

# RECASTING BOURGEOIS PSYCHOANALYSIS: EDUCATION, AUTHORITY, AND THE POLITICS OF ANALYTIC THERAPY IN THE FREUDIAN REVISION OF 1918\*

PHILLIP J. HENRY

Department of History, University of Chicago

E-mail: [pjh@uchicago.edu](mailto:pjh@uchicago.edu)

---

*This article looks at Sigmund Freud's attempt to rethink psychoanalytic therapy at the close of the Great War. By profoundly undermining a liberal world order and dramatically eroding the material security and social prestige of the educated middle class (Bildungsbürgertum) to which Freud belonged, the war unsettled the social politics of classical analytic therapy. Simultaneously, the treatment of the war neuroses by psychoanalysts appeared to invert the liberal principles around which the procedure of psychoanalysis was developed by placing the analyst in a fundamentally disciplinary relationship vis-à-vis the patient. In response to these threats to the identity of psychoanalysis, Freud undertook a far-reaching renegotiation of the politics of analytic therapy in his address, titled "The Paths of Psychoanalytic Therapy," to the Fifth International Psychoanalytic Congress in the last months of the war. His attempt to mediate the contradictions exposed by the war gave rise to a vision of a postclassical psychoanalysis for a mass democratic age.*

---

\* Earlier versions of this paper were presented at the Modern Europe Workshop, the Central Europe Workshop, and the Medicine and Its Objects Workshop, all at the University of Chicago. I am grateful to the participants for their comments. Quite a few people have read iterations of this essay, and I thank Mitchell Ash, Linda Augustyn, Zachary Barr, John Boyer, Jeremy Cohen, Ryan Dahn, Michael Geyer, Jan Goldstein, Benjamin Fong, Tamara Kamatovich, Katya Motyl, Sarah Reynolds, Kaitlyn Tucker, and Tara Zahra for their feedback. Tyson Leuchter, Tracie Matysik, and the three anonymous readers provided by *Modern Intellectual History* deserve especial thanks for their editorial assistance over the last stages of composition. The title is a modest homage to Charles Maier's *Recasting Bourgeois Europe: Stabilization in France, Germany, and Italy in the Decade after World War I* (Princeton, 1975).

In mid-November 1918, in the wake of the First World War and the collapse of the Habsburg, Hohenzollern, and Romanov monarchies, Sigmund Freud surveyed the catastrophic conditions that prevailed across Central Europe in a letter to his friend and follower Sándor Ferenczi. Amid the chaos of demobilizing armies, chronic food shortages, and the devastating effects of inflation, Freud gave vent to the bitterness that had accumulated over the preceding years of privation and anxiety. “The Habsburgs,” he announced bluntly, “have left behind nothing but a pile of crap.” Yet as much as the old order filled him with disgust, the revolutionary masses inspired little more than contempt. Turning his gaze on the violence in Ferenczi’s native Hungary, he declared himself incapable of feeling “very much sympathy” for Ferenczi’s compatriots—“I can’t get away from the savagery and immaturity of this entirely uneducated people [*ganz unerzogenen Volkes*].”<sup>1</sup>

Ten days earlier, Ferenczi had offered a similarly grim prognosis in a letter to Freud, writing that the latter’s “prophecy about our imminent proletarianization has come true” and that “an epoch of brutalization and infantilization” awaited if Bolshevism were to prevail in Germany.<sup>2</sup> The anxiety and resentment that coursed through this correspondence in late 1918 were the culmination of four years of mounting hardships, and Freud’s attempt to preserve a spectatorial distance from the surrounding turmoil by adopting a deeply cynical gaze was an effort borne very much of desperation. The safe heights of an elevated social status had been profoundly undermined over the course of the conflict. For members of the *Bildungsbürgertum*, or the educated middle class to which Freud belonged, the disintegration of Viennese society in the crucible of total war had overwhelmed the social barriers and undermined the forms of cultural distinction that its members had relied upon to preserve their distance from the masses.<sup>3</sup> In the eyes of many *Bildungsbürger*, life appeared to have been reduced to its lowest common denominator as the most basic concerns of survival dominated daily life.

For many members of Freud’s class, the sudden intrusion of the masses onto the stage of history, together with the brutality of the war and the political

<sup>1</sup> Freud to Ferenczi, 17 Nov. 1918, in *Sigmund Freud–Sándor Ferenczi: Briefwechsel*, vol. 2, part 2, 1917–1919, ed. Eva Brabant, Ernst Falzeder, and Patrizia Giampieri-Deutsch (Vienna, 1996), 186–7. Unless otherwise noted, translations of correspondences are from Ernst L. Freud, ed., *Letters of Sigmund Freud*, trans. Tania Stern and James Stern (New York, 1992).

<sup>2</sup> Ferenczi to Freud, 7 Nov. 1918, in *Briefwechsel*, 2/2: 183.

<sup>3</sup> John W. Boyer, *Culture and Political Crisis in Vienna: Christian Socialism in Power, 1897–1918* (Chicago, 1995), 425. On the collapse of Viennese society see Maureen Healy’s *Vienna and the Fall of the Habsburg Empire: Total War and Everyday Life in World War I* (New York, 2004).

upheavals it engendered, signaled a catastrophic collective regression.<sup>4</sup> Yet the collapse that ensued also opened up the possibility of envisioning new social and political arrangements. The very destructiveness of the conflict seemed to necessitate such imaginative work. While part of the urgency stemmed from a perceived need to quell the volatility of the masses and restore social stability, the last years of the war and the first years of the postwar era also teemed with visions of new social orders to be constructed on the ruins of the old. Along with the existential necessities posed by the catastrophe, the leveling impact of total war—the emergence of a collective community of suffering from a hierarchically stratified society—catalyzed attempts to envision and articulate more equitable forms of social life. Reassembling the “pile of crap” that the Habsburgs had left in their wake into a stable, democratic postwar order was a project that required thinking beyond the limits of prewar political orthodoxies.<sup>5</sup>

In late September of 1918, at the Fifth International Psychoanalytic Congress in Budapest, Freud would make his own contribution to this burgeoning current of thought. His address to the congress, published the following year under the title “The Paths of Psychoanalytic Therapy” (“Wege der psychoanalytischen Therapie”) reflected the fundamental concerns of reconstructing the social fabric after the devastating effects of the war and of fashioning a more equitable postwar social order.<sup>6</sup> For all the world-weary cynicism that ran through his wartime correspondences, Freud’s speech to the congress breathed a remarkably progressive spirit. Yet the occasion of his address was a fraught one: if little of the contempt for the uneducated masses that surfaced in his correspondences is apparent in his address, an anxious uncertainty nonetheless loomed over and pervaded it. “Wege der psychoanalytischen Therapie” represented a deeply ambivalent coming-to-terms with the rise of the masses and the corresponding erosion of social distinction in the context of the war. At the time of the Budapest congress, this process of massification seemed to be both impinging on and

<sup>4</sup> On the anxieties awakened in the bourgeoisie by the rise of the masses see Stefan Jonsson, *Crowds and Democracy: The Idea and Image of the Masses from Revolution to Fascism* (New York, 2013), esp. 12, 23, 51–4.

<sup>5</sup> See Peter Fritzsche, “Did Weimar Fail?”, *Journal of Modern History* 68/3 (1996), 629–53, at 637, 653.

<sup>6</sup> Sigmund Freud, “Wege der psychoanalytischen Therapie” (1918), in Freud, *Gesammelte Werke: Chronologisch Geordnet* (hereafter *GW*), 18 vols., ed. Anna Freud et al. (Frankfurt am Main, 1961–83), 12: 181–94. Originally translated in 1924 as “Turnings in the Ways of Psycho-analytic Therapy,” Freud’s address was given the title “Lines of Advance in Psychoanalytic Therapy” in the *Standard Edition* of Freud’s works. “The Paths of Psychoanalytic Therapy,” by contrast, is a literal translation of “Wege der psychoanalytischen Therapie.” Unless otherwise noted, all translations of Freud’s works are from *The Standard Edition of the Complete Works of Sigmund Freud*, 24 vols., ed. James Strachey et al. (London, 1953–74).

intruding into psychoanalysis in ways that threatened its unique identity. Even as Freud boldly turned his gaze outwards in September of 1918 to envision psychoanalytic therapy contributing productively to the reconstruction of the social, he anxiously directed his attention to a perceived crisis at the borders of psychoanalysis, one that was intimately bound up with one of most disturbing mass phenomena of the war—namely the war neuroses.

The First World War was accompanied by a veritable epidemic of neurotic disorders that threatened to undermine the fighting capacities of the mass conscript armies of the belligerent states. Unlike a number of his closest followers who served as military physicians, Freud was never directly engaged in the treatment of what he termed “the traumatic neuroses of war.” Nevertheless, his thought would increasingly come to circle around the problems these disorders posed for psychoanalysis. Over decades of work as a private clinician for nervous disorders practicing almost exclusively within a bourgeois milieu, Freud had conceived of analytic therapy as a liberal procedure, one that placed strict limits on the exercise of the analyst’s authority and was premised on a fundamental respect for the patient’s individuality. The war, however, confronted Freudians with masses of neurotic soldiers at the very moment it transformed the analysts who treated them from experts in private employ to servants of the wartime state. How analysis could uphold the liberal commitments at the foundation of its identity—its politics of autonomy—while continuing to treat neurotic suffering in this context would be at the heart of problems Freud sought to confront in his address.

