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Our
Inner Conflicts

A CONSTRUCTIVE THEORY

OF NEUROSIS

W · W · NORTON & COMPANY · INC ·
NEW YORK

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clusions because he failed to take them into account. My interest in this subject grew over the course of fifteen years. It was furthered in part by association with Erich Fromm who, through his profound knowledge of both sociology and psychoanalysis, made me more aware of the significance of social factors over and above their circumscribed application to feminine psychology. And my impressions were confirmed when I came to the United States in 1932. I saw then that the attitudes and the neuroses of persons in this country differed in many ways from those I had observed in European countries, and that only the difference in civilizations could account for this. My conclusions finally found their expression in *The Neurotic Personality of Our Time*. The main contention here was that neuroses are brought about by cultural factors—which more specifically meant that neuroses are generated by disturbances in human relationships.

In the years before I wrote *The Neurotic Personality* I pursued another line of research that followed logically from the earlier hypothesis. It revolved around the question as to what the driving forces are in neurosis. Freud had been the first to point out that these were compulsive drives. He regarded these drives as instinctual in nature, aimed at satisfaction and intolerant of frustration. Consequently he believed that they were not confined to neuroses *per se* but operated in all human beings. If, however, neuroses were an outgrowth of disturbed human relationships, this postulation could not possibly be valid. The concepts I arrived at on this score were, briefly, these. Compulsive drives are specifically neurotic; they are born of feelings of isolation,

than these, as if it were not a separate entity but had
been taken out of some larger whole.

My questionings have since proved justified. In the
years following, my focus of interest shifted to the role
of conflicts in neurosis. I had said in *The Neurotic
Personality* that a neurosis came about through the col-
lision of divergent neurotic trends. In *Self-Analysis* I
had said that neurotic trends not only reinforced each
other but also created conflicts. Nevertheless conflicts
had remained a side issue. Freud had been increasingly
aware of the significance of inner conflicts; he saw them,
however, as a battle between repressed and repressing
forces. The conflicts I began to see were of a different
kind. They operated between contradictory sets of neu-
rotic trends, and though they originally concerned con-
tradictory attitudes toward others, in time they encom-
passed contradictory attitudes toward the self, contra-
dictory qualities and contradictory sets of values.

A crescendo of observation opened my eyes to the
significance of such conflicts. What first struck me most
forcibly was the blindness of patients toward obvious
contradictions within themselves. When I pointed these
out they became elusive and seemed to lose interest.
After repeated experiences of this kind I realized that
the elusiveness expressed a profound aversion to
tackling these contradictions. Finally, panic reactions
in response to a sudden recognition of a conflict showed
me I was working with dynamite. Patients had good
reason to shy away from these conflicts: they dreaded
their power to tear them to pieces.

Then I began to recognize the amazing amount of
energy and intelligence that was invested in more or less

desperate efforts to "solve" [1] the conflicts or, more precisely, to deny their existence and create an artificial harmony. I saw the four major attempts at solution in about the order in which they are presented in this book. The initial attempt was to eclipse part of the conflict and raise its opposite to predominance. The second was to "move away from" people. The function of neurotic detachment now appeared in a new light. Detachment was part of the basic conflict—that is, one of the original conflicting attitudes toward others; but it also represented an attempt at solution, since maintaining an emotional distance between the self and others set the conflict out of operation. The third attempt was very different in kind. Instead of moving away from others, the neurotic moved away from himself. His whole actual self became somewhat unreal to him and he created in its place an idealized image of himself in which the conflicting parts were so transfigured that they no longer appeared as conflicts but as various aspects of a rich personality. This concept helped to clarify many neurotic problems which hitherto were beyond the reach of our understanding and hence of our therapy. It also put two of the neurotic trends which had previously resisted integration into their proper setting. The need for perfection now appeared as an endeavor to measure up to this idealized image; the craving for admiration could be seen as the patient's need to have outside affirmation that he really was his idealized image. And the farther the image was removed from reality the more insatiable this latter need would logically be. Of all the attempts at solution the idealized

[1] *See* footnote on page 33.

image is probably the most important by reason of its far-reaching effect on the whole personality. But in turn it generates a new inner rift, and hence calls for further patchwork. The fourth attempt at solution seeks primarily to do away with this rift, though it helps as well to spirit away all other conflicts. Through what I call externalization, inner processes are experienced as going on outside the self. If the idealized image means taking a step away from the actual self, externalization represents a still more radical divorce. It again creates new conflicts, or rather greatly augments the original conflict—that between the self and the outside world.

I have called these the four major attempts at solution, partly because they seem to operate regularly in all neuroses—though in varying degree—and partly because they bring about incisive changes in the personality. But they are by no means the only ones. Others of less general significance include such strategies as arbitrary rightness, whose main function is to quell all inner doubts; rigid self-control, which holds together a torn individual by sheer will power; and cynicism, which, in disparaging all values, eliminates conflicts in regard to ideals.

Meanwhile the consequences of all these unresolved conflicts were gradually becoming clearer to me. I saw the manifold fears that were generated, the waste of energy, the inevitable impairment of moral integrity, the deep hopelessness that resulted from feeling inextricably entangled.

It was only after I had grasped the significance of neurotic hopelessness that the meaning of sadistic trends finally came into view. These, I now understood, repre-

sented an attempt at restitution through vicarious liv-
ing, entered upon by a person who despaired of ever
being himself. And the all-consuming passion which
can so often be observed in sadistic pursuits grew out
of such a person's insatiable need for vindictive
triumph. It became clear to me then that the need
for destructive exploitation was in fact no separate neu-
rotic trend but only a never-failing expression of that
more comprehensive whole which for lack of a better
term we call sadism.

Thus a theory of neurosis evolved, whose dynamic
center is a basic conflict between the attitudes of "mov-
ing toward," "moving against," and "moving away
from" people. Because of his fear of being split apart
on the one hand and the necessity to function as a unity
on the other, the neurotic makes desperate attempts at
solution. While he can succeed this way in creating a
kind of artificial equilibrium, new conflicts are con-
stantly generated and further remedies are continually
required to blot them out. Every step in this struggle
for unity makes the neurotic more hostile, more help-
less, more fearful, more alienated from himself and
others, with the result that the difficulties responsible
for the conflicts become more acute and their real reso-
lution less and less attainable. He finally becomes hope-
less and may try to find a kind of restitution in sadistic
pursuits, which in turn have the effect of increasing his
hopelessness and creating new conflicts.

This, then, is a fairly dismal picture of neurotic de-
velopment and its resulting character structure. Why
do I nonetheless call my theory a constructive one? In
the first place it does away with the unrealistic optimism

that maintains we can "cure" neuroses by absurdly simple means. But it involves no equally unrealistic pessimism. I call it constructive because it allows us for the first time to tackle and resolve neurotic hopelessness. I call it constructive most of all because in spite of its recognition of the severity of neurotic entanglements, it permits not only a tempering of the underlying conflicts but their actual resolution, and so enables us to work toward a real integration of personality. Neurotic conflicts cannot be resolved by rational decision. The neurotic's attempts at solution are not only futile but harmful. But these conflicts *can* be resolved by changing the conditions within the personality that brought them into being. Every piece of analytical work well done changes these conditions in that it makes a person less helpless, less fearful, less hostile, and less alienated from himself and others.

Freud's pessimism as regards neuroses and their treatment arose from the depths of his disbelief in human goodness and human growth. Man, he postulated, is doomed to suffer or to destroy. The instincts which drive him can only be controlled, or at best "sublimated." My own belief is that man has the capacity as well as the desire to develop his potentialities and become a decent human being, and that these deteriorate if his relationship to others and hence to himself is, and continues to be, disturbed. I believe that man can change and go on changing as long as he lives. And this belief has grown with deeper understanding.

cultural
furios

The kind, scope, and intensity of such conflicts are largely determined by the civilization in which we live. If the civilization is stable and tradition bound, the variety of choices presenting themselves are limited and the range of possible individual conflicts narrow. Even then they are not lacking. One loyalty may interfere with another; personal desires may stand against obligations to the group. But if the civilization is in a stage of rapid transition, where highly contradictory values and divergent ways of living exist side by side, the choices the individual has to make are manifold and difficult. He can conform to the expectations of the community or be a dissenting individualist, be gregarious or live as a recluse, worship success or despise it, have faith in strict discipline for children or allow them to grow up without much interference; he can believe in a different moral standard for men and women or hold that the same should apply for both, regard sexual relations as an expression of human intimacy or divorce them from ties of affection; he can foster racial discrimination or take the stand that human values are independent of the color of skin or the shape of noses—and so on and so forth.

There is no doubt that choices like these have to be made very often by people living in our civilization, and one would therefore expect conflicts along these lines to be quite common. But the striking fact is that most people are not aware of them, and consequently do not resolve them by any clear decision. More often than not they drift and let themselves be swayed by accident. They do not know where they stand; they make compromises without being aware of doing so; they are in-

volved in contradictions without knowing it. I am referring here to normal persons, meaning neither average nor ideal but merely non-neurotic.

There must, then, be preconditions for recognizing contradictory issues and for making decisions on that basis. These preconditions are fourfold. We must be aware of what our wishes are, or even more, of what our feelings are. Do we really like a person or do we only think we like him because we are supposed to? Are we really sad if a parent dies or do we only go through the motions? Do we really wish to become a lawyer or a doctor or does it merely strike us as a respectable and profitable career? Do we really want our children to be happy and independent or do we only give lip service to the idea? Most of us would find it difficult to answer such simple questions; that is, we do not know what we really feel or want.

Since conflicts often have to do with convictions, beliefs, or moral values, their recognition would presuppose that we have developed our own set of values. Beliefs that are merely taken over and are not a part of us hardly have sufficient strength to lead to conflicts or to serve as a guiding principle in making decisions. When subjected to new influences, such beliefs will easily be abandoned for others. If we simply have adopted values cherished in our environment, conflicts which in our best interest should arise do not arise. If, for instance, a son has never questioned the wisdom of a narrow-minded father, there will be little conflict when the father wants him to enter a profession other than the one he himself prefers. A married man who falls in love with another woman is actually engaged in

a conflict; but when he has failed to establish his own convictions about the meaning of marriage he will simply drift along the path of least resistance instead of facing the conflict and making a decision one way or the other.

Even if we recognize a conflict as such, we must be willing and able to renounce one of the two contradictory issues. But the capacity for clear and conscious renunciation is rare, because our feelings and beliefs are muddled, and perhaps because in the last analysis most people are not secure and happy enough to renounce anything.

Finally, to make a decision presupposes the willingness and capacity to assume responsibility for it. This would include the risk of making a wrong decision and the willingness to bear the consequences without blaming others for them. It would involve feeling, "This is my choice, my doing," and presupposes more inner strength and independence than most people apparently have nowadays.

Caught as so many of us are in the strangling grip of conflicts—however unacknowledged—our inclination is to look with envy and admiration on people whose lives seem to flow along smoothly without being disturbed by any of this turbulence. The admiration may be warranted. These may be the strong ones who have established their own hierarchy of values, or who have acquired a measure of serenity because in the course of years conflicts and the need for decision have lost their uprooting power. But the outward appearance may be deceptive. More often, due to apathy, conformity, or opportunism, the people we envy are incapable of truly

Value of recognizing + having conflicts

facing a conflict or of truly trying to resolve it on the basis of their own convictions, and consequently have merely drifted or been swayed by immediate advantage.

To experience conflicts knowingly, though it may be distressing, can be an invaluable asset. The more we face our own conflicts and seek out our own solutions, the more inner freedom and strength we will gain. Only when we are willing to bear the brunt can we approximate the ideal of being the captain of our ship. A spurious tranquillity rooted in inner dullness is anything but enviable. It is bound to make us weak and an easy prey to any kind of influence.

When conflicts center about the primary issues of life, it is all the more difficult to face them and resolve them. But provided we are sufficiently alive, there is no reason why in principle we should not be able to do so. Education could do much to help us to live with greater awareness of ourselves and to develop our own convictions. A realization of the significance of the factors involved in choice would give us ideals to strive for, and in that a direction for our lives.[1]

The difficulties always inherent in recognizing and resolving a conflict are immeasurably increased when a person is neurotic. Neurosis, it must be said, is always a matter of degree—and when I speak of "a neurotic" I invariably mean "a person to the extent that he is neurotic." For him awareness of feelings and desires is at a low ebb. Often the only feelings experienced con-

Blurring of insight in the neurotic.

Weak insight

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[1] To normal persons merely dulled by environmental pressures, a book like Harry Emerson Fosdick's *On Being a Real Person* would be of considerable profit.

sciously and clearly are reactions of fear and anger to blows dealt to vulnerable spots. And even these may be repressed. Such authentic ideals as do exist are so pervaded by compulsive standards that they are deprived of their power to give direction. Under the sway of these compulsive tendencies the faculty to renounce is rendered impotent, and the capacity to assume responsibility for oneself all but lost.[2]

Neurotic conflicts may be concerned with the same general problems as perplex the normal person. But they are so different in kind that the question has been raised whether it is permissible to use the same term for both. I believe it is, but we must be aware of the differences. What, then, are the characteristics of neurotic conflicts?

A somewhat simplified example by way of illustration: An engineer working in collaboration with others at mechanical research was frequently afflicted by spells of fatigue and irritability. One of these spells was brought about by the following incident. In a discussion of certain technical matters his opinions were less well received than those of his colleagues. Shortly afterward a decision was made in his absence, and no opportunity was given him subsequently to present his suggestions. Under these circumstances, he could have regarded the procedure as unjust and put up a fight, or he could have accepted the majority decision with good grace. Either reaction would have been consistent. But he did neither. Though he felt deeply slighted, he did not fight. Consciously he was merely aware of being irritated. The murderous rage within him appeared

[2] *Cf.* Chapter 10, Impoverishment of Personality.

only in his dreams. This repressed rage—a composite of his fury against the others and of his fury against himself for his own meekness—was mainly responsible for his fatigue.

His failure to react consistently was determined by a number of factors. He had built up a grandiose image of himself that required deference from others to support it. This was unconscious at the time: he simply acted on the premise that there was nobody as intelligent and competent in his field as he was. Any slight could jeopardize this premise and provoke rage. Furthermore, he had unconscious sadistic impulses to berate and humiliate others—an attitude so objectionable to him that he covered it up by overfriendliness. To this was added an unconsious drive to exploit people, making it imperative for him to keep in their good graces. The dependence on others was aggravated by a compulsive need for approval and affection, combined as it usually is with attitudes of compliance, appeasement, and avoidance of fight. There was thus a conflict between destructive aggressions—reactive rage and sadistic impulses—on the one hand, and on the other the need for affection and approval, with a desire to appear fair and rational in his own eyes. The result was inner upheaval that went unnoticed, while the fatigue that was its external manifestation paralyzed all action.

Looking at the factors involved in the conflict, we are struck first by their absolute incompatibility. It would be difficult indeed to imagine more extreme opposites than lordly demands for deference and ingratiating submissiveness. Second, the whole conflict remains unconscious. The contradictory tendencies operating in it are

exploit others, his technique was to attempt both to endear and intimidate. These tendencies by themselves would have made him willing and eager to receive help and support. But he had also developed an extreme unconscious arrogance which involved a correspondingly vulnerable pride. Others should feel honored to be of service to him: it was humiliating for him to ask for help. His aversion to having to make a request was reinforced by a strong craving for independence and self-sufficiency that made it intolerable for him to admit he needed anything or to place himself under obligation. So he could take, but not receive.

The content of this conflict differs from that of the first example but the essential characteristics are the same. And any other example of neurotic conflict would show a like incompatibility of conflicting drives and their unconscious and compulsive nature, leading always to the impossibility of deciding between the contradictory issues involved.

Allowing for an indistinct line of demarcation, the difference, then, between normal and neurotic conflicts lies fundamentally in the fact that the disparity between the conflicting issues is much less great for the normal person than for the neurotic. The choices the former has to make are between two modes of action, either of which is feasible within the frame of a fairly integrated personality. Graphically speaking, the conflicting directions diverge only 90 degrees or less, as against the possible 180 degrees confronting the neurotic.

In awareness, too, the difference is one of degree. As

Kierkegaard [3] has pointed out: "Real life is far too multifarious to be portrayed by merely exhibiting such abstract contrasts as that between a despair which is completely unconscious, and one which is completely conscious." We can say this much, however: a normal conflict can be entirely conscious; a neurotic conflict in all its essential elements is always unconscious. Even though a normal person may be unaware of his conflict, he can recognize it with comparatively little help, while the essential tendencies producing a neurotic conflict are deeply repressed and can be unearthed only against great resistance.

The normal conflict is concerned with an actual choice between two possibilities, both of which the person finds really desirable, or between convictions, both of which he really values. It is therefore possible for him to arrive at a feasible decision even though it may be hard on him and require a renunciation of some kind. The neurotic person engulfed in a conflict is not free to choose. He is driven by equally compelling forces in opposite directions, neither of which he wants to follow. Hence a decision in the usual sense is impossible. He is stranded, with no way out. The conflict can only be resolved by working at the neurotic trends involved, and by so changing his relations with others and with himself that he can dispense with the trends altogether.

