American Handbook of Psychiatry

The Cognitive-Volitional School

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C. The Cognitive-Volitional School

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The neo-freudian schools headed by Sullivan, Fromm, and Horney have added dimensions to the original Freudian theory and have attempted to curtail the conceptions that have not passed the test of time. They have continued to ignore or minimize, however, some aspects of the psyche that may even be the most important at a human and social level of development. These are the aspects that enable man to be a symbolic animal and a center of will.

A stress on cognition and volition does not imply that affects are not major agents in human conflict and in conscious or unconscious motivation. It implies, however, that at a human level all feelings, except the most primitive, are consequent to *meaning* and *choice.* In their turn they generate new meanings and choices. Simple levels of physiopsychological organization, such as states of hunger, thirst, fatigue, need for sleep, and a certain degree of temperature, sexual urges, or relatively simple emotions, such as fear about one's physical survival, are powerful dynamic forces. They do not include,

however, the motivational factors that are possible only at higher levels of cognitive development.

Although motivation can be understood as a striving toward pleasure or avoidance of unpleasure, gratification of the self or the self- image (and not necessarily of one's instincts or biological needs) becomes the main motivational factor at a conceptual level of development. Concepts like inner worth, personal significance, mental outlook, appraisals reflected from others, attitudes toward ideals, aspirations, capacity to receive and give acceptance, affection, and love are integral parts of the self and of the self-image, together with the emotions that accompany these concepts. To think that these emotional factors, which are sustained by complicated cognitive processes, are only displacements or rationalizations that cover more primitive instinctual drives is a reductionistic point of view.

Moreover, feelings which theoretically stand on their own, become involved with symbolic processes, which give them special meaning and involve them in intricate networks of motivation. A typical example is sexual life, which obviously cannot be considered only from a sensuous or instinctive point of view. Sexual gratification or deprivation become involved with such concepts as being accepted or rejected, desirable or undesirable, loved or unloved, lovable or unlovable, capable or incapable, potent or impotent, normal or abnormal. Thus sexual gratification or deprivation become

phenomena that affect the whole self-image.

Conation (especially volition) has been almost completely ignored in psychoanalysis, and in the general field of psychology has been studied mainly from the point of view of a relatively small number of automatic or involuntary movements, human external behavior is preceded by conscious or unconscious cognitive processes and mechanisms of choice.

Undoubtedly the previous schools of psychoanalysis have dealt with cognitive and conative phenomena since it is impossible to explore the human mind without doing so. However, they have dealt with them reluctantly and inadequately. The Freudian school interprets any symbolic phenomenon as a derivative or substitute of instinctual drives. The cultural and interpersonal schools, which are more closely related to the cognitive-volitional approach, have rightly stressed that one becomes a person mainly by virtue of relations with other human beings and not predominantly by virtue of inborn instinctual drives. They do not indicate, however, the symbolic and volitional mechanisms by which relations with other human beings take place. They also do not indicate that the sequence of external influences is integrated by intrapsychic mechanisms, so that it becomes personal history and part of the inner self. In other words, they do not show how the external influences and the intrapsychic mechanisms by which these external influences are integrated become that part of the human psyche that in the various

terminologies has been called “inner life,” “psychic reality,” “intrapsychic self,” and the like.

The combination of all the conditions affecting the individual (biological, interpersonal, environmental, and sociocultural) confers a unique status on each person. However, according too the cognitive-volitional approach, individuality is not exclusively the algebraic sum of all the factors or exclusively an emerging new form resulting from a chance constellation of all the previous or present conditions. There is also a margin of autonomy, which, although small in an overwhelmingly deterministic world, confers a special status on the human condition. This element has to be taken into account; as a matter of fact, the main aim of mental health is to facilitate the increase of this margin.

Whereas Sullivan adheres to an operational point of view, a cognitive-volitional approach does not. Operationalism, according to its strongest exponent, Bridgman, advocates that “all concepts of which we cannot give an adequate account in terms of operations” no longer be used. Most of what originates in the inner life is thus debunked as nonoperational because it cannot be subjected to a set of operations or experiments that permit verification. Only what comes from the external environment can be operational, even if we embellish it with the word “interpersonal.” A purely operational frame of reference remains behavioristic and is forced to deny or

minimize the intrapsychic. It is doubtful that Sullivan, in his profound and insightful studies of schizophrenia, could confine himself to an operational level. Theoretically, however, the Sullivanian system is founded on conceptions deriving from English empiricism, American pragmatism, the teachings of the anthropologist Sapir, and of the social psychologist George Herbert Mead. On the other hand, the cognitive-volitional approach is related to conceptions deriving from Giambattista Vico, Immanuel Kant, Ernst Cassirer, and Susanne Langer. The cognitive-volitional approach retains the very important interpersonal dimension of the Sullivanian school, included, however, in the frame of reference of symbolism and choice derived from the just mentioned cultural influences.

Whereas some schools (behavioristic, behavior therapy, conditioned response, aversion therapy, and so forth) are interested in studying and altering man's behavior and capacity for adaptation, most psychoanalytic and psychotherapeutic schools are interested in studying and changing the inner self, even if it is more difficult to do so. The premise of psychoanalysis and psychodynamic psychotherapy is that if you change the inner self, sooner or later a change, and a more reliable one, will occur also in the external behavior and capacity for adaptation.

As Guntrip has pointed out, historically psychoanalysis is the first science to illustrate the existence of a psychic reality that is distinct from the

reality of the external world. It is one of Freud's great achievements to have demonstrated the existence of this psychic reality as an entity in its own right, an entity that is alterable, but at the same time highly resistant to change.

According to the cognitive-volitional school, inner life, or inner reality, may represent, substitute for, distort, enrich, or impoverish the reality of the external world. Although this inner reality, too, has constant exchanges with the environment, it has an enduring life of its own. It becomes the essence of the individual. Its organization is what we call the "inner self."

Inner reality is the result of a continuous re-elaboration of past and present experiences. Its development is never completed throughout the life of man, although its greatest rate of growth occurs in childhood and adolescence. It is based on the fact that perceptions, thoughts, feelings, actions, and other psychological functions do not cease completely to exist once the neuronal mechanisms that mediated their occurrence have taken place. Although they cannot be retained as they were experienced, their effects are retained as various components of the psyche. Freud wrote that in mental life nothing that has once been formed can perish.

From approximately the ninth month of life the child internalizes: he retains as inner objects mental representations of external objects, events, relations, and the feelings associated with these psychological events. Inner

objects acquire a relative independence from the correspondent external stimuli that elicited them. They progressively associate and organize in higher constructs. The integration of all these intrapersonal and interpersonal factors gives origin to a potentially infinite psychological universe, the universe of symbols. Merely from the point of view of survival, symbolic function is not so important as other physiological functions, for instance, hypothalamic regulation; but from the specific point of view of human psychology and psychopathology, it is much more important.

Some psychoanalytic schools have tried, although not very successfully, to include in their theories the psychodynamic and psycho-structural aspects of high symbolism. Melanie Klein, for instance, recognizes that internalized object relations become permanent features of inner life. For her, however, these mental incorporations correspond to oral incorporation. She sees the formation of the psyche in a theoretical framework that retains Freud's oral, anal, and genital stages. She believes that these stages unfold much earlier in life than Freud had postulated, and therefore even more than Freud she is compelled to neglect cognitive forms that develop after the first year of life. Klein repeatedly refers to unconscious fantasies but does not indicate the cognitive features or the media that sustain these fantasies. It is difficult to visualize how in the three-month-old baby they can consist of ideas, thoughts, images, feelings of hopelessness, feelings of abandonment, and so forth. Although Klein has correctly stressed the importance of man's inner world,

she has been quite nebulous in her description of the structure and functioning of this inner world. Fairbairn, too, stressed the importance of the endopsychic structure and its relevance to object relations, but he did not examine the cognitive elements of this structure. The classic psychoanalytic school has studied internalization, but with a few recent exceptions it has studied them predominantly from the energetic or economic point of view.

Classic psychoanalysis has dealt with the highest levels of the psyche in its formulation of the ego and superego. The superego is seen as an institution that imposes renunciation by requesting a repression of instinctual life. This formulation does not require an inquiry into cognitive processes, which in Freudian theory are generally attributed to the ego. However, most ego psychologists follow the leadership of Hartmann, Kris, and Loewenstein, and Rapaport in considering these processes only as carriers of conflicts that originate elsewhere. As a matter of fact, these authors have called these cognitive functions autonomous and conflict-free areas and do not see them as sources of, or direct participants in, the conflict. For the cognitive school they are not conflict-free but active participants or generators of the conflict. Some may believe that the cognitive approach deals only with what in classic psychoanalysis pertains to the ego and superego and ignores the primitive or id psychology. This impression is incorrect. In the present frame of reference the Freudian id psychology is also seen as originated and mediated to a large extent by cognitive mechanisms. Contrary to the other neo-Freudian schools,

the cognitive approach does not reject the concept of the primary process, which is seen predominantly as a cognitive system operating according to *primary cognition.* I personally believe that without such a concept or equivalent ones it is impossible to explain the structure and meaning of dreams, psychoses, or any kind of severe pathology. Some theorists (especially those belonging to the self- actualization schools, such as Fromm, Rogers, Horney, and Maslow) do not include in their system anything pertaining to the primary process. Consequently their contributions, although offering numerous important insights about some aspects of man and about mild psychopathology, are of much less value in understanding severe psychopathology and dream work.