Scholars of psychoanalysis who have studied this moment have generally concentrated on extrapolating an essential political content from the decisive texts and on situating psychoanalysis at a given point along a spectrum of ethico-political commitments. In the final instance, they ask, who or what did psychoanalysts represent in this scenario—the military authorities or the war-damaged neurotics? Its liberal bourgeois inheritance or the progressive ethos of the new mass era?<sup>7</sup> Far from occupying a determinate position along these

---

<sup>7</sup> Compare, for instance, Elizabeth Ann Danto, *Freud’s Free Clinics: Psychoanalysis and Social Justice, 1918–1938* (New York, 2005), 13–33; Eli Zaretsky, *Secrets of the Soul: A Social and Cultural History of Psychoanalysis* (New York, 2004), 124–30; Paul Lerner, *Hysterical Men: War, Psychiatry, and the Politics of Trauma in Germany, 1890–1930* (Ithaca, 2003), 163–89; Hans-Georg Hofer, *Nervenschwäche und Krieg: Modernitätskritik und Krisenbewältigung in der österreichischen Psychiatrie (1880–1920)* (Vienna, 2004), 189–93, 361–6; Johannes Reichmayr, *Spurensuche in der Geschichte der Psychoanalyse* (Frankfurt am Main, 1990), 48–59; José Brunner, *Freud and the Politics of Psychoanalysis*, 2nd edn (New Brunswick, 2001), 106–22; Sarah Winter, *Freud and the Institution of Psychoanalytic Knowledge* (Stanford, 1999), 144–7; and Eric J. Leed, *No Man’s Land: Combat and Identity in World War I* (New York, 1979), 163–92.

axes, however, psychoanalysis was suspended anxiously and uncertainly between divergent commitments—inwardly torn and vacillating, its unique identity was suddenly open to question. Freud's address, this article argues, represented an attempt to secure the identity of psychoanalysis in this new context through a new resolution of tensions at its heart. The task of demarcating the "paths" (*Wege*) of analytic therapy at the close of the war thus entailed a complex renegotiation of the politics around which psychoanalysis had been constructed.

In much the way that it would in September of 1918, catastrophe loomed over psychoanalysis at the moment Freud embarked on his seminal self-analysis in 1896. Amid the emergence of a stridently illiberal "politics in a new key," to follow Carl Schorske's famous argument, "Anxiety, impotence, [and] a heightened awareness of the brutality of social existence" defined the experience of the Viennese *Bildungsbürgertum*.<sup>8</sup> Yet while the *fin de siècle* witnessed merely the dismantling of political liberalism in Freud's Vienna, the war undermined an entire European liberal bourgeois civilization. Though the sense of vulnerability generated by the turmoil would culminate in the apocalyptic weeks at war's end, when Freud wrote ominously of a "frightful dawning" in Germany and Ferenczi of the possible "collapse of the entire civilization of the world," it was powerful enough, already in September of 1918, to impel Freud to revisit long-resolved questions and to undertake an intensely personal, but highly public, rethinking of the means and ends of analytic therapy.<sup>9</sup> The collapse of bourgeois society in the crucible of the war and the rise of the "uneducated" (*unerzogene*) masses was met in his address not only with a new conception of the social role of analytic therapy but also with a fundamental reconsideration of the kind of therapeutic authority the analyst was entitled to exercise.

The experience of total war and the confrontation with the war neuroses would famously prompt a far-reaching revision of Freud's theory of the mind in the wake of the war. In place of a mental apparatus governed by the striving for pleasure and the avoidance of its opposite, Freud was led to consider what lay beyond, and indeed before, "the pleasure principle," namely the attempts of the psychical apparatus to bind and regulate the invasive quantities of stimuli that threatened to overwhelm it.<sup>10</sup> In September of 1918 this perspective had yet to crystallize, yet a deepening concern for the vulnerability of the individual psyche in the face of

<sup>8</sup> Carl E. Schorske, *Fin-de-siècle Vienna: Politics and Culture* (New York, 1980), 6. See also William J. McGrath's *Freud's Discovery of Psychoanalysis: The Politics of Hysteria* (Ithaca, 1986); and John E. Toews, "Historicizing Psychoanalysis: Freud in His Time and for Our Time," *Journal of Modern History* 63/3 (1991), 504–45.

<sup>9</sup> Freud to Ferenczi, 9 Nov. 1918, and Ferenczi to Freud, 7 Nov. 1918, in *Sigmund Freud—Sándor Ferenczi: Briefwechsel*, 185, 183.

<sup>10</sup> Sigmund Freud, "Jenseits des Lustprinzips" (1920), in *GW*, 13: 3–69.

external violence was evident already in Freud's rethinking of analytic therapy. From his attempt to renegotiate the politics of psychoanalysis emerged a new understanding of analytic therapy as an active, formative, pedagogical procedure geared towards the reinforcement of the fragile ego and its realignment to social norms. If classical psychoanalysis had framed its operations in accordance with the ideal of *Bildung*—of education as a form of inward *self*-cultivation that distinguished its bearers from the merely brought-up (*erzogen*)—then Freud's address articulated a conception of psychoanalysis as a process of *Erziehung*—of education in the sense of upbringing and character formation. Amid the rise of the masses and the disintegration of bourgeois society, Freud's attempt to recast the politics of psychoanalysis would thus open onto a new model of analytic authority for a new era.

### OUT OF THE WILDERNESS, INTO THE WASTELAND

Questions of authority, like those at the heart of Freud's Budapest address, had been similarly central to his 1914 essay "On the History of the Psychoanalytic Movement." Written in the wake of a disastrous series of splits among his Swiss and Viennese followers, Freud's essay was intended to reconsolidate his control over the movement and to shore up the threatened identity of his science. In part a triumphal narrative of psychoanalysis emerging from isolation to become an international movement and an object of "ever-increasing interest" in the public sphere, Freud's essay made clear that the "extraordinary surge forward" of analysis in recent years only multiplied and magnified the threats it encountered.<sup>11</sup> As Samuel Weber has noted, the dangers that preoccupied Freud in 1914 consisted less of "attacks from without" than of "attempts to blur the very distinction between without and within."<sup>12</sup> What was needed in the face of such threats, Freud contended, was a central authority that could declare with categorical certainty what was psychoanalysis and what was merely "nonsense."<sup>13</sup> If previously Freud had sought to delegate the executive responsibility involved to Carl Jung, in the wake of the recent history of dissension and fragmentation, then that authority could be none other than Freud himself.

Yet the outbreak of the war shortly after the publication of Freud's polemical history put an abrupt end to the process of fraught expansion he outlined in that text. A "continual crumbling" beset the psychoanalytic movement as international networks were severed, colleagues were conscripted, and streams

<sup>11</sup> Sigmund Freud, "Zur Geschichte der psychoanalytischen Bewegung" (1914), in *GW*, 10: 44–113, at 65, 69.

<sup>12</sup> Samuel Weber, *The Legend of Freud*, 2nd edn (Stanford, 2000), 36.

<sup>13</sup> Freud, "Zur Geschichte," 84–5.

of patients dried up.<sup>14</sup> The process he described in “On the History of the Psychoanalytic Movement” appeared to have reversed course, returning him to the relative isolation of the years immediately preceding and following the 1899 publication of *The Interpretation of Dreams*—“I often feel as alone as during the first ten years, when I was surrounded by a desert,” he confessed in 1915.<sup>15</sup> Yet if the initial period of intellectual breakthrough in relative professional seclusion was one that he recalled as his period of “splendid isolation,”<sup>16</sup> the experience of living and working in his “own private trench,” cut off from almost all of his followers, was all but unbearable.<sup>17</sup>

The last months of the conflict, however, witnessed an intensified professional reception of psychoanalysis that went some way to renewing the process of expansion Freud described in his 1914 history. In their search for therapeutic techniques capable of managing the war neuroses, a number of German and Austrian psychiatrists and neurologists had turned to psychoanalysis over the preceding years, and the congress would aim to broaden and deepen this process of reception. The circumstances in which it occurred, however, made it a peculiar event in the history of the young movement. Not only was attendance limited to residents of the belligerent states of the Central Powers—with the exception of two analysts from the neutral Netherlands—but also the presence of official representatives of the civil and military authorities, their interest piqued by reports of successful treatments by psychoanalytic procedures, lent the conference an unfamiliar air of respectability<sup>18</sup>—as one attendee recalled, “everyone was in uniform, except Freud.”<sup>19</sup> In this unprecedented configuration of circumstances, psychoanalysts found themselves in the unfamiliar situation of addressing a social and political problem of massive proportions and urgent importance from a position of recognized therapeutic—if not yet scientific or diagnostic—expertise. For a science that previously had restricted its therapeutic work to an economically privileged and well-educated subset of the population and had grown accustomed to its status as an outsider, this was, in every respect, a strange scenario.

<sup>14</sup> Freud to Karl Abraham, 11 Dec. 1914, in *Sigmund Freud—Karl Abraham: Briefe, 1907–1926*, ed. Hilda C. Abraham and Ernst L. Freud (Frankfurt am Main, 1965), 197.

<sup>15</sup> Freud to Lou Andreas-Salomé, 30 July 1915, in *Sigmund Freud—Lou Andreas-Salomé: Briefwechsel*, ed. Ernst Pfeiffer (Frankfurt am Main, 1966), 35.

<sup>16</sup> Freud, “Zur Geschichte,” 60.

<sup>17</sup> Freud to Ferenczi, 15 Dec. 1914, in *Sigmund Freud—Sándor Ferenczi: Briefwechsel*, 94.

<sup>18</sup> On this subject see Freud to Lou Andreas-Salomé, 4 Oct. 1918, in *Sigmund Freud—Lou Andreas-Salomé: Briefwechsel*, 93.

<sup>19</sup> Sándor Radó, “Psychoanalytic Movement,” Columbia University, Oral History Research Office, Oral History Collection (1979), Library of Congress, Washington, DC.

