

Frieda Fromm-Reichmann

On Her Contribution to Psychoanalytic and Psychiatric Theory

With a Note on Erich Fromm's Estimate of
Her Work in the U.S.A.

Klaus Hoffmann and Norman Elrod

Institute for Psychoanalysis
Zürich-Kreuzlingen

A psychoanalyst who might be asked to give very briefly the essential principles of psychoanalysis could say that the recognition of the significance of childhood history for personality development, the teachings of transference ... the paramount significance of anxiety for the dynamic understanding of human personality ... and resistance, and, above all, the establishment of the unconscious as an integral part of the human mind constitute the essence of psychoanalysis (Frieda Fromm-Reichmann, 1954, p. 105).

There was a time when psychotherapists argued about the way schizophrenic patients were to be treated; which theory of therapy seemed to be most reflective of the patient's innerpsychic and social reality, which the best suited for effective therapy in the patient's interest? A number of psychotherapists considered Fromm-Reichmann's approach both in theory and action frequently appropriate to the nature of the disturbance being treated. Others, like Herbert Rosenfeld (1952), argued that Fromm-Reichmann had modified classical psychoanalytic theory and action too much, thus losing certain fundamental values inherent in psychoanalysis (p. 73). Rosenfeld thought psychotic patients can be

16.09.97/Althea/Fromm-h

Endfassung



treated with what he understood to be the classical psychoanalytic method; as he defined it this method of treatment concentrates on the interpretation of the positive and negative transference (p. 74; 1965b, p. 9). For him this issue, transference interpretations, is basic (pp. 9-10). It would seem that he considered concern for countertransference themes of secondary importance, these being caused by difficulties psychotherapists have in dealing with the analysis of transferences made by schizophrenic patients (1952, p. 76). As we know, Fromm-Reichmann did not hold this view (Fromm-Reichmann, 1952, p. 91).

But then critical colleagues of Fromm-Reichmann always seemed to find certain points of agreement between them. Rosenfeld (1952, p. 75), for example, also usually treated his schizophrenic patient in a sitting position, seeing the acute schizophrenic patient at least six times a week and frequently for longer than the usual 50-minute session, indeed, when necessary for up to 90 minutes (cf. Fromm-Reichmann, 1948, pp. 170-171).

Nowadays things are different. Apparently all psychotherapists now agree that transference *and* countertransference matters are of the utmost importance and that interpretation of the one or the other is necessary if the therapy is blocked or threatened in its existence.

But if we who do psychotherapy with psychotic patients seem to agree on a number of basic matters, this does not mean that we should overlook what Fromm-Reichmann argued. She refused, for example, to allow a split between classical and new psychoanalysis. From the classical point of view it is

impossible for the psychoanalyst to establish a workable doctor-patient relationship with ... [the patient]. Those who promoted this line of reasoning, thereby opposing attempts to treat schizophrenics psychoanalytically, were guilty of overlooking Freud's statement in which he expressed the hope for future modifications of psychoanalytic techniques which would make it possible to do intensive psychoanalytically oriented psychotherapy with schizophrenics (Fromm-Reichmann, 1952, p. 89).

Fromm-Reichmann realized that she had to stress this point. Various psychoanalysts differed in their definitions of "the genetic frame of



reference in which interpretation is done and about the patients' selection of content matter for repression and dissociation" (Fromm-Reichmann, 1950, p. 83). She thought this selection takes place in accordance with the existing cultural standards in which the patient finds himself or herself. All agreed, of course, that Sigmund Freud was right in stressing "the fundamental significance of the developmental history in infancy and childhood", but her other teacher, Harry Stack Sullivan, frequently differed with Freud when it came to interpreting "the events and emotional experiences of the patient's early history". Fromm-Reichmann found herself challenged to integrate the two viewpoints, the psychosexual concepts of Freud with "the interpersonal interpretations of H. S. Sullivan" (p. 83). Basic to both was the critical, historical approach in the treatment of patients and in one's thinking about the theory which goes with the action. As Fromm-Reichmann along with several colleagues once wrote:

We follow the basic premise of psychoanalytic theory -- that in the transference relationship with the therapist the patient will repeat the patterns of behavior which he has developed with significant figures earlier in his life. By studying the transference, we can make inferences about earlier experiences; conversely, by understanding the patient historically, we can make inferences about the transference relationship" (Fromm-Reichmann, Mabel Blake Cohen, Grace Baker, Robert A. Cohen and Edith V. Weigert, 1954, pp. 227-228; cf. Fromm-Reichmann, 1955, pp. 307-308; 1956 [lecture presented in 1949], pp. 29, 37-38).