These characteristics account for the poignancy of neurotic conflicts. Not only are they difficult to recognize, not only do they render a person helpless, but they

[3] Søren Kierkegaard, *The Sickness unto Death,* Princeton University Press, 1941.

The Basic Conflict

CONFLICTS play an infinitely greater role in neurosis than is commonly assumed. To detect them, however, is no easy matter—partly because they are essentially unconscious, but even more because the neurotic goes to any length to deny their existence. What, then, are the signals that would warrant us to suspect underlying conflicts? In the examples cited in the previous chapter their presence was indicated by two factors, both fairly obvious. One was the resulting symptoms—fatigue in the first case, stealing in the second. The fact is that every neurotic symptom points to an underlying conflict; that is, every symptom is a more or less direct outgrowth of a conflict. We shall see gradually what unsolved conflicts do to people, how they produce states of anxiety, depression, indecision, inertia, detachment, and so on. An understanding of the causative relation here helps direct our attention from the manifest disturbances to their source—though the exact nature of the source will not be disclosed.

The other signal indicating that conflicts were in operation was inconsistency. In the first example we saw a man convinced of a procedure being wrong and of injustice done him, making no move to protest. In the second a person who highly valued friendship turned to stealing money from a friend. Sometimes the person

children, finances, mealtimes, servants, all point to some fundamental disharmony in the relationship itself?

A belief in a basic conflict within the human personality is ancient and plays a prominent role in various religions and philosophies. The powers of light and darkness, of God and the devil, of good and evil are some of the ways in which this belief has been expressed. In modern psychology, Freud, on this score as on so many others, has done pioneer work. His first assumption was that the basic conflict is one between our instinctual drives, with their blind urge for satisfaction, and the forbidding environment—family and society. The forbidding environment is internalized at an early age and appears from then on as the forbidding superego.

It is hardly appropriate here to discuss this concept with the seriousness it deserves. That would require a recapitulation of all the arguments that have been raised against the libido theory. Let us try rather to understand the meaning of the concept itself, even if we discard Freud's theoretical premises. What remains, then, is the contention that the opposition between primitive egocentric drives and our forbidding conscience is the basic source of our manifold conflicts. As will be seen later, I, too, attribute to this opposition —or what is roughly comparable to it in my way of thinking—a significant place in the structure of neuroses. What I dispute is its basic nature. My belief is that though it is a major conflict, it is secondary and arises of necessity during the development of a neurosis.

The reasons for this refutation will become apparent

the particular person feels most at home. Thus a detached person will as a matter of course use all the unconscious techniques for keeping others at a safe distance because he feels at a loss in any situation that requires close association with them. Moreover, the ascendant attitude is often but not always the one most acceptable to the person's conscious mind.

This does not mean that the less conspicuous attitudes are less powerful. It would often be difficult to say, for instance, whether in an apparently dependent, compliant person the wish to dominate is of inferior intensity to the need for affection; his ways of expressing his aggressive impulses are merely more indirect. That the potency of the submerged tendencies may be very great is evidenced by the many instances in which the attitude accorded predominance is reversed. We can see such reversal in children, but it occurs in later life as well. Strickland in Somerset Maugham's *The Moon and Sixpence* would be a good illustration. Case histories of women often reveal this kind of change. A girl formerly tomboyish, ambitious, rebellious, when she falls in love may turn into a compliant, dependent woman, apparently without ambition. Or, under pressure of crushing experiences, a detached person may become morbidly dependent.

Changes like these, it should be added, throw some light on the frequent question whether later experience counts for nothing, whether we are definitely channeled, conditioned once and for all, by our childhood situation. Looking at neurotic development from the point of view of conflicts enables us to give a more adequate answer than is usually offered. These are the possibili-

ties: If the early situation is not too prohibitive of spon-
taneous growth, later experiences, particularly in adoles-
cence, can have a molding influence. If, however, the
impact of early experiences has been powerful enough
to have molded the child to a rigid pattern, no new ex-
perience will be able to break through. In part this is
because his rigidity does not leave him open to any
new experience: his detachment, for instance, may be
too great to permit of anyone's coming close to him, or
his dependence so deep-rooted that he is forced always
to play a subordinate role and invite exploitation. In
part it is because he will interpret any new experience
in the language of his established pattern: the aggres-
sive type, for instance, meeting with friendliness, will
view it either as a manifestation of stupidity or an at-
tempt to exploit him; the new experience will tend
only to reinforce the old pattern. When a neurotic does
adopt a different attitude it may look as if later experi-
ences had brought about a change in personality. How-
ever, the change is not as radical as it appears. Actually
what has happened is that combined internal and ex-
ternal pressures have forced him to abandon his pre-
dominant attitude in favor of the other extreme—but
this change would not have taken place if there had
been no conflicts to begin with.

From the point of view of the normal person there is
no reason why the three attitudes should be mutually
exclusive. One should be capable of giving in to others,
of fighting, and of keeping to oneself. The three can
complement each other and make for a harmonious

Normal.
The 3
complement
one another

to mold the qualities we develop, the goals we set for ourselves, the values we believe in. All these in turn react upon our relations with others and so are inextricably interwoven.[3]

My contention is that the conflict born of incompatible attitudes constitutes the core of neurosis and therefore deserves to be called *basic*. And let me add that I use the term *core* not merely in the figurative sense of its being significant but to emphasize the fact that it is the dynamic center from which neuroses emanate. This contention is the nucleus of a new theory of neurosis whose implications will become apparent in what follows. Broadly considered, the theory may be viewed as an elaboration of my earlier concept that neuroses are an expression of a disturbance in human relationships.[4]

[3] Since the relation to others and the attitude toward the self cannot be separated from one another, the contention occasionally to be found in psychiatric publications, that one or the other of these is the most important factor in theory and practice, is not tenable.

[4] This concept was first presented in *The Neurotic Personality of Our Time* and elaborated in *New Ways in Psychoanalysis* and *Self-Analysis*.

There is an imperceptible transition from these attitudes to definite inhibitions. Because any kind of aggressive behavior is taboo, we find here inhibitions in regard to being assertive, critical, demanding, giving orders, making an impression, striving for ambitious goals. Also, because his life is altogether oriented toward others, his inhibitions often prevent him from doing things for himself or enjoying things by himself. This may reach a point where any experience not shared with someone—whether a meal, a show, music, nature—becomes meaningless. Needless to say, such a rigid restriction on enjoyment not only impoverishes life but makes dependence on others all the greater.

Apart from his idealization [4] of the qualities just named, this type has certain characteristic attitudes toward himself. One is the pervasive feeling that he is weak and helpless—a "poor little me" feeling. When left to his own resources he feels lost, like a boat loosed from its moorings, or like Cinderella bereft of her fairy godmother. This helplessness is in part real; certainly the feeling that under no circumstances could one possibly fight or compete does promote actual weakness. Besides, he frankly admits his helplessness to himself and others. It may be dramatically emphasized in dreams as well. He often resorts to it as a means of appeal or defense: "You must love me, protect me, forgive me, not desert me, *because* I am so weak and helpless."

A second characteristic grows out of his tendency to subordinate himself. He takes it for granted that everyone is superior to him, that they are more attractive, more intelligent, better educated, more worth while

[4] *Cf.* Chapter 6, The Idealized Image.

than he. There is factual basis for this feeling in that his lack of assertiveness and firmness does impair his capacities; but even in fields where he is unquestionably able his feeling of inferiority leads him to credit the other fellow—regardless of his merit—with greater competence than his own. In the presence of aggressive or arrogant persons his sense of his own worthiness shrinks still more. However, even when alone his tendency is to undervalue not only his qualities, talents, and abilities but his material possessions as well.

A third typical feature is a part of his general dependence upon others. This is his unconscious tendency to rate himself by what others think of him. His self-esteem rises and falls with their approval or disapproval, their affection or lack of it. Hence any rejection is actually catastrophic for him. If someone fails to return an invitation he may be reasonable about it consciously, but in accordance with the logic of the particular inner world in which he lives, the barometer of his self-esteem drops to zero. In other words any criticism, rejection, or desertion is a terrifying danger, and he may make the most abject effort to win back the regard of the person who has thus threatened him. His offering of the other cheek is not occasioned by some mysterious "masochistic" drive but is the only logical thing he can do on the basis of his inner premises.

All of this contributes to his special set of values. Naturally, the values themselves are more or less lucid and confirmed according to his general maturity. They lie in the direction of goodness, sympathy, love, generosity, unselfishness, humility; while egotism, ambition, callousness, unscrupulousness, wielding of power are

abhorred—though these attributes may at the same time be secretly admired because they represent "strength."

These, then, are the elements involved in a neurotic "moving toward" people. It must be apparent now how inadequate it would be to describe them by any *one* term like submissive or dependent, for a whole way of thinking, feeling, acting—a whole way of life—is implicit in them.

I promised not to discuss the contradictory factors. But we will not fully understand how rigidly all the attitudes and beliefs are adhered to unless we are aware of the extent to which the repression of opposing trends reinforces the dominant ones. So we shall take a brief glance at the reverse side of the picture. When analyzing the compliant type we find a variety of aggressive tendencies strongly repressed. In decided contrast to the apparent oversolicitude, we come upon a callous lack of interest in others, attitudes of defiance, unconscious parasitic or exploiting tendencies, propensities to control and manipulate others, relentless needs to excel or to enjoy vindictive triumphs. Naturally the repressed drives vary in kind and intensity. In part they arise in response to early unfortunate experiences with others. A history will, for instance, frequently show temper tantrums up to the age of five or eight, disappearing then to give place to a general docility. But aggressive trends are also reinforced and fed by later experience, since hostility is continually generated from many sources. It would lead us too far afield to go into all of these at this point; suffice it to say here that self-efface-ment and "goodness" invite being stepped on and being taken advantage of; further, that dependence upon

others makes for exceptional vulnerability, which in turn leads to a feeling of being neglected, rejected, and humiliated whenever the excessive amount of affection or approval demanded is not forthcoming.

When I say that all these feelings, drives, attitudes are "repressed" I use the term in Freud's sense, meaning that the individual is not only unaware of them but has so implacable an interest in never becoming aware of them that he keeps anxious watch lest any traces be disclosed to himself or others. Every repression thus confronts us with the question: What interest has the individual in repressing certain forces operating within him? In the case of the compliant type we can find several answers. Most of them we can understand only later when we come to discuss the idealized image and sadistic trends. What we can already understand at this point is that feelings or expressions of hostility would endanger the person's need to like others and to be liked by them. In addition, any kind of aggressive or even self-assertive behavior would appear to him as selfish. He would condemn it himself and hence would feel that others condemned it, too. And he cannot afford to risk such condemnation because his self-esteem is all too dependent upon their approval.

The repression of all assertive, vindictive, ambitious feelings and impulses has still another function. It is one of the many attempts a neurotic makes to do away with his conflicts and to create instead a feeling of unity, of oneness, of wholeness. The longing for unity within ourselves is no mystical desire but is prompted by the practical necessity of having to function in life—an impossibility when one is continually driven in opposite

stand it any longer. Finally, if the repressed hostility takes on the force of a blind fury, it may give rise to all kinds of functional disorders, like headaches or stomach ailments.

Most of the characteristics of the compliant type thus have a double motivation. When he subordinates himself, for instance, it is in the interest of avoiding friction and thereby achieving harmony with others; but it may also be a means of eradicating all traces of his need to excel. When he lets others take advantage of him it is an expression of compliance and "goodness," but it may also be a turning away from his own wish to exploit. For neurotic compliance to be overcome, both sides of the conflict must be worked through, and in the proper order. From conservative psychoanalytic publications we sometimes get the impression that the "liberation of aggressions" is the essence of psychoanalytic therapy. Such an approach shows little understanding of the complexities and particularly of the variations in neurotic structures. Only for the particular type under discussion does it have any validity, and even here the validity is limited. The uncovering of aggressive drives is liberating, but it can easily be detrimental to the person's development if the "liberation" is regarded as an end in itself. It must be followed by a working through of the conflicts, if the personality is ultimately to be integrated.

We need still to turn our attention to the role that love and sex play for the compliant type. Love often appears to him as the only goal worth striving for, worth living for. Life without love appears flat, futile, empty. To use a phrase Fritz Wittels has applied to compulsive

pursuits,[6] love becomes a phantom that is chased to the exclusion of everything else. People, nature, work, or any kind of amusement or interest become utterly meaningless unless there is some love relationship to lend them flavor and zest. The fact that under the conditions of our civilization this obsession is more frequent and more apparent in women than in men has given rise to the notion that it is a specifically feminine longing. Actually, it has nothing to do with femininity or masculinity but is a neurotic phenomenon in that it is an irrational compulsive drive.

If we understand the structure of the compliant type we can see why love is so all important to him, why there is "method in his madness." In view of his contradictory compulsive tendencies, it is in fact the only way in which all his neurotic needs can be fulfilled. It promises to satisfy the need to be liked as well as to dominate (through love), the need to take second place as well as to excel (through the partner's undivided regard). It permits him to live out all his aggressive drives on a justified, innocent, or even praiseworthy basis, while allowing him at the same time to express all the endearing qualities he has acquired. Furthermore, since he is unaware that his handicaps and his suffering issue from the conflicts within himself, love beckons as the sure cure for them all: if only he can find a person who loves him, *everything* will be all right. It is easy enough to say that this hope is fallacious, but we must also understand the logic of his more or less unconscious reasoning. He thinks: "I am weak and helpless; as long

[6] Fritz Wittels, "Unconscious Phantoms in Neurotics," *Psychoanalytic Quarterly*, Vol. VIII, Part 2, 1939.

they'd have no use for me anyway. But if I found some-
one who loved me as I am and to whom I was of prime
importance, I would be somebody." No wonder, then,
that love has all the lure of a mirage. No wonder that it
should be clutched at in preference to the laborious
process of changing from within.

Sexual intercourse as such—aside from its biological
function—has the value of constituting proof of being
wanted. The more the compliant type tends to be de-
tached—that is, afraid of being emotionally involved—or
the more he despairs of being loved, the more will mere
sexuality be likely to substitute for love. It will then
appear as the only road to human intimacy, and be over-
rated, as love is, for its power to solve everything.

If we are careful to avoid both extremes—that of re-
garding the patient's overemphasis on love as "only
natural," and that of dismissing it as "neurotic"—we
shall see that the compliant type's expectations in this
direction come as a logical conclusion from his philos-
ophy of life. As so often in neurotic phenomena—or is
it always?—we find that the patient's reasoning, con-
scious or unconscious, is flawless, but rests on false
premises. The fallacious premises are that he mistakes
his need for affection and all that goes with it for a
genuine capacity to love, and that he completely leaves
out of the equation his aggressive and even destructive
trends. In other words he leaves out the whole neurotic
conflict. What he expects is to do away with the harm-
ful consequences of the unresolved conflicts without
changing anything in the conflicts themselves—an atti-
tude characteristic of every neurotic attempt at solution.
That is why these attempts are inevitably doomed to

the softer tendencies will reinforce the aggressive ones, making them all the more compulsive.

If the two types we have discussed are now vivid in our minds we can see that they represent polar extremes. What is desirable to one is abhorrent to the other. The one has to like everyone, the other to regard all as potential enemies. The one seeks to avoid fight at all costs, the other finds it is his natural element. The one clings to fear and helplessness, the other tries to dismiss them. The one moves, however neurotically, toward humane ideals, the other toward the philosophy of the jungle. But all the while neither of these patterns is freely chosen: each is compulsive and inflexible, determined by inner necessities. There is no middle ground on which they can meet.

We are ready now to take the step our presentation of types has led up to, and for the sake of which we have discussed them. We set out to discover just what the basic conflict involved, and so far have seen two aspects of it operating as predominant trends in two distinct types. The step we must now take is to picture a person in whom these two opposite sets of attitudes and values are equally at work. Is it not clear that such a person would be so inexorably driven in two diametrically opposite directions that he would hardly be able to function at all? The fact of the matter is that he would be split and paralyzed beyond all power to act. It is his effort to eliminate one set that puts him into one or the other of the categories we have described; it is one of the ways he attempts to solve his conflicts.

To speak as Jung does, in such a case, of a one-sided

Moving Away From People

THE THIRD face of the basic conflict is the need for detachment, for "moving away from" people. Before examining it in the type for whom it has become the predominant trend, we must understand what is meant by neurotic detachment. Certainly it is not the mere fact of wanting occasional solitude. Everyone who takes himself and life seriously wants to be alone at times. Our civilization has so engulfed us in the externals of living that we have little understanding of this need, but its possibilities for personal fulfillment have been stressed by philosophies and religions of all times. A desire for meaningful solitude is by no means neurotic; on the contrary most neurotics shrink from their own inner depths, and an incapacity for constructive solitude is itself a sign of neurosis. Only if there is intolerable strain in associating with people and solitude becomes primarily a means of avoiding it is the wish to be alone an indication of neurotic detachment.