The broadened professional engagement with psychoanalysis in the context of the war had generated a new challenge to Freudian thought, however, one that anticipated the direction of Freud's postwar revision. Even as a number of military physicians turned to his writings for therapeutic guidance, many others saw in the war neuroses a decisive refutation of Freudian libido theory and, in particular, of the sexual etiology of the neuroses—for the great majority of German psychiatrists and neurologists, Paul Lerner has written, “the sources of the war neuroses simply had nothing to do with sexuality.”<sup>20</sup> In the congress presentations of Freud's two most important followers, Ferenczi and Karl Abraham, the challenge posed by the more intensive and markedly ambivalent engagement of the broader scientific community with psychoanalysis was met with a defiant insistence that the etiology of the war neuroses—no less than the neuroses of peacetime—was bound up with the developmental history of the libido.<sup>21</sup> In Ferenczi's keynote address to the congress the attempt to rehabilitate sexuality took the form of an insistence that the symptom's defensive functions represented merely secondary gains against the primary gain of libidinal gratification—it was the “pleasure itself” involved in the regression to a narcissistic stage of childlike helplessness that ultimately explained the symptoms of war neurotics.<sup>22</sup> Claiming that his experiences “accorded perfectly” with Ferenczi's, Abraham went even further in his report, pointing to a pathological disposition to falling ill from traumatic experiences behind the (merely) “manifest” expressions of the self-preservative drive at work in the neurosis. Only the assumption of a narcissistic disposition (*Anlage*) could account, Abraham contended, for why some individuals submit passively to neurosis amid the experiences of the war while others withstand its “most severe physical and mental effects” while remaining “essentially healthy.”<sup>23</sup>

The third report on the war neuroses, delivered by the German psychiatrist Ernst Simmel, presented a radically different perspective, however. A newcomer to the psychoanalytic movement, Simmel had introduced himself to Freud earlier that year with a monograph, *War Neuroses and “Psychical Trauma”*, which built on his experiences treating war neurotics at a field hospital.<sup>24</sup> His report at the congress, like his earlier study, teemed with examples of neurotics suffering from

<sup>20</sup> Lerner, *Hysterical Men*, 178.

<sup>21</sup> Perhaps the most forceful statement of this theory of the neuroses is provided in Freud's “Drei Abhandlungen zur Sexualtheorie” (1905), in *GW*, 5: 29–145, at 64.

<sup>22</sup> Sándor Ferenczi, “Die Psychoanalyse der Kriegsneurosen,” in *Zur Psychoanalyse der Kriegsneurosen* (Leipzig, 1919), 9–30, at 28.

<sup>23</sup> Karl Abraham, “Erstes Korreferat,” in *Zur Psychoanalyse der Kriegsneurosen*, 31–42, at 31–3.

<sup>24</sup> Ernst Simmel, *Kriegsneurosen und “psychisches Trauma”: Ihre gegenseitige Beziehung, dargestellt auf Grund psychoanalytischer, hypnotischer Studien* (Leipzig, 1918).



repressed memories of recent traumatic events. In marked contrast to Ferenczi and Abraham, who allowed the logic of libidinal gratification to displace the force of traumatic experience, for Simmel the convulsive attacks of his patients were transparent testimonies to the violence of their environment. Against the tendency of Freud's closest followers to fold traumatic experience into a perverse disposition, Simmel kept the focus squarely on the context that generated the soldier's suffering.<sup>25</sup>

The reports thus posed a stark choice between pathological disposition and traumatic experience as the fundamental cause of the neurotic suffering of the war. While the orthodox psychoanalytic theory of the neuroses aimed to integrate both factors as "reciprocal values" within an "etiological series," Ferenczi's address to the congress, which explicitly invoked this idea, demonstrated the difficulty of maintaining the critical balance between the two—the logic of primary and secondary "gains from illness," of manifest expressions and latent causes, invariably tilted the series in favor of one term against the other.<sup>26</sup> If the insistence on disposition (*Anlage*) effectively supplanted experience in the reports of his two followers, Freud's thought had begun to move in the opposite direction over the preceding years, towards a greater emphasis on the pathogenic force of traumatic experiences.<sup>27</sup> Though he avoided intervening in the discussion of the war neuroses in September of 1918, the new emphasis that Freud placed in his wartime writings on the vulnerability of the ego and the real, contemporary dangers confronting it signaled the beginning of a departure from the orthodox position defended by his closest followers, one that would culminate two years later in *Beyond the Pleasure Principle*.<sup>28</sup>

Yet if Simmel's etiology appeared the more compelling, his report nonetheless posed a number of problems. Even as he enthusiastically recommended Simmel's earlier monograph to Ferenczi and Abraham in February 1918, Freud noted that the newcomer had "not gone the whole way with [psychoanalysis]."<sup>29</sup> Like other military doctors who adopted psychoanalytic methods during the war, Simmel turned primarily to Freud's early writings with Josef Breuer on hysteria, from which he developed a mixed method combining hypnosis with

<sup>25</sup> Ernst Simmel, "Zweites Korreferat," in *Zur Psychoanalyse der Kriegsneurosen*, 42–60.

<sup>26</sup> Ferenczi, "Die Psychoanalyse der Kriegsneurosen," 20.

<sup>27</sup> On this subject see Ilse Grubrich-Simitis, "Trauma or Drive—Drive and Trauma: A Reading of Freud's Phylogenetic Fantasy of 1915," *Psychoanalytic Study of the Child* 43 (1988), 3–32.

<sup>28</sup> See Sigmund Freud, "Vorlesungen zur Einführung in der Psychoanalyse" (1916–17), in *GW*, 11: 3–484, at 395–9. See also Freud's introduction to the congress reports when they were assembled into a single volume in early 1919. Freud, "Einleitung zu *Zur Psychoanalyse der Kriegsneurosen*" (1919), in *GW*, 12: 321–4.

<sup>29</sup> Freud to Abraham, 17 Feb. 1918, in *Briefe*, 255.

orthodox procedure and directed towards the retrieval of suppressed memories and their cathartic reliving in the treatment. As he explained, the conditions of the war—above all the number of neurotics and the urgency of their rapid recovery—did not allow for a patient working-through of unconscious material, but rather demanded an abridged treatment focused narrowly on the restoration of the patient's productive capacity.<sup>30</sup> Given the circumstances, such alterations were understandable, Freud thought, yet were nonetheless “bound to conceal [psychic] resistance and sexual drives from him.”<sup>31</sup> While in Freud's estimation Simmel had placed himself “unreservedly on analytic ground,”<sup>32</sup> the therapeutic modifications he introduced could only appear to be regressions from the hard-won insights of the prewar years even as they enabled a form of analytic therapy to reach far greater numbers of sufferers. The book that indicated to Freud that “German war medicine had taken the bait”<sup>33</sup> thus simultaneously drew psychoanalysis beyond itself into an awkward proximity to its professional rivals, threatening to blur the very lines between inside and outside that Freud's 1914 essay had sought to enforce.

#### SUGGESTION AND ITS DISCONTENTS

Freud's own address at the 1918 Budapest Congress was fittingly devoted to the issue of psychoanalytic technique and the possibility of an effective mass therapeutic application of a modified analytic method. Obliquely, however, it also addressed itself to the inherent difficulties of analytic therapy and the anxieties generated by its potential modification. In this sense, it struck a markedly different note than the self-assured reports of Abraham and Ferenczi. The title alone—“The Paths of Psychoanalytic Therapy”—signaled a certain distance from his closest followers. While Ferenczi confidently invoked the “path” of psychoanalysis and challenged skeptical colleagues to follow Freud along the *Weg* he had discovered (*den von Freud begangenen Weg*),<sup>34</sup> the same path appeared to Freud in 1918 to have split, or at least to have multiplied. The volatility and disorder of the current state of affairs called forth not a confident assertion of the veracity of his insights and the correctness of established therapeutic procedure, but rather a reflective consideration of the very uncertainties attending analytic practice.

Beyond the psychoanalytic movement, the unprecedented challenges posed by the war neuroses had generated intensive discussion of the question of therapeutic

<sup>30</sup> Simmel, “Zweites Korreferat,” 42–3.

<sup>31</sup> Freud to Abraham, 17 Feb. 1918, in *Briefe*, 255.

<sup>32</sup> Freud to Ferenczi, 17 Feb. 1918, in *Sigmund Freud–Sándor Ferenczi: Briefwechsel*, 133.

<sup>33</sup> *Ibid.*

<sup>34</sup> Ferenczi, “Die Psychoanalyse der Kriegsneurosen,” 20.

technique in German medical science at large. As a consensus formed among medical and psychiatric experts that the war neuroses were essentially a form of male hysteria—and thus based on the psychological conversion of affects and ideas into symptoms—it seemed that a new field had been opened up for effective therapeutic intervention. Where the theory that the war neuroses were caused by physical damage to the brain itself had condemned doctors to passivity, the recognition of the psychological factors at work in symptom formation had the opposite effect of empowering the medical profession vis-à-vis the afflicted soldiers it confronted.<sup>35</sup> The war witnessed a proliferation of more “active” techniques often accompanied by reports of staggering therapeutic successes. Methods as diverse as the painful—and on occasion even fatal—application of electrical currents to the neurotic soldier’s noncompliant body and the forcible administration of hypnotic suggestion vied for official support and professional recognition. What united most such techniques—alongside a willingness to use psychological or physical violence—was their reliance on a rigidly authoritarian model of the doctor–patient relationship that reinforced the subordination of the neurotic soldier while elevating the physician to a position of absolute authority. By structuring treatment along the lines of the hierarchical relations of the military, doctors sought to exacerbate the patient’s dependence and subjection in order to compel him—by verbal order or physical force—to return to health.<sup>36</sup>

Despite the astounding reports of therapeutic success furnished by adherents of such “active” methods, a high rate of recidivism and a growing chorus of ethical protests marred their claims and motivated military authorities to search for less coercive and more effective alternatives.<sup>37</sup> It was in this context that Simmel’s work and the possibility it presented of applying a modified psychoanalytic method in the treatment of the war neuroses piqued the interests of both analysts and military authorities alike. Yet Simmel’s contributions exposed an unsettling paradox: despite his indignation at what Abraham termed the “all too ‘active’ methods” of military doctors,<sup>38</sup> it was through his own innovations and particularly the admixture of hypnosis with orthodox methods that psychoanalysis was drawn closest to the very therapeutic techniques he rejected so decisively. For Simmel, treatment by hypnotic suggestion, far from curing the patient, only exacerbated his underlying pathogenic condition—in both its invasiveness and the lasting psychological harm it wrought, it was tantamount to a “rape of the patient.”<sup>39</sup> Consistent with his conviction that

---

<sup>35</sup> Lerner, *Hysterical Men*, 70–71, 87.

