

THE EMERGENCE OF NEW THEMES: A CONTRIBUTION TO THE PSYCHOANALYTIC THEORY OF THERAPY

JOSEPH WEISS, SAN FRANCISCO

This paper attempts to throw new light on a central question in the theory of therapy, that is: How does a patient in analysis become able to bring forth previously warded-off mental contents? My answer will emphasize the predominant role of the ego in this process. The proposition that the ego plays such a role is widely accepted. Kris (1956), for instance, assigned to the ego a central role in the recovery of memories. Yet important implications of this proposition have not been worked out, and certain familiar and accepted explanations in the theory of therapy are inconsistent with it.

The idea that the ego regulates the bringing forth of warded-off mental contents helps to account for the observation that the neurotic patient is not ordinarily overwhelmed by their emergence. The ego ordinarily prevents them from overwhelming the personality. It brings them to the surface only when it is safe to do so.

Certain explanations in the theory of therapy, based directly or by implication on models of the mental apparatus which were developed before ego psychology, explain the coming forth of warded-off contents as depending primarily on their thrust to the surface. These explanations do not make clear how the ego regulates the coming to consciousness of warded-off contents and thus do not make clear why this is not traumatic for the patient.

This paper, by asserting the predominant role of the ego in bringing unconscious contents to consciousness,¹ takes a position in the theory of therapy parallel to 'Inhibitions, Symptoms and Anxiety' (Freud, 1926) in the theory of affects. Freud pointed out in 'Inhibitions, Symptoms and Anxiety' that the normal adult's anxiety ordinarily is not instinctual anxiety, produced by the damming up of instinct, but signal anxiety, produced by the ego. The normal adult may, at times, experience instinctual anxiety, but this is rare and occurs only when his ego is over-

whelmed by the demands of instinct. Similarly, a patient's bringing forth of warded-off contents is ordinarily not the result of the damming up of the contents leading to a breakthrough of the patient's defences. Rather, the warded-off contents are brought forth by the ego. The neurotic patient may at times experience the breakthrough of warded-off contents that have overwhelmed his defences, but this is rare and disruptive of analysis.

The concept of a powerful ego that plays a predominant role in bringing warded-off contents to consciousness implies an ego that is able to control certain of its unconscious defences. For, in order to bring a warded-off content to the surface, the ego must be able to lift the defences that it previously used to keep the content unconscious. A person, of course, is not aware of his unconscious defences and thus cannot be aware of his capacity to control them.

The ego's control of its defences is regulated by certain judgements that it makes unconsciously concerning whether particular impulses are a threat or whether it is safe to experience them. Such judgements may be complex; for, in order to judge whether an impulse is a threat or whether it is safe to experience it, the ego may need to evaluate a number of factors, such as the strength of the impulse, the ego's capacity to control it, and the possible consequences in a particular situation of its being expressed in action.

A special instance of the ego's control of its defences was described by Freud (1926) with reference to repression. He pointed out that whenever the ego judges that a particular impulse may threaten it, it produces an anxiety signal which sets the repression in motion. That the ego's judgement may be unconscious is apparent from the observation that a person may develop signal anxiety without becoming conscious of the impulse that is threatening him.

¹ Consciousness, as used here and in the rest of this paper, is not meant to imply a topographical model. It is used to denote a mental quality.

Corresponding to the ego's capacity to bring about repression when it unconsciously perceives that an impulse is a threat to it is a capacity to lift certain of its defences when it unconsciously perceives that it is safe to do so. This idea is consistent with observations of Sandler (1960) and Sandler & Joffe (1969). Sandler & Joffe have pointed out that it is not enough to speak of signal anxiety; rather, 'we have to include signals of anticipated satisfaction, safety, pain and possibly others'. Furthermore, Sandler & Joffe have shown that whatever an individual becomes conscious of, or whatever he finally does, is regulated by his need to maintain a feeling of safety.