Fromm-Reichmann disagreed with certain points stressed by Paul Federn. She was well-informed as to how he had treated schizophrenic patients, in the words of Eugene Brody (1952):

Federn especially advocated extreme caution in analyzing or interpreting transference manifestations for fear of losing the positive relationship. He emphasized that the experience of a good transference is the chief normal reality to the psychotic in treatment but felt also that optimum results could be obtained only if the psychotic had a helper who served as a sort of harbor



for him when his transference to the psychotherapist became uncertain. In view of the psychotic's tendency to confuse his homo- and heterosexual feelings, Federn felt that this helper should be a woman (p. 48).

Federn was thinking, of course, of Gertrud Schwing, who, as Kurt Eissler (1952) put it: "Like a medieval saint, she released the schizophrenics from their strait jackets, and patients who had just been howling immediately quieted down when she turned toward them" (p. 165). Brody (1952) remembered in the 1950s:

The unconscious of the therapist, she [Schwing] felt, must approach the longing of the patient's unconscious to establish contact with the outside world and must be hopeful that such contact will lead to success. A prime prerequisite for this is motherliness -- the unselfish wish to give oneself to the patient -- which may be achieved by a man as well as by a woman. This kind of involvement of therapist and patient is that of mother and child, but without its possessive, narcissistic elements (p. 49).

Fromm-Reichmann questioned this approach as reported by Brody:

[She] felt that so much caution, permissiveness and care as is embodied in this approach may address itself too much to the rejected child in the schizophrenic and too little to the grown-up individual before regressing, and that this may be detrimental to the progress of therapy (p. 49).

In other words, she questioned the validity of Paul Federn's statement: "When we treat a schizophrenic, we treat several children of different ages" (Fromm-Reichmann, 1948, p. 172).

Fromm-Reichmann considered the person she treated an adult with a schizoid personality who was having a great deal of trouble with himself or herself and others as well, not to mention the trouble he or she might be making for other people (Fromm-Reichmann, 1952, p. 102). What was needed was not the transformation of the premorbid schizoid personality to another personality type. She wrote in 1948:



The therapist should feel that his role in treating schizophrenics is accomplished if these people are able to find for themselves, without injury to their neighbors, their own sources of satisfaction and security, irrespective of the approval of their neighbors, of their families, and of public opinion (p. 175).

What we have here is theoretically of supreme significance! It is a fundamental questioning of our views on health and disease: "Schizophrenia, in this sense, is not an illness but a specific state of personality with its own ways of living" (p. 175). Fromm-Reichmann made these remarks about twenty years prior to what was put forward in Italy and England by proponents of anti-psychiatry regarding mental health and mental illness and had them published in *Psychiatry: Journal of the Biology and Pathology of Interpersonal Relations*.

But let us return to Fromm-Reichmann's criticism of Paul Federn's views on the treatment of schizophrenia.

Fromm-Reichmann stated quite explicitly that she did not agree with Paul Federn's fostering of positive transference and then not analyzing it. It was obvious to her that transference interpretations could bring about clarity in the patient's life situation. She thought only "those elements which are an expression of the real, positive interrelatedness between patient and analyst need not be touched by the psychotherapist" (p. 166). We think she meant the "Tragung", as Ludwig Binswanger and the one of us, Norman Elrod (1961), understood it, when she wrote "the real, positive interrelatedness between patient and analyst".

Paul Federn took Fromm-Reichmann's criticism seriously. In fact, she convinced him that many of her points were better related to work with schizophrenic patients than his. Indeed, Federn (1943) set down in writing during the Second World War that "Fromm-Reichmann's technique is the best psychoanalytical method so used up to the present time" (p. 157).

Also Schwing's (1940) major concern seems to have been for an adequate approach to the disturbed psyche therapeutically and theoretically, regardless of who the initiator of the action was. She not only held Paul Federn in high regard; she also respected István Hollós and his psychoanalytic work with the mentally ill (p. 8). Schwing simply wanted to state explicitly that she thought feeling and instinct were



important terms in the psychoanalytic treatment and care of psychically disturbed persons (pp. 7-8). After she ended her hospital work in Vienna in 1937/1938 (p. 9), she collected her impressions and ideas in a manuscript, in which she clearly appears as one who does not consider herself the center of the schizophrenic patient's world. She sees herself in an institution populated by many very mentally disturbed patients whom she as an analyzed motherly person cares for and prepares for psychoanalytic treatment and family care. She calls this institution a "motherhouse", a "home" run in close collaboration with the psychoanalyst who conducts the psychotherapy and with simple healthy families (pp. 118-119).