<sup>36</sup> *Ibid.*, 87–8, 104–5, 114.

<sup>37</sup> See Abraham, “Erstes Korreferat,” 40; and Lerner, *Hysterical Men*, 175.

<sup>38</sup> Abraham, “Erstes Korreferat,” 40.

<sup>39</sup> Simmel, *Kriegsneurosen und “Psychisches Trauma”*, 23.

the “weakening of the soldier’s personality complex” in the context of the army represented an essential condition for the development of a neurosis, Simmel understood the neurotic afflictions of wartime as a consequence of the soldier’s “readiness to subordinate” (*Unterordnungsbereitschaft*)—the very susceptibility of the patient to suggestion was thus an index of his illness. In Simmel’s critique, the subordination of the soldier in the military was reproduced intrapsychically by his subjection (through unconscious autosuggestion) to pathogenic ideas, and was, in turn, reproduced and reinforced by the suggestive methods deployed in “active” treatments.<sup>40</sup>

Yet for all his outrage at the brutality of these therapeutic methods, Simmel was convinced that the exigencies of the conflict necessitated changes to orthodox psychoanalytic technique. Not only did the sheer number of neurotic soldiers call for an abbreviated mode of analytic therapy, but the low social origins and corresponding lack of education of most war neurotics made it impossible, in Simmel’s view, for them to take an active part in their own treatment and thus necessitated the admixture of new methods with analysis proper, above all that of hypnosis.<sup>41</sup> While the widespread use of hypnotic suggestion by military physicians as a means of imposing an injunction to return to health only deepened the patient’s illness, Simmel believed hypnosis could nonetheless serve as a means of expediting analysis by overcoming the patient’s amnesia and allowing the physician to arrive directly at the unconscious sense of symptoms. Hypnosis in Simmel’s analytic–cathartic method was intended to bring about the lifting of the “command imposed by the unconscious,” a process that was accompanied by the abreaction of the affect bound up with the unconscious ideas or images, and that resulted in an expansion of consciousness. In Simmel’s calculus, the deficiencies of the patients and the exigencies imposed on analysis had to be made good through the activity of the doctor. When coupled with an interpretation of the war neuroses as recapitulations of recent traumas, the immediacy and impersonality of the main etiological factors dovetailed with the presumed simplicity of the patients he confronted to legitimate a technique that relegated the personal history of the patient to a position of subordinate importance. In the context of the “mass treatment” imposed by the war, Simmel’s insistence that he “only treated patients whose dreams [he] knew” appeared to preserve for his therapy merely a residue of individuality and interiority in the face of external forces that threatened to overwhelm and efface them entirely.<sup>42</sup>

While Simmel was forthcoming regarding what he saw as the therapeutic limitations of his work, he viewed these shortcomings not as effects of the

---

<sup>40</sup> Simmel, “Zweites Korreferat,” 47.

<sup>41</sup> Simmel, *Kriegsneurosen und “Psychisches Trauma”*, 23.

<sup>42</sup> Simmel, “Zweites Korreferat,” 49, 51.

technique itself but as the inevitable consequences of the constraints imposed by the war—indeed it was foreseeable that an “analytic cure of the total personality” through an abridged and combined method could one day be implemented in the “*Psycho-Klinik* of the future.”<sup>43</sup> If Simmel’s innovations were not only necessary given the circumstances of the war but also adequate to the forms of suffering the war produced and the subjects it afflicted, then they nonetheless raised a number of problems. In a review of *War Neuroses and “Psychical Trauma”* that echoed Freud’s earlier epistolary critiques, the reviewer (almost certainly Abraham) noted that Simmel’s method led him to overlook the very psychical phenomena at the heart of therapy, namely resistances and the transference—relapses, he added, would instruct him further.<sup>44</sup> While Abraham’s own congress report marginalized the traumatic impact of the war by placing exclusive emphasis on dispositional factors, Simmel’s could be read as having the inverse effect of allowing the immensity of the traumatic forces of the war to engulf the patient’s individuality. By flattening and abridging analytic therapy, his treatment opened onto the prospect—at once exhilarating and unsettling—of a psychoanalysis for a post-individual age.

In Freud’s own reckoning, offered only a year earlier in his *Introductory Lectures*, the beginning of “psychoanalysis proper” could be dated to the moment when he “dispensed with the help of hypnosis.”<sup>45</sup> Recalling his abandonment of hypnosis in a short paper titled “On Psychotherapy” from 1905, Freud insisted that the “greatest possible antithesis” exists between the hypnotic treatment by suggestion and the analytic method. While treatment by suggestion ignores the “origin, strength and meaning” of the symptom, seeking rather “to superimpose something” (*etwas auflegen*) in the hopes of preventing the pathogenic idea from expressing itself, “analytic therapy . . . does not seek to add or to introduce anything new, but to take away something, to bring out something.” Freud explained that he dispensed with the method of hypnotic suggestion out of despair of being able to make the suggestion sufficiently strong and durable to effect a permanent cure—“In every severe case I saw the suggestions which had been applied crumble away again.” To this admission Freud added the criticism that suggestion obscures insight into the play of forces in the psyche, preventing the physician from recognizing the resistance with which patients cling to illnesses and struggle *against* their recovery, and “which alone makes it possible to understand [their] behavior in daily life.”<sup>46</sup> In place of a therapeutic

<sup>43</sup> Ibid., 42–3.

<sup>44</sup> [D. J. H.] “Referat,” *Internationale Zeitschrift für ärztliche Psychoanalyse* 5/2 (1919), 125–9, at 128.

<sup>45</sup> Freud, “Vorlesungen,” 302.

<sup>46</sup> Sigmund Freud, “Über Psychotherapie” (1904–5), in *GW*, 5: 13–26, at 17–18, 25.

technique premised on the imposition of a new interdiction, psychoanalysis framed its efforts negatively, as a process of loosening or lifting the mechanism of automatic rejection of unpleasant ideas—psychoanalytic treatment, as he put it in 1905, “may in general be conceived as an after-education [*Nacherziehung*] in the overcoming of the internal resistances.”<sup>47</sup>

The fact that psychoanalysis had in a certain sense originated with the abandonment of a technique that was now, in 1918, reemerging within its ranks drew it back towards its origins and presented Freud with the challenge of recovering the identity of his science from the encroaching threat of hypnotic suggestion. Despite his earlier assertion that the “greatest possible” contradiction exists between the two, their tangled prehistory meant that extricating analysis from suggestion was anything but straightforward. While Freud saw analytic therapy as “struggling unceasingly against resistances” in its patients, illness and suggestibility, nonetheless, seemed to him to go hand in hand—“My clients are sick people, hence especially, irrational and suggestible,” he wrote Wilhelm Fliess in 1901.<sup>48</sup> And if the “capriciousness” of the suggestive technique, its unreliability and impermanence, led Freud to abandon it early in his career, suggestion itself persisted as a problem by virtue, paradoxically, of its strength.<sup>49</sup> Even after Freud had replaced treatment by direct suggestion with the talking cure, he continued for several years in the 1890s to employ hypnosis in a fashion similar to the role it played in Simmel’s later method—not, that is, in order to compel his patients to return to health but as a means of inducing them to talk. Yet hypnosis, because it sought to neutralize the patient’s resistances, to disable them in order to facilitate access to the unconscious, brought psychoanalysis perilously close to suggestion, a danger Freud sought to contain through its replacement by the method of *free* association.<sup>50</sup>

---

<sup>47</sup> Freud, “Über Psychotherapie,” 25.

<sup>48</sup> Freud to Fliess, 7 Aug. 1901, in Sigmund Freud, *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887–1904*, ed. and trans. Jeffrey Moussaieff Masson (Cambridge, 1985), 446. Freud’s contention that analysis was forced to struggle “unceasingly against resistances,” together with the argument that this exonerated his science from the accusation of having merely “talked the patients into everything,” can be found in Freud, “Vorlesungen,” 470–71. See also Mikkel Borch-Jacobsen and Douglas Brick, “Neurotica: Freud and the Seduction Theory,” *October* 76 (1996), 15–43.

<sup>49</sup> Freud discusses the “capriciousness” of the method and the “impermanence of its results” in “Vorlesungen,” 467.

<sup>50</sup> On this subject see John Forrester, “Contracting the Disease of Love: Authority and Freedom in the Origins of Psychoanalysis,” in W. F. Bynum, Roy Porter, and Michael Shepherd, eds., *The Anatomy of Madness: Essays in the History of Psychiatry*, vol. 1 (London, 1985), 255–70.