The ego's relationship to the warded-off contents is regulated in part by its striving for mastery over them. In therapy, its primary motive in bringing them to the surface is not to satisfy them but to master them; in Freud's (1937) words: 'to subdue certain uncontrolled parts of the id'. The ego, it would seem, is always ready to exploit an opportunity to master a content that it once had failed to master, so that it brings forth such a content whenever it judges that it is safe to do so.

In order to illustrate how the role of the ego in therapy is insufficiently recognized, I will present a brief critique of two familiar concepts in the theory of therapy: (1) the idea that the frustration in the transference of a warded-off impulse may play a major role in bringing it to the surface, and (2) current ideas concerning how defence analysis works.

1. The frustration theory is based on a pre-ego psychology model, and in fact explains the coming forth of a warded-off content without explicit reference to the ego. To investigate it further, we shall consider a paradigmatic situation in which it is ordinarily applied:

A patient was struggling with an unconscious sexual interest in the analyst. On a number of occasions he unconsciously tried to seduce the analyst, who remained neutral. After one such time the patient stopped being seductive, became conscious of his sexual interest in the analyst, and began to discuss it.

² Whether the patient or the patient's ego should be considered the agent which performs such activities as testing, repressing, perceiving danger, etc., is a semantic problem. Following Freud, one might consider either choice correct. Thus Freud (1926) has written: 'The ego turns away from the disagreeable instinctual impulse . . .' (p. 115), 'If the ego succeeds in protecting itself from a dangerous instinctual impulse . . .' (p. 153), and 'It is hard for the ego to direct its attention to perceptions and ideas which it has up till now made a rule of avoiding . . .' (p. 159).

According to the frustration theory the patient's strong unconscious interest in the analyst found expression in his seductive behaviour. His sexual impulse was frustrated by the analyst's neutrality, so that it became intensified in its thrust to the surface and, because of this, rose to consciousness.

This theory is incorrect in an essential point. It is indeed likely that the patient's sexual interest in the analyst was unconsciously expressed in the transference, was frustrated and hence intensified, and then rose to the surface. The weak point in the explanation is the idea that the intensification of the impulse *caused* it to come forth. This point is inconsistent with ego psychology for the following reason:

When a warded-off impulse becomes intensified relative to the ego, it becomes more of a threat. The ego then is not apt to permit it to come to consciousness, but is apt to strengthen its defences against it and thus keep it unconscious. In circumstances that are unusual in the analysis of a neurotic patient the ego may be unable to keep an intensified impulse from overwhelming its defences and breaking through to the surface. When this occurs the emergence of the impulse is not apt to be useful for therapy but is apt to be traumatic and hence disruptive. The patient, then, is apt to re-repress the impulse as soon as he can or, if he cannot, to retain it in consciousness as part of a symptom or to act it out.

Let us examine this example in terms of our concepts of the ego's role in bringing forth warded-off contents. According to these concepts the patient² wished to bring his homosexual impulse to the surface not primarily to satisfy it but to master it. He wished to bring it forth and *not* satisfy it in his relationship to the analyst. His bringing it to consciousness would be a step to mastering it only if the analyst would not reciprocate the patient's interest. Such reciprocation would threaten the patient's tenuous control over his sexuality and thus prevent him from mastering it. He would be in danger of losing control of it, so that he would be apt to strengthen his defences against the impulse or,

In these examples, and in the examples in this essay, the ego's interests, motives and functions are a part of the patient's. The ego is not pictured as having special activities, interests, motives or functions of its own. To make the ego an agent which has certain interests, motives or functions of the patient is not to reify it or to treat it as a homunculus. In the contexts under consideration, it creates no real ambiguity to use patient or ego interchangeably.

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The patient, then, unconsciously set out to determine whether or not the analyst would be likely to reciprocate his interest. He became seductive in order to test the analyst. His testing was unconscious, for he could not be conscious of it were he to remain unaware of his homosexuality.

The patient's testing of the analyst, who remained neutral, assured him that he could not seduce him. Assured that it would be safe for him to experience his sexual interest, he lifted his defences and permitted it to come forth. He did not allow himself to experience his homosexuality as long as he feared that he might be able to satisfy it. He brought it forth only when he knew that his control of it would not be threatened by the analyst's response.

