

# PSYCHOANALYSIS AND EDUCATION<sup>1</sup>

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## *Introduction*

In this paper, the term education is used in its widest sense, comprising all types of interference with the spontaneous process of development as they exist in the childish organism. The attempt is made here to establish and describe in detail the links between the following fields of work: psychoanalytic investigation proper; analytic child psychology as its most important by-product; the application of this new child psychology, on the one hand, to the upbringing of children and, on the other hand, to the research into the causation of neurosis and the prevention of neurotic development.

## I. TRENDS OF PSYCHOANALYTIC INVESTIGATION

### *Psychoanalytic Child Psychology*

The birth date of psychoanalytic child psychology is placed somewhere between two publications of Freud: *The Studies on Hysteria* (1895) and *The Interpretation of Dreams* (1900). At the earlier date Freud worked with propositions which were, in the later metapsychological sense, *dynamic* as well as *logical*, i.e., his basic conception was that of conflicting internal forces which cannot be brought into harmony with each other because they belong to different strata of the mind, being for one part conscious, for the other part unconscious. At the later date, *genetic* propositions were added, i.e., the cause of inner conflict was traced back to the individual past of the patient. Examples are given here of the manner in which clinical findings were used as the corner stones for a theory of childhood development. This analytic child psychology built up by reconstruction was confirmed later by child analysis, by the direct observation of young children, and recently even by academic experiments.

<sup>1</sup> The following is an abstract of my Anniversary Lecture, especially in so far as it can be regarded as a contribution to the Symposium on "Problems of Infantile Neurosis."

### *Application of Psychoanalytic Findings to Education*

The application of psychoanalysis to new methods of upbringing was governed by the hope of preventing the formation of neuroses. In this respect, two periods can be distinguished from each other:

- (1) A *period of optimism* when almost the whole blame for the neurotic development of the child was laid on parental actions such as: wrong sleeping arrangements, prohibitions of sexual expression, ban on sexual curiosity, castration threats, abuse of parental authority, etc. It was hoped that the modification of these parental attitudes would do away with infantile anxiety and, consequently, abolish the infantile neuroses. These hopes were excessive and led to a series of disappointments which are described in detail, especially where the problem of infantile anxiety and its consequences are concerned. Then followed
- (2) a *period of pessimism*, when the origin of neurosis was recognized to be due, not to environmental influences, but to inevitable factors of various kinds. These are discussed in detail under the following headings:
  - (a) qualitative innate factors, such as bisexuality which results in unavoidable deep conflicts between internal strivings;
  - (b) quantitative innate factors, such as the insatiable character of the infant's instinctive demands, leading to painful and pathogenic frustrations;
  - (c) the crucial situations in the child's life which give rise to pathogenic fixation points, such as (in reverse order):
    - the *conflicts of the oedipal phase* with the incestuous fantasies, phallic masturbation, and castration fears;
    - toilet training*, with the accompanying anal and urethral frustrations;
    - sibling rivalry*;
    - weaning*, as the traumatic oral forerunner of later castration ideas, etc.

### *Investigations Reaching Back to the Beginning of Life*

In trying to trace back the beginning of neurotic development to its sources, investigations were directed increasingly to the earliest libidinal phase, i.e., the oral one. The paper contains here a description of the difficulties which face the investigator of the preverbal stage of development, quoting authors such as Bowlby, Fries, Greenacre, Hartmann, Hendrick, Hoffer, Kris, Loewenstein, Mahler, Spitz, as well as Melanie

Klein and her followers who have done the most intensive and extensive analytic research work on the problems of this period of life.

*Current Misconceptions. Repercussions in the Mind of the Lay Public*

Little of this work has reached the lay public of parents and educators, except the misunderstood notion that, since the causation of neurosis dates back to the first year of life, it is the behavior of the mother (i.e., again an environmental factor) which proves decisive for the child's mental health or illness. Here the paper contains a detailed discussion of the current concept of the so-called "*rejecting mother*" who harms her infant's libidinal development by her lack of motherly feeling. The concept of "rejection" of an infant's libidinal advances is analyzed and broken up into its constituent factors. It is shown that a mother may be experienced as rejecting by the infant for a multitude of different reasons, connected with either her conscious or unconscious attitudes, her bodily or mental defects, her physical presence or absence, her unavoidable libidinal preoccupations, her aggressions, her anxieties, etc. The disappointments and frustrations which are inseparable from the mother-child relationship are emphasized. The opinion is expressed that the mother is merely the representative and symbol of inevitable frustration in the oral phase, just as the father in the oedipal phase is the representative of inevitable phallic frustration which gives him his symbolic role of castrator. The new concept of the rejecting mother has to be understood in the same sense as the familiar older concept of the castrating father. To put the blame for the infantile neurosis on the mother's shortcomings in the oral phase is no more than a facile and misleading generalization. Analysis has to probe further and deeper in its search for the causation of neurosis.

## II. THE BEGINNING OF LIFE

*The Meaning of an "Anaclitic" Relationship*

The concept of an anaclitic relationship has never been fully utilized in analytic writings. It means, shortly, that the relationship to the mother, although the first to another human being, is not the infant's first relationship to the environment. What precedes it, is an earlier phase in which not the object world but the body needs and their satisfaction or frustration play the decisive part.