It is important at this point to mention two important psychologists whose works in the field of cognition are illustrated in other chapters of this volume: Jean Piaget and Heinz Werner. Piaget's contributions are very significant, but they have not received adequate consideration, mainly because they are difficult to integrate with a psychodynamic study of man. They neglect affect as much as classic psychoanalytic studies neglect cognition, and do not deal with motivation, unconscious processes, and conflicts of forces. They are more illustrations of a process of cognitive maturation and adaptation to environmental reality than a representation of intrapsychic life. The cognitive functions, as described by Piaget, seem really autonomous and conflict-free, as the ego psychologists have classified them.

In spite of this convergence of views, all attempts to absorb Piaget's contributions into classic psychoanalysis—including the attempt made by Odier—have failed. The only contributions of Piaget that could be reconciled with classic psychoanalysis are those he made very early in his career when he was still under the influence of the psychoanalytic school. For instance, his concept of the child's egocentrism is related to the psychoanalytic concept of the child's feeling of omnipotence.

Werner's contributions have been neglected more than Piaget's. And yet, perhaps even more than Piaget's, they are pertinent to psychiatric studies as they take into consideration pathological conditions. Like the works of Piaget they do not make significant use of the concepts of the unconscious, primary process, and motivation.

Contributions of Other Authors

An increasing number of psychoanalysts have made important contributions within the cognitive frame of reference. For lack of space I shall mention only three of them.

Expanding on the work of psychoanalytic writers such as Bibring, Rapaport, and Arieti, Aaron Beck has formulated a theory of cognition, affect, and psychopathology. The core of his theory is that the conceptualization of situations determines the individual's emotional responses. In

psychopathological syndromes these conceptualizations are frequently distorted and lead to the other symptoms that are characteristic of the disorders. Idiosyncratic cognitive schemas underlie the neurotic patient's systematic bias in interpreting and integrating his experiences.

The individual's appraisal of an event, and specifically of its effect on his personal domain, determines his emotional response. Particular cognitions are chained to particular affects. For example, an appraisal of loss leads to sadness, gain to euphoria, threat to anxiety. Anger is produced when an individual attributes causality for an event he perceives as both unpleasant and unjustified to an external object. Thus, if he perceives a criticism as unwarranted, he will respond with anger toward the offender. If he accepts the criticism and focuses on his own loss of self-worth, he is likely to experience sadness.

In psychopathological syndromes the patient interprets his environment in an idiosyncratic way. His interpretation is dominated by cognitive schemata or patterns, acquired developmentally, that are activated under conditions of stress. The schema give rise to cognitions that appear "automatic" and plausible to the patient, yet violate rules of logic and reality testing and resist change. The affects typical of psychopathological syndromes are based on these distorted cognitions. A "snowballing" effect may result when the affect is, in turn, interpreted according to the faulty cognitive

schema.

Psychopathological syndromes are each associated with a particular type of cognitive distortion. In depression the individual takes a negative view of his world, his future, and himself (the “cognitive triad”); his thinking centers around the theme of loss. The manic tends to perceive life experiences in terms of an appreciation of his domain. Anxiety is related to themes of personal danger, the anger of the paranoid to ideas of persecution or abuse, hysteria to ideas of somatic dysfunction. Phobias are characterized by an expectation of harm in specific situations. In Beck’s theory obsessions are seen as recurrent thoughts, compulsions as related self-commands.

Beck’s cognitive therapy comprises a wide range of techniques aimed at altering the idiosyncratic cognitive schema and cognitive distortions that underlie the overt symptom or behavior problem. The cognitive therapist trains the patient to recognize the idiosyncratic cognitions that intervene between an event and his affective reaction. He tries to achieve “distancing,” or a way of viewing events objectively, to prepare the patient to use rules of logic and reality testing, and to correct systematic errors such as arbitrary inference, overgeneralization, magnification, and cognitive deficiencies. Feedback from experimental work (Loeb, Beck, and Diggory) led Beck to introduce structured success experiences into the therapy of depressed patients.

Joseph Barnett maintains that the cognitive element is central to the understanding of the dynamics of the obsessional neuroses and of character in general. He proposed that the obsessional neuroses were rooted in a basic cognitive fault, contrary to the assumptions of most theories that fears of affect or instinctual drives are central to the pathology. For Barnett^ the basic problem of the obsessional is avoidance of knowing, or an abnormal need to maintain innocence. The ambiguity of the obsessional's early family experience creates severe damage to his self-esteem. His self-contempt dictates that he avoid knowing his impact on others or their impact on him in order to avoid the exposure he fears in the implications of his interactions. He "maintains innocence" with special cognitive processes described by Barnett. The obsessional's apparent emotional poverty is the result of "affective implosion," a mechanism in which affect is internally erupted in order to disintegrate inferential processes of thought that might organize those aspects of experience that would be threatening to self-esteem.

Later Barnett redefined cognition as a broad form of experiential knowing that included both thought and affect as parts of a continuum rather than as opposing functions. Character was defined in relation to characteristic modes of organizing experience on this continuum and according to the way affect and thought were integrated. Character pathology was then related to those extremes of explosion and implosion of affects that interfered with knowing and meaning in characteristic ways. Obsessional, hysteric, paranoid,

depressive, and impulsive character disorders were defined in relation to the cognitive dynamics.

According to Barnett, the obsessional's need to maintain innocence leads to pervasive feelings of shame and fears of exposure. His aggression, therefore, is most often covert. It is aggression by omission rather than by commission. The peculiar split dependency of the obsessional, in which he has been expected to perform in impersonal areas of living, leads to his performance orientation, which increases competitiveness and interpersonal hostility.

The characteristics of obsessional sexuality were similarly seen to derive from these cognitive dynamics. The primary symptom of obsessional sexuality is seen to be mechanization of sex. Competent and stereotyped, it is designed to avoid the exposure and interpersonal intimacy risked by spontaneity and freedom of expression. Shame and fears of exposure lead to a *secret life,* in which experiences involved in the patient's systems of innocence are kept encapsulated and isolated from his restricted cognitive functioning. The secret life exists in varying degrees of awareness and may be kept isolated in fantasy or acted out. Withholding and fears of exposure may lead to such symptoms as impotence, retarded orgasm, premature ejaculation, or compulsive genital activities. Most recently Barnett has formulated therapeutic techniques in the treatment of the obsessional that center around

the concept of cognitive repair.

Jules Bemporad has also studied depression from a predominantly cognitive point of view; that is, as a result of a false view of one's abilities as well as a false view of other people's expectancies and reactions. It is a reaction on the part of specific individuals to their conceptions of certain situations: loss, abandonment, continued pain, and so forth. Depression is based more on a cognitive view of the situation than on metapsychological events. In therapy the analyst must help the patient to alter his views.

In what follows I will present my own cognitive-volitional approach, borrowing from my previous writings.

The Primordial or Presymbolic Self

The primordial self is a human psyche that has not yet reached the symbolic-volitional level of development. It includes primitive feelings, learning directly associated with perceptual stimuli, and behavior that is automatic or consequent to simple conditioning without intermediary complex mechanisms. Most of these functions start at birth or in the first few months of life and persist throughout the life of the individual.

Feeling is a characteristic unique to the animal kingdom and is the basis of psychological life. Feeling is unanalyzable in its essential subjective nature

and defies any attempt toward a noncircular definition. Synonyms of "feeling" that are often used are "awareness," "subjectivity," "consciousness," "experience," "felt experience." Although each of these terms stresses a particular aspect, all refer to subjective experience.

Transmission of information from one part of the organism to another exists even without subjective experience. For instance, the important information transmitted through the spinocerebellar tracts never reaches the level of awareness. As long as information is transmitted without awareness, the organism is not too different from an electronic computer or a transmitter or transformer of data. When any change in the organism is accompanied by awareness, a new phenomenon emerges in the cosmos—experience. Awareness and experience introduced the factor psyche.

As Freud clarified, and as we shall consider later in this chapter, some psychological functions lose the quality of awareness and become unconscious. However, *if in phylogeny some functions had not become endowed with awareness, the psyche would not have emerged,* and the physiology of the nervous system would consist only of unconscious neurological functions.

The most primitive forms of felt experiences are simple sensations and perceptions such as pain, temperature, perception, hearing, vision, thirst,

hunger, olfaction, and taste. These sensations and perceptions can be considered in two main ways: (1) as subjective experiences that occur in the presence of particular somatic states, for instance, a specific state of discomfort that we call pain; (2) as functions mirroring (or producing analogs of) aspects of reality.

We encounter here a basic dichotomy. On one hand is the awareness of a particular state of the body or part of the body; that is, the awareness of an inner status of the organism, the experience as experience. On the other hand is the function of mirroring reality, a function that generally expands into numerous ramifications that deal with cognition. The importance of these two components varies a great deal in the various types of perceptions. The experience of inner status is very important in the perception of pain, hunger, thirst, temperature, and less important in other perceptions such as touch, taste, smell. In auditory and visual perceptions the experience of a change of inner status plays a minimal role. These perceptions make the animal aware of what happens in the external world and become the foundation of cognition.

Elsewhere I have described the various experiences of inner status (sensations, perceptions, physiosensations such as hunger, thirst, fatigue, sleepiness, sexual urges, other instinctual experiences) and how from all of them we can abstract feelings of pleasure and unpleasure. Motivation

becomes connected with the awareness of what is pleasant (and to be searched for) and what is unpleasant (and to be avoided).[1]

I have also tried to show how not only the simple experiences of inner status, such as sensations, but also all emotions or affects can be included in the category of feeling. They are experienced within the organism. They are felt experiences. From all of them the motivational characteristics of pleasure and unpleasure can be abstracted. It is not without reason that in English the word “feeling” has a connotation so vast as to include simple sensations as well as high-level affects.

