

## SANDOR FERENCZI'S CONTRIBUTIONS TO THE EVOLUTION OF PSYCHOANALYSIS.

Arnold Wm. Rachman, PhD

Sandor Ferenczi's ideas are being rediscovered and appreciated for their contributions to the evolution of psychoanalysis. Both European and American psychoanalysts have led the way in the rehabilitation of Ferenczi's reputation, damaged by Ernest Jones's assertions that Ferenczi's dissidence was a function of his psychopathology. In the last twenty-five years, Jones's assertions have been successfully challenged. Now, the focus in Ferenczi scholarship has shifted to the significance of his ideas and methods for the evolution of psychoanalyses. Five areas of Ferenczi's seminal contributions are outlined: 1. An ethos of clinical experimentation and empirically based clinical theory; 2. introduction of clinical empathy; 3. analysis of trauma and difficult cases; 4. development of the "Confusion of Tongues" theory and "Relaxation Therapy"; and 5. laid the foundation for a relational perspective in psychoanalysis.

**Keywords:** Ferenczi, evolution of psychoanalysis, relational analysis

Only recently has Sandor Ferenczi's contribution to the evolution of psychoanalysis begun to be appreciated. There are several landmarks in the rekindling of this interest, some within mainstream psychoanalysis and others embedded in a dissident movement aimed at a revisionist history of psychoanalysis. Before his work was rediscovered during the Ferenczi Renaissance (Rachman, 1999), Gedo's publications paid tribute to Ferenczi's contributions as having entered the mainstream of psychoanalytic theory and technique (Gedo, 1976, 1986). The landmark events in this renaissance are the articles and books, over a twenty-year period, that place Ferenczi's ideas and methods at the center of analytic advances (Aron & Harris, 1993; Bergman & Hartmann, 1976; Dupont, 1982, 1984, 1988a, 1988b; Haynal, 1989; Masson, 1984; Rachman, 1997a, 1997b, 2003a; Roazen, 1975, 2002).

For example, in the 1970s, Bergman and Hartmann (1976) published an important book on technique, which paid tribute to Ferenczi's contributions. In fact, the authors included five seminal papers by Ferenczi, more than on any other contributor to the development of analytic technique. This made an important statement within mainstream psychoanalysis about Ferenczi's contributions to the evolution of psychoanalysis. It is difficult to determine what impact Bergman and Hartmann's book had on traditionalists, since it was published at a time when acknowledging Ferenczi as a significant figure in mainstream psychoanalysis could lead to rejection by the established analytic community, still functioning under Jones's condemnation of Ferenczi as "psychotic" (Bonomi, 1999; Dupont, 1988b; Jones, 1957; Rachman, 1997a, 1997b; Roazen, 1975). Thus, the stance taken by Bergman and Hartmann regarding a fresh look at Ferenczi, in the face of such resistance made them all the more courageous

A great impetus to the Ferenczi renaissance was the work of some European analysts, particularly Judith Dupont and her collaborators in France as well as the Swiss analyst, Andre' Haynal. Dupont, a Hungarian by birth, became instrumental in reintroducing Ferenczi's work into mainstream psychoanalysis in several important ways. Under her intellectual leadership, a French study group about Ferenczi's ideas and the journal, *Le Coq' Heron*, was established. These activities became the conduit for a series of articles, books, research, and scholarship utilizing Ferenczi's ideas (Barande, 1972; Covello, 1984; Sylwan, 1984). Dupont's published work itself then became a standard for Ferenczi scholarship (Dupont, 1982, 1985, 1988a, 1988b). Of particular importance was Dupont's editorship of Ferenczi's Clinical Diary, a task begun by Michael

Balint. The French translation of Dupont's work first appeared in 1985 (Ferenczi, 1932/1985) and the English version in 1988 (Ferenczi, 1932/1988). Although a group of American analysts was in fact researching Ferenczi's work before the publication of the *Clinical Diary*, the publication of the *Clinical Diary* itself spurred great interest in the English-speaking analytic world. Wolstein, speaking from the perspective of the American Interpersonal School, found in Ferenczi's *Clinical Diary* revelations regarding the origins of the Interpersonal School, the contemporary significance of countertransference experience and the viability of Ferenczi's theoretical position as a distinct alternative to Freudian psychology (Wolstein, 1990).

In this vein, Andre Haynal's work was also important. Haynal, like Dupont, is a Hungarian, who as head of the department of psychiatry and founder of the Michael Balint archives at the University of Geneva, published work on Ferenczi (Haynal, 1989) Haynal and Falzeder (1994), as well, as encouraged others to do so. In addition, two dissident historians of psychoanalysis, Paul Roazen and Jeffrey Mousaieff, Masson made significant contributions to a new appreciation of Ferenczi's work to the evolution of psychoanalysis. In 1975, Paul Roazen, a political scientist trained at Harvard, published a new history of psychoanalysis (Roazen, 1975). Ferenczi scholars consider Roazen's work as breathing new life into our understanding of the evolution of psychoanalytic ideas and method, drawing attention to a wide array of analytic pioneers. This was akin to a revisionist history and acted as an antidote to Ernest Jones's so-called hero-worshiping biography of Freud (Jones, 1953, 1955, 1957).

Roazen's work greatly aided the rehabilitation of Ferenczi's reputation, which of course, was severely damaged by Jones's assertions that Ferenczi's ideas and methods were a function of personal psychopathology (Jones, 1957), rather than a matter of intellectual daring or even clinical genius (Rachman, 1997a, 2003a). In a masterpiece, Roazen explained Jones's political assassination of Ferenczi as connected to the failed analysis between Ferenczi as analyst and Jones as analysand. This experience was clearly flawed by Ferenczi's scant analysis of Jones' anger as well as by Jones' inability to express his own anger toward Freud, ostensibly for not accepting him as an analysand. According to Roazen, Jones was never able to be conscious of his resentment of Freud for refusing him or for sending him to Ferenczi. Thus, in part as a displacement, Jones then resented Ferenczi for being his analyst (Roazen, 1975). In addition, once Jung could no longer fulfill the role for Freud as the next gentile leader of psychoanalyst, Jones even may have had the fantasy that he would be the next one to fill that role.

The work of the historian and maverick of psychoanalysis, Jeffrey Mousaieff Masson, further amplified Ferenczi's significance for the evolution of psychoanalysis. The story of Masson's controversial tenure as director of the Freud archives is well known. Masson's attacks on Freud's ideas and, perhaps more significantly, on his character (Masson, 1984), should not obscure his contribution to the understanding of the infrastructure of psychoanalysis. Masson's assertion was that the seduction hypothesis was actually the cornerstone of psychoanalysis and that Ferenczi's "Confusion of Tongues" paradigm was a signal contribution in the evolution of psychoanalysis. Masson also emphasized the significance of Ferenczi's attempt to solve the dilemma of difficult cases. Masson recognized, as did Roazen, that Ferenczi's attempts to understand severe neurotic and borderline psychopathology as a function of the incest trauma was a meaningful clinical and theoretical insight and contribution. When the history of psychoanalysis is examined, it now becomes clearer that Ferenczi developed a unique orientation to psychoanalysis, and that this orientation may be identified as "The Budapest School." With Ferenczi as its leader, this first generation of analysts was Lajos Lévy, István Hollós, Mihály (Michael) and Alice Balint, Vilma Kovac, and Géza Róheim. The next generation included Imre Hermann and others. Ferenczi's leadership of the Budapest school occurred in a variety of ways: He was the first Eastern European psychiatrist to meet with Freud, and became Freud's "favorite son"; and he introduced psychoanalysis into Hungary and Eastern Europe when, in 1908, he delivered a lecture to the Royal Budapest Medical Society entitled, "On neurosis in the light of Freud's doctrines on psychoanalysis." With the help of Lajos Lévy, he developed the Hungarian medical journal, *Gyógyászat (The Therapy)*. This publication became the first voice of psychoanalysis in the medical profession. Ferenczi's earliest papers, from 1901 through 1914, were published in this journal.

Ferenczi gave lectures to the larger public in the Free University of Social Sciences and in the Galilei Circle. He became popular with university students and bourgeois radical intellectuals, which resulted in the creation of the first Department of Psychoanalysis in the Budapest Medical School. In fact, Ferenczi became the world's first Professor of Psychoanalysis in 1919, an honor Freud deserved but never received. Then in 1913, Ferenczi founded The Hungarian Psychoanalytical Society (Mészáros, 1995).

An examination of Ferenczi's seminal contributions to the evolution of our field is necessary not just to correct a significant historical oversight, but more importantly to continue the intellectual and clinical dialogue on the significant important issues that he began to examine:

- (1) He initiated an ethos of clinical experimentation and an empirically based clinical theory (Wolf, 1993, 1995), which ranged from activity (see below) to empathy to reparative therapeutic experiences;
- (2) He introduced clinical empathy into psychoanalysis, since it had yet been included in the body of psychoanalysts understanding;
- (3) He pioneered the analysis of trauma and difficult cases, introducing an alternative theory and technique into psychoanalysis;
- (4) He introduced the "Confusion of Tongues" theory and "Relaxation Therapy;"
- (5) He laid the foundation for a relational perspective in psychoanalysis.

## **THE ROLE OF ACTIVITY IN PSYCHOANALYTIC THERAPY**

Before psychoanalysis was twenty years old, Freud began to conceptualize an active role for the analyst. In going beyond the notion of free association, Freud introduced "the rule of abstinence" (Freud, 1958a), originally intended to provide neophyte male analysts with a guideline for abstaining from the fulfillment of the erotic longings of female analysands. Freud realized that indulgence of neurotic needs would lead to fixations and reinforcement of neurotic patterns.

