins to fully develop his ideas about the role of the unconscious in a person's waking as well as sleeping life. How does the unconscious effect dream experience (or the manifest content of the dream)? This question leads Freud into continuing to develop a theory of defence, postulating an agency of censorship, and, most importantly, positing different processes of cognition (primary and secondary process) that will be a powerful theoretical metaphor to help explain a variety of human activities. He notes that dreams are usually sensory in nature and this observation leads him to question why this should be true of the dream. The question takes Freud into the issue of regression, and here he gives us several uses of this term, which again do not fully conform to the modern use of the term regression. In listing the concepts that Freud introduces in the dream book, I have included transference, despite the fact that Freud first mentions transference (see Chapter One) in *Studies on Hysteria* (Breuer & Freud, 1895d). In the dream book, Freud tries to account for the transfer of unconscious wishes to consciousness. In this work, Freud begins his theoretical understanding of the concept of transference and its counterpart, the concept of defence. It is in the dream book that we begin to see theoretical concepts that attempt to explain what Freud has conceptualized in his clinical writings 5–8 years earlier in *Studies on Hysteria.*

Assumptions about levels of consciousness

When Freud undertook the writing of the dream book, he had more fully developed his ideas about levels of consciousness. Most important in his delineations was his understanding of the unconscious. His concept of the unconscious began with his assumptions about the secondary psychical system. Now, however, we see that the idea of a secondary psychical system is substantially altered. For example, in positing unconscious ideation, Freud emphasized that there were some ideas that were totally inaccessible to conscious awareness. Even in treatment these thoughts (in the broadest sense of the term) cannot be made easily available to the person, and we see that Freud, shortly after the publication of this work, gives up the pressure technique. So, we may say that thoughts in the unconscious are thoughts that the person cannot easily become aware of under any immediate conditions; these thoughts may include memories as well as fantasies. They may emanate from any

point in life, but are most notably from childhood. The preconscious, in Freud's theory, is where most cognitive processing occurs; memories and thoughts that are preconscious can achieve consciousness. Thus, there may be a variety of preconscious thoughts that we may not be aware of as we process an event, but these thoughts are potentially available to the person's conscious experience. The preconscious is thus presumed to be a state where procedural memory is processed; hence, tying one's shoes or hitting a golf ball are not things that we are conscious of once having learnt these skills, but memories associated with these skills can be made conscious. In addition, there are a variety of memories that are not conscious but can be voluntarily brought to consciousness.

The definition of consciousness in Freud's era was not viewed as a significant problem, since, in that epoch, to paraphrase Freud, psychical meant conscious. Therefore, any significant action was viewed as a result of consciously formed decisions. Freud's view of consciousness is quite different: the conscious state is seen as equivalent to a sense organ with limited capacities. It was certainly not equated with a person's psychical life, and was not even where most cognitive processing took place. Thus, Freud's new theoretical perspective downplays the role of conscious and even rational thought; decision making is often a process that is dominated by factors outside of a person's awareness.

One might say that there are two different ways in which Freud uses the terms conscious (cs.), preconscious (pcs.), and unconscious (ucs.). One might roughly be called a descriptive use of these terms. The descriptive point of view simply attempts to specify whether an idea is unconscious or preconscious, and this will denote whether this thought is potentially available to the person's conscious experience. Another use of the term occurs when Freud assigns functions and properties to what he has previously described as the unconscious. Thus, he might say that a certain type of thought process goes on in the unconscious and a different type of process goes on in the preconscious. Here, he is talking about more than level of awareness, and he frequently utilizes terms like the system unconscious or the conscious–preconscious system (Freud frequently linked the functions of a person's conscious and preconscious states). Freud will continue for a long time to make a distinction between the descriptive and the systematic uses of pcs., cs., and ucs.

The Freudian unconscious can never be a merely descriptive term, for even in the descriptive use of the term he is postulating processes that are inaccessible to any type of observation. The term is, therefore, a theoretical one in either usage. Thus, I assume that Freud knew, when he was forced to know, that any use of the concept of unconscious processes involves theoretical assumptions and not merely descriptions. Nevertheless, despite this knowledge, Freud often wrote as if one could observe unconscious processes. This tendency has led to some theoretical confusions. One can observe hypothesized manifestations of unconscious processes; one cannot observe the unconscious process itself. This simple point has ramifications beyond the concept of unconscious processes. There is a question as to how to view various theoretical ideas, and this question has stayed with

psychoanalysis up to the present time. It is a view of mine that analysts have tended to take various psychoanalytic concepts as directly observable, and this tendency has led to the type of conceptual misunderstandings that I alluded to in talking about Freud. This is a theme that will be taken up with various concepts, such as unconscious processes, defence, and transference. In addition, Freud makes a distinction between meta-psychology and clinical observation or theory that will also be questioned in the next chapter.