There are two reasons why the frustration theory has seemed to work and hence has persisted to the present. One is that it may correctly describe what happens when a mental content that is not warded off is frustrated in the transference. The patient may be unaware of such a content because it is not strong enough to attract attention. Then the frustration of the content may intensify it to the point that the patient may notice it. The other reason is that the frustration theory makes a valid connexion between the analyst's neutrality and the coming forth of a warded-off impulse. Indeed, the emergence of the impulse is causally connected to the neutrality. It is not connected, however, because the neutrality frustrates the patient, but because it creates conditions that make it safe for the patient to bring it to consciousness.

2. Current views of defence analysis do not make clear how the successful analysis of a defence may enable the patient to bring forth a mental content previously warded off by the defence. The original model pictured defence analysis as the removal of a barrier, permitting the unconscious impulse to rise to the surface propelled by its own thrust. Since this model does not take account of the ego's regulation of the emergence of the unconscious content, it does

not explain how the patient avoids being overwhelmed by it, nor does it make clear how, after the defence is successfully analysed, the patient is able to regulate the previously warded-off impulse.

The old model, of course, was changed as a result of ego psychology. Today it is generally recognized that analysis does not abolish defences, but modifies them. Though this change has thrown light on the fate of the defences, it has left unanswered a crucial question: just how does the successful analysis of a defence enable a patient to bring forth the content previously warded off by the defence? The old explanation that a barrier is removed has been lost and has not been replaced, for the assumption that the defences are abolished is no longer accepted.

Let me present a theory of how defence analysis works that is based on a recognition of the role of the ego. It will show how defence analysis strengthens the ego in relation to the warded-off content so that it becomes safer for the ego to bring it to the surface.

According to this theory the essential change brought about by the analysis of a defence is a change in the relationship of the defence to the rest of the ego. The unconscious defences, as Freud (1937) pointed out, are 'segregated within the ego' so that they do not necessarily function 'in harmony with the major trends of the ego'. Before analysis the rest of the ego exercises only a crude and unconscious control of its defences. Because of its poor control of them, the ego cannot use the defences to regulate the unconscious contents. The patient is afraid to lift his defences and thereby risk being overwhelmed by a content that he may not be able to control. It would not be safe for him to do so.

In successful analysis, the unconscious defences are first made conscious and then brought under the control of the rest of the ego.³ (This control ordinarily attracts attention only when it is being established; for the most part it functions without attention.) The ego's control of the defence changes it from a segregated structure which

³ That some defences are brought under the control of the rest of the ego during successful analysis is a conclusion that may be derived from (a) the generally accepted idea that unconscious impulses become integrated into the ego during analysis, and (b) the model of the mental apparatus as consisting of a hierarchical arrangement of defences and impulses (Gill, 1963). In such an arrangement the same element may be regarded as a defence from one vantage point, and as an impulse from another. Thus in a hierarchical arrangement of defences and impulses, *A, B, C, B* may be considered an impulse in relation to *A*,

but as a defence in relation to *C*. If, as a result of analysis, *B* comes under the control of the ego, then from the point of view of the relationship *AB*, the ego has acquired control of an impulse, but from the point of view of the relationship *BC*, the ego has acquired control of a defence.

Defences such as repression and undoing, which ordinarily are not conceptualized primarily as impulses, also, as we shall see, come under the control of the ego during a successful analysis.

does not necessarily function in harmony with the rest of the ego to an 'ego-syntonic control mechanism' (Freud, 1937) that is integrated into the rest of the ego (Weiss, 1967). The ego's acquisition of the control mechanism provides it with a capacity to regulate the contents previously warded off by the defence so that it becomes safe to bring them to consciousness.