Emotions can be divided into several ranks or categories. The simplest (protoemotions or first order emotions), which can occur already in the primordial self, are of at least five types: (1) tension, a feeling of discomfort caused by different situations such as excessive stimulation, hindered physiological or instinctual response; (2) appetite, a feeling of expectancy that accompanies a tendency to move toward, contact, grab, or incorporate an almost immediately attainable goal; (3) fear, an unpleasant, subjective state that follows the perception of danger and elicits a readiness to flee; (4) rage, an emotion that follows the perception of a danger to be overcome by fight, not flight; (5) satisfaction, an emotional state resulting from gratification of physical needs and relief from other emotions.

In a general sense we can say that protoemotions (1) are experiences of inner status that cannot be sharply localized and that involve the whole or a large part of the organism; (2) either include a set of bodily changes, mostly muscular and humoral, or retain some bodily characteristics; (3) are elicited by the presence or absence of specific stimuli that are perceived by the subject as related in a positive or negative way to its safety and comfort; (4) become important motivational factors and to a large extent determine the type of external behavior of the subject; (5) in order to be experienced require a minimum of cognitive work. For instance, in fear or rage a stimulus must be promptly recognized as a sign of present or imminant danger.

What we have described under the headings of simple sensations, physiological and instinctual functions, perception, nonsymbolic learning, and protoemotions enable the animal organism (human or infrahuman) to survive and adjust to the environment. The effect of all these functions tends to be immediate or almost immediate. If they unchain a delayed reaction, the delay ranges only from a fraction of a second to a few minutes. Protoemotions are not experienced immediately, as are such simple sensations as pain or thirst. They require some cognitive work. However, this cognitive work is presymbolic or, in some cases, symbolic to a rudimentary degree. Presymbolic cognition includes perception and simple learning, which have been intensely investigated by experimental psychologists. It also includes sensorimotor intelligence, which has been accurately studied by Piaget in the

first year and a half of life.

The motivational organization, based on the physiological, instinctual, or elementary emotional states we have mentioned, unchains in man, too, powerful dynamic forces, but it does not include all the psychological factors that affect him. Because of the impact of symbolic cognition, man's needs, desires, purposes, and conflicts go far beyond physiological-protoemotional motivation.

Most of the functions mentioned in this section do not lead to the formation of inner constructs unless associated with other psychological mechanisms. However, it would be inaccurate to state that they have no role in the making of inner reality. In the human being the memory and recall of these experiences become connected with higher level functions, especially after the acquisition of language. Feelings and protoemotions are also part of inner reality as long as they are experienced.

Protoemotions have even a greater role as potentialities in that they remain as affective or primary predispositions toward a given type of personality when they are not well balanced by other emotions. There are some human beings in whom fear (later changed into anxiety) is the predominant emotion. Depending on its interaction with other emotions and on the prevailing type of their interpersonal relations, these people eventually

may become detached (that is, prone to withdraw from frightening stimuli), compliant (prone to placate the source of fear), or simply remain anxious. People in whom rage prevails tend to become aggressive and hostile. People in whom appetite is the principal emotion tend to become hedonistic. When tension predominates, the individual is likely to be hypochondriacal and more interested in his body than in the external environment. When satisfaction is the principal protoemotion, the person's predominant outlook is conservative, centered on the status quo.

In the sphere of volition the primordial self remains at a rudimentary level. The subject (animal or infant) can direct his movements in goal-directed forms of behavior; possibly he has already many internal representations of actions (exocepts or engrams). However, he does not have the ability to choose. His behavior is determined by instincts, conditioned reflexes, operant conditioning, or equivalent mechanisms.

After the first year of life the mechanisms of the primordial self remain the prevailing ones only in the seriously mental defective. The normal child very soon in life shows precursors of the volitional faculty in his playful activity and his capacity to imitate. The inability to will makes the young child totally dependent on adults. It is not so in subhuman animals, although they remain at a pre-symbolic level even in their adult life. Comparative psychologists have reported that when animals are kept together in a certain

environment, some assume a dominant and some a submissive role. Presumably this role is determined by a preponderance of a protoemotion and by the learning of a type of behavior that fits the environmental circumstances. Among these environmental circumstances the type of behavior of the other animals and consequent interplay are very important. The preponderance of a protoemotion and of some kinds of presymbolic learning and ways of relating constitute the temperament.

For expository reasons we have so far made no reference to evolvement in time and to interpersonal relations. Actually the presymbolic stage of childhood can be divided into many substages. In the first six to eight weeks of life the infant is predominantly a bundle of proprioceptive and interoceptive sensations. Then he becomes more and more involved with sensory perceptions and the simplest forms of learning. First, the presence of the mother as the overpowering environmental object and, second, the development of locomotion help the little child to shift the focus of his awareness from his body to his immediate environment. The predominant figure in his environment is that of the mother (or mother substitute), with whom he establishes a *primary bond.* By this term I mean an elementary, all-embracing social relation that is sustained not by symbolism but by immediately given sensory and affective components.

Symbolic Cognition and Volition

The development of new psychological functions—imagery and language—change enormously the child's relation with his environment. Although at this level of maturation the cortical centers of language are ready to begin to function, it is necessary for the child to be in contact with a human environment to transform his babbling and environmental sounds and noises into meanings. He learns to connect them with things, events, or special states of the organism. That is why children who are deaf or without human contacts cannot learn symbolic processes in normal ways. Consensual validation, that is, the recognition that a given sound has the same or a related effect on the mother and on himself, is an absolute necessity to trigger off verbal symbolization in the child. When the function of language is chiefly denotative, consensual validation is easy; this is "daddi" and this is "mamme." From the very beginning, however, language goes beyond its purely denotative functions. In the course of evolving toward maturity, language and other symbolic functions can be classified as pertaining to three categories of cognition: primary, secondary, and tertiary.

The designations primary and secondary derive from Freud's original formulation of the primary and secondary processes in Chapter 7 of *The Interpretation of Dreams.* To quote Jones:

> Freud's revolutionary contribution to psychology was not so much his demonstrating the existence of an unconscious, and perhaps not even his exploration of its content, as his proposition that there are two fundamentally different kinds of mental processes, which he termed

primary and secondary. . . .

Freud gave the first description of these two processes, but tried to differentiate the particular laws or principles that rule the primary process only. He called the primary process primary because, according to him, it occurs earlier in the ontogenetic development and not because it is more important than the secondary process. Freud elucidated very well two mechanisms by which the primary process operates: namely, the mechanisms of displacement and of condensation. However, after this original breakthrough he did not make other significant discoveries in the field of cognition. This arrest of progress is to be attributed to several factors. First, Freud became particularly interested in the primary process as a carrier of unconscious motivation. Second, inasmuch as he interpreted motivation more and more in the function of the libido theory, the primary process came to be studied predominantly as a consumer of energy.

The Freudian school as a rule has continued to study the primary process almost exclusively from an economic point of view. Its main characteristic would be the fact that it does not bind the libido firmly but allows it to shift from one investment to another. Some Freudians, however, for instance, Schur, reassert the preponderantly cognitive role of the primary process.

I am also particularly concerned with the cognitive functions of the

primary process; namely, what I call "primary cognition." Primary cognition prevails for a very short period of time early in life as a normal aspect of development. In most cases it is almost immediately overlapped by secondary cognition so that it is difficult to retrieve it in pure forms even in the young child. Primary cognition also prevails and is easier to detect in those mental mechanisms (1) that are classified in classic psychoanalysis as belonging to the id, such as dream work; (2) in the early stages of what Werner called the "microgenetic process"; and (3) in psychopathological conditions. Its most typical forms occur in advanced stages of schizophrenia.

Secondary cognition consists predominantly of conceptual thinking; most of the time it follows the laws of logic and inductive and deductive processes. Tertiary cognition occurs in the process of creativity and generally consists of specific combinations of primary and secondary forms of cognition. It is doubtful whether we can distinguish three categories of volition corresponding to the three types of cognition. Certainly there are mature and immature forms of making choices, as we shall see in the following sections.

The Primary Self

I call *primary self* a self that functions predominantly with the mechanism of primary cognition and certain forms of immature volition. The

primary self is a theoretical construct because it can never be observed clinically in its entirety. We may reconstruct it from observations made in early life, imagery, memories, dreams, and especially from what we find in severe psychopathology, particularly in schizophrenia. A stage of development dominated by primary cognition never exists in pure form in normal conditions because the child who has outgrown the stage of the primordial self soon functions according to *secondary cognition* and not primary cognition. If the social bond with the mother and the other significant adults unfolds properly, the child accepts promptly from them secondary cognition, and his potentiality for individual, private, primary ways is to a large extent suppressed. Samples of these primary cognitions, however, exist in every normal child and even in adults. These samples multiply in psychopathological conditions, especially in schizophrenia, and in dreams.

The primary self develops the capacity to use symbols not only in order to communicate with other human beings but also to internalize the external world and thus to build an inner reality. This internalization may start toward the eighth or ninth month of life and may precede the onset of language. At first psychological internalization occurs through images.[2] An *image* is a memory trace that assumes the form of a representation. It is an internal quasi-reproduction of a perception that does not require the corresponding external stimulus in order to be evoked. Indeed, the image is one of the earliest and most important foundations of human symbolism, if by symbol

we mean something that stands for something else that is not present. Whereas previous forms of cognition and learning permitted an understanding based on the immediately given or experienced, from now on cognition will rely also on what is absent and inferred. For instance, the child closes his eyes and visualizes his mother. She may not be present, but her image is with him; it stands for her. The image is obviously based on the memory traces of previous perceptions of the mother. The mother then acquires a psychic reality that is not tied to her physical presence.