Forgetting of dreams

Chapter Seven in *The Interpretation of Dreams* is by now almost a legendary chapter in psychoanalysis. It is where Freud gives his most complete theoretical rendering of what he calls the "Psychology of the dream-process". As I have stated, he does much more than this in the chapter, but this is the place where he begins his discourse.

In Chapter Seven, Freud starts off his exegesis by solidifying clinical observations that he has previously reported. It is his view that the "forgetting of dreams is to a great extent a product of resistance" (1900a, p. 520). He cites patients who report having a dream and yet are unable to remember the content of the dream. Freud tells us that, as they proceed with the treatment, they come up against a resistance, and then "I... explain something to the patient and help him by encouragement and pressure" (1900a, p. 520) and the patient then exclaims that he/she is able to remember what was dreamt. (Freud was still using the pressure technique at this time.) Freud concludes that by overcoming resistance he is able to help the patient to recall a dream. He reasons that at least some dreams are forgotten because of resistance, as opposed to the other explanations that might be proposed. This is stating the argument in its weak form, since it is clear that Freud believed that most, if not all, dreams are forgotten as a result of repression. He is also reluctant to view sleep as a state that is completely alien to wakefulness. Freud sees a continuum between waking and sleep mechanisms and he believes that psychoanalytic experience bolsters this perspective. Sleep, as we will see, is a time where regressive trends normally predominate, but we will have to wait to fully broach this facet of the theory. We can note, however, that, here again, Freud is taking a different view than his contemporary dream and sleep theorists like Morton Prince (White, 1992). He is obviously aware that dreams occur during sleep, but for him their occurrence depends on various conditions of waking experiences.

Perhaps the most interesting aspect of dream formation that forgetting provides for Freud is that even the remembering of a single element of a dream can lead one to a person's unconscious purposive ideas. Freud maintains that

> Psychiatrists have been far too ready... to abandon their belief in the connectedness of psychical processes. I know for a fact that trains of thought without purposive ideas no

> more occur in hysteria and paranoia than they do in the formation or resolution of dreams. [1900a, pp. 528–529]

In treating the neuroses, Freud's instruction to the patient to free associate is guided by the presumption that the patient will not be able to leave the train of purposive ideas and that "what seem to be the most innocent and arbitrary things which he tells me are in fact related to his illness" (*ibid*., p. 529).

Most of what we have touched upon to this point could be taken up at any point in the circle that Freud is drawing and eventually these points would connect. We could start by asking what Freud means by a purposive idea, and this would take us into the realm of what he means by wish fulfilment, which in turn takes us into the issue of his ideas about early development. We could ask what Freud means by regression, and this would take us in yet another direction that would begin to tell us how he viewed early cognition. Wherever we started the roads would eventually cross, and so let us go directly to Freud's central hypothesis (wish fulfilment) and work our way back to how and why dreams are forgotten.

Wish fulfilment

Freud begins by citing Aristotle that a dream is thinking that continues during sleep. He then reasonably asks if we can think of various things during waking, why should our sleeping thoughts be restricted to wishes? Let us set aside this question and see first the role that Freud sets for wishes in dreams (dream-wishes). We may state a characteristic that all dream-wishes share; they are wishes that are experienced (or potentially experienced) as not having been gratified. A conscious dream-wish may have been stimulated during the day, but, owing to life's exigencies, the person has not been able to satisfy this wish during the day. At night, this wish might be at the conscious or preconscious level of a person's awareness. Freud proposes, as a second idea, that the dream-wish may have arisen during the day but been repudiated; in that case, what is left over is a wish which has not been dealt with but has met with defensive processes. Freud assumes that wishes of the second kind have been driven into (defended against) the person's unconscious. These wishes are thus no longer available to the person's consciousness. The third type of dream-wish is one that has no direct connection with waking activity, but only becomes active at night under some conditions. This is a wish that is unconscious. There are also preconscious dream-wishes that become activated during sleep and can be considered a fourth type of dream-wish.