Certain of the highly detached person's peculiarities are so characteristic of him that psychiatrists are inclined to think of them as belonging exclusively to the detached type. The most obvious of these is a general estrangement from people. In him this strikes our attention because he particularly emphasizes it, but actually his estrangement is no greater than that of other

looker" attitude toward themselves that they have to-
ward life in general. They may often, therefore, be
excellent observers of the processes going on within
them. An outstanding example of this is the uncanny
understanding of dream symbols they frequently dis-
play.

What is crucial is their inner need to put emotional
distance between themselves and others. More accu-
rately, it is their conscious and unconscious determina-
tion not to get emotionally involved with others in any
way, whether in love, fight, co-operation, or competi-
tion. They draw around themselves a kind of magic
circle which no one may penetrate. And this is why,
superficially, they may "get along" with people. The
compulsive character of the need shows up in their re-
action of anxiety when the world intrudes on them.

All the needs and qualities they acquire are directed
toward this major need of not getting involved. Among
the most striking is a need for *self-sufficiency*. Its most
positive expression is resourcefulness. The aggressive
type also tends to be resourceful—but the spirit is dif-
ferent; for him it is a prerequisite for fighting one's way
in a hostile world and for wanting to defeat others in
the fray. In the detached type the spirit is like Robin-
son Crusoe's: he has to be resourceful in order to live.
It is the only way he can compensate for his isolation.

A more precarious way to maintain self-sufficiency
is by consciously or unconsciously restricting one's
needs. We shall better understand the various moves
in this direction if we remember that the underlying
principle here is never to become so attached to any-
body or anything that he or it becomes indispensable.

A detached person may be extremely irritated if others take him "for granted"—it makes him feel he is being stepped on. As a rule he prefers to work, sleep, eat alone. In distinct contrast to the compliant type he dislikes sharing any experience—the other person might disturb him. Even when he listens to music, walks or talks with others, his real enjoyment only comes later, in retrospect.

Self-sufficiency and privacy both serve his most outstanding need, the need for utter independence. He himself considers his independence a thing of positive value. And it undoubtedly has a value of sorts. For no matter what his deficiencies, the detached person is certainly no conforming automaton. His refusal blindly to concur, together with his aloofness from competitive struggle, does give him a certain integrity. The fallacy here is that he looks upon independence as an end in itself and ignores the fact that its value depends ultimately upon what he does with it. His independence, like the whole phenomenon of detachment of which it is a part, has a negative orientation; it is aimed at *not* being influenced, coerced, tied, obligated.

Like any other neurotic trend, the need for independence is compulsive and indiscriminate. It manifests itself in a hypersensitivity to everything in any way resembling coercion, influence, obligation, and so on. The degree of sensitivity is a good gauge of the intensity of the detachment. What is felt as constraint varies with the individual. Physical pressure from such things as collars, neckties, girdles, shoes may so be felt. Any obstruction of view may arouse the feeling of being hemmed in; to be in a tunnel or mine may produce anx-

The need to feel superior, although common to all
neuroses, must be stressed here because of its intrinsic
association with detachment. The expressions "ivory
tower" and "splendid isolation" are evidence that even
in common parlance, detachment and superiority are
almost invariably linked. Probably nobody can stand
isolation without either *being* particularly strong and
resourceful or *feeling* uniquely significant. This is cor-
roborated by clinical experience. When the detached
person's feeling of superiority is temporarily shattered,
whether by a concrete failure or an increase of inner
conflicts, he will be unable to stand solitude and may
reach out frantically for affection and protection. Vacil-
lations of this kind often appear in his life history. In
his teens or early twenties he may have had a few rather
lukewarm friendships, but lived on the whole a fairly
isolated life, feeling comparatively at ease. He would
weave fantasies of a future when he would accomplish
exceptional things. But later these dreams were ship-
wrecked on the rocks of reality. Though in high school
he had had undisputed claim to first place, in college
he ran up against serious competition and recoiled from
it. His first attempts at love relationships failed. Or he
realized as he grew older that his dreams were not ma-
terializing. Aloofness then became unbearable and he
was consumed by a compulsive drive for human in-
timacy, for sexual relations, for marriage. He was will-
ing to submit to any indignity, if only he were loved.
When such a person comes for analytical treatment, his
detachment, though still pronounced and obvious, can-
not be tackled. All he wants at first is help to find love
in one form or another. Only when he feels consider-

ably stronger does he discover with immense relief that he would much rather "live alone and like it." The impression is that he has merely reverted to his former detachment. But actually it is a matter of being now for the first time on solid enough ground to admit— even to himself—that isolation is what he wants. This would be the appropriate time to work on his detachment.

The need for superiority in the case of the detached person has certain specific features. Abhorring competitive struggle, he does not want to excel realistically through consistent effort. He feels rather that the treasures within him should be recognized without any effort on his part; his hidden greatness should be felt without his having to make a move. In his dreams, for instance, he may picture stores of treasure hidden away in some remote village which connoisseurs come from far to see. Like all notions of superiority this contains an element of reality. The hidden treasure symbolizes his intellectual and emotional life which he guards within the magic circle.

Another way his sense of superiority expresses itself is in his feeling of his own uniqueness. This is a direct outgrowth of his wanting to feel separate and distinct from others. He may liken himself to a tree standing alone on a hilltop, while the trees in the forest below are stunted by those about them. Where the compliant type looks at his fellow man with the silent question, "Will he like me?"—and the aggressive type wants to know, "How strong an adversary is he?" or "Can he be useful to me?"—the detached person's first concern is, "Will he interfere with me? Will he want to influence

observe as he is unconsciously determined to remain
as he is. His defiance of all influence is only one of the
explanations for his attitude, and not the deepest one;
we shall become acquainted with others later on. Natu-
rally he puts a great distance between himself and the
analyst. For a long time the analyst will be only a voice.
In dreams the analytical situation may appear as a long-
distance call between two reporters on different conti-
nents. At first glance a dream like this would seem to
express the remoteness he feels toward the analyst and
the analytical process—merely an accurate presentation
of an attitude that exists consciously. But since dreams
are a search for a solution rather than a mere descrip-
tion of existing feelings, the deeper meaning of such
a dream is a *wish* to keep his relationship to the analyst
and to the whole analytical process away from him—
not to let the analysis touch him in any way.

A final characteristic observable both in the analysis
and outside it is the tremendous vigor with which the
detachment is defended when attacked. The same might
be said of every neurotic position. But the fight in this
case seems to be more tenacious, almost a life and death
struggle for which all available resources must be mobi-
lized. The battle really starts in a quiet subversive way
long before the detachment is attacked. Keeping the
analyst out of the picture is one phase of it. If the
analyst tries to convince the patient that there is some
relationship between them and that something is likely
to go on in the patient's mind on this score, he meets
with a more or less elaborate, courteous repudiation.
At best the patient will express some rational thoughts
he has had about the analyst. If a spontaneous emo-

tional reaction should appear he will not pursue it fur-
ther. In addition, there is frequently a deep-seated re-
sistance to having anything pertaining to human rela-
tionships analyzed. The patient's relations to others are
kept so vague that it is often difficult for the analyst to
get any clear picture of them. And this reluctance is
understandable. He has preserved a safe distance from
others; talking about the matter could only prove dis-
turbing, upsetting. Repeated attempts to pursue the
subject may be met with open suspicion. Does the
analyst want to make the patient gregarious? (For him
this is beneath contempt.) If at a later period the analyst
succeeds in showing him some definite drawbacks to
detachment, the patient becomes frightened and ir-
ritable. He may think at this point of quitting. Out-
side analysis his reactions are if anything still more
violent. These ordinarily quiet and rational persons
may freeze with rage or become actually abusive if their
aloofness and independence are threatened. Positive
panic may be induced at the thought of joining any
movement or professional group where real participa-
tion and not merely payment of dues is required. If
they do become involved they may thrash about blindly
to extricate themselves. They can be more expert in
finding methods of escape than a man whose life is at-
tacked. Were the choice between love and independ-
ence, as a patient once put it, they would choose inde-
pendence without hesitation. This brings up another
point. Not only are they willing to defend their detach-
ment by every available means, but they find no sacri-
fice too great in its behalf. External advantages and
inner values will be equally renounced—consciously, by

varies with the individual and depends largely on the focus of interest. If the neurotic's interest lies in convincing himself that he *is* his idealized image, he develops the belief that he is in fact the mastermind, the exquisite human being, whose very faults are divine.[2] If the focus is on the realistic self which by comparison with the idealized image is highly despicable, self-derogatory criticism is in the foreground. Since the picture of the self that results from such disparagement is just as far removed from reality as is the idealized image, it could appropriately be called the despised image. If, finally, the focus is upon the discrepancy between the idealized image and the actual self, then all he is aware of and all we can observe are his incessant attempts to bridge the gap and whip himself into perfection. In this event he keeps reiterating the word "should" with amazing frequency. He keeps telling us what he should have felt, thought, done. He is at bottom as convinced of his inherent perfection as the naïvely "narcissistic" person, and betrays it by the belief that he actually could be perfect if only he were more strict with himself, more controlled, more alert, more circumspect.

In contrast to authentic ideals, the idealized image has a static quality. It is not a goal toward whose attainment he strives but a fixed idea which he worships. Ideals have a dynamic quality; they arouse an incentive to approximate them; they are an indispensable and invaluable force for growth and development. The ideal-

[2] *Cf.* Anne Parrish, "All Kneeling," *The Second Woollcott Reader,* Garden City Publishing Co., 1939.

nothing to him. It is a leap in the dark of which he is afraid.

With so great a subjective value to recommend it, the position of the image would be unassailable if it were not for the huge drawbacks inseparable from it. The whole edifice is in the first place extremely rickety by reason of the fictitious elements involved. A treasure house loaded with dynamite, it makes the individual highly vulnerable. Any questioning or criticism from outside, any awareness of his own failure to measure up to the image, any real insight into the forces operating within him can make it explode or crumble. He must restrict his life lest he be exposed to such dangers. He must avoid situations in which he would not be admired or recognized. He must avoid tasks that he is not certain to master. He may even develop an intense aversion to effort of any kind. To him, the gifted one, the mere vision of a picture he might paint is already the master painting. Any mediocre person can get somewhere by hard work; for him to apply himself like every Tom, Dick, and Harry would be an admission that he is not the mastermind, and so humiliating. Since nothing can actually be achieved without work, he defeats by his attitude the very ends he is driven to attain. And the gap between his idealized image and his real self widens.

He is dependent upon endless affirmation from others in the form of approval, admiration, flattery—none of which, however, can give him any more than temporary reassurance. He may unconsciously hate everyone who is overbearing or who, being better than he in any way—more assertive, more evenly balanced, better in-

formed—threatens to undermine his own notions of himself. The more desperately he clings to the belief *or flattering* that he is his idealized image, the more violent the hatred. Or, if his own arrogance is repressed, he may blindly admire persons who are openly convinced of their importance and show it by arrogant behavior. He loves in them his own image and inevitably runs into severe disappointment when he becomes aware, as he must at some time or other, that the gods he so admires are interested only in themselves, and as far as he is concerned care only for the incense he burns at their altars.

Probably the worst drawback is the ensuing aliena- *3) Alienation* tion from the self. We cannot suppress or eliminate essential parts of ourselves without becoming estranged from ourselves. It is one of those changes gradually produced by neurotic processes that despite their fundamental nature come about unobserved. The person simply becomes oblivious to what he really feels, likes, rejects, believes—in short, to what he really is. Without knowing it he may live the life of his image. Tommy in J. M. Barrie's *Tommy and Grizel* illuminates this process better than any clinical description. Of course it is not possible to behave so without being inextricably caught in a spider's web of unconscious pretense and rationalization, which makes for precarious living. The person loses interest in life because it is not he who lives it; he cannot make decisions because he does not know what he really wants; if difficulties mount, he may be pervaded by a sense of unreality—an accentuated expression of his permanent condition of being unreal to himself. To understand such a state we must realize

that a veil of unreality shrouding the inner world is bound to be extended to the outer. A patient recently epitomized the whole situation by saying: "If it were not for reality, I would be quite all right."

Finally, although the idealized image is created to remove the basic conflict and in a limited way succeeds in doing so, it generates at the same time a new rift in the personality almost more dangerous than the original one. Roughly speaking, a person builds up an idealized image of himself because he cannot tolerate himself as he actually is. The image apparently counteracts this calamity; but having placed himself on a pedestal, he can tolerate his real self still less and starts to rage against it, to despise himself and to chafe under the yoke of his own unattainable demands upon himself. He wavers then between self-adoration and self-contempt, between his idealized image and his despised image, with no solid middle ground to fall back on.

Thus a new conflict is created between compulsive, contradictory strivings on the one hand and a kind of internal dictatorship imposed by the inner disturbance. And he reacts to this inner dictatorship just as a person might react to a comparable political dictatorship: he may identify himself with it, that is, feel that he is as wonderful and ideal as the dictator tells him he is; or he may stand on tiptoe to try to measure up to its demands; or he may rebel against the coercion and refuse to recognize the imposed obligations. If he reacts in the first way, we get the impression of a "narcissistic" individual, inaccessible to criticism; the existing rift, then, is not consciously felt as such. In the second instance we have the perfectionistic person, Freud's superego type. In the

Externalization

WE HAVE seen how all the pretenses to which a neurotic resorts in order to bridge the gap between his real self and his idealized image serve in the end only to widen it. But because the image is of such tremendous subjective value he must continue unremittingly to try to come to terms with it. The ways in which he goes about this are manifold. Many of them will be discussed in the next chapter. Here we shall confine ourselves to examining one less well known than the rest, whose influence on the structure of neurosis is especially incisive.

When I call this attempt *externalization* I am defining the tendency to experience internal processes as if they occurred outside oneself and, as a rule, to hold these external factors responsible for one's difficulties. It has in common with idealization the purpose of getting away from the real self. But while the process of retouching and recreating the actual personality remains, as it were, within the precincts of self, externalization means abandoning the territory of self altogether. To put it simply, a person can take refuge from his basic conflict in his idealized image; but when discrepancies between the actual self and the idealized one reach a point where tensions become unbearable, he can no longer resort to anything within himself. The

only thing left then is to run away from himself entirely and see everything as if it lay outside.

Some of the phenomena that occur here are covered by the term projection, meaning the objectifying of personal difficulties.[1] As commonly applied, projection means the shifting of blame and responsibility to someone else for subjectively rejected trends or qualities, such as suspecting others of one's own tendencies toward betrayal, ambition, domination, self-righteousness, meekness, and so on. In this sense the term is perfectly acceptable. Externalization, however, is a more comprehensive phenomenon; the shifting of responsibility is only a part of it. Not only one's faults are experienced in others but to a greater or less degree all feelings. A person who tends to externalize may be profoundly disturbed by the oppression of small countries, while unaware of how much he himself feels oppressed. He may not feel his own despair but will emotionally experience it in others. What is particularly important in this connection, he is unaware of his own attitudes toward himself; he will, for example, feel that someone else is angry with him when he actually is angry with himself. Or he will be conscious of anger at others that in reality he directs at himself. Further, he will ascribe not only his disturbances but also his good moods or achievements to external factors. While his failures will be seen as the decree of fate, his successes will be laid to fortuitous circumstances, his high spirits to the weather, and so on.

When a person feels that his life for good or ill is

[1] This definition was suggested by Edward A. Strecker and Kenneth E. Appel, *Discovering Ourselves*, Macmillan, 1943.

determined by others, it is only logical that he should be preoccupied with changing them, reforming them, punishing them, protecting himself from their interference, or impressing them. In this way externalization makes for dependence upon others—a dependence, however, quite different from that created by a neurotic need for affection. It also makes for overdependence upon external circumstances. Whether the person lives in the city or the suburbs, whether he keeps this or that diet, goes to bed early or late, serves on this or that committee, assumes undue importance. He thus acquires the characteristics that Jung calls extraversion. But while Jung regards extraversion as a one-sided development of constitutionally given trends, I see it as the result of trying to remove unsolved conflicts by externalization.

dependence

Another inevitable product of externalization is a gnawing sense of emptiness and shallowness. Again this feeling is not properly allocated. Instead of feeling the emotional emptiness as such, the person experiences it as emptiness in his stomach and tries to do away with it by compulsive eating. Or he may fear that his lack of bodily weight could cause him to be tossed about like a feather—any storm, he feels, might carry him away. He may even say that he would be nothing but an empty shell if everything were analyzed. The more thoroughgoing the externalization, the more the neurotic becomes wraithlike and apt merely to drift.

emptiness.

So much for the implications of this process. Let us see now how it specifically helps allay tension between the self and the idealized image. For no matter how a person may regard himself consciously, the disparity

between the two will take an unconscious toll; and the more he has succeeded in identifying himself with the image, the more deeply unconscious will be the reaction. Most commonly it is expressed in self-contempt, rage against the self, and a feeling of coercion, all of which are not only extremely painful but in various ways incapacitate a person for living.

