Course: The Contributions of Sándor Ferenczi

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OVERVIEW OF COURSE

Until his death in 1933, Ferenczi devoted himself to clinical problems that are at the heart of contemporary psychoanalytic concerns. In important ways, Ferenczi’s thinking remains relevant to current debates. According to psychoanalytic historian Paul Roazen, “There is not much in the way of recent ideas about technique that he did not anticipate.” Ferenczi’s pioneering theoretical and clinical ideas constitute an important basis for later British object-relational, self-psychological, American-interpersonal, and relational approaches.

This course will attempt to develop a critical understanding of Ferenczi’s contributions, both from within the personal and historical contexts in which they arose, and as they relate to contemporary theoretical and clinical thinking.

The primary focus of the course will be Ferenczi’s later writings--most relevant to contemporary clinical concerns. Ferenczi’s various so-called “experiments in technique,” from the last dozen or so years of his life, form the core of his legacy. These “experiments” encompassed his pioneering explorations into several interrelated clinical issues which continue to be of great interest among contemporary analysts:

1. the role and nature of object relations in early development;
2. trauma and its effects, including dissociation and identification;
3. regression and shifting self-states;
4. intersubjectivity, interpersonal influence, and the inevitable interaction of transference and countertransference;
5. curative factors in the analytic relationship, including the roles of kindness, play, limits, authenticity, honesty, openness, and mutuality.

Ferenczi’s technical experiments included several phases:

1. “active technique,” in which he explored the role of abstinence and frustration;
2. “relaxation technique”: an attempt to explore the therapeutic value of the analyst’s flexibility, empathy, and tact, and later his kindness, “maternal” indulgence, and nurturance; and
3. “mutual analysis,” a technique based upon Ferenczi’s growing understanding of trauma and of the traumatic aspects of the analytic relationship; here, both analyst and patient let themselves be analyzed by the other.

The course will also cover Ferenczi’s other important contributions: his early work, especially his paper on “Introjection and transference”; his collaboration with Rank; and Thalassa. We will also read important work by Michael Balint, the
most influential extender of some of Ferenczi’s ideas; Laplanche, who critiques and extends Ferenczi’s ideas on trauma; and other relevant subsequent and contemporary literature.

Throughout the course, we will relate Ferenczi’s ideas that are under discussion to more contemporary analytic thinking, especially from object-relational, interpersonal, and relational perspectives.

COURSE OUTLINE

In addition to the readings listed below, we will discuss other works by Ferenczi, Freud, and others that are relevant as background, critique, or further development of these topics. References to the Freud-Ferenczi correspondence will be highlighted in lectures as these enhance our understanding of the historical/personal/interpersonal context or of Ferenczi’s concepts.

Topic 1: History and early contributions:

2 sessions

Class 1

As background, we will look at Ferenczi’s personal and family history and the cultural, political, and intellectual currents that influenced him.

Readings:


Optional readings:

Class 2

We will discuss Ferenczi’s early work, with a focus on his paper “Introjection and transference,” where he introduced the concept of introjection. This and other ideas in this paper can be seen as a precursor to Klein’s later, very influential conception of the mind. Ferenczi will develop in his later work themes he introduced here.

Reading:
1. Ferenczi, S., (1909), Introjection and transference, I (Roman numerals I, II, or III will be used to refer to the volume number of his collected papers).

Topic 2: Active technique:

1 session

Class 3

These and related papers mark the beginning of Ferenczi’s “experiments in technique,” in which he tried to find ways to make psychoanalysis a more effective treatment. In this first phase, he explored the role of analysts’ more active intervention, especially their requiring certain tasks of patients that involved abstinence. His work at this phase raised issues about the role of self-discipline and will, limits and structure, and frustration and renunciation in analytic process. These experiments (as is true of his later ones) led him to a deeper understanding of the transference-countertransference relationship, especially the dangers of the analyst’s authority, and the analyst’s taking a “parental” role—ideas he would also develop in ensuing years.

Readings:
1. Ferenczi, S., (1919), On the technique of psychoanalysis, 1919, II.
2. Ferenczi, S., (1919), Technical difficulties in the analysis of a case of hysteria, 1919, II.
3. Ferenczi, S., (1920), Further development of an active therapy in psycho-analysis, II.
4. Ferenczi, S., (1925), Contraindications to the active psycho-analytic technique, II.

Optional reading:
1. Freud, S., (1919), Lines of advance in psycho-analytic therapy.
**Topic 3: Collaboration with Rank:**

1 session

**Class 4**

Ferenczi and Rank’s work--still in the tradition of active technique--introduced a blueprint for conducting analyses based upon the then-new idea that analytic treatment is a process that unfolds according to a natural, predictable evolution of the transference, and they tried to use their insights to develop a more efficient technique. They also focused on the importance of the patient’s conviction--the “principle of experience”--and not just insight, as an essential part of cure, and investigated how this could be achieved. This was a lifelong preoccupation for Ferenczi.

Reading:

1. Ferenczi and Rank, (1924), *The Development of Psycho-analysis.*

Optional readings:


**Topic 4: Thalassa:**

1 session

**Class 5**

This work--placed in its chronological order but interrupting our study of Ferenczi’s clinical experiments--reflects Ferenczi’s speculations on the nature of sexuality. Here he extends Freud’s work on infantile sexuality and the death instinct, as well as some of his own early ideas. It is a fascinating, fanciful, and often antiquated monograph that takes the concept of regression to its furthest possible extreme. He also explores the nature of symbolization.