Now that we have distinguished levels of wishes, it is important to note that, in adults, Freud's supposition is that a conscious wish can only become a dream instigator if it succeeds in awakening an unconscious wish with the same or a similar meaning. He assumes that unconscious wishes are always on the alert to reinforce conscious or preconscious wishes by "transferring their own great intensity on to" the

less intense pcs–cs. wishes. These unconscious wishes are from childhood and are, in Freud's words,

> immortal, [they] remind one of the legendary Titans, weighed down since primeval ages by the massive bulk of the mountains which were once hurled upon them by the victorious gods and which are still shaken from time to time by the convulsion of their limbs. [*ibid*., p. 553]

His encounters with patients have led him to view the core of the onion as invariably comprising wishes from childhood. He tells us that dream-wishes have the same origin, and that we can more clearly see dream-wishes in the manifest dream when we look at children's dreams. In children, the censor between the pcs. and the ucs. is not fully developed, and so dream-wishes are more directly represented in the manifest dream. In adults, there is a firm censorship between the ucs. and the pcs. and, consequently, in adults unconscious wishes are more disguised. Up to this point, Freud's position is easily understood and reconciled with his later positions. However, when he says that, with children, the dream-wish is one that is an unfulfilled, unrepressed wish from waking life, we are left with a position that is not totally consistent with one that he is to take in later works. We will go back to this when we discuss his views on primal repression. For now, we will be content to say that children's wishes are less likely to be censored than is the case with adults. In this model, the censor guards against unconscious ideas entering consciousness.

What about the daytime events (non-wishes) that act as instigators for dreams; what can we say about this class of experience? Freud has already given a list of wishes that can be a stimulus for a dream, and he tells us that the thoughts that we carry over into sleep are not relegated to the category of wishes. As we enter sleep, there may be a variety of realistic problems that we have not attended to or not been able to solve. These are thoughts that we are still concerned with as we enter sleep; they are not, in and of themselves, wishes. Of course, as was said earlier, we may be thinking about what we have (attempted to) "suppress" during the day (an unfulfilled wish). There may also be a group of events that we have not dealt with during the day that we are relatively indifferent to; this class of events may be activated as we are going to sleep. All of these ideas share the quality of being unfinished. Thus, as the person enters sleep, the group of events that will be most likely to serve as an instigator for the dream is a class of experience(s) that in some way or another is incomplete or unfinished from the dreamer's point of view. Freud calls these experiences the day residue, and these experiences all share another feature, that is, during sleep, they will stimulate an ucs. wish from childhood.

How might we sum up the relationship of the day residue (which is usually pcs.) to dream formation? Freud says that

> There is no doubt that they find their way into dreams in great quantity and that they make use of the content of dreams in order to penetrate into consciousness even during the night. Indeed they occasionally dominate the content of a dream and force it to carry on the activity of daytime. It is certain, too, that the day's residues may be of any other character

> just as easily as wishes; but it is highly instructive in this connection, and of positively decisive importance for the theory of wish-fulfilment, to observe the condition to which they must submit in order to be received into a dream. [*ibid*., p. 555]

Freud then likens the day residue to the entrepreneur, the person who has "the idea and the initiative" to begin a project. The entrepreneur, however, can do nothing without the capitalist, who "provides the psychical outlay for the dream" (*ibid*., p. 561). It is possible for the capitalist to also be the entrepreneur, and, in fact, Freud thinks this is often the case. Freud then plays with the analogy and says that the entrepreneur may offer some capital, or, at other times, a variety of capitalists may contribute to the formation of the dream. The essential point is that the day residue may actually be linked to, or be a derivative of, a dream-wish. Often what is stimulated during the day is itself a wish that during sleep can provide the capital for the dream.

Lest we get awash in wishes, it may be useful to look at a dream and see how Freud is able to analyse a dream within his theoretical boundaries. We will look at a dream of Freud's that he presented in the dream book. The dream is the following: "My friend Otto was looking ill. His face was brown and he had protruding eyes …" (*ibid*., p. 269).

Freud's association is that Otto in the dream had signs of Graves disease (in which your thyroid gland is stimulated excessively and the production of thyroid hormones [thyroxin] is abnormally high. This condition can affect the eyes, causing widening of the lids and bulging of the pupils). Otto is his family physician, and "I owe him more than I can ever hope to repay" (*ibid*.). Freud says that one might think that his dream might be construed as showing concern for Otto, since Freud's wife had mentioned that night that Otto had looked "tired and strained" (*ibid*.). Freud dismisses this explanation and asks why, if he were concerned about Otto's health, would he have given Otto Grave's (Basedow's) disease? Freud's analysis took him back to an accident that had occurred six years before the dream. He was riding in a coach with Professor R, and it was only by "a piece of luck that we all escaped injury" (*ibid*., p. 270). When they spent a night at an inn, a man with "unmistakable signs of Graves disease—incidentally just as in the dream" asked what he could do for the group. Professor R, "in his decisive manner", asked for a night shirt, and the "fine gentleman rejoined: 'I'm sorry but I can't do that' and left the room" (*ibid*.) Freud's associations to this dream are rich and complex and he ends by asking where is the wish-fulfilment in the dream. He says not in "my avenging myself on my friend Otto [Oscar Rie, his children's pediatrician], whose fate it seems to be ill-treated in my dreams" (*ibid*., p. 271). (Freud is referring to the Irma [Emma] dream. In the treatment of Irma, Freud called in Fliess, who operated on Irma and badly mangled the case. Freud, in the dream, blames the bad results on Otto [Oscar Rie] and Breuer. See Schur [1966] and Gay [1988] for further commentary on this historic dream.) If the dream is not designed to express hostile wishes towards Otto, what is happening according to Freud? It is his identification with Professor R, who "resembled me in having followed an independent path outside the academic world and had only achieved his well-