*Definition of the Phase of Need Satisfaction*

At the beginning of life, the infantile organism is governed by the vital body needs for respiration, sleep, intake of food, evacuation, skin

comfort and movement, which are the forerunners and first representatives of the basic drives. They impinge on the mind with the sensations of tension and relief which arise in connection with them. Accordingly, pain and pleasure are the first mental qualities between which the infant learns to distinguish, hallucination of wish fulfillment being the highest mental achievement of which he is capable at this period. In the struggle for satisfaction of the vital needs and drives, the object merely serves the purpose of wish fulfillment, its status being no more than that of a means to an end, a "convenience." The libidinal cathexis at this time is shown to be attached, not to the image of the object, but to the blissful experience of satisfaction and relief, a state of affairs of which the dynamics and economics can be studied best in adult life in so-called *Leibreiz* dreams (i.e., dreams of the fulfillment of body needs), which seem to be the prototype and remnant of this early mode of functioning.

*Difficulties of Need Satisfaction. The Interrelations Between Needs*

It is shown that even the most devoted mother finds it a difficult task to fulfill her infant's needs. Various reasons for this phenomenon are discussed, among them an innate coupling of needs which is disregarded under the cultural conditions of child rearing. One example given concerns the close interrelation between the needs for *sleep* and for *skin contact*, falling asleep being rendered more difficult for the infant who is kept strictly separated from the mother's body warmth. Other relevant examples are the interrelation between sleep and passive body movement (rocking), or feeding and active motility. It is explained how the interference with such connections can lead to the common discomforts and difficulties of infantile life which arise around the otherwise pleasurable functions of sleeping and intake of nourishment.

*Incompleteness of Need Fulfillment*

But even if it were feasible to satisfy the infant's needs, true to the complicated interrelations in which they manifest themselves, satisfaction in extrauterine life is bound to compare unfavorably with intrauterine conditions, where we imagine need fulfillment to be immediate and adequate. It is shown here with the help of examples how the infant suffers from the delays in wish fulfillment as well as from the quantitative differences between insatiable wishes and measured (i.e., rationed) satisfaction. This leads to a discussion of the proportion between experiences of frustration in infantile life.

### III. THE BEARING OF THE PHASE OF NEED FULFILLMENT ON LATER DEVELOPMENT

Three main ways are described in which traces of these early events are perpetuated in later development with important consequences for (1) the mother relationship; (2) the ego structure; (3) the choice of symptom formation.

#### 1. *Consequences for the Anaclitic Mother Relationship*

Libidinal cathexis shifts gradually from the experience of satisfaction to the image of the object without whom satisfaction would not have come about. With this step forward in development, the infant enters into the stage of object love. It is described how the formerly impersonal experiences of the pleasure-pain series become related secondarily to the person of the mother and produce, according to Melanie Klein, two mother images, the "good" and the "bad" mother, or, in our terms, two attitudes toward the mother image, one positive and one negative. The question is discussed whether we can consider this event as the starting point of *ambivalence*. It is emphasized, further, that even the most extreme devotion on the part of the mother does not save her from the fate of having the painful as well as the pleasurable aspects of the infant's life experiences transferred onto her.

It is important to note that the attitudes of the earliest "need-satisfying" phase never become completely extinct. Clinical examples are given to show that they continue to underlie the object-libidinal relationships, and can become manifest once more in states of severe emotional regression.

#### 2. *Consequences for the Ego Structure*

The rudiments of the ego, as they emerge gradually in the first half of the first year of life, take their pattern from the environmental conditions which have left their imprint on the infant's mind by way of his early pleasure-pain experiences, the conditions themselves becoming internalized in the ego structure. Although the ego as an agency furthers wish fulfillment, it does so accepting the principles of delay and rationing which govern infant care. This acceptance can be shown to be significant from various aspects:

- (a) it represents the beginning of what will later become the reality principle;

- (b) it creates in the ego a lasting, cautious, curtailing attitude toward the id drives; and thereby
- (c) introduces into the personality a first break, id and ego serving different aims from then onwards,<sup>2</sup> governed in their functioning by different principles.

The question is raised here how far this first basic structural conflict should be considered as decisive for the human individual's propensity to develop neurotic disorders.

### 3. *Some Consequences for the Choice of Symptom Formation. "Somatic Compliance"*

Not all needs are equally important to all infants. Some infants take feeding disappointments badly while tolerating the absence of skin comfort, or vice versa; the same applies to sleep, intestinal trouble, etc. Wherever the smooth sequence of need-tension-relief is upset and the mental representative of a need or drive is weighed down by memory of intense unpleasure connected with it, the door is open for the same area or function to be used later for the playing out of neurotic conflicts. In this manner the onset of later neurotic eating difficulties, asthma, skin eruptions, hysterical paralyses may be predetermined by earliest troubles in the area of infantile feeding, respiratory discomforts, frustrations of skin comfort or severe restrictions of early motility. The question is raised here whether what we call "somatic compliance" dates back to these earliest events.

There opens a new and wide field for analytic investigation and especially for longitudinal study of individual developments.

## IV. CONCLUSIONS

Although the attempt has been made in this paper to carry the search for the causation of neurosis to the very beginning of life, emphasis is laid on the fact that no conclusions have been drawn concerning the prevention of neurosis. There is on the author's part no belief that even the most revolutionary changes in infant care can do away with the tendency to *ambivalence* or with the division of the human personality into an *id and ego* with conflicting aims. On the contrary, the idea is expressed that both these factors are by now inherent in the structure of the human mind, the pleasure-pain experiences in the earliest phase merely acting as appropriate stimuli which elicit their emergence.

<sup>2</sup> See Freud, S. (1939), *An Outline of Psychoanalysis*. New York: Norton, 1950.

Similarly, if somatic compliance were not created by the events of infant care, it would no doubt be called into being by the chance occurrences of bodily illness when excessive amounts of unpleasure are experienced by the infant in connection with one specific body part or function.

According to the views presented here, the emergence of neurotic conflicts has to be regarded as the price paid for the complexity of the human personality. The paper ends with the description of the chronological order in which these conflicts arise during development and the degree to which each type of conflict shows itself amenable to psychoanalytic therapy.