Externalization of self-contempt may take the form either of despising others or of feeling that it is others who look down upon oneself. Both forms are usually present; which is the more prominent, or at least the more conscious, depends on the whole setup of the neurotic character structure. The more aggressive a person is, the more right and superior he feels, the more readily will he despise others, and the less likely would it be to enter his mind that others could look down on him. Conversely, the more compliant he is, the more will his self-recriminations for his failure to measure up to his idealized image tend to make him feel that others have no use for him. The effect of the latter is particularly damaging. It makes a person shy, stilted, withdrawn. It makes him overgrateful—indeed abjectly grateful—for any affection or appreciation shown him. At the same time he cannot accept even sincere friendliness at its face value, but vaguely takes it for a kind of undeserved charity. He is rendered defenseless against arrogant persons because part of him agrees with them, and he feels that his being treated contemptuously is quite in order. Naturally such reactions breed resentment, which if repressed and piled up may gather explosive strength.

In spite of all this, experiencing self-contempt in an

externalized form has a distinct subjective value. To feel all his own scorn would smash whatever spurious self-assurance the neurotic may have and bring him to the verge of collapse. It is painful enough to be despised by others, but there is always hope of being able to change their attitude, or a prospect of paying them back in kind, or a mental reservation that they are unfair. When it is oneself one despises, all this is of no avail. There is no court of appeal. All the hopelessness the neurotic unconsciously feels in regard to himself would come into clear relief. He would start not only to despise his actual frailties but feel that he is altogether contemptible. Thus even his good qualities would be drawn into the abyss of his sense of unworthiness. In other words, he would feel himself to be his despised image; he would see it as an unalterable fact for which there was no help. This points to the advisability in therapeutic procedure of not touching upon self-contempt until the patient's hopelessness is diminished and the grip of the idealized image considerably loosened. Only then will the patient be able to face it and come to realize that his unworthiness is not an objective fact but a subjective feeling stemming from his merciless standards. In taking a more lenient attitude toward himself he will see that the condition is not unalterable, that the attributes he so objects to are not really despicable but are difficulties he can eventually overcome.

We shall not understand the neurotic's *rage at himself* or the dimensions it assumes unless we keep in mind how immeasurably important it is for him to maintain the illusion that he is his idealized image. The

lated a self-destructive instinct (death instinct)—though
by this concept he barred the way to a real understand-
ing, and so to an effective therapy.

The intensity of the *feeling of inner coercion* de-
pends on the extent to which the personality is cramped
by the authoritative control of the idealized image. It
would be hard to overestimate this pressure. It is worse
than any external coercion because the latter permits
inner freedom to be retained. Patients are for the most
part unaware of the feeling, but one can gauge its power
by their relief when it is removed and a measure of
inner freedom acquired. The coercion may be exter-
nalized on the one hand by imposing pressure upon
others. This can have the same outward effect as a neu-
rotic craving for domination, but though both may be
present they differ in that coercion which represents
an externalization of inner pressure is not primarily a
demand for personal obedience. It consists chiefly in
imposing the same standards upon others as those under
which the person himself chafes—and with the same
disregard for their happiness. Puritan psychology is a
well-known illustration of this process.

Equally important is the externalization of this inner
compulsion in the form of hypersensitivity to anything
in the outside world that even faintly resembles duress.
As every observant person knows, such hypersensitivity
is common. Not all of it stems from self-imposed coer-
cion. Usually there is an element of experiencing one's
own power drive in others and resenting it. In detached
personalities we think primarily of the compulsive in-
sistence upon independence that would necessarily
make them sensitive to any outside pressure. Externali-

he believes they expect of him. He may appear amenable or even gullible but at the same time he will pile up secret resentment against this "coercion." The result may be that he will eventually come to see everyone in a dominating role and be universally resentful.

What, then, does a person gain by externalizing his inner constraint? As long as he believes it comes from outside he can rebel against it, even if only by way of mental reservation. Similarly, a restriction externally imposed can be avoided; an illusion of freedom can be maintained. But more significant is the factor cited above: to admit the inner coercion would mean to admit that he is not his idealized image, with all the consequences that entails.

It is an interesting question whether and to what extent the strain of this inner compulsion, too, is expressed in physical symptoms. My own impression is that it is a contributing factor in asthma, high blood pressure, and constipation, but my experience here is limited.

It remains for us to discuss the externalization of the various features that stand in contrast to one's idealized image. This on the whole is effected by simple projection—that is, by experiencing them in others or by holding others responsible for them. The two processes do not necessarily go together. In the following examples we may have to repeat certain things we have already said in this connection, as well as others that are commonly known, but the illustrations will help us to arrive at a deeper understanding of the meaning of projection.

An alcoholic patient, A, complained of the inconsid-

tion of a possible projection of homosexual tendencies did not help to clarify the situation. The clue lay in his peculiar attitude toward his own unfaithfulness. His affairs were not forgotten, but in retrospect they did not register. They were no longer a live experience. The alleged unfaithfulness of the woman, on the other hand, was quite vivid. Here, then, was an externalization of experience. Its function was the same as that of the previous example: it allowed him to maintain the idealized image and also do as he pleased.

Power politics, as played among political and professional groups, may serve as another instance. Frequently such maneuvering is motivated by a conscious intention to weaken a rival and fortify one's own position. But it may also spring from an unconscious dilemma similar to the one presented above. In that case it would be an expression of unconscious duplicity. It would permit one all the intrigue and manipulation involved in this kind of attack without blemishing the idealized image, while at the same time affording an excellent way of pouring all one's anger and contempt for oneself upon another person—better still, upon one whom it is desirable to defeat in the first place.

I shall conclude by pointing out a common way in which responsibility may be shifted to others without investing them with one's own difficulties. Many patients, as soon as they are made aware of certain of their problems, jump immediately to their childhood and pin all their explanations on that. They are sensitive to coercion, they say, because they had a domineering mother. They are easily humiliated because humiliations were suffered in childhood; they are vindic-

sponsibility where he cannot, and to refuse to assume it where he should. He keeps referring to early experiences in order to reassure himself that he really cannot help having certain failings, and at the same time feels that he should have come out of his early calamities unscathed—a white lily emerging unsullied from a bog. For this his idealized image is partly to blame, since it will not permit him to accept himself with flaws or conflicts past or present. But more important, his harping on childhood is a particular kind of evasion of self which still allows him to maintain an illusion of eagerness for self-scrutiny. Because he externalizes them he does not experience the forces operating within him; and he cannot conceive of himself as an active instrument in his own life. Having ceased to be the propellant, he thinks of himself as a ball that once pushed downhill must keep on rolling, or as a guinea pig, once conditioned forever determined.

The one-sided emphasis a patient may put on childhood is so definite an expression of his externalizing tendencies that whenever I meet this attitude I expect to find a person who is thoroughly alienated from himself and who continues to be driven centrifugally away from himself. And I have not yet been mistaken in this anticipation.

The tendency to externalize operates in dreams as well. If the analyst appears in the patient's dreams as a jailer, if the husband slams the doors through which the dreamer wants to pass, if accidents occur or obstacles interfere with reaching a much desired destination, these dreams constitute an attempt to deny the inner conflict and to ascribe it to some external factor.

A patient with a general tendency to externalize

offers peculiar difficulties in analysis. He comes to it as he would go to a dentist, expecting the analyst to perform a job that does not really concern him. He is interested in the neurosis of his wife, friend, brother, but not in his own. He talks about the difficult circumstances under which he lives and is reluctant to examine his share in them. If his wife were not so neurotic or his work so upsetting, he would be quite all right. For a considerable period he has no realization whatever that any emotional forces could possibly be operating within himself; he is afraid of ghosts, burglars, thunderstorms, of vindictive persons around him, of the political situation, but never of himself. He is at best interested in his problems for the intellectual or artistic pleasure they afford him. But as long as he is, so to speak, psychically nonexistent, he cannot possibly apply any insight he may gain to his actual living, and therefore in spite of his greater knowledge about himself can change very little.

Externalization is thus essentially an active process of self-elimination. The reason for its being feasible at all lies in the estrangement from the self that is inherent in the neurotic process anyhow. With the self eliminated, it is only natural that the inner conflicts, too, should be removed from awareness. But by making the person more reproachful, vindictive, and fearful in respect to others, externalization replaces the inner conflicts with external ones. More specifically, it greatly aggravates the conflict that originally set in motion the whole neurotic process: the conflict between the individual and the outer world.

Auxiliary Approaches to Artificial Harmony

IT IS A commonplace that one lie usually leads to another, the second takes a third to bolster it, and so on till one is caught in a tangled web. Something of the sort is bound to happen in any situation in the life of an individual or group where a determination to go to the root of the matter is lacking. The patchwork may be of some help, but it will generate new problems which in turn require a new makeshift. So it is with neurotic attempts to solve the basic conflict; and here, as elsewhere, nothing is of any real avail but a radical change in the conditions out of which the original difficulty arose. What the neurotic does instead—and cannot help doing—is to pile one pseudo solution upon another. He may try, as we have seen, to make one face of the conflict predominate. He remains as torn as ever. He may resort to the drastic measure of detaching himself from others entirely; but though the conflict is set out of operation his whole life is put on a precarious basis. He creates an idealized self in which he appears triumphant and unified, but at the same time creates a new rift. He tries to do away with that rift by eliminating his inner self from the field of combat, only to find himself in an even more intolerable predicament.

So unstable an equilibrium requires still further measures to support it. He turns then to any one of

a number of unconscious devices, which may be classi-
fied as blind spots, compartmentalizing, rationalizing,
excessive self-control, arbitrary rightness, elusiveness,
and cynicism. We shall not attempt to discuss these
phenomena *per se*—that would be too intensive a task—
but will show only how they are employed in connec-
tion with conflicts.

The discrepancy between a neurotic's actual behavior
and his idealized picture of himself can be so blatant
that one wonders how he himself can help seeing it.
But far from doing so, he is able to remain unaware
of a contradiction that stares him in the face. This
blind spot in view of the most obvious contradictions
was one of the first things that drew my attention to
the existence and relevance of the conflicts I have de-
scribed. A patient, for example, who had all the char-
acteristics of the compliant type and thought of him-
self as Christlike, told me quite casually that at staff
meetings he would often shoot one colleague after an-
other with a little flick of his thumb. True enough, the
destructive craving that prompted these figurative kill-
ings was at that time unconscious; but the point here
is that the shooting, which he dubbed "play," did not
in the least disturb his Christlike image.

Another patient, a scientist who believed himself
seriously devoted to his work and considered himself
an innovator in his field, was guided in his choice of
what he should publish by purely opportunistic mo-
tives, presenting only papers that he felt would bring
him the most acclaim. There was no attempt at camou-
flage—merely the same blissful obliviousness to the con-

tradiction involved. Similarly, a man who in his idealized image was goodness and straightforwardness itself thought nothing of taking money from one girl to spend it on another.

It is obvious that in each of these cases the function of the blindness was to keep underlying conflicts from awareness. What is amazing is the extent to which this was possible, the more so since the patients in question were not only intelligent but psychologically informed. To say that we all tend to turn our backs on what we do not care to see is surely insufficient explanation. We should have to add that the degree to which we blot out things depends on how great our interest is in doing so. All in all, such artificial blindness demonstrates in a quite simple fashion how great is our aversion to recognizing conflicts. But the real problem here is how we can manage to overlook contradictions as conspicuous as those just cited. The fact is that there are special conditions without which it would indeed be impossible. One of them is an inordinate numbness to our own emotional experience. The other, already pointed out by Strecker,[1] is the phenomenon of living in *compartments*. Strecker, who also offers illustrations of the blind spots, speaks of logic-tight compartments and segregation. There is a section for friends and one for enemies, one for the family and one for outsiders, one for professional and one for personal life, one for social equals and one for inferiors. Hence what happens in one compartment does not appear to the neurotic to contradict what happens in another. It is possible for a person to live that way only when, by reason of his

[1] Strecker, *op. cit.*

conflicts, he has lost his sense of unity. Compartmental-
izing is thus as much a result of being divided by one's
conflicts as a defense against recognizing them. The
process is not unlike that described in the case of one
kind of idealized image: contradictions remain, but the
conflicts are spirited away. It is hard to say whether this
type of idealized image is responsible for the compart-
mentalization or the other way around. It seems likely,
however, that the fact of living in compartments is the
more fundamental and that it would account for the
kind of image created.

To appreciate this phenomenon, cultural factors
must be taken into consideration. Man has become to
so great a degree merely a cog in an intricate social sys-
tem that alienation from the self is almost universal,
and human values themselves have declined. As a result
of innumerable outstanding contradictions in our civili-
zation a general numbness of moral perception has de-
veloped. Moral standards are so casually regarded that
no one is surprised, for instance, to see a person a pious
Christian or a devoted father one day, conducting him-
self like a gangster the next.[2] There are too few whole-
hearted and integrated persons around us to offer con-
trast to our own scatteredness. In the analytical situa-
tion Freud's discarding of moral values—a consequence
of his viewing psychology as a natural science—has con-
tributed toward making the analyst just as blind as
the patient to contradictions of this sort. The analyst
thinks it "unscientific" to have moral values of his own
or to take any interest in those of the patient. As a mat-
ter of fact, the acceptance of contradictions appears in

[2] Lin Yutang, *Between Tears and Laughter,* John Day, 1943.

many theoretical formulations not necessarily confined
to the moral sphere.

Rationalization may be defined as self-deception by
reasoning. The common idea that it is primarily used
to justify oneself or to bring one's motives and actions
into accord with accepted ideologies is only valid up to
a point; the implication there would be that persons
living in the same civilization all rationalize along the
same lines, whereas actually there is a wide range of
individual difference in what is rationalized as well as
in the methods employed. That this should be so is
only natural if we view rationalization as one way of
supporting neurotic attempts to create artificial har-
mony. In each of the planks of the defensive scaffolding
built around the basic conflict, the process can be seen
at work. The predominant attitude is strengthened by
reasoning—factors that would bring the conflict into
sight are either minimized or so remodeled as to fit in
with it. How this self-deceptive reasoning aids the
streamlining of the personality shows up when one
contrasts the compliant type with the aggressive. The
former ascribes his desire to be helpful to his sympa-
thetic feelings, even though strong tendencies to domi-
nate are present; and if these are too conspicuous he
rationalizes them as solicitousness. The latter, when he
is helpful, firmly denies any feeling of sympathy and
lays his action entirely to expediency. The idealized
image always requires a good deal of rationalization
for its support: discrepancies between the actual self
and the image must be reasoned out of existence. In ex-
ternalizing, it is brought to bear to prove the relevance

of outside circumstances or to show that the traits un-
acceptable to the individual himself are merely a "natu-
ral" reaction to the behavior of others.

The tendency toward *excessive self-control* can be so
strong that I at one time counted it among the original
neurotic trends.[3] Its function is to serve as a dam against
being flooded by contradictory emotions. Though in
the beginning it is often an act of conscious will power,
in time it usually becomes more or less automatic. Per-
sons who exert such control will not allow themselves
to be carried away, whether by enthusiasm, sexual ex-
citement, self-pity, or rage. In analysis they have the
greatest difficulty in associating freely; they will not per-
mit alcohol to lift their spirits and frequently prefer to
endure pain rather than undergo anesthesia. In short,
they seek to check all spontaneity. This trait is most
strongly developed in individuals whose conflicts are
fairly out in the open, those who have not taken either
of the steps that ordinarily help to submerge the con-
flicts; clear predominance has not been given to one
of the conflicting sets of attitudes, nor has sufficient de-
tachment been developed to put the conflicts out of
operation. Such persons are held together merely by
their idealized image; and apparently its binding power
is insufficient when unaided by one or the other of the
primary attempts at establishing inner unity. The im-
age is particularly inadequate when it takes the form
of a composite of contradictory elements. The exertion
of will power then, consciously or unconsciously, is
needed to keep the conflicting impulses under control.
Since the most disruptive impulses are those of violence

[3] Karen Horney, *Self-Analysis, op. cit.*

prompted by rage, the greatest degree of energy is directed toward the control of rage. Here a vicious circle is set in motion; the rage, by reason of being suppressed, attains explosive strength, which in turn requires still more self-control to choke it. If the patient's excessive control is brought to his attention he will defend it by pointing to the virtue and necessity of self-control for any civilized individual. What he overlooks is the compulsive nature of his control. He cannot help exerting it in the most rigid way and is seized by panic if for any reason it fails to function. The panic may appear as a fear of insanity, which clearly indicates that the function of the control is to ward off the danger of being split apart.

Arbitrary rightness has the twofold function of eliminating doubt from within and influence from without. Doubt and indecision are invariable concomitants of unresolved conflicts and can reach an intensity powerful enough to paralyze all action. In such a state a person is naturally susceptible to influence. When we have genuine convictions we will not be readily swayed; but if all our lives we stand at a crossroad, undecided whether to go in this direction or that, outside agencies can easily be the determining factor, if only temporarily. Moreover, indecision applies not only to possible courses of action but also includes doubts about oneself, one's rights, one's worth.

