

FROM OEDIPUS TO ORPHA: REVISITING FERENCZI AND SEVERN’S LANDMARK CASE.

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“Myth is neither a lie nor a confession; it is an inflection.”

—Roland Barthes, in *Mythologies*.

I therefore claim to show not how men think in myths, but how myths, operate in men’s minds without their being aware of the fact.” —Claude Levi Strauss, in *The Raw and the Cooked*.

Clearly, the myth of Oedipus provided the rhythmic pulse that gave psychoanalysis its first voice. The myth throbs with conflict, murderous aggression, incest, and guilt. The myth caused psychoanalysis to pulsate with these same themes, which Sigmund Freud developed into a metapsychology of psychoanalysis. However, Sandor Ferenczi gave psychoanalysis a contrasting, although not opposing, treatment-oriented voice. Ferenczi’s treatment-oriented voice is especially heard in his work with the traumatized American patient Elizabeth Severn, known as R.N. in *The Clinical Diary* (1932). In revisiting this landmark case I highlight not only Ferenczi’s voice, but also the voice of patient and clinician Elizabeth Severn, as well as the obscure and all too easily overlooked voice of a phenomenon they called “Orpha,” a lifeorganizing fragment of Severn’s personality. I offer an expanded understanding of the universality of Orpha, its links to the Orpheus and Eurydice myth, as well as its relevance for present-day treatment of trauma.

In contrast to the myth of Oedipus, the myth of Orpheus and Eurydice aches with separation, fragmentation, suffering from acts of violation, as well as attempts at reclamation motivated by love. These are themes in Ferenczi’s trial-and-error work with Severn. In the bright light of the current Ferenczi renaissance, it must not be forgotten that Ferenczi and Severn ultimately found the nature of trauma to be dark and unrelentingly complex. This analytic couple choreographed a complex treatment that attempted to balance the intersubjective-interpersonal world with the intrapsychic world; the possibility of real trauma with pathological fantasy; the need for a comforting preparatory treatment filled with empathy as well as a harsh “descent” into inconsolable sorrow over losses due to trauma; an analyst who must be muse, mother, and “undertaker”; and finally new psychic growth that can only be planted alongside of the permanent ruins left by trauma. Such a treatment reminds us both of the promise and the limits of our art and science.

THE EMERGENCE OF THE FIRST VOICE OF PSYCHOANALYSIS

Sigmund Freud first intones the myth of Oedipus in an October 15, 1897 letter to his confidant, Wilhelm Fliess. It had been a year and a half since Freud’s father had died. Freud was in the midst of self-analysis. Freud wrote to Fliess:

My self analysis is in fact the most essential thing I have at present and promises to become of the greatest value to me if it reaches its end. ... A single idea of general value dawned on me. I have found, in my own case too, [the phenomenon of] being in love with my mother and jealous of my father, and I now consider it a universal event in early childhood. ... If this is so we can understand the gripping power of Oedipus Rex, in spite of all the objections that reason gives against the presupposition of fate ...the Greek legend seizes upon a compulsion which everyone recognizes because he senses its existence within himself. Everyone in

the audience was once a budding Oedipus in fantasy and each recoils in horror from the dream fulfillment here transplanted into reality. (Freud and Fliess, 1985, pp. 207-272).

In one astonishing leap Freud moves from making a single observation about himself, in the midst of his self analysis, to making a universal statement about all mankind, based on his free associations to the Oedipus myth. In 1900 his bold formulation is first published in *The Interpretation of Dreams*. He declares a third of the way into the book:

...falling in love with one parent and hating the other forms part of the permanent stock of the psychic impulses which arise in early childhood. . . . Antiquity has furnished us with legendary matter which corroborates this belief, and the profound and universal validity of old legends is explicable only by all equally universal validity of the above-mentioned hypothesis, (pp. 161-162)

Freud's belief in the absolute centrality of his interpretation of the oedipal myth for the development of psychoanalysis grew even stronger over time (Jones, 1955, p. 291; Laplanche and Pontalis, 1973, pp. 282-283; Gay, 1988, p. 113). He saw this drama as the explanation for both normal child development and the origin of psychopathology. Freud now considered many patients' stories of seduction as imagined gratification of exceedingly intense oedipal impulses (Levin, 1978, p. 203). His thinking was being recast with this single oedipal idea. Listen to his footnote in the expanded edition of *The Interpretation of Dreams*:

The "Oedipus complex" which was first alluded to here in *The Interpretation of Dreams*, has through further study of the subject, acquired an unexpected significance for the understanding of human history and the evolution of religion and morality. See *Totem and Taboo*, (p. 162)

Now in his expanding meta-theory, even civilizations, as well as religions and human conscience, are built on the soil of the oedipal myth and the son's relationship to the father. Freud's meta-theory may be seen as a brilliant culmination of the Enlightenment project, "bringing even human consciousness under the light of rational investigation" (Tarnas, 1991, p. 328). It was clear that by the early 1920s until the early 1930s (Freud, 1927; Rycroft, 1968, p. 119) the oedipal myth had become his key "anthem" of psychoanalytic theory and practice. Unfortunately, the anthem was often not so much sung as increasingly "chanted" as mantra, with a heavy patriarchal inflection. Paradoxically, in his zeal to solve the mysteries of the mind through rational science, Freud's oedipal theory developed into doctrine. Freud remarked, concerning the Oedipus complex, "recognition of it has become the shibboleth that distinguishes supporters of psychoanalysis from their opponents" (Freud quoted in Jones, 1955, p. 291). Ironically, Freud the rational scientist was creating an "ideology" very similar in nature to some religious and theosophical movements that claimed to have found the "answer" that would unlock the mysteries of the universe. The first voice of psychoanalysis was clearly that of the father, a father determined that the first inflection of psychoanalysis be its only inflection. Fortunately, a second voice was to emerge, as we shall now see.