Image formation is the basis for all higher mental processes; it starts in the second half of the first year of life. It introduces the child into that inner world that I have called "phantasmic." It enables the child not only to re-evoke what is not present but also to retain an affective disposition for the absent object. For instance, the image of the mother may evoke the feelings that the child experiences toward her. The image thus becomes a substitute for the external object. It is actually an inner object, although it is not well organized. It is the most primitive of the inner objects if, because of their sensorimotor character, we exclude motor engrams from the category of inner objects. When the image's affective associations are pleasant, the evoking of the image reinforces the child's longing or appetite for the corresponding external object. The image thus has a motivational influence in leading the child to search out the actual object, which in its external reality is still more gratifying than the image. The opposite is true when the image's

affective associations are unpleasant: the child is motivated not to exchange the unpleasant inner object for the corresponding external one, which is even more unpleasant.

> Imagery soon constitutes the foundation of inner psychic reality. It helps the individual not only to understand the world better but also to create a surrogate for it. Moreover, whatever is known or experienced tends to become a part of the individual who knows and experiences. Thus *cognition can no longer be considered only a hierarchy of mechanisms, but also an enduring psychological content that retains the power to affect its possessor, now and in the future*.[3]

The child who has reached the level of imagery is now capable of experiencing not only such simple emotions as tension, fear, rage, and satisfaction, as he did in the first year of life, but also anxiety, anger, wish, perhaps in a rudimentary form even love and depression, and, finally, security. Anxiety is the emotional reaction to the expectation of danger, which is mediated through cognitive media. The danger is not immediate, nor is it always well defined. Its expectation is not the result of a simple perception or signal. At subsequent ages the danger is represented by complicated sets of cognitive constructs. At the age level that we are discussing now, it is sustained by images. It generally refers to a danger connected with the important people in the child's life, mother and father, who may punish or withdraw tenderness and affection. At this age anger is also rage sustained by images. Wish is also an emotional disposition that is evoked by the image of a pleasant object. The image motivates the individual to replace the image with

the real object of satisfaction. Depression can be felt only at a rudimentary level at this stage, if by depression we mean an experience similar to the one that the depressed adult undergoes. At this level depression is an unpleasant feeling evoked by the image of the loss of the wished object and by the experience of displeasure caused by the absence of the wished object. Love at this stage remains rudimentary. For the important emotion, or emotional tonality, called after Sullivan's security, I must again refer the reader to another publication.

The child does not remain for a long time at a level of integration characterized exclusively by sensorimotor behavior, images, simple interpersonal relations, and the simple emotions that we have mentioned. Higher levels impinge almost immediately so that it is impossible to observe the phantasmic level in pure culture. Nevertheless, we can recognize and abstract some of its general characteristics.

Images, of course, remain as psychological phenomena for the rest of the life of the individual. However, at a stage during which language does not exist or is very rudimentary, they play a very important role. Unless initiated, checked, or corrected by subsequent levels of integration (secondary process), they follow the rules of the primary process. They are fleeting, hazy, vague, shadowy, cannot be seen in their totality, and tend to equate the part with the whole. For instance, if the subject tries to visualize his kitchen, now

he reproduces the breakfast table, now a wall of the room, now the stove. An individual arrested at the phantasmic level of development would have great difficulty in distinguishing images and dreams from external reality. He would have no language and could not tell himself or others, “This is an image, a dream, a fantasy; it does not correspond to external reality.” He would tend to confuse psychic with external reality, almost as a normal person does when he dreams. Whatever was experienced would become true for him by virtue of its being experienced. Not only is consensual validation from other people impossible at this level, but even intrapsychic or reflexive validation cannot be achieved. The phantasmic level of young children is characterized by what Baldwin" called “adualism,” or at least by difficult dualism; lack of the ability to distinguish between the two realities, that of the mind and that of the external world. This condition may correspond to what orthodox analysts, following Federn, called “lack of ego boundary.”

Another important aspect that the phantasmic level shares with the sensorimotor level of organization is the lack of appreciation of causality. The individual cannot ask himself why certain things occur. He either naively accepts them as just happenings or he expects things to take place in a certain succession, as a sort of habit rather than as a result of causality or of an order of nature. The only phenomenon remotely connected with causation is a subjective or experiential feeling of expectancy derived from the observation of repeated temporal associations.

The *endocept* is a mental construct representative of a level intermediary between the phantasmic and the verbal. At this level there is a primitive organization of memory traces, images, and motor engrams (or exocepts). This organization results in a construct that does not tend to reproduce reality as it appears in perceptions or images; it remains nonrepresentational. In a certain way the endocept transcends the image, but inasmuch as it is not representational, it is not easily recognizable. On the other hand, it is not an engram (or exocept) that leads to prompt action. Nor can it be transformed into a verbal expression; it remains at a preverbal level. Although it has an emotional component, most of the time it does not expand into a clearly felt emotion.

The endocept is not, of course, a concept. It cannot be shared. We may consider it a disposition to feel, to act, to think that occurs after simpler mental activity has been inhibited. The awareness of this construct is vague, uncertain, and partial. Relative to the image, the endocept involves considerable cognitive expansion; but this expansion occurs at the expense of the subjective awareness, which is decreased in intensity. The endocept is at times experienced as an "atmosphere," an intention, a holistic experience that cannot be divided into parts or words—something similar to what Freud called "oceanic feeling." At other times there is no sharp demarcation between endoceptual, subliminal experiences and some vague protoexperiences. On still other occasions strong but not verbalizable

emotions accompany endocepts.

For the evidence of the existence of endocepts and for their importance in adult life, dreams, and creativity, the reader is referred elsewhere.[4] In children endocepts remain in the forms of vague memories that will affect subsequent periods of life. In adult life they often evoke memories expressed with mature language that was not available to the child when the experiences originally took place.

Endoceptual experiences exist even when the child has already learned some linguistic expressions—expressions, however, that are too simple to represent the complexities of these experiences. To avoid misinterpretations I wish to repeat at this point that the acquisition of language (that is, the verbal level) overlaps the endoceptual, phantasmic, and, to a small degree, toward the end of the first year of life, even the sensorimotor (or exoceptual) level.

Preconceptual Levels of Thinking

It is beyond the purpose of this chapter to study the child's acquisition of language (see Chapter 16 of this volume). It is also outside the scope of this chapter to study the experience of high-level emotions, which presuppose verbal symbols. I am referring to the mature experience of depression, hate, joy, and derivative emotions.[5] From the acquisition of language (naming things) to a logical organization of concepts, various substages follow one

another so rapidly and overlap in so many multiple ways that it is very difficult to retrace and individualize them. These intermediary stages are more pronounced and more easily recognizable in pathological conditions.

Some of the stages, which some authors call "prelogical" and which I call "paleological" (or following ancient logic), use a type of cognition that is irrational according to our usual logical standards. However, paleological thinking is not haphazard, but susceptible of being interpreted as following an organization or logic of its own. A considerable aspect of paleological thinking can be understood in accordance with Von Domarus's principle, which (in a formulation I have slightly modified) states: Whereas in mature cognition or secondary cognition identity is accepted only on the basis of identical subjects, in paleological thinking identity is accepted on the basis of identical predicates. In other publications I have illustrated the relations among part-perception, paleological thinking and some psychological mechanisms reported by ethologists, for instance, Tinbergen.

Paleological cognition occurs for a short period of time early in childhood, from the age of one to three. It is difficult to recognize because it is, in most instances, overlapped by secondary cognition. Here are a few examples. An 18-month-old child is shown pictures of different men. In each instance he says, "Daddy, daddy." It is not enough to interpret this verbal behavior of the child by stating that he is making a mistake or that his mistake

is owing to lack of knowledge, inadequate experience of the world, or inadequate vocabulary. Obviously he makes what we consider a mistake; however, even in the making of the mistake he follows a mental process. From perceptual stimuli he proceeds to an act of individualization and recognition. Because the pictures show similarities with the perception of his daddy, he puts all these male representations into one category: they are all daddy or daddies. In other words, the child tends to make generalizations and classifications that are wrong according to a more mature type of thinking. Obviously there is in this instance what to the adult mind appears a confusion between similarity and identity. Children tend to give the role of an identifying or essential predicate to a secondary detail, attribute, part, or predicate. This part is the essential one to them either because of its conspicuous perceptual qualities or because of its association with previous very significant experiences. Levin reported that a 25-month-old child was calling “wheel” anything that was made of white rubber, as, for example, the white rubber guard that was supplied with little boys’ toilet seats to deflect urine. The child knew the meaning of the word “wheel” as applied, for example, to the wheel of a toy car. This child has many toy cars whose wheels, when made of rubber, were always of white rubber. It is obvious that an identification had occurred because of the same characteristic, namely, white rubber.[6]

Young children soon become aware of causality and repeatedly ask why.

At first causality is teleological: events are believed to occur bccause they are willed or wanted by people or by anthropomorphized forces.

We should not conclude that young children must think paleologically; they only have a propensity to do so. Unless abnormal conditions (either environmental or biological) make difficult either the process of maturation or the process of becoming part of the adult world, this propensity is almost entirely and very rapidly overpowered by the adoption of secondary process cognition. Moreover, they may still deal more or less realistically with the environment when they follow the more primitive type of nonsymbolic learning, which permits a simple and immediate understanding. In secondary process cognition the individual learns to distinguish essential from nonessential predicates and develops more and more the tendency to identify subjects that are indissolubly tied to essential predicates.

At these preconceptual levels of cognition we can recognize two opposite tendencies: one, characterized by the propensity to proceed toward higher levels; the other, characterized by the propensity to return to lower forms, for instance, the image. In dreams and in schizophrenia the second tendency prevails: thinking is transformed into perceptions, as in hallucinations and oneiric images. Thus we have thoughts represented in personal symbols or what seem to be metaphors.