Though the idea that the ego brings forth unconscious contents when it unconsciously perceives that it is safe to do so has been insufficiently used in certain contexts, it has been implicitly applied in others. One phenomenon that has been viewed in terms of this idea is a person's experiencing in dreams mental contents that he cannot bring to the surface when awake. Freud (1900) explained this phenomenon as a consequence of the greatly diminished possibility of motor behaviour in sleep, which lessens the threat posed by the unconscious contents. It is safe to experience these in sleep because there is no danger of expressing them in action.

Another example accounts in part for the therapeutic effect of interpretation. It explains how interpretation may help a patient to tolerate a previously warded-off content. A patient, as a result of insight, may link the warded-off content with words. The ego can focus attention on word symbols and hence becomes more able to focus attention on the previously warded-off content. Furthermore, the linkage of the mental content with words brings it into associative connexion with other parts of the ego which make use of word symbols. As a result of these changes, the ego acquires more control of the content and hence is better able to tolerate it.

A person, however, does not necessarily require an analytic interpretation, nor insight into his defences, to bring forth an unconscious content. As Brenner (1966) has pointed out, repression is not static, nor are the other defences. Even in everyday life changes in the balance of psychic forces may make it possible for a person to lift his defences and thus to bring previously warded-off contents to the surface. He may do this, for instance, when he hears a joke which, Freud (1905) pointed out, may enable him to overcome the 'inhibition, repression or suppression of a [proscribed] idea'. In every analysis there are numerous occasions when a patient brings forth a warded-off content spontaneously, i.e. not in response to an interpretation by the analyst.

This paper has the purpose of investigating not only the assimilation of insight, but other

less familiar processes by which the ego of a patient may become strengthened relative to a previously warded-off content so that he may safely bring it to the surface. For the sake of exposition, these may be divided into three groups. Thus a patient's ego may be strengthened relative to a previously warded-off content, so that he may bring it to the surface, as the result of (1) a change in the patient's external circumstances, (2) a change in the patient's relationship to the analyst or to some other important person, and (3) an increase in the patient's control of some other previously warded-off content. Each of these groups will be discussed in a separate section of this paper.

I

A sudden change in a person's external situation may result in his bringing forth an affect quite the opposite of what one might expect. For instance, a person, after receiving good news, may become sad and begin to weep or, after finding a secure refuge, begin to feel anxious. The external change may make it safe to bring forth an affect that previously was unconscious. Before the change the person was threatened by the affect so that he warded it off. After the change he is no longer threatened by it, so that he permits it to come forth.

This phenomenon throws light on the relationship of the ego to its defences. It shows that the ego does indeed unconsciously maintain control of certain of its defences and that this control is regulated in part by judgements that it makes concerning external reality. The ego is quickly able to judge that the external change makes it safe to bring forth the warded-off affect, so that it lifts its defences. Its behaviour is governed by its tendency to reduce psychic tension and to master the warded-off contents.

The phenomenon of crying at the happy ending (Weiss, 1952) may serve as a paradigm of such a process. A person who has warded off sadness by repression or by isolation, or merely by suppression, may bring it forth at a happy moment in which the cause of the sadness is removed by an external change.

Certain persons weep at the happy ending of a movie rather than at the sad situation that preceded it. Such persons, for instance, are not moved to tears when the lovers separate but ward them off until the lovers are happily reunited. The grief and the weeping are held back until the source of the sadness is removed. Then it is safe for the ego to lift its defences and permit the sadness to come forth.

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Crying at the happy ending is a common experience in analysis.

A patient, who had been separated from the analyst for seven weeks because of the analyst's vacation, had completely repressed his sadness at the separation. He did not permit himself to experience it until he was half way through his first hour back, and had re-established his sense of having a secure relationship with the analyst.

Many situations in ordinary life are, in their basic structure, similar to the crying at the happy ending phenomenon. Let me cite two: (1) a person who wards off fear of injury in connexion with a dangerous accident may permit himself to experience it when he is again safe and secure, and (2) a person who ordinarily wards off feeling unimportant may experience it when he gains some valued distinction. The support that he gains from his achievement may make it safe for him to bring forth his humility.