THE EMERGENCE OF THE SECOND VOICE OF PSYCHOANALYSIS

In the introductory chapter of Sandor Ferenczi and Otto Rank's *The Development of Psychoanalysis* (1924), faint "murmurings" of what would become, by 1932, a contrasting treatment-oriented inflection could be heard. Ferenczi, who originally wrote the critical part of the work (Newton, 1924), pointed out:

In contrast to the rapid growth of psychoanalytic theory, the technical and therapeutic factor which was originally the heart of the matter and the actual stimulus to every important advance in the theory has been strikingly neglected, in the literature as well as in practice. This could give the false impression that the development of technique has stood still in the meantime, since Freud himself has always been, as is well known, extremely reserved on this point, to such an extent, indeed, that it is almost ten years since he has published any work on the subject. His few technical articles ...were for analysts who themselves had not undergone an analysis, the only correct indication for their technical activity although they [Freud's technical articles], according to Freud's point of view, are certainly incomplete and in certain points, on account of present development, antiquated and seem to need modification (p. 2).

The "murmurings" of Ferenczi and Rank were attempts to conceive of a psychoanalytic voice more in tune with the needs of individuals desperately looking to psychoanalysis for change in their lives. Indeed, it was at this time that just such an individual, Elizabeth Severn, desperately in search of cure, traveled from America to Budapest in 1924 to begin what would become a landmark analysis of trauma with Sandor

Ferenczi. Perhaps she had heard of Ferenczi through his writing partner Otto Rank, with whom she consulted when he visited America. This troubled woman was to play a significant part in the shaping of this second inflection for psychoanalysis.

While Freud was embracing a deep interest in establishing a model of the mind built primarily on his own oedipal meta-theory (Haynal, 1988), the “murmurings” of Ferenczi and Rank were cradling a deep interest in curing persons such as Elizabeth Severn.

Psycho-analysis seems now to have reached a point of development where our knowledge, of the previously neglected, but larger part of mental life, is sufficient to obtain important therapeutic results, provided that one clearly understands how this knowledge can be effectively put into practice [*italics in the original*].

We have evidently taken this cardinal point much too little into account. It seems rather, that in the analysis, frequently that which was theoretically significant, rather than what was analytically important was sought for.... To put it extremely the problem could be formulated somewhat as follows: Psycho-analysis, which has developed from a therapy into a science, even into an attitude toward life, must carefully differentiate what part of this great theoretic structure has remained essential therapy, in the narrower sense of the word. Instead of mistakenly applying the theory “therapeutically” in a lump, one should rather ask oneself what part of the whole of psychoanalysis has proven suitable for application in medicine, and what remains as general psychological knowledge, as theory or at the utmost as “therapy of the normal” (pedagogy). Thus, for example, the “complexes” are results of the theory which retain their value for normal psychology, their establishment must be a preliminary assumption and can never be the outcome of therapeutic endeavor (to analyze out a complex). It was a comprehensible, but fatal, mistake of some of our adherents to think that in the analysis the mere finding of the mistake in development should at once have a therapeutic effect; in contrast to this one sided “socratic” interpretation the actual effective remedy must be sought in properly connecting the affects with the intellectual sphere. (Ferenczi and Rank, 1924, pp. 50-51)

The above passage foreshadowed the emergence of a contrasting voice that could enrich the “singing” of the anthem with multiple inflections (i.e., “connecting the affects with the intellectual sphere”). Ferenczi’s concern was that the first voice of psychoanalysis not grow into an intellectual “mantra,” where the analyst one-sidedly chanted “incantational interpretations” of the oedipal complex over the analysand. One sees especially in Ferenczi’s writings in the 1920s his continual search for new ways to understand the analytic situation. But in doing so, he was also very much attached to the collaboration with his analytic colleagues and the analytic community (Haynal, 1988, p. 51). One need only peruse the first volume of *The Correspondence of Sigmund Freud and Sandor Ferenczi* (Brabant et al., 1993) to understand the enormous amount of intellectual and social intercourse and crossfertilization of ideas between Freud and Ferenczi from 1908 to 1914. Indeed, Ferenczi and Rank wrote “The Development of Psychoanalysis” in response to Freud’s offering a prize for the best study on the correlation of theory and technique (Freud, 1922, p. 270). But it is also true that one need only read the second volume of *The Correspondence of Sigmund Freud and Sandor Ferenczi* (Falzeder et al., 1996) to see their views begin to diverge, culminating in the letters in the third volume (soon to be published) detailing the following tragic piece of psychoanalytic history.

Initially, Freud saw Ferenczi and Rank’s work as “a refreshing intervention that may possibly precipitate changes in our present analytic habits” (Freud and Abraham, 1965, February 15, 1924, p. 346), but then Freud cryptically added, “Personally, I shall continue with classical analysis” (p. 346). Over a period of time, Freud and others in his circle seemed to mistakenly hear these “murmurings” as a competing voice, and increasingly efforts were made to mute them (Jones, 1957; Haynal, 1993).

