

pensable as oxygen for the body—a psychic actuality of overwhelming significance. Presumably the psyche does not trouble itself about our categories of reality; for it, everything that *works* is real. The investigator of the psyche must not confuse it with his consciousness, else he veils from his sight the object of his investigation. On the contrary, to recognize it at all, he must learn to see how different it is from consciousness. Nothing is more probable than that what we call illusion is very real for the psyche—for which reason we cannot take psychic reality to be commensurable with conscious reality. To the psychologist there is nothing more fatuous than the attitude of the missionary who pronounces the gods of the “poor heathen” to be mere illusion. Unfortunately we still go blundering along in the same dogmatic way, as though *our* so-called reality were not equally full of illusion. In psychic life, as everywhere in our experience, all things that work are reality, regardless of the names man chooses to bestow on them. To take these realities for what they are—not foisting other names on them—that is our business. To the psyche, spirit is no less spirit for being named sexuality.

112 I must repeat that these designations and the changes rung upon them never even remotely touch the essence of the process we have described. It cannot be compassed by the rational concepts of the conscious mind, any more than life itself; and it is for this reason that my patients consistently turn to the representation and interpretation of symbols as the more adequate and effective course.

113 With this I have said pretty well everything I can say about my therapeutic aims and intentions within the broad framework of a lecture. It can be no more than an incentive to thought, and I shall be quite content if such it has been.

## V

PROBLEMS OF MODERN PSYCHOTHERAPY<sup>1</sup>

114 Psychotherapy, or the treatment of the mind by psychological methods, is today identified in popular thought with “psychoanalysis.”

115 The word “psychoanalysis” has become so much a part of common speech that everyone who uses it seems to understand what it means. But what the word actually connotes is unknown to most laymen. According to the intention of its creator, Freud, it can be appropriately applied only to the method, inaugurated by himself, of reducing psychic symptoms and complexes to certain repressed impulses; and in so far as this procedure is not possible without the corresponding points of view, the idea of psychoanalysis also includes certain theoretical assumptions, formulated as the Freudian theory of sexuality expressly insisted upon by its author. But, Freud notwithstanding, the layman employs the term “psychoanalysis” loosely for all modern attempts whatsoever to probe the mind by scientific methods. Thus Adler’s school must submit to being labelled “psychoanalytic” despite the fact that Adler’s viewpoint and method are apparently in irreconcilable opposition to those of Freud. In consequence, Adler does not call his psychology “psychoanalysis” but “individual psychology”; while I prefer to call my own approach “analytical psychology,” by which I mean something like a general concept embracing both psychoanalysis and individual psychology as well as other endeavours in the field of “complex psychology.”

116 Since, however, there is but one mind, or one psyche, in man, it might seem to the layman that there can be only one psychology, and he might therefore suppose these distinctions to be either subjective quibbles or the commonplace attempts

<sup>1</sup> [Published as “Die Probleme der modernen Psychotherapie” in *Schweizerisches Medizinisches Jahrbuch*, 1929, and in *Seelenprobleme der Gegenwart* (Zurich, 1931), pp. 1–59. Previously trans. by C. F. Baynes and W. S. Dell in *Modern Man in Search of a Soul* (London and New York, 1933).—EDITORS.]

of small-minded persons to set themselves up on little thrones. I could easily lengthen the list of "psychologies" by mentioning other systems not included under "analytical psychology." There are in fact many different methods, standpoints, views, and beliefs which are all at war with one another, chiefly because they all misunderstand one another and refuse to give one another their due. The many-sidedness, the diversity, of psychological opinions in our day is nothing less than astonishing, not to say confusing for the layman.

<sup>117</sup> If, in a text-book of pathology, we find numerous remedies of the most diverse kind prescribed for a given disease, we may safely conclude that none of these remedies is particularly efficacious. So, when many different ways of approaching the psyche are recommended, we may rest assured that none of them leads with absolute certainty to the goal, least of all those advocated with fanaticism. The very number of present-day psychologies is a confession of perplexity. The difficulty of gaining access to the psyche is gradually being borne in upon us, and the psyche itself is seen to be a "horned problem," to use Nietzsche's expression. It is small wonder therefore that efforts to attack this elusive riddle keep on multiplying, first from one side and then from another. The variety of contradictory standpoints and opinions is the inevitable result.

