psychoanalytic tradition has leaned away from belief in a person’s capacity to change. Analysts speak of regression and the repetition compulsion. Yet, at one time analysis represented a revolutionary movement. It has now become a new tradition. It represents the conservative, she said.

Dr. Menaker pursued the idea of change. A river of psycho-social evolution is the force which creates the possibility of change. She questioned, “What is the life force?” and, “How is movement initiated?”

The move from traditional to transitional creates a state of adaptive tension. Psycho-social man strives to overcome tension. Conflict is a social motor for change. She called this an evolutionary viewpoint.

Pointing to Freud’s, “GROUP PSYCHOLOGY AND THE ANALYSIS OF THE EGO,” she commented about its stress on the idea of social influence and social framework as giving the illusion of stability.

But, Dr. Menaker continued, now is a time of turmoil. The individual is overwhelmed by the transitional nature of changing values. People are having problems with definition of role.

In society today, there is a rapid transition in child rearing, marriage and relationships between man and woman. These changes have many causes. They trigger both progress and problems.

Dr. Menaker said that when we analyze only the intrapsychic, we neglect the psycho-social dimension.

Today, in psychoanalysis, we have shifted from the Psychology of Conflict to the Psychology of Adaptation and the Developmental approach. In particular, Dr. Menaker referred to the studies of early childhood by Escalona and Mahler.

She also spoke of the sociological changes since World War Two, a convulsive transition which has brought new tasks and changed values. We have a new code of interpersonal relations in family and sex mores. Where we were once underexpressive, now, we are over-expressive. We have new patients with new problems. We have new insight, much subtler understanding, modified approaches.

We deal now with Narcissism and Borderline pathology where once we dealt more with Neurosis.

All of this has not escaped the psychoanalytic community.

Dr. Menaker called our attention to a recent paper by Anna Freud which discusses the state of psychoanalysis. In this discussion, she cites one paper by Rangell setting forth the classical view and another by Andre Green in which he speaks of treatment of the Borderline and the psychotic. These are people suffering from a Basic Fault, from damage to normal development of the ego. Such treatment is meant to be reparative, requires a closeness between the analyst and the patient that deals with pre-verbal issues. This is a treatment that calls for technical modifications.

Dr. Menaker said that the work of Ferenczi holds a greater significance today to the widespread need of our time.

She asked, “What is Psychoanalysis?” and wondered what were its conceptual limitations.

Dr. Menaker said that in analysis, the one-to-one relationship is the hallmark of the method. She pointed out that the method of therapy is not the same as the method of investigation. In therapy ultimately the question is what is the therapy—continued on page 4, column 1

Psychoanalysts of the mid-twentieth century have inherited, it seems to this writer, something of a confused identity. We hover in our work, as Theodor Reik reminded us, between art and science. As I have mentioned before, we attempt to bring to our patients a disciplined subjectivity, a theoretically informed humanism in order to be helpful guides but not shamans in the underworld of the unconscious. The therapeutic setting in which we work, in its best moments, facilitates growth; yet we are not teachers of content so much as initiators in a process. To accomplish this process, Freud’s theories of the mind and of technique are enormously helpful. To the extent that analysis is an art, we rely on a relaxed receptivity to our informed preconscious; to the extent that it is a science, we attempt to master theory and codify technique. Yet it is particularly in the area of technique that there is a danger, I believe, of an ideological commitment to Freud, rather than a mature, scientific commitment to learning.

Erik Erikson has written of the adolescent’s beneficial need to commit himself to a cause beyond himself, to define himself by a commitment to a social group or philosophy as a way of stabilizing and strengthening his capacity for loyalty. But this stage of ideological commitment, as we all know, becomes destructive if it is not integrated eventually within the adult’s experience of the world. Ideology is marked by an adherence to a set of beliefs and consequent rules which become normative for self-definition; it is usually intolerant of alternative theories since what is threatened is one’s “place” in the world. Ideological commitment promises its followers “answers” and implicit in this is the belief that a “right way” can be found, all of which serves to alleviate personal anxiety while also being used unconsciously as a judgment on those who do not believe and practice the “right way.” It is not until we human beings attain wisdom, it seems, that we tolerate our ignorance while still recognizing our self-worth. Ideology is dangerously close to paranoia, since basically paranoia, as Winnicott reminds us, is the need for the presence of a system of thought by which to define oneself. It is also markedly akin, we might note, to Western religious systems.

If we turn our attention to adult scientific commitment, we can speak of its major characteristics as the following: a mythologizing of the world in terms of any personal salvation system and a consequent rigorous commitment to a process of exploration rather than to a content of explanation; an appreciation of a relativism that comes not from the arbitrariness of ideology, but from the belief that a “right way” can be found, all of which serves to alleviate personal anxiety while also being used unconsciously as a judgment on those who do not believe and practice the “right way.” It is not until we human beings attain wisdom, it seems, that we tolerate our ignorance while still recognizing our self-worth. Ideology is dangerously close to paranoia, since basically paranoia, as Winnicott reminds us, is the need for the presence of a system of thought by which to define oneself. It is also markedly akin, we might note, to Western religious systems.