Ferenczi enthusiastically endorsed Freud's rule of abstinence and used it as a jumping off point for clinically experimenting with the analytic method. In a series of groundbreaking publications, Ferenczi delineated his attempts to introduce a more active role for the analyst, which involved translating abstinence into a method of curtailing certain responses on the part of the analysand in the service of allowing suppressed thoughts and feelings to emerge (Ferenczi, 1980b, 1980c, 1980d, 1980e, 1980f, 1980g, 1980h). Ferenczi understood that free association was not always possible, even if the analysand was well intentioned. Ferenczi was able to develop this idea more than Freud had, realizing that the psychotherapy of "difficult cases" may often involve a difficulty in free association. In these clinical experiments, Ferenczi demonstrated the efficacy of using activity though the introduction of abstinence to free up the associative process. This began when Ferenczi observed an analysand making a series of body movements as she lay on the couch (Ferenczi, 1980b). Thus Ferenczi was also one of the pioneers of analyzing non-verbal communication and integrating such observations into the analysis.

The analysand who was making a series of body movements had complained of sexual difficulties in her relationship, and Ferenczi reasoned that rubbing her legs together as she talked about sexual issues may have been a symbolic act of masturbation. In a daring clinical act, he suggested that the analysand abstain from rubbing her legs together during the session. Ostensibly, the physical act, although soothing, was perhaps interfering with a full expression of sexuality. Apparently, his request that she abstain from satisfying her sexual need through symbolic masturbation was accepted, perhaps because he conveyed a sense of empathy. In fact, Ferenczi reported that when she adhered to his request there was a freeing up of associations, which in turn led to a return to interpretative behavior. The result, according to Ferenczi, was that an awareness of childhood sexuality was understood by his patient as a source of her adult dysfunction and that, with time, her sexual experience with her husband improved.

Fortified by these initial successes, Ferenczi, with Freud's full approval, initiated a period of clinical experiments in "activity" which established this new role for the analyst. Many interesting and substantive papers were published during this time, which contributed to the delineation of the dimensions of the active

approach, e.g., prohibition of behavior increasing emotional expression, confrontation, dramatizing clinical interaction, and encouraging analysis of nonverbal behavior (Ferenczi, 1980b, 1980c, 1980d, 1980e, 1980f, 1980g, 1980h). The zenith of the active analytic approach was embedded in the case study of an opera singer who had a myriad of physical and psychological issues that interfered with her professional and personal life (Ferenczi, 1980d). One can view this particular analysis as the beginning of a modern era, where psychotherapy integrated the dimensions of activity, empathy, confrontation, and reality, and where flexibility and responsiveness became a part of the analytic encounter (Rachman, 2003a). In this difficult case of “The Female Croatian Musician”, Ferenczi introduced a series of active measures that focused on the individual’s dysfunction. To help with the opera singer’s performance anxiety, he asked her to “sing the song”, that was causing her the most anxiety, to conduct the orchestra, as if she were in the performance hall, and to accompany herself on the piano. These active measures, which were akin to what we would now term behavioral therapy procedures, were intended to confront her anxiety in a therapeutic setting. By going beyond verbal exploration, Ferenczi expanded a procedure Freud first suggested two years earlier at the Budapest Congress for obsessive compulsive and phobic disorders (Freud, 1958). Ferenczi’s dramatic intervention presumably allowed the opera singer to return to her career as well as to enjoy a fuller sexual experience with her husband.

The analytic community was not in agreement with Freud in supporting Ferenczi’s clinical experiments in activity. Glover (1924) echoed the sentiment of the traditionalists when he criticized Ferenczi for not paying sufficient attention to the development of the negative transference: e.g., when forbidding certain behaviors; being clinically dominant or controlling; being experienced as emotionally intimidating; or being too directive in setting the agenda for the analytic encounter. Ferenczi welcomed the analytic community’s response to his innovations and used them to reexamine the role of activity in psychoanalysis (Ferenczi, 1980g, 1980h). Currently the legacy of Ferenczi’s active approach is evident in contemporary clinical approaches to the use of abstinence in the treatment of addictions, the employment of active approaches in behavior therapy, and the active clinical engagements characteristic of child, marital, and group psychotherapies.

In the monograph *The Development of Psychoanalysis* (Ferenczi & Rank, 1986), Ferenczi’s reexamination of the role of activity also set the stage for the next step in the evolution of psychoanalysis. Ferenczi and Rank went beyond methodology and reexamined the theoretical and technical foundation of psychoanalysis. They wanted to provide a series of technical recommendations for analytic technique neglected by Freud’s emphasis on what the analyst “should not do” rather than what should be done (Jones, 1955, p. 241).

Ferenczi and Rank felt that the problem of the evolution of psychoanalytic technique was directly connected to the hero worship of Freud. Analysts had become too dependent upon Freud’s technical articles. These articles, as Freud was aware, created negative attitudes insofar as analysts felt it was taboo to deviate from what became inviolate rules rather than flexible recommendations (Ferenczi & Rank, 1986).

In fact, Freud’s refreshing admission of his contribution to the difficulties in the evolution of psychoanalysis helped Ferenczi continue his quest to expand the boundaries of psychoanalysis:

“... I know that I am not very accessible and find it hard to assimilate alien thoughts that do not quite lie in my path . . . that you or Rank should in your independent flights ever leave the ground of psychoanalysis seems to me out of the question. Why shouldn’t you therefore have the right to try if things won’t work in another way from that I had thought?”. . . (Jones, 1957, pp. 57-58)

Jones and the Berlin analysts, however, were concerned that the very seeds of dissidence were contained in the Ferenczi and Rank monograph. Their concerns had some validity since Rank was clearly in opposition to Freud’s view and saw himself as developing an alternative framework (Rank, 1929). Ferenczi, on the other hand, was a loyal disciple of Freud, but was on a voyage of discovery that would eventually produce the first real alternative to the Freudian system (Gedo, 1986).

Ferenczi’s contribution to the evolution of psychoanalysis contained in this self-same monograph was the novel focus on the essential importance of affective experience in the here and now of the analytic encounter.

Gedo (1986) argued that Ferenczi was actually applying Freud's significant new model of the mind, proposed about a year earlier in "The ego and the id" (Freud, 1961). Ferenczi always sustained a clinical focus to his thinking and felt the next step in the evolution of psychoanalysis was to translate the new topology of the mind into advances in clinical functioning. For example, he was the first to enunciate that analysis was not a focus on details, but a process and that "symptom analysis and complex analysis" had become obsolete.

The analytic process, Ferenczi and Rank agreed, must promote affective reliving and the working through of the infantile neuroses by means of repetition as a transference neurosis. Resistance should not be viewed as undesirable or sinful, but as a natural part of the process of the ego. Ferenczi and Rank also began a critique of the analytic attitude that is still relevant today, that is to say, of the assumed authoritarianism of the analyst, manifested by unilateral decisions regarding the treatment process. This reassessment of the analytic dialogue and the interpersonal encounter of the psychoanalytic situation was actually a way station in the evolution of psychoanalysis, because it paved the way for the appreciation of clinical empathy.

## INTRODUCTION OF CLINICAL EMPATHY INTO PSYCHOANALYSIS

Ferenczi was the first clinician to discover an essential truth about the psychoanalytic situation; that is to say, that the empathic response is the core of clinical interaction. When he reevaluated the active role of the analyst he realized the subjective experience of the analyst, if analyzed as part of the therapeutic encounter, was a protection against intrusion, manipulation, control, and retraumatization. Working on the analyst subjective experience help transform this reaction into therapeutic dialogues.

Ferenczi's introduction of "the rule of empathy" (Ferenczi, 1980h), and his dedication to researching the clinical and theoretical implications of empathy as a fundamental dimension of the analytic encounter (Ferenczi, 1988) in turn paved the way for many developments in empathy: Balint's focus on the "non-intrusive analyst" and working in the zone of regression (Balint, 1968); Rogers's establishment of empathic understanding as a necessary and sufficient condition for psychotherapy (Rogers, 1959); the idea of the facilitating environment (Winnicott, 1960); "The patient as therapist to his analyst" (Searles, 1975, 1979); and, of course, Kohut's reintroduction of clinical empathy and his extensions of it as a comprehensive theoretical and clinical framework for analytic functioning (Kohut, 1984).

Ferenczi's introduction of clinical empathy into psychoanalysis, like his experiments with activity, met with Freud's approval (Rachman, 1997a). Freud thought that clinical empathy was a much needed antidote to the "essentially negative nature" of his technical recommendations, which resulted in an inflexible attitude:

"... Almost everything positive that one should do I have left to 'tact' [empathy], ... The result was that the docile analysts did not perceive the *elasticity of the rules* that I had laid down, and *submitted to them as if they were taboos*. Some time all that must be revised". . . Jones, 1953 p. 241, Italics added)

"The rule of empathy" was to stand side by side with the other technical traditions of psychoanalysis, e.g., rules of free association, recovering child amnesia, interpretation of dreams, the value of fantasies and early recollections, overcoming resistances, working through the childhood neurosis, becoming aware of transference distortions, and developing insight into the genetic psychology of the individual (Ferenczi, 1980i). Both Freud and Ferenczi understood that interpretative behavior had its limitations in the same way that activity did, especially if the analyst were over-emphasizing such interpretation. The introduction of empathy provided psychoanalysis with an avenue to expand its theory, to include the subjective experience of the analyst, and to expand its methodology to include mutuality.

Ferenczi's clinical experiments in activity also set the stage in the evolution of psychoanalysis by integrating clinical empathy in the psychoanalytic endeavor and by changing the nature of the analytic encounter itself. Clinical interaction was now no longer characterized as solely the activity of the physician, administering a treatment to the patient based upon diagnostic judgement of psychopathology. Now, the analysand's difficulties informed the analytic dialogue, as Ferenczi based his intervention on responding to the subjective experience

of the analysand. The analysand became a co-participant in an encounter created by the therapeutic dyad.

In actuality, an empathic stance provided a direction for the analysis. It was not just a matter of “tact,” that is, how to respond to an analysand whose associations had “dried-up,” but a new way to respond to an analysand in a way that conveyed affirmation, attunement, and empathic understanding (Ferenczi, 1980i). And so, Ferenczi inaugurated a clinical focus on using his empathic method with “difficult cases,” thereby expanding the clinical treatment repertoire to include severe neurotic, narcissistic, character, borderline and psychotic disorders (Ferenczi, 1980i, 1980j, 1980k, 1980l, 1988).