The paradox that suggestion seemed to be too unstable to produce a lasting cure and yet too pervasive for psychoanalysis to ever fully escape pushed Freud to reframe the problem it posed. Even if psychoanalysis could not liberate itself from suggestion, it could turn the latter into an object of critical analysis and direct its attention to the underlying phenomena from which it emerged—the patterns of loving and hating taken over from the past that structured the patient's relations to authority figures in the present. The concept of the transference that Freud developed over the decade prior to the war encompassed both suggestion and resistance while converting them into objects to be reflexively grasped and critically dissected. Where formerly the activity of the analyst had appeared sufficient, as the concept of the transference took center stage it became increasingly apparent that the overcoming of the resistances is a task that “the patient has to accomplish.”<sup>51</sup> Penetrating to the unconscious by forcibly subduing the patient's resistances and simply communicating its repressed contents was no longer adequate—“*our* knowledge about the unconscious material is not equivalent to *his* knowledge,” Freud would later write. The essential process of overcoming the resistances, which would allow the patient to integrate the new knowledge “*instead of his unconscious material*” as opposed to merely “*beside it*,” could not be accomplished through the one-sided activity of the analyst but only through the self-reflective process that Freud termed “after-education.”<sup>52</sup>

As Freud came to recenter analytic therapy around the problematic of the transference he simultaneously altered his stance towards suggestion. Where he had earlier hoped to safeguard his science from suggestion by asserting their antithetical characters, in his writings on analytic technique after 1912 his rhetorical strategy underwent a radical transmutation, one best conveyed by his disarming admission that the analyst's influence rests “essentially on transference—that is, on suggestion.” Psychoanalysis was the “legitimate heir” of the work of the hypnotists, in Freud's view: “it must dawn on us,” he wrote in the preceding lecture, “that in our technique we have abandoned hypnosis only to rediscover suggestion in the shape of transference.”<sup>53</sup> The “extraordinary increase of this universal characteristic” in neurotics—their suggestibility and tendency to transference—was critical to the therapeutic efficacy of analytic therapy. While the patient was herself responsible for overcoming the psychic resistances, the analyst offered vital assistance in this process through “suggestion operating in

---

<sup>51</sup> Freud, “Vorlesungen,” 469.

<sup>52</sup> *Ibid.*, 453, 469, original emphasis.

<sup>53</sup> *Ibid.*, 466, 482. See also Sigmund Freud, “Zur Dynamik der Übertragung” (1912), in *GW*, 8: 364–74, at 371–2.

an *educative* sense”; that is, as a means of drawing the patient’s attention back repeatedly to the force of the transference in the analytic encounter.<sup>54</sup>

Analytic therapy thus moved in another direction simultaneously—where treatment by direct suggestion left the authority of the doctor intact and inviolate, psychoanalysis turned its attention towards “the nature and origin of one’s authority in suggestive treatment.” Analytic treatment progressed through the continual resolution of the transference, and it was this characteristic, Freud argued, which was “the fundamental distinction between analytic and purely suggestive therapy.” While all other modes of suggestive treatment left the transference “carefully preserved” and “untouched,” in analysis “it is itself subject to treatment and is dissected in all the shapes in which it appears.” Analysis culminated not with the erection of a new repression but with the clearing away of the transference and an internal change marked by the enlargement of the patient’s ego through the overcoming of the resistances and the restoration of her “mental unity.”<sup>55</sup> With the dissolution of the transference the libido that had converged on the analyst was handed back to the patient’s ego. The aim of analysis (“the sole task of our therapy”), Freud explained, consisted in bringing the contending forces within the psyche onto the same ground; that is, into consciousness, in order to enable the patient to decide how to resolve her conflicts. Consistent with the self-undermining nature of the analyst’s authority, Freud maintained that analysts should avoid playing the role of mentor and refrain from interfering in the life decisions of their analysands. Regardless of how the patient chose to resolve his conflicts, “we feel our conscience clear,” Freud contended; “We tell ourselves that anyone who has succeeded in educating himself to the truth about himself is permanently defended against the danger of immorality.”<sup>56</sup>

More than faith in the ethical value of self-knowledge was implicit in Freud’s remark, however; rather his confidence rested on a number of assumptions regarding the ethical and intellectual character of his patients. “*Only* in the case of some very youthful or quite helpless or unstable individuals are we unable to put the desired limitation of our role into effect,” Freud argued; “with them we have to combine the functions of a doctor and an educator.”<sup>57</sup> If an educational capacity inevitably devolved on the analyst within the transference, it was one that operated within strict limitations and was to eventually make way for the free

---

<sup>54</sup> Freud, “Vorlesungen,” 464, 469, original emphasis.

<sup>55</sup> *Ibid.*, 468, 471, 473.

<sup>56</sup> *Ibid.*, 450.

<sup>57</sup> The quote continues, “but when this is so we are quite conscious of our responsibility and behave with the necessary caution.” *Ibid.*, 450, added emphasis.



decision of the patient herself.<sup>58</sup> Against the rival therapeutic models of former adherents, now dissidents, Carl Jung and Alfred Adler, Freud and his closest followers upheld a liberal conception of analysis, one that eschewed the aim of ethical elevation and renounced any responsibility for directing the future course of the patient's life. Far from enacting a radical transformation of the patient's character, analysis simply enabled him to become "what he might have become at best under the most favorable conditions."<sup>59</sup> The self-imposed limitations of the analyst's role reflected a fundamental respect for the unique individuality of the patient, which analysis sought not to modify but rather to restore to the patient in its fullness.

### FORMING A CLASS BODY FOR PSYCHOANALYSIS

For all the liberality of Freud's conception of his therapeutic procedure, the conviction that one's patients were endowed with personalities worth preserving and restoring bore the marks of a class-bound paradigm and the traces of a prior exclusion. The technique that Freud developed over the preceding decades not only emerged out of a particular social matrix—"an educated [*gebildeten*] and literate social class"<sup>60</sup>—but also encountered its own limits at the margins of this social strata: "One should not overlook the value of the individual beyond the illness," Freud contended, "and should refuse patients who do not possess a certain level of education [*Bildungsgrad*] and a fairly reliable character." Not only were candidates for analytic therapy to be sufficiently educated, reliable, and valuable ("it is gratifying that precisely the most valuable and otherwise highly developed persons are best suited for this procedure"), but also Freud placed particular emphasis on their autonomy: "It is also not applicable to people who do not *themselves* feel impelled to seek treatment by their suffering."<sup>61</sup> For all the suggestibility of neurotics, a degree of independence—itself a reflection of their *Bildungsgrad* and ethical character—appeared nonetheless to be an essential condition for analytic therapy.

The independence and intellectual maturity that Freud identified in his patients were instrumental to his abandonment of hypnotic suggestion in

<sup>58</sup> See Sigmund Freud, "Ratschläge für den Arzt bei der psychoanalytischen Behandlung" (1912), in *GW*, 8: 376–87, at 385.

<sup>59</sup> Freud, "Vorlesungen," 452.

<sup>60</sup> Sigmund Freud, "Studien über Hysterie: Vorwort zur ersten Auflage" (1895), in *GW*, 1: 75–312, at 77.

<sup>61</sup> Freud, "Über Psychotherapie," 20–24, translations modified, added emphasis. See also Sigmund Freud, "Die Sexualität in der Ätiologie der Neurosen" (1898), in *GW*, 1: 491–516, at 513–14.

the early 1890s. Having learned the technique from pioneering hypnotists in France who applied it with rote repetition to members of the lower classes, Freud's attempt to transplant the hypnotic method to the world of the educated bourgeoisie in which he established his practice faltered on the fundamentally different relations of authority and submission that obtained within it: as Freud moved from a scenario in which treatment was a public display of the doctor's authority over members of the lower classes, socialized, as they were, to respond with gratitude and deference to experts who helped them for free, to the world of Viennese *Bildungsbürgertum*, the rudiments of this hypnotic contract broke down.<sup>62</sup> The complications introduced into the hypnotic relationship by these new social dynamics undermined the hierarchical relations and the asymmetrical distribution of authority on which the French hypnotists had relied. In place of a technique that proved wholly inadequate among a bourgeois clientele, Freud was drawn into an intensive and highly intricate relationship with his patients, and one that rested on their shared social and cultural background. "It was his patients' *Bildung*," José Brunner argues, "which enabled them to enter into a complex and reflexive dialogue with him, which, in turn, led him to inquire into the sources of their illness." The "confidential alliance" of analytic therapy was soldered with the cultural capital of *Bildung*.<sup>63</sup>

Beyond the unreliability of its therapeutic effects, the suggestive technique appeared to Freud to be a form of degrading servitude and mental bondage, one that was undoubtably all the more troubling when applied to the "valuable" individuals of his own class.<sup>64</sup> Far from requiring subordination, analysis entailed the conversion of the patient "into a collaborator" and thus presupposed a degree of intellectual interest.<sup>65</sup> The ethical and cultural criteria that made analytic therapy possible, that enabled Freud to see his patients as potential collaborators—rather than simply deviants, malingerers, or resisters—reflected, in turn, the very form of psychic health it aimed to inculcate. As Sarah Winter has argued, the deepening of self-knowledge, the awakening of a consciousness of universality, and the internal unification of the personality that Freud claimed for analytic therapy marked it as a continuation of a process of inward cultivation (*Bildung*) that distinguished the members of his class from the masses.<sup>66</sup> By framing analytic therapy in a manner consonant with *Bildung*, a cultural achievement that presupposed a reliable fundament of *Erziehung*, Freud was

<sup>62</sup> Brunner, *Freud and the Politics of Psychoanalysis*, 97–100.

<sup>63</sup> *Ibid.*, 99.

<sup>64</sup> On Freud's hostility to the tyranny of suggestion see Sigmund Freud, "Massenpsychologie und Ich-Analyse" (1921), in *GW*, 13: 73–161, at 96–7.