Freud’s attempts culminated in a concerted effort to “abort” Ferenczi’s delivering his “Confusion of Tongues” paper at the 1932 Wiesbaden International Psycho-Analytic Congress (Jones, 1957, Gay, 1988). In this controversial paper, Ferenczi dared to delve into the world of actual trauma, not the fantasy product of abnormal oedipal impulses, but the product of real acts of incest, which then affected personality development. Much of the paper sprang from his work with Elizabeth Severn. While it is beyond the scope of this paper to detail the complex reasons for Freud’s attempted “aborting” of Ferenczi’s maternal treatment murmurings, various other writers, such as Michael Balint (1968), Paul Roazen (1975), Judith Dupont (1988), Axel Hoffer (1990, 1991), and Ernst Falzeder (1994), have elaborated their understandings of this dark piece of psychoanalytic history. Suffice it to quote Bennett Simon in his well-balanced article, “Incest—See

Under Oedipus Complex’: The History of an Error in Psychoanalysis” (1992): “Excessive adherence to the centrality of the Oedipus complex seems to have rendered it ...an act of betrayal, heresy, or foolishness to delve too much into severe trauma that was not directly oedipal” (p. 981).

Ironically, in his attempt to abort Ferenczi’s paper, Freud both proved the validity and reliability of his oedipal thesis concerning the conflict between fathers and sons, and at the same time prevented his oedipal voice from becoming more energized by the emergence of other voices. What has come to be known in the literature as the “Freud-Ferenczi Controversy” grew out of misunderstandings about the relationship between these two men and their contrasting inflections for psychoanalysis. Ferenczi’s new treatment-oriented inflection in his “Confusion of Tongues” paper was never intended to grow into a competing voice in psychoanalysis, but rather a much needed contrasting voice that would only enrich the timbre and tone of psychoanalysis (Judith Vida, personal communication, August 23, 1996).

Fortunately for psychoanalysis, a determined but drained Sandor Ferenczi, less than a year before his death, did present his “Confusion of Tongues Between Adults and the Child” paper at Wiesbaden in 1932. Ernest Jones, writing about this congress gives the following account:

At the Congress itself a delicate question arose. Freud thought the paper Ferenczi prepared could do his reputation no good and begged him not to read it. Brill, Eitington, and van Ophuijsen went further and thought it would be scandalous to read such a paper before a Psychoanalytic Congress. Eitington therefore decided to forbid it firmly. On the other hand I thought the paper too vague to leave any clear impression, for good or bad—which it turned out to be—and that it could be so offensive to tell the most distinguished member of the association, and its actual founder, that what he had to say was not worth listening to that he might well withdraw altogether in dudgeon. (1957, p. 173).

What follows are a few excerpts from Ferenczi’s “The Confusion of Tongues Between Child and Adults, A Language of Tenderness and of Passion” (1933)—the paper Jones said was “too vague to leave any clear impression” and “not worth listening to” (Jones, 1957, p. 157).

Empathic stress on the traumatic factors in the psychogenesis of the neuroses ...had been unjustly neglected in recent years (p. 156)... sexual trauma, as the pathogenic factor, cannot be valued highly enough (p. 161)... The immediate explanation that these are only sexual fantasies of the child, a kind of hysterical lying—is unfortunately made invalid... The real rape of girls who have hardly grown out of the age of infants, similar sexual acts of mature women with boys, and also enforced homosexual acts, are more frequent occurrences than has hitherto been assumed (pp. 161-162)... “These children feel physically and morally helpless, their personalities are not sufficiently consolidated in order to be able to protest, even if only in thought, for the overpowering force and authority of the adult makes them dumb and can rob them of their senses. The same anxiety, however, if it reaches a certain maximum, compels them to subordinate themselves like automata to the will of the aggressor, to divine each of his desires and to gratify these; completely oblivious of themselves they identify themselves with the aggressor [*italics in the original*]). Through the identification, or let us say, interjection of the aggressor, he disappears as part of the external reality, and becomes intra- instead of extra psychic; the intra-psychic is then subjected, in a dream like state as is the traumatic trance, to the primary process.... When the child recovers from such an attack, he feels enormously confused, in fact, split— innocent and culpable at the same time—and his confidence in his own testimony is broken (p. 162) ...if the shocks increase in number during the development of the child, the number and the various kinds of splits in the personality increase too, and soon it becomes extremely difficult to maintain contact without confusion of all the fragments, each of which behaves as a separate personality, yet does not know of even the existence of the others. Eventually it may arrive at a state which— continuing the picture of fragmentation—one would be justified in calling atomization. One must possess a great deal of optimism not to lose courage when facing such a state. (p.165)

In “delivering” this paper Ferenczi had finally given birth to a radically different treatment inflection for psychoanalysis. He was offering psychoanalysis a treatment-oriented voice. This newly emerging treatment oriented voice for psychoanalysis was never intended to be a competing voice to Freud’s oedipal inflection for psychoanalysis. Ferenczi’s concept of trauma was a compliment to Freud’s (Haynal, 1993, p. 65) and, I believe, it was a much more sobering concept of trauma than some present day psychoanalytic “brokers” of

Ferenczi realize. It is a mistake of such brokers to buy or sell Ferenczi or Freud “stock” too cheaply. Ferenczi never totally denied the role of pathogenic fantasies, just as Freud never totally rejected the traumatic etiology of some neurosis. What Freud and Ferenczi disagreed on was the frequency of traumatic etiology (Dupont, 1994, p. 206). Neither was Ferenczi merely returning to Freud’s old 1896 “Seduction Theory.” In surveying *The Legacy of Sandor Ferenczi* (Aron and Harris, 1993), a number of authors proclaim his staggering contributions to psychoanalysis, which culminated in “The Confusion of Tongues” paper and in his painfully personal *The Clinical Diary* (1932). In these last works, and particularly in his work with Severn, Ferenczi had progressed from seduction theory to actual treatment of trauma.