Since Schwing did not flee to the United States in the face of Adolf Hitler's attempt to conquer the world and apparently returned from Vienna to Zurich, where she then permanently resided, it is possible that Fromm-Reichmann was relatively well-informed about how Schwing set about interacting with schizophrenic patients but relatively poorly informed about Schwing's psychiatric and psychoanalytic views. In any case, Fromm-Reichmann made her criticism and we suspect she sensed correctly that Schwing tended to make "too much out of a good thing". If bread alone is not enough then too much motherliness can result in affective, instinctual control of the patient which discourages psychic development instead of furthering it.

Fromm-Reichmann also opposed John Rosen who interpreted first and foremost the contents of the psychotic's speech (Fromm-Reichmann, 1948, pp. 168-169). She turned first to the dynamics of the interaction and the anxiety experienced within it by the patient. She (1952) wrote:

modern trends in the intensive psychoanalytically oriented treatment of mental disturbances have been to put the investigation of the unknown and the known genetic and dynamic causes of a patient's anxieties into the center of psychotherapeutic endeavor. His ways of expressing anxiety and of warding it off by his symptomatology at large are scrutinized, and among them especially his security operations with, his defenses against the psychiatrist, who undertakes to bring the patient's anxieties to the fore. Through the scrutiny of a patient's security operations with the psychiatrist, his defenses



against the other people of his present and previous environment can also be spotted (p. 101).

Rosen might suddenly bring to an end a psychotic condition by direct interpretations, but this did not mean, Fromm-Reichmann thought, he resolved the conflicts causing the psychotic crisis. The improvement could be a result of massive suggestion on the therapist's part (p. 100). We psychotherapists must be aware, Fromm-Reichmann thought, of our symbolic importance to the patient. We are not just Dr. Jones or Dr. Smith. "The direct *utilization of the authoritative power of the therapist* which is involved ... was mentioned by [Eugen] Bleuler in the management of schizophrenic patients, by [A.] Myerson who discussed the significance of reward and punishment in the total push program, and has been commented on, although not systematically used, by many others" (Brody, 1952, p. 55).

Fromm-Reichmann's recognition of the importance of what the psychotherapist might mean for the patient, much of which might have very little to do with everyday life, contributed to her thinking that it would be best to separate the work of the psychotherapist from that of the administrator, a theory of therapy which has not stood up against the developments in psychiatry since the 1960s. At present psychotherapists in psychiatric institutions are very much involved in the everyday life of their patients. Fromm-Reichmann, who died in 1957, did not live to see this development. We think she would have made the best of it, since she was not dogmatic and did not fear confronting reality.

*

So much for Frieda Fromm-Reichmann and our estimate of her contribution to psychoanalytic and psychiatric theory! Since this is a conference dealing with Erich Fromm's life and work, you might also like to know what he wrote about this woman's activities in psychiatry and psychoanalysis, after all, he was once her patient and husband. Fromm-Reichmann for her part referred in her writings to Fromm all in all about 13 times, 11 times in the Bullard (1959b, p. 343) Author Index and twice



in the work she herself assembled (Fromm-Reichmann, 1950, p. 240). She referred at least three times to Fromm's (1939) essay on "Selfishness and Self-Love" and agreed more than once with Fromm and Sullivan that mature love is "the state of interpersonal relatedness in which one is as concerned with the growth, maturation, welfare, and happiness of the beloved person as one is with one's own" (Fromm-Reichmann, 1950, p. 34).