Ferenczi’s ideas on empathy influenced Balint in the development of the object relations perspective (Balint, 1968), the humanistic psychotherapist Izette De Forest (De Forest, 1942, 1954), and one of the founders of interpersonal psychoanalysis, Clara Thompson (Thompson, 1944, 1964).

The development of self psychology, with its fundamental focus on empathy, was a point of difficulty for many analysts because Kohut ignored the contributions of Ferenczi, Rogers, Winnicott, and others (Bollas, 1987; Rachman, 1989). Kohut’s inability to credit his predecessors gave the impression that he co-opted empathy as a discovery of his own. His followers, however, have been diligent in correcting the omissions (Bacal & Newman, 1990; Detrick & Detrick, 1989; Lichtenberg, 1997; Ornstein, 1992; Shane & Shane, 1996; Stolorow, 1976).

Ferenczi’s themes also can be found in the contemporary orientation of the person-centered psychotherapies. Rogers, like Ferenczi, believed that empathic resonance is the core of clinical interaction. It is not clear, however, whether Rogers had any knowledge of Ferenczi as a predecessor. What is known is that Rogers had analytic training at the beginning of his career in the 1930s (Rogers, 1942). There is documentation that Rogers had intellectual and clinical contact with a Rankian psychotherapist at the Philadelphia Guild Guidance Clinic, whom he has stated influenced him in the discovery of the “reflection of feeling response” (Kahn & Rachman, 2000; Rogers, 1975). Since Rank and Ferenczi collaborated on the monograph discussed above one could speculate that the Rankian psychotherapist was exposed to some of Ferenczi’s thinking, or, at least a homogenized version of Ferenczi’s as well as knowledge of Rank’s thinking. This may account for the parallels in ideas between Rogers and Ferenczi.

With respect to the influence of understanding the importance of empathy, there is evidence indicating that the child is able to regulate personal affective states more or less directly on the basis of the mother’s empathic attunement. The mirroring of affect helps the infant reduce disturbing affect and produces a soothing effect (Beebe & Lachmann, 1988). Newer conceptualizations of human interaction and clinical interaction also integrate these ideas (Lichtenberg, Lachmann, & Fosshage, 1992).

The object relations perspective also made significant contributions to the establishment of empathy in clinical psychoanalysis. Beginning with the Balints (Balint & Balint, 1939) and continuing on through Fairbairn (1952); Guntrip (1961); Winnicott (1947), as well as contemporary theoreticians, such as Bollas (1987, 1989); Casement (1991, 2002); Ogden (1994); Stewart (1977) and Searles (1975, 1979), empathy and the subjective experience of the analysand, as well as countertransference analysis and the subjective experience of the analyst, is essential to theory and clinical interaction.

More recently, the interpersonal/humanistic perspective has rediscovered its analytic ancestry (Frankel, 1993; Shapiro, 1993; Wolstein, 1990). In fact, Wolstein had made a parallel between Freud’s discussion of his groundbreaking clinical work with Anna O. (Freud) and Ferenczi’s pioneering findings in the Case of R.N.-[Elizabeth Severn] (Ferenczi, 1988; Wolstein, 1997).

## **THE CONFUSION OF TONGUES THEORY OF TRAUMA**

It was Ferenczi’s working with Freud’s seduction hypothesis that moved psychoanalysis away from a biological drive theory and towards an understanding of the role of trauma in human behavior. Ferenczi held that in the everyday life of the individual the persistent traumatic effects of chronic overstimulation, deprivation, or empathic failure is what causes neurotic, character, borderline and psychotic disorders (Ferenczi, 1980k). The escalation of the difficulty between Freud and Ferenczi centered around Ferenczi’s tenacious insistence on presenting this trauma theory to the analytic community. Freud tried to extract a

promise from Ferenczi that he would not present his “Confusion of Tongues” paper (Masson, 1984), which he had read to Freud prior to its presentation at The Weisbaden Congress in 1932 (Molnar, 1992). Freud was so angry at Ferenczi’s determination to present the paper that he turned his back on Ferenczi and even refused to shake his hand when they parted (Fromm, 1959). Freud’s negative reaction was reinforced by the gathered analytic community at the Congress, which uniformly rejected the paper (Masson, 1984).

Ferenczi first observed that his “difficult cases” were individuals who were not treatable using the oedipal-conflict theory of neuroses or the interpretative analytic method. He empathically attuned to the reports of his analysands when they told him they had been sexually abused by their parents in childhood -mostly, daughters by their fathers. Ferenczi believed these accounts of childhood molestation because he observed the effects of the childhood traumas in the psychoanalytic clinical interaction. Ferenczi attributed his analysands’ difficulties in emotional and interpersonal interaction to retraumatization, a reliving of the original trauma in the psychoanalytic situation to which he, as the analyst, presumably had made unwitting but nevertheless real contributions to the problems. It was Ferenczi’s willingness to observe his own contribution to the unfolding of the analytic process that allowed his empathic method to develop into a two-person psychology. Ferenczi’s observations regarding the origin of trauma were verified in contemporary clinical thinking by Herman (1981, 1992).

Ferenczi compiled data on thirty-two clinical cases, in which childhood sexual seduction ostensibly played a major role in the development of psychological disorders (Ferenczi, 1932). The most significant of these cases was the analysis of “R.N.,” Elizabeth Severn (Ferenczi, 1988; Fortune, 1993; Rachman 1997a). This analysis, which Ferenczi conducted from 1928 until shortly before his death in 1933, contributed to the evolution of psychoanalytic theory and method. It made such a contribution by emphasizing the meaning of childhood trauma in the development and treatment of emotional disorders, as well as revealing the change in the technical method of treating trauma that ultimately proved helpful (Ferenczi, 1980i, 1980j, 1980k, 1980l, 1988).

The fundamental idea in the “Confusion of Tongues” paradigm is that trauma develops as a result of sexual seduction of the child by a parent or authority figure. The developing sense of self of the child is overwhelmed by overstimulation of erotic impulses by the parent’s need to satisfy his/her sexual desires with the child. The basic sense of confusion develops because the child’s developmental need for attachment, nurturance, and affection is mistaken by the adult abuser for the child’s lust. What is more, the adult abuser attempts to convince the child that this lust on the part of the adult is really the love for which the child yearns. Such attempts can go as far as threatening the child with physical punishment or withdrawal of love if the “secret romance” is revealed.

Ferenczi (1980l, 1988) and later Balint (1968) broadened the idea of trauma beyond overstimulation by a caretaker to include emotional neglect, physical maltreatment, and empathic failure. Emotional trauma was now considered to be the caretaker’s neglect of the child’s need for “primary object love.” This need was posited as a fundamental emotion and as an interpersonal longing of a child for maternal love ultimately acting as a building block for personality development. Such traumas involved the caretaker’s inability to provide emotional nurturance due to narcissistic personality issues or serious emotional disturbance on the part of the caretaker. This formulation is not unlike Kohut’s understanding where the individual is seen as deprived of the necessary empathic response from his/her caretaker resulting in subsequent developmental arrest (Kohut, 1968). In order to cope with the overwhelming anxiety and maintain self-cohesion, the child develops a series of coping mechanisms that underline the child’s personality development. Among the most prominent of these coping mechanisms are identification with the aggressor, denial, detachment, dissociation, and splitting. On the one hand, these mechanisms allow the child to survive the trauma; on the other, as such, mechanisms become ego syntonic and the preferred means of dealing with stress they then define the condition identified as arrested development.

If the trauma persists in the absence of emotional or interpersonal relief, the self may then be overwhelmed and the personality may fragment. Under such conditions, memory becomes repressed and affect, thought, and experience can become split-off in isolated fragments. Thus, with the sense of self suffering from fracture, dissociation, and confusion, the development of personality can be seen to be significantly influenced by

such childhood trauma. As Ferenczi's student Michael Balint elaborated, the personality is fractured so that a "basic fault" exists (Balint, 1968). Thus, as a result of the trauma, the personality has a fundamental break or fault connected to the nature and extent of the trauma. Any therapeutic treatment, therefore, must focus on discerning and treating this basic personality fault.

In a series of clinical experiments, Ferenczi introduced a variety of measures to deal more effectively with the effects of trauma. Mindful of Freud's pioneering deviations, (Freud, 1958), Ferenczi's clinical method was developed over a period of nearly twenty-five years to deal specifically with the results of childhood trauma as are manifested in adult personality (Ferenczi, 1988). Ferenczi devised a new methodology involving a focus on the functioning of the analyst as a salient source of clinical data as well as a source of curative functioning (Ferenczi, 1980i, 1980j, 1980k, 1980l, 1988).

Opposition to the "Confusion of Tongues" theory was so great in Freud's orbit as well as in subsequent decades of psychoanalysis, one wonders what were the psychodynamics underlying the almost total rejection of what might be considered Ferenczi's prophetic set of ideas regarding trauma. Many, including Freud, felt that the concept of a psychological disorder caused by a childhood sexual disorder was a regressive idea returning psychoanalysis to an abandoned theory. Ferenczi, it was said, had not learned the lesson that Freud had learned from Freud's early experience of believing that the patient was distorting their very own childhood experiences. Finally, Ferenczi's sense that incest was regularly occurring in middle and upper class families was considered by the traditional psychoanalytic community as absurd. It was thought that such perverse sexual practices only occurred in lower class families. By implication, Ferenczi's idea that middle and upper class fathers were incesting their daughters suggested, of course, that there was sexual abuse occurring even within the families of the psychoanalysts to which the "Confusion of Tongues" paper was presented. This idea was considered to be an outrageous and scandalous accusation further discrediting Ferenczi's theory and Ferenczi himself. If sexual seduction was as rampant as Ferenczi suggested, why did not other members of Freud's inner circle of psychoanalysts report similar findings? Why were their experiences so different from Ferenczi's? If one examines Freud's case studies and the case studies of the other pioneers of psychoanalysis, one can quickly see similar psychopathology and incidence of trauma that Ferenczi saw. The difference, however, seems to be in the interpretation of the clinical data. Freud and his followers focused on neurotic conflicts as seen through a lens of oedipal theory. Ferenczi and then Balint began an alternative perspective to what they considered a relational disorder, involving the caretaker or a parenting figure.