II

Our investigation of the crying at the happy ending phenomenon provides us with a useful paradigm for showing how a change in a patient's relationship to the analyst may enable him to bring forth a warded-off content. Just as a change in a person's external situation temporarily may make it safe for him to bring forth an unconscious content, so may a change in a patient's relationship to the analyst.

A patient may come to rely on the analyst to protect him from a threat posed by a warded-off content so that it becomes safe for him to lift his defences and to bring it to the surface. He may come to use the analyst to protect him from various threats: from guilt, from loss of control or from the impairment of certain ego functions such as memory, or the capacity to think clearly. He may come to use the analyst as an autonomous auxiliary ego (Loewenstein, 1954, 1956, 1963). He may be able to do so for some functions from the beginning, for others only after testing the analyst.

A patient used an unconscious defence, a dream-like state of mind, to fend off sadomasochistic fantasies. This dream-like state threatened his memory and his sense of orientation, so that he warded it off by secondary defences. He did not permit himself to experience it until, after testing the analyst's memory, he became assured that he could rely on the analyst to remember for him so that he could risk being forgetful and hence risk permitting himself to experience his altered state of consciousness.

This sort of process occurs often and in every analysis. Let me cite another example:

A patient was threatened by the confusion that resulted from his obsessive compulsive thinking. He warded it off, for he feared that it would impair his functioning and confuse others. He ordinarily appeared particularly clear and deliberate in his speech and thought. He did not permit himself to experience his confusion until, as a result of testing the analyst, the patient became assured that he could not confuse him. The patient became less afraid of his confused functioning as he came to assume that he could rely on the analyst to think for him should he become confused, so that it became safe for him to feel his confusion.

III

We have considered two groups of processes in which a change of some sort temporarily may make it more safe for a person to bring forth a warded-off content. In the first group, the change is in a person's external circumstances. In the second the change is in a patient's relationship to his analyst. Table 1 summarizes certain of the relations in each group, and Table 2 gives a specific example of each of these groups.

TABLE 1

Group	Change	May make it safer for patient to experience a warded-off
I	External circumstances	Mental content
II	Relationship to analyst	Mental content

TABLE 2

Group	Change	May make it safer for patient to experience his warded-off
I	External change brings sudden happiness	Sadness
II	Patient's coming to rely on analyst's memory	Dream-like state

We shall now study a more complex group of processes which is analogous to the others. In this group a patient makes an internal structural change; he gains control of a previously warded-off content (*A*). This change, which (unlike those described in groups I and II) may be long-lasting or even permanent, may make it safer for him to bring forth another warded-off content (*B*). The connexion between the change and the emergence of a warded-off content for this group (group III) may be summarized as in Table 3.

TABLE 3

Group	Change	May make it safer for patient to experience a warded-off
III	Patient's gaining control of previously warded-off content (A)	Mental content (B)

Let me illustrate this sort of process with an example that has been chosen because of its relationship to the 'crying at the happy ending' phenomenon:

A professional man had sought success in his career unconsciously to win his mother's approval. Though he became successful he was not able to feel contented, for he believed that his success was at the expense of his younger brother. Analysis of the patient's guilt over his contentment enabled him to bring this feeling to the surface. He began to enjoy his mother's pride in him. This enabled him to face his sadness at the birth of his brother, and to remember feeling replaced by his brother in his mother's affection.

Let us summarize this example as in Table 4, along with a summary of the 'crying at the happy ending' phenomenon. Table 4 makes

TABLE 4

Group	Change	May make it safer for patient to experience his warded-off
I	Change in patient's external circumstances may temporarily bring him sudden happiness	Sadness
III	Patient's analysis of his guilt over contentment enables him to keep his contentment in consciousness. Change may be long-lasting or even permanent	Sadness

clear the relationship between certain of the processes in groups I and III. In the example from group I a change in the person's external circumstances permitted him to be happy, and hence enabled him temporarily to bring forth his warded-off sadness. In the example from group III, the patient's overcoming an internal prohibition against feeling happy brought him a more permanent capacity to feel happy, and thus a more permanent capacity to experience sadness.