Using Rainer Funk's Author Index as a guide, we can inform you of the following: Erich, to put it briefly, wrote very little about his ex-wife's ideas and position in psychoanalysis. According to Funk's (1981, p. 101) count, Erich mentioned Frieda six times in the nine volumes of his collected works. What is surprising to us is the finding that Erich (1973, p. 321; cf. p. 78) leads the reader to believe Frieda was a follower of Adolf Meyer, although she herself (1950, p. v) wrote that her four teachers were Sigmund Freud, Kurt Goldstein, Georg Groddeck and Harry Stack Sullivan. Of course, in two instances Erich (1955, p. 14; 1970, p. 53) explicitly stated that Frieda was and/or remained a psychoanalyst. She did, indeed, he thought, as an independent thinking psychoanalyst, make significant contributions to psychoanalytic theory and therapy. But what these contributions were he failed to state. Certainly his (1941, p. 325) mention of psychotic retreat from a threatening world and the inflation of the ego along with deflation of social reality -- something Frieda wrote about -- was not anything original. Also the fact that she became more and more interested in the dynamics of interpersonal relationships during the course of her psychotherapeutic work with schizophrenic patients cannot be considered as a new path in psychoanalysis. If Frieda threw overboard Freud's libido theory and his concepts of Ego, Id and Super-Ego, as Erich (1973, p. 78) implies in one work, we might ask ourselves if she learned more about dyadic relationships without these terms than with them. Erich does not help us here, leaving the matter where it was. And we question his statement. We have heard that Frieda adhered to many of Freud's theories and applied them pragmatically as the case in question demanded (cf. Fromm-Reichmann, 1941, p. 50). It seems to us the following statement by Fromm-Reichmann (1949), though it verifies to some extent Fromm's implication, reveals the caution she showed in discussing psychoanalytic theory: "modern developmental psychoanalytic theory is characterized by



the maintenance of the paramount significance of the total developmental history and by the negation of its classical psychosexual interpretation" (p. 92; cf. 1955, p. 315). Or, as she wrote five years later:

the differentiation between the sexual conceptions of childhood development by classical analysts and the interpersonal theory of dynamic psychiatrists is, in part, one of definition rather than one of actual conceptualization (Fromm-Reichmann, 1954, p. 106).

Although Erich helped Frieda obtain her post at Chestnut Lodge in 1935 and stood by her in various ways, it appears her thoughts on psychoanalysis, psychiatry, human science and the ways of the world did not really impress him. Once in the United States, it would seem Erich Fromm was freed from any obligation to think along the lines of Frieda Fromm-Reichmann.

*

Since we wrote the above we have learned that Fromm in his training seminars in Mexico City, which commenced around 1950, very frequently referred to Fromm-Reichmann as a psychoanalyst whom he thought had many good ideas regarding the technique of the treatment of mentally disturbed and frequently mentally disturbing persons. He also emphasized Fromm-Reichmann's theoretical reflections on psychotherapy. Sonia Gojman of Mexico City reported at a meeting of the International Erich Fromm Society in Ascona, Switzerland, in early April 1997 that when she was a student of Fromm she first read works on psychoanalysis written by him and Fromm-Reichmann before she became familiar with mainstream psychoanalytic writings. In other words, it seems to us that Fromm did not on the whole take Fromm-Reichmann's ideas and therapeutic methods very seriously in his written works. In his clinical activities, however, as a professor of psychiatry, he relied noticeably on Fromm-Reichmann's contributions to the theory and



technique of psychoanalytic psychotherapy, at least during the time Gojman was in training with him.

Our last finding in this matter is the following: *The Art of Listening* (Fromm, 1994) contains "information about Fromm the therapist and his way of dealing with the psychological sufferings of people of our time" (Funk, 1994, p. 9). The content of the book consists of "English-language transcripts of recordings of lectures, interviews and seminars" (p. 9). The remarks recorded in the book were made in 1963 and 1964 and between 1974 and 1980. From the titles of the two parts of the book it is clear that Fromm is speaking here about the theory and technique of the psychoanalytic treatment. The two titles are: "Factors Leading to Patient's Change in Analytic Treatment" and "Therapeutic Aspects of Psychoanalysis". And now to the finding: Frieda Fromm-Reichmann's name does not appear at all in the Index, whereas Sigmund Freud is registered 28 times, Harry Stack Sullivan five times and Ronald Lang twice. So we seem to be back to where we started before having heard what Sonia Gojman reported. Who knows what might turn up in the future regarding this subject?