At the stage of the primary self volition, too, occurs in primitive forms. Instinctive, automatic, and conditioned behavior persists; but we have also voluntary behavior that follows one of two patterns: wish fulfillment or obedience. In wish fulfillment the individual enacts the sequence of movements that he believes will lead him to gratify his wish. Flight is also included in this category because to escape danger is a wish. The obedient individual puts into effect whatever he senses the adult wants him to do. I have illustrated these mechanisms elsewhere, and only a brief account can be repeated here.

Will starts with a "no," a "no" that the little child is not able to say but is able to enact upon his own body. The child enacts a "no" when he controls his sphincters in spite of the urge to defecate and to urinate. Now he has a choice: he may allow his organism to respond automatically in a primitive way or not. It is important to point out that although the child has developed neurologically the ability to inhibit these functions, he still has the urge to allow them to occur: it is easier and more comfortable to defecate when the rectum is distended by feces or to urinate when the bladder is full. But during toilet training he learns not to do so because he understands that another person (generally the mother) does not want him to. Thus in early childhood behavior acquires a new dimension when it becomes connected with the anticipation of how other people will respond to that behavior. Any activity ceases to be just a movement, a physiological function, or a pleasure-seeking

mechanism on the part of the child; it acquires a social dimension and thereby becomes an *action.* The first enacted "no" is also the first enacted "yes"; "yes" to mother, "no" to oneself. Thus to will, in its earliest forms, means to will what other people want. As a matter of fact, the child learns to will an increasingly large number of actions that are wanted by his mother. In other words, he learns "to choose" as his mother and the other adults around him want him to choose. The child senses an attitude of imperativeness in the surrounding adults. The adult is experienced as the *imperative other,* a person who gives a command. The child senses that he has to obey in order to please or at least not to displease.

At first, the command is not internalized. The child obeys only if the adult is present. In the absence of the adult the wish or the primitive wish retains supremacy. When later the child introjects the command (that is, he obeys even when his mother is absent), another phenomenon occurs, not always but in several instances, that induces him to disobey even when his mother is present. He becomes *negativistic.* He says "no" to many suggestions of his mother. He does not want to eat, to be dressed, undressed, washed, and so forth. As I wrote elsewhere, "We must not look upon this almost universal phenomenon as a period of naughtiness children go through or a difficult stage parents have to tolerate. All the 'no's' constitute a big 'no' to extreme compliance, to the urge to be extremely submissive to the others or to accept the environment immediately. They constitute a big 'yes' to the self. The

submissive tendencies are always very strong because it is through them that the child becomes receptive to the environment and allows himself to experience influences that nourish him and make him grow. Negativism is a healthy correction. The no period is a decisive turn of the will. Control now no longer involves only body functions, like the inhibitions of reflexes or elementary physiological behavior. It is interference with behavior willed by others and the beginning of a liberation from the influence or suggestion of others. It is the first spark of that attitude that later on will lead the mature man to fight for his independence or to protect himself from the authoritarian forces that try to engulf him."

Early Images of the Mother and of the Self

The randomness of experience is more and more superseded by the gradual organization of inner constructs. These constructs continually exchange some of their components and increase in differentiation, rank, and order. A large number of them, however, retain the enduring mark of their individuality. Although in early childhood they consist largely of the cognitive forms that we have described (images, endocepts, paleological thoughts) and of their accompanying feelings (from sensations to emotions), they become more and more complicated and difficult to analyze. Some of them have powerful effects and have an intense life of their own; and yet at the stage of our knowledge we cannot give them an anatomical location or a

neurophysiological interpretation. They may be considered the very inhabitants of inner reality. The two most important ones in the preschool age, and the only two that we shall describe here, are the image of the mother and the self-image.[7]

In normal circumstances the mother as an inner object will consist of a group of agreeable images: as the giver, the helper, the assuager of hunger, thirst, cold, loneliness, immobility, and any other discomfort. She becomes the prototype of the good inner object. The negative characteristics of the mother play a secondary role that loses significance in the context of the good inner object. In some pathological conditions the mother becomes a malevolent object, and an attempt is made to repress this object from consciousness.

Much more difficult to describe in early childhood is the self-image. This construct will be easier to understand in later developmental stages. At the sensorimotor level the primordial self probably consists of a bundle of relatively simple relations between feelings, kinesthetic sensations, perceptions, motor activity, and a partial integration of these elements. At the phantasmic level the child raised in normal circumstances learns to experience himself not exclusively as a cluster of feelings and of self-initiated movements, but also as a body image and as an entity having many kinds of relations with other images, especially those of the parents. Inasmuch as the child cannot see his own face, his own visual image will be faceless—as,

indeed, he will tend to see himself in dreams throughout his life. He wishes, however, to be in appearance, gestures, and actions like people toward whom he has a pleasant emotional attitude or by whom he feels protected and gratified. The wish tends to be experienced as reality, and he believes that he is or is about to become like the others or as powerful as the others. Because of the reality value of wishes and images, a feeling results that in psychoanalytic literature has been called a "feeling of omnipotence."

In the subsequent endoceptual and paleological stages the self-image will acquire many more elements. However, these elements will continue to be integrated so that the self-image will continue to be experienced as a unity, as an entity separate from the rest of the world. The psychological life of the child will no longer be limited to acting and experiencing, but will include also observing oneself and having an image of oneself.

In a large part of psychological and psychiatric literature a confusion exists between the concepts of self and of self-image. In this section we shall focus on the study of the self- image.[8] Also in a large part of the psychiatric literature the self and the consequent self- image are conceived predominantly in a passive role. For instance, Sullivan has indicated that the preconceptual and first conceptual appraisals of the self are determined by the relationships of the child with the significant adults. Sullivan considers the self (and self- image) as consisting of reflected appraisals from the significant

adults: the child would see himself and feel about himself as his parents, especially the mother, see him and feel about him. The self cannot be seen, however, merely as a passive reflection. The mechanism of the formation of the self cannot be compared to the function of a mirror. If we want to use the metaphor of the mirror, we must specify that we mean an activated mirror that adds to the reflected images its own distortions, especially those distortions that at an early age are caused by primary cognition. The child does not merely respond to the environment. He integrates experiences and transforms them into inner reality, into increasingly complicated structures. He is indeed in a position to make a contribution to the formation of his own self.

The self-image may be conceived as consisting of three parts: body image, self-identity, and self-esteem. The body image consists of the internalized visual, kinesthetic, tactile, and other sensations and perceptions connected with one's body. The body is discovered by degrees, and also the actions of the body on the not-self are discovered by degrees. The body image eventually will be connected with belonging to one of the two genders. Self-identity, or personal identity or ego identity, depends on the discovery of oneself not only as continuous and as same but also as having certain definite characteristics and a role in the group to which the person belongs.

Self-esteem depends on the child's ability to do what he has the urge to

do, but it is also connected with his capacity to avoid doing what the parents do not want him to do. Later it is connected also with his capacity to do what his parents want him to do. His behavior is explicitly or implicitly classified by the adults as bad or good. Self-identity and self-esteem seem thus to be related, as Sullivan has emphasized, to the evaluation that the child receives from the significant adults. However, again this self-evaluation is not an exact reproduction of the one made by the adults. The child is impressed more by the appraisals that hurt him the most or please him the most. These partial, salient appraisals and the ways they are integrated with other elements will make up the self-image.

Primitive Organization of Images and Constructs

In the primary self, images, such as the ones discussed in the previous section, and cognitive constructs do not follow the organization found in more mature stages of development. Often the image of a person is only built out of some salient features, those that impress or affect the child more, and does not include all features or even the most important ones. The child does not respond equally to all appraisals and roles attributed to him. Those elements that hurt him more and, in rare cases, that please him more stand out disproportionally. Thus the self, although related to the external appraisals, is not a reproduction of them. At times it may even be what appears to us a caricaturelike representation of these appraisals. Moreover,

the self is constituted of all the defenses that are built to cope with the disturbing appraisals and their distortions. In schizophrenia we find that often the early self- image was a grotesque representation of the individual. Unfortunately, in turn, the self- image does change the individual and makes him become similar to this inner construct.

In normal conditions the image of the mother is made up of only the predominant, positive characteristics of the mother, and the negative ones are overlooked. However, when the mother has definite and very marked negative characteristics (anxiety, hostility, detachment, callousness), the child becomes particularly sensitized to these characteristics. He becomes aware only of them because they are the parts of the mother that hurt and to which he responds deeply. He ignores the others. He responds to parts, not to the whole. His use of primary process cognition results in his achieving only partial or distorted awareness. In schizophrenia the patient early in life often responded only to the pronounced negative parts of the mother, and the result was a transformation of the mother into a monstrous image.

Why do most people respond more to or become more aware of negative parts of the surrounding world, especially the interpersonal world? The answers to this question are only hypothetical. Inasmuch as the negative parts or characteristics hinder adaptation that may be dangerous from the point of view of survival, evolution has probably favored a stronger response

to them. We react more vigorously to pain than to pleasure and to sorrow than to joy. Although we find this phenomenon in most people, part-perception becomes particularly pronounced in pathological cases, and especially in schizophrenia. Part-awareness is generally followed by other types of organization that I call protopathic or spontaneous. In this type of organization any experience may add to a previous construct, not because of logical consistency, but either by contiguity, conditioned reflex mechanisms, repetition, part-perception, and so forth, or because an overpowerful emotion or motivation affects the mental process. For instance, if a person has been experienced by the individual as very frightening, any subsequent action of this person, even a benevolent one, may tend to be interpreted or experienced as frightening. Every relation with that person may thus accrue to the original negative image. Similarly an overpowering sexual or aggressive motivation may be reinforced by any stimulus whatsoever emanating from the source of that motivation.