Axel Hoffer has rightly said that Ferenczi became the mother to psychoanalysis, just as surely as Freud was its father (1993, p. 75). But Judith Vida has also rightly insisted that, “If Ferenczi is to be thought of as ‘the mother, we need to think some more about what we mean by mother’” (1997, p. 412). In the wake of the current Ferenczi renaissance, sometimes fueled by quick and overly simplistic readings of his *Diary* and the *Freud-Ferenczi Correspondence*, I agree with Vida that the trend, unfortunately, is to see Ferenczi as a very indulgent, gratifying mother, and to see Freud as the abstinent, more neutral father. Such misunderstanding can lead to a kind of cheapening of both Freud and Ferenczi and a superficial view of the treatment of severe trauma that discounts its enduring dark nature. Ferenczi and Severn’s landmark case offers us a sobering and substantive view of the nature and treatment of trauma.

THE “SUSPECT” ELIZABETH SEVERN

According to Freud, this “suspect American woman” turned Ferenczi away from psychoanalysis, influenced him with bizarre metaphysical beliefs in thought transference and the occult, and hastened Ferenczi’s death due to her demands on him (Masson, 1984, pp. 180181). Elizabeth Severn has been one of the most maligned, vilified, and misjudged of patients ever written about in psychoanalytic history. Was she Ferenczi’s “evil genius” as Freud suggested (Jones, 1957, p. 407), or just an uneducated, deeply disturbed, and demanding woman? And how are we to understand her deep interest in theosophy and the spiritualist world as well as psychoanalysis?

On the title page of her first book, *Psycho-therapy, Its Doctrine and Practice* (1913), Severn refers to herself as “Elizabeth Severn, Ph.D.” In reality, her name was not Elizabeth Severn, and she was not a Ph.D. According to Fortune’s extensive interviews with her daughter Margaret, she was born Leota Brown in the midwestern United States in 1879 and apparently had no academic credentials (Fortune, 1993, p. 104). By the turn of the century, she married and gave birth to a daughter. In 1905, the marriage ended, and the following year she had a major breakdown. She “suffered chronic, often debilitating, psychological and physical symptoms—including confusion, hallucinations, nightmares, and severe depression, which often left her feeling suicidal” (Fortune, 1993, p. 104). She apparently developed an interest in theosophy while being treated by a psychologically minded physician who utilized “the power of positive thinking with a theosophical turn” (Fortune, 1993, p. 103). While she had not earned a degree, she declared in a 1907 letter to her mother, “I am going to work now to become a healer myself. There is no question but that I have the power” (Fortune, 1993, p. 104). This determined woman started seeing patients, moved to London, and began to write books. These seldom-read books have been a source of misunderstanding about her. Within their pages she mingled the metaphysical spiritualist world with the psychological world.

Severn’s interest in spiritualist phenomena was much maligned by Ernest Jones and Sigmund Freud as pathological. They and more contemporary commentators on Elizabeth Severn have forgotten two historical facts that make plausible Severn’s turning to the occult and theosophical realms as well as psychology in 1913. First, it is forgotten that by the end of the late nineteenth century there was “an enormous and enduring public appetite in the West for new and exotic forms of religious belief” (Washington, 1996, p. 25). The theosophical movement attracted the likes of the charlatan Madame Blavatsky as well as the more accomplished Oscar Wilde, William Butler Yeats, George Bernard Shaw, Frank Lloyd Wright, and Aldous Huxley (p. 25). Darwin’s theory of evolution altered the nature of religious thought in irretrievable ways. “Religion itself was drawn under the spell of natural science and sought science like proofs for its beliefs” (Hinshelwood, 1995, p. 136), as did psychoanalysis. Second, as Freud and the society in which he lived became “amnesic” to the serious study of actual trauma (“forgetting” about his earlier discoveries, as well as

those of Charcot, Janet, and Breuer), serious attention to altered states of consciousness was left once more in the realm of spiritualism and the occult (Herman, 1992, p. 15). The chief researcher of the Society for Psychical Research, Fredric Myers, saw similarities between psychic phenomena and hysteria.

By the turn of the century, a powerful group of the intellectual elite, from Cambridge academics, to Carl Jung, William James, Joan Riviere, James Strachey, Sigmund Freud, and Sandor Ferenczi, were attempting to use scientific methods to study spiritual phenomena (Hinshelwood, 1995, p. 136). It is little wonder, then, that Elizabeth Severn turned to spiritualism to make sense of her experiences. But Elizabeth Severn's interest was colored by a more life-and-death attempt at psychic survival than mere academic investigation.

In these writings we are witness to her disturbance as well as her clinical acumen. On the one hand, hidden in her text are thoughts, interests, and ideas that actually paralleled some of Ferenczi's innovative thoughts, interest, and ideas about theory and technique. Granted these ideas were in a very nascent form in Severn's work, but they were certainly there before she began analysis with Ferenczi. For instance, there are sections of her books where she seemed to understand the exquisite potential for healing in psychoanalytic treatment and to grasp with ease how the person of the healer is the essential tool of the work. She very casually makes the observation that, "It is the personality of the physician which is his channel for reaching those whom he would help." She is implying not only the necessity of a two-person relational perspective, but that it is the physician's use of his personality, his countertransference, which is the channel for reaching the patient. She had the ghost of an idea, which was to later be a major theme of Ferenczi's clinical work. Amazingly, all of this was written long before she was able to actually appropriate the experience for herself, and long before psychoanalysis would embrace these ideas.

On the other hand, not at all hidden in her text are disturbing references to a "Greater Self" (p. 144); "The Source of all supply that is inexhaustible" (p. 19); "Infinite Supply" (p. 99); even "The great in breathing of life supreme"; and finally and curiously, she refers to this "Greater Self" as "Infinite Intelligence" (p. 99). She insisted that, "With the idea of the immanence of God comes the elevation of the self as a part of God" (1913, p. 139). It is critical to understand how anesthetizingly comforting these writings were to this traumatized woman. I believe they were an "Orphic" means by which she held together a fragmented self until she could begin treatment in 1924 with Ferenczi. But it would take Ferenczi many years to understand this Orphic phenomenon.

