



Trauma theory in Sándor Ferenczi's writings of 1931 and 1932¹

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The author states that it is Ferenczi's writings of 1931 and 1932 that exhibit the most conspicuous departures from Freud's ideas and at the same time contain Ferenczi's most original contributions. The texts concerned – Confusion of tongues between adults and the child (Ferenczi, 1932a), the Clinical Diary (Dupont, 1985), and some of the Notes and fragments (Ferenczi, 1930–32), all of which were published posthumously – present valuable and original theories on trauma which are significant not only in historical terms but also because the ideas concerned are relevant to our conception of clinical psychoanalysis today. The aim of this paper is to give an account of Ferenczi's trauma theory as it emerges from his writings of 1931–32 and to specify the points on which he differs from Freud.

Keywords: *Erschütterung*, fragmentation, psychic reality, sexual abuse, splitting, trauma

It is interesting to reflect on the reasons why, in the last years of his life and career, Ferenczi came to write and produce so much material on the theory of trauma and on therapeutic practice in relation to trauma. According to Dupont (1998): “Ferenczi constructed his theory of trauma [...] gradually, on the basis of clinical observations” (p. 236). His final contributions (as they are called in the title of Balint's compilation) differ from his earlier works both formally and in terms of the interests that gave rise to them. The basic unity displayed by the content of the texts dating from those years fully justifies Balint's presentation of them as a single volume entitled *Final Contributions to the Problems and Methods of Psycho-analysis* (Ferenczi, 1955). Each of Ferenczi's last writings departs further than its predecessor from Freud's ideas, and it is because of these differences that they are most original. It is precisely this part of his oeuvre that attracted the most criticism.

Ferenczi's *Clinical Diary* (Dupont, 1985) and some of the *Notes and fragments* (1930–32) illustrate his developing ideas on trauma and the psychic mechanisms involved in it, rather than presenting finished theories. Trauma is portrayed as something that occurs in the adult–child encounter and directly influences the construction of the subject's narcissism.

¹Translated by Philip Slotkin MA Cantab. MITI.

Trauma according to *Confusion of tongues between adults and the child* (1932a)

In *Confusion of tongues between adults and the child*, Ferenczi (1932a) expands on the idea of the external origin of trauma and its effects in terms of character and neurosis; he reconsiders the role of the traumatic factor – which has in his view been set aside in psychoanalytic theory – and returns to some earlier Freudian formulations. He distinguishes two kinds of love which are here involved, the tender and the erotic current; he holds that a child is pervaded psychically, affectively and biologically by the former, while the latter is (in most cases) the exclusive province of adulthood. However, some adults predisposed to psychopathology confuse the tender language of the child with the sexual desires of a mature person and allow themselves to be carried away by these with no heed for the consequences. This is precisely what the title implies, suggesting the confusion of tongues occurring in the adult in relation to what the child is expressing. The child cannot always defend himself² or demonstrate his rejection because he is paralysed by intense fear. More specifically:

The same anxiety, however, if it reaches a certain maximum, compels them to subordinate themselves like automata to the will of the aggressor, to divine each one of his desires and to gratify these; completely oblivious of themselves they identify themselves with the aggressor. Through the identification, or let us say, introjection of the aggressor, he disappears as part of the external reality, and becomes intra- instead of extra-psychic; [...] the attack as a rigid external reality ceases to exist and in the traumatic trance the child succeeds in maintaining the previous situation of tenderness.

(Ferenczi, 1932a, p. 162)

In this way the child introjects the adult's sense of guilt. What previously seemed like a game to the child, behind the sexual act or sexual abuse perpetrated by the adult, is transformed into something for which the child deserves to be punished. The child's successful recovery from this aggression, however, means that he has already effected a split, being both guilty and innocent, destroying the links with his own feelings, perceptions and sensations, and sinking into a confusional state. So the child does not defend himself, but identifies with the aggressor and introjects what appears to him to be threatening. The child's reaction thus foreshadows the split in his personality. Elsewhere, Ferenczi (1929) develops the idea that the child confronts intense fear if his genital sensations are aroused prematurely, as his wishes are on the level not of an adult's violent passion but of play and tender affective manifestations.

Ferenczi distinguishes three potentially traumatic situations: incestuous seductions, passionate punishment and the terrorism of suffering. As a result of the trauma: "the psychic apparatus has split: whereas a part of the child has recorded the experience, there is another part that splits off and seeks to maintain the belief that 'nothing has happened' " (Genovés, in Jiménez Avello,

²Translator's note: For convenience, the masculine form is used throughout this translation for both sexes.

1998, p. 262, translated). In other words, such patients exhibit both a passive resistance to the attacks inflicted on them by the environment and a *splitting* of their being into a suffering, lacerated part on the one hand and a part which has made itself totally insensitive but knows everything. This idea was expressed clearly by Ferenczi (1931a) in *Child-analysis in the analysis of adults*:

It really seems as though, under the stress of imminent danger, part of the self splits off and becomes a psychic instance observing and desiring to help the self, and that possibly this happens in early – even the very earliest – childhood.

(p. 136)

The trauma has the effect that the child lacks mechanisms for binding the excess excitation. Ferenczi regards the traumatic factor as universal and holds that until this material is reached – it is initially accessible only through repetition and not through remembering – an analysis cannot be deemed to be finished.