These mechanisms of the primary self continue to exist even later in life when they could be replaced by the more mature ones of the secondary self. Thus a 19-year-old girl, reported elsewhere, misinterpreted or saw in a peculiar slant whatever involved the stepmother. Quite often she interpreted paleologically whatever the stepmother said or did. In other words, the spontaneous organization of the input coming from the stepmother was predominantly organized according to the rules of primary process cognition.

Her inner need to hate the stepmother was stronger than her respect for the demands of reality, and the patient succumbed to the seduction of the spontaneous organization.

Dispositions, attitudes, and communications of adults involving particular persons or situations quite often follow primitive constructs built early in life. At times these constructs are applied to entire categories, such as all elderly or maternal women, authorities, siblings, and so forth. We may state that the individual identified a person in his present life with one in the past in a transferential modality. Whatever terminology we follow, we must recognize that we deal with cognitive structures.

Another characteristic of primitive constructs is that they have an enduring or persistent quality even when they should be superseded by more appropriate constructs. What is organized early in life not only undergoes dissolution with great difficulty but also tends to inhibit the organization of more mature or subsequent constructs by which it could be replaced. This applies to normal constructs as well as to pathological ones. This is not to say that previous learning prevents later learning. For instance, we all know that the knowledge of arithmetic does not prevent the learning of algebra; as a matter of fact, it is a prerequisite. However, the learning of a second language later in life is in some respects inhibited by the knowledge of the first language. The dissolution of primary constructs, which have been built with

preconceptual mechanisms and methods of spontaneous organization, constitutes a difficult task, also because it has to be actualized through the methods of the secondary self, which are often alien to primitive constructs.

It is easy to understand that primitive constructs about the self, parents, siblings, and other people have an important bearing on the affective attitude of the individual and on the realm and scope of his motivation. To the extent that the appraisal of life is effectuated by the individual through the mechanisms of the primary self, his consequent emotions and motivations appear distorted to a mature observer. To the extent that these primitive motivations (originated at the level of the primordial and of the primary self) contrast with those of the secondary self, they bring about conflict in the individual.

The Secondary Self

The secondary self is organized predominantly in accordance with secondary cognition. It is beyond the scope of this chapter to describe the stages intermediary between early childhood and mature adulthood. We shall consider only the role of concepts. As Vygotsky has illustrated, conceptual thinking starts early in life, but it is in adolescence that it acquires prominence. Conceptual life is a necessary and very important part of mature life. Many authors-' have made important studies of the mechanisms involved

in the formation of concepts and of concepts as psychological forms. In this chapter I shall instead stress their content. This position is a departure from what I have done in reference to less mature forms of cognition.-' In fact, in psychiatric studies, especially in such conditions as schizophrenia in which severe pathology is found, it is important to study not only content but also form; it is crucial to understand not only what the individual experiences but how he experiences it. Is he perceiving in terms of parts or wholes? Is he using images, endocepts, or paleological cognition? How are these cognitive modalities varying during the course of the illness or even during the course of a single therapeutic session? What is the meaning of such variety of forms? On the other hand, the psychiatrist's and analyst's main interest in concepts resides in determining how their content psychodynamically affects human life.

In a large part of psychiatric, psychoanalytic, and psychological literature concepts are considered static, purely intellectual entities, separate from human emotions and unimportant in psychodynamic studies. I cannot adhere to this point of view. Concepts and organized clusters of concepts become depositories of emotions and also originators of new emotions. They have a great deal to do with the conflicts of man, his achievements and his frustrations, his states of happiness or of despair, his anxiety or his security.- They become the repositories of intangible feelings and values. Not only does every concept have an emotional counterpart, but also concepts are necessary

for high emotions. In the course of reaching adulthood emotional and conceptual processes become more and more intimately interconnected. It is impossible to separate the two. They form a circular process. The emotional accompaniment of a cognitive process becomes the propelling drive not only toward action but also toward further cognitive processes. Only emotions can stimulate man to overcome the hardship of some cognitive processes and lead to complicated symbolic, interpersonal, and abstract processes. On the other hand, only cognitive processes can extend indefinitely the realm of emotions. As I have illustrated elsewhere, some very important human emotions could not exist without a conceptual foundation. For instance, depression should not be confused with lower feelings, which require no cognitive counterpart at all or only nonsymbolic learning. I am referring to the state of deprivation, discomfort, or anaclitic frustration of lower animal forms or human babies. Depression requires an understanding of the meaning of loss (actual or symbolic) and a state of despair (which follows a belief that what is lost cannot be retrieved). The importance of this understanding is not recognized because it is based on cognitive processes that often become almost immediately unconscious (see below). The conceptual presuppositions to mature love, to symbolic anxiety, to hate (as distinguished from rage or anger) have been described elsewhere.

Reification of concepts (that is, the assumption that concepts faithfully correspond to external reality) is considered by science to be an invalid

procedure. It is obvious that concepts do not correspond to external reality, nor do they represent reality adequately most of the time. Nevertheless, they do have an enduring psychological life or a reality of their own as psychological constructs.

Even more criticized and reputed unscientific is the reification of emotions or feelings in general. Certainly thoughts and feelings do not easily submit to the rigor and objectivity of a stimulus-response psychology. However, to dismiss all studies of thoughts and feelings as mystical is to dismiss most of man as mystical. Thoughts and feelings make up what is most valuable in man. If this essential part of man requires methods of study that do not correspond to those of standardized science, we must be ready to accept unusual methods of inquiry.

Even what I said about the relative lack of importance of concepts as forms needs clarification. Concepts, too, undergo organization of increasing order, rank, and level and become components or organized conceptual constructs, whose grammar and syntax we do not yet know. Undoubtedly future studies will reveal the structure of these so far obscure organizations and configurations.

From a psychiatric and psychoanalytic point of view, the greatest importance of concepts resides in the fact that to a large extent they come to

constitute the self-image. When this development occurs the previous self-images are not completely obliterated. They remain throughout the life of the individual in the form of minor components of the adult self-image or as repressed or suppressed forms. In adolescence, however, concepts accrue to constitute the major part of the self-image. As we already mentioned at the beginning of this chapter, worth, personal significance, mental outlook, more mature evaluations of appraisals reflected from others, attitudes toward ideals, aspirations, capacity to receive and give acceptance, affection, and love are integral parts of the self and of the self-image, together with the emotions that accompany these concepts. These concepts and emotions that constitute the self are generally not consistent with one another, in spite of a prolonged attempt made by the individual to organize them logically.

To complicate the picture is the fact that many conceptual forms are fused or mixed with more primitive ones (paleological thoughts, endocepts, spontaneous organizations, and so forth) so that often the apparently logical conceptual overlay hides the irrational inner structure. One of the aims of therapy is to distinguish and disentangle the irrational from the rational.

The motivation of the human being varies according to the various levels of development. When higher levels emerge, motivations originated at lower levels do not cease to exist. At a very elementary sensorimotor level the motivation consists of obtaining immediate pleasure and avoiding immediate

displeasure by gratification of bodily needs. When imagery emerges, either phylogenetically or ontogenetically, the individual becomes capable of wishing something that is not present and is motivated toward the fulfillment of his wishes. He will continue to be wish-motivated in more advanced stages of primary cognition, such as the paleological stage. As we have already mentioned, although the motivation can always be understood as a search for, or as an attempt to retain, pleasure and avoid unpleasure, gratification of the self becomes the main motivational factor at a conceptual level of development. Certainly the individual is concerned with danger throughout his life: immediate danger, which elicits fear, and a more distant or symbolic danger, which elicits anxiety. However, whereas at earlier levels of development this danger is experienced as a threat to the physical self, at higher levels it is many times experienced as a threat to an acceptable image of the self. In some instances sexual deprivation is acceptable at an instinctual level but not at a conceptual level, where it becomes connected with many negative meanings and unpleasant emotions. Many psychological defenses are devices to protect the self or the self-image. Here are a few examples. A woman leads a promiscuous life; she feels she is unacceptable as a person, but as a sexual partner she feels appreciated. The hypochondriac protects his self by blaming only his body for his difficulties. The suspicious person and the paranoid attribute to others shortcomings or intentions that they themselves have. These examples could easily be multiplied. They represent cognitive

configurations that lead the patient to feelings, ideas, and strategic forms of behavior that make the self-image acceptable or at least less unacceptable. Neurotic behavior is to a large extent based on these particular defensive cognitive configurations, which often become unconscious and are applied automatically. Often the patient has learned to apply these configurations in situations in which they were appropriate. Later, because of his lack of security or ability to discriminate, he has extended their sphere of applicability. In most cases important cognitive configurations are completely repressed because ungratifying or inconsistent with one's cherished self-image. *Contrary to what is often believed, repression and suppression from awareness apply not only to primitive strivings and to the contents of primary cognition, but also to the content of high conceptual ideation.*

In some psychoneuroses, such as phobic conditions and obsessive-compulsive syndromes, the self is also, in specific situations, protected by some use of primary cognition. In the schizophrenic psychosis the self is defended by an extensive use of primary cognition, which is not corrected or counterbalanced by secondary cognition. Various forms of displacement and transformation of a cognitive construct into another that is less disturbing (such as in regression, fixation, paleological thinking) occur in dreams and in many pathological conditions.

As described elsewhere," no anticipation of the future is possible

without symbolic processes. In order to feed his present self-esteem and maintain an adequate self-image, the young individual has, so to speak, to borrow from his expectations and hopes for the future. It is when a present vacillating self-esteem cannot be supported by hope and faith in the future that severe psychopathological conditions may develop.

Learning has a very important role in the organization of inner reality. However, we must specify that the content of a learning experience becomes part of inner reality when it becomes integrated with the rest of the psyche and has an effect that transcends the original experience. Undoubtedly there are intermediary stages and special relations between learning experiences and components of inner reality. I have illustrated some of them elsewhere.