Although lost to several generations of analysts because "The Confusion of Tongues" paper was discredited or ignored (Rachman, 1997a, 1997b), contemporary analysts began to appreciate these ideas as the issue of *actual* trauma entered the analytic dialogue (Basch, 1984; Blum, 1994; Modell, 1991; Rachman, 1989, 1993, 1995, 2000, 2003a, 2003b; Rachman, Kennedy, & Yard, in press).

## **RELAXATION THERAPY AND RELAXATION MEASURES**

Relaxation Therapy was developed by Ferenczi specifically to treat trauma. The role, attitude, and functioning of the analyst was "relaxed," which referred to a change in the emotional atmosphere of an analytic session. Rather than encouraging an ambiance of frustration, abstinence, or neutrality, the analytic situation was now governed by the "rule of empathy" (Ferenczi, 1980h). Emphasis was now placed on empathy, flexibility and responsiveness. In this new frame, an emotional encounter is encouraged in the here-and-now of the psychoanalytic situation, highlighting the relational aspects of the therapeutic relationship.

It has taken psychoanalysis over sixty years to realize the importance in the pioneering clinical work that Ferenczi accomplished in the case of "R.N.," Elizabeth Severn. Wolstein (1997) even compared Ferenczi's Case of R.N., to Freud's Case of Dora in terms its significance for the evolution of psychoanalysis. From 1924 until 1932 when he died, Ferenczi treated Severn, a severely traumatized and disturbed woman, who had come to Budapest to see him as "the analyst of last resort." Severn reported a history of severe childhood trauma consisting of sexual, physical, and emotional abuse from her father. She further reported that her father also tried to poison her, cursed her, and also abandoned her. Ferenczi's treatment of Severn is chronicled in his *Clinical Diary* (Ferenczi, 1988), in Severn's unpublished letters to her daughter Margaret (Fortune, 1993), in



Ferenczi's letters to Groddeck (Dupont, 1982 or Fortune, 2001), and by an eyewitness, Ferenczi's successor Michael Balint (Balint, 1968). Severn, herself a therapist, dramatically voiced her negative transference and objections to Ferenczi's countertransferences (Ferenczi 1988). For a recorded first time, an analysand suggested alternative clinical interventions that became integrated into the analytic encounter. To Ferenczi's credit, he realized the validity of Severn's ideas and, together, they experimented with changing the analytic method in order to integrate the contribution of the analysand. The analysis of Severn was characterized by a host of "relaxation measures" and clinical interventions, which responded to her need for a non-traumatizing, nurturing parental figure. Balint described Ferenczi's heroic attempts at therapeutic responsiveness with Severn:

"I was privileged to witness . . . an experiment . . . on a really grand scale -perhaps the first of its kind in analytic history. [Ferenczi] agreed . . . to give [her] as much time from him as she asked for, several sessions per day and, if necessary, also during the night. As breaks were considered undesirable, she was seen during the weekend and was allowed to accompany her analyst on his holidays . . . The experiment went on for some years . . . The patient . . . improved considerably . . . but could not be considered as cured". (Balint, 1968, pp. 112-113)

Initiated by Ferenczi, working in this zone of regression then became a characteristic of the Object Relations perspective first elaborated by Balint (1968) and then developed by Bollas (1987, 1989), Casement (1991, 2002), Kahn (1969), Stewart (1993), and Winnicott (1971, 1972, 1975, 1988).

## **COUNTERTRANSFERENCE ANALYSIS AND MUTUALITY: THE VIEW FROM THE COUCH**

The "Confusion of Tongues" theory, and the development of "Relaxation Therapy," displayed Ferenczi's intellectual and clinical dedication to the psychotherapy of difficult cases and further demonstrated his determination to be a "healer of trauma" (Rachman, 2003a). What distinguished Ferenczi's search was a reliance on his own subjectivity to guide his intellectual understanding and clinical experience. Ferenczi's interest in subjectivity within the psychoanalytic situation can perhaps be traced to his first published clinical case (Ferenczi, 1902). His capacity for empathy and a willingness to examine his own subjectivity also may have been developed as a creative synthesis of his own childhood trauma (Rachman, 1997a). As well, his preoccupation with the trauma of others due to parental deficits seemed to correspond to his own experience with maternal deprivation (Grubrich-Simits, 1986). His intimate and emotionally nourishing relationship with his father may have been his original blueprint for the curative aspects of relaxation therapy (Rachman, 1997a).

Ferenczi's introduction of a two-person psychology for understanding psychological disorder changed the analytic encounter forever. The informed analyst's subjectivity now joined the analysis of the analysand's subjectivity in contributing to the understanding of the analytic encounter. As it became clear that the analysis of trauma necessitated active engagement of the analyst, countertransference analysis became a cornerstone of Ferenczi's analytic approach (De Forest, 1942, 1954). Thus, Ferenczi not only embraced Freud's discovery of the countertransference, he expanded upon it.

Countertransference analysis became the ongoing process of self-scrutiny that Freud knew was a key to an analysis, but that he also feared would open up psychoanalysis to public scrutiny (McGraw, 1974). Ferenczi, on the other hand, believed self-disclosure of the analyst was a therapeutic reparative force (Ferenczi, 1980i, 1988). In fact, it was the practice of making himself known that led to the development of the idea of the mutual encounter (Ferenczi, 1988). Although Ferenczi's capacity for self-disclosure broke new ground for the establishment of a two-person experience (Ferenczi, 1932), not all his disclosures could be considered analytically helpful (Rachman, 1999). This vista of analyst self-scrutiny that Ferenczi opened was never again closed, as "working in the countertransference" became an integral part of the object relations, interpersonal/humanistic and relational perspectives (Aron, 1996; Bolas, 1987; Casement, 1991, 2002; Epstein & Feiner, 1979; Gill, 1979; Heimann, 1960; Hoffman, 1992; Racker, 1953, 1968; Stewart, 1977; Winnicott, 1947; Wolstein, 1959, 1997).

## THE FOUNDATION OF A RELATIONAL PERSPECTIVE IN PSYCHOANALYSIS

Although Ferenczi's research influenced the development of the object relations, interpersonal/ humanistic, and self psychology perspectives (Wolstein, 1989; Rachman, 1989), it is the relational perspective which is the current contemporary orientation most relevant to the elaboration of his ideas (Aron & Harris, 1993; Rachman, 1997a, 2000, 2004). Ferenczi's two-person psychology emphasized the fundamental dimension of the relational perspective, that is to say, the idea that psychopathology develops within a familial relationship where actual parental behavior creates emotional disturbance for the child. The idea was not new to Ferenczi, as it originated in Freud's original formulation about the origins of hysteria and neurosis (Freud, 1954). As he gathered more clinical experience with cases where familial interaction had produced a wide array of clinical disorders, Ferenczi's contribution was that he never wavered from this assumption (Ferenczi, 1980i). However, he also contributed by suggesting that the cure of neurosis as well as more severe forms of emotional disorder was also to be found in the relationship, specifically in the reparative experience with the analyst (Ferenczi, 1980i, 1988). Among the issues which Ferenczi introduced or studied that are relevant to a relational perspective are elasticizing the analytic dialogue; the introduction and elaboration of clinical empathy; the study of actual reported trauma; countertransference analysis; the importance of authenticity, emotional honesty and analyst self-disclosure; aspects of post-modernism; and feminist issues.

The idea that there is one essential form of truth in psychoanalysis has been criticized by several revisionist historians of psychoanalysis (Gedo, 1986; Grosskurth, 1993; Haynal, 1989; Masson, 1984; Roazen, 1975). These authors have credited Ferenczi with being the first psychoanalytic dissident who helped elasticize the analytic dialogue. Eventually Ferenczi's work became the impetus for the establishment of several dissident orientations (Aron, 1992a; Ghent, 1989). A relational perspective entailed a selective integration of different theories and traditions, which focused on the nature of the relationship as the crucial dimension in human behavior and motivation. By analyzing the relational matrix in ego psychology, object relations, interpersonal/humanistic, self psychology and other analytic perspectives, Stephen Mitchell (1988) was able to discern a basic focus on relationship.

Mitchell's theoretical work on the relational matrix not only brought together a developing trend in popularizing so-called dissident perspectives, but it also encouraged this specific new focus (Aron, 1996; Benjamin, 1988; Bromberg, 1994; Ghent, 1993; Greenberg, 1991; Hoffman, 1992; McLaughlin, 1991; Mitchell & Aron, 1999; Renik, 1993; Stolorow, 1995). At present, there is an ongoing attempt at analytic diversity and integration of approaches to relational theory (Aron & Anderson, 1998; Bromberg, 1994; Ghent, 1993; Mitchell, 1993; Mitchell & Aron, 1999), trauma theory and technique (Davis, 1996; Harris, 1996; Rachman, 1994, 2000), and clinical therapeutics (Aron, 1996; Rachman, 1998, 2000, 2003a).