Towards the end of *Confusion of tongues between adults and the child*, Ferenczi attempts a more precise outline of the psychic consequences of the experience of trauma. He writes:

If the shocks increase in number during the development of the child, the number and the various kinds of splits in the personality increase too, and soon it becomes extremely difficult to maintain contact without confusion with all the fragments, each of which behaves as a separate personality yet does not know of even the existence of the others. Eventually it may arrive at a state which – continuing the picture of *fragmentation* – one would be justified in calling *atomization*. One must possess a good deal of optimism not to lose courage when facing such a state, though I hope even here to be able to find threads that can link up the various parts.

(Ferenczi, 1932a, p. 165)

This passage throws even more light on the picture encountered by Ferenczi as he contemplates the material brought by his patients. The defence may give rise to a division of the psyche into a number of parts according to the impact and intensity of the traumas to which the child is exposed. He suggests the term *atomization* [*Atomisierung*], undertaken as a precaution against another manifestation, *fragmentation* [*Fragmentierung*], which, however, appears to correspond more to the clinical evidence. Here one can observe how this idea is progressively taking shape in his writings.

The adult uses the child for the satisfaction of his drives, whether sexual or emotional (anger or hate). The adult's act takes the child by surprise and leaves him defenceless. The traumatic event destroys the child's prior state of security with respect to himself and the world about him: someone who was formerly the bearer of feelings of trust for the child now removes him from his state of security and plunges him into one of total helplessness, so that the subject is traumatized and overcome instead by absolute insecurity. In consequence he submits and identifies with the aggressor. He thereby causes the aggression itself to disappear from external reality and maintains the tender situation that prevailed before the trauma, which bursts into and smashes the old order of the psychic constitution. However, Ferenczi also

tells us that this in itself is not enough to produce trauma; as in Freud's ideas on the origins of trauma, a second element is also required, which in this case is the adult's response. In Ferenczi's view, there are two stages in the pathologization of trauma; that is to say, the traumatic situation by itself does not necessarily result in the generation of trauma. There is a second phase, which has to do with the lack of support from the persons – in particular, the mother – on whom the child depends (Dupont, 1998). With regard to this second phase, it is pointed out that: "The mother's disapproval as a dysfunction of language is a traumatic agent that redoubles the early beginnings, which are dysfunctions of the child's libido" (Sabourin, 1984, p. 19, translated). This behaviour by adults towards the abused child bears a direct relationship to the psychic mechanism involved in the crystallization of the trauma.

Trauma and remembering

Ferenczi's trauma theory as outlined above assumes additional complexity in regard to how the effects of – and on – memory and remembering should be conceived. The reaction that gives rise to the trauma is the break with reality, which results in the *self-destruction of consciousness*. A stoppage of thought and perception occurs, paralysing the functions of the psyche, and the impressions concerned go unrecorded, even at the unconscious level. In consequence, there will be no way of remembering what has happened. The psychic apparatus does not store any of these traumatic impressions. The outcome is a 'split in the personality', which locates them *pretraumatically*, denying that anything has happened, and the attitude of the adult who pretends that nothing has happened forces the subject to forget, preventing any possibility of working through and making for disavowal. Since nothing has been recorded so that there is no possibility of remembering or of accession of material to consciousness, what is involved plainly has nothing to do with repression.

Ferenczi notes that:

This generally involves a trauma suffered in early childhood, which has never been experienced consciously and therefore cannot be remembered. He presents trauma as a concussion, producing a split in the personality. In order to illustrate this split, he uses a whole series of images: splitting off of a dead part, killed by the violence of the shock, enabling thus the rest to live a normal life, but with part of the personality missing and out of reach, like a sort of cyst inside the personality; or multiple splits under the effect of repeated shocks which may go as far as atomisation: the personality fragments in order to present a larger surface area to the shock.

(Dupont, 1998, p. 235)

The trauma appears as something unforeseen. The subject reacts with what Ferenczi calls a 'fleeting psychosis', a break with reality. This psychotic split paralyses all psychic activity. Motility becomes impossible, perception is blocked, and so is the activity of thought, inhibiting resistance and inducing a state of passivity: "The subject becomes malleable and reacts with fragmentation or even atomization of the personality" (Dupont, 1998, p. 236).

By this identification with the person responsible for the aggression, the psyche guarantees its own existence. It thereby finds a way of surviving the ill-treatment. In addition, it succeeds in preserving the 'good' image of the adult. These types of aggression are serious; they are like rapes or passionate punishments – in particular, punishments for misdeeds the child does not think he has committed. Although he does not consider them to be his own, the child finds it necessary to identify with the aggressor in order to maintain this good image, which is of fundamental importance to him. By virtue of the split, he becomes a child who is at one and the same time innocent and guilty. The adult, for his part – prompted either by his guilt or by the pressing need to avoid the consequences of his act – denies the facts, and this intensifies the effects of the trauma and causes the child to distrust his own feelings.

In some of the posthumously published Notes and fragments (1930–32), Ferenczi spells out the effects of trauma on the psyche. For instance:

'Shock' = annihilation of self-regard – of the ability to put up a resistance, and to act and think in defence of one's own self; perhaps even the *organs* which secure self-preservation give up their function or reduce it to a minimum. (The word *Erschütterung* is derived from *schütten*, i.e. to become 'unfest, unsolid', to lose one's own form and to adopt easily and without resistance, an imposed form ['like a sack of flour'].)