My views on the role of primary and secondary cognition in the symptomatology, psychodynamics, and psychotherapy of schizophrenia and psychotic depression are reported in my chapters appearing in Volume 3 of this *Handbook.*

General Aspects of the Self

From a general point of view the self (and in particular, the inner self) can be examined from five different aspects: (1) representational function, (2) subjectivity, (3) potentiality, (4) integration, and (5) desubjectivization. These aspects are so interrelated that we cannot understand any of them without

taking into consideration the others. For didactical reasons only we shall discuss them separately.

The representational function is the formation of inner constructs that represent objects or events of the external world. These representations are not analogical reproductions of what they stand for.

The second aspect of the self refers to the fact that what is objective or objectivizable becomes subjective, is appropriated by the individual as a subjective experience, acquires a subjective reality, and becomes part of the individual himself. This subjectivization is not adequately accounted for by psychological or psychiatric authors who give exclusive or almost exclusive importance to the environment. This subjectivization is a phenomenon as difficult to understand as the whole mind-body problem. The intensity of a subjective construct does not correspond to the external objective event or stimulus to which it is related. It depends, as we have already mentioned, on the mechanisms triggered off in its formation, on the selections of other constructs with which it is integrated, and on the processes used in such integration. The subjective aspect is particularly evident when we study sensations and emotions, but emotions accompany and transform cognitive constructs and, in turn, are transformed by them.

The potentiality of the self can be seen (1) in the way it affects the

behavior of the individual in relation to other people, himself, and the world in general; (2) in the way it affects itself. In other words, the self feeds on the external world as well as on itself. Potentiality is also connected with the very important function of will or volition, to which we shall devote a subsequent section of this chapter.

The term "integration" refers to a large number of psychological mechanisms by virtue of which all functions of the psyche are related to one another and synthesized into higher ranks of organization. We have outlined a few of them, but most of them are still unknown.

Desubjectivization is the fifth property and in a certain way the opposite of subjectivity. It refers also to a group of phenomena that tend to decrease the private or subjective aspects of the experience. We have seen that in subhuman animals and during the first year and a half of human life the inner self exists only in rudimentary form. In the growing and grown human being, however, it becomes so intense that during the evolution of Homo sapiens mechanisms developed that had the purpose of decreasing its intensity and prominence. These various mechanisms have been described, under various terminologies, in psychological, psychiatric, and psychoanalytic literatures. We have already mentioned some of these mechanisms as the adoption of special cognitive configurations or special types of cognition. Others should be considered under the heading of desubjectivization:

1. Decrease of affective or sensuous content, for instance, by the mechanisms of denial, reaction formation, undoing, blunting of affect, depersonalization, alienation, hysterical anesthesia, and so forth.

2. Suppression, or more or less voluntary removal, of some psychological content from the focus of attention or of consciousness. This content goes into a state of quiescence, like a language or skill that is not used.

3. Repression, or removal of psychological content from consciousness. The study of this mechanism is the main topic of classic Freudian psychoanalysis.

These mechanisms alter and complicate, but do not eliminate, inner life. Desubjectivization is not necessarily a useful procedure. Although from the point of view of the whole human race it may have statistically useful survival effects, it often has undesirable consequences on the individual. As a matter of fact, it is the aim of psychoanalysis to make conscious again what became unconscious. Other writers and I believe that this psychoanalytic procedure is not therapeutically sufficient in most instances. Therapy must also aim at reintegrating harmoniously with the rest of the self what was restored to consciousness.

Volition

In the previous section we spoke of the potentiality of the individual. We

have to stress now an aspect of it related to volition, that faculty of man that has been neglected by psychoanalysts even more than cognition. A full analysis of the unfolding of mature volition is given elsewhere.

Generally at the age of four orders start to be internalized. The child feels he *must* act in a certain way. Why must the mother and father bring about an internalization of the command? At a very early age the child must follow orders at a level of complexity that he cannot understand. How can a year-old child understand that he should not break a glass, that he should not eat two big ice creams? The parental order is a substitution for the understanding that the immature child lacks. A gap between the required action and the understanding of it is unavoidable: *the comprehension-action gap.*

Behaviorists have stressed that the child learns to obey by operant conditioning, through punishment and reward. Actually in the human the process, although retaining some characteristics of conditioning, is much more complicated because it is connected with expanding symbolism. First of all, punishment and reward are a *neutralization* of the child's act. The punishment received, let us say, after eating the second ice cream, neutralizes the pleasure experienced in eating it. The reward, on the contrary, is a compensation for the sustained deprivation of the second ice cream. Mother offers a different pleasantness: her approval, her keeping the child on her lap,

hugging him, and so forth. In the second place punishment and reward are symbolic or anticipatory of the consequences of the child's act. Thus the punishment that the mother inflicts on the child who has eaten the second ice cream is symbolic of the bad effect that eating excessive ice cream will cause. The immediate punishment takes the place of the painful condition that the bad act, if allowed to be repeated several times, would eventually cause. Conversely, the reward (as approval, tenderness, or love on the part of the mother) is symbolic of the state of welfare and happiness that characterizes a life resulting from doing the right thing. One of the functions of the command, therefore, is to anticipate the value of the act in the distant or near future.

The child who knows he has done something considered wrong by the adults generally feels he deserves to be punished. Unless he is punished the psychological equilibrium will not be restored. The bad deed has produced a rupture, a gap, a state of tension or disequilibrium (remotely reminiscent of the state of a conditioned dog that is prevented from responding). Punishment will re-establish the equilibrium and may even be welcome. If punishment is considered the natural thing to restore the individual, a feeling of guilt will ensue until punishment is received.

Conditioning plus the actual and symbolic value of reward and punishment, however, are not enough to explain the transformation of an external command into an internal one. The person, parent, adult, or leader,

who gives the command has a quality that I call the *imperative attitude.* This imperative attitude is experienced in its totality as a benevolent and cooperating force, although it has attributes that may not seem positive. These attributes are the properties of magnetizing, electrifying, hypnotizing, having charismatic qualities, charming, seducing, fascinating, intruding, possessing, capturing, enchanting, and so forth. Imperative attitude cannot be replaced by any of these terms because it contains an element of the meanings of each of these terms.

The person, generally the child, who responds to this imperative attitude, experiences a tendency to obey, what philosophers call a sense of "oughtness." You ought to do what the commanding person wants you to do and you must do it, no longer because he wants you to do it, but because you must want to do it. An external power no longer obligates you; now it is an inner power, what I call *endocratic power.* If you do not do what you must do, you will no longer incur only external punishment but also *guilt feeling.*

The sense of "oughtness" is partially experienced unconsciously, and in a certain way constitutes the Freudian superego; but to a large extent it is also experienced consciously and manifests itself as a sense of duty. Often the parents and other authorities engender in the individual not just endocracy but an excessive amount of it, what I call the *endocratic surplus.*

It is difficult for the individual to exert his will since his wishes of instinctual and/or conceptual derivation or endocratic surplus predispose him to act in primitive or prescribed ways. The individual is thus not *completely* free to choose or act. He has only a margin of free will. Will is not a function fully given to man, but a mechanism of partial determination that permits a striving toward autonomy, freedom, and creativity. The less disturbed the individual is, the larger is his margin of will and the less is he at the mercy of deterministic forces. The mature man is the one who has the largest possible margin of free will; on the other extreme is the catatonic patient who has lost his will almost completely." I have described elsewhere the various vicissitudes of the will.

A large part of psychological life consists of the relations between one's own will and the will of others. In optimal conditions, for instance, in the relation between the child and the loving, nonneurotic mother, a state of communion is approximated. The primary social bond is transformed into a feeling of basic trust and subsequently of security. Unfortunately, however, often the will of others is experienced as a power that restricts, distorts, or deflects one's personal will. The will of others may remain an external power, and the individual develops special mechanisms for dealing with it: compliance, submission, rebellion, hostility, detachment, and paranoid attitudes. It may be internalized and become an internal power (endocracy) that may strengthen the individual's will but also cripple, deform it, or

paralyze it. This power (external or internal) affects every personal relation and disturbs it to such a point that a state of trust or communion between two or more people is no longer possible. When two people are together, an unequal distribution of power— that is, unequal ability to exert one's will— tends to develop unless strong measures are taken to maintain the equilibrium. This need to dominate may disturb the relation between parent and child, husband and wife, siblings, teacher and pupil, employer and employee, and so on. A relation that is meant to be based on love, affection, learning, or cooperation becomes corrupted by power seeking—most of the time implemented not just by conscious mechanisms but also, and in many cases predominantly, by unconscious maneuvers. Society generally sanctions the more common unequal distributions of power, which may thus remain unchallenged for thousands of years, or until liberation movements occur.

In the field of psychoanalysis and psychology Alfred Adler is the author who first realized the importance of power in human life and who advanced meaningful hypotheses about its origin. In my recent book I discuss the merits and limitations of Adler's theory. Biological, economic, historical, and political conditions greatly determine unequal distributions of power. However, I feel that man would be able to overcome the effects of these conditions and establish an equal distribution of power if other psychological factors would not prevent him.