<sup>118</sup> The reader will doubtless agree that in speaking of psychoanalysis we should not confine ourselves to its narrower connotation, but should deal in general with the successes and failures of the various contemporary endeavours, which we sum up under the term "analytical psychology," to solve the problem of the psyche.

<sup>119</sup> But why this sudden interest in the human psyche as a datum of experience? For thousands of years it was not so. I wish merely to raise this apparently irrelevant question, not to answer it. In reality it is not irrelevant, because the impulses at the back of our present-day interest in psychology have a sort of subterranean connection with this question.

<sup>120</sup> All that now passes under the layman's idea of "psychoanalysis" has its origin in medical practice; consequently most of it is medical psychology. This psychology bears the unmistakable stamp of the doctor's consulting-room, as can be seen not only in its terminology but also in its theoretical set-up.

Everywhere we come across assumptions which the doctor has taken over from natural science and biology. It is this that has largely contributed to the divorce between modern psychology and the academic or humane sciences, for psychology explains things in terms of irrational nature, whereas the latter studies are grounded in the intellect. The distance between mind and nature, difficult to bridge at best, is still further increased by a medical and biological nomenclature which often strikes us as thoroughly mechanical, and more often than not severely overtaxes the best-intentioned understanding.

<sup>121</sup> Having expressed the hope that the foregoing general remarks may not be out of place in view of the confusion of terms existing in this field, I should now like to turn to the real task in hand and scrutinize the achievements of analytical psychology.

<sup>122</sup> Since the endeavours of our psychology are so extraordinarily heterogeneous, it is only with the greatest difficulty that we can take up a broadly inclusive standpoint. If, therefore, I try to divide the aims and results of these endeavours into certain classes, or rather stages, I do so with the express reservation appropriate to a purely provisional undertaking which, it may be objected, is just as arbitrary as the surveyor's triangulation of a landscape. Be that as it may, I would venture to regard the sum total of our findings under the aspect of four stages, namely, confession, elucidation, education, and transformation. I shall now proceed to discuss these somewhat unusual terms.

<sup>123</sup> The first beginnings of all analytical treatment of the soul are to be found in its prototype, the confessional. Since, however, the two have no direct causal connection, but rather grow from a common irrational psychic root, it is difficult for an outsider to see at once the relation between the groundwork of psychoanalysis and the religious institution of the confessional.

<sup>124</sup> Once the human mind had succeeded in inventing the idea of sin, man had recourse to psychic concealment; or, in analytical parlance, repression arose. Anything concealed is a secret. The possession of secrets acts like a psychic poison that alienates their possessor from the community. In small doses, this poison may be an invaluable medicament, even an essential pre-condition of individual differentiation, so much so that even on the primitive level man feels an irresistible need actu-

ally to invent secrets: their possession safeguards him from dissolving in the featureless flow of unconscious community life and thus from deadly peril to his soul. It is a well known fact that the widespread and very ancient rites of initiation with their mystery cults subserved this instinct for differentiation. Even the Christian sacraments were looked upon as "mysteries" in the early Church, and, as in the case of baptism, were celebrated in secluded spots and only mentioned under the veil of allegory.

<sup>125</sup> A secret shared with several persons is as beneficial as a merely private secret is destructive. The latter works like a burden of guilt, cutting off the unfortunate possessor from communion with his fellows. But, if we are conscious of what we are concealing, the harm done is decidedly less than if we do not know what we are repressing—or even that we have repressions at all. In this case the hidden content is no longer consciously kept secret; we are concealing it even from ourselves. It then splits off from the conscious mind as an independent complex and leads a sort of separate existence in the unconscious psyche, where it can be neither interfered with nor corrected by the conscious mind. The complex forms, so to speak, a miniature self-contained psyche which, as experience shows, develops a peculiar fantasy-life of its own. What we call fantasy is simply spontaneous psychic activity, and it wells up wherever the inhibitive action of the conscious mind abates or, as in sleep, ceases altogether. In sleep, fantasy takes the form of dreams. But in waking life, too, we continue to dream beneath the threshold of consciousness, especially when under the influence of repressed or other unconscious complexes. Incidentally, unconscious contents are on no account composed exclusively of complexes that were once conscious and subsequently became unconscious by being repressed. The unconscious, too, has its own specific contents which push up from unknown depths and gradually reach consciousness. Hence we should in no wise picture the unconscious psyche as a mere receptacle for contents discarded by the conscious mind.