(Ferenczi, 1932b, pp. 253–4)

Self-abandonment is the person's response to the traumatic situation. Subjectivity lies in ruins, and the person is destroyed, having totally surrendered to the 'other' who perpetrated the aggression.

It can be seen that the 'shock' to which Ferenczi refers has the particular feature that it always occurs when the victim is unprepared. Having previously been pervaded by a sense of security, the child then loses trust in himself and the world, either partially or completely. The unpleasure to which this psychic shock gives rise proves impossible to overcome; in other words, the child is unable to deploy a defence that will act on the world about him (i.e. alloplastically) and thereby eliminate the cause of the suffering, nor can he produce a representation matching the suffering whereby some kind of working through or processing might be possible. The trauma immediately results in an overflowing of anxiety in the form of a sense of helplessness that stands in the way of any positive reaction to the situation, such as fight or flight in relation to the external danger. Hence:

Unpleasure increases and demands 'outlet'. *Self-destruction as releasing some anxiety* is preferred to silent toleration. Easiest to destroy in ourselves is the cs – the integration of mental images into a unit [...]. Disorientation [...]

(Ferenczi, 1931b, p. 249)

Ferenczi notes that an unexpected traumatic situation can have a certain anaesthetic effect, which he sees as the complete or partial cessation of psychic activity and the generation of a state of passivity that precludes resistance of any kind. Motility, perception, and thought come to a halt. By virtue of this loss of perception, the personality finds itself totally unprotected.

The outcome is a form of psychic paralysis with the following consequences:

- (1) the course of sensory paralysis becomes and remains permanently interrupted;
- (2) while the sensory paralysis lasts every mechanical and mental impression is taken up without any resistance; and
- (3) no memory traces of such impressions remain, even in the unconscious, and thus the causes of the trauma cannot be recalled from memory traces.

(Ferenczi, 1931b, p. 240)

To gain access to these causes, Ferenczi thinks it necessary to repeat the trauma in benign, more favourable circumstances, so that it can in this way be perceived by the subject for the first time and thereby find a channel for motor discharge.

Ferenczi's keen interpretation and theorization of trauma differs significantly from Freud's first trauma theory and presents ideas that enrich our understanding of the symptoms and suffering of traumatized patients as insistently manifested in clinical consultations.

Conflicts between Freud and Ferenczi over Ferenczi's trauma theory

While bearing in mind the foregoing considerations, let us now go back a little and take another look at the reasons for Freud's negative reaction to the presentation of Ferenczi's paper *Confusion of tongues between adults and the child* (1932a). What was it in Freud's conception of trauma and psychic reality in 1932 that made the ideas expressed by Ferenczi in that contribution so unacceptable to him? Did the notion of 'reality' account fully for the dispute, or was there something more?

That paper by Ferenczi was the opening contribution at the XIIth Congress of Psychoanalysis, held in Wiesbaden, Germany, on 12 September 1932. Ferenczi presented it to an audience of psychoanalysts who were active at the time – not, however, including Freud, who did not attend owing apparently to ill health. Although Freud did not hear the presentation, he was familiar with it from Ferenczi's own mouth, Ferenczi having read it to him at his home some time before. Freud's response was devastating: he instantly rejected it. Dupont describes what happened as follows:

Ferenczi stopped off at Vienna to read Freud the paper he was to present at the Congress, 'Confusion of Tongues between Adults and the Child'. It was a painful encounter, in which mutual incomprehension between the two men came to a head. Freud, deeply shocked by the contents of the paper, demanded that Ferenczi refrain from publishing anything until he had reconsidered the position he put forth in it.

(Dupont, 1985, pp. xvi–xvii)

Ferenczi gave his paper nevertheless, but was most dismayed by this *contretemps*, as his letters to Freud (in Falzeder and Brabant, 2000, pp. 442–3) and Groddeck (in Ferenczi and Groddeck, 2002) suggest.

Among the analysts who did hear the presentation at the Congress were "Anna Freud, Federn, Alexander, Jekels, Jones, de Groot, Brunswick, Simmel, Hárnick, Bonaparte, Sterba, Reik, Balint, Deutsch, Rado, Weiss,

Odier, Glover, Roheim, Menninger, de Saussure” (Masson, 1984, p. 151). The rejection of the paper was general, the discontent to which it gave rise being attributed to the new methods presented, the implications of a return to the seduction theory, the focus on infantile sexual abuse, the emphasis on working with difficult cases, and the manifest break with Freud’s thought. Yet this was not the beginning of the Freud–Ferenczi conflict, which can probably be traced back to the publication of *The Development of Psychoanalysis*, published jointly by Ferenczi and Rank in 1924 (Ferenczi and Rank, 1924).