Because of the expansion of his conceptual processes and of a philosophy of life that he comes to build in his contacts with other human beings, man becomes aware that a discrepancy exists between the way he sees himself and the way his thinking makes him visualize what he could be. He is always short of what he can conjecture; he can always conceive a situation better than the one he is in. When he sees himself as less than what he would like to be, he believes others, too, are dissatisfied with him. He faces a theoretical infinity of space, time, things, and ideas that he can vaguely visualize but cannot master. On the other hand, he becomes aware of his finitude. He knows he is going to die, and that the range of the experiences he is going to have is limited. He cannot be better than he is capable of being, and he cannot enjoy more than a certain amount of food and sex. Being able to conceive the infinite, the immortal, the greater and greater, he cannot accept his limitation. He may feel betrayed by his own nature and may desperately search for ways to overcome his condition. It often seems to him that a way to expand the prerogatives of his life is by invading the life of others. He feels his life will be less limited if he takes away the freedom of others, if he makes others work for him, submit to him, give up their will for his own. Thus instead of accepting his limitations and helping himself and his fellow men within the realm of these limitations, he develops conscious and unconscious conceptualizations that make him believe that he can by-pass his finitude and live more by making others less alive. The network of rationalizations that

ramifies from these conceptualizations and assumptions is described in more detail in my recent book.

The Tertiary Self

The tertiary self is the human being in the process of creativity. The individual uses a special form of cognition, the tertiary process, which consists of specific combinations of primary and secondary forms of cognition. The important topic of creativity cannot be dealt with in this essay. The reader is referred to my chapter on creativity in Volume 6 of this *Handbook* and to my book *The Intrapsychic Self.*

Some Principles of Psychopathology

Unless hindered by adverse biological, intrapsychic, or environmental conditions, the individual tends to live in accordance with a mode of life congruous with a high level of symbolism and profound emotional involvement. The preponderance of adverse emotions like severe anxiety, depression, hostility, detachment, aggression, guilt and related feelings, conflict, frustration, hindrance in the exercise of one's will, and unequal distribution of power may require the adoption of mechanisms that reduce or modify the psychological faculties of the individual. These mechanisms become particularly pronounced when they occur in a state of

unconsciousness. The mechanisms occurring in schizophrenia and depression will be described in detail in may chapters appearing in Volume 3 of this *Handbook.*

More general mechanisms were described in *The Intrapsychic Self* (Chapter 13). Here I shall mention two important processes that in various degrees and forms occur in several psychiatric syndromes: *somatization* and *cognitive regression.* Somatization is the transformation of a psychological difficulty or disorganization into a physiological or organic one. This mechanism, which Freud referred to as "the mysterious leap from the psychological to the physical," occurs in disorders generally called psychosomatic. Typical examples are gastric ulcer, colitis, hypertension, and bronchial asthma.

Some authors consider psychosomatic disorders only those in which "the leap" occurs through the intervention of the autonomic nervous system. Others (for instance, Arieti and by implication, Jung) also consider psychosomatic some disorders in which the psychological factors engender changes directly in the central nervous system. Sexual dysfunctions are well-known psychosomatic disorders. Less known is a particular type of somatization called *eroticization.* Many usually nonerotic actions of the individual and of others acquire an erotic meaning and may become capable of eliciting an erotic feeling in the patient. The mechanism is generally the

opposite of the one described in Freudian literature. It is the anxiety, or conflict, or other abnormal states that confer the erotic quality. The erotic quality is a reductive mechanism, or regression. It may be heterosexually or homosexually oriented. Thus a heterosexual man, unable to relate at a mature interpersonal level, may interpret any action or gesture of a woman as erotogenic. As a matter of fact, he actually responds to them with an erotic feeling. The insecure man, who is not a full-fledged homosexual but who has some homosexual tendencies, often goes through the following sequence: he perceives himself as inadequate, inferior to another man. He thus feels that he must submit to him. The submission is eroticized and becomes a homosexual feeling.

Cognitive regression is the adoption of an immature form of symbolism or thinking in order to support rationalizations, prejudices, irrational wishes, and delusions. The most typical examples of regression occur in schizophrenia, where cognition often assumes the paleological modality of the primary process to a limited degree. Cognitive regression occurs also in the everyday living of normal people. In summary, we could say that when the human psyche cannot advance or at least function adequately, it tends to escape from mature meanings and choices.

Culture and Human Conflict

Several neo-Freudian schools have emphasized the role of society and culture in determining human conflict. Portnoy has described the role that Horney has attributed to culture in human neurosis, and Witenberg has done so in relation to Fromm.

The cognitive-volitional approach stresses that the emotional and social bonds existing among people are determined not only by physical proximity and biological needs but also by the cognitive ways they use and the choices they make. A cultural milieu is essential for the development of man (see also Whorf). At the same time that society permits man to survive and grow, it may undermine his basic functions and aspirations and enhance psychological difficulties in many ways. We shall discuss this topic here only in relation to some aspects of present Western culture.

Western culture presents many conflictful areas that are internalized by people and therefore transformed into personal conflicts. Contradictory conceptualizations are very common. At the same time that the individual is asked to feel brotherly love for his neighbor, he is urged to compete with him. At the same time that he is taught to observe sexual restrictions, he is exposed to strong sexual stimulation. Although he is taught to be parsimonious, he is exposed to the inducement of a consumeristic society. Whereas he is told to believe that men are created equal, he sees artificial inequalities being established and maintained. Whereas he is supposed to cherish freedom, his

freedom is secretly or openly infringed upon in a thousand ways. Whereas he is supposed to follow his own initiative, he is conditioned more and more, with more refined and therefore almost unconscious methods of reinforcement.

Freud was very skillful in uncovering the ways by which the individual represses in order to escape the punishment of society, but he did not become concerned with how society represses and transmits that repression to the individual.

As I wrote elsewhere,

> The individual has a double burden to repress: his own and that of society. How does society repress? By teaching the individual not to pay attention to many facts (selective inattention); by masquerading the real value of certain things; by giving an appearance of legality and legitimacy to unfair practices; by transmitting ideas and ideals as absolute truths without any challenge or search for the evidence on which they are supposed to be based; by teaching certain habits of living, etc. The defenses against objectionable wishes which Freud described in the individual (for instance, repression, reaction-formation, isolation, and rationalization) can be found in society, too [Pp. 45-46].

Cognitive psychoanalysis discloses that cultural introjections become part of deep, unconscious levels of the psyche and operate with little participation of the conscious self. Because of his scientific achievements, modern man has gained more freedom from his biological needs but is in danger of becoming a slave of culture and society. I have described three

major negative ways by which modern society affects the whole psyche and especially the will of the individual: primitivization, endocratic surplus, and deformation of the self.

Primitivization consists of all the mechanisms and habits that foster the primitive functions of the psyche at the expense of high- level functions. Prominent among these mechanisms are exaggerated decontrol of the sexual and aggressive drives, craving for immediate satisfaction, and return to magic and shamanism.

Endocratic surplus is excessive introjection of authorities and of false and self-perpetuating principles. Endocratic surplus may reduce the individual to blind obedience and enhance the occurrence of tyranny.

Deformation of the self has been brought about by the application of the scientific model to all aspects of life, the actual reduction of people's feelings and ideas to numbers, mass production, and consumerism. By being manipulated or persuaded in hidden ways, the individual acquires the habit of reacting, not acting. His will becomes atrophic while he retains the illusion of freedom. Reaction is confused with spontaneity, promiscuity with romance, intrusion into one's privacy with sincerity and comradeship. The self is deformed and tends to be alienated, and addictive drugs are used to combat alienation.

If we try to interpret these three adverse sociopsychological factors in reference to Freudian terminology, we can say that primitivization expands the id at the expense of the other parts of the psyche; deformation of the self warps the ego; and endocratic surplus overburdens and distorts the superego. Freud, of course, was aware of the important impact of society on the individual's psyche, but was not aware of these three mechanisms. He felt that society acted predominantly by summoning the service of the superego for the repression of the id. The superego was an ally of society and of the ego insofar as it controlled the undesirable aspects of the id. Endocratic surplus of social origin was not seen by Freud as constricting the will of the individual and promoting tyranny. For him sexual repression was the ultimate inhibiting force, and the search for power was not important enough to be considered.

Freud conceived of the ego as that part of the psyche that deals with reality; but he did not see how "reality"—that is, the social environment—may warp the ego. Also because of the Victorianism in which he was brought up, he could not conceive that society itself at times promotes eruption of the primitive id.

Cultural conceptualizations become *cognitive domains* or *assumptions,* which often act unconsciously. Together with people working in other fields (such as sociology, politics, social psychology, economics, and history) the psychoanalyst has an important role in revealing how these cognitive

domains affect the individual and society. Thus psychoanalysis, which was criticized for limiting its sphere of operation to individual therapy of a restricted class of people, acquires a new function: advocacy.[9] Already a host of writers, working in psychoanalysis and related fields, have made outstanding contributions in this area (Coles, Halleck, Keniston, Lifton).

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[1] For the intricate relation between feeling, causality, and motivation see Chapter 2 of reference 7.

[2] See Chapter 5 of reference 7.

[3] For a study of the phenomenology of images and the formations of their derivatives—paleosymbols —see Chapter 5 of reference 7.

[4] Reference 7, especially Chapter 6.

[5] See Chapter 7 of reference 7.

[6] This confusion between identity and similarity reacquires prominence in some psychopathological conditions. It has been studied intensely in schizophrenia by Von Domarus and later by Arieti.

[7] We must warn the reader about a confusion that may result from the two different meanings given to the word “image” in psychological and psychiatric literature. The word “image” is often used, as we did in a previous section of this chapter, in reference to the simple sensory images that tend to reproduce perceptions. This word also refers to those much higher psychological constructs or inner objects that represent whatever is connected with a person; for instance, in this more elaborate sense, the image of the mother would mean a conglomeration of what the child feels and knows about her.

[8] The vaster concept of the self will be more accurately dealt with in a subsequent section of this chapter.

[9] I heard the term “advocacy psychiatry” for the first time in a speech delivered by Robert Lifton to the American Academy of Psychoanalysis in New York City on December 4, 1971