<sup>126</sup> All unconscious contents, which either approach the threshold of consciousness from below, or have sunk only slightly beneath it, affect the conscious mind. Since the content does not appear as such in consciousness, these effects are necessarily indirect. Most of our "lapses" are traceable to such disturb-

ances, as are all neurotic symptoms, which are nearly always, in medical parlance, of a psychogenic nature, the exceptions being shock effects (shell-shock and the like). The mildest forms of neurosis are the lapses of consciousness mentioned above—e.g., slips of the tongue, suddenly forgetting names and dates, inadvertent clumsiness leading to injuries and accidents, misunderstandings and so-called hallucinations of memory, as when we think we have said something or done something, or faulty apprehension of things heard and said, and so on.

<sup>127</sup> In all these instances a thorough investigation can show the existence of some content which, in an indirect and unconscious way, is distorting the performance of the conscious mind.

<sup>128</sup> Generally speaking, therefore, an unconscious secret is more injurious than a conscious one. I have seen many patients who, as a result of difficult circumstances that might well have driven weaker natures to suicide, sometimes developed a suicidal tendency but, because of their inherent reasonableness, prevented it from becoming conscious and in this way generated an unconscious suicide-complex. This unconscious urge to suicide then engineered all kinds of dangerous accidents—as, for instance, a sudden attack of giddiness on some exposed place, hesitation in front of a motor-car, mistaking corrosive sublimate for cough mixture, a sudden zest for dangerous acrobatics, and so forth. When it was possible to make the suicidal leaning conscious in these cases, common sense could intervene as a salutary check: the patients could then consciously recognize and avoid the situations that tempted them to self-destruction.

<sup>129</sup> All personal secrets, therefore, have the effect of sin or guilt, whether or not they are, from the standpoint of popular morality, wrongful secrets.

<sup>130</sup> Another form of concealment is the act of holding something back. What we usually hold back are emotions or affects. Here too it must be stressed that self-restraint is healthy and beneficial; it may even be a virtue. That is why we find self-discipline to be one of the earliest moral arts even among primitive peoples, where it has its place in the initiation ceremonies, chiefly in the form of ascetic continence and the stoical endurance of pain and fear. Self-restraint is here practised within

a secret society as an undertaking shared with others. But if self-restraint is only a personal matter, unconnected with any religious views, it may become as injurious as the personal secret. Hence the well-known bad moods and irritability of the over-virtuous. The affect withheld is likewise something we conceal, something we can hide even from ourselves—an art in which men particularly excel, while women, with very few exceptions, are by nature averse to doing such injury to their affects. When an affect is withheld it is just as isolating and just as disturbing in its effects as the unconscious secret, and just as guilt-laden. In the same way that nature seems to bear us a grudge if we have the advantage of a secret over the rest of humanity, so she takes it amiss if we withhold our emotions from our fellow men. Nature decidedly abhors a vacuum in this respect; hence there is nothing more unendurable in the long run than a tepid harmony based on the withholding of affects. The repressed emotions are often of a kind we wish to keep secret. But more often there is no secret worth mentioning, only emotions which have become unconscious through being withheld at some critical juncture.

<sup>131</sup> The respective predominance of secrets or of inhibited emotions is probably responsible for the different forms of neurosis. At any rate the hysterical subject who is very free with his emotions is generally the possessor of a secret, while the hardened psychasthenic suffers from emotional indigestion.

<sup>132</sup> To cherish secrets and hold back emotion is a psychic misdemeanor for which nature finally visits us with sickness—that is, when we do these things in private. But when they are done in communion with others they satisfy nature and may even count as useful virtues. It is only restraint practised for oneself alone that is unwholesome. It is as if man had an inalienable right to behold all that is dark, imperfect, stupid, and guilty in his fellow men—for such, of course, are the things we keep secret in order to protect ourselves. It seems to be a sin in the eyes of nature to hide our inferiority—just as much as to live entirely on our inferior side. There would appear to be a sort of conscience in mankind which severely punishes every one who does not somehow and at some time, at whatever cost to his virtuous pride, cease to defend and assert himself, and instead confess himself fallible and human. Until he can do

this, an impenetrable wall shuts him off from the vital feeling that he is a man among other men.

<sup>133</sup> This explains the extraordinary significance of genuine, straightforward confession—a truth that was probably known to all the initiation rites and mystery cults of the ancient world. There is a saying from the Greek mysteries: "Give up what thou hast, and then thou wilt receive."