References

- Brody, Eugene B. (1952), The Treatment of Schizophrenia: A Review. In: Brody and Redlich (1952, pp. 39-88).
- _____ and Redlich, Fredrick, Editors (1952), *Psychotherapy With Schizophrenics*. New York: International Universities Press, 1954.
- Bullard, Dexter M., Editor (1959a), *Psychoanalysis and Psychotherapy. Selected Papers of Frieda Fromm-Reichmann*. Chicago: The University of Chicago Press.
- _____ (1959b), Author Index. In: Bullard (1959a, pp. 343-345).
- Eisenbud, Jule (1946), Discussion of "The Treatment of Schizophrenic Psychosis by Direct Analytic Therapy". In: Rosen (1953, pp. 83-86).
- Eissler, Kurt R. (1952), Remarks on the Psychoanalysis of Psychosis. In: Brody and Redlich (1952, pp. 130-167).
- Elrod, Norman (1961), On the Basis of the Relationship Between the Patient and the Therapist in the Schizophrenic Situation: a Clarification of Binswanger's Term "Tragung". In: *Proceedings of the Third World Congress of Psychiatry, 4-10 June 1961, Montreal*. Montreal/Toronto: McGill University Press/University of Toronto Press, 1961, pp. 301-304. Revised and reprinted in German: "Zur Grundlage der Beziehung zwischen dem Patienten und dem Therapeuten in der schizophrenen Situation". *Psychoanalyse im Rahmen der Demokratischen Psychiatrie in sechs Bänden, Band II*, edited by the Institute for analytical Psychotherapy. Zurich: Althea Verlag, 1987, pp. 264-280.
- Federn, Paul (1943), Psychoanalysis of Psychosis. In: Paul Federn (1952, pp. 117-165).
- _____ (1952), *Ego Psychology and the Psychoses*, edited by Edoardo Weiss. New York: Basic Books.
- Fromm, Erich (1939), Selfishness and Self-Love. *Psychiatry*, 2:507-523.
- _____ (1941), Die Furcht vor der Freiheit, translated from English into German by Liselotte and Ernst Mickel. In: Fromm, Band I (1989, pp. 215-392).
- _____ (1955), Die psychoanalytische Theorie. In: Fromm, VIII (1989, pp. 5-20).
- _____ (1970), Die Krise der Psychoanalyse. In: Fromm, VIII (1989, pp. 47-70).
- _____ (1973), *Anatomie der menschlichen Destruktivität*, translated from English into German by Liselotte and Ernst Mickel and revised by Renate Oetker-Funk. In: Fromm, VII (1989).
- _____ (1989), *Gesamtausgabe in 10 Bänden*, edited by Rainer Funk. Munich: Deutscher Taschenbuch Verlag.
- _____ (1994), *The Art of Listening*. New York: Continuum.
- Fromm-Reichmann, Frieda (1941), Recent Advances in Psychoanalytic Therapy. In: Bullard (1959a, pp. 49-54).



- _____ (1948), Notes on the Development of Treatment of Schizophrenics by Psychoanalytic Psychotherapy. In: Bullard (1959a, pp. 160-175).
- _____ (1949), Recent Advances in Psychoanalysis. In: Bullard (1959a, pp. 88-99).
- _____ (1950), *Principles of Intensive Psychotherapy*. Chicago: The University of Chicago Press.
- _____ (1952), Some Aspects of Psychoanalytic Psychotherapy With Schizophrenics. In: Brody and Redlich (1952, pp. 89-111).
- _____ (1954), Psychoanalytic and General Dynamic Conceptions of Theory and of Therapy: Differences and Similarities. In: Bullard (1959a, pp. 105-113).
- _____ (1955), Psychiatric Aspects of Anxiety. In: Bullard (1959a, pp. 306-321).
- _____ (1956), Notes on the History and Philosophy of Psychotherapy. In: Bullard (1959a, pp. 25-46).
- _____, Cohen, Mabel Blake, Baker, Grace, Cohen, Robert A. and Weigert, Edith V. (1954), An Intensive Study of Twelve Cases of Manic-Depressive Psychosis. In: Bullard (1959a, pp. 227-274).
- Funk, Rainer (1981), Gesamtregister. In: Fromm, Band X (1989, S. 1-356).
- _____ (1994), Editor's Foreword to *The Art of Listening* by Erich Fromm, translated from the German by Lance W. Garmer. New York: Continuum.
- Rosen, John N. (1953), *Direct Analysis. Selected Papers*. New York: Grune & Stratton.
- Rosenfeld, Herbert (1952), Bemerkungen zur Psychoanalyse des Über-Ich-Konfliktes bei einem akut schizophrenen Patienten. In: Rosenfeld (1965a, S. 72-119).
- _____ (1965a), *Zur Psychoanalyse psychotischer Zustände*, translated from English into German Charlotte Kahleyss-Neumann. Frankfurt am Main: Suhrkamp Verlag, 1989.
- _____ (1965b), Einleitung. In: Rosenfeld (1965a, S. 7-10).
- Schwing, Gertrud (1940), *Ein Weg zur Seele des Geisteskranken*. Zürich: Rascher Verlag.