merited title late in life. So once again I was wanting to be a Professor!" (*ibid*.). This is Freud's "egoistic" concern or wish, the wish to be a professor. The obvious question remains, however: where are the childhood roots to this dream?

For this part of the analysis, we would have to leave Freud's writings (not completely) and venture into biographical detail about his life and the meaning(s) of certain childhood events that he alludes to in his descriptions. An accident that Freud suffered when he was three years old would begin this odyssey, but here I will rest content by saying that Freud's associations certainly take him back to childhood events and to obvious oedipal rivalries. These rivalries are paralleled in the dream and there are, in addition, hints about hostility towards his wife. How one might ultimately interpret this dream would obviously depend on many factors, but there are certainly a number of entrepreneurs and capitalists contributing to the formation of this dream. Rivals and love objects abound from this one-line dream. This dreams affords us the possibility to see Freud's understanding of dream formation in several different ways. First, we can see clear day residue (Freud's wife's concern about Otto) that relates back to both an important event in Freud's adult life as well as his childhood. We can see how a manifest element of a dream that seemingly showed concern for a friend was, in fact, hiding what Freud called "egoistic" wishes. He interprets the dream as being a disguise for his ambitious wishes. All dreams disguise wishes, and here we see that Freud means egoistic wishes in the sense of self serving or ambitions. If we accept that his egoistic ambitions relate to childhood sexual wishes, than we have gone as far as we can in exploring Freud's dream in terms of the entrepreneur–capitalist distinction. It is clear, in the dream book, that Freud did not reveal the childhood roots of his dream.

Transference and the origins of the wish

Let us begin with a question that Freud will answer in several ways in the theoretical matrix of Chapter Seven. How does the entrepreneur appropriate capital to form the structure of the dream? More precisely, we might ask where in the dream is the greatest outlay of capital. Freud answers by saying that usually in dreams there is a point of sensory intensity, and, "as a rule", this marks the most direct representation of the dream-wish. If we are able to unravel the meaning of the dream, then we will see that psychical intensity of the dream-wish is replaced by the sensory intensity of the manifest dream. To explain this, Freud comes up with an idea that is similar to one that he has introduced earlier (1894a, 1895), and that is the notion of a false connection. Here, however, he states it in a manner that brings together another concept that he has previously introduced, transference.

> The elements in the *neighbourhood* of the wish-fulfilment often have nothing to do with its meaning… owing to their being in what is often an artificially established connection with the central element (wish), they have acquired enough intensity to become capable of being

> represented in the dream. Thus the wish's… power… is diffused over a certain sphere surrounding it. In… dreams that are actuated by several wishes, it is easy to delimit the spheres of the different wish-fulfilments, and gaps in the dream may often be understood as frontier zones between those spheres. [1900a, p. 562]

Freud maintains that the dream-wish can become attached to an element of the dream that surrounds the main point of representation. How is that point of representation determined? Freud relates that they may be derivatives of distressing thoughts that run contrary to the wish. This is similar to his previous notion of a false connection being established. Now, however, Freud is telling us more about the defensive nature of the false connection; the wish is disguised when represented by distressing thoughts that run contrary to the central aims of the dream-wish. Thus, Otto was seen by Freud as being ill, and this disguised Freud's unconscious egoistic wish. Freud seemingly could have been concerned with Otto's health, but, after analysis, he says that this is not the reason, for, in the dream, the idea of concern for Otto is a false connection that disguises his true wish.

It is not, however, only ideas that run contrary to the wish that are represented in the dream. Sometimes, the most insignificant daytime images are found in the dream. Freud, in explaining this, begins to give us some of his theoretical ideas about transference. Unconscious ideas are incapable of entering the pcs.–cs. system unless they are able to exercise an effect on and "establish a connection with" (*ibid*.) an already existing pcs. idea. The unconscious idea transfers its intensity to this idea (or makes this idea appreciably more important), and thereby is "covered" by the pcs. thought or representation. "Here we have the fact of 'transference' which provides an explanation of so many striking phenomena in the mental life of neurotics" (*ibid*., pp. 562–563). Freud, as we have seen,