TREATMENT BEGINS

Ferenczi, in recollecting his first meetings with Elizabeth Severn in 1924, described her as having "excessive independence, and self assurance, immensely strong willpower as reflected by the marble-like rigidity of her facial features ...a somewhat sovereign majestic superiority of a Queen, or even the royal imperiousness of a king" (1932, p. 97). It could also be surmised that Severn might have found Ferenczi irritatingly similar in temperament to persons she was critical of in her 1917 book. She had written:

Those born to a sweet and sympathetic disposition, given to retiring into the background when any more positive personality chooses to assert itself, suffer not so much from a weak will, as from a form of sensitiveness which becomes positively harmful because of its inhibitory action upon their own natural impulses. The fact that this nature may be fine, or even of exquisite quality, and that it is usually an unselfish one, does not prevent it from entertaining too much respect and consideration for others to properly exercise its own rights and desires. It might even become, and often does, a regular doormat, to be imposed upon and walked over by every stronger nature in its vicinity. (pp. 168-169)"

The stage was being set for an intense transference-countertransference dance in which neither Severn nor Ferenczi, nor anyone practicing psychoanalysis at the time, knew the steps. This treatment dance was not about indulgence by an overly gratifying analyst mother, but a trial and error learning the serious choreography of treating trauma.

A thorough reading of Ferenczi's technique papers in the late 1920s and his painfully honest Clinical Diary (1932), as well as Severn's *The Discovery of the Self* (1933), reveal that this analytic couple did not carelessly frolic onto the analytic dance floor, quickly embracing traumatic memory as valid, gratifying one another with prancing permissiveness, or shimmying mindlessly through the mutual analysis. Their analytic dance was slow, often awkward, and full of interruptions and missteps. This is how all dance must first be

learned, and it is what makes a landmark case.

In 1928, Severn experienced repetitive memories of early sexual abuse involving being drugged and sexually abused at the age of 1 1/2, of again being attacked at age 5, and of being continually subjected to traumatic sexual and emotional attacks (Ferenczi, 1932; Fortune, 1993). It is clear from *The Clinical Diary* that Severn and Ferenczi neither rushed to see this material as immediate confirmation of real abuse, nor did they immediately consider it as solely oedipal fantasy. Instead, they were careful to scrutinize the validity of these memories, with Severn often questioning, “And still I don’t know if the whole thing is true” (Ferenczi, 1932, p. 98).

ORPHA

In a January 12, 1932, diary entry, after years of reflection, Ferenczi pieced together a clinical picture of deep fragmentation in this gifted yet disturbed woman. In this entry he writes not of Oedipus but of an odd something called Orpha. “The enormity of suffering and despair of any outside help, propel her toward death; but as conscious thought is lost, or abandoned, the organizing life instincts (‘Orpha’), awaken” (1932, p. 8). Ferenczi states that these same Orphic powers, i.e., these organizing life survival instincts, had assisted her throughout her developing years. This maternal fragment of the analysand’s personality played the role of an affectless “guardian angel.”

Ferenczi made numerous references to Orpha throughout his *Clinical Diary*, yet its clinical importance has been almost completely overlooked by most readers who perhaps have seen it as nothing more than a part of Severn’s bizarre metaphysical beliefs. Such a view is a misunderstanding of the term. Clearly, Ferenczi used the term to describe a fragment of Severn’s personality consisting of pure lifesaving intelligence. Although not mentioned in the *Clinical Diary*, the word Orpha has etymological roots in both the classical Greek myth of Orpheus and Eurydice, with which Ferenczi was familiar, and in occult Orphic mystery religions in which Severn was steeped. The myth of Orpheus and Eurydice concluded with Orpheus being torn to shreds—quite literally fragmented. But according to ancient writers, the head of Orpheus survived as a fragmented intelligence. The disembodied head was then enshrined and revered as a wise oracle in the ancient world, much as Severn enshrined and revered her own fragmented “Intelligence.” Thus, disembodied male Orpheus became Ferenczi and Severn’s disembodied female Orpha in the analysis. Ferenczi explained how fear and anxiety are transformed into this Orphic intelligence free of affect. He wrote, “in moments of extreme danger it is possible for the intelligence to detach itself from the ego and even perhaps from all affects” (p. 105).

This Orphic intelligence was experienced by Severn, as well as some current-day traumatized patients, as a kind of intrapsychic, affectless “guardian angel.” Severn’s mysterious 1913 and 1917 metaphysical books take on new meaning when viewed as desperate Orphic consolidation fantasies meant to create and maintain some sense of self in the midst of fragmentation. Witness Severn’s 1917 book with the lengthy title, *The Psychology of Behavior, A Practical Study of Human Personality and Conduct with Special Reference to Methods of Development*, a strenuous and obsessive attempt by Orpha to help Elizabeth hold together. The writing is of a much more insistent and defensive tone than her first book. Orphic willpower was wearing thin. One can almost feel the palpable desperation just below the tenacity with which she almost assaults you with her views on the unconscious, intellect, imagination and memory, will, emotion, sex, and the Self, all of which she desired to use in the service of avoiding painful affect. Her lonely Orphic crib-talk was growing desperate.