Ferenczi's formal introduction of clinical empathy into psychoanalysis (Ferenczi, 1980i) may have been the single most important step in the development of an interpersonal, two-person psychology, eventually paving the way for a non-biological drive perspectives in psychoanalysis (Rachman, 1989, 1997a, 2004). If the clinical or treatment difficulty was located in the zone of the clinical interaction, Ferenczi's natural propensity toward empathy as cited by Masson, (1984); Rachman, (1997a); and Thompson, (1964), as well as Freud's acknowledgement of Ferenczi's free-wheeling intellect (Freud, 1933), made it natural for Ferenczi to turn toward the analyst's subjectivity as a solution to the difficulty or interpersonal crisis. Thus, what started out as a clinical intervention to aid the free associative process ultimately became a primary focus for the analytic encounter. In fact, Freud, who was influenced by his student's clinical experiments with activity, predicted at the Budapest Congress that the evolution of psychoanalysis would proceed in the direction of Ferenczi's work (Freud, 1958). Furthermore, Freud elaborated new vistas of activity for the treatment of phobia and obsessional neurosis. This idea transformed the concept of resistance from a one-person experience into a matter of mutuality. Freud's approval of Ferenczi's focus on empathy (Jones, 1953) allowed Ferenczi to develop his attention to empathy as a central dimension of the analytic experience.

Ferenczi's "Confusion of Tongues" theory (Ferenczi, 1980i) and his Relaxation Therapy (Ferenczi, 1980i), redefined the text of psychoanalytic inquiry and the nature of the psychoanalytic encounter. Ferenczi was aware that he had himself suffered both emotional (Rachman, 1997a) and sexual trauma (Ferenczi,

1988). He did not, therefore, reject the patient's report when presented with the data of incest. Clinical empathy was the next necessary step in the deconstruction of the analytic text. But when interpretation and the analysis of resistance and transference were not sufficient, Ferenczi experimented with a variety of relaxation measures to try to affect a curative process.

Although he has been criticized as naive and overly enthusiastic about his clinical experiments and ideas, he did use an empirical method to verify and change his functioning (Wolf, 1993, 1995). He permitted the clinical data to inform his theory and method. It is reasonably clear now, with the perspective of contemporary developments in the study and treatment of sexual trauma (Rachman, 1993), that Ferenczi was prophetic, seventy-three years ago when he presented clinical evidence for the incidence of childhood sexual seduction as one important factor in the development of psychological disorder, thus establishing the study and treatment of the incest trauma as a meaningful part of psychoanalysis (Ferenczi, 1980i, 1980j, 1980k, 1980l, 1988).

The acceptance of real trauma did not mean that the role of fantasy or the unconscious was diminished. Rather, it was Ferenczi's intention to widen the scope of psychoanalysis to include actual trauma and the emphatic response to it. It took several generations of analytic thinkers to begin the process of integration between "The Confusion of Tongues" and Oedipal Theories. One of Ferenczi's students, Michael Balint, led the way towards this integration, as exemplified by the object relations perspective of which Balint was one of the founders (Rachman, 2003a). The theory of "The Basic Fault" (Balint, 1968), provided for and integration with the addition of a third level of functioning, the level of creativity. Hence Balint's theoretical and technical contributions were the depository for a Ferenczian tradition in the modern era of psychoanalysis, as well as one of the conduits for the relational perspective.

Ferenczi reformulated the Oedipal drama, deconstructing the Freudian view of the universality of the Oedipal complex. Thus it was not the child's sexuality that was in question, rather it was the adult's sexuality or "passion" that was the issue (Ferenczi, 1980k). The "Confusion of Tongues" paradigm also gave new meaning for the analyst/analysand dyad as well. Ferenczi deconstructed the psychoanalytic process by writing a new text regarding the clinical interaction between analyst and analysand. In this work, a shift away from analyst-centered and toward mutually constructed dialogue and process constituted this new perspective. Retraumatization, that is, the reexperiencing of the childhood "Confusion of Tongues" trauma naturally develops in the clinical interaction of the psychoanalytic situation. In the Oedipal view of transference, meaning is created from the analysand's projection onto to the analyst of his/her perception and feelings of parental authority, colored by the childhood neurosis. New meaning was available when the text of the psychoanalytic situation was conceptualized to be an experience of "mutual analytic partners," if you will, constructing "the narrative of the analysis" together (Rachman, 2001).

With a clear distinction being made between one-person and two-person psychology (Aron, 1990; Ghent, 1989), the relational perspective focused on the analyst contribution to the treatment process. Ferenczi was acknowledged as a major antecedent to integrating countertransference as a vital force in the analytic encounter, (Aron & Harris, 1993; Berman, 1997; Rachman, 1997a, 2003a). As Ferenczi had pioneered, the countertransference reaction became the vehicle from which the analyst was asked to examine his/her functioning as it affected the ongoing analytic process. It was the analysis of the countertransference that became the analyst's contribution to the co-created analytic narrative (Davis, 1996; Hoffman, 1983; McLaughlin, 1991; Rachman, 2003a). Working in the countertransference extended the empathic method to the boundaries of analyst self-disclosure (Aron, 1996; Rachman, 2004; Renik, 1993) and, of course, still further into the realm of mutual analysis (Aron, 1996; Rachman, 2003a).

A crisis in the therapeutic relationship, which is inevitable, occurs when the analyst's pathological narcissism impedes emotional openness and honesty. Ferenczi identified this as "clinical hypocrisy," indicating that the analyst was acting like the parent of childhood and not taking responsibility for contributing to the relational crisis (Ferenczi, 1980l). When the analyst is implicated in such responsibility for the relational crisis, it is then that enactments of the "Confusion of Tongues" trauma occur. Thus, it is only through the analysis of the countertransference that the analyst confronts his/her narcissism or even pathologic narcissism. The curative function for the "Confusion of Tongues" trauma is predicated on

the analyst's capacity to become more authentic in the analytic situation (Rachman, 1998, 2003a, 2003b, 2004). Emotional honesty is curative because it repairs the neurotic experience of childhood when parental authority *blamed the child* for any difficulties in the relationship. Rather than reinforce emotional dishonesty, defensiveness, evasion, and inauthentic interpersonal contact, the analyst struggles to examine his/her contribution to the relationship crisis, takes responsibility for contribution to the difficulty, and changes behavior. Each analyst must conquer his/her own childhood neurosis where inauthentic parental interaction limited the ability to voice the disturbance. Authenticity has become a distinguishing characteristic of the relational dialogue (Aron, 1996; McLaughlin, 1991; Rachman, 2004; Renik, 1993).

It is clear that Ferenczi's clinical method introduced the analyst's subjectivity as an essential part of the therapeutic encounter (Ferenczi, 1988). It has been said that his capacity for self-scrutiny may never have been equaled or so meaningfully integrated into an analytic method (De Forest, 1954). This issue of the subjectivity of the analyst and the mutual influence of the analytic dyad has been addressed by several relational analysts (Aron, 1996; Bromberg, 1994; Davis, 1996; Ghent, 1989; McLaughlin, 1991; Rachman, 2003a). In addition, postmodern thinking has influenced relational analysts in their conception of theory and method (Aron & Harris, 1993; Bromberg, 1994; Harris, 1996a; Hoffman, 1992; Mitchell, 1993; Mitchell & Aron, 1999; Rachman, 2004). Ferenczi's innovations can be seen as an early development in this direction (Rachman, 2004).

The *Clinical Diary* is among other things, a document detailing the analyst's desire to create an analytic encounter with the analysand as a partner in the process. All the cases reported describe Ferenczi's development as an "analysand-informed psychoanalysis." The more difficult the case, the more the analysand's thoughts and feelings are used to inform the therapy (Rachman, 1997a). Another dimension depicted in the *Diary* is the courageous determination of Ferenczi to scrutinize his subjectivity and delineate its contribution to the treatment process. In this way, Ferenczi demonstrated that writing a new text for the analytic process would help evolve the field toward the notion of relationship. And with respect to relationship, feminism figures prominently in the relational dialogue (Benjamin, 1988; Dimen, 1991, 1995; Goldner, 1991; Harris, 1996a, 1996b). Ferenczi's views on female sexuality were inherent in his study of female homosexuality and the incest trauma. Ferenczi was, in fact, considered a feminist by some (Masson, 1984), because of his empathy for female incest survivors. In this regard, Ferenczi's views stand in marked contrast to those of his mentor, Freud, whose work has initiated a heated debate about gender in psychoanalysis generally placing women in an inferior position (Harris, 1991a, 1991b). Ferenczi began his work on female sexuality with a remarkable study of female homosexuality (Ferenczi, 1902; Rachman, 1997a). In fact, the case of Rosa K., an early psychotherapy of a female transvestite, was a significant leap forward in psychiatric thinking as an example of Ferenczi's capacity for empathic attunement to gender differences and female sexuality. His treatment of Rosa K. was based upon his understanding of her need to cross-dress. In addition, he understood that she could affirm her own sexuality in her own ways. This position of Ferenczi stood in marked contrast to the prevailing psychiatric and social thinking of the time (early 1900's Europe), which labeled her as a criminal who needed to be incarcerated. Indeed, Ferenczi was the only professional with whom Rosa K. had contact who treated her by establishing an empathic relationship (Rachman, 1997a).

Several other of Ferenczi's publications also addressed female sexuality (Vida, 1991). In his paper, "The effect on women of premature ejaculation in men" (Ferenczi, 1980a), he noted there was a significant literature on how men are affected by premature ejaculation, but little attention had been paid to how this problem affected women. Concentrating on man's sexual partner, he made an early statement on behalf of women and their sexual rights:

"If men gave up their selfish way of thinking and imagined what life would be like if they always had to cut the act short before their libidinous tension was relieved, they would gain some idea of the sexual martyrdom of the female sex, which is faced with the appalling dilemma of choosing between complete satisfaction and selfrespect." (Ferenczi, 1980a, pp. 291-292)

Ferenczi's sensitivity to a woman's subjective experience, as expressed in the above quotation, comes to full fruition in his theoretical ideas in *Thalassa* (Ferenczi, 1933b), the study of sexual trauma (Ferenczi, 1980l, 1988),

and in his paper on the development of mutual analysis (Ferenczi, 1980l). In “Thalassa,” Ferenczi’s most fanciful theoretical speculation, he attempted to develop, in collaboration with Freud, a mode of “bioanalysis.” Ferenczi hypothesized that there was a striving to return to the womb to gain blissful satisfaction. He emphasized not just the female body as the ultimate vessel for human satisfaction, but saw the female body with reference to a wider range of sexual satisfaction. In addition to the displacement of libido from the clitoris to the vagina, Ferenczi noted that there were additional parts of the female body, like the nipples, that were erotogenic.