On the other hand, it is odd that this 1932 contribution in particular should have caused such a stir, because, even if it marks an important turning point in Ferenczi’s work, it is not inconsistent with the trend of the rest of his *oeuvre*. Starting with his pre-analytic writings, Ferenczi had expressed his interest in difficult cases and presented unorthodox ideas on psychiatry and technical innovations for the treatment of his patients, all prior to the commencement of his relationship with Freud.³

Many of the commentators on the dispute between Freud and Ferenczi over *Confusion of tongues between adults and the child* concentrate on elements of countertransference between the two analysts. However, with regard to Freud’s rejection of Ferenczi’s contribution, the point most authors emphasize is surely the return to Freud’s first theory of neurosis. It is considered that Freud’s trauma theory, which featured in his early writings and held sway until he developed his concept of psychical reality, had been left behind by Freud’s later formulations. Ferenczi thus seemed to be reviving and putting forward conceptions that had been superseded by psychoanalysis at the very beginning of the century. The fact that Ferenczi too was to some extent aware of the presence of such elements in his thought is suggested by his letter to Freud of 20 July 1930:

Somewhat more prematurely than you, Herr Professor, but I, too, am occupying myself greatly with the problem of death, naturally, likewise in connection with my own fate and its chances for the future. A part of my bodily self-love seems to have sublimated itself into scientific interest, and this subjective factor has sensitized me, I believe, to psychic and other processes in our neurotics, which are playing themselves out in moments of real or supposed lethal danger. That was certainly the way in which I came to freshen up the apparently antiquated (at least temporarily cast-aside) trauma theory.

(Falzeder and Brabant, 2000, p. 396)

Tellingly, Freud was not scandalized by this letter – so it is not at all clear that the ideas advanced in Ferenczi’s paper were in fact dismissed out of hand by Freud. Indeed, as will be shown below, Freud himself continued to adduce these notions in his writings and lectures subsequent to the supposed abandonment of the seduction theory.

As we know, before 1897 Freud had developed a theory of the aetiology of neurosis that included hereditary factors, concomitant circumstances and specific causes, among these last being active seductions of infants by adults. Subsequently, as he recounts in *On the history of the psycho-analytic move-*

³See, for example, his 1902 contribution *Homosexualitas feminina* (Ferenczi, 2002).

ment, he abandoned this theory in favour of the concept of psychical reality. He writes:

Influenced by Charcot's view of the traumatic origin of hysteria, one was readily inclined to accept as true and aetiologically significant the statements made by patients in which they ascribed their symptoms to passive sexual experiences in the first years of childhood – to put it bluntly, to seduction. When this aetiology broke down under the weight of its own improbability and contradiction in definitely ascertainable circumstances, the result at first was helpless bewilderment. Analysis had led back to these infantile sexual traumas by the right path, and yet they were not true. The firm ground of reality was gone. [...] [However, if] hysterical subjects trace back their symptoms to traumas that are fictitious, then the new fact which emerges is precisely that they create such scenes in phantasy, and this psychical reality requires to be taken into account alongside practical reality. This reflection was soon followed by the discovery that these phantasies were intended to cover up the auto-erotic activity of the first years of childhood, to embellish it and raise it to a higher plane. And now, from behind the phantasies, the whole range of a child's sexual life came to light.

(Freud, 1914, pp. 17–8)

For Ferenczi, Freud's discovery that his female *neurotic patients lied* was catastrophic:

According to Ferenczi, Freud, who initially followed Breuer with great enthusiasm, has been irremediably disappointed by the discovery that hysterics lie. Since then he no longer loves his patients. He again becomes a materialistic, scientific investigator (entry of 1 May) emotionally detached from psychoanalysis, which he approaches henceforth on a purely intellectual level.

(Dupont, 1985, p. xxiv)

Ferenczi's commentators readily assert that Freud abandoned the traumatic seduction theory before 1900, but his subsequent references to it are at any rate then omitted. Yet it is insufficient to argue that Freud's dismissal was attributable to Ferenczi's revival of his own early seduction theory. After all, on the one hand, a detailed reading of Ferenczi's contributions from this period – in particular, his Wiesbaden paper – clearly indicates that Ferenczi was producing other things (as the previous paragraph and the next one show), and, on the other, Freud's writings reflect the vicissitudes of his understanding of the objective reality involved in traumatic experiences. It is therefore important to review the most significant occasions when Freud returns to the effect of objective reality on the production of trauma.

The most decisive passage is to be found in *From the history of an infantile neurosis* ('*Wolf Man*') (Freud, 1918), where Freud writes:

I must here turn for a moment to the history of the treatment. When once the Grusha scene had been assimilated – the first experience that he could really remember, and one which he had remembered without any conjectures or intervention on my part – the problem of the treatment had every appearance of having been solved. From that time forward there were no more resistances; all that remained to be done was to collect and to co-ordinate. The old trauma theory of the neuroses, which was after all built up upon impressions gained from psycho-analytic practice, had suddenly come to the front once more.

(pp. 94–5)

According to Sabourin, at times Freud seems to reject any revisiting of the old trauma theory (as in the case of Schreber), whereas elsewhere he does apparently return to it, as “for example in 1924 when he confirms that seduction ‘retains a certain aetiological importance, and even to-day I think some of these psychological comments are to the point’ ” (Sabourin, 1984, p. 17, translated). Sabourin is referring to a footnote added by Freud in 1924 to his 1896 text *Further remarks on the neuro-psychoses of defence*, in which Freud treats seduction as a concrete act and not as a phantasy or masquerade. The 1924 footnote reads:

This section is dominated by an error which I have since repeatedly acknowledged and corrected. At that time I was not yet able to distinguish between my patients' phantasies about their childhood years and their real recollections. As a result, I attributed to the aetiological factor of seduction a significance and universality which it does not possess. When this error had been overcome, it became possible to obtain an insight into the spontaneous manifestations of the sexuality of children which I described in my *Three Essays on the Theory of Sexuality* (1905d). Nevertheless, we need not reject everything written in the text above. Seduction retains a certain aetiological importance, and even to-day I think some of these psychological comments are to the point.