All these uncertainties detract from our ability to cope with life. Apparently, however, they are not equally intolerable to everyone. The more a person sees life as a merciless battle, the more will he regard doubt as a dangerous weakness. The more isolated he

is and insistent upon independence, the more will susceptibility to foreign influence be a source of irritation. All my observation points to the fact that a combination of predominant aggressive trends and detachment is the most fertile soil for the development of rigid rightness; and the nearer to the surface the aggression, the more militant the rightness. It constitutes an attempt to settle conflicts once and for all by declaring arbitrarily and dogmatically that one is invariably right. In a system so governed by rationality, emotions are traitors from within and must be checked by unswerving control. Peace may be attained but it is the peace of the grave. As would be expected, such persons loathe the idea of analysis because it threatens to disarrange the tidy picture.

Almost polar to rigid rightness, but likewise an effective defense against the recognition of conflicts, is *elusiveness*. Patients inclined toward this kind of defense often resemble those characters in fairy tales who when pursued turn into fish; if not safe in this guise, they turn into deer; if the hunter catches up with them they fly away as birds. You can never pin them down to any statement; they deny having said it or assure you they did not mean it that way. They have a bewildering capacity to becloud issues. It is often impossible for them to give a concrete report of any incident; should they try to do so the listener is uncertain in the end just what really did happen.

The same confusion reigns in their lives. They are vicious one moment, sympathetic the next; at times overconsiderate, ruthlessly inconsiderate at others; domineering in some respects, self-effacing in others. They

reach out for a dominating partner, only to change to a "doormat," then back to the former variety. After treating someone badly, they will be overcome by remorse, attempt to make amends, then feel like a "sucker" and turn to being abusive all over again. Nothing is quite real to them.

The analyst may well find himself confused, and, discouraged, feel there is no substance to work with. There he is mistaken. These are simply patients who have not succeeded in adopting the customary unifying procedures: they have not only failed to repress parts of their conflict, but they have established no definite idealized image. In a way they may be said to demonstrate the value of these attempts. For no matter how troublesome the consequences, persons who have so proceeded are better organized and not nearly so lost as the elusive type. On the other hand, the analyst would be equally mistaken were he to count on an easy job by virtue of the fact that the conflicts are visible and need not therefore be dragged out of hiding. Nevertheless he will find himself up against the patient's aversion to any transparency, and this will tend to defeat him unless he himself understands that this is the patient's way of warding off any real insight.

A final defense against the recognition of conflicts is *cynicism,* the denying and deriding of moral values. A deep-seated uncertainty in respect to moral values is bound to be present in every neurosis, no matter how dogmatically the person adheres to the particular aspects of his standards that are acceptable to him. While the genesis of cynicism varies, its function invariably is to deny the existence of moral values, thereby relieving

when he is pulled from his shelter and brought into close proximity to others—when, for instance, he has to join the army or live with relatives. This terror, too, may be expressed as a fear of insanity; and in this instance psychotic episodes may actually occur. In analysis a like fear will emerge when a patient who has gone to great lengths to create an artificial harmony suddenly recognizes that he is divided.

That fear of insanity is most frequently precipitated by unconscious rage is demonstrated in analysis when, this fear having subsided, its residues take the form of an apprehension that one may insult, beat, or even kill people under conditions where self-control is impossible. The commission of an act of violence in sleep or under the influence of drink, anesthesia, or sexual excitement will then be feared. The rage itself may be conscious or it may appear in consciousness as an obsessive impulse toward violence, unconnected with any affect. On the other hand it may be entirely unconscious; in that case all the person feels are sudden spells of vague panic, accompanied perhaps by perspiration, dizziness, or a fear of fainting—signifying an underlying fear that the violent impulses might get out of control. Where the unconscious rage is externalized, the person may have a terror of thunderstorms, ghosts, burglars, snakes, and so on—that is, of any potentially destructive force outside himself.

But after all, fear of insanity is comparatively rare. It is simply the most conspicuous expression of the fear of losing equilibrium. Ordinarily that fear operates in more hidden ways. It appears then in vague, indefinite forms and can be precipitated by any change in life's

routine. Persons subject to it may feel profoundly disturbed at the prospect of making a journey or of moving or changing jobs or employing a new maid or whatever. Wherever possible they try to avoid such changes. Its threat to stability may be a factor in deterring patients from being analyzed, particularly if they have found a way of living that permits them to function fairly well. When they discuss the advisability of analysis they will be concerned about questions that at first glance seem reasonable enough: Will analysis uproot their marriage? Will it temporarily incapacitate them for work? Will it make them irritable? Will it interfere with their religion? As we shall see, such questions are in part determined by the patient's hopelessness; he does not think it worth while to take any risks. But there is also a real apprehension behind his concern: he needs to be reassured that analysis will not upset his equilibrium. In such cases we can safely assume that the equilibrium is particularly shaky and that the analysis will be a difficult one.

Can the analyst give the patient the assurance he wants? No, he cannot. Every analysis is bound to create temporary upsets. What the analyst can do, however, is to go to the root of such questions, to explain to the patient what he really is afraid of, and tell him that while analysis will upset his present balance it will give him an opportunity to attain an equilibrium more solidly grounded.

Another fear born of the protective structure is a *fear of exposure*. Its source lies in the many pretenses that go into the development and maintenance of the

structure itself. These will be described in connection with the impairment of moral integrity brought about by unresolved conflicts. For our present purpose we need only point out that a neurotic person wants to appear, both to himself and others, different from what he really is—more harmonious, more rational, more generous or powerful or ruthless. It would be hard to say whether he is more afraid of being exposed to himself or to others. Consciously, it is others he is most concerned about, and the more he externalizes his fear the more anxious he is that others should not find him out. He may say in that case that what he thinks of himself does not matter; his own discovery of his failings he can take in his stride, if only others can be kept in the dark. This is not so, but it is the way he feels consciously and indicates the degree to which externalization is present.

Fear of being exposed may either appear as a nebulous feeling that one is a bluff or may be attached to some particular quality only remotely associated with what one is really bothered about. A person may be afraid that he is not as intelligent, as competent, as well educated, as attractive as he is believed to be, so shifting the fear to qualities that do not reflect on his character. Thus a patient recalled that in his early adolescence he was haunted by the fear that his being at the head of his class was due entirely to bluffing. Each time he changed schools he was sure that this time he would be found out, and the fear persisted even when again he captured the top rank. His feeling puzzled him, but he was unable to put his finger on the cause of it. He could not gain an insight into his problem because he was on the wrong track: his fear of exposure did not

at all concern his intelligence but had merely been
shifted to that sphere. In reality it concerned his un-
conscious pretense of being a good fellow who did not
care about grades, whereas the fact was that he was
obsessed by a destructive need to triumph over others.
This illustration leads to a pertinent generalization.
Fear of being a bluff is always related to some objective
factor, but it is usually not the one the person himself
thinks it is. Symptomatically, its outstanding expression
is blushing or a fear of blushing. Since it is an uncon-
scious pretense that the patient fears will be disclosed,
the analyst will make a serious mistake if, noting the
patient's fear of being found out, he searches for some
experience that he thinks the latter is ashamed of and
is hiding. But the patient may not be holding back any-
thing of the sort. What happens then is that he becomes
more and more fearful that there must be something
particularly bad in him which he is unconsciously loath
to reveal. Such a situation is conducive to self-condem-
natory scrutiny but not to constructive work. He will
perhaps go into further detail about sexual episodes or
destructive impulses. But the fear of exposure will re-
main so long as the analyst fails to recognize that the
patient is caught in a conflict and that he himself is
working on only one aspect of it.

Fear of exposure can be provoked by any situation
which—to the neurotic—means being put to a test. This
would include starting a new job, making new friends,
entering a new school, examinations, social gatherings,
or any kind of performance that might make him con-
spicuous even if it is no more than taking part in a dis-
cussion. Frequently what is consciously conceived as a

fear of failure actually has to do with exposure, and
hence is not allayed by success. The person will merely
feel that he "got by" this time, but what about the
next? And if he should fail, he will only be the more
convinced that he has always been a bluff and that this
time he was caught. One consequence of such a feeling
is shyness, particularly in any new situation. Another is
wariness in the face of being liked or appreciated. The
person will think, consciously or unconsciously: "They
like me now, but if they really knew me they would
feel otherwise." Naturally this fear plays a role in
analysis, whose explicit purpose is to "find out."

Every new fear requires a new set of defenses. Those
erected against fear of exposure fall into opposite cate-
gories and hinge on the whole character structure. On
the one hand there is a tendency to avoid test situations
of any kind; and if they cannot be avoided, to be re-
served, self-controlled, and wear an impenetrable mask.
On the other hand there is an unconscious attempt to
become so perfect a bluff that exposure need not be
feared. The latter attitude is not defensive alone: mag-
nificent bluffing is also used by individuals of the ag-
gressive type who live vicariously, as a means of impress-
ing those whom they wish to exploit; any attempt to
question them, then, will be met by a wily counter-
attack. I refer here to openly sadistic persons. We shall
see later how this trait fits in with the entire structure.

We shall understand the fear of exposure when we
have answered two questions: What is a person afraid to
disclose? and, What is it that he fears in case he should
be exposed? The first we have already answered. In

The above sets of processes taken together account for the neurotic's extreme vulnerability to disregard, humiliation, and ridicule. And these processes are so much a part of every neurosis that hypersensitivity in this respect is most common. If we are cognizant of the manifold sources of the fear of disregard we can see that to remove or even diminish it is no simple task. It can recede only to the extent that the entire neurosis recedes.

In general, the consequence of this fear is to set the neurotic apart from others and make him hostile to them. But more important is its power to clip the wings of those afflicted with it to any strong degree. They do not dare to expect anything of others or to set high goals for themselves. They do not dare to approach people who seem superior to them in any way; they do not dare to express an opinion even though they may have a real contribution to make; they do not dare to exercise creative abilities even when they have them; they do not dare to make themselves attractive, to try to impress, to seek a better position, and so on and so on. When tempted to reach out in any of these directions the ghastly prospect of ridicule holds them back and they take refuge in reserve and dignity.

More imperceptible than the fears we have described is one that may be regarded as a condensation of all of them as well as of other fears that arise in a neurotic development. This is the fear of *changing anything in oneself*. Patients react to the idea of changing by adopting either of two extreme attitudes. They either leave the whole subject nebulous, feeling that a change will

occur by some sort of miracle at some hazy future time, or they attempt to change too rapidly, with too little understanding. In the first instance they harbor a mental reservation that catching a glimpse of a problem or admitting a frailty should be enough; the idea that in order to fulfill themselves they must actually change their attitudes and drives comes as a shock to them and makes them uneasy. They cannot help seeing the validity of the proposition, but unconsciously they reject it all the same. The reverse position amounts to an unconscious pretense of changing. It is in part wishful thinking, growing out of the patient's intolerance of any imperfection in himself; but it is also determined by his unconscious feeling of omnipotence—the mere wish to have a difficulty disappear should be enough to dispel it.

Behind the fear of changing are qualms about changing for the worse—that is, losing one's idealized image, turning into the rejected self, becoming like everybody else, or being left by analysis an empty shell; terror of the unknown, of having to relinquish safety devices and satisfactions hitherto gained, particularly those of chasing after phantoms that promise solution; and finally a fear of being unable to change—a fear that will be better understood when we come to discuss the neurotic's hopelessness.

All these fears spring from unresolved conflicts. But because we must expose ourselves to them if we want eventually to find integration, they also stand as a hindrance to our facing ourselves. They are the purgatory, as it were, through which we must wander before we can attain salvation.

resolved conflicts are injurious but to convey a fairly clear and comprehensive picture of the havoc they inflict on the personality.

Living with unresolved conflicts involves primarily a devastating *waste of human energies,* occasioned not only by the conflicts themselves but by all the devious attempts to remove them. When a person is basically divided he can never put his energies wholeheartedly into anything but wants always to pursue two or more incompatible goals. This means that he will either scatter his energies or actively frustrate his efforts. The former is true of persons whose idealized image, like Peer Gynt's, lures them into believing that they can excel in everything. A woman, in this case, wants to be an ideal mother, a perfect cook and hostess, dress well, play a prominent social and political role, be a devoted wife, have affairs outside marriage and do productive work of her own to boot. Needless to say, this cannot be done; she will be bound to fail in all these pursuits, and her energies—no matter how potentially gifted she is—will be wasted.

Of more general relevance is the frustration of a single pursuit where incompatible motivations block each other. A man may want to be a good friend but be so domineering and demanding that his potentialities in this direction are never realized. Another wants his children to get on in the world, but his drive for personal power and his insistent rightness interfere. Someone wants to write a book but gets a splitting headache or is seized with a deadly fatigue whenever he cannot immediately formulate what he wants to say. In this instance it is again the idealized image that is

are still sufficiently active to interfere, but they cannot be put to constructive use. The process thus constitutes a loss of energy that might otherwise be used for self-assertion, for co-operation, or for establishing good human relationships. There is, to mention only one other factor, the alienation from self that robs a person of his motor force. He can still be a good worker, he may even be able to make a considerable effort when put under external pressure, but he collapses when left to his own resources. This does not only mean that he cannot do anything constructive or enjoyable with his free time; it means nothing less than that all his creative forces may go to waste.

For the most part, a variety of factors combine to create large areas of diffuse inhibition. In order to understand and eventually remove a single inhibition, we usually have to come back to it again and again, tackling it from all the angles we have discussed.

Waste or misdirection of energy can stem from three major disturbances, all symptomatic of unresolved conflicts. One of these is a general *indecisiveness*. It may be prevalent in everything, from trifles to matters of greatest personal importance. There may be an endless wavering whether to eat this dish or that, whether to buy this or that suitcase, whether to go to the movies or listen to the radio. It may be impossible to decide on a career or on any step within a career; to decide between two women; to decide whether or not to get a divorce; whether to die or to live. A decision that must be made and that would be irrevocable is a real ordeal and may leave a person panic-stricken and exhausted.

Though their indecisiveness may be marked, people are often unaware of it because they unconsciously exert every effort to avoid decision. They procrastinate; they just "don't get around to" doing things; they allow themselves to be swayed by chance or else leave the decision to someone else. They may also becloud issues to a degree that leaves no basis upon which to make a decision. The aimlessness that follows from all this is likewise not usually apparent to the person himself. The many unconscious devices employed to cover up pervasive indecision account for the comparative rarity with which analysts hear complaints about what is actually a common disorder.

Another typical manifestation of divided energies is a general *ineffectualness.* I do not have in mind here an inaptitude in a particular field, which might be due to lack of training or interest in the subject. Nor is it a question of untapped energies such as William James describes in a most interesting paper[1] pointing to the fact that a reservoir of energy becomes available when one does not succumb to the first signs of fatigue, or under pressure of external circumstances. Ineffectualness in this context is that which results from a person's incapacity to exert his best efforts by reason of his inner crosscurrents. It is as if he were driving a car with the brakes on; inevitably the car is slowed down. Sometimes this is literally applicable. Everything a person attempts may be done much more slowly than either his abilities or the inherent difficulty of the task would warrant. Not that he makes insufficient effort; on the

[1] William James, *Memories and Studies,* Longmans, Green, 1934.

contrary, he must put an inordinate amount of effort into anything he does. It may take him hours, for instance, to write a simple report or master a simple mechanical device. What exactly impedes him of course varies. He may unconsciously rebel against what he feels as coercion; he may be driven to perfect every minute detail; he may be furious at himself—as in an example above—for not acquitting himself superbly at the first attempt. The ineffectualness does not only manifest itself in slowness; it may also appear in awkwardness or forgetfulness. A maid or a housewife will not do her work well if she secretly feels it unfair that, gifted as she is, she should be doing menial work. And her ineffectualness will usually not be confined to this particular activity but will pervade all her endeavors. From the subjective standpoint this means working under strain, with the inevitable consequence of becoming easily exhausted and needing much sleep. Any kind of work under these conditions is bound to take more out of a person, just as a car will suffer if it is driven with locked brakes.

The inner strain—and the ineffectualness as well—is present not only in work but also to a very marked degree in dealing with people. If someone wants to be friendly but at the same time resents the idea because he feels it to be ingratiating, he will be stilted; if he wants to ask for something but also feels he should command it, he will be ungracious; if he wants to assert himself but also to comply, he will be hesitant; if he wants to make contact with people but anticipates rejection, he will be shy; if he wants to have sexual relations but also wants to frustrate the partner, he will be

frigid—and so on. The more pervasive the countercurrents, the greater the strain of living.

Some persons are aware of such inner strain; more often they become aware of it only if under special conditions it is increased; sometimes it strikes them only by contrast with the few occasions when they can relax, feel at ease, and be spontaneous. For the resulting fatigue they usually hold other factors responsible—a weak constitution, an overdose of work, a lack of sleep. Any of these, it is true, may play a role, but a much less significant one than is ordinarily believed.