Ferenczi’s study of sexual trauma crystallized the realization that women suffered actual sexual abuse at the hands of their fathers. The rejection that he suffered from publishing his conclusions about the incest trauma never deterred him from maintaining his view that women’s sexuality and personal development were being compromised by their abusive relationships with their fathers (Rachman, 1997b).

In Ferenczi’s analysis of Elizabeth Severn (R.N. in the *Clinical Diary*), he entered into a partnership with a female analysand which helped change the nature of the analytic encounter (Wolstein, 1997). In order to overcome an intensive impasse, which threatened to end the analysis as a failure, he agreed to Severn’s request for what he termed a “mutual analysis” (Ferenczi, 1988). By taking turns being analyst and analysand, Ferenczi was able to examine his psychological issues with women, which Severn had suggested were at the heart of his difficulties with her. Although Ferenczi was aware Severn’s difficulties were complicated by a history of Severn’s childhood trauma, he realized the importance of accepting her analysis of him and using his subjectivity to then inform her analysis. Although there has been much controversy since Ferenczi reported this clinical experiment, an objective examination of the results of his daring innovation indicates that the analysand benefitted from mutual analysis (Aron, 1996; Balint, 1968; Fortune, 1993; Masson, 1984; Rachman, 1997a, 2003a; Wolstein, 1997). Ferenczi’s idea of a mutual analysis however, suggested its use only in special cases when there were unanalyzable impasses. This formulation extended the idea of a co-created analytic text and more fully detailed the boundaries of the empathic method.

## CONCLUSION

Although Ferenczi’s dissidence caused great difficulty for Freud and the orthodox analytic community, Ferenczi’s analytic dissidence nevertheless *was not* born of opposition to Freud, but of the courage and faithfulness to Ferenczi’s own ideas and clinical experiences. In actuality, Freud and Ferenczi had shared ideas and similar clinical experiences. But they responded to and interpreted the clinical data in a different way. They began to diverge in their orientations when Freud firmly established his Oedipal Theory and while Ferenczi developed his “Confusion of Tongues” theory. What is more, Ferenczi had the benefit of his analysis with Freud and ongoing therapeutic dialogues with George Groddeck, Michael Balint, and Clara Thompson (Rachman, 1997a). Freud, of course, had the benefit of his own genius and self analysis. He did not, however, have the benefit of an interpersonal analytic experience, which both Jung and Ferenczi had offered him and which he turned down (Rachman, 1997a; Roazen, 1975). From a relational perspective, Freud’s self-analysis seems to have contributed to an emotional blindness to such issues as trauma, as it was relevant to his own childhood (Krüll, 1984), and to his relationship with his daughter, Anna (Rachman, 2003b).

Ferenczi’s dissidence operated from within psychoanalysis rather than in opposition to it. But, when it became clear that he was developing an alternative perspective in his “Confusion of Tongues” theory and Relaxation Therapy that could not receive the endorsement of Freud, he still would not (could not) break away from his mentor (Thompson, 1964). Although his devoted student Clara Thompson felt Ferenczi’s deference to Freud prevented him from founding his own school of psychoanalysis, we must consider that he did not wish to fracture psychoanalysis into schools. Ferenczi wished to provide a framework for the inclusion of new ideas about the analytic perspective, as well as to elasticize clinical functioning. Ferenczi’s ideas and clinical work can be considered the initial attempt to forge a relational perspective. Of course, it seems evident that psychoanalysis would benefit from a continued dialogue integrating the contributions of the Budapest School exemplified by the work of Ferenczi and Balint. Their exclusion for such a long period from mainstream psychoanalysis, after all, was a matter of politics (Grosskurth, 1992; Roazen, 1975), rather than any deficiency in their thinking or in their clinical expertise.

## **Arnold Wm. Rachman, PhD**

Arnold Wm. Rachman, PhD, Derner Institute, Adelphi University, Garden City, New York; New York University Medical School, New York City, New York; and Psychoanalytic Institute, Postgraduate Center for Mental Health, New York City, New York.

Correspondence concerning this article should be addressed to Arnold Wm. Rachman, PhD, 10 Park Avenue, New York, NY 10016.

**Published in:** *Psychoanalytic Psychology*, Vol. 24, N° 1, pp. 74–96, 2007.

### **Electronic version:**

[https://www.researchgate.net/publication/232599842\\_Sandor\\_Ferenczi's\\_contributions\\_to\\_the\\_evolution\\_of\\_ps psychoanalysis](https://www.researchgate.net/publication/232599842_Sandor_Ferenczi's_contributions_to_the_evolution_of_ps psychoanalysis)

## **REFERENCES**

- Aron, L. (1990). One-person and two-person psychologies and the method of psychoanalysis. *Psychoanalytic Psychology*, 7, 475–485.
- Aron, L. (1991). The patient's experience of the analyst's subjectivity. *Psychoanalytic Dialogues*, 1, 29–51.
- Aron, L. (1992a). From Ferenczi to Searles and contemporary relational approaches. *Psychoanalytic Dialogues*, 2, 181–190.
- Aron, L. (1992b). Interpretation as expression of the analyst's subjectivity. *Psychoanalytic Dialogues*, 2, 475–507.
- Aron, L. (1996). *A meeting of minds: Mutuality in psychoanalysis*. Hillsdale, NJ: The Analytic Press.
- Aron, L., & Anderson, F. S. (Eds.). (1998). *Relational perspectives on the body*. Hillsdale, NJ: The Analytic Press.
- Aron, L., & Harris, A. (Eds.). (1993). *The legacy of Sandor Ferenczi*. Hillsdale, NJ: The Analytic Press.
- Bacal, H. A., & Newman, K. M. (1990). *Theories of object relations: Bridges to self psychology*. New York: Columbia University Press.
- Balint, M. (1968). *The basic fault: Therapeutic aspects of regression*. London: Tavistock.
- Balint, M., & Balint, A. (1939). On transference and countertransference. *International Journal of Psycho-Analysis*, 20, 223–230.
- Barande, I. (1972). *Sandor Ferenczi*. Paris: Payot.
- Basch, M. F. (1984). The self object theory of motivation and the history of psychoanalysis. In P. E. Stepansky & A. Goldberg (Eds.), *Kohut's legacy: Contributions to self psychology*. Hillsdale, NJ: The Analytic Press.
- Beebe, B., & Lachmann, F. (1988). The contribution of mother-infant mutual influence to the origins of self and object representation. *Psychoanalytic Psychology*, 5, 305–337.
- Benjamin, J. (1988). *The bonds of love: Psychoanalysis, feminism and the problem of domination*. New York: Patheon.
- Bergman, M. S., & Hartmann, F. R. (Eds.). (1976). *The evolution of psychoanalytic technique*. New York: Basic Books.
- Berman, M. (1997). Relational psychoanalysis: A historical background. *American Journal of Psychology*, 51, 185–203.
- Blum, H. (1994). The confusion of tongues and psychic trauma. *International Journal of Psycho-Analysis*, 71, 871–882.
- Bollas, C. (1987). *The shadow of the object*. London: Free Association Books.
- Bollas, C. (1989). *Forces of destiny: Psychoanalysis and human idiom*. London: Free Association Books.
- Bonomi, C. (1999). Flight into sanity: Jone's allegation of Ferenczi's mental deterioration. *International Journal of Psychoanalysis*, 80, 507–542.

- Brabant, E., Falzeder, E., & Giampieri-Deutsch, P. (Eds.). (1993). *The Correspondence of Sigmund Freud and Sandor Ferenczi, Vol 1: 1908–1914* (P. Hoffer, Trans.). Cambridge, MA: Harvard University Press.
- Bromberg, P. M. (1994). "Speak! That I may see you!": Some reflections on dissociation, reality, and psychoanalytic listening. *Psychoanalytic Dialogues*, 4, 517–547.
- Casement, P. (1991). *On learning from the patient*. New York: Guilford Press. (Original work published 1985)
- Casement, P. (2002). *Learning from our mistakes: Beyond dogma in psychoanalysis and psychotherapy*. New York: Guilford Press.
- Covello, A. (1984). Letters de Freud: Du scenario de Jones au diagnostic sur Ferenczi. *Cahiers Confrontation*, 12, 63–78.
- Davis, J. M. (1996). Dissociation, repression and reality testing in the countertransference: The controversy in the psychoanalytic treatment of adult survivors of childhood sexual abuse. *Psychoanalytic Dialogues*, 6, 189–218.
- De Forest, I. (1942). The therapeutic technique of Sandor Ferenczi. *International Journal of Psycho-Analysis* 23, 121–139.
- De Forest, I. (1954). *The leaven of love: A development of the psychoanalytic theory and technique of Sandor Ferenczi*. New York: Harper & Row.
- Detrick, D. W., & Detrick, S. P. (Eds.). (1989). *Self-psychology: Comparison and contrast*. Hillsdale, NJ: The Analytic Press.
- Dimen, M. (1991). Deconstructing difference: Gender, splitting, and transitional space. *Psychoanalytic Dialogues*, 1, 335–352.
- Dimen, M. (1995). On our nature: Prolegomenon to a theory of sexuality. In T. Domenici & R. Lester (Eds.), *Disorienting Sexualities* (pp. 29–52). New York: Routledge.
- Dupont, J. (1985). Introduction to Ferenczi's *Journal Clinique: Janvier-October 1932*. Paris: Payot.
- Dupont, J. (Ed.). (1982). *Ferenczi/Groddeck Correspondence (1921–1933)*. Paris: Payot.
- Dupont, J. (Ed.) (1988a). Introduction. In *The Clinical Diary of Sandor Ferenczi*. Cambridge MA: Harvard University Press.
- Dupont, J. (1988b). Ferenczi's "madness." *Contemporary Psychoanalysis* 24, 250–261.
- Dupont, J. (1993). Michael Balint: Analysand, pupil, friend and successor to Sandor Ferenczi. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi* (pp. 145–157). Hillsdale, NJ: The Analytic Press.
- Epstein, L., & Feiner, A. H. (Eds.). (1979). *Countertransference*. New York: Jason Aronson.
- Fairbairn, W. R. D. (1952). *An object-relations theory of personality*. New York: Basic Books.
- Falzeder, E., & Brabant, E. (Eds.). (2000). *The Correspondence of Sigmund Freud and Sándor Ferenczi Vol. 3: 1920–1933* (P. Hoffer, Trans.). Cambridge, MA: Harvard University Press.
- Ferenczi, S. (1902). Homosexualites feminina (Female homosexuality) (Trans. Gabor Kalman) *Gyógyászat* 11:167–168.
- Ferenczi, S. (1980a). The effect on women on premature ejaculation in men. In M. Balint (Ed.), *Final Contributions to the problems and methods of psychoanalysis* (pp. 291–294). New York: Bruner/Mazel. (Original work published 1908)
- Ferenczi, S. (1980b). Technical difficulties in the analysis of a case of hysteria: Including observations on larval forms of onanism and onanistic equivalents (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 189–197). New York: Bruner/Mazel. (Original work published 1919)
- Ferenczi, S. (1980c). On influencing of the patient in psycho-analysis (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 198–217). New York: Bruner/Mazel. (Original work published 1919)
- Ferenczi, S. (1980d). The further development of the active therapy in psychoanalysis (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 198–217). New York: Bruner/Mazel. (Original work published 1920)