(Freud, 1896, p. 168)

This shows that Freud did not adopt a definitive position *vis-à-vis* the seduction theory. Furthermore, “in some of the letters to Fliess, censored by Freud's official followers, Max Schur found details that help us to understand the magnitude of Freud's conflict in this connection. Unlike his successors, Freud never inclined towards definitive opinions for or against the seduction theory” (Sabourin, 1984, p. 15, translated).

Although the existence of this dispute about the reality of a trauma is not in doubt, the old trauma theory is seen not to be conceptually abandoned by Freud – far from it. Hence there must necessarily be ‘something more’ in Ferenczi's 1932 text that aroused Freud's ire. There is indeed a less noticed aspect of the Freud–Ferenczi polemic about *Confusion of tongues*, which has to do with the drive element, and which could be expressed as follows: whereas for Freud there is a deadly component in every subject, for Ferenczi this component is attributable to the ‘other’; it comes about owing to the traumatic effect of the other's action, and if this were not the case there would, in his view, be no reason for it to be unleashed.

However, on this point too, Freud presents different ideas at different times. At the end of the *Three Essays on the Theory of Sexuality* (Freud, 1905, p. 234), he writes:

“The external influences of seduction are capable of provoking interruptions of the latency period or even its cessation, and [...] in this connection the sexual instinct of children proves in fact to be polymorphously perverse”. (This passage is quoted by Sabourin, 1984, p. 14.) External traumatic factors, such as adult seduction of infants, can have catastrophic effects on the development of the libido, holding it back, delaying it, or diverting it into other channels.

In a footnote to *The Ego and the Id*, Freud writes:

The battle with the obstacle of an unconscious sense of guilt is not made easy for the analyst. Nothing can be done against it directly, and nothing indirectly but the slow procedure of unmasking its unconscious repressed roots, and of thus gradually changing it into a conscious sense of guilt. [...] it must be honestly confessed that here we have another limitation to the effectiveness of analysis; after all, analysis does not set out to make pathological reactions impossible, but to give the patient's ego *freedom* to decide one way or the other.

(Freud, 1923, p. 50)

Freud here comes up against a barrier to psychoanalysis – a point beyond which it is impossible to advance further. The unconscious sense of guilt is for him a deadly aspect of the death drive that has always been present and cannot be eliminated by psychoanalysis.

When Ferenczi discusses the death drive, he links it to the concept of guilt – a concept on which both Ferenczi and Freud wrote at length:

The notion of the *traumatolytic function of dreams*, which proved so useful for understanding repetitive dreams, [was] an original idea of Freud's that was further developed by Ferenczi and reinstated by the master in 1931 in the first of his *New Introductory Lectures*; the privileged locus of the repetitions of trauma 'of which the patient himself was hitherto unaware' is related by Ferenczi to his guilt.

(Sabourin, 1984, p. 14, translated)

Ferenczi had addressed this idea of the activation of the death drive by the other in *The adaptation of the family to the child* (Ferenczi, 1928) and *The unwelcome child and his death instinct* (Ferenczi, 1929).

The above considerations throw light on the debate concerning the Freud–Ferenczi dispute of the 1930s. The argument that Freud's anger with Ferenczi was due to the latter's having revived his early trauma theory is seen not to explain Freud's reaction. Again, it is found that the innovations introduced by Ferenczi in his text were accepted neither by Freud nor by the contemporary psychoanalytic community. Lastly, disagreement – not unrelated to the variations in Freud's theory at different times – is observed with regard to the unleashing of the death drive for, where Freud regards it as something structural and necessary that has always lain in wait, Ferenczi considers that the overflowing of the death drive results from the action of the other, an action that is traumatic because it exceeds the capacity of the infant's ego to register it within the framework of his own experience.

Trauma in the *Clinical diary*

When Ferenczi says that there is a confusion of tongues, one must ask: *what is it that is being confused?* It is found that it is the child's language of tenderness that is being confused with adult erotic language. This confusion has a number of consequences, which are in outline as follows:

- i. There is a state of affairs in which a trusted adult turns into an aggressor and destroys the child's security.
- ii. The child becomes paralysed by intense fear.

- iii. The child identifies with the aggressor (at the same time introjecting the aggressor, who disappears as an external entity and becomes intrapsychic). The child wishes to gratify his attacker.
- iv. In this way the child succeeds in maintaining the former situation and preserves the good image of the adult.
- v. The child introjects the adult's sense of guilt.
- vi. Owing to his guilt, the child feels that his act deserves punishment.
- vii. The child is already divided, owing to his opposing feelings: he feels at one and the same time innocent and guilty. He is cut off from his own affective states and is pervaded by confusion. One part has recorded the experience, while another seeks to maintain the idea that nothing has happened.
- viii. The adult's response is a contributory factor to the generation of trauma.