Reading:

3. Freud, S., (1920), Beyond the pleasure principle.

**Topic 5: Transitional papers:**

1 session

**Class 6**

These important papers set some of the groundwork for the next phase of Ferenczi’s technical experiments and begin to explore themes—the dangers of parents’ power, authority, and dishonesty; the importance of equality and openness by parents and analysts; unconscious fantasy as an attempt to cope with traumatic reality; neurosis as pathological mourning and therapy as a mourning process—that he (and others—e.g., Bowlby, 1980) will continue to work out.

**Readings:**

1. Ferenczi, S., (1927), The adaptation of the family to the child, III.
2. Ferenczi, S., (1927), The problem of the termination of the analysis, III.

**Topic 6: Relaxation technique:**

2 sessions

Here, Ferenczi, increasingly aware of problems with his “active” approach, moves toward the opposite pole from active technique: to kindness, indulgence, and nurturance as aspects of analytic method. He also introduced the concepts of analytic tact and the analyst’s empathy, and raised the question of the role of the analyst’s love. These technical innovations were based on his growing appreciation of the nature and importance of actual childhood trauma in the etiology of his patients’ distress, and the consequences of trauma in terms of developmental arrest, regression, splitting and dissociation, and feelings of inauthenticity. These papers constitute the first—surprisingly well developed—statement of a fully object-relational point of view. These ideas were to be further developed by Balint, whose work we will read toward the end of the course.

**Class 7**

**Readings:**

1. Ferenczi, S., (1928), The elasticity of psycho-analytic technique, III.
2. Ferenczi, S., (1929), The unwelcome child and his death instinct, III.
Class 8

Readings:

1. Ferenczi, S., (1930), The principle of relaxation and neocatharsis, III.
2. Ferenczi, S., (1931), Child analysis in the analysis of adults, III.

Optional readings for these two classes:


Topic 7: Trauma theory and mutual analysis:

4 sessions

The heart of Ferenczi's contributions is found in his writings of the last couple years of his life, and we will devote a major portion of our study to these. As historical context to these ideas, as well as the professional world in which Ferenczi developed them, we will discuss the history of the suppression of the "Confusion of tongues" paper, which included allegations that Ferenczi was mentally ill. "Confusion of tongues," which is a concise but circumspect statement of observations and insights that are more extensively and boldly discussed in the other two works, was received as heresy. In addition to further articulating his ideas about regression, Ferenczi explored the nature of trauma more fully than he had before and gave it a more prominent (and to his contemporaries, unacceptable) role in the etiology of neurosis. He created what remains a well-articulated and powerful theory of trauma.

Ferenczi now also grasped the extent of the influence of countertransference, as well as ways in which analytic treatment itself can be traumatic. He introduced the key (and often poorly understood) concept of "identification with the aggressor" as a response to both childhood trauma and to traumatic aspects of analytic treatment. The result was his experiment with countertransference disclosure--"mutual analysis"--Ferenczi's attempt to mitigate the potential traumatic effect of analytic treatment and thus extend its reach to more disturbed patients. Ferenczi had come to believe that parental and analytic honesty were even more important than kindness, and that their absence was a central element of trauma.

Class 9: Confusion of tongues

Readings:
1. Ferenczi, S., (1933), Confusion of tongues between adults and the child, III.

**Optional readings:**


**Classes 10 and 11: Clinical Diary: Trauma, regression, countertransference, mutual analysis**

**Readings:**

1. Ferenczi, S., (1932), *Clinical Diary*--extensive excerpts.

**Optional readings:**


**Class 12: Ferenczi’s trauma theory**

**Readings:**


Optional readings:

4. Ferenczi, S., (1916/1917), Two types of war neurosis, II.

**Topic 8: Successors**

1. Michael Balint

2 sessions

Michael Balint, Ferenczi’s most influential student, extended Ferenczi’s insights, mainly from the “relaxation” period. He expanded Ferenczi’s idea of passive object love into his own concept of primary love as the basic human need. He radically broadened the definition of trauma. He explored types of object relationships and the importance of patients finding the kind of object relationship they need in analysis. He emphasized the need, characteristic of many patients, for regression in treatment, and tried to define the conditions necessary for growth. Balint wrote extensively on the implications of his theory for technique. His work links Ferenczi and the British Middle School. We will read most of his final book, The Basic Fault, which brings together ideas he developed over the course of his career, and we will talk about the relation of Ferenczi’s and Balint’s ideas to those of Winnicott and Kohut.

**Class 13**

Reading:

1. Balint, M., (1968), The Basic Fault, extensive excerpts from Parts 1, 2, and 3.
**Class 14**

**Reading:**


**Optional readings:**


**2. Jean Laplanche**

1 session

**Class 15**

Laplanche’s concept of “primal seduction” describes what he regards as the universal trauma of the “implantation” of the mother’s unconscious psychic contents into the mind of the baby. This idea can be viewed as an extension of Ferenczi’s idea of identification with the aggressor. But unlike Ferenczi’s view that the parent has intentionally mystified the child about an event that is potentially knowable, Laplanche emphasizes the mother’s lack of awareness of her own influence on the child, and thus her inability to help the child symbolize what she has done to him. According to Laplanche, the inherently enigmatic nature of what the child has taken in from the mother is what makes it traumatic. His greater emphasis on the mother’s unconsciousness, and on the unknowability of what has been introjected, may lead to very different clinical implications from those Ferenczi drew.

**Reading:**


**Background:**