A third symptomatic disturbance relevant here is a general *inertia*. Patients suffering from it sometimes accuse themselves of being lazy, but actually they cannot be lazy and enjoy it. They may have a conscious aversion to effort of any kind, and may rationalize it by saying that it is quite enough if they have the ideas and that it is up to others to carry out the "details"— that is, do the work. The aversion to effort may also appear as a fear that effort would be injurious to them. This fear is understandable in view of the fact that they know they tire easily; and it may be enhanced by the advice of physicians who take the exhaustion at its face value.

Neurotic inertia is a paralysis of initiative and action. Generally speaking, it is the result of a strong alienation from self and a lack of goal-direction. Long experience of strained and unsatisfactory effort leaves the neurotic with a fairly pervasive listlessness—although periods of hectic activity sometimes intervene. Of the single contributing factors the most influential are the idealized image and sadistic trends. The very fact of

having to make a consistent effort may be felt by the
neurotic as humiliating evidence that he is *not* his ideal-
ized image, while the prospect of doing something that
might be only mediocre is so deterring that he prefers
not to do it at all but perform magnificently in fantasy.
The gnawing self-contempt that invariably follows from
the image robs him of the assurance that he can do any-
thing worth while, thereby burying as in quicksand all
incentive and joy in activity. Sadistic trends, particularly
in their repressed form (inverted sadism), make a person
lean over backward from anything resembling aggres-
sion, with the result that a more or less complete psychic
paralysis may ensue. General inertia is of particular
significance since it covers not only action but feelings
as well. The amount of energy that is wasted in conse-
quence of unresolved neurotic conflicts is unfathom-
ably great. Since neuroses are ultimately a product of
the particular civilization, such a thwarting of human
gifts and qualities stands as a serious indictment of the
culture in question.

Living with unresolved conflicts entails not only a
diffusion of energies but also a split in matters of a
moral nature—that is, in moral principles and all the
feelings, attitudes, and behavior that bear upon one's
relations with others and affect one's own development.
And as in the case of energies division leads to waste,
so in moral questions it leads to a loss of moral whole-
heartedness, or in other words to an impairment of
moral integrity. Such impairment is brought about by
the contradictory positions assumed as well as by the
attempts to conceal their contradictory nature.

Incompatible sets of moral values appear in the basic conflict. Despite all attempts to harmonize them, all of them keep operating. This means, however, that none is or can be taken seriously. The idealized image, for all that it includes elements of true ideals, is essentially a counterfeit, and as difficult for the person himself or for the untrained observer to distinguish from the real thing as a counterfeit bank note from a valid one. The neurotic, as we have seen, may believe—in good faith—that he follows ideals, may castigate himself for every apparent lapse, thus giving an impression of overconscientiousness in pursuit of his standards; or he may intoxicate himself with thinking and talking about values and ideals. My assertion that he nevertheless does not take his ideals seriously means that *they do not have obligating power for his life.* He applies them when it is easy or useful for him to do so, while at other times he conveniently blots them out. We have seen instances of this in our discussion of blind spots and compartmentalizing—instances that would be inconceivable in the case of persons who took their ideals seriously. Nor if the ideals were genuine could they be thrown overboard as easily as they are—for instance in a person who, again in good faith, claims ardent devotion to a cause, but when exposed to temptation turns traitor.

In general, the characteristics of an impairment of moral integrity are a decrease in sincerity and an increase in egocentricity. It is interesting to note in this connection that in Zen Buddhist writings sincerity is equated with wholeheartedness, pointing to the very conclusion we reach on the basis of clinical observation

nection and need only be reviewed here in a more systematic fashion. I shall not attempt to be exhaustive. That would be difficult, if for no other reason than that we have not yet discussed sadistic trends and must postpone doing so because they are to be regarded as an end stage of neurotic development. Starting with the most obvious, whatever course a neurosis takes, *unconscious pretenses* are always a factor. Outstanding are the following:

The pretense of love. The variety of feelings and strivings that can be covered by the term love or that are subjectively felt as such is astonishing. It may cover parasitic expectations on the part of a person who feels too weak or too empty to live his own life.[3] In a more aggressive form it may cover a desire to exploit the partner, to gain through him success, prestige, and power. It may express a need to conquer someone and to triumph over him, or to merge with a partner and live through him, perhaps in a sadistic way. It may mean a need to be admired, and so secure affirmation for one's idealized image. For the very reason that love in our civilization is so rarely a genuine affection, maltreatment and betrayal abound. We are left with the impression, then, that love turns into contempt, hate, or indifference. But love does not swing around so easily. The fact is that the feelings and strivings prompting pseudo love eventually come to the surface. Needless to say, this pretense operates in the parent-child relation and in friendship as well as in sexual relationships.

The pretense of goodness, unselfishness, sympathy,

[3] *Cf.* Karen Horney, *Self-Analysis, op. cit.,* Chapter 8, Morbid Dependency.

punishment. The data supporting the concept that the neurotic wants to suffer are well known. But the term *wants* actually covers a variety of intellectual sins. The authors who propound the theory fail to appreciate that the neurotic suffers much more than he knows and that he usually becomes aware of his suffering only when he begins to recover. What is even more relevant, they do not seem to understand that suffering from unresolved conflicts is inevitable and entirely independent of one's personal wishes. If a neurotic lets himself go to pieces, he certainly does not bring such harm on himself because he wants it but because inner necessities compel him to do so. If he is self-effacing and offers the other cheek, he—at least unconsciously—hates doing so and despises himself for it; but he is in such terror of his own aggressiveness that he must go to the opposite extreme and let himself be abused in some way or other.

Another characteristic that has contributed to the notion of a propensity for suffering is the tendency to exaggerate or dramatize any affliction. It is true that suffering may be felt and displayed for ulterior motives. It may be a plea for attention or forgiveness; it may be unconsciously used for purposes of exploitation; it may be an expression of repressed vindictiveness and be employed then as a means to exort sanctions. But in view of the inner constellation, these are the only ways open to the neurotic to achieve certain ends. It is true also that he often lays his suffering to false causes and so gives the impression of wallowing in suffering for no good reason. Thus he may be disconsolate and attribute it to his being "guilty," while in reality he suffers from not being his idealized image. Or he may feel lost when

separated from a loved one, and though he attributes
his feeling to his deep love, in reality—being torn within
himself—he cannot bear living alone. Finally, he may
falsify his affects and believe that he suffers when actu-
ally he is filled with rage. A woman, for instance, may
think she is suffering when her lover has not written at
the appointed time, but is really angered because she
wants things to happen exactly as she expects them or
because she feels humiliated at any seeming lack of at-
tention. Suffering, in this case, is unconsciously pre-
ferred to recognizing the rage and the neurotic drives
responsible for it, and is emphasized because it serves
to cover up the duplicity involved in the whole relation-
ship. In none of these instances, however, can it be in-
ferred that the neurotic wants to suffer. What is ex-
pressed is an unconscious pretense of suffering.

A further specific impairment is the development of
unconscious arrogance. Again I mean this in the sense of
arrogating to oneself qualities one does not have or that
one has in a lesser degree than is assumed, and of uncon-
sciously claiming the right on this ground to be demand-
ing and derogatory toward others. All neurotic arrogance
is unconscious in that the person is unaware of any false
claims. The distinction here is not between conscious
and unconscious arrogance but between one that is con-
spicuous and one that is hidden behind overmodesty
and apologetic behavior. The difference lies in the meas-
ure of available aggression rather than in the measure
of existing arrogance. In the one instance a person
openly demands special prerogatives; in the other he is
hurt if they are not spontaneously given to him. What

is lacking in either case is what might be called realistic humility, that is, a recognition—not only in words but with emotional sincerity—of the limitations and imperfections of human beings in general and of one's own in particular. In my experience every patient is averse to thinking or hearing of any limitation that might apply to him. This is especially true of the patient with hidden arrogance. He would rather scold himself mercilessly for having overlooked something than admit, with St. Paul, that "our knowledge is piecemeal." He would rather recriminate himself for having been careless or lazy than admit that nobody can be equally productive at all times. The surest indication of hidden arrogance is the apparent contradiction between self-recrimination, with its apologetic attitude, and the inner irritation at any criticism or neglect from outside. It often requires close observation to discover these hurt feelings because the overmodest type is likely to repress them. But actually he may be just as demanding as the openly arrogant person. His criticism of others, too, is no less scathing, though what appears on the surface may be only a self-effacing admiration. Secretly, however, he expects the same perfection of others as of himself, which means that he lacks a true respect for the particular individuality of others.

Another moral problem is the *inability to take a definite stand* and the *undependability* that goes with it. The neurotic rarely takes a stand in accordance with the objective merits of a person, idea, or cause but rather on the basis of his own emotional needs. Since these, however, are contradictory, one position can easily be exchanged for another. Hence many neurotics are read-

itself has a variety of implications. It may refer to conscientiousness in fulfilling duties or obligations. Whether the neurotic is responsible in this sense depends on his particular character structure; it is not a thing that all neuroses have in common. Responsibility for others may mean feeling responsible for one's own actions in so far as they affect someone else; but it may also be a euphemism for dominating others. Holding oneself responsible when it implies taking blame may be merely an expression of rage at not being one's idealized image and in this sense have nothing to do with responsibility.

If we ourselves are clear as to exactly what is meant by taking responsibility for oneself, we will understand that it is hard, if not impossible, for any neurotic to assume it. It means in the first place to acknowledge in a matter-of-fact way—to oneself and others—that such-and-such were one's intentions, one's words or one's actions, and to be willing to take the consequences. This would be the opposite of lying or of putting the blame on others. To take responsibility for himself in this sense would be hard for the neurotic because as a rule he does not know what he is doing or why he is doing it and has a keen subjective interest in not knowing. That is why he often tries to wriggle out by denying, forgetting, belittling, inadvertently supplying other motivations, feeling misunderstood, or getting confused. And since he tends to exclude or absolve himself, he readily assumes that his wife, his business partner, his analyst are responsible for any difficulty that arises. Another factor that frequently contributes to his inability to take the consequences of his actions or even to see

them is a hidden feeling of omnipotence, on the basis
of which he expects to do whatever he pleases and get
away with it. To recognize the inescapable consequences
would shatter this feeling. A final factor that is relevant
here looks at first glance like an intellectual incapacity
to think in terms of cause and effect. The neurotic com-
monly gives the impression of being inherently able to
think only in terms of fault and punishment. Almost
every patient feels that the analyst is blaming him,
whereas actually the analyst is only confronting him
with his difficulties and their consequences. Outside the
analytical situation he may feel like a culprit always
under suspicion and attack and therefore constantly on
the defensive. In reality this is an externalization of
intrapsychic processes. As we have seen, the source from
which these suspicions and attacks stem is his own ideal-
ized image. It is this inner process of fault finding and
defense, plus its externalization, that makes it almost
impossible for him to conceive of a cause-and-effect rela-
tion where he himself is concerned. But where diffi-
culties of his own are not involved he can be just as
matter-of-fact as anyone else. If the streets get wet be-
cause it is raining he does not ask whose fault it is but
accepts the causal connection.

When we speak of assuming responsibility for the self
we mean, in addition, the capacity to stand up for what
we believe is right and a willingness to take the conse-
quences if our action or decision should prove to be
wrong. This, too, is difficult when a person is divided
by conflicts. For which of the conflicting trends within
himself should he or could he stand up? None of them
represents what he really wants or believes in. He really

could stand up only for his idealized image. This, how-
ever, does not permit of the possibility of being wrong.
Hence if his decision or action leads to trouble, he
must falsify matters and ascribe the adverse conse-
quences to someone else.

Example

A comparatively simple example will illustrate this
problem. A man at the head of an organization craves
unlimited power and prestige. Nothing may be done or
decided without him; he cannot bring himself to dele-
gate functions to others who by virtue of their particular
training might be better equipped to handle certain
affairs. There is, in his own mind, nothing he does not
know best. Besides, he does not want anyone else to feel
or to become important. His expectations of himself
would be impossible to measure up to if only because
of limitations of time and energy. But this particular
man wants not only to dominate; he is also compliant
and needs to be superhumanly good. As a result of his
unresolved conflicts he has all the earmarks we have
described—inertia and need for sleep, indecision and
procrastination, and hence cannot organize his time.
And since he feels the keeping of appointments as in-
tolerable coercion, he secretly enjoys making people
wait. In addition, he does many unimportant things
merely because they flatter his vanity. Finally, his urge
to be a devoted family man consumes much of his time
and thought. Naturally, then, things do not function
very well in the organization; but seeing no flaw in
himself, he puts the blame on others or on untoward
circumstances.

Again let us ask, for which part of his personality
could he take responsibility? For his tendency to domi-

its negative aspects. What he does not see, and learns to appreciate only gradually, is that by turning his back on it he defeats his ardent strivings for independence. He hopes to attain independence by defiantly excluding all commitments, whereas in reality the assuming of responsibility for oneself and to oneself is an indispensable condition of real inner freedom.

In order not to recognize that his problems and his suffering stem from his inner difficulties, the neurotic resorts to any of three devices—and often to all of them. Externalization may be applied to the hilt at this point, in which case everything from food, climate, or constitution to parents, wife, or fate is blamed for the particular calamity. Or he may take the attitude that since nothing is his fault it is unfair that any misfortune should befall him. It is unfair that he should fall ill, get old, or die, that he should be unhappily married, have a problem child, or that his work remain unrecognized. This kind of thinking, which may be conscious or unconscious, is doubly wrong, for it eliminates not only his own share in his difficulties but also all the factors independent of himself that have a bearing on his life. Nevertheless, it has a logic of its own. It is the typical thinking of an isolated being who is centered exclusively upon himself and whose egocentricity makes it impossible for him to see himself as only a small link in a greater chain. He simply takes it for granted that he should derive all the good of living at a particular time in a particular social system, but resents being linked with others for good or ill. Therefore he cannot see why he should suffer

from anything in which he has not been personally implicated.

The third device is connected with his refusal to recognize cause-and-effect relationships. Consequences appear in his mind as isolated occurrences, unrelated to himself or his difficulties. A depression or a phobia, for instance, may seem to descend upon him from the blue. This, of course, might be due to psychological ignorance or lack of observation. But in analysis we can see that the patient offers a most tenacious resistance to taking cognizance of any impalpable connections. He may remain incredulous or forget them; or he may feel that the analyst, instead of speedily removing the troublesome disturbances—which was what he came for— puts the "blame" on him and cleverly saves his own face. Thus a patient may have become familiar with factors relevant to his inertia but close his mind to the obvious fact that his inertia slows up not only his analysis but everything else he does. Or another may have become aware of his aggressive-derogatory behavior toward people but cannot understand why he often has quarrels and is disliked. That these difficulties exist within him is one thing, but his actual day-to-day problems are something else again. This separation of his inner troubles from their effect on his life is one of the mainsprings of the whole tendency to compartmentalize.

Resistance toward recognizing the consequences of neurotic attitudes and drives is for the most part deeply concealed and may be easily overlooked by the analyst for the very reason that to him the connection is so obvious. This is unfortunate, because unless the patient is made aware that he blinds himself to consequences

and the reasons for which he does so, he cannot possibly realize to what an extent he interferes with his own life. Awareness of consequences is the most powerful curative factor in analysis in that it impresses on the patient's mind that only by changing certain things within himself can he ever attain freedom.

If, then, the neurotic cannot be held accountable for his pretenses, his arrogance, his egocentricity, his shirking of responsibility, can we speak in terms of morals at all? The argument will be raised that, as physicians, we need only be concerned with the patient's illness and cure, and that his morals are not our province. It will be pointed out that one of Freud's great merits was to have overthrown the "moralistic" attitude I seem to advocate!

Such arguments are deemed scientific; but are they tenable? Can we really exclude in matters of human behavior judgments as to right and wrong? If analysts decide what needs analytical examination and what does not, do they not really proceed on the basis of the very judgments they consciously reject? There is a danger, however, in such implicit judgments: they are likely to be made on either too subjective or too traditional a ground. Thus an analyst may feel that a man's philandering need not be analyzed, while a woman's deserves scrutiny. Or if he believes in an unbridled living out of sexual drives, he may decide that faithfulness, whether in a man or a woman, needs analysis. Actually, judgments should be made on the basis of the particular patient's neurosis. The question to be decided is whether an attitude the patient has assumed has conse-

quences injurious to his development and to his rela-
tions with people. If it has, it is wrong and needs to be
tackled. The reasons for the analyst's conclusions should
be explicitly stated to the patient in order to enable
him to make up his own mind in the matter. And
finally, do not the above arguments contain the same
fallacy as exists in the patient's thinking—namely, that
morals are only a question of judgment and not primar-
ily one of fact coupled with consequences? Let us take
neurotic arrogance as an example. It exists as a fact
no matter whether the patient is responsible for it or
not. The analyst believes that arrogance is a problem
for the patient to recognize and eventually to overcome.
Does he assume this critical attitude because he has
learned in Sunday school that arrogance is sinful and
humility a virtue? Or is his judgment determined by
the fact that arrogance is unrealistic and has adverse
consequences, the burden of which is inevitably the
patient's—again regardless of his responsibility. The
consequences, though, in the case of arrogance bar the
patient from knowing himself, and so thwart his de-
velopment. Also, the arrogant patient is apt to be un-
fair to others, and this again has its repercussions—not
merely in subjecting him to occasional clashes with
others but in alienating him from people generally.
This, however, only drives him deeper into his neu-
rosis. Because the patient's morals in part result from
his neurosis and in part contribute to its maintenance,
the analyst has no choice but to be interested in them.