We all know the inspiring effects of asserting strength and courage where none is felt, of saying, “I am able,” or “I am not afraid” when both weakness and fear are the dominant sensations (p. 52) ... without a well developed selective power, without the control of the censor Intellect, we are constantly retaining and reviewing many useless, if not unpleasant or harmful images ... if not mastered or dispersed, these may hold us like a cloud of black imps to darken all our days.... Fortunately unpleasant experiences like these can be avoided by the wise expedient of taking care to disperse the disturbing images at the time they originate (pp. 117-121).... Even great personal losses as by death can be met with fortitude based upon a faith in the eternal goodness of all things. Such a view requires a detachment from a purely personal attitude, it is true, and a considerable amount of poise; but it brings its own rewards. It is well to recognize in this connection

that Grief in all its phases is based on a generic instability, is essentially selfish in its nature, and has not an aspect of constructiveness in it. (p. 222)

Page after page of such rigid and simplistic platitudes is indicative of the rather “fascist state of mind” (Bollas, 1992, p. 200) she now relied on to maintain her survival during these internal war years. This was not only Orpha functioning, but it was also the harsh internal persecutory aggressor stirring intrapsychic conflict. One might speculate that the outbreak of World War I in 1914 (which forced her to return from London, where she seemed to thrive, to America) might well have triggered old internal conflicts. Just below the very thin veneer of confidence presented in this 1917 work, she suffered “confusion, hallucinations, nightmares, and suicidal depression” (Fortune, 1993, p. 104). Orphic functioning was no longer able to adequately sustain her. Some failure of Orphic functioning must occur for analytic work to begin. By 1924, Ferenczi tells us her Orpha sought him out (Ferenczi, 1932, p. 121).

FRAGMENTATION AND THE NEED FOR A “COMFORTING PREPARATORY TREATMENT”

Ferenczi described Severn’s fragmentation as follows: first, a being suffering purely in her unconscious, of whom the awakening Elizabeth knows nothing. Ferenczi states that it is most difficult for the analyst to make contact with this part, “who can perhaps only groan and must be shaken awake mentally and sometimes physically” (1932, p. 9). Second, there is Orpha. This maternal fragment of the analysand’s personality plays the role of the “guardian angel.” Ferenczi says, “It produces wish fulfilling hallucinations, consolation fantasies, it anesthetizes the consciousness and sensitivity against sensations as they become unbearable” (p. 9). Lastly, Ferenczi describes a soulless part of the personality, with a body progressively divested of its soul, whose disintegration is not perceived at all or is regarded as an event happening to another person (p. 9).

Here is the precursor for all later psychoanalytic views of fragmentation of personality and object relations as seen, for example, in the works of Fairbairn, Winnicott, and Guntrip (probably influenced by Balint, Rickman, and the Sutties’ familiarity with Ferenczi). Winnicott came closest to reviving and describing the Orphic phenomenon when he wrote of a “protector self,” or borrowing from a woman patient the term “caretaking self” (1960, p. 142). But Winnicott lost Orpha’s scent as he increasingly referred to the phenomenon as a “false self.” Orpha is not a pathological or “false self.” Expanding on Ferenczi’s work on Orpha, I have described (Smith, 1998) how severe trauma activates a specific genetic grammar, a reserve libidinal instinct if you will, that allows for the continued survival of the species when attachment becomes impossible due to trauma. Orpha allows the individual to go on inhaling life through uniquely individualized routes that psychically avoid as much as possible the need for attachment. Orpha is called forth not out of the interpersonal/intersubjective matrix, but out of a very private space beyond the grasp of punitive self and others. Orpha’s major function is the revival and preservation of remaining fragments of self after trauma has occurred.

Thus, while Orpha is always “reviving” and preserving the self, Orpha is never “regenerating” or healing the self. Orpha does not possess “self righting” attributes (Lichtenberg, 1989, p. 328). However, as evidenced by Ferenczi’s work with Severn, Orpha can adapt to new conditions as the external environment changes. I believe that Ferenczi’s most innovative technique papers written in the late 1920s were deeply influenced, in part, by the difficult trial-and-error challenge of working with Elizabeth Severn, and were also, in part, an outgrowth of her strong recommendations and demands to Ferenczi regarding treatment as he grappled with the Orphic aspects of her person. For example, in Ferenczi’s 1929 paper, “The Principle of Relaxation and Neocatharsis” (originally called “Progress in Psychoanalytic Technique”), what he seems to be describing is a way he began to perform some of the “guardian angel” tasks that the exhausted Orphic fragment had had to shoulder alone due to trauma. He wrote of “a kind of comforting preparatory treatment” (1929, p. 122) in order to make contact with this weakened Orphic life-preserving fragment.

The casual reader who views Ferenczi as endorsing a kind of indulgent “remedial child rearing” in these papers misses his clear caveats. Ferenczi wrote of an “economy of suffering,” which necessitates “that the principles of frustration and indulgence should both govern our technique” (1929, p. 118, italics not in original). He stressed:

Why should I weary you in a discourse which is surely mainly concerned with technique, with this long

and not even complete list of half worked out theoretical arguments? Certainly not in order that you may wholeheartedly espouse these views, about which I myself am not as yet quite clear. I am content if I have conveyed to you the impression that a proper evaluation of the long neglected traumatogenesis promises to be fruitful, not only for practical therapy but for the theory of our science. (p. 122)

He continued by reminding the reader that, “I have remained faithful to the well tried analytical method of frustration as well, and I try to attain my aim by the tactful and understanding application of both forms of technique” (p. 123). Only after these caveats does he explain his “comforting preparatory treatment” of the weakened Orphic fragment.