- Ferenczi, S. (1980e). Psycho-analytical observations on tic (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 142–174). New York: Bruner/Mazel. (Original work published 1921)
- Ferenczi, S. (1980f). On forced phantasies: Activity in the association technique (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 68–77). New York: Bruner/Mazel. (Original work published 1924)
- Ferenczi, S. (1980g). Counter-indications to the ‘active’ psychoanalytic technique (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 217–230). New York: Bruner/Mazel. (Original work published 1925)
- Ferenczi, S. (1980h). Psycho-analysis of sexual habits (J. I. Suttie, Trans.). In J. Rickman (Ed.), *Further contributions to the theory and technique of psychoanalysis* (pp. 259–297). New York: Bruner/Mazel. (Original work published 1925)
- Ferenczi, S. (1980i). The elasticity of psycho-analytic technique (E. Mosbacher, Trans.). In M. Balint (Ed.), *Final contributions to the problems and methods of psychoanalysis* (pp. 87–101). New York: Bruner/Mazel. (Original work published 1928)
- Ferenczi, S. (1980j). The principle of relaxation and neocatharsis (E. Mosbacher, Trans.). In M. Balint (Ed.), *Final contributions to the problems and methods of psychoanalysis* (pp. 108–125). New York: Bruner/Mazel. (Original work published 1930)
- Ferenczi, S. (1980k). Child analysis in the analysis of adults (E. Mosbacher, Trans.). In M. Balint (Ed.), *Final contributions to the problems and methods of psychoanalysis* (pp. 126–142). New York: Bruner/Mazel. (Original work published 1931)
- Ferenczi, S. (1980l). Confusion of tongues between adults and the child: The language of tenderness and of passion (E. Mosbacher, Trans.). In M. Balint (Ed.), *Final contributions to the problems and methods of psychoanalysis* (pp. 156–167). New York: Bruner/Mazel. (Original work published 1933)
- Ferenczi, S. (1985). *Journal clinique: janvier-octobre 1932* (J. Dupont, Ed.). Paris: Payot.
- Ferenczi, S. (1988). *Clinical Diary* (J. Dupont, Ed.; M. Balint & N. Zarday Jackson, Trans.). Cambridge, MA: Harvard University Press.
- Ferenczi, S., & Rank, O. (1986). *The development of psychoanalysis*. Madison, CT: International Universities Press. (Original work published 1925)
- Fortune, C. (1993). The case of “RN”: Sandor Ferenczi’s radical experiment in psychoanalysis. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi* (pp. 101–120). Hillsdale, NJ: The Analytic Press.
- Fortune, C. (Ed.). (2001). *The Ferenczi-George Groddeck correspondence, 1921–1933* (J. Cohen, Petersdorff & N. Ruebsaat, Trans.). New York: Other Press.
- Frankel, J. B. (1993). Collusion and intimacy in the analytic relationship. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi*, Hillsdale, NJ: The Analytic Press.
- Freud, S. (1953). Three essays on the theory of sexuality. In J. Strachey (Ed. & Trans.), *The standard edition of the complete psychological works of Sigmund Freud*. Vol. 7. London: Hogarth Press. (Original work published 1905)
- Freud, S. (1958a). Observations on transference-love. In J. Strachey (Ed. & Trans.), *The standard edition of the complete psychological works of Sigmund Freud*. Vol. 17. London: Hogarth Press. (Original work published 1915 [1914])
- Freud, S. (1958b). Lines of advance in psycho-analytic therapy. In J. Strachey (Ed. & Trans.) *The standard edition of the complete psychological works of Sigmund Freud*, Vol. 17 (pp. 157–168). London: Hogarth Press. (Original work published 1919 [1918])
- Freud, S. (1961). The ego and the id. In J. Strachey (Ed. & Trans.), *The standard edition of the complete psychological works of Sigmund Freud*. London: Hogarth Press. (Original work published 1923)
- Freud, S. (1992). *The diary of Sigmund Freud: 1929–1939* (M. Molnar, Ed.). New York: Scribner.
- Fromm, E. (1959). *Sigmund Freud’s mission*. New York: Harper & Row.
- Gay, P. (1988). *Freud: A life for our time*. New York: Norton.
- Gedo, J. E. (1976). “The wise baby reconsidered.” In J. E. Gedo & J. H. Pollock (Eds.), *Freud: The fusion*



- of science and humanism (pp. 357–378). New York: International Universities Press. (Original work published 1968)
- Gedo, J. E. (1986). *Conceptual Issues in Psychoanalysis*. Hillsdale, NJ: The Analytic Press.
- Ghent, E. (1989). Credo: The dialectics of one-person and two-person psychologies. *Contemporary Psychoanalysis*, 25, 169–241.
- Ghent, E. (1993). Wish, need and neediness. *Psychoanalytic Dialogues*, 3, 495–507.
- Gill, M. (1979). The analysis of the transference. *Journal of the American Psychoanalytic Association*, Supplement, 27, 263–288.
- Glover, E. (1924). “Active Therapy” and psychoanalysis: A critical review. *International Journal of Psycho-Analysis*, 5 (3), 269–311.
- Goldner, V. (1991). Toward a critical relational theory of gender. *Psychoanalytic Dialogues*, 1, 481–523.
- Greenberg, J. (1991). *Oedipus and beyond: A clinical theory*. Cambridge, MA: Harvard University Press.
- Grosskurth, P. (1993). *The secret ring: Freud’s inner circle and the politics of psychoanalysis*. New York: Addison Wesley.
- Grubrich-Simits, L. (1986). Six letters of Sigmund Freud and Sandor Ferenczi on the interrelationship of psychoanalytic theory and technique. *International Review of Psycho-Analysis*, 13, 259–277.
- Guntrip, H. (1961). *Personality structure and human interaction*. New York: International Universities Press.
- Harris, A. (1991a). Symposium on gender: Introduction. *Psychoanalytic Dialogues*, 1, 243–248.
- Harris, A. (1991b). Gender as contradiction. *Psychoanalytic Dialogues*, 2, 197–224.
- Harris, A. (1996a). Animated conversation: Embodying and engendering. *Gender & Psychoanalysis*, 1, 361–384.
- Harris, A. (1996b). False memory? False memory syndrome. *Psychoanalytic Dialogues*, 2, 287–304.
- Haynal, A. (1989). *Controversies in psychoanalytic method: From Freud and Ferenczi to Michael Balint*. New York: New York University Press.
- Haynal, A., & Falzeder, E. (Eds.). (1994). *100 years of psychoanalysis contributions to the history of psychoanalysis. Special issues of ‘Cahier Psychiatriques Genevois’*. London: Karnac Ltd.
- Heimann, P. (1960). Countertransference. *British Journal of Medical Psychology*, 33, 9–15.
- Herman, J. (1981). *Father-daughter incest*. Cambridge, MA: Harvard Universities Press.
- Herman, J. (1992). *Trauma and recovery: The aftermath of violence from domestic abuse to political terror*. New York: Basic Books.
- Hoffman, I. Z. (1992). Some practical implications of a social constructivism view of the psychoanalytic situation. *Psychoanalytic Dialogues*, 2, 287–304.
- Jones, E. (1953). *The life and work of Sigmund Freud Vol. I: The formative years and the great discoveries*. New York: Basic Books.
- Jones, E. (1955). *The life and work of Sigmund Freud Vol. II: Years of maturity 1901–1919*. New York: Basic Books.
- Jones, E. (1957). *The life and work of Sigmund Freud Vol. III: The last phase 1919–1939*. New York: Basic Books.
- Kahn, E., & Rachman, A. W. (2000). Carl Rogers & Heinz Kohut: A historical perspective. *Psychoanalytic Psychology*, 2, 294–312.
- Khan, M. M. R. (1969). On the clinical provision of frustrations, recognitions, and failures in the analytic situations—an essay on Dr. Michael Balint’s researches on the theory of psychoanalytic technique. *International Journal of Psycho-Analysis*, 50, 237–248.
- Kiersky, S., & Beebe, B. (1994). The reconstruction of early nonverbal relatedness in the treatment of difficult patients: A special form of empathy. *Psychoanalytic Dialogues* 4 (3), 389–408.
- Kohut, H. (1968). The psychoanalytic treatment of narcissistic personality disorder: Outline of a systematic approach. *Psychoanalytic Study of the Child*, 23, 86–113.
- Kohut, H. (1984). How does analysis cure? In A. Goldberg & P. E. Stepansky (Eds.). *Chicago: University of Chicago Press*.
- Krüll, M. (1984). *Freud and his father*. New York: Norton.