Sometimes a chance remark will bring this condition to the surface. A patient may respond to the analyst's simply saying that a certain problem is not yet solved and requires more work with the question: "You don't think it is hopeless?" And when he becomes aware of his despair he usually cannot account for it. He will be likely to ascribe it to various external factors, ranging from his job or his marriage to the political situation. But it is not due to any concrete or temporary circumstance. He feels hopeless about ever making anything of his life, ever being happy or free. He feels forever excluded from all that could make his life meaningful.

Perhaps Søren Kierkegaard has given the most profound answer. In *The Sickness unto Death* [1] he says that all despair is fundamentally a despair of being ourselves. Philosophers of all times have stressed the pivotal significance of being ourselves and the despair attendant on feeling barred from its approximation. It is the central theme of Zen Buddhist writings. Among modern authors I quote only John Macmurray: [2] "What other significance can our existence have than to be ourselves fully and completely?"

Hopelessness is an ultimate product of unresolved conflicts, with its deepest root in the despair of ever being wholehearted and undivided. A mounting scale of neurotic difficulties leads to this condition. Basic is the sense of being caught in conflicts like a bird in a net, with no apparent possibility of ever extricating

[1] Søren Kierkegaard, *op. cit.*
[2] John Macmurray, *Reason and Emotion,* Appleton-Century, 1938.

oneself. On top of this come all the attempts at solution which not only fail but increasingly alienate the person from himself. Repetitive experience serves to intensify the hopelessness—talents that never lead to achievement, whether because again and again energies are scattered in too many directions or because the difficulties arising in any creative process are enough to deter the person from further pursuit. This may apply as well to love affairs, marriages, friendships, which are shipwrecked one after another. Such repeated failures are as disheartening as is the experience of laboratory rats when, conditioned to jump into a certain opening for food, they jump again and again only to find it barred.

There is, furthermore, the factually hopeless enterprise of trying to measure up to the idealized image. It is hard to say whether this may not be the most potent of the factors producing hopelessness. There is no question, however, that in analysis hopelessness comes into full relief when the patient becomes aware that he is far from being the uniquely perfect person he sees in his imagination. He feels hopeless at such a time not only because he despairs of ever attaining those fantastic heights but even more because he responds to this realization with profound self-contempt, detrimental to the expectation of ever attaining anything, whether in love or in work.

Final among the contributing factors are all the processes that cause a person's center of gravity to shift from within himself and that make him cease to be the active propellant in his life. The outcome of it all is that he loses faith in himself and in his development as a human being; he tends to give up—an attitude which,

They felt the patient needed encouragement and gave it—which is commendable, but quite insufficient. When this happens, the patient, even if he appreciates the analyst's good intentions, is quite justified in being annoyed with him, since deep down he knows that his hopelessness is not just a mood that can be dissipated by well-meant encouragement.

In order to take the bull by the horns and tackle the problem directly, it is necessary first to recognize from indirect indications like the ones cited above that the patient feels hopeless and the extent to which he feels so. Then it must be understood that his hopelessness is fully warranted by his entanglements. The analyst must realize and explicitly convey to the patient that his situation is hopeless only so long as the status quo persists and is regarded as unchangeable. In simplified form, the whole problem is illustrated by a scene from Chekhov's *Cherry Orchard*. The family, faced with bankruptcy, are in despair at the thought of leaving their estate with its beloved cherry orchard. A man of affairs offers the sound suggestion that they build small houses for rent on a part of the estate. With their hidebound views, they cannot countenance such a project, and since there is no other solution they remain without hope. They ask helplessly, as if they had not heard the suggestion, whether nobody can advise or help them. If their mentor were a good analyst he would say: "Of course the situation is difficult. But what makes it hopeless is your own attitude toward it. If you would consider changing your claims on life there would be no need to feel hopeless."

The belief that the patient can really change, which

means essentially that he can really resolve his conflicts, is the factor that determines whether or not the therapist dare to tackle the problem and whether he can do it with a reasonable chance of success. It is here that my differences with Freud come into clear relief. Freud's psychology and the philosophy underlying it are essentially pessimistic. This is patent in his outlook on the future of mankind[4] as well as in his attitude toward therapy.[5] And on the basis of his theoretical premises, he cannot be anything but pessimistic. Man is driven by instincts which at best are only to be modified by "sublimation." His instinctual drives for satisfaction are inevitably frustrated by society. His "ego" is helplessly tossed about between instinctual drives and the "superego," which itself can only be modified. The superego is primarily forbidding and destructive. True ideals do not exist. The wish for personal fulfillment is "narcissistic." Man is by nature destructive and a "death instinct" compels him either to destroy others or to suffer. All these theories leave little room for a positive attitude toward change and limit the value of the potentially splendid therapy Freud originated. In contrast, I believe that compulsive trends in neuroses are not instinctual but spring from disturbed human relationships; that they can be changed when these improve and that conflicts of such origin can really be resolved. This does not mean that therapy based on the principles

[4] Sigmund Freud, "Civilization and its Discontents," *International Psychoanalytical Library,* Vol. XVII, Leonard and Virginia Woolf, 1930.

[5] Sigmund Freud, "Analysis Terminable and Interminable," *International Journal of Psychoanalysis,* 1937.

within the patient that operate to maintain the status quo. His incentive, on the other hand, is produced by the constructive energy that urges him on toward inner freedom. This is the motive power with which we work and without which we could do nothing. It is the force that helps the patient overcome resistance. It makes his associations productive, thereby giving the analyst a chance for better understanding. It gives him the inner strength to endure the inevitable pain of maturing. It makes him willing to take the risk of abandoning attitudes that have given him a feeling of safety and to make the leap into the unknown of new attitudes toward himself and others. The analyst cannot drag the patient through this process; the patient himself must want to go. It is this invaluable force that is paralyzed by a condition of hopelessness. And in failing to recognize and tackle it the analyst deprives himself of his best ally in the battle against the patient's neurosis.

The patient's hopelessness is not a problem that can be solved by any single interpretation. There is already a substantial gain if, instead of being engulfed by a feeling of doom that he regards as unalterable, the patient begins to recognize it as a problem that may eventually be solved. This step liberates him sufficiently to go ahead. There will, of course, be ups and downs. He may feel optimistic, even overoptimistic, if he acquires some helpful insight, only to succumb to his hopelessness again as soon as he approaches a more upsetting one. Each time the matter must be tackled anew. But the hold it has on the patient will relax as he realizes that he can really change. His incentive will grow

tion of a sadistic tendency. A man may be engaged in a struggle of a personal or general nature in the course of which he has to hurt not only his adversaries but his associates as well. Hostility toward others may also be merely reactive. A person can feel hurt or frightened and want to hit back with a force that, while disproportionate to the objective provocation, is subjectively quite in keeping with it. It is easy, however, to deceive oneself on this score: all too often a justifiable reaction is claimed when actually a sadistic tendency was in operation. But the difficulty in distinguishing one from the other does not mean that reactive hostility is nonexistent. Finally, there are all those offensive tactics of the aggressive type who feels he is fighting for survival. I should not call any of these aggressions sadistic; others may get hurt in the process, but the hurting or damaging is an inevitable by-product rather than a prime intention. To put it simply, we could say that although the kinds of action we refer to here are aggressive or even hostile, they are not perpetrated in a mean spirit. There is no conscious or unconscious satisfaction derived from the very fact of hurting.

In contrast, let us consider some typical sadistic attitudes. We can best observe these in persons who are fairly uninhibited in expressing their sadistic tendencies toward others, whether they themselves are conscious of having such tendencies or not. When, in the following, I speak of a sadistic person, I mean a person whose attitudes toward others are predominantly sadistic.

Such a person may want to *enslave* others or to enslave the partner in particular. His "victim" must be a superman's slave, a creature not only without wishes,

someone by his own behavior, he will immediately show concern or even contempt for that person's emotional instability. If the partner, being intimidated, is not entirely frank with him, he will reproach him for his secrecy or for lying. He will reproach him for being dependent on him when he himself has done all he could to make him so. Such undermining is not just a matter of words but is accompanied by all sorts of scornful behavior. Humiliating and degrading sexual practices can be one of its expressions.

When any of these drives is frustrated, or when the tables are turned and the sadistic person feels himself dominated, exploited, or scorned, he may have spells of an almost insane rage. In his imagination, then, no torture is great enough to inflict upon the offender: he may kick him, beat him, slice him to pieces. These spells of sadistic rage can in turn be repressed, and give rise to a state of acute panic or some functional somatic disturbance pointing to an increase of inner tension.

What, then, is the meaning of these trends? What are the inner necessities that compel a person to behave with such cruelty? The assumption that sadistic trends are the expression of a perverted sexual drive has no basis in fact. It is true that they can be expressed in sexual behavior. In this they are no exception to the general rule that all our character attitudes are bound to manifest themselves in the sexual sphere—as they do in our way of working, in our gait, in our handwriting. It is also true that many sadistic pursuits are carried on with a certain excitement or, as I have said repeatedly, with an absorbing passion. The conclusion, however,

essentials than do the others. Fromm points out that
the sadistic person does not want to destroy the one to
whom he attaches himself, but because he cannot live
his own life must use the partner for a symbiotic exist-
ence. This is definitely true, but it still does not suffi-
ciently explain why a person is compulsively driven to
tamper with the lives of others, or why the tampering
takes the particular forms that it does.

If we regard sadism as a neurotic symptom, we must
start, as always, not by trying to explain the symptom
but by seeking to understand the structure of the per-
sonality that develops it. When we approach the prob-
lem from this angle we recognize that nobody develops
pronounced sadistic trends who has not a profound feel-
ing of futility as regards his own life. Poets intuitively
sensed this underlying condition long before we were
able to dig it out with our prodding clinical scrutiny.
In the case of both Hedda Gabler and the Seducer, the
possibility of ever making something of themselves or
their lives was a more or less closed issue. If under these
circumstances a person cannot find his way to resigna-
tion, he of necessity becomes utterly resentful. He feels
forever excluded, forever defeated.

Hence he starts to hate life and all that is positive
in it. But he hates it with the burning envy of one who
is withheld from something he ardently desires. It is
the bitter, begrudging envy of a person who feels that
life is passing him by. "Lebensneid," Nietzsche called
it. He does not feel that others have their sorrows, too:
"they" sit at the table while he goes hungry; "they"
love, create, enjoy, feel healthy and at ease, belong some-
where. The happiness of others and their "naïve" ex-

this attitude to his being sensitive to imperfections. But the fact is that he turns his searchlight on these alone, leaving everything else in the dark.

Although he succeeds in assuaging his envy and discharging his resentment, his devaluating attitude in turn gives rise to a permanent feeling of disappointment and discontent. If he has children, for instance, he thinks primarily of the burdens and obligations that go with them; if he has no children he feels that this most important human experience has been denied him. If he has no sexual relations he feels deprived and is concerned about the dangers of continence; if he has sexual relations he feels humiliated by them and ashamed of them. If he has an opportunity to make a trip, he chafes under the inconveniences; if he cannot travel he deems it a disgrace to have to stay at home. Since it does not occur to him that the sources of his chronic discontent could lie within himself, he feels entitled to impress upon others how they fail him and to make ever greater demands whose fulfillment can never satisfy him.

The bitter envy, the tendency to devaluate and the resulting discontent account to some extent for certain of the sadistic trends. We understand why the sadist is driven to frustrate others, to inflict suffering, to find fault, to make insatiable demands. But we can appreciate neither the extent of his destructiveness nor his arrogant self-righteousness until we consider what his hopelessness does to his relation to himself.

While he violates the most elementary requirements of human decency, he at the same time harbors within

himself an idealized image of particularly high and rigid moral standards. He is one of those (we have spoken of them before) who, despairing of ever being able to measure up to such standards, have consciously or unconsciously resolved to be as "bad" as possible. He may succeed in being "bad" and wallow in it with a kind of desperate delight. But by doing so the chasm between the idealized image and the actual self becomes unbridgeable. He feels beyond repair and beyond forgiveness. His hopelessness becomes deeper and he develops the recklessness of a person who has nothing to lose. As long as this condition persists it is factually impossible for him to assume a constructive attitude toward himself. Any direct attempt to make him constructive is doomed to futility and betrays ignorance of his condition.

His self-loathing reaches such dimensions that he cannot take a look at himself. He must fortify himself against it by reinforcing an already existing armor of righteousness. The slightest criticism, neglect, or absence of special recognition can mobilize his self-contempt and so must be rejected as unfair. He is compelled, therefore, to externalize his self-contempt, to blame, berate, humiliate others. This, however, throws him into the toils of a vicious circle. The more he despises others the less is he aware of his self-contempt—and the self-contempt grows more violent and merciless the more hopeless he becomes. To strike out against others is then a matter of self-preservation. The process is illustrated by the example cited previously of the patient who accused her husband of indecision and

cannot see that the source of all his despair lies within himself he must hold others responsible for it. They have ruined his life, they have to make up for it—they have to take what's coming to them. It is this vindictiveness, more than any other factor, that kills within him all feelings of sympathy and mercy. Why should he have sympathy for those who have spoiled his life—and in addition are better off than he? In individual instances the desire for revenge may be conscious; he may be aware of it, for example, in reference to his parents. He is not aware, however, that it is a pervasive character trend.

The sadistic person, as we have seen him thus far, is one who because he feels excluded and doomed runs amok, venting his rage at others in blind vindictiveness. And we understand, now, that by making others miserable he seeks to alleviate his own misery. But this can hardly be the whole explanation. The destructive aspects alone do not explain the absorbing passion characteristic of so many sadistic pursuits. There must be some more positive gains, gains that for the sadistic person are of vital importance. This statement might seem to contradict the assumption that sadism is an outgrowth of hopelessness. How can a hopeless person hope for something and go after it, what is more, with such consuming energy? The fact is, however, that from a subjective standpoint there is considerable to be gained. In degrading others he not only allays his intolerable self-contempt but at the same time gives himself a feeling of superiority. When he molds the lives of others he not only gains a stimulating feeling of power over them

but also finds a substitute meaning for his life. When
he exploits others emotionally he provides a vicarious
emotional life for himself that lessens his own sense of
barrenness. When he defeats others he wins a trium-
phant elation which obscures his own hopeless defeat.
This craving for vindictive triumph is probably his
most intense motivating force.

All his pursuits serve as well to gratify his hunger for
thrills and excitement. A healthy, well-balanced person
does not need such thrills. The more mature he is the
less does he care for them. But the emotional life of the
sadistic person is empty. Almost all feelings except those
of anger and triumph have been choked off. He is so
dead that he needs these sharp stimuli to feel alive.

Last but not least, his sadistic dealings with others
provide him with a feeling of strength and pride which
reinforce his unconscious feeling of omnipotence. Dur-
ing analysis a patient's attitude toward his sadistic
trends undergoes profound changes. When he first be-
comes aware of them, he is likely to assume a critical
attitude toward them. But his implied rejection is not
wholehearted; it is rather a matter of giving lip service
to current standards. Intermittently he may have spells
of self-loathing. At a later period, however, when he is
on the verge of relinquishing his sadistic way of living,
he may suddenly feel that he is about to lose something
precious. He may then for the first time consciously
experience elation at being able to do with others as
he pleases. He may express concern lest analysis turn
him into a contemptible weakling. And again, as so
often in analysis, the patient's concern is subjectively
warranted: bereft of his power to make others serve his

emotional needs he sees himself as a wretched and help-less creature. In time he will realize that the feeling of strength and pride he derived from being sadistic is a poor substitute. It was precious to him only because real strength and real pride were unattainable.

When we are aware of the nature of these gains we see that there is no contradiction in the statement that a hopeless person may be frantically searching for some-thing. But it is not greater freedom or greater self-fulfillment that he expects to find: all that goes to make up his hopelessness remains unchanged, and he does not count on changing it. What he pursues are sub-stitutes.

The emotional gains are achieved by living vicari-ously. *To be sadistic means to live aggressively and for the most part destructively, through other persons.* But this is the only way a person so utterly defeated can live. The recklessness with which he pursues his goals is the recklessness born of despair. Having nothing to lose, he can only gain. In this sense sadistic strivings have a positive goal and must be regarded as an *attempt at restitution.* The reason why the goal is so passionately pursued is that in triumphing over others the sadistic person is able to remove his own abject sense of defeat.