Ferenczi invokes three potentially traumatic situations: incestuous seductions, passionate punishments and the terrorism of suffering: *Erschütterung*. This German word is used repeatedly by Ferenczi throughout his late writings, for instance, in *Über Erschütterung* ['On shock'] (Ferenczi, 1932b) and *Zur Revision der Traumdeutung* ['On the revision of the interpretation of dreams'] (Ferenczi, 1932c), both published in Volume 4 of his complete works in German, *Bausteine zur Psychoanalyse* (Ferenczi, 1940). The word is usually translated as 'shock', or rendered directly as 'psychic shock', and is derived, as Ferenczi explains, from "*schütten*, i.e. to become 'unfest, unsolid', to lose one's own form and to adopt easily and without resistance, an imposed form ('like a sack of flour')" (Ferenczi, 1932b, p. 254). According to the dictionary of Rouinesco and Plon (1998), in the entry on 'traumatic neuroses', Freud uses the term *Erschütterung* in *Beyond the Pleasure Principle* (Freud, 1920) to denote the somatic character of trauma and *Schreck* [fright] for its psychic aspect.

Ferenczi refers to traumas or shocks occurring in early infancy (the first years of life). The level of the trauma depends on how early it takes place and on its impact:

The stronger and more destructive the suffering – perhaps also the earlier in life it had to be endured, thus determining an orientation – the larger the circle of interests that must be drawn around the center of the suffering in order to make it seem meaningful, or even naturally inevitable.

(Dupont, 1985, pp. 31–2)

Later in the same text, Ferenczi writes:

A helpless child is mistreated, for example, through hunger. What happens when the suffering increases and exceeds the small person's powers of comprehension? Colloquial usage describes what follows by the expression 'the child comes *to be beside itself*'. The symptoms of being beside oneself (seen from the outside) are: absence of reaction with regard to sensitivity, generalized muscle cramps, often followed by generalized paralysis ('being gone'). If I am to believe what my patients report about similar states, this 'being gone' is not necessarily a state of 'not-being', but rather one of 'not-being-here'.

(Dupont, 1985, p. 32)

The trauma is thus connected with this *self-abandonment*. This impacts on how the event is remembered, as what has happened appears to be alien to the person himself: there is an externality about the suffering, as if it were being inflicted on someone else, and that is how the material enters consciousness, without any integration involving the patient. Ferenczi also suggests that schizophrenia is bound up with traumas sustained before the constitution of the personality.⁴

The fact that the child's adjustment to the environment is both untimely and imposed on him can also have traumatic effects (Dupont, 1985, p. 114). Not only indifference and aggression, but also excessive tenderness – that is, either an excess or a deficiency of these – has adverse effects on a child and may lead to a tendency to regress. For a child, Ferenczi holds, an excess of libidinal passion or its exaggerated expression can only be felt as aggression. The imposition of untimely forms of satisfaction on the child disturbs normal ego development, requiring the ego to confront tasks for which it is not equipped, being neither psychically nor emotionally mature enough to cope with them (Dupont, 1985, p. 189).

Ferenczi makes a further distinction between what he calls paternal and maternal hypnosis (the two concepts having been introduced in his paper *Introjection and transference* [Ferenczi, 1909]):

Suggestibility, therefore, is actually the result of shock: paternal hypnosis equals fear of being killed, maternal hypnosis equals fear of being abandoned by the mother, that is, the threat that the libido will be withdrawn; the latter feels just as deadly as an aggressive threat to life. But the most frightful of frights is when the threat from the father is coupled with simultaneous desertion by the mother.

(Dupont, 1985, p. 18)

These last two components, acting in unison, have the most catastrophic effects on the infant's psyche. Traumas will then impinge on a psyche that has fragmented. Ferenczi likens "when the anticathexis of the sensory organs is absent" (Dupont, 1985, p. 46). In this way, the resulting traumatic impression [*Eindruck*] can make its way without any resistance into the psyche, where it installs itself in the manner of a suggestion – that is, leaving the individual in a permanent state of hypnosis. The absence of countercathexis clearly influences the effect of the trauma. Ferenczi explains in his *Clinical Diary* (Dupont, 1985) what he means by *being lost*, which has to do with deception: a person's words convey the illusion that something is going to happen, but what actually occurs is something else or indeed the opposite of what was expected. So the anticipated representation of the situation does not correspond to what happens in reality. It is this state of being lost or confused that is observed in the subject between surprise at the unexpected situation and subsequent adaptation. In children, however, the trauma occurs at times when no adult is available to repair the damage, but adaptation to the new situation is nevertheless called for:

⁴“Schizophrenia is a ‘photochemical’ mimicry reaction, instead of self-assertion (revenge, defense). (Dm.: schizophrenics were affected by trauma *before* they possessed a personality.)” (Dupont, 1985, p. 150).

If the trauma strikes the soul, or the body, unprepared, that is, without countercathexis, then its effect is destructive for body and mind, that is, it disrupts through fragmentation [...]. In the psychic sphere, the intruding force, in the absence of a solid countercathexis, produces a kind of explosion, a destruction of psychic associations between the systems and psychic contents, which may reach down to the deepest elements of perception.