If we turn our attention to adult scientific commitment, we can speak of its major characteristics as the following: a mythologizing of the world in terms of any personal salvation system and a consequent rigorous commitment to a process of exploration rather than to a content of explanation; an appreciation of a relativism that comes not from the arbitrariness of subjectivity—its right if it works for me—but, rather, from an understanding that the goal of strenuous study is the liberating awareness of our own ignorance and of the role of “context” for all knowledge. With a scientific attitude we might say that, having imposed serious and thought-out safeguards, we expect to make significant errors as we search for what is valid. If we can no longer live with the awareness of our ignorance, we have probably forgotten how to play in the world and most assuredly have compromised any truth we may possess. Freud would not have stumbled on the significant truths which he did were he not capable of playfully entertaining alternative explanations to the accepted ones for the phenomena of dreams and symptoms which confronted him. continued on page 5, column 2
cused specifically on the concept of defense and its relation to developmental arrests. In developmental arrests there is a failure of ego development and of self-object differentiation, both of which result from a failure of the child’s environment which produces a lack of internalization. The use of defenses, on the other hand, presupposes structuralization of the psyche; they are employed to ward off anxiety resulting from structural conflict. Stolorow, then, viewed the defenses as part of ego development in relation to the structuralization of the representational world. However, he pointed out that there is a developmental line for a defensive process, that is, there are pre-stages of the defenses. It is this double view of defense—as an element of psychic conflict and as having a pre-stage—that Stolorow then proceeded to explore in terms of projection, incorporation and splitting.

Turning to projection, he pointed out that when it is used defensively contents are excluded from the self-representation and located in the object-representation to alleviate structural conflict. For example, a narcissistic patient may view the analyst with contempt instead of experiencing his own self-contempt. However, the pre-stage of this defense appears differently. In mirror and twin transferences the patient may experience a sadistic fantasy as part of both the self-representation and the object-representation. Nothing is warded off; rather, the patient is attempting to maintain a similarity between himself and the other. It is important to distinguish these two different clinical situations; for in the first case the analyst, according to Stolorow, should interpret what is being warded off, while in the second case he should focus on the self-object confusion which results from a developmental arrest.

Incorporation is used defensively to ward off the painful affect of loss of the object by relocating the contents of the object-representation into the self-representation. Stolorow gave as an example a patient who fantasized that a penis protruded through her vaginal lips. In order to ward off the instinctual conflict provoked by her father’s death when she was four years old, she incorporated a valued aspect of him which both kept him alive and controlled her ambivalence. Stolorow illustrated the pre-stage of this defense with a patient who experienced her friends as embodiments of ideal aspects of her parents. Increasing her self-esteem through contact with these friends, she thus evidenced a lack of self-object differentiation which appeared in a wide variety of situations and which was not conflict specific. Clinically, then, the analyst should in the first case analyze the defensive function of warding off a danger, while he should in the second case focus on the need for merger.

Splitting as a defense is the keeping apart of conflicting images to avoid anxiety, and this can only occur after an integration of the psyche into a whole. The need to protect the object presupposes the integration of the object image. Defensive splitting is characterized by the attachment of all-good images on one object and, simultaneously, of all-bad images on another, separate object. As an example, Stolorow presented a patient who encapsulated an image of her older lover as vigorous and healthy in order to ward off her conflict over ambivalence which related to her mother’s death. The pre-stage of defensive splitting, however, lies in an ego which is develop-

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mentally incapable of integration of images. This is manifested clinically by the rapid alternation of all-good and all-bad images on the same object. Thus, in the borderline the inability to integrate is not linked to a specific conflict which is warded off; rather, it pervades broad areas of functioning. Again, this distinction between the defense and its pre-stage has technical implications. Stolorow suggested that the analyst interpret the defensive function, while in dealing with the pre-stage, confront the patient with the inconsistencies.

Following the presentation, discussant Herbert Strean, after reviewing the history of the concept of defense, noted that Stolorow's formulations could be used counter-transferentially by the analyst to defend against his own impotence and rage. He stated further that murderous rage in preoedipal patients should be explored and that this exploration, with its tolerance by the analyst, will lead to differentiation of self- and object-representations.

PSYCHOANALYSIS AND DRAMA

By HELEN HELLMAN

The participants in the panel on PSYCHOANALYSIS AND DRAMA were respectively Dr. Donald M. Kaplan, Associate Clinical Professor of the NYU Postdoctoral Program in Psychology; Professor Stephen Aron of the Drama Department of the Juilliard School; and Dr. Alan Roland, Member of the Faculty of NPAP.

Dr. Kaplan is a psychoanalyst who has been "knocking around the theater" for many years. Dedicating his discussion of how psychoanalysis is relevant to new theater to Dr. Benjamin Nelson, he referred also to his contact with Richard Schechner, an innovative director during the 'sixties. He outlined briefly his understanding of the intentions of "new theater," which he saw as "defying the complacencies of human relations." He mentioned the "happenings" of the 1960's, the Living Theater production of The Connection, and other works which attempted to disarm and alter notions of traditional theater. In differentiating between "real life" and theater, he cited baseball as an example of real life. Schechner insisted baseball was theater. Discussing gesture and performance, he mentioned that baseball players rarely suffer stage fright, while a theatrical performer's difficult task was fairly often disrupted by "drive arousal." He equated performance with poise, which was unlike usual behavior repertoire.

Considering the script, he defined it as a prescription for actions which do not exist and saw the script as a "transitional object," according to Winnicott. He compared the script to the deinstitucionalized object and suggested that when the performance is ended, the transitional object is relegated to limbo.

Dr. Kaplan knocked around many interesting ideas in his discussion, but gave the impression that new theater and happenings began with Schechner and the 'sixties. Actually new theatrical forms evolved in attempts to shatter traditional theater as early as the 'twenties, with surrealist provocations in France, and spectacular innovations in dance and drama all over Europe.

Professor Steve Aron, of the Drama Faculty of Juilliard,