Let me present another example of a process that belongs in group III:

A patient, by means of insight into his previously unconscious stubbornness, gained control of it so that he became able to be stubborn at will and also, of course, able to permit fantasies of stubbornness to rise to the surface. This patient, after gaining control of his stubbornness (A), found it safe to experience not only fantasies of stubbornness but also fantasies of homosexual submission (B). He became able to tolerate such fantasies once he had acquired a reliable means of regulating his frightening tendency to submit—by becoming stubborn.

Let me tabulate this example, as in Table 5.

TABLE 5

Change	May make it safer for patient to experience warded-off
Patient's gaining control of unconscious stubbornness (A), so that he may bring it to the surface	Fantasies of homosexual submission (B)

The concept that a patient's gaining control of one previously warded-off content (A) may enable him to bring forth another warded-off content (B) helps us to understand the continuity of the therapeutic process in terms of the progressive strengthening and reorganization of the ego; and to understand the sequence in which new themes emerge to consciousness during analysis. Thus as a patient, by means of insight, gains control of a previously warded-off content (A), he may feel it safe to bring forth another warded-off content (B). The work of analysis may help him to bring (B) under the control of his ego so that he may bring (C) to the surface, etc.

A special instance of the processes in which the ego's acquisition of control over one warded-off content (A) may make it safer for a patient to bring forth another (B) has already been discussed. It is defence analysis. As has been pointed out, the successful analysis of a defence brings it under the control of the rest of the ego and thus makes the ego strong enough safely to bring forth the content previously warded off by the defence. This concept of defence analysis may be put in tabular form as in Table 6.

TABLE 6

Change	May make it safer for patient to experience
Patient's becoming aware of and gaining control over a previously unconscious defence (A)	Content (B) previously ward off by defence (A)

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Thus the example⁴ presented above, which shows how the patient's gaining control of his stubbornness enabled him to experience his homosexuality, is an example of defence analysis. The patient's unconscious stubbornness served him as a defence against fantasies of homosexual submission. The successful analysis of the patient's stubbornness brought this defence under the control of the patient's ego, and thus changed it into an ego-syntonic control mechanism that he could use to regulate his homosexuality. His capacity to regulate his homosexual fantasies enabled him to bring them to consciousness.

Let me present another example of defence analysis:

A patient used undoing (along with isolation) to ward off strong affects. The essence of the unconscious undoing defence was a shifting from one idea to another. When an idea (thought, plan, opinion or activity) gave rise to a threatening affect the patient would develop a new idea connected with a different affect which he experienced as magically undoing the previous one. Should the new affect become a threat he would shift to still another idea connected with still another affect.

The patient could not control his shifting. Though he was at times exasperated with the obsessive ruminations that resulted from his unconscious undoing, he could not stop them.

The analysis of the undoing defence helped the patient to become aware of it and to bring it under his control, so that he could shift more deliberately or avoid shifting. He then began to experience strong affects that he previously could not have tolerated. He could tolerate affects connected with a particular idea once he could turn to another idea at will.

This example may be summarized as in Table 7.

TABLE 7

Change	May make it safer for patient to bring forth
Patient's becoming conscious of undoing defence (A) and gaining control of it	Powerful affects (B) previously warded off by undoing (A)

⁴ This example summarizes a careful study of the integration of stubbornness and its relation to the emergence of homosexuality. The study covered several years in the analysis of an obsessive compulsive patient and was carried out as part of our research. The next example, concerning the integration of undoing and its relation to the emergence of strong affects, was taken from the same research, a report of which will appear in the *Archives of General Psychiatry*. These examples, and the others in this paper, are highly condensed descriptions of processes

The discussion which follows concerns transference analysis and makes use of the ideas we have developed in Sections II and III.

A patient who is governed by an unconscious transference cannot control his relationship to the analyst, for a transference, like a defence, is by definition unconscious, so that it functions beyond the control of the ego.⁵ For instance, a patient with an unconscious rivalry with the analyst based on a father transference may fight the analyst when he does not wish to and be unable to fight when he does.