(Dupont, 1985, pp. 69–70)

A number of aspects of Ferenczi's conception of splitting and fragmentation suggest that he sees splitting (in the sense of *Spaltung*) as a normal process, constitutive of the psyche and linked to loss, in which we encounter the first disappointments of love, related to weaning, sphincter control, punishment, education, etc. However, subsequent traumas and the absence of an appropriate environment and of adults who can accompany the child and help him to understand what is happening to him give rise to what Ferenczi calls the atomization of his personality. Ferenczi thus wonders: "But what is this being intolerable? Surely nothing else but continuing to live in a distorted inner (psychic) or outer reality" (ibid., p. 192). Although the necessity of existing in fragmented, atomized form appears as a defence that allows the subject to go on living, it entails enormous and unbearable pain.

In Ferenczi's view, any psychic defence, whether neurotic or psychotic, leads in effect to the death of parts of the psyche:

Whenever an emotional reaction is suppressed, interrupted, or repressed, something is actually destroyed in us. The annihilated part of the person falls into a state of decay and decomposes. Should the entire person be prevented from acting, then generalized decomposition ensues, that is to say, death. [...] Total disintegration (death) is just as impossible for it as coming back to life through the influx of vital energies.

(Dupont, 1985, p. 88)

Trauma thus appears as a process of dissolution that tends towards death. That is why Ferenczi sees both neurotics and psychotics as being in the throes of a *chronic death agony*. The task of analysis, therefore, is fully to discover the nature of this death agony which patients carry with them, while also making them feel that in spite of everything there is value in continuing to live – that *it is worth existing*.

For this reason, with regard to the treatment of these traumatized patients, Ferenczi emphasizes the importance of reaching the traumatic material. This can be explained as follows: at first, the trauma is accessible only by repetition, since it exists solely as 'something lived'; however, it is possible to relive it during analysis and turn it into an 'experience', the outcome being the union of the fragmented parts of the personality.

The following quotation from Ferenczi will help us to understand the nature of trauma:

What is trauma? 'Concussion', reaction to an 'unbearable' external or internal stimulus in an autoplasmic manner (modifying the self) instead of an alloplasmic manner (modifying the stimulus). A neoformation of the self is impossible without the previous destruction, either partial or total, or dissolution of the former self. A new ego cannot be formed directly from the previous ego, but from *fragments*, more or less elementary products of its disintegration. (Splitting, atomization.) The relative

strength of the ‘unbearable’ excitation determines the degree and depth of the ego’s disintegration.

(Dupont, 1985, p. 181)

This passage further clarifies Ferenczi’s previous statements that the factors which determine the depth of psychic fragmentation are the strength, insistence and intensity of the excitation. The earlier state to which the psychic fragments resulting from the subject’s reaction to the trauma have given rise is completely changed. The fragmentation has to do with adaptation, in that it is precisely this which allows the subject to preserve the continuity of his existence.

Another question-and-answer passage points in the same direction:

What is traumatic: an attack or its consequences? The adaptive potential ‘response’ of even very young children to sexual or other passionate attacks is much greater than one would imagine. Traumatic confusion arises mainly because the attack and the response to it are denied by the guilt-ridden adults, indeed, are treated as deserving punishment.

(Dupont, 1985, p. 178)

Hence the child’s attempt to adapt – that is, to make changes in his own psyche so as to confer meaning on, and respond to, the traumatic event – fails since it is not capable of maintaining a favourable state of affairs, because he is blamed both by the environment and by the people from whom he expects love and affection.

Conclusions

It is clear from the foregoing that Ferenczi’s writings on trauma diverge appreciably from Freud’s views while making an original contribution to psychoanalytic theory; at the same time, they provide a wealth of valuable indications for clinical practice. Throughout his final texts, Ferenczi argues that trauma is caused by the following state of affairs. A trusted adult turns into an aggressor, destroys the child’s security and paralyses him with fear. To preserve the former situation, the child identifies with the aggressor, introjecting him, causing him to disappear as an external threat, and converting him into an intrapsychic entity. In this way he succeeds in maintaining the image of the adult prior to the aggression. The child introjects the adult’s guilt and comes to feel that his act deserves punishment. The response of another adult – e.g. the mother – to this aggression, be it denial, approval, understanding or otherwise, will be decisive in determining whether the outcome is traumatic. This response will be the basis on which the child will be able to start working through what has happened to him, or, conversely, on which he will disavow what he himself has lived through. The effect of trauma is fragmentation of the psyche; the difference between fragmentation and splitting is one of degree, and it depends on the insistency of the trauma whether a state of splitting leads on to fragmentation.

As a result of the psychic shock [*Erschütterung*] represented by the trauma, it remains unrecorded, even in the unconscious, and the traumatic element has to do with the impossibility of remembering. A stoppage of

thought takes place, preventing the recording of any perception, and the person sinks into a state of passivity without putting up any kind of resistance. Analytic treatment must therefore make it possible for the patient to *experience* for the first time what he *lived through* traumatically.