<sup>65</sup> Freud, "Studien über Hysterie," 282.

<sup>66</sup> Winter, *Freud and the Institution of Psychoanalytic Knowledge*, 40–47.

able to disclaim any strong formative, pedagogical role for analysis, since, like *Bildung*, it entailed not the formation but the full, self-conscious realization of the personality in question. “Through *Bildung*,” Winter argues, drawing from Georg Simmel, “the subject should ‘recognize’ as internal, ‘instinctual,’ and the ‘prefiguration’ (destiny) of its ‘perfection’ the ‘cultural values’ that in fact have produced the form of subjectivity under ‘cultivation.’”<sup>67</sup> If a certain circularity thus defined the instantiation of *Bildung* in analytic therapy, the very factors that inscribed psychoanalysis within a socially reproductive regime simultaneously fashioned the lineaments of a mutual recognition that bound analyst and patient across the alienating manifestation of the neurosis.

The recognition that Freud extended to his patients went beyond even a shared adherence to the cultural and ethical ideal of *Bildung*, however. The fact that it was precisely the “most valuable and highly developed” individuals who were the most suitable candidates for analytic therapy disclosed a darker side to the formative processes that united analyst and patient. If his patients approximated paragons of *Bildung*, they were simultaneously victims of *Erziehung* and thus of *Kultur*. “Nowhere else have civilization and education done so much harm” as in the sexual lives of neurotics, he wrote in 1905.<sup>68</sup> If their subjection to what Freud termed “civilized sexual morality” united analyst and patient, it also served to distinguish both from the lower social orders: where the conflict-ridden development of the bourgeois individual offered fertile ground for psychoneuroses, the animal-like sexual unfolding that, in Freud’s eyes, characterized the development of the proletarian subject had the opposite effect of rendering her immune to neurotic conflict.<sup>69</sup> The excessive curtailments imposed by a culture from which the lower strata were apparently exempt defined the ethical value of the individuals analytic therapy was intended for. If Freud was sanguine about allowing his patients to decide their lives for themselves after undergoing analysis, it was in large part because of the fundament of *Erziehung* that paradoxically lay at the root of their problems. Underneath the disturbing difference of neurosis thus rested a reassuring promise of sameness furnished by the very cause of their suffering. Along with many others, the assumption of identity between analysts and their patients, one furnished by common formative experiences and cultural ideals, was fundamentally shaken by the impact of the war.

<sup>67</sup> Ibid., 46.

<sup>68</sup> Freud, “Über Psychotherapie,” 25.

<sup>69</sup> See Sigmund Freud, “Die ‘kulturelle’ Sexualmoral und die moderne Nervösität” (1908), in *GW*, 7: 143–67; Freud, “Zur Ätiologie der Hysterie” (1896), in *GW*, 1: 429–59, at 443, 448; and Freud, “Vorlesungen,” 365–7.

## THE WAYS AND MEANS OF PSYCHOANALYSIS

As they turned their attention to the disorders produced by the war, Freudians were thus confronted by precisely the forms of suffering and the classes of sufferers whose exclusion had played such a formative role in the development and self-articulation of psychoanalysis as a therapeutic practice. Not only did the makeup of the mass conscript armies mean that the overwhelming majority of war neurotics were of lower-class origin, but also, as a category, the war neuroses were identified with the crasser and more debilitating symptoms exhibited by rank-and-file soldiers against the more diffuse nervous disorders that prevailed among the officer class. If previously psychoanalysis had sought validation in its patients' independence, the neurotics it treated in the context of the war effort were anything but. And while prewar analysis had—*ideally*, if not always in practice—restricted its therapeutic efforts to patients who *chose* to undertake analysis and had sought to enable the patient to make an independent decision, the treatment of the war neuroses inverted these classical principles and thus overturned the therapeutic politics of psychoanalysis. The symptoms that in more civil times had destroyed the patient's happiness now represented salvation in the form of an escape from the war, while a restoration of psychic health posed a life-threatening danger. The war thus not only curtailed the patient's incentive to return to health but also forced the analyst into a more authoritarian role. In so far as psychoanalysts addressed the new disorders, the war inevitably converted them from theoretically passive figures (the blank screens for the analysand's transferences) into the concrete representative of the very reality that had produced their neuroses, while simultaneously perverting the analytic contract by depriving the patient of the freedom to decide his future.

The war thus presented Freud with the daunting task of drawing up a new analytic contract. Beginning his address on a modest note he acknowledged that we have always been ready "to admit the imperfections of our understanding, to learn new things and to alter our methods in any way that can improve them." After "the long and difficult years of separation," Freud felt drawn to review "the position of our therapeutic procedure" and to survey "the new directions in which it may develop." Against the demands of critics that psychoanalysis should supplement its analytical work of separating mental manifestations into their constituent elements with the synthetic task of combining them into new and better unities, Freud argued that such tasks should be left to the mind itself. Far from destroying the patient's mental unity, analysis was confronted by patients whose minds were already fissured by resistances. Through analyzing the patient's torn mental life and removing the resistances, analytic therapy enabled the mind's own "compulsion towards

unification and combination” to assert itself through the reintegration of split-off elements.<sup>70</sup>

While Freud understood analysis as merely creating the conditions for a renewed psychological synthesis that unfolded during treatment “without our intervention, automatically and inevitably,” the lines of development along which he envisioned analytic therapy proceeding were first and foremost ones that he subsumed—in an echo of the discourse surrounding the treatment of the war neuroses—under the heading of the “activity” of the analyst. If the essential work of analysis consisted in the tasks of “making conscious the repressed material and uncovering the resistances,” then the pressing question was, could the analyst offer the patient any assistance “besides the stimulus he gets from the transference?” That the analyst should not hesitate to intervene in the patient’s life in order to ensure a combination of external circumstances conducive to the resolution of conflicts in analysis was a notion that Freud found “unobjectionable and entirely justified.” Yet the fundamental principle that he enunciated and which he believed would “dominate our work in this field” was strictly negative: “*Analytic treatment should be carried through, as far as possible, under privation—in a state of abstinence.*” Since every improvement in the patient’s condition reduced the instinctual force impelling him towards recovery, “cruel as it may sound” it was important that the patient’s suffering not be allowed to find a premature end. The activity of the doctor consisted in this regard in an “energetic opposition to (*Einschreiten gegen*) premature substitutive satisfactions.” By attempting to make the patient’s condition as pleasant as possible, the overly accommodating analyst merely furnished him with another refuge and failed to “give him more strength for facing life and more capacity for carrying out his actual tasks in it.” In language that must have resonated with the military authorities in attendance, Freud averred, “in analytic treatment all such spoiling must be avoided.”<sup>71</sup>

Yet analytic therapy did not only impose a condition of abstinence on the patient but demanded self-denial from the analyst as well. This other direction of analytic activity—the forbearance of the analyst—had already surfaced as a point of contention between Freudians and the followers of Carl Jung at the time of the prewar splits in the movement. The Freudian analyst, in contrast to the Jungian, resolutely resisted the temptation to occupy the position of a guide or model for the patient: “We refused most emphatically to turn a patient who puts himself into our hands in search of help into our private property, to decide his fate for him, to force our own ideals upon him, and with the pride of a Creator to form him in our own image and see that it is good.” Insisting that he still adhered to this refusal, Freud contended that such a “far-reaching activity towards the

<sup>70</sup> Freud, “Wege,” 184–6.

<sup>71</sup> *Ibid.*, 185–9, original emphasis.

patient is not in the least necessary for therapeutic purposes.” Reaffirming the liberal principles of analysis he continued, “I have been able to help people with whom I had nothing in common—neither race, education, social position nor outlook upon life in general—without affecting their individuality.”

Even as the liberality of Freud’s position overrode and effaced the social limits to analytic therapy that he had drawn in 1905, it was checked from within. Recalling his own reservations at the time of the dispute with the Swiss Jungians regarding the “harsh and uncompromising” objections of “our spokesmen,” he claimed that psychoanalysis cannot avoid taking on some patients “who are so helpless and incapable of ordinary life [*haltlos und existenzunfähig*] that for them one has to combine analytic with educative [*erzieherische*] influence.” “*Even with the majority,*” he continued, “occasions now and then arise in which the physician is bound to take up the position of teacher and mentor [*Erzieher und Ratgeber*].”<sup>72</sup> While he insisted that such roles should only be assumed with the utmost caution, Freud’s contention amounted to a reversal of the stance he maintained just two years prior when he contended that only in a minority of cases was such far-reaching exercise of authority indicated. “One must proceed differently,” Freud argued, as he turned to examples of neurotic disorders that “have made it necessary for us to go beyond our former limits.” In the severer cases of both phobias and obsessional behavior an “attitude of passive waiting” promised to achieve little; rather the analyst was compelled to intervene, suggesting certain behaviors and forbidding others. Even if the aim of analysis remained that of enabling the patient “to liberate and fulfill his own nature,” realizing that possibility appeared to require the analyst to exercise a new, *erzieherisch* authority.<sup>73</sup>

In the “glance at a situation that belongs to the future” with which he concluded his address, Freud directed his attention towards a different set of limitations that constrained analysis. “You know that our therapeutic activities are not very far-reaching . . . Compared to the vast amount of neurotic misery which there is in the world” the quantity that psychoanalysts could address was “almost negligible,” he acknowledged. Limited by the “necessities of our existence” to the “well-to-do-classes,” psychoanalysts, “at present,” could “do nothing for the wider social strata, who suffer extremely seriously from neuroses,” he conceded. The fact that the social strata whose psychosexual development had earlier seemed so unburdened by psychic conflict now appeared to be especially vulnerable, a veritable reservoir of “neurotic misery,” prompted a new departure. Freud asked his audience to envision the creation of “some kind of organization” that would

<sup>72</sup> Ibid., 190, added emphasis.