<sup>134</sup> We may well take this saying as a motto for the first stage in psychotherapeutic treatment. The beginnings of psychoanalysis are in fact nothing else than the scientific rediscovery of an ancient truth; even the name that was given to the earliest method—catharsis, or cleansing—is a familiar term in the classical rites of initiation. The early cathartic method consisted in putting the patient, with or without the paraphernalia of hypnosis, in touch with the hinterland of his mind, hence into that state which the yoga systems of the East describe as meditation or contemplation. In contrast to yoga, however, the aim here is to observe the sporadic emergence, whether in the form of images or of feelings, of those dim representations which detach themselves in the darkness from the invisible realm of the unconscious and move as shadows before the inturned gaze. In this way things repressed and forgotten come back again. This is a gain in itself, though often a painful one, for the inferior and even the worthless belongs to me as my shadow and gives me substance and mass. How can I be substantial without casting a shadow? I must have a dark side too if I am to be whole; and by becoming conscious of my shadow I remember once more that I am a human being like any other. At any rate, if this rediscovery of my own wholeness remains private, it will only restore the earlier condition from which the neurosis, i.e., the split-off complex, sprang. Privacy prolongs my isolation and the damage is only partially mended. But through confession I throw myself into the arms of humanity again, freed at last from the burden of moral exile. The goal of the cathartic method is full confession—not merely the intellectual recognition of the facts with the head, but their confirmation by the heart and the actual release of suppressed emotion.

<sup>135</sup> As may easily be imagined, the effect of such a confession on simple souls is very great, and its curative results are often astonishing. Yet I would not wish to see the main achievement

of our psychology at this stage merely in the fact that some sufferers are cured, but rather in the systematic emphasis it lays upon the significance of confession. For this concerns us all. All of us are somehow divided by our secrets, but instead of seeking to cross the gulf on the firm bridge of confession, we choose the treacherous makeshift of opinion and illusion.

<sup>136</sup> Now I am far from wishing to enunciate a general maxim. It would be difficult to imagine anything more unsavoury than a wholesale confession of sin. Psychology simply establishes the fact that we have here a sore spot of first-rate importance. As the next stage, the stage of elucidation, will make clear, it cannot be tackled directly, because it is a problem with quite particularly pointed horns.

<sup>137</sup> It is of course obvious that the new psychology would have remained at the stage of confession had catharsis proved itself a panacea. First and foremost, however, it is not always possible to bring the patients close enough to the unconscious for them to perceive the shadows. On the contrary, many of them—and for the most part complicated, highly conscious persons—are so firmly anchored in consciousness that nothing can pry them loose. They develop the most violent resistances to any attempt to push consciousness aside; they want to talk with the doctor on the conscious plane and go into a rational explanation and discussion of their difficulties. They have quite enough to confess already, they say; they do not have to turn to the unconscious for that. For such patients a complete technique for approaching the unconscious is needed.

<sup>138</sup> This is one fact which at the outset seriously restricts the application of the cathartic method. The other restriction reveals itself later on and leads straight into the problems of the second stage. Let us suppose that in a given case the cathartic confession has occurred, the neurosis has vanished, or rather the symptoms are no longer visible. The patient could now be dismissed as cured—if it depended on the doctor alone. But he—or especially she—cannot get away. The patient seems bound to the doctor through the confession. If this seemingly senseless attachment is forcibly severed, there is a bad relapse. Significantly enough, and most curiously, there are cases where no attachment develops; the patient goes away apparently cured, but he is now so fascinated by the hinterland of his own mind

that he continues to practise catharsis on himself at the expense of his adaptation to life. He is bound to the unconscious, to himself, and not to the doctor. Clearly the same fate has befallen him as once befell Theseus and Peirithous his companion, who went down to Hades to bring back the goddess of the underworld. Tiring on the way, they sat down to rest for a while, only to find that they had grown fast to the rocks and could not rise.