Ferenczi and Freud quarrelled about trauma theory because, for Freud, Ferenczi was resuscitating a theory he had left behind in the development of psychoanalysis. Yet the dispute relates not only to the reality of trauma (as opposed to *psychic reality*), but also to the appearance and operation of the death drive, which for Freud is always present, whereas for Ferenczi it is triggered by a disorder of the environment or of another person. In Freud's case, certain passages in his works clearly indicate that he by no means ever completely discarded the trauma theory of his early writings.

Ferenczi's *oeuvre* occupies an enormously important place in the history of psychoanalysis and can throw light on the development of our discipline and present-day clinical practice. The last few years have witnessed a resurgence of interest in his writings among the psychoanalytic community, and the resulting advances have demonstrated the value of his insights to the full. His writings address fundamental psychoanalytic issues, relevant to both classical and contemporary psychoanalysis, with formulations that did not occur to others working at the same time. Furthermore, it was left to a whole new generation of analysts – even though most of them do not mention him – to bring analytic research to bear on these problems once again. As María Luisa Muñoz de la Cruz rightly pointed out in her opening address to the 1998 Congress on Ferenczi in Madrid:

It seems to me that I speak for all of us in saying that what unites us at this wide-ranging symposium is not so much agreement or disagreement with Ferenczi's contributions, on the level of both theory and technique, as, above all, a communion with his 'psychoanalytic passion', his passion for psychoanalytic knowledge and research through, and in particular, on clinical work.

(Muñoz de la Cruz, 1998, p. 9, translated)

What is important in Ferenczi's *oeuvre*, then, is not whether his solutions were right or wrong, but the issues raised in his writings, which are fundamental and remain unresolved to this day, and which stem from his clinical and analytic commitment.

Translations of summary

Traumatheorie in Sándor Ferenczis Schriften von 1931 und 1932. Der Autor vertritt die Ansicht, dass Ferenczis Schriften von 1931 und 1932 die auffälligsten Abweichungen von Freuds Überlegungen enthalten und gleichzeitig Ferenczis originärste Beiträge darstellen. Die betreffenden Texte – "Sprachverwirrung zwischen den Erwachsenen und dem Kind" (1932), *Das klinische Tagebuch* (1985) und einige weitere Schriften, die allesamt postum veröffentlicht wurden –, enthalten wertvolle und originäre Traumatheorien, die nicht nur in historischer Hinsicht wichtig sind, sondern Überlegungen enthalten, die Relevanz für unsere heutige Konzeption der klinischen Psychoanalyse besitzen. Der Autor beschreibt die Entwicklung von Ferenczis Traumatheorie anhand der Schriften von 1931–32 und spezifiziert diejenigen Aspekte, in denen Ferenczi von Freud abweicht.

Teoría del trauma en los escritos de Sándor Ferenczi de 1931 y 1932. Los escritos de Ferenczi de 1931 y 1932 son los que más se alejan de Freud y los que presentan sus desarrollos más originales. Es-

tos escritos ('Confusión de lengua entre e adulto y el niño' (1932), *Diario clínico* (1932), 'Notas sobre traumatismo' (1934), y 'Notas y Fragmentos' (1934), todos publicados póstumamente) presentan teorías valiosas y originales sobre el trauma y el traumatismo las cuales son pertinentes no sólo por su valor histórico, sino porque brindan elementos para pensar la clínica psicoanalítica de hoy. El presente trabajo se propone explicar la teoría del trauma en los escritos de Ferenczi de 1931–32, precisando sus puntos de distanciamiento con Freud.

La théorie du traumatisme dans les écrits de Sándor Ferenczi de 1931 et 1932. L'auteur établit que ce sont les écrits de Ferenczi de 1931 et 1932 qui se révèlent les points de divergence les plus manifestes d'avec les idées de Freud et qui, en même temps, contiennent les contributions les plus originales de Ferenczi. Les textes concernés 'Confusion de langue entre les adultes et les enfants' (1932a), le *Journal clinique* (publié en 1985 sous la direction éditoriale de Dupont) et quelques uns des 'Notes et fragments' (1930–32) – toutes oeuvres publiées à titre posthume – présentent des théories originales et de valeur sur le traumatisme qui sont significatives non seulement du point de vue historique mais aussi car les idées concernées sont pertinentes pour notre conception de la psychanalyse clinique contemporaine. Le but de cet article est de rendre compte de la théorie du traumatisme de Ferenczi telle qu'elle ressort de ses écrits de 1931–32 et de préciser les points selon lesquels il diffère de Freud.

Teoría del trauma negli scritti di Sándor Ferenczi del 1931 e 1932. L'autore sostiene che, all'interno dell'opera di Ferenczi, sono gli scritti del 1931 e 1932 a dimostrare particolarmente la più cospicua divergenza dalle idee freudiane. Secondo l'autore questi scritti contengono i più originali contributi di Ferenczi. I testi in questione, 'Confusione delle lingue tra adulti e bambini' (1932a), 'Diario clinico' (1985) e alcuni scritti in 'Note e frammenti' (1930–32) (tutti pubblicati postumi) contengono validi e originali concetti teorici sul trauma. Questi sono significativi non solo dal punto di vista storico ma anche perché si tratta di idee concernenti l'attuale prassi psicoanalitica. Scopo di questo lavoro è passare in rassegna la teoria del trauma di Ferenczi che emerge dalle opere del 1931–32 e evidenziare gli elementi di divergenza con il pensiero freudiano.

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