<sup>73</sup> Ibid., 191–92: “. . . der Kranke soll nicht zur Ähnlichkeit mit uns sondern zur Befreiung und Vollendung seines eigenen Wesens erzogen werden.”

increase their numbers and enable them to treat a “considerable mass of the population.” Fantastic as this vision might sound,

it is possible to foresee that at some time or other the conscience of society will awake and remind it that the poor man should have just as much right to assistance for his mind as he now has to the life-saving help offered by surgery; and that the neuroses threaten the health of the nation [*Volksgesundheit*] no less than tuberculosis, and can be left as little as the latter to the impotent care of individual members of the community. When this happens, institutions or outpatient clinics will be started, to which analytically trained physicians will be appointed, so that men who would otherwise give way to drink, women who have nearly succumbed under the burden of their privations, children for whom there is no choice but between running wild or neurosis, may be made capable, by analysis, of resistance and of efficient work [*widerstands- und leistungsfähig*].

Treatment in these institutions would be free of charge, Freud added. While he acknowledged that it may be a long time before the state comes to recognize the urgency of these duties and that “present conditions may delay its arrival even longer,” “some time or other,” he maintained, “it must come to this.”<sup>74</sup>

As Suzanne Stewart-Steinberg has noted, a peculiar ambiguity haunts the use of the “resistance” (*Widerstand*) in Freud’s address. At the beginning of the speech, “resistance” “bears its ‘proper’ psychoanalytic meaning,” she writes, in that it denotes a psychic force that “lays itself in the way *against* knowledge of the unconscious” and must “for that reason . . . be combated with all the therapeutic means at the disposal of psychoanalysis.” Yet by the end of his address, “resistance” “has migrated elsewhere, to another and indeed wider social stage: resistance now fights the same battles of psychoanalysis against mass neurosis” and to that end has come to speak “the language of freedom.”<sup>75</sup> While Freud’s remarks were not the first instance of his pointing to a capacity to resist as an essential condition for psychic health, the prominence it now assumed as an aim of analytic therapy signaled a dramatic shift.<sup>76</sup> The neurotics this organization would treat were subjects whose suffering unfolded not in the private, interior spaces of the bourgeois home, but on a “wider social stage,” in close proximity to the brutal social conditions that generated them. As a consequence, the “capacity to resist” took on an additional dimension: where earlier it had signified an ability to effectively oppose the claims of the libido (together with the enlightenment offered by analysis), now, in the context of the war neuroses and endemic social deterioration, it denoted a capacity to withstand the pathogenic force of external circumstances. In the new context the first task of analytic therapy would be to

<sup>74</sup> Freud, “Wege,” 192–3, translation modified.

<sup>75</sup> Suzanne Stewart-Steinberg, *Impious Fidelity: Anna Freud, Psychoanalysis, Politics* (Ithaca, 2011), 27.

<sup>76</sup> For this earlier use of *Widerstandsfähigkeit* see Freud, “Vorlesungen,” 389.

reinforce the fragile borders of the psyche against the violence that threatened to overwhelm it entirely.

Yet Freud's remarks disclose another paradox beyond the shifting significations of the term "resistance." The recognition of mass neurotic misery that pushed him to champion the right of those without means to psychotherapeutic treatment and to envision an organization capable of treating masses of neurotics was closely bound up with a recognition of their deleterious impact on social stability. This new perspective altered the status of the neuroses that psychoanalysis addressed itself to—from having been the personal, private afflictions of "valuable" individuals, neuroses now figured as the collective manifestations of a general social pathology. The right of the poor man to assistance for his mind—a right that derived from the brutality of the conditions that generated his suffering—was supplemented *but also challenged* by a concern for the health of the social whole, which was jeopardized by the pathogenic forces in the individual psyche. The victims of the endemic social disorder were no less the subjects responsible for perpetuating the same pathogenic conditions—in the very act of being drawn out of the private sphere, neuroses assumed a threatening guise. With the emergence of this new perspective, the recognition that social forces had caused unprecedented misery came up against the claims of society itself as neurotics were effectively re-diagnosed as deviants whose illnesses posed a threat to the *Volksgesundheit*.

Just as an alteration of the classical psychoanalytic perspective on the neuroses is evident in Freud's address, a new understanding of the social role of analytic therapy is equally apparent: the identification of the analyst with the vulnerable ego in the overwhelming context of the war appeared to go hand in hand with a deepening professional identification with the very social authorities the ego represented within the psyche. In the treatment of the war neuroses and in Freud's address to the congress, psychoanalysts now represented the claims of a social and political order vis-à-vis the neurotics they treated—or, in Freud's case, proposed to treat. Instead of framing his address as a contribution to a given sociopolitical order, to a state and society at war, however, Freud shifted the focus to the coming era of peace and the challenges of reconstruction. The war represented merely an obstacle to the far-reaching reforms he envisioned and a major source of the neurotic misery he sought to redress. Yet even as he eschewed any and all forms of violence in the treatment ("in my opinion," he wrote in response to one proposed revision, "this is after all only to use violence, even though it is overlaid with the most honorable motives"<sup>77</sup>), the war appeared to lend analytic therapy a sterner countenance. In warning against the dangers of spoiling neurotics, in contending

---

<sup>77</sup> Freud, "Wege," 191.



that the tasks of a mass analytic therapy should be to equip the subject with a capacity to resist and work efficiently (as opposed to the earlier aim of restoring the patient's capacity to love and enjoy), and in casting the neuroses as a danger to the health of the *Volks*, Freud's address appeared to open onto the possibility of a socially disciplinary analytic therapy.

A similar paradox haunts the final paragraph of Freud's address in which he turns to the task of "adapting our technique to the new circumstances." "I have no doubt that the validity of our psychological assumptions will make its impression on the uneducated too," he averred, "but we shall need to look for the simplest and most easily intelligible ways of expressing our theoretical doctrines." Freud found it probable that the poor would prove even less willing to dispense with their neuroses than the rich, since the "hard life that awaits them if they recover offers them no attraction," whereas illness "gives them one more claim to social help." If such an insight made the coupling of "some material support" with mental assistance appear necessary, it also indicated the need for more authoritarian therapeutic methods: "It is very probable, too, that the large-scale application of our therapy will compel us to alloy the pure gold of analysis freely with the copper of direct suggestion." Hypnotic influence might also find a place in it again, "as it has in the treatment of war neuroses," he acknowledged. In a final turn, however, Freud reassured his listeners that whatever form this psychotherapy were to assume, "its most effective and most important ingredients will assuredly remain those borrowed from strict and untendentious psychoanalysis."<sup>78</sup>

By altering psychoanalysis in the very moment he proposed to extend its benefits to the socially disadvantaged, Freud was implicitly reaffirming the assumptions he had made explicit in 1905—in particular, that pure psychoanalysis was suitable only for a subset of valuable individuals. As Sarah Winter has argued, the "intensive working through of a particular life story" in analysis was not just a luxury available only to the privileged classes but one that "reconstitutes and confirms the value of such clients' 'individuality' and thus ideologically reinforces the patient's superior social position." It is this dimension of individual distinctiveness, Winter argues, that sets the *Bildungsbürgertum* off from the masses, for Freud. Lacking the "psychological 'integrity'" and the depth of feeling of members of the middle classes, the "common people" . . . do not qualify as individuals." Their identity, instead of being determined by unique formative experiences and rooted in a dimension of interiority, is merely a reflection of their position in the social order, a "communal," not a personal, identity, Winter writes. While "Freud's proposal to extend analysis to the poor seems to grant

---

<sup>78</sup> Ibid., 193–4.

them a version of this middle-class individuality as well,” it is clearly a truncated individuality, a fact made evident by the modified technique their treatment required.<sup>79</sup>

Yet if Freud’s address reaffirmed the ideological bases of classical psychoanalysis, it also registered the powerful sociopolitical forces that were transforming the context in which analytic therapy worked. The entire ground upon which the social categories of classical psychoanalysis rested was shifting, and the reverberations of this movement could be felt throughout Freud’s address. The “‘natural,’ undifferentiated, species-level existence” that, as Winter writes, characterized the life of members of the lower classes for Freud appeared increasingly to be becoming a general social reality over the course of the war.<sup>80</sup> Just as the individual psychological integrity that was held to separate the bourgeois subject from the proletariat had proven deeply vulnerable to the mass enthusiasm that marked the outbreak of the war, the material security that distinguished the *Bürgertum* from the masses was eroded over the following years by the dire material shortages and the inexorable inflation the war produced. As they watched the inflation steadily eat away at their savings and salaries and struggled to find adequate food and fuel, members of the *gebildete* social class from which classical analysis emerged were gripped by a fear that they were being reduced to the ranks of the proletariat. In such a conjuncture the metaphor of currency devaluation that Freud chose to describe the alteration of analytic technique spoke as much to the material concerns and status anxieties of a middle class whose livelihoods were especially vulnerable to inflation as it did to the persistence and stability of the hierarchies of value underpinning analytic therapy.

In the context in which Freud spoke, a simple recapitulation and reaffirmation of the ideological presuppositions of classical psychoanalysis would thus have been untenable. With return outside the realm of possibility, the only viable alternative was for the class bases of psychoanalysis to be renegotiated, a process Freud undertook through a reflective mediation between classical analysis and the new “active” methods he proposed. At the heart of his address was the recognition—or perhaps merely an admission—that classical analysis had, in fact, *never* fully adhered to its stipulated limits and that the “pure gold” of analysis had rarely, if ever, gone unsupplemented by the more authoritarian measures that would make their full emergence in the institutions Freud envisioned. If Freud’s address offered his most emphatic articulation of the ideal of classical analysis and the limits that defined it, it did so precisely as a defense *against* the active measures he anticipated—as a means, that is, of containing and countering the

---

<sup>79</sup> Winter, *Freud and the Institution of Psychoanalysis*, 144–5.