- Lichtenberg, J. (1989). *Psychoanalysis and motivation*. Hillsdale, NJ: The Analytic Press.
- Lichtenberg, J. (1997). On Ferenczi as a progenitor. *Psychoanalytic Inquiry*, 17, 4.
- Lichtenberg, J., Lachmann, F., & Fosshage, J. L. (1992). *Self and motivational systems*. Hillsdale, NJ: The Analytic Press.
- Masson, J. (1984). *The assault on truth: Freud's suppression of the seduction theory*. New York: Farrar, Straus & Giroux.
- McGraw, W. (Ed.). (1974). *The Freud/Jung letters* (R. Manheim & R. F. C. Hull, Trans.). Princeton, NJ: Princeton University Press.
- McLaughlin, J. T. (1991). Clinical and theoretical aspects of enactment. *Journal of the American Psychoanalytic Association*, 39, 595–614.
- Mészáros, J. (1995). The impact of Ferenczi's spirit and personality on the Budapest School of Psychoanalysis. Presentation. First Ferenczi Congress of Latin America. São Paulo, Brazil.
- Mitchell, S. A. (1988). *Relational concepts in psychoanalysis*. Cambridge, MA: Harvard University Press.
- Mitchell, S. A. (1993). *Hope and dread in psychoanalysis*. New York: Basic Books.
- Mitchell, S. A., & Aron, L. (Eds.). (1999). *Relational psychoanalysis: The emergence of a tradition*. Hillsdale, NJ: The Analytic Press.
- Modell, A. (1991). A confusion of tongues or whose reality is it? *Psychoanalytic Quarterly*, 60, 227–244.
- Molnar, M. (Ed.). (1992). *The diary of Sigmund Freud 1929–1939: A record of the final decade*. London: Hogarth.
- Ogden, T. H. (1994). The analytic third: Working with intersubjective clinical facts. *International Journal of Psycho-Analysis*, 75, 3–19.
- Ornstein, P. (1992). How to read the basic fault: An introduction to Michael Balint's seminal ideas on the psychoanalytic treatment process. In M. Balint (Ed.), *The basic fault* (pp. VII–XXIV). Evanston, IL: Northwestern University Press. (Originally published 1968)
- Rachman, A. W. (1989). Ferenczi's contributions to the evolution of a self psychology framework in psychoanalysis. In D. W. Detrick & S. P. Detrick (Eds.), *Self-psychology: Comparison and contrast* (pp. 89–109). Hillsdale, NJ: The Analytic Press.
- Rachman, A. W. (1993). Ferenczi and sexuality. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi*. Hillsdale, NJ: The Analytic Press.
- Rachman, A. W. (1995). Theoretical issues in the treatment of childhood sexual trauma in SCI patients: The confusion of tongues theory of childhood seduction. *SCI Psychological Process* 8, 1, 20–25.
- Rachman, A. W. (1997a). *Sandor Ferenczi: The psychotherapist of tenderness and passion*. Northvale, NJ: Jason Aronson.
- Rachman, A. W. (1997b). The suppression and censorship of Ferenczi's confusion of tongues paper. *Psychoanalytic Inquiry* 17, 4, 459–485.
- Rachman, A. W. (1998a). Ferenczi's "relaxation principle" and the issue of therapeutic responsiveness. *American Journal of Psychoanalysis*, 58, 63–81.
- Rachman, A. W. (1998b). Judicious self disclosure by the psychoanalyst. *International Forum of Psychoanalysis*, 7, 263–269.
- Rachman, A. W. (1999). Ferenczi's rise and fall from "analytic grace": The Ferenczi renaissance revisited. *Group* 23:3/4, 103–119.
- Rachman, A. W. (2000). Ferenczi's "Confusion of Tongues" theory and the analysis of the incest trauma. *Psychoanalytic Social Work*, 7, 27–53.
- Rachman, A. W. (2003a). *Psychotherapy of difficult cases: Flexibility and responsiveness in contemporary practice*. Madison, CT: Psychosocial Press.
- Rachman, A. W. (2003b). Freud's analysis of his daughter Anna: A confusion of tongues. In A. Roland, B. Ulanov, & X. Babre (Eds.), *Creative dissent: Psychoanalysis in evolution* (pp. 59–71). Westport, CT: Praeger.
- Rachman, A. W. (2004). Beyond neutrality: The creative function of analyst self disclosure in the psychoanalytic situation. In J. Reppen, M. A. Schulman, & J. Tucker (Eds.), *Way beyond Freud:*

- Postmodern psychoanalysis evaluated. London: Open Gate Press.
- Rachman, A. W., Kennedy, R., & Yard, M. (in press). Erotic transference and the relationship to childhood sexual seduction: Perversion in the psychoanalytic situation. *International Forum of Psychoanalysis*.
- Racker, H. (1953). The countertransference neurosis. *International Journal of Psycho-Analysis*, 34, 313–324.
- Racker, H. (1968). *Transference and countertransference*. New York: International Universities Press.
- Rank, O. (1929). *The trauma of birth*. New York: Harcourt Brace.
- Renik, O. (1993). Analytic interaction: Conceptualizing technique in light of the analyst's irreducible subjectivity. *Psychoanalytic Quarterly*, 62, 553–571.
- Roazen, P. (1975). *Freud and his followers*. New York: Alfred A. Knopf.
- Roazen, P. (2002). *The trauma of Freud: Controversies in Psychoanalysis*. New Brunswick, NJ: Transaction Publishers.
- Rogers, C. R. (1942). *Counseling and psychotherapy*. Boston, MA: Houghton Mifflin.
- Rogers, C. R. (1959). A theory of therapy, personality, and interpersonal relationships as developed in the client-centered framework. In S. Koch (Ed.), *Psychology: A study of science*, Vol. 3 (pp. 184–256). New York: McGraw Hill.
- Rogers, C. R. (1975). Empathetic, an unappreciated way of being. *The Counseling Psychologist*, 5, 2–10.
- Rush, F. (1977). Freud and the sexual abuse of children. *Chrysalis*, 1, 31–45.
- Searles, H. F. (1975). The patient as therapist to his analyst. In P. L. Giovacchini (Ed.), *Tactics and techniques in psychoanalytic therapy: Vol. 2: Countertransference*. New York: Jason Aronson.
- Searles, H. F. (1979). *Countertransference and related subjects*. New York: International Universities Press.
- Shane, M., & Shane, E. (1996). Self psychology in search of the optimal: A consideration of optimal responsiveness, optimal provision, optimal gratification and optimal restraint in clinical situation. *Progress in Self Psychology*, 12, 37–54.
- Shapiro, S. S. (1993). Clara Thompson: Ferenczi's messenger with half a message. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi* (pp. 159–173). Hillsdale, NJ: The Analytic Press.
- Stewart, H. (1977). *Psychic experience and problems of technique*. London: Routledge.
- Stewart, H. (1993). Clinical aspects of malignant regression. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi* (pp. 249–264). Hillsdale, NJ: The Analytic Press.
- Stolorow, R. (1976). Psychoanalytic reflections on client-centered therapy in the light of modern conceptions of narcissism. *Psychotherapy: Theory, Research & Practice*, 13, 26–29.
- Stolorow, R. D. (1995). An intersubjective view of self psychology. *Psychoanalytic Dialogues*, 5, 393–399.
- Sylwan, B. (1984, Automne). An untoward event: O`u la guerre du trauma de Breuer a` Freud, de Jones a` Ferenczi. *Cahiers Confrontation*, 12, 101–115.
- Thompson, C. (1944). Ferenczi's contribution to psychoanalysis. *Psychiatry*, 7, 245–252.
- Thompson, C. (1964). Ferenczi's relaxation method. In M. R. Green (Ed.), *Interpersonal psychoanalysis: Papers of Clara M. Thompson* (pp. 67–71). New York: Basic Books.
- Vida, J. E. (1991). Sandor Ferenczi on female sexuality. *Journal of the American Academy of Psychoanalysis*, 19, 271–281.
- Winnicott, D. W. (1947). Hate in the countertransference. *International Journal of Psycho-Analysis*, 30, 69–75.
- Winnicott, D. W. (1960). *The maturational process and the facilitating environment*. London: Hogarth Press.
- Winnicott, D. W. (1971). *Playing and reality*. London: Tavistock.
- Winnicott, D. W. (1972). *The maturational process and the facilitating environment*. London: Hogarth Press.
- Winnicott, D. W. (1975). *Through pediatrics to psychoanalysis*. London: Hogarth Press.
- Winnicott, D. W. (1988). *Human nature*. London: Free Association.
- Wolf, E. (1993). Role of interpretation in therapeutic change. In A. Goldberg (Ed.), *Progress in Self Psychology*, Vol. 9 (pp. 15–30). Hillsdale, NJ: The Analytic Press.
- Wolf, E. (1995). How to supervise without doing harm. *Psychoanalytic Inquiry*, 15, 252–267.
- Wolstein, B. (1959). *Countertransference*. New York: Grune & Stratton.

- Wolstein, B. (1989). Ferenczi, Freud, and the origins of American interpersonal relations. *Contemporary Psychoanalysis*, 25, 672–685.
- Wolstein, B. (1990). The therapeutic experience of psychoanalytic inquiry. *Psychoanalytic Psychology* 7, 565–580.
- Wolstein, B. (1993). Sandor Ferenczi and American interpersonal relations: Historical and personal reflections. In L. Aron & A. Harris (Eds.), *The legacy of Sandor Ferenczi* (pp. 175–183). Hillsdale, NJ: The Analytic Press.
- Wolstein, B. (1997). Countertransference, the frame and other themes related to Ferenczi and RN's mutual analysis. *Psychoanalytic Inquiry*, 17 (4).

*Volver a Artículos sobre Ferenczi*  
*Volver a Newsletter 12-ALSF*