The destructive elements inherent in these strivings cannot, however, remain without repercussions on the individual himself. We have already pointed to the heightening of self-contempt. An equally significant re-percussion is the generation of anxiety. This is in part a fear of retaliation: he fears that others will treat him as he treats them—or wants to treat them. Consciously,

Often the destructive impulses are merely kept from awareness. By and large it is astonishing how much sadistic behavior can be lived out without the individual's knowing it. He is conscious only of occasional desires to mistreat a weaker person, of being excited when he reads about sadistic acts, or of having some obviously sadistic fantasies. But these sporadic glimpses remain isolated. The bulk of what he does to others in his daily behavior is for the most part unconscious. His numbness of feeling for himself and others is one factor that blurs the issue; until this is dispelled he cannot emotionally experience what he does. Besides, the justifications brought to bear to conceal the sadistic trends are often clever enough to deceive not only the sadistic person himself but even those affected by them. We must not forget that sadism is an end stage of a severe neurosis. Hence the kind of justification employed will depend upon the structure of the particular neurosis from which the sadistic trends stem. The compliant type, for instance, will enslave the partner under the unconscious pretense of love. His demands will be attributed to his needs. Because he is so helpless or so apprehensive or so ill, the partner should do things for him. Because he cannot be alone, the partner should always be with him. His reproaches will be expressed indirectly by his demonstrating, unconsciously, how much others make him suffer.

The aggressive type expresses sadistic trends quite undisguisedly—which, however, does not mean that he is any more aware of them. He has no hesitation in showing his discontent, his scorn, and his demands but feels that, besides being entirely justified, he is simply

being frank. He will also externalize his lack of regard for others and the fact that he exploits them, and will intimidate them by telling them in no uncertain terms how much they abuse him.

The detached person is singularly unobtrusive in expressing sadistic trends. He will frustrate others in a quiet way, making them feel insecure by his readiness to withdraw, conveying the impression that they are cramping or disturbing him, and taking secret delight in letting them make fools of themselves.

But sadistic impulses can be much more deeply repressed, and then give rise to what might be called an inverted sadism. What happens here is that the person so greatly fears his impulses that he leans over backward to keep them from being revealed to himself or others. He will shun everything that resembles assertion, aggression, or hostility and as a result will be profoundly and diffusely inhibited.

A brief outline will give an idea of what this process entails. To lean over backward from enslaving others is to be incapable of giving any order, much less of assuming a position of responsibility or leadership. It makes for overcaution in exerting influence or giving advice. It involves the repression of even the most legitimate jealousy. A good observer will merely notice that the person gets a headache, a stomach ailment, or some other symptom when things do not go his way.

Leaning over backward from exploiting others brings self-effacing tendencies to the fore. It shows in not daring to express any wish—not daring even to have a wish; in not daring to rebel against abuse or even to

he had not only to repress his sadistic trends but to lean over backward to conceal them.

Being with others is, in this event, a strain—though he may not realize it. He tends to be stilted and shy. He must constantly play a role that is contrary to his sadistic impulses. It is only natural that he himself should think he is really fond of people; and it comes as a shock to him when in analysis he wakes up to the fact that he has very little feeling for them at all, or at least is quite uncertain what his feelings are. At this point he is inclined to take this apparent lack for an unalterable fact. But actually he is merely in process of relinquishing his pretense of positive feelings, and unconsciously prefers to feel nothing rather than face his sadistic impulses. A positive feeling for others can only begin to develop when he recognizes those impulses and starts to overcome them.

There are certain elements in the picture, however, that to the trained observer will indicate the presence of sadistic trends. To begin with, there is always some insidious way in which he can be seen to intimidate, exploit, and frustrate others. There is usually a perceptible though unconscious contempt for others, superficially attributed to their lower moral standards. In addition, there are a number of incongruities which point to sadism. The person, for instance, may sometimes put up with sadistic behavior directed at himself with apparently limitless patience but at other times show hypersensitivity to the slightest domination, exploitation, or humiliation. Finally, he gives the impression of being "masochistic"—namely, of indulging in feeling victimized. But since the term and the con-

Conclusion: Resolution of Neurotic Conflicts

THE MORE we realize what infinite harm neurotic conflicts inflict on the personality, the more stringent appears the need truly to resolve them. But since, as we now understand, this cannot be done by rational decision nor by evasion nor by the exertion of will power, how can it be done? There is only one way: the conflicts can be resolved only by changing those conditions within the personality that brought them into being.

This is a radical way, and a hard one. In view of the difficulties involved in changing anything within ourselves, it is quite understandable that we should scour the ground for short cuts. Perhaps that is why patients— and others as well—so often ask: Is it enough if one sees one's basic conflict? The answer is clearly, no.

Even when the analyst—discerning quite early in the analysis just how the patient is divided—is able to help him to recognize this split, the insight is of no immediate profit. It may bring a certain relief in that the patient begins to see a tangible reason for his troubles instead of simply being lost in a mysterious haze; but he cannot apply it to his life. A perception of how his divergent parts operate and interfere with one another makes him no less divided. He hears these facts as one hears a strange message; it seems plausible, but he cannot realize its implications for himself. He is bound to invalidate it by manifold unconscious mental reservations. Unconsciously he will insist that the analyst is

exaggerating the magnitude of his conflicts; that he would be quite all right if it were not for outside circumstances; that love or success would rid him of his distress; that he can evade his conflicts by keeping away from people; that though it may be true of ordinary folk that they cannot serve two masters, he with his unlimited powers of will and intelligence could manage to do so. Or he may feel—again unconsciously—that the analyst is a charlatan or a well-meaning fool, feigning professional cheerfulness; that he ought to know the patient is ruined beyond repair—which means that the patient responds to the analyst's suggestions with his own feeling of hopelessness.

Since such mental reservations point to the fact that the patient either clings to his particular attempts at solution—these being much more real to him than the conflicts themselves—or that he fundamentally despairs of recovery, all the attempts and all their consequences must be worked through before the basic conflict can profitably be tackled.

The search for an easier road has given rise to another question, lent weight by Freud's emphasis on genesis: Is it enough to relate these conflicting drives—once they have been recognized—to their origins and early manifestations in the childhood situation? Again the answer is, no—and again, for the most part, the same reasons apply. Even the most detailed recollection of his early experiences gives the patient little beyond a more lenient, more condoning attitude toward himself. It in no way makes his present conflicts any less disrupting.

A comprehensive knowledge of early environmental

influences and the changes they effected in the child's personality, though it has little direct therapeutic value, does have a bearing on our inquiry into the conditions under which neurotic conflicts develop.[1] It was, after all, the changes in his relations with himself and others that originally brought about the conflicts. I have described this development in previous publications [2] as well as in the earlier chapters of this book. Briefly, a child may find himself in a situation that threatens his inner freedom, his spontaneity, his feeling of security, his self-confidence—in short the very core of his psychic existence. He feels isolated and helpless, and as a result his first attempts to relate himself to others are determined not by his real feelings but by strategic necessities. He cannot simply like or dislike, trust or distrust, express his wishes or protest against those of others, but has automatically to devise ways to cope with people and to manipulate them with minimum damage to himself. The fundamental characteristics that evolve in this way may be summarized as an alienation from the self and others, a feeling of helplessness, a pervasive apprehensiveness, and a hostile tension in his human relations that ranges from general wariness to definite hatred.

As long as these conditions persist, the neurotic cannot possibly dispense with any of his conflicting drives.

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[1] As is generally recognized, this knowledge is also of great prophylactic value. If we know what environmental factors are helpful to a child's development and what factors retard it, a way is opened to the prevention of the rank growth of neuroses in future generations.

[2] *Cf.* Karen Horney, *New Ways in Psychoanalysis, op. cit.,* Chapter 8, and *Self-Analysis, op. cit.,* Chapter 2.

On the contrary, the inner necessities from which they stem become even more stringent in the course of the neurotic development. The fact that the pseudo solutions increase the disturbance in his relations with others and with himself means that a real solution becomes less and less attainable.

The goal of therapy, therefore, can only be to change the conditions themselves. The neurotic must be helped to retrieve himself, to become aware of his real feelings and wants, to evolve his own set of values, and to relate himself to others on the basis of his feelings and convictions. If we could achieve this by some magic, the conflicts would be dispelled without their having even to be touched upon. As there is no magic, we must know what steps have to be taken to bring about the desired change.

Since every neurosis—no matter how dramatic and seemingly impersonal the symptoms—is a character disorder, the task of therapy is to analyze the entire neurotic character structure. Hence the more clearly we can define this structure and its individual variations, the more precisely can we delineate the work to be done. If we conceive of neurosis as a protective edifice built around the basic conflict, the analytical work can roughly be divided into two parts. One part is to examine in detail all the unconscious attempts at solution that the particular patient has undertaken, together with their effect on his whole personality. This would include studying all the implications of his predominant attitude, his idealized image, his externalization, and so on, without taking into consideration their specific relationship to the underlying conflicts. It

would be misleading to assume that one cannot understand and work at these factors before the conflicts have come into focus, for although they have grown out of the need to harmonize the conflicts, they have a life of their own, carrying their own weight and wielding their own power.

The other part covers the work with the conflicts themselves. This would mean not only bringing the patient to an awareness of their general outline but helping him to see how they operate in detail—that is, how his incompatible drives and the attitudes that stem from them interfere with one another in specific instances: how, for example, a need to subordinate himself, reinforced by inverted sadism, hinders him from winning a game or excelling in competitive work, while at the same time his drive to triumph over others makes victory a compelling necessity; or how asceticism, stemming from a variety of sources, interferes with a need for sympathy, affection, and self-indulgence. We would have to show him also how he shuttles between extremes: how, for instance, he alternates between being overstrict with himself and overlenient; or how his externalized demands upon himself, reinforced perhaps by sadistic drives, clash with his need to be omniscient and all-forgiving, and how in consequence he wavers between condemning and condoning everything the other fellow does; or how he veers between arrogating all rights to himself and feeling he has no rights at all.

This part of the analytical work would encompass, furthermore, the interpretation of all the impossible fusions and compromises the patient is trying to make,

such as trying to combine egocentricity with generosity, conquest with affection, domination with sacrifice. It would include helping him to understand exactly how his idealized image, his externalization, and so on have served to spirit away his conflicts, to camouflage them and to mitigate their disruptive force. In sum, it entails bringing the patient to a thorough understanding of his conflicts—their general effect on his personality and their specific responsibility for his symptoms.

Resistance On the whole, the patient offers a different sort of resistance in each of these sections of analytical work. While his attempts at solution are being analyzed he is bent on defending the subjective values inherent in his attitudes and trends, and so fights any insight into their real nature. During the analysis of his conflicts he is primarily interested in proving that his conflicts are not conflicts at all, and therefore blurs and minimizes the fact that his particular drives are really incompatible.

When? how? As to the *sequence* in which subjects should be tackled, Freud's advice is and probably always will be of foremost significance. Applying to analysis principles valid in medical therapy, he stressed the importance of two considerations in any approach to the patient's problems: an interpretation should be profitable, and it should not be harmful. In other words the two questions an analyst must have in mind are: Can the patient stand a particular insight at this time? and, Is an interpretation likely to have meaning for him and to set him thinking in a constructive way? What we still lack are tangible criteria of precisely what a patient can

stand and what is conducive to stimulating construc-
tive insight. The structural differences from one patient
to another are too great to permit of any dogmatic pre-
scriptions in regard to the timing of interpretations,
but we can take as a guide the principle that certain
problems cannot be tackled profitably and without un-
due risk until particular changes have taken place in
the patient's attitudes. On this basis we can point to
a few measures that are invariably applicable:

It is useless to confront a patient with any major con-
flict as long as he is bent on pursuing phantoms that
to him mean salvation. He must see first that these pur-
suits are futile and interfere with his life. In highly
condensed terms, the attempts at solution should be
analyzed prior to the conflicts. I do not mean that any
mention of conflicts should be assiduously avoided.
How cautious the approach needs to be depends on the
brittleness of the whole neurotic structure. Some pa-
tients may be thrown into a panic if their conflicts are
pointed out to them prematurely. For others it will
have no meaning, will simply slide off without making
any impression. But logically one cannot expect the
patient to have any vital interest in his conflicts as long
as he clings to his particular solutions and uncon-
sciously counts on "getting by" with them.

Another subject to be broached gingerly is the ideal-
ized image. It would lead us too far afield to discuss
here the conditions under which certain aspects of it
can be tackled at a fairly early stage. Caution is ad-
visable, however, since the idealized image is often the
only part of the patient that is real to him. It may be,
what is more, the only element that provides him with

since he would be likely to resist admitting any such feeling. Hopelessness for him would have the connotation of loathsome self-pity and mean a disgraceful confession of defeat. Conversely, if compliant trends predominate, all the factors involved in "moving toward" people must be thoroughly worked through before any dominating or vindictive tendencies can be tackled. Again, if a patient sees himself as a great genius or a great lover, it would be a complete waste of time to approach his fear of being despised and rejected, and even more futile to tackle his self-contempt.

Sometimes the scope of what can be tackled at the beginning is very limited. This is so in particular when a high degree of externalization is combined with a rigid self-idealization—a position that will countenance no flaws. If certain signs reveal this condition to the analyst, he will save much time by avoiding all interpretations that even remotely imply that the source of the patient's trouble lies within himself. However, it may be feasible at this period to touch on particular aspects of the idealized image, such as the inordinate demands the patient makes upon himself.

Familiarity with the dynamics of the neurotic character structure also helps the analyst to grasp more quickly and more concisely just what the patient wants to express by his associations and hence what ought to be dealt with at the moment. He will be able to visualize and predict from seemingly insignificant indications one whole aspect of the patient's personality, and so can direct his attention to the elements to watch for. His position would be like that of the internist who, when he learns that a patient is coughing, perspiring

at night, and fatigued in the late afternoon, considers the possibility of pulmonary tuberculosis and is guided accordingly in his examination.

If, for instance, a patient is apologetic in his behavior, is ready to admire the analyst, and reveals self-effacing tendencies in his associations, the analyst will visualize all the factors involved in "moving toward" people. He will examine the possibility of this being the patient's predominant attitude; and if he finds further evidence he will try to work at this from every possible angle. Similarly, if a patient repeatedly talks of experiences in which he felt humiliated, and indicates that he looks upon the analysis in this light, the analyst will know that he has to tackle the patient's fear of humiliation. And he will select for interpretation that source of the fear which at the time is most accessible. He may be able, for example, to connect it with the patient's need for affirmation of his idealized image, provided parts of the image have already come to awareness. Again, if the patient shows inertia in the analytical situation and talks of feeling doomed, the analyst will have to tackle his hopelessness in so far as that is possible at the moment. If this should occur at the very beginning he may be able only to point out its meaning—namely, that the patient has given himself up. He will then try to convey to him that his hopelessness does not spring from a factually hopeless situation but constitutes a problem to be understood and eventually solved. If the hopelessness appears at a later period the analyst may be able to relate it more specifically to his despair of finding a way out of his conflicts or of ever measuring up to his idealized image.

The suggested measures still leave ample room for the analyst's intuition and for his sensitivity to what is going on in the patient. These remain valuable, even indispensable tools which the analyst should strive to develop to his utmost. But the fact that intuition is employed does not mean that the procedure lies merely in the realm of "art" or that it is one where the application of common sense suffices. A knowledge of the neurotic character structure makes the deductions based upon it strictly scientific and enables the analyst to conduct the analysis in an exact and responsible fashion.

Nevertheless, because of the infinite individual variations in the structure, the analyst can sometimes proceed only by trial and error. When I speak of error I do not refer to such gross mistakes as imputing motivations that are alien to the patient or a failure to grasp his essential neurotic drives. What I have in mind is the very common error of making interpretations that the patient is not yet ready to assimilate. While gross mistakes are avoidable, the error of making premature interpretations is and always will be unavoidable. We can, however, reach a more speedy recognition of such errors if we are extremely alert to the way in which a patient reacts to an interpretation and are guided accordingly. It seems to me that too much emphasis has been placed on the fact of the patient's "resistance"— on his acceptance or rejection of an interpretation—and too little on exactly what his reaction signifies. This is unfortunate, because it is the kind of reaction in all its detail that indicates what has to be worked through before the patient will be ready to handle the problem the analyst has pointed out.

to lean over backward from his sadistic impulses come into view. In other instances a patient's sensitivity to coercion may be seen first as a defensive attitude stemming from his detachment, then as a projection of his own craving for power, and later perhaps as an expression of externalization, inner coercion, or other trends.

Any neurotic attitude or conflict that crystallizes during analysis must be understood in its relation to the personality as a whole. This is what is called working through. It involves the following steps: bringing to the patient's awareness all the overt and hidden manifestations of the particular trend or conflict, helping him to recognize its compulsive nature, and enabling him to attain an appreciation both of its subjective value and its adverse consequences.

The patient, when he discovers a neurotic peculiarity, tends to avoid examining it by immediately raising the question: "How did it come about?" Whether or not he is aware of doing so, he hopes to solve the particular problem by turning to its historical origin. The analyst must hold him back from this escape into the past and encourage him to examine first what is involved—in other words, to become familiar with the peculiarity itself. He must get to know the specific ways in which it manifests itself, the means he uses to cover it up, and his own attitudes toward it. If, for instance, the patient's dread of being compliant has become clear, he must see the extent to which he resents, dreads, and despises in himself any form of self-effacement. He must recognize the checks he has unconsciously instituted to the end of eliminating from his life all possi-