<sup>139</sup> These curious and unforeseen mischances need elucidation just as much as the first-mentioned cases, those that proved inaccessible to catharsis. In spite of the fact that the two categories of patients are apparently quite different, elucidation is called for at precisely the same point—that is, where the problem of fixation arises, as was correctly recognized by Freud. This is immediately obvious with patients who have undergone catharsis, especially if they remain bound to the doctor. The same sort of thing had already been observed as the unpleasant result of hypnotic treatment, although the inner mechanisms of such a tie were not understood. It now turns out that the nature of the tie in question corresponds more or less to the relation between father and child. The patient falls into a sort of childish dependence from which he cannot defend himself even by rational insight. The fixation is at times extraordinarily powerful—its strength is so amazing that one suspects it of being fed by forces quite outside ordinary experience. Since the tie is the result of an unconscious process, the conscious mind of the patient can tell us nothing about it. Hence the question arises of how this new difficulty is to be met. Obviously we are dealing with a neurotic formation, a new symptom directly induced by the treatment. The unmistakable outward sign of the situation is that the “feeling-toned” memory-image of the father is transferred to the doctor, so that whether he likes it or not the doctor appears in the role of the father and thus turns the patient into a child. Naturally the patient’s childishness does not arise on that account—it was always present, but repressed. Now it comes to the surface, and—the long-lost father being found again—tries to restore the family situation of childhood. Freud gave to this symptom the appropriate name of “transference.” That there should be a certain dependence on the doctor who has helped you is a per-

fectly normal and humanly understandable phenomenon. What is abnormal and unexpected is the extraordinary toughness of the tie and its imperviousness to conscious correction.

<sup>140</sup> It is one of Freud's outstanding achievements to have explained the nature of this tie, or at least the biological aspects of it, and thus to have facilitated an important advance in psychological knowledge. Today it has been incontestably proved that the tie is caused by unconscious fantasies. These fantasies have in the main what we may call an "incestuous" character, which seems adequately to explain the fact that they remain unconscious, for we can hardly expect such fantasies, barely conscious at best, to come out even in the most scrupulous confession. Although Freud always speaks of incest-fantasies as though they were repressed, further experience has shown that in very many cases they were never the contents of the conscious mind at all or were conscious only as the vaguest adumbrations, for which reason they could not have been repressed intentionally. It is more probable that the incest-fantasies were always essentially unconscious and remained so until positively dragged into the light of day by the analytical method. This is not to say that fishing them out of the unconscious is a reprehensible interference with nature. It is something like a surgical operation on the psyche, but absolutely necessary inasmuch as the incest-fantasies are the cause of the transference and its complex symptoms, which are no less abnormal for being an artificial product.

<sup>141</sup> While the cathartic method restores to the ego such contents as are capable of becoming conscious and should normally be components of the conscious mind, the process of clearing up the transference brings to light contents which are hardly ever capable of becoming conscious in that form. This is the cardinal distinction between the stage of confession and the stage of elucidation.

<sup>142</sup> We spoke earlier of two categories of patients: those who prove impervious to catharsis and those who develop a fixation after catharsis. We have just dealt with those whose fixation takes the form of transference. But, besides these, there are people who, as already mentioned, develop no attachment to the doctor but rather to their own unconscious, in which they become entangled as in a web. Here the parental imago is not

transferred to any human object but remains a fantasy, although as such it exerts the same pull and results in the same tie as does the transference. The first category, the people who cannot yield themselves unreservedly to catharsis, can be understood in the light of Freudian research. Even before they came along for treatment they stood in an identity-relationship to their parents, deriving from it that authority, independence, and critical power which enabled them successfully to withstand the catharsis. They are mostly cultivated, differentiated personalities who, unlike the others, did not fall helpless victims to the unconscious activity of the parental imago, but rather usurped this activity by unconsciously identifying themselves with their parents.

<sup>143</sup> Faced with the phenomenon of transference, mere confession is of no avail; it was for this reason that Freud was driven to substantial modifications of Breuer's original cathartic method. What he now practised he called the "interpretative method."

<sup>144</sup> This further step is quite logical, for the transference relationship is in especial need of elucidation. How very much this is the case the layman can hardly appreciate; but the doctor who finds himself suddenly entangled in a web of incomprehensible and fantastic notions sees it all too clearly. He must interpret the transference—explain to the patient what he is projecting upon the doctor. Since the patient himself does not know what it is, the doctor is obliged to submit what scraps of fantasy he can obtain from the patient to analytical interpretation. The first and most important products of this kind are dreams. Freud therefore proceeded to examine dreams exclusively for their stock of wishes that had been repressed because incompatible with reality, and in the process discovered the incestuous contents of which I have spoken. Naturally the investigation revealed not merely incestuous material in the stricter sense of the word, but every conceivable kind of filth of which human nature is capable—and it is notorious that a lifetime would be required to make even a rough inventory of it.

<sup>145</sup> The result of the Freudian method of elucidation is a minute elaboration of man's shadow-side unexampled in any previous age. It is the most effective antidote imaginable to