<sup>80</sup> *Ibid.*, 144.

unsettling implications of his own proposal. In the context of Freud's mediation, the exceptional figure of the "helpless" neurotic "incapable of ordinary life" represented simultaneously a new norm and a *Grenzgänger*, a border crosser, one that by traversing the threshold between *Analyse* and *Erziehung* tied the untethered model of "pure" psychoanalysis to the vision that Freud proposed for an expanded analytic therapy and thus bound the social representatives of the two models of therapeutic technique, the *Bürgertum* and the proletariat. The compromise that Freud fashioned between these two classes—classes that had formerly seemed so alien to one another and yet now appeared to be merging in the impoverished, emaciated body of the *Volk*—was one that attempted to reconcile the antitheses of suggestion and liberation through a new mediation centered on *Erziehung*. As "resistance" came to speak "the language of freedom," in Stewart-Steinberg's words, "the paths of psychoanalytic therapy" appeared to converge upon the formative process responsible for the instauration of a "capacity to resist"—that is, upon *Erziehung*.

The new prominence of *Erziehung* in the postclassical model of analytic therapy that Freud offered was thus inseparable from the collapse of the ideal of the *gebildete* individual whose reliable, valuable, and independent character psychoanalysis had previously viewed as essential to its operations. *Bildung* in this catastrophic moment would come to appear less a material reality instantiated by a given social group than an ideal suspended over a volatile mass—it represented the all too distant and perhaps unrecoverable patrimony of a bourgeois age on the cusp of an era that promised to be radically different. Loosened from its social moorings the ideal of *Bildung* and of *gebildete* subjectivity became theoretically available to all, albeit in the corrupted form offered by the modified analytic therapy that Freud envisioned. As the social bearers of the ideal of *Bildung* appeared to be rapidly and irresistibly sinking into the anonymous collective, the analyst's function as *Erzieher* became more pronounced. Through an *erzieherisch* analytic therapy, Freud hoped that analysis could contribute to stemming the psychosocial deterioration produced in the crucible of total war by equipping the subject with a greater capacity for resistance. The war, by unleashing this deterioration and by raising the specter of an even more catastrophic regression, had transformed *Erziehung* into an existential necessity.

## BEYOND THE CLASSICAL PARADIGM

"In the years before the war," Freud wrote at the end of the *Introductory Lectures*, "when arrivals from many foreign countries made me independent of the favor or disfavor of my own city, I followed a rule of not taking on a patient for treatment unless he was *sui juris*, not dependent on anyone else in the

essential relations of his life.”<sup>81</sup> Beneath the elegiac sense of loss that pervades his words, a new and telling identification can be discerned: with the erosion of his personal independence and security, Freud was compelled to turn to subjects whose immaturity and dependence placed them outside the constitutive limits of orthodox analytic practice. If classical psychoanalysis had rested on a secure basis of bourgeois identification, the war had profoundly unsettled this foundation. By displacing Freud and his fellow *Bildungsbürger* into a new and threatening proximity to proletarian existence (“all one’s energy,” he wrote to Abraham, “is required to maintain one’s economic level”), the experience of the past four years compelled him to rethink the social politics of analytic therapy.<sup>82</sup>

The apparent disappearance of the autonomous bourgeois individual at the close of the war and the confrontation with new subjects and types of suffering exposed a gap at the heart of psychoanalytic practice, one that divided the norms that guided and legitimated analytic therapy from their application in real, concrete settings. Summoned in 1920 to provide expert testimony in an official enquiry into accusations of the abuse of war neurotics by military physicians, Freud would argue that an “insoluble conflict between the claims of humanity, which normally carry decisive weight for a physician, and the demands of a national war was bound to confuse [the physician’s] activity.”<sup>83</sup> In his 1918 address, Freud had attempted to resolve this confusion by mediating between the contradictory responsibilities shouldered by the physician in this new context. The specific tension he identified in his 1920 memorandum, however, was one that seemed to him in “Wege der psychoanalytischen Therapie” to reach back to prewar practice and simultaneously to extend forward into the future—to constitute, that is, something on the order of an aporetic knot at the heart of analytic therapy. In exposing the ideological character of classical psychoanalytic principles, the war laid bare what Freud would later describe as the “impossibility” of analytic therapy, a quality it shared with the professions of “governing” and “educating.”<sup>84</sup>

By forcing analysts to shoulder an authority that exceeded and transgressed classical principles, the war also gave rise to a new political consciousness within psychoanalytic practice. The crumbling of bourgeois society meant that simply enabling the patient to make a choice regarding his or her future, in the conviction that this decision would return him or her to a stable social order

---

<sup>81</sup> Freud, “Vorlesungen,” 480.

<sup>82</sup> Freud to Abraham, 1 Dec. 1919, in *Briefe*, 278.

<sup>83</sup> Sigmund Freud, “Gutachten über die elektrische Behandlung der Kriegsneurotiker” (1920), in *GW*, 18: 704–10, at 708–9.

<sup>84</sup> Sigmund Freud, “Geleitwort zu *Verwahrloste Jugend*” (1925), in *GW*, 14: 565–7; and Freud, “Die endliche und die unendliche Analyse” (1937), in *GW*, 16: 59–99, at 94.

(the world of satisfying responsibilities and responsible satisfactions), no longer made sense at the close of the war. Analytic therapy had to proceed differently and the analyst had to assume a more far-reaching authority, Freud contended in 1918. In terms that would reverberate throughout the debates surrounding psychoanalytic practice between the wars, Freud described this new authority as active and educational.<sup>85</sup> Formed around a rudimentary idea of social citizenship, in which new rights were balanced with heightened responsibilities towards the collective, Freud's postclassical model of analytic therapy departed markedly from orthodox technique. From a classical conception of analytic therapy formed around (and limited by) the principles of negative liberty and self-discipline, Freud shifted, if haltingly and ambivalently, in 1918, towards one premised on positive rights and social discipline—towards what might be called a social-democratic psychoanalysis.

Amid the chaotic aftermath of the conflict, however, anxiety and bitterness overwhelmed the optimism that marked Freud's 1918 address. In a statement from the same letter with which this essay opened, Freud wrote Ferenczi, "No sooner does [psychoanalysis] begin to interest the world on account of the war neuroses than the war ends . . . Our kingdom is indeed not of this world."<sup>86</sup> Far from retreating from the world in the face of these disappointments, however, the psychoanalytic movement experienced a "second birth" in the wake of the war.<sup>87</sup> Galvanized by Freud's call for a progressive psychoanalysis capable of embracing the masses, a younger, more politically radical generation of analysts would emerge over the following years. With the establishment, over the same period, of a series of psychoanalytic polyclinics intended to provide free treatment along the lines that Freud had envisioned in 1918 (as well as training material for aspiring analysts), the postwar years witnessed the professional breakthrough that the war had failed to yield. In 1923, in a preface to a report by Max Eitingon on the first three years of the Berlin Psycho-analytic Polyclinic, Freud wrote,

If psychoanalysis, alongside its scientific significance, has a value as a therapeutic procedure, if it is capable of giving help to sufferers in their struggle to fulfill the demands of civilization, this help should be accessible as well to the great multitude who are too poor themselves to repay an analyst for his laborious work. This seems to be a social necessity particularly in our times, when the intellectual strata of the population, which are especially prone to neurosis, are sinking irresistibly into poverty.<sup>88</sup>

<sup>85</sup> Notably an "enthusiasm for *Erziehung*," in Dickinson's words, extended well beyond the ranks of psychoanalysts at this moment. Edward Ross Dickinson, *The Politics of German Child Welfare: From the Empire to the Federal Republic* (Cambridge, 1996), 125.

<sup>86</sup> Freud to Ferenczi, 17 Nov. 1918, in *Sigmund Freud—Sándor Ferenczi: Briefwechsel*, 186.

<sup>87</sup> Karl Fallend, *Wilhelm Reich in Wien: Psychoanalyse und Politik* (Vienna, 1988), 37.

<sup>88</sup> Sigmund Freud, "Vorwort" (1923), in *GW*, 13: 441.

If his remarks seemed to signal a partial return to the assumption that the neuroses were the particular affliction of the educated classes, the same strata appeared still at risk of disappearing into the masses. No less significant was the fact that the “demands of civilization” that individual sufferers struggled to meet applied, for Freud, not only to this particularly vulnerable stratum but also to the “great multitude,” who were deserving of free treatment as if by virtue of the demands (now) placed upon them. Even if the accent seems to have reverted to its earlier exclusivist emphasis, Freud’s preface provided ample evidence that the lineaments of the class compromise he fashioned in 1918 were still largely intact.

In the new context that the war created, the struggle of the bourgeois individual under the demands of *Kultur* was shadowed by a more primitive threat—namely that posed by the intrusive, potentially overwhelming violence of external reality. In *Beyond the Pleasure Principle* (1920), the struggles of the vulnerable ego to manage the dangers impinging upon it from within and without would furnish the point of departure for a far-reaching revision of the psychoanalytic theory of the instincts, the organization of the psyche, and the formation of symptoms. If this altered perspective suggested a new task for the psychoanalyst—i.e. reinforcing the ego’s “capacity to resist”—it also opened new horizons for analytic therapy since the privileged objects of this modified psychoanalysis were the most exposed, powerless, and dependent. Confronting the new circumstances would require moving beyond the classical paradigm into the mass democratic era of the postwar.