I can picture cases of neurosis—in fact I have often met with them—in which (possibly as a result of unusually profound traumas in infancy) the greater part of the personality becomes as it were, a teratoma, the task of adoption to reality being shouldered by the fragment of personality which has been spared. Such persons have remained almost entirely at the child level, and for them the usual methods of analytical treatment are not enough. What such neurotics need is really to be adopted and to partake for the first time in their lives of the advantages of the normal nursery (*italics in the original*). (p. 124)

This is neither sweet nor shameful illicit gratification; it was only a part of the treatment. As he continued to work with Severn’s Orpha, he found “important information about dissociated parts of the personality” (1929, p. 119). “Sometimes a ‘bit of intelligence’ in the patient remains in contact with me even during the repetition of the trauma, giving me wise guidance as to how to handle the situation” (1932, pp. 106-107). Here were Orphic aspects of Elizabeth’s personality beginning to form a working alliance with Ferenczi. Orpha, gaining a voice, was able to enter the intersubjective world, while also making possible communication with split-off aspects of Severn’s personality. As he discusses the ideas of psychotic splits and dissociation in the paper, Ferenczi tells his audience, “For this notion I am partly indebted to discoveries made by our colleague, Elizabeth Severn, which she personally communicated to me.”

His “colleague” at times filled him with terror (Ferenczi, 1932, p. 99), and at times filled him with courage and/or desperation to rearrange his theory and technique. This landmark analysis was both interrupted and advanced by the famous, some would say infamous, mutual analysis.² Ferenczi placed himself in the position of pupil with Severn and struggled honestly with the countertransference reactions. Working together in this daring experimental mode, staying with her in trance and semi-trancelike states, allowing regression, relaxation, tripping over transference countertransference reenactments and the mutual analysis, and partaking “for the first time in ... the advantage of the nursery” (Ferenczi, 1929, p. 124)—together this analytic couple choreographed the first psychoanalytic movements of a treatment of trauma. Severn was well on the road to becoming a “rearranged” woman when the analysis was tragically broken off because of Ferenczi’s physical (though clearly not psychological) illness and eventual death in 1933 (Smith, 1998).

AN ORPHEUS AND EURYDICE TREATMENT DRAMA

While the dance could not be completed in this landmark case, what Ferenczi and Severn had actually been unconsciously choreographing in this treatment of trauma was not the myth of Oedipus, but the reenactment of the ancient myth of Orpheus and Eurydice. The Orpha fragment of personality (intellect split off from affect) must be provided with a way to be reunited with affect. Here was the purpose of Ferenczi’s “comforting preparatory treatment” -to empower Orpha with rather musical “vitality affects” (to use Daniel Stern’s term³) so that she could become more like a full-bodied young Orpheus, motivated by love to search out those shattered, indeed soul-murdered, “Eurydice” aspects of herself encapsulated in the trauma. The psychoanalytic treatment of trauma cannot stop short of this painful Orpheus and Eurydice reenactment.

The Orpheus and Eurydice myth, in contrast to the Oedipus myth, aches with fragmentation, separation, suffering due to acts of violation, as well as an attempt at reclamation motivated by love. The music and song of Orpheus is central to the myth, just as Ferenczi knew it was central to the treatment of trauma. Classical mythology makes it clear that Orpheus was surrounded with music from birth. When Apollo presented the young Orpheus with a lyre, it was the muses who taught him its use (Graves, 1992, p. 111). In ancient Greece, epic poetry recollecting the past was sung by poets, drawing inspiration from the muse Calliope (Cary et al., 1961, p. 320). It was, interestingly, this very muse, Calliope, who gave birth to Orpheus. Ferenczi as musing-mother-analyst was a bit like Calliope: at first encouraging the recollecting, then the putting into words, and

then finally the sad singing along with Orpha of the epic trauma. Ovid recorded that it was the music Orpheus played and sang which penetrated the gates of hell.⁴ With this music and the ability to grieve, Orpheus “mourned his fill in the wide world above,” and then dared to descend through the dark gate to Hades.

Applying this myth to our present-day patients, as well as Severn, we begin to understand how in the privacy of the self the traumatized analysand plays and replays the timbre and tone of the analyst’s sharing of aliveness as well as urgency and concern for the shattered “Eurydice” aspects of self. The movements of multitudes of sessions, and moments with the musing analyst in traumatic and nontraumatic spaces, are remembered and savored. Now, Orpha, for the first time, is engaged in intersubjective consciousness raising. She is beginning to muse with the analyst about encapsulated aspects of the self she has so fiercely anesthetized in the past, when no environmental help was available.

The analysand now experiences longing, as never before. Armed with this affective music of reclamation, the analysand (not the analyst) becomes “Orpheus descending.” Returning to the myth, Ovid described Orpheus’s descent:

Through thronging wraiths and grave spent ghosts ...
as he struck his lyre’s sad chords he said; “Ye
deities who rule the world below . . .
If simple truth, direct and genuine,
May by your leave be told, I have come down Not
with the intent to see the ghosts of Hell . . .
but for my dear wife’s sake, In whom a trodden viper poured his venom And
stole her budding years.
My heart has sought Strength to endure; the
attempt I’ll not deny; But love has won . . .
Reweave, I implore, the Fate unwound too fast Of my Eurydice,
The favor that I ask but to enjoy her love, and if the Fates
Will not relieve her, my resolve is clear Not to return;
may two deaths give you cheer.
(Ovid, 1986, pp. 115-116)

When the traumatized person reaches this point in the analysis, the process truly becomes a matter of life and death. Ideas of blissful new beginnings and remedial reparenting in the treatment of trauma are doomed to failure. Such treatment is based on a woefully insufficient understanding of the nature of severe trauma. The analysand enters the “black hole” of what Kinston and Cohen (1986) referred to as “the part of the mind where trauma persists” (pp. 350-351). In this hell of what they refer to as “primary repression,” painful growth is happening in the midst of sometimes severe physical and psychological deterioration. The terror of the trauma becomes now an intense lived experience in the presence of the analyst, who is there not to rescue, but only to bear witness to what is being recollected, to be only the keeper of time, and eventually the holder and compassionate “glue-er” of bits of self re”collected”(see Ferenczi, 1929).