Furthermore, a patient who is governed by an unconscious transference has a specific loss of memory, for a transference in one of its aspects is a defence against remembering. The transference of an impulse from a primary object to the analyst prevents the patient from bringing forth threatening memories connected with the primary object. The patient repeats rather than remembers.

Thus a patient whose behaviour is regulated by an unconscious transference is impaired in two ways: (1) he cannot control his relationship to the analyst, and (2) he cannot remember. Analysis may help him to overcome each of these impairments *pari passu*. As a patient gains greater control of his relationship to the analyst he may become more able to remember; as he remembers more he may gain greater control of his relationship to the analyst.

As a patient gains control of his relationship to the analyst he may become able to use this relationship to gain the strength to bring the warded-off memories to consciousness.

The analysis of a patient's unconscious submission to the analyst helped the patient become stronger in his relationship to him. This change made it more safe for him to bring forth memories of his humiliating submission to his father.

As a patient brings forth memories of his relationship to his parents he may become more able to distinguish the analyst from his parents, so that it becomes safer for him to experience and ultimately gain control of his feelings about the analyst.

that were studied in detail.

⁵ The successful analysis of a transference, like the successful analysis of a defence, brings it under the control of the ego. Just as a defence or an impulse is modified by this process, so is a transference. It ceases to be a source of resistance. In fact, since it is by definition unconscious, it ceases to exist as such. However, the old structure that was the transference does not disappear after it has become integrated into the ego, but becomes part of the patient's object relations.

A patient's remembering his incestuous fantasies about his mother helped him to distinguish the analyst from his mother, and thus made it safer for him to experience his love for the analyst.

The following example shows how a patient may acquire insight into his transferring and his remembering together as part of one process:

The analysis of a patient's unconscious love for the analyst helped him to gain control of it. As he became more able to maintain it and to recreate with the analyst some of the happiness he once had experienced with his father, he began to bring up memories of his love for his father. As he did so he became sad at the thought that he could no longer love his father as he had in his childhood. The patient's happiness with the analyst made it safer for him to recognize his sense of loss (an instance of 'crying at the happy ending') and hence safer to remember the love that he had lost. As he remembered his love for his father, he began to recognize that his love for the analyst was based on a father transference.

SUMMARY

The role of the ego in bringing warded-off contents to the surface is underestimated in certain explanations in the theory of therapy which are based on pre-ego psychology models of therapy. The observation that the neurotic patient is not ordinarily overwhelmed by the coming forth of a warded-off content shows that the ego regulates this process, bringing the content forth only when it is safe to do so. This concept implies an ego that unconsciously exercises control over certain of its defences.

An example of an unsatisfactory explanation, which underestimates the role of the ego, is the idea that the frustration in the transference of a warded-off content may play a major role in bringing it to consciousness.

This paper investigates three groups of processes by which the ego of a patient may become strengthened relative to a previously warded-off content so that he may safely bring it to the surface.

In the first group the patient's ego is strengthened relative to a previously warded-off content by a change in his external circumstances. This process is illustrated by the phenomenon of 'crying at the happy ending'.

In the second group the patient's ego is strengthened relative to a previously warded-off content by a change in his relationship to the analyst. The patient, by coming to use the analyst as an autonomous auxiliary ego, may temporarily gain the strength to bring an unconscious content to consciousness.

In the third group the patient's ego is strengthened relative to a previously warded-off content by an increase in the patient's control of some other previously warded-off content. Defence analysis is a special instance of this. Defence analysis may help a patient gain control of an unconscious defence and thereby change it to a control mechanism that he may use to regulate the warded-off content, so that he may safely bring it to consciousness.

A patient whose behaviour is regulated by an unconscious transference is impaired in two ways: (1) he cannot control his relationship to the analyst, and (2) he cannot remember. Analysis may help him to overcome each of these impairments *pari passu*. The patient's acquisition of control over his relationship to the analyst makes it safer for him to remember, and his remembering helps him to acquire control over his relationship to the analyst.

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