Orpha must enter “regions filled with fear” to directly face past events and the damage done. No amount of empathic attunement on the analyst’s part can accomplish this task. The Clinical Diary aches with Ferenczi’s painful discovery that it is not simply a matter of providing patients with the love they never had. This was the clear message emerging for Ferenczi as he recorded his work with Severn in The Clinical Diary:

I have finally come to realize that it is an unavoidable task for the analyst: although he may behave as he will, he may take kindness and relaxation as far as he possibly can, the time will come when he will have to repeat with his own hands the act of murder perpetrated against the patient. In contrast to the original murder, however, he is not allowed to deny his guilt; analytic guilt consists of the doctor not being able to offer full maternal care, goodness, self sacrifice, (p. 52)

Far from being an overly indulgent mother, Ferenczi reminded us of what we intuitively know but wish we could forget. He wrote, “It is not within the capacity of psychoanalysis entirely to spare the patient pain; indeed one of the chief gains from psychoanalysis is the capacity to bear pain” (Ferenczi, 1928, p. 90). Out

of this pain, immense deficit and need become known and deeply felt.

Both psychoanalysis and the myth must stir the cruel hope that it is possible the dead “Eurydice” aspects of self can be returned to life, that the once budding years can be completely restored. The analysand’s cry and demand is to have back all of the “Eurydice” self poisoned by the trauma, to “reweave” what “Fate unwound too fast.”

In the myth, the granting of Orpheus’s plea to have Eurydice returned, carried with it an impossible injunction against Orpheus looking back on his love or else the gift would fail.

He turned his eyes—and straight she slipped away
He stretched his arms to hold her—to be held— And
clasped, poor soul, naught but the yielding air. And
she, dying again, made no complaint
(For what complaint had she save she was loved?)

The analysand, like Orpheus, of course must look. Psychoanalysis is after all perhaps more than anything else about looking. But in the looking comes a more complete realizing of what is indeed lost forever. Childhood. Innocence. Youth. Time. Opportunities. Love. And the endless ache of what might have been. The psychoanalytic treatment of trauma cannot “reweave what fate unwound too fast.”

Instead, the psychoanalytic treatment of trauma offers the analyst as the unwelcomed but necessary “undertaker” (Ferenczi, 1932, p. 51), laying out the realization of the death of parts of the analysand’s psychic self. There has been a soul-murder, which Orpha, now reunited with affect, must grieve. What is universal across all cultures and time is the habitual and socially sanctioned rituals and ceremonies in which there is a proper farewell to the dead. Something must always be done with the dead body. After years of war in Angola, refugees were asked to name their biggest worry. Their answer stunned Western therapists who deal with trauma. The Angolans were most traumatized by the fact that they were not able to perform proper burial ceremonies for their dead relatives because their bodies often could not be found or identified (Seppa, 1996). In the downing of TWA Flight 800 into the icy waters of the Atlantic in 1996, Herculean efforts were made to search for, locate, and properly identify the bodies of those who died. Divers risked their lives in the turbulent seas to find the bodies. DNA testing was employed. Always the dead need to be located in order to be mourned. In the psychoanalytic treatment of trauma, that which has been destroyed by trauma must be searched for, located, tenderly looked on, and deeply mourned. These lost aspects of the self are now deeply loved, while yet never being able to be embraced in life again.

CONCLUSION

Ferenczi and Severn have left us with a sobering and substantial view of the nature and treatment of trauma, meant to contrast (but not oppose) Freud’s oedipal inflection and meant to enrich the timbre and tone of all of psychoanalysis. This analytic couple produced movements both graceful and halting as they learned the difficult steps of an analytic dance that moved us from a necessary but not sufficient theory of trauma to a choreographing of the actual treatment of trauma, involving not only Oedipus but Orpha.

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NOTES

- 1.- American psychoanalyst Clara Thompson, an analytic sibling to Elizabeth Severn, observed these same characteristics in Ferenczi. Thompson wrote, “In his devotion to Freud and because of his naturally timid and modest nature, for many years he did not strongly assert his own point of view except where it coincided with Freud’s.... Ferenczi was impeded in developing his own thinking by the nature of his attachment to Freud—an attachment compounded of admiration, dependence, fear of disapproval and veiled rebellion” (Thompson, 1964, p. 72),
- 2.- It is not an easy task to steer between the Scylla of condemning and the Charbdis of condoning Ferenczi as one navigates the difficult straits of the mutual analysis. Feeling terrified of Severn, risking personal

and professional humiliation, he became Severn's patient. As Judith Dupont has observed, he certainly was not taking "the easy path" (1988, p. xxi). Ferenczi had to acknowledge and analyze the anger and hate Severn saw in him, in order to continue to treat her. I believe Severn helped Ferenczi first bear the truth about himself, his relationship with his mother, his relationship with patients, and his relationship with Freud. In this regard, Severn was able to do what Freud could not do in analyzing Ferenczi.

- 3.- Stern states that music and dance come closest to capturing the expressiveness of these vitality affects. Life surges, crescendos, decrescendos, bursts, explodes, draws out, and fades in session after session with Severn in the pages of *The Clinical Diary*. Ferenczi was master of attuning to what Stern would call "the many forms of feeling inextricably involved in all the vital processes of life" (1985, p. 156).
- 4.- According to mythographer Joseph Campbell, there are hundreds of versions of the myth of Orpheus and Eurydice to be found in cultures around the world (1973, p. 206). Ovid's *Metamorphoses* (Stories of Changed Forms) (1986) contains perhaps the most moving and sophisticated version of the ancient tale and is the version